



**Title:** Independent, Solo, and Small Group Equity in Value-Based Payments

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1 **WHEREAS**, the number of independent, solo, and small group family medicine practices is rapidly dwindling, and  
2 overhead costs and equitable payment are cited as part of that decline, and

3 **WHEREAS**, independent, solo, and small group family medicine practices were, and are, held to the same standards  
4 as large, employed groups for transitioning to and maintaining Patient Centered Medical Home (PCMH) designation,  
5 and

6 **WHEREAS**, many large, employed, corporate-owned medical groups have significant financial and personnel  
7 resources to pursue PCMH and quality incentives, and

8 **WHEREAS**, independent, solo, and small group family medicine practices must use their own resources and  
9 personnel to maintain PCMH standards in order to gain from value-based payment and quality incentives, now,  
10 therefore, be it

11 **RESOLVED**, that Michigan Academy of Family Physicians investigate the differential in cost and resources endured  
12 by independent, solo, and small group family medicine practices vs. employed corporate entities used to gain value-  
13 based incentive payments; and be it further

14 **RESOLVED**, that Michigan Academy of Family Physicians work with insurance companies to ensure that  
15 independent, solo, and small group family medicine practices are treated equitably with regard to cost and resources  
16 to maintain Patient Centered Medical Home standards and ability to gain value-based incentive payments; and be it  
17 further

18 **RESOLVED**, that Michigan Academy of Family Physicians seek American Academy of Family Physicians' assistance  
19 and support in ensuring equitable value-based incentive payments for independent, solo, and small group family  
20 medicine practices with regard to cost and resources compared to large employed groups.