



February 17, 2020

Troyen A. Brennan, MD  
EVP & Chief Medical Officer  
CVSHealth  
One CVS Drive  
Woonsocket, RI 02895

Dear Dr. Brennan:

The American Academy of Family Physicians (AAFP) appreciates the longstanding, collaborative relationships we have had with CVS and now CVSHealth. We have admired and publicly lauded your organization's commitment to the improvement of health and health care and, specifically, your bold stance on eliminating tobacco from your stores. Our organizations' shared focus on improving health and promoting healthier lifestyles is highly valued by the AAFP and our members.

Our organizations have been actively engaged in conversations regarding the role of CVS MinuteClinics in the health care delivery system for several years. More recently, we have expanded our conversations to include the CVS HealthHUBs and CVSHealth – Aetna.

As you know, the AAFP aspires to achieve the "triple aim" in health care of delivering better care, better patient experience, and an affordable cost to patients. We believe that primary care is a key element in achieving this aim and know that your organization shares that view.

As we have often discussed, the true value of primary care is derived from the 4 C's – first contact, comprehensive, continuity and coordination. For that reason, we have shared with you our concerns with the episodic nature of the MinuteClinic model, which emphasizes first contact but falls short on providing the comprehensive, continuous and coordinated care that has been resoundingly demonstrated to achieve the best patient outcomes overall. In response, you have assured the AAFP, and thus family physicians across the nation, that you view both MinuteClinics and HealthHUBs as supplemental providers designed to collaborate with the primary care physicians practicing in the community. You also have stressed your commitment to connecting patients seen in your clinics with a primary care physician in their community if they do not already have one.

We have valued that you and your team have drawn a distinction between providing primary care services, on the one hand, and providing comprehensive and continuous primary care on the other, and that you have not positioned MinuteClinics or HealthHUBS as true alternatives to a longitudinal relationship with a primary care physician. Accordingly, the AAFP has encouraged

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our members to view MinuteClinics and HealthHUBs as an important and useful resource for our members and their patients, extending physicians' ability to provide effective, patient-centered care to their population.

We were therefore dismayed to learn of comments made by Larry Merlo, CEO of CVSHealth at the recent JP Morgan Healthcare Conference, summarized in a [report](#) from Healthcare Dive:

*"Though Merlo has denied in the past any interest in providing direct primary care, the MinuteClinics in the HealthHUBs can address roughly 80% of what a primary care physician can treat, leading some analysts to speculate CVS could be headed in that direction."*

Fierce Healthcare [reported](#) on the same panel, also noting that Mr. Merlo had positioned CVS MinuteClinics and HealthHUBs as alternatives to, not collaborators with, primary care physicians in delivering needed care to patients:

*"Merlo said on a panel at the annual J.P. Morgan Healthcare Conference in San Francisco on Tuesday that the model is designed with the goal of meeting patients where they live, as CVS operates nearly 10,000 pharmacies across the country, and offering a one-stop-shop for their care needs. MinuteClinics, for example, are staffed by a nurse practitioner who can treat about 80% of what a primary care office can, and CVS brings physicians into the fold through virtual visits."*

We are concerned that this apparent fundamental shift in your strategic vision for MinuteClinics and HealthHUBs will undercut the 4 C's of primary care and in turn will undermine the health of all populations, especially the most vulnerable patients and those with one or more chronic conditions.

Our concern was heightened within the past several weeks, when CVSHealth – Aetna announced its intention to reduce or eliminate patient cost-sharing for Aetna customers, but only for those who visit CVS MinuteClinics and HealthHUBs. This change in policy was [reported](#) in Forbes:

*"CVS is rolling out new health plans this year that feature "zero" and "low copayments" for Aetna members who use CVS HealthHubs and the drugstore services."*

We applaud your efforts to make access to care more readily available to patients and strongly support your decision to reduce or eliminate cost-sharing requirements as a means of incentivizing greater engagement with primary care. However, we are alarmed that your "steering" of health care consumers into the narrow set of services at MinuteClinics and HealthHUBs, rather than to a primary care environment where they can receive comprehensive, continuous and coordinated care, may be detrimental to their health outcomes, particularly for those patients experiencing chronic conditions, co-morbidity, or complex medical issues where continuity of care is especially effective and needed.

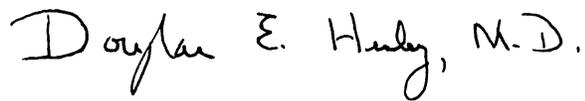
This newly announced policy, in its current form, would incentivize and reward consumers who seek episodic care at a CVS retail outlet (even at the expense of their health) while creating a tangible financial barrier that would disparately burden those patients who wish to receive their

primary care from their family physician or another physician in the community. It is imperative that you expand your no or low cost-sharing policy so that it encourages *all* Aetna patients to obtain appropriate primary care for their needs, when and where they need it, and not just those who seek care at a CVS retail outlet.

Again, we continue to value our strong collaborative relationship with CVSHealth, and we are committed to ensuring that this relationship continues. However, the AAFP cannot support a business model that undercuts the 4 C's of primary care and consequently disadvantages patient health.

We have stood by CVS Health in the past and hope to do so in the future as we continue pursuing our collective work to improve the health and well-being of all Americans. Please contact me directly or Shawn Martin, AAFP Senior Vice President at [smartin@aafp.org](mailto:smartin@aafp.org) if you would like to arrange a meeting to discuss the contents of this letter or any other topics.

Sincerely,

A handwritten signature in black ink that reads "Douglas E. Henley, M.D." The signature is written in a cursive, flowing style.

Douglas E. Henley, MD  
Executive Vice President/CEO