

Patient-Centered Primary Care Collaborative: Transforming Practices

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The Challenge

- “During 2003–04, there were, on average, 161,200 office-based medical practices in the United States involving 311,200 physicians”
 - Estimate of total office visits: **908 million**
- “Solo physician practitioners, who constituted 69.2 percent of all practices but 35.8 percent of all physicians, had 36.8 percent of all office-based visits”
 - Interpretation: **334 million** visits in small offices



Hing E, Burt C: Office-based Medical Practices: Methods & Estimates
From the National Ambulatory Medical Care Summary
Advance Data from Vital and Health Statistics, Number 383; March 12, 2007

Many Small Practices...

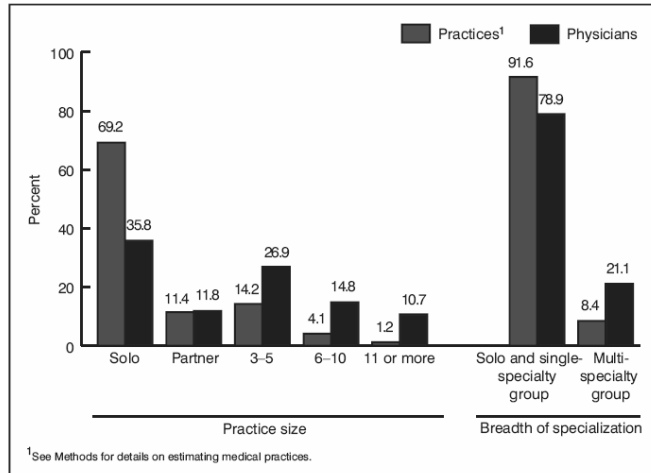
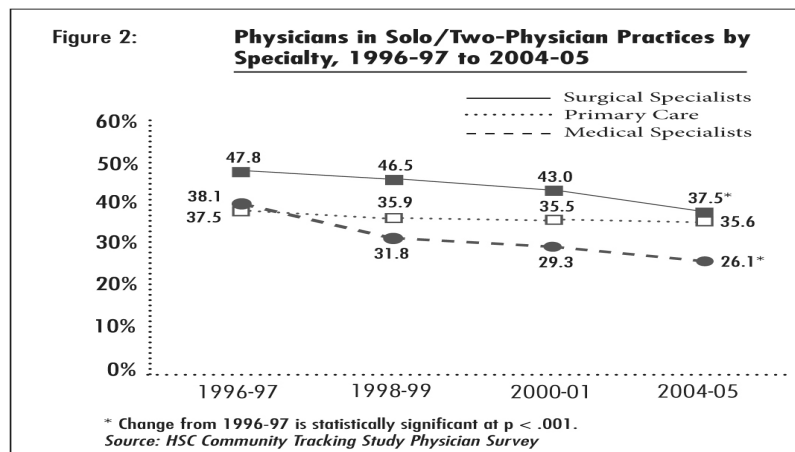


Figure 1. Percent distributions of office-based medical practices and physicians within practices by size and breadth of specialization: United States, 2003-04



That Are Not Going Away (Primary Care)...



Allison Liebhaber and Joy M. Grossman, Physicians Moving to Mid-Sized, Single-Specialty Practices, Tracking Report No. 18, Center for Studying Health System Change, Washington, D.C. (August 2007).

Which are Small American Businesses...

Physicians Who are Full/Part Owners, by Specialty, 1998-97 to 2004-05

	1996-97	1998-99	2000-01	2004-05
All Physicians	61.6%	56.7%	55.9%	54.4%*
Primary Care	54.3	49.6	50.1	51.8
Medical Specialists	58.1	51.8	51.7	47.3*
Surgical Specialists	75.5	72.7	71.2	68.4*

*Change from 1996-1997 is statistically significant at $p < .001$.
Source: HCS Community Tracking Study Physician Survey



Allison Liebhaber and Joy M. Grossman, Physicians Moving to Mid-Sized, Single-Specialty Practices, Tracking Report No. 18, Center for Studying Health System Change, Washington, D.C. (August 2007).

That are Slow to Adopt Technology...

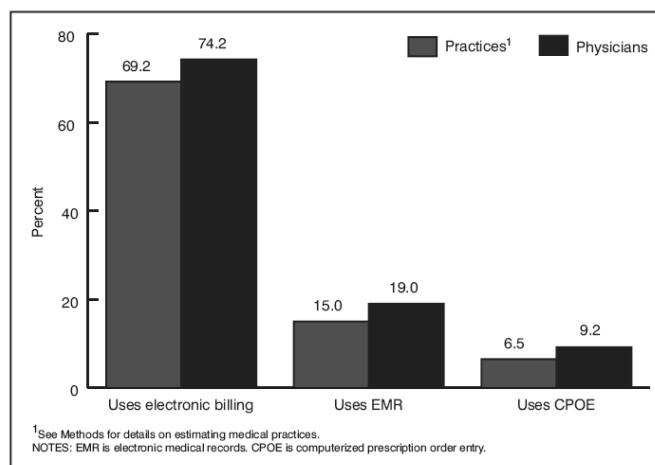
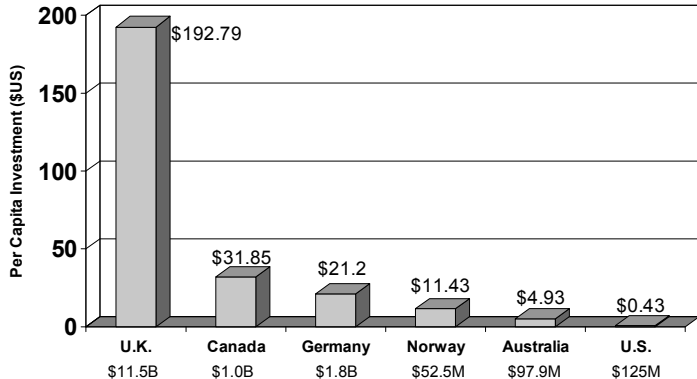


Figure 2. Percent of office-based medical practices and physicians using computerized administrative and clinical support systems: United States, 2003-04



Perhaps Due to Underinvestment...

Total Investment in HIT Per Capita



Anderson GF, Frogner BK, Johns RA, Reinhardt UE: Health Care Spending and Use Of Information Technology in OECD Countries. Health Affairs 25, no. 3 (2006): 819-831

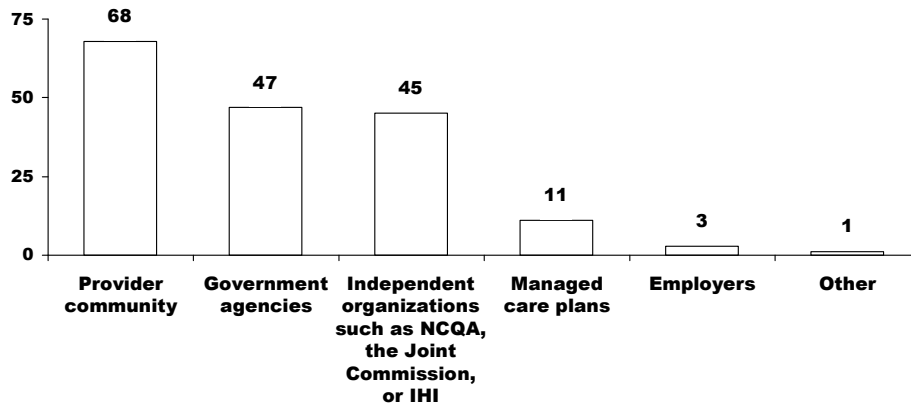
...But are Still Held Accountable for Change



Health Care Opinion Leaders: Views on Responsibility for Improving Quality and Safety of Health Care

“Who should be primarily responsible for improving the quality and safety of care delivered in the United States?”

Percent responding . . .



Note: Bars do not sum to 100% because survey respondents were asked to choose two options.

Source: Commonwealth Fund Health Care Opinion Leaders Survey, July 2007.

Practice Support: Overcoming Barriers





www.acponline.org/cfpi



Grant funds provided by the non-profit
Physicians' Foundation for Health Systems Excellence
www.physiciansfoundation.org

Center for Practice Innovation



Overview of Selected Practices

- 34 practices
- Average size: 1.79 physicians
- Staffing ratio approximately 2 support staff/physician
- Most general internal medicine; some subspecialists
- 30% with an EMR
- Almost 50% of practices are “family-run” businesses
- 41% have at least one staff working in practice more than 8 years



Project Outline

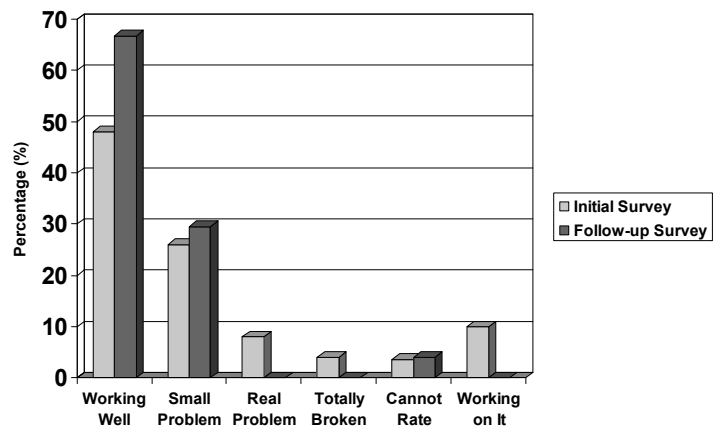
- Initial visit (Spring/Summer 2006)
 - “Fly-on-the-wall” perspective
 - Clinical chart review
 - Workshop with physicians and key staff to review observations
- Development of work plan
 - Clinical improvements
 - Workflow improvement strategies
 - Financial assessment
- Implementation of work plan/reporting
 - Conference calls
 - Email exchanges
- Follow-up visit to re-assess (Spring/Summer 2007)
- CME and credit for Part IV of Maintenance of Certification



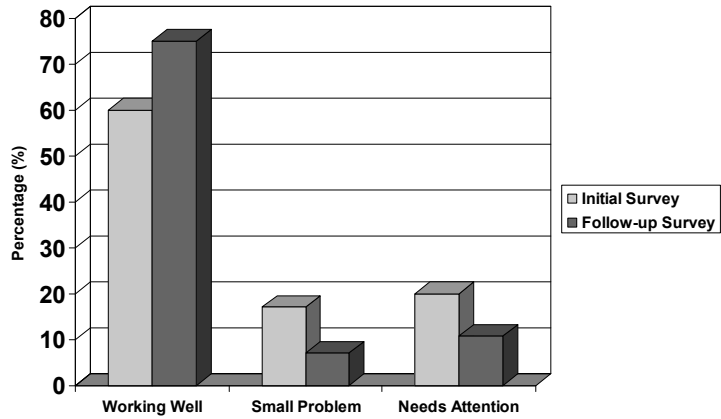
Preliminary Data Analysis on Selected Metrics (Data Collection Recently Completed)



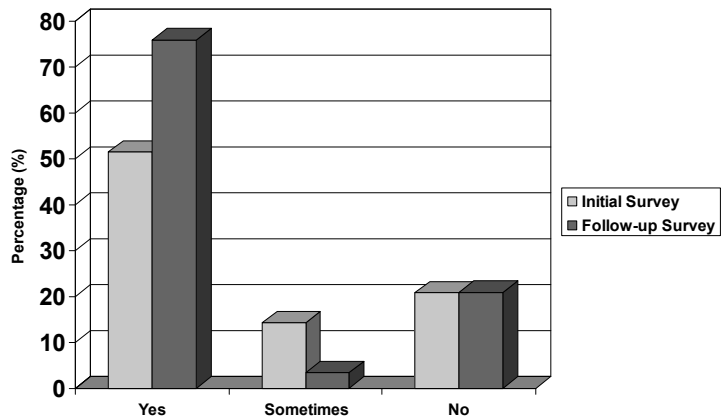
Self-Rating of Education Processes for Patients & Families



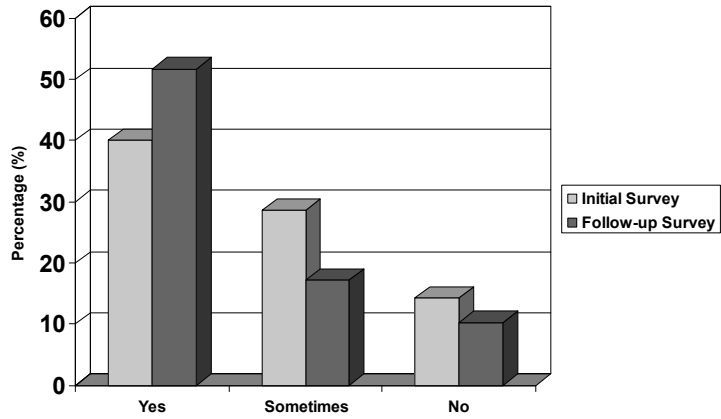
Patient Education (Reviewer Ratings)



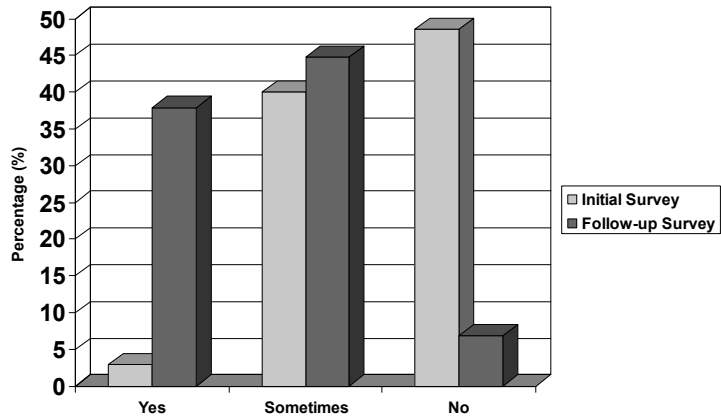
Two Identifiers in Records (Reviewer Rating)



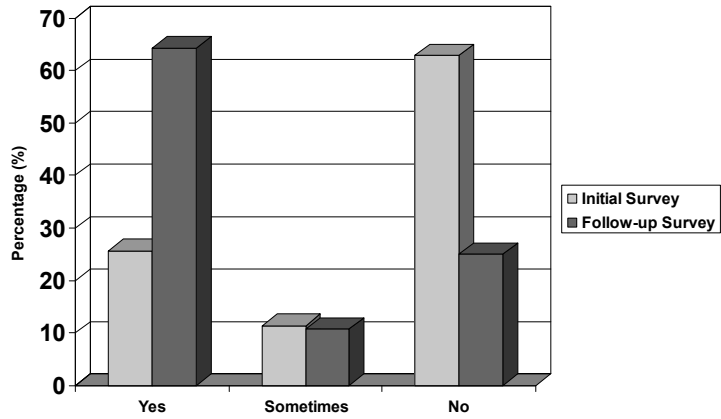
Quality Control Testing (Reviewer Rating)



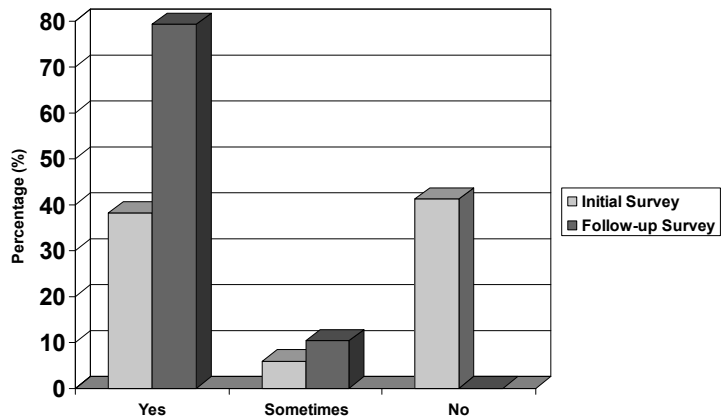
Sample Medication Management (Reviewer Rating)



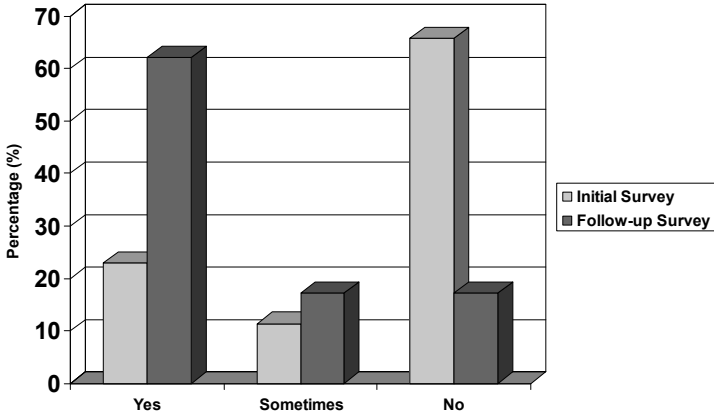
Sharps Containers Appropriately Secured (Reviewer Rating)



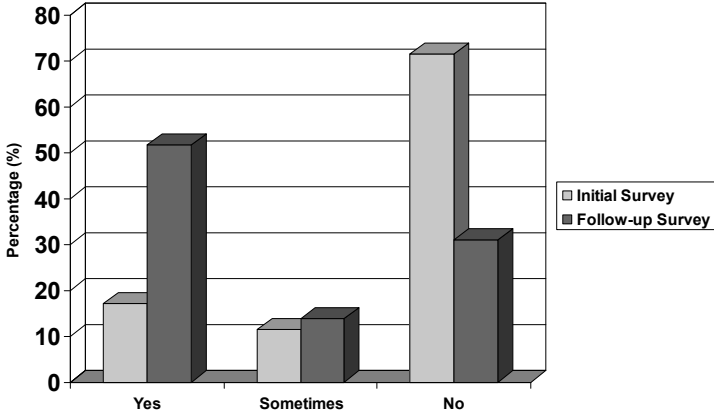
Hazardous Waste Stored Appropriately (Reviewer Rating)



Appropriate Medication & Vaccine Storage (Reviewer Rating)

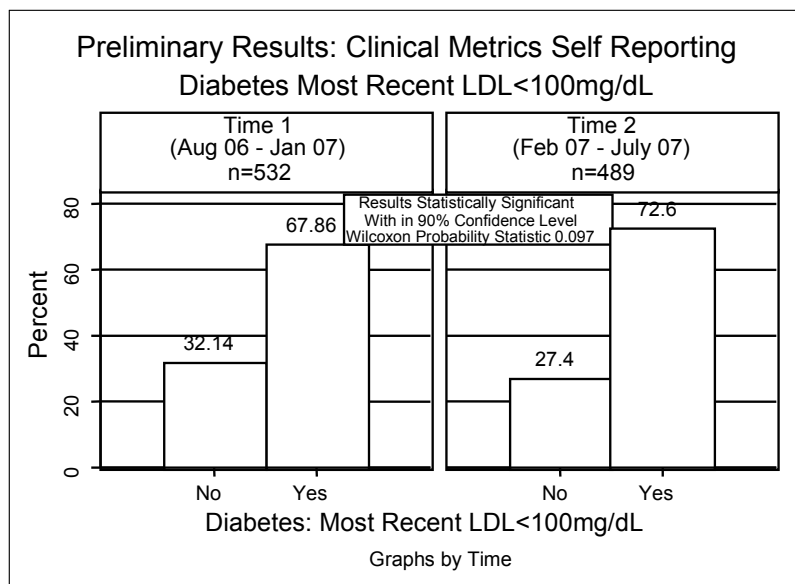


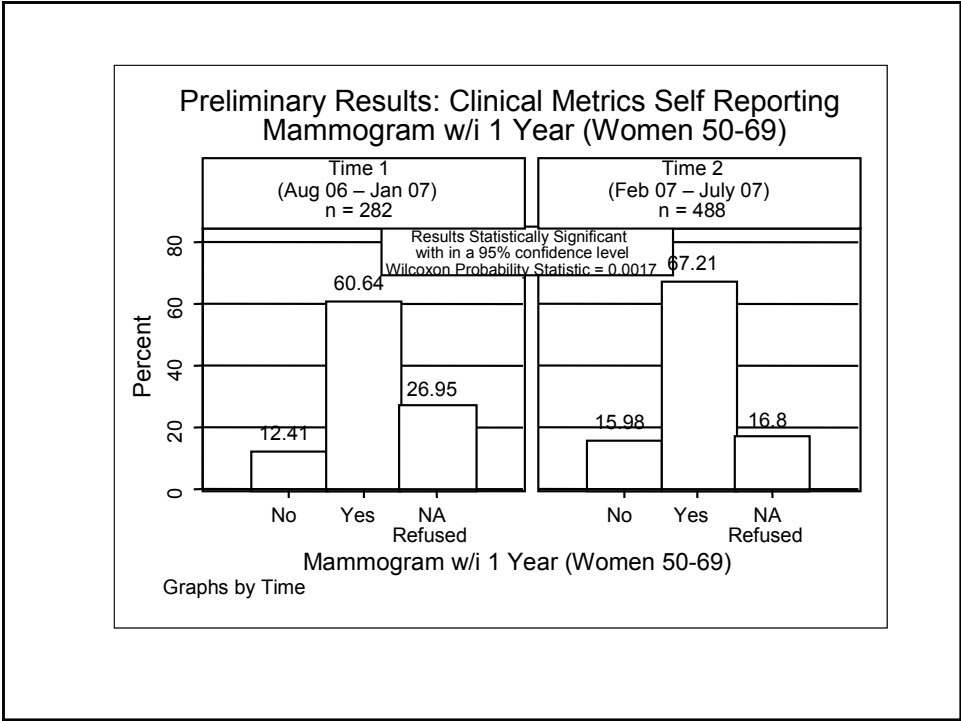
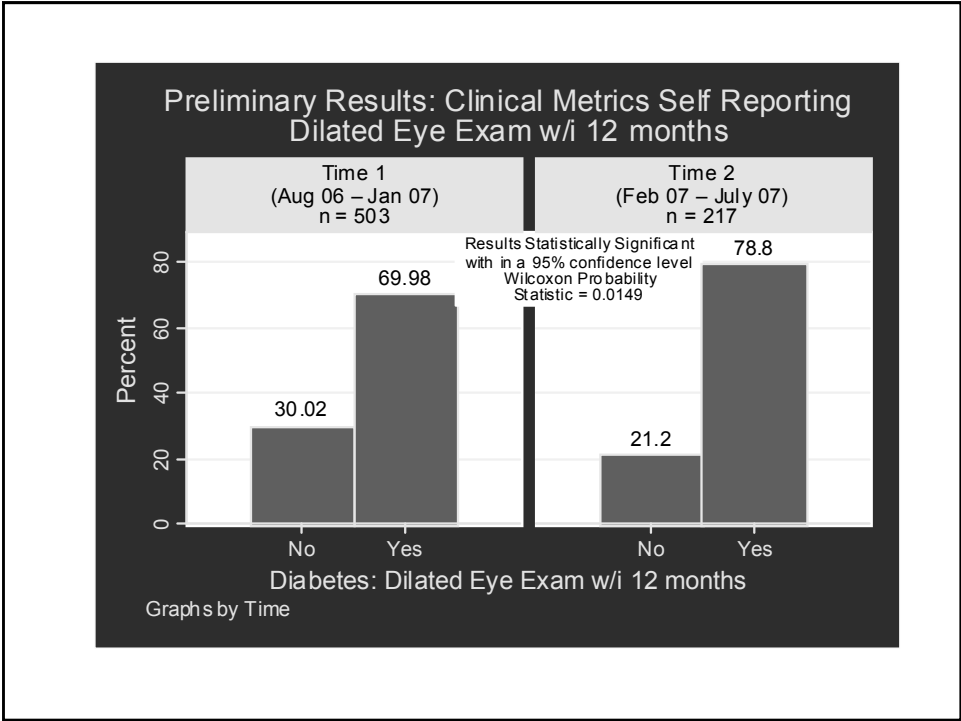
Temperature Log for Refrigerators (Reviewer Rating)



Sample of Data Collected
 An Example of Some of the Clinical Data Collected through Scannable Forms

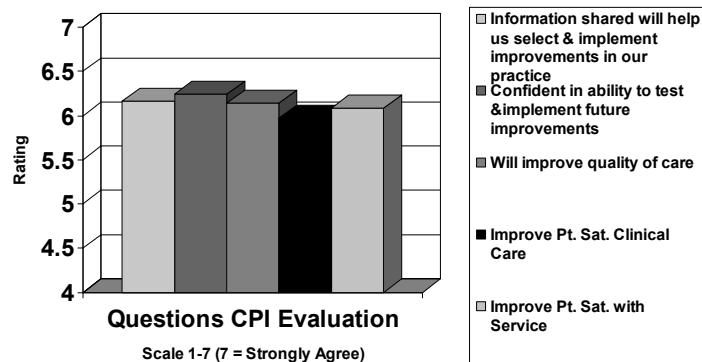
Table of Data Collected to Date Via Self Reporting Forms		
	Total # of Forms Received for measure	# of Practices Submitting Data
Diabetes Hemoglobin A1c<9%	1,298	20
Diabetes Most Recent LDL <100mg/dL	1,125	19
Diabetes Most Recent BP <140 & < 80	1,023	17
Diabetes Dilated Eye Exam w/i 12 months	787	17
CHF (LVEF<40%) Patient on ACE-I or ARB	153	15





CPI Evaluation

Selected Survey Results (n=37)



Comments on CPI Project from Participants: What was the most valuable aspect of the CPI?

- Learning relatively simple and inexpensive ways to improve efficiency and compliance in the office.
- Being part of the cohort; since I operate in a black box w/o feedback it was great to have external "audit" and learn what other practices are doing.
- ...the blogs... and the visit from Dr Barr and Team.
- The sense that our suffering is not unique. We are all struggling to stay afloat. The first site visit was illuminating. We had no idea we were deficient in so many areas. Most practices set themselves up, start working, and don't sweat the small stuff like refrigerator notices. The survey results helped us move forward with re-design of the telephone system.



Conclusions

- Many Americans receive care in small ambulatory practices
- Small offices *can* deliver the promise of the PCMH
 - Decision-making is not complicated by bureaucracy
 - Many already provide elements of the PCMH
 - They respond like other small businesses
- Collaborative support is essential
 - Professional societies
 - Payers
 - Employers
 - Other stakeholders (hospitals, QIOs, DM companies, technology vendors...)
- Implementation of the PCMH model will stimulate new models of partnership

