

May 9, 2017

Stephen C. Taylor Commissioner, DC Department of Insurance, Securities and Banking 810 First Street, NE, Suite 701, Washington, DC 20002

Dear Commissioner Taylor:

The District of Columbia Primary Care Association (DCPCA) works to create healthier communities through advocacy and the development of a high quality, equitable, integrated health care system that gives every DC resident a fair shot at a full and healthy life. What follows is DCPCA's response to the Department of Insurance, Securities and Banking (DISB) April 19, 2017 request for public comment on the proposed consent order for Group Hospitalization and Medical Services Inc. (GHMSI). We thank you for your leadership in moving this important issue forward.

DCPCA acknowledges the important role CareFirst has played in supporting high quality care and innovation in the primary health care system. Their investments in community health centers, and in DCPCA itself, have laid a strong foundation for better health for District residents who seek safety net care. We are grateful for that commitment, and our recommendations for any surplus build on that important work.

DCPCA recommends that any plan to invest the CareFirst Surplus identified by the DC Department of Insurance, Securities, and Banking include the following:

- 1. Engage community voices in setting public health priorities that eliminate disparities and increase health equity
- 2. Ensure spend-down of the excess surplus in addition to GHMSI's traditional community reinvestment commitments.
- 3. Utilize available community health needs assessments to invest in evidence-based and protocol-driven interventions
- 4. Connect clinical care and social services to address social determinants of health

DCPCA believes the District can champion these principles with an integrated approach that supports connections between the clinical and social services patients need, supported with technology that provides real time information and communication for providers. To address health disparities and improve community health outcomes, community health center providers are proactively planning service delivery transformation to move from a fee-for-service visit-based model of care to one promoting health outcomes and value. The foundation of this work is health care transformation that brings together patients, payers, providers, and purchasers to align private and public sector change efforts. These change efforts strive to achieve the "Triple Aim" – better care, better health, model we have identified strives to create better care for individuals, better health for the population, and lower costs through improvement.

Thank you for your consideration.

John Mathewson

Interim President and CEO

DC Primary Care Association