

2011 Physicians' Daily Life Report

Prepared for the Robert Wood Johnson Foundation

November 15, 2011

Presented by: David Goldstein, Research Manager

Jaclyn Holmes, Project Researcher

Table of Contents

Methodology	3
Report Notes	5
Detailed Findings	7
Patient Profile	8
Impact of Social Needs	14
Current State of Practice	28
General Attitudes on Healthcare	36
Government and Policy Impact	46
Urbanicity: Patient Profile	56
Urbanicity: Impact of Social Needs	61
Urbanicity: Current State of Practice	72
Urbanicity: General Attitudes on Healthcare	84
Urbanicity: Government and Policy Impact	93
Demographics	101



Methodology

- Harris Interactive®, on behalf of the Robert Wood Johnson Foundation, conducted the Physicians survey online within the United States between September 16 and October 13, 2011 among 1,000 physicians, comprised of 690 primary care physicians and 310 pediatricians.
- The sample source was the American Medical Association Masterfile. Sample was pulled randomly to meet specific criteria, such as specialty, region, age and gender. Invitation letters were mailed with a password protected link, so that each link could only be used once. A reminder was also sent about a week into interviewing. Because the sample is based on those who agreed to be invited to participate, no estimates of theoretical sampling error can be calculated. The participation rate for this survey was 5 percent; 1,000 physicians completed the survey out of 20,000 invited to participate.
- In order to be representative of primary care physicians and pediatricians, results were weighted as needed for region, age and gender. The targets were based off demographic information in the American Medical Association Masterfile.

Methodology (cont'd.)

• All sample surveys and polls, whether or not they use probability sampling, are subject to multiple sources of error which are most often not possible to quantify or estimate, including sampling error, coverage error, error associated with nonresponse, error associated with question wording and response options, and post-survey weighting and adjustments. Therefore, Harris Interactive avoids the words "margin of error" as they are misleading. All that can be calculated are different possible sampling errors with different probabilities for pure, unweighted, random samples with 100% response rates. These are only theoretical because no published polls come close to this ideal.

Report Notes

- Patient demographics were reported by the respondents.
- The following terms are used throughout the report and defined as follows:
 - "Total" = The combined total of Primary Care Physicians (PCPs) and Pediatricians
 - "Urban" = Physicians who describe the community in which their patients live as urban (Q805).
 - "Suburban" = Physicians who describe the community in which their patients live as suburban (Q805).
 - "Rural" = Physicians who describe the community in which their patients live as rural (Q805).
 - "Low-income" = Physicians who report that at least 50% of their patients belong to a household with an annual income of less than \$50,000.
 - "Higher-income"=Physicians who report that at least 50% of their patients belong to a household with an annual income of greater than \$50,000.
- Thus, the phrase "low-income urban physicians" refers to physicians who
 report most of their patients live in an urban community and that at least
 50% of their patients belong to a household with less than \$50,000 in annual
 income.



Report Notes (cont'd.)

- Significant differences among physicians who work in urban/suburban/rural (urbanicity) communities are noted by uppercase letters.
 - When an uppercase "A" appears next to a percentage in a chart or call-out box, it indicates that percentage is significantly higher than the percentage of the subgroup (Urban) corresponding to that letter.
- Responses may not add up to 100% due to weighting, computer rounding or the acceptance of multiple responses.
- An asterisk (*) represents a value of less than 1% but greater than 0% and a dash (-) represents a value of 0%.

Detailed Findings



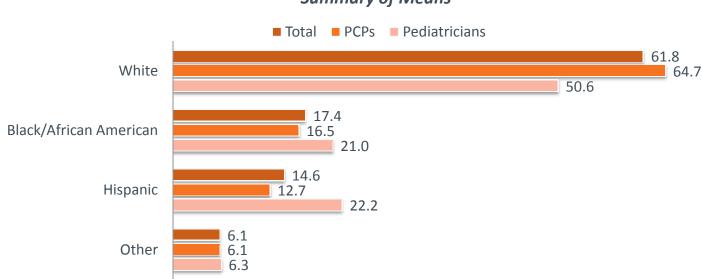
Patient Profile



Physicians report that, on average, three-fifths of their patients are White and roughly one-third are either Black/African **American or Hispanic.**







BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)

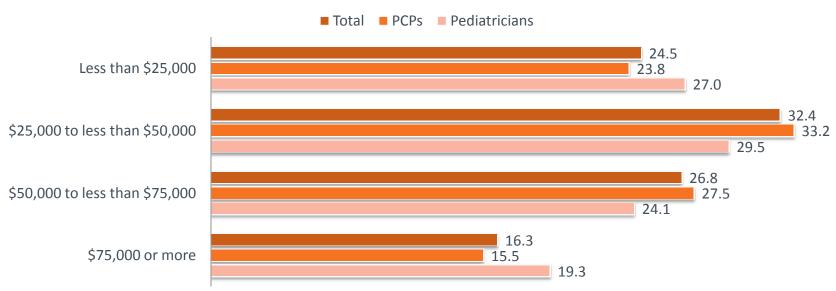
Q810 About what percentage of your patients fall into the following racial or ethnic categories?



Approximately one-quarter of patients, on average, earn a household income less than \$25,000 and nearly one-third earn between \$25,000 and \$50,000.

Patients Population

Household Income **Summary of Means**



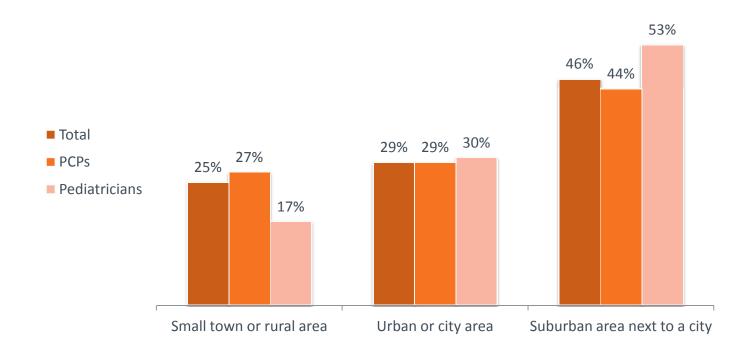
BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)

Q815 About what percentage of your patients fall into the following yearly household income categories?



Nearly half of physicians say their patients live in a suburban community.

Patient Community

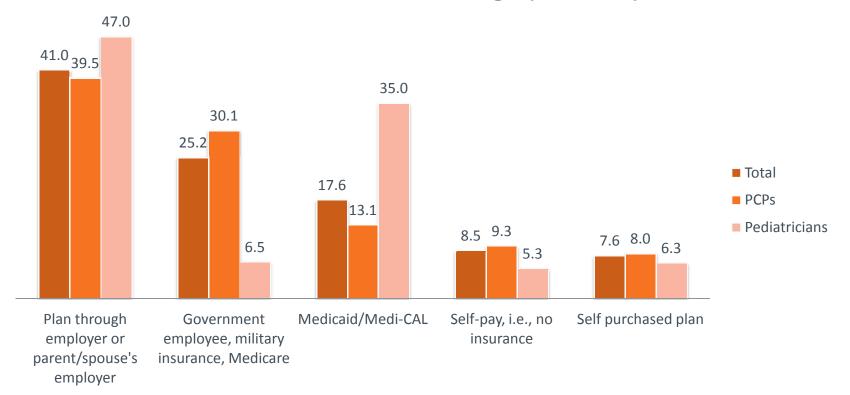


BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310) **Q805** Which of the following best described the community in which most of your patients live?



According to physicians, on average, the majority of their patients have access to some type of health insurance. However, they report that nearly one in ten do not have insurance.

Health Insurance Coverage (Mean %)



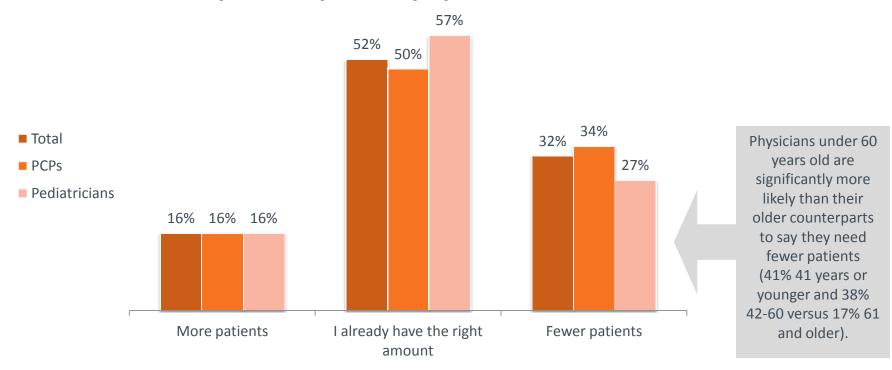
BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)

Q800 Please estimate the percentage of your patients who have each of the following as their main source of health insurance coverage.



About one-third of physicians say they need to have fewer patients to do their job to the best of their ability. This is largely driven by physicians 60 years and younger— roughly two in five report needing fewer patients.

Optimum patient population size



BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)
Physician Age Sub-group 41 Years or Younger (n=318); 42-60 (n=541); 61 Years or Older (n=141)

Q705 In order to do your job to the best of your ability and meet all your patients' health needs, do you feel you need to have fewer patients, more patients, or do you already have the right number of patients?

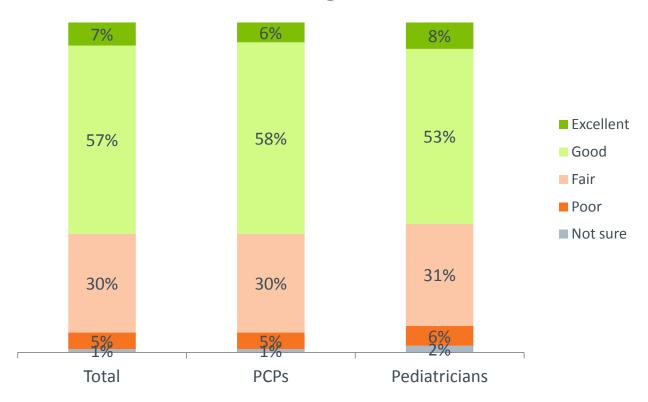


Impact of Social Needs



While the majority of physicians describe the general living standards of their patients as good or excellent, a notable number believe it to only be fair or poor.

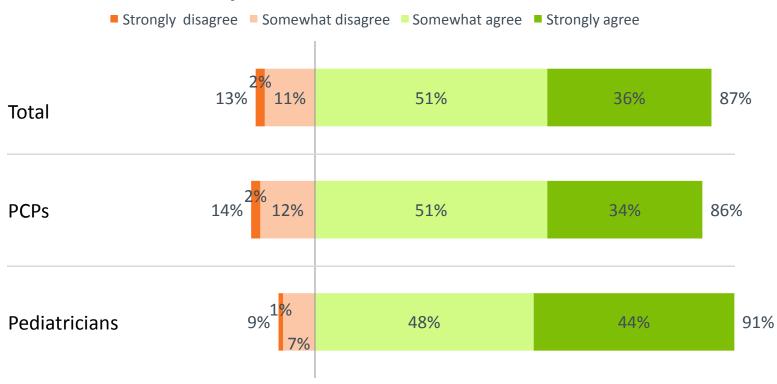
Patients' Living Standards



harris

The vast majority of physicians agree that the problems created by unmet social needs are universal.

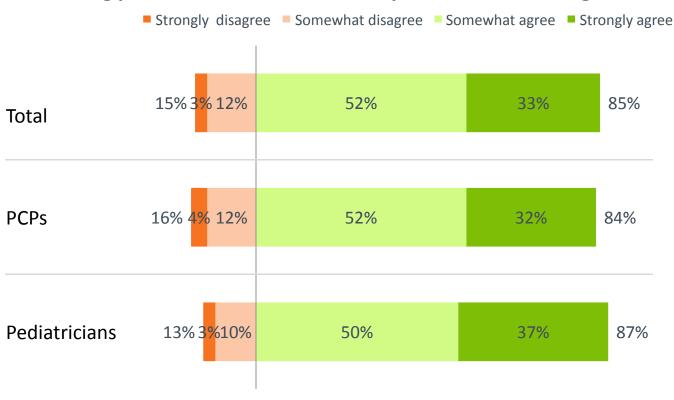
The problems created by unmet social needs are problems for everyone, not only those in low-income communities.





It is not enough to solely address medical needs. Over four in five physicians agree that addressing patients' social needs is as important as addressing their medical conditions.

Addressing patients' social needs is as important as addressing their medical conditions.

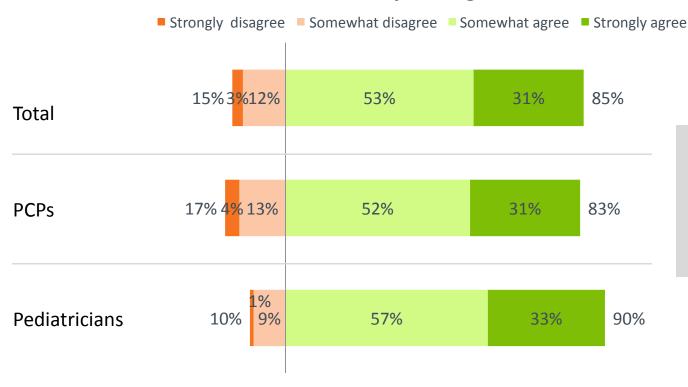


Whether the importance of addressing social needs a new concern is yet to be determined; however, physicians 41 years and younger are the most likely to recognize this need (91% versus 84% 42-60 and 81% 61 and older).



According to physicians, unmet social needs are not to be ignored. Over four in five physicians agree that unmet social needs are directly leading to worse health for Americans and three in ten strongly agree.

Unmet social needs are directly leading to worse health for Americans.

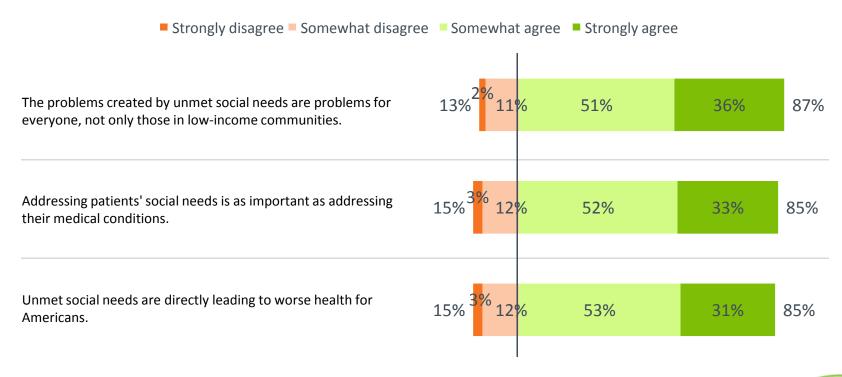


Again, physicians 41 years and younger are the most likely to recognize this concern (90% versus 84% 42-60 and 82% 61 years and older).



Accordingly to the majority of physicians, it is undeniably important to address unmet social needs. Unmet social needs are present across all types of communities and if not addressed will continue to deteriorate the health of Americans.

Importance of addressing unmet social needs



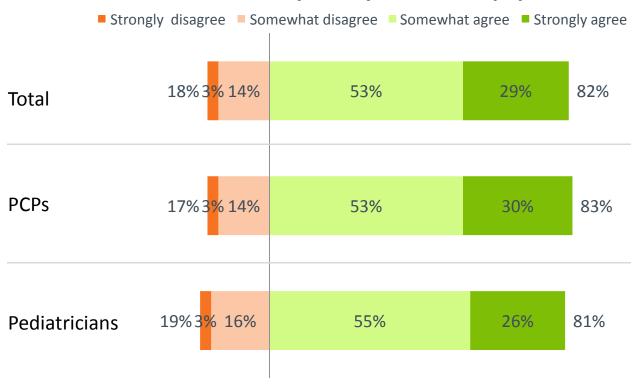
BASE: Qualified Respondents Total (n=1000)

Q931 Please tell how strongly you agree or disagree with each of the following statements.



Unfortunately, over four in five physicians feel they are unable to address their patient's health concerns caused by unmet social needs.

My patients frequently express health concerns caused by unmet social needs that are beyond my control as a physician.



Physicians 60 years or younger are significantly more likely than their older counterparts to strongly agree with this statement (34% 41 years or younger and 33% 42-60 versus 20% 61 years or older).



Unmet social needs often prevent three-quarters of physicians from providing quality care to their patients.

My patients' unmet social needs often prevent me from providing quality care.

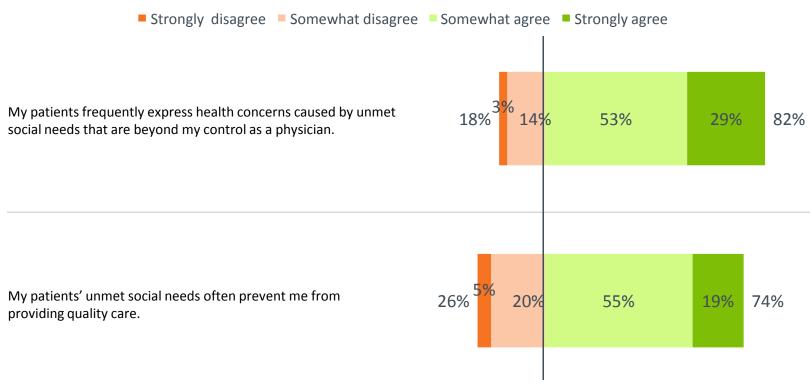


Four in five (82%)
physicians ages 41 years
and younger agree with
this statement,
significantly more so
than their older
counterparts (72%).



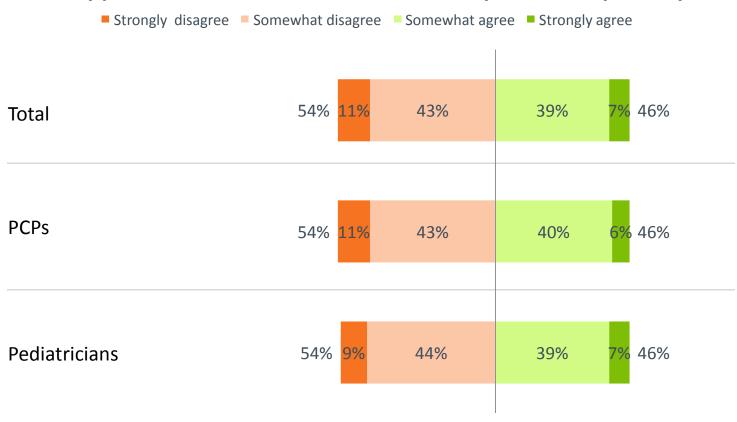
The majority of physicians agree their patient's health is impacted by unmet social needs beyond their control and these unmet social needs are impeding on their ability to provide quality care.

Unmet social needs impact on care



Slightly more than half of physicians do not believe their patients have access to the resources they need to stay healthy.

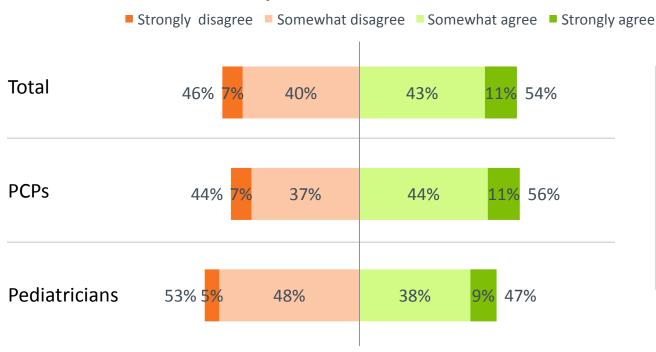
My patients have access to the resources they need to stay healthy.





Physicians are fairly split when it comes to resource awareness. Nearly half of physicians disagree that they are well-informed of the resources available to address their patients' unmet social needs.

I am well-informed about most of the resources available to address my patients' unmet social needs.

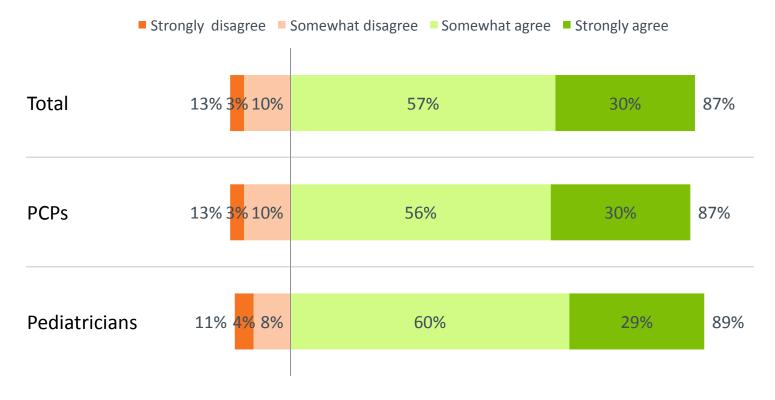


Younger physicians are less informed about resources available.
Three in five (62%) physicians ages 61 or older say they are well-informed while only half of younger physicians say the same (50% ages 41 and younger, 51% ages 42-60).



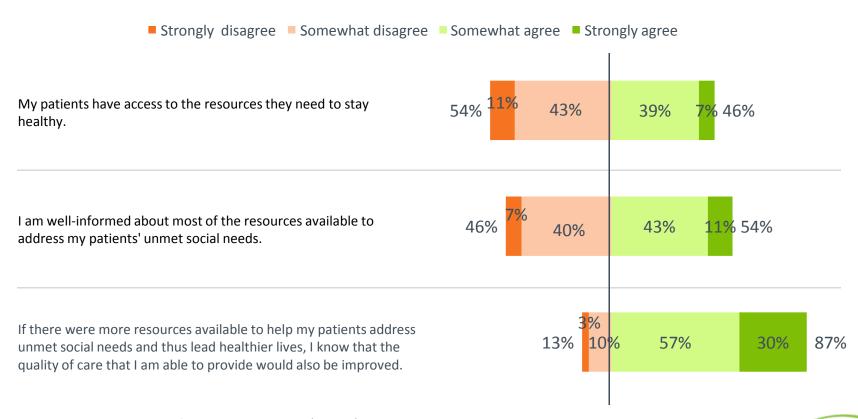
The quality of care physicians provide and the overall health of patients would see an improvement if more resources to address social needs were made available.

If there were more resources available to help my patients address unmet social needs and thus lead healthier lives, I know that the quality of care that I am able to provide would also be improved.



A general lack of access to and knowledge of resources that address unmet social needs is negatively impacting the health of patients and the quality of care provided by physicians.

Social need resources



BASE: Qualified Respondents Total (n=1000)

Q931 Please tell how strongly you agree or disagree with each of the following statements. **Q1001** Please tell how strongly you agree or disagree with each of the following statements.



Physicians express an overall lack of confidence in meeting their patient's social needs.

Confidence in Meeting Patients' Social Needs



Physicians 41 years and younger are more likely to express this lack of confidence than their older counterparts. 84% say they are only somewhat or not at all confident, whereas only 75% of physicians 61 years and older express the same.

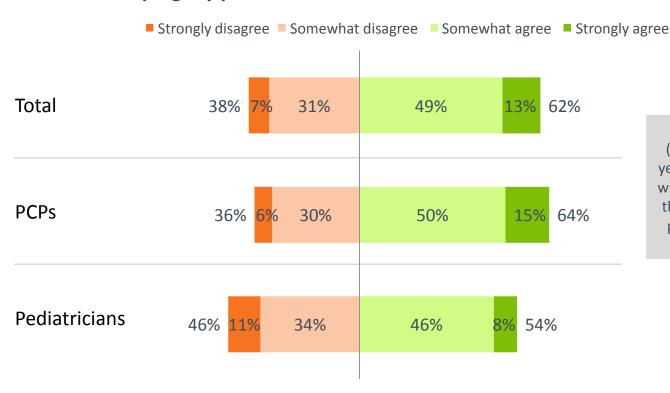


Current State of Practice



Three in five physicians say they feel as though they have little to no support besides their own staff and colleagues in helping their patients and their families lead healthier lives.

Besides my own staff and colleagues, I feel like I have little to no support in helping my patients and their families lead healthier lives.

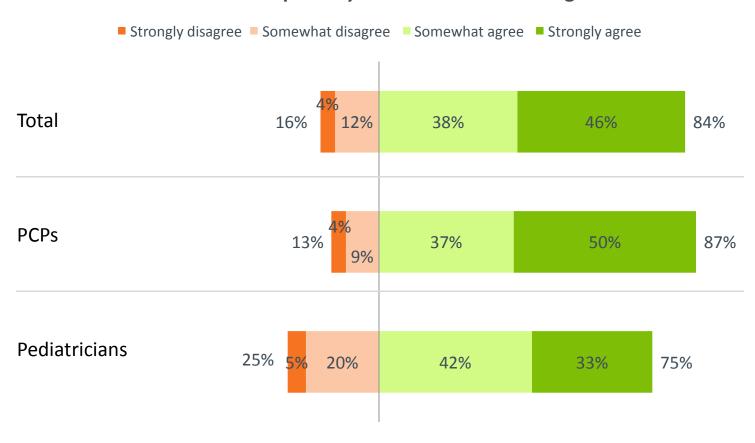


Nearly seven in ten (69%) of physicians 41 years and younger agree with this statement. Less than three in five (56%) physicians 61 years or older agree.



Most physicians agree, and nearly half strongly agree there is a primary care workforce shortage.

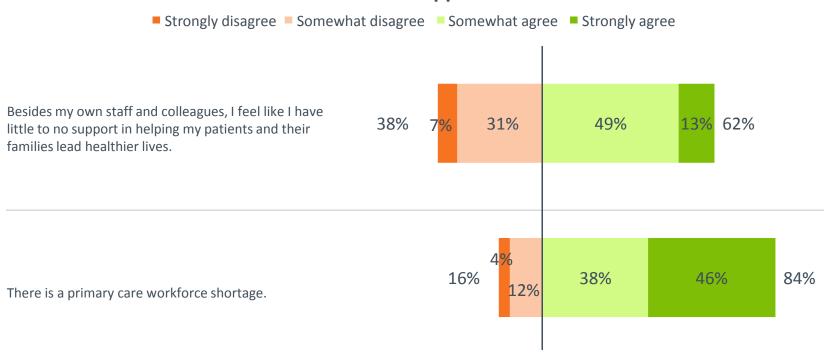
There is a primary care workforce shortage.





The majority of physicians agree there is a primary care workforce shortage. A lesser but still substantial percentage express feeling like they have little to no support in helping their patients and their families lead healthier lives.

Lack of support



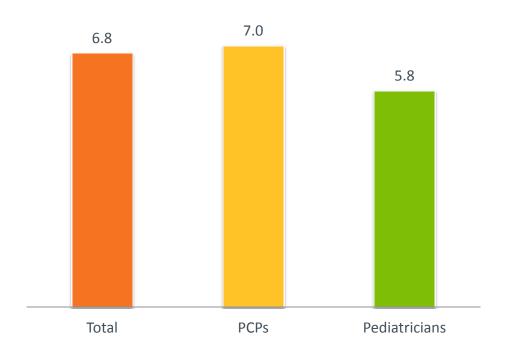
BASE: Qualified Respondents Total (n=1000)

Q710 Please tell how strongly you agree or disagree with each of the following statements.

Q825 Please tell how strongly you agree or disagree with each of the following statements.

Physicians spend an average of seven minutes during routine visits addressing unmet social needs.

Minutes Spent (Mean %)



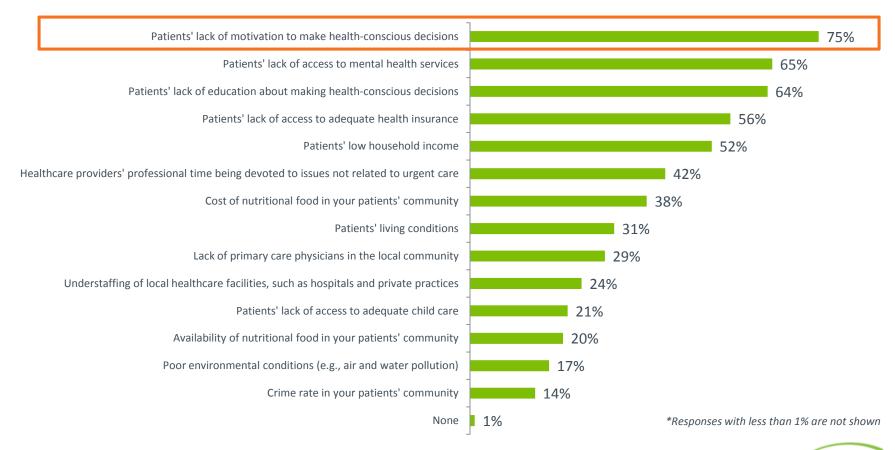
BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)

Q900 Please estimate the AVERAGE number of minutes you spend during a routine visit addressing unmet social needs.



Three-quarters of physicians say their patient's lack of motivation to make health-conscious decisions is the most negative impact on their health.

Negative impacts

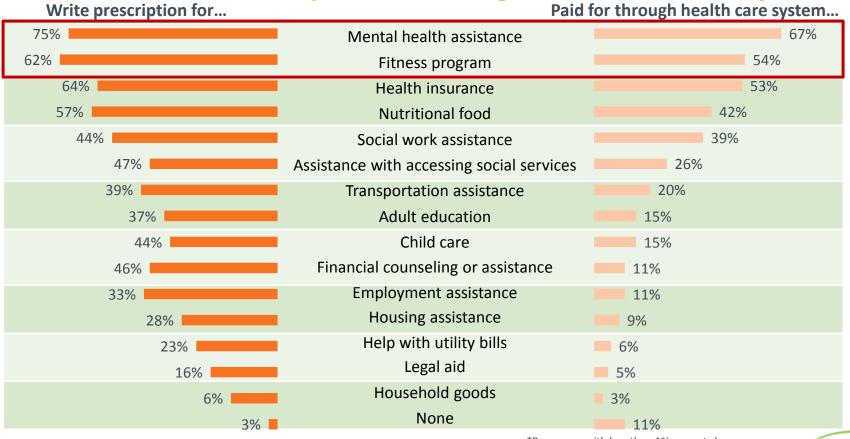


BASE: Qualified Respondents Total (n=1000)

Q940 Which of the following factors, if any, do you feel are most negatively impacting your patients' health?



If able, nearly three-quarters of physicians say they would write a prescription for mental health assistance and fitness programs. Additionally, between half and two-thirds of physicians wish these services could be paid for through the health care system.



<u>000)</u>

*Responses with less than 1% are not shown



Q915 Which of the following, if any, do you wish you could write a prescription for?

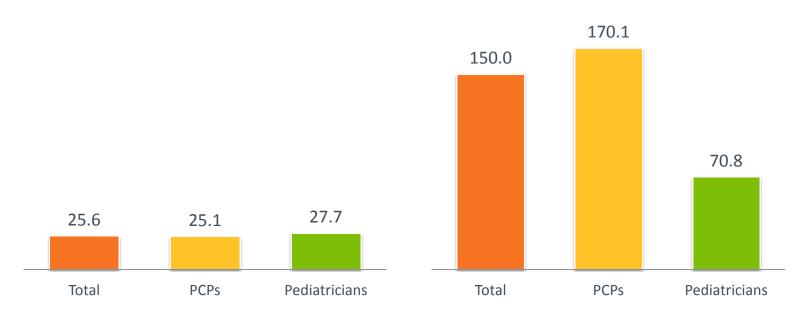
Q920 Which of the following, if any, do you wish could be paid for through the health care system?



Physicians currently write an average of 150 prescriptions (or dispense medications) per week. If given the opportunity, they would write an additional 26 on average for social services increasing their weekly prescriptions by 17%.



Prescriptions written or medications dispensed in a week



BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)

Q925 If you were about to write prescriptions for the social services listed in the previous two questions, about how many prescriptions would you write each week?

Q8728 On average, about how many prescriptions do you write (or medications do you dispense) in a week?



General Attitudes on Healthcare



Interestingly, a notable percentage of physicians do not describe the quality of healthcare available to their patients as good or excellent, but rather three in ten of physicians say the overall quality of healthcare available to their patients is fair or poor.

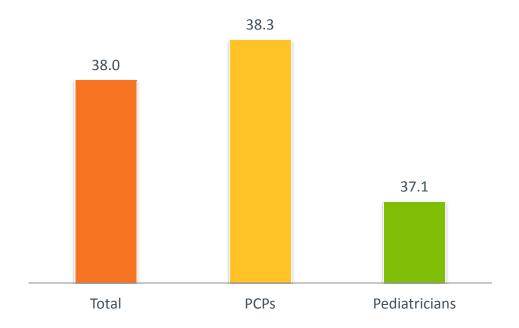
Quality of available healthcare





According to physicians, if the healthcare system did a better job of addressing patient's unmet social needs, there would be an improvement in the health of nearly two in five patients.

Mean: percentage of patients who would see improvement in their health is the healthcare system did a better job of addressing unmet social needs



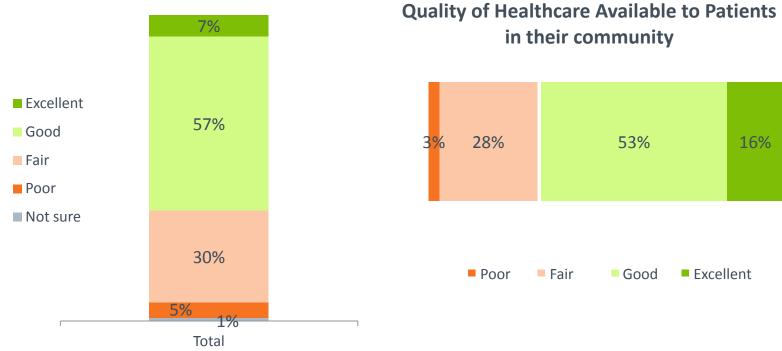
BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)

Q910 What percentage of your patients would see an improvement in their health if the health care system did a better job of addressing their unmet social needs?



It's possible that there is a correlation between one's general living standards and the quality of healthcare available to them. Over half* of physicians say their patients' living standards and the quality of healthcare available to them are good or excellent.

Patients' Living Standards



*53% of physicians describe the general living standards of most of their patients as good or excellent and describe the overall quality of healthcare available to their patients as good or excellent.

BASE: Qualified Respondents Total (n=1000)

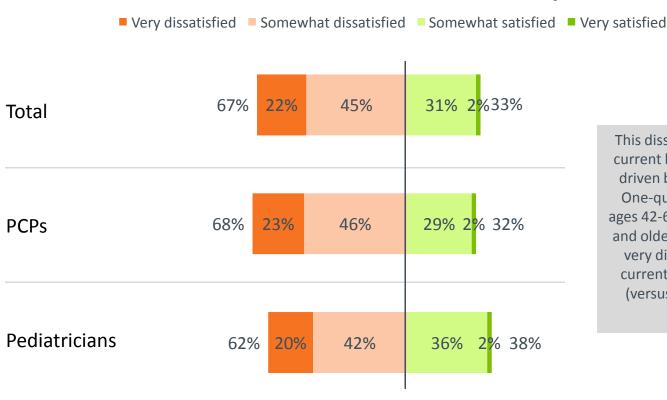
Q820 How would you describe the general living standards for most of your patients?

Q830 Which best describes the overall quality of healthcare available to your patients in their community?



Two-thirds of physicians express dissatisfaction with the current healthcare system.

Satisfaction with Current Health Care System



This dissatisfaction with the current healthcare system is driven by older physicians.

One-quarter of physicians ages 42-60 (24%) and ages 61 and older (25%) say they are very dissatisfied with the current healthcare system (versus 15% ages 41 and younger).

BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)

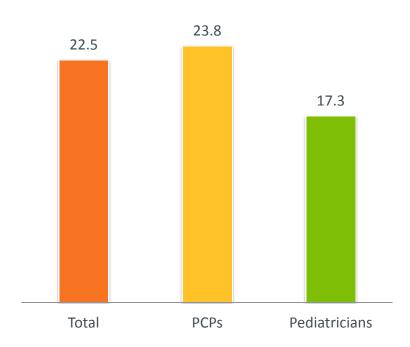
Physician Age Sub-group 41 Years or Younger (n=318); 42-60 (n=541); 61 Years or Older (n=141)

Q700 How satisfied are you with the current health care system?



Physicians say that, on average, over one in five of their patients do not have access to adequate health insurance.

Mean: Percentage of patients that do not have access to adequate health insurance



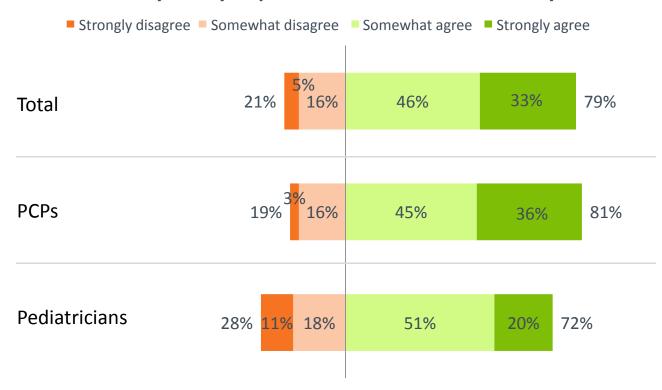
BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)

Q835 What percentage of your patients do not have access to adequate health insurance for their health needs?



Inadequate health insurance coverage has often negatively impacted four in five physicians' ability to provide their patients with the healthcare they need.

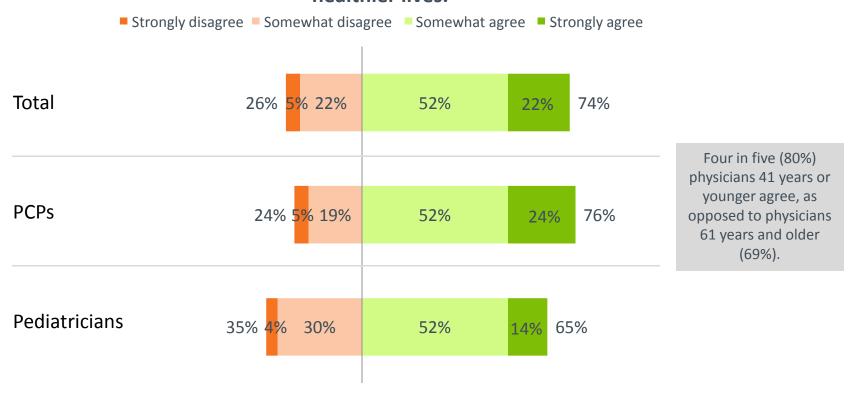
I often have patients whose inadequate health insurance coverage has hindered my ability to provide them with the care they need.





Three in four physicians agree that the current healthcare system is limiting physicians' ability to help their patients lead healthier lives.

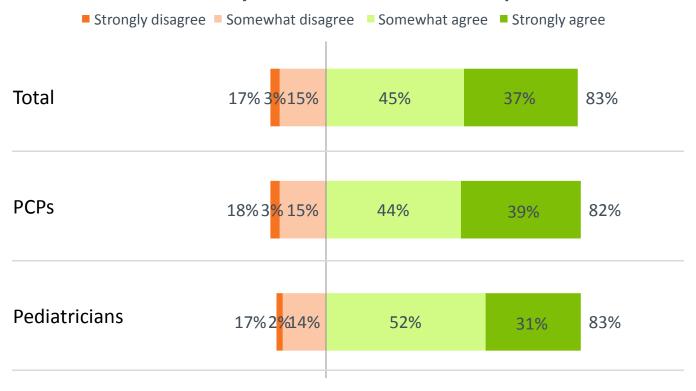
The current healthcare system limits my ability to help my patients lead healthier lives.





Four in five physicians agree the current healthcare system is making it next to impossible for them to spend as much time with their patients as they would like.

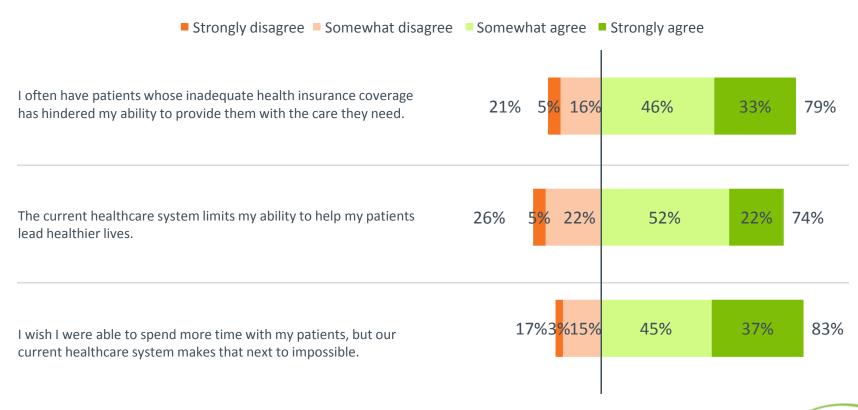
I wish I were able to spend more time with my patients, but our current healthcare system makes that next to impossible.





The current healthcare system is impeding the majority of physician's ability to provide time and care to the best of their ability.

Healthcare system limiting physicians' abilities



BASE: Qualified Respondents Total (n=1000)

Q825 Please tell how strongly you agree or disagree with each of the following statements.

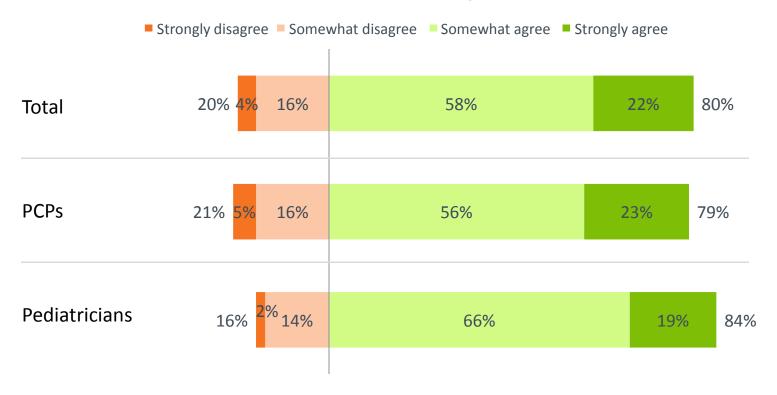


Government and Policy Impact



Four in five physicians agree there would be fewer health issues for patients if the healthcare system covered basic social needs.

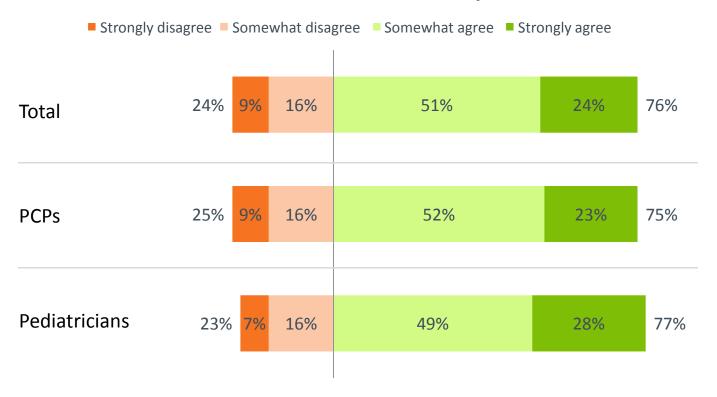
If the healthcare system covered basic social needs determined by a healthcare practitioner to play a role in the patient's health, there would be fewer health issues for patients.





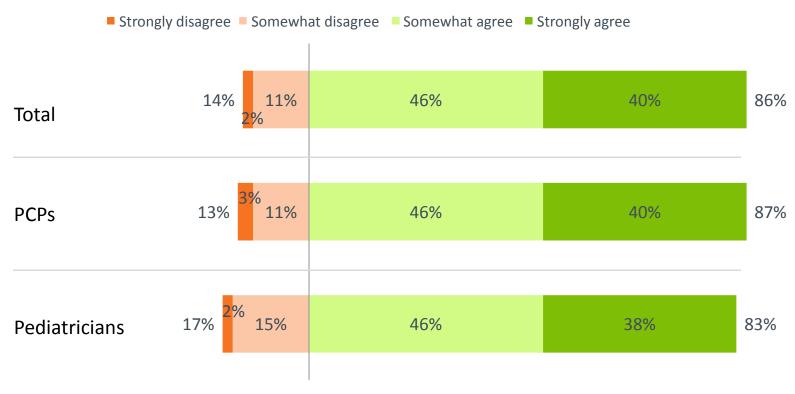
Three-quarters of physicians wish the healthcare system would pay for connecting patients to resources to address their unmet social needs.

I wish the healthcare system would pay for connecting patients to resources to address their unmet social needs if deemed important for overall health.



The vast majority of physicians agree that policymakers have a substantial impact on their ability to provide quality healthcare—two in five strongly agree.

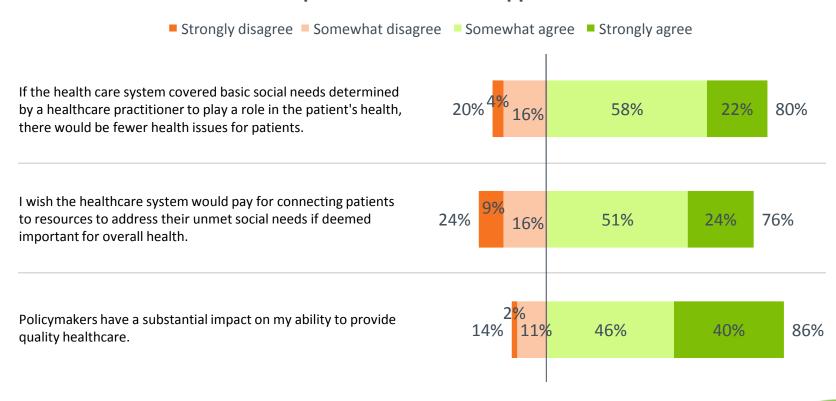
Policymakers have a substantial impact on my ability to provide quality healthcare.





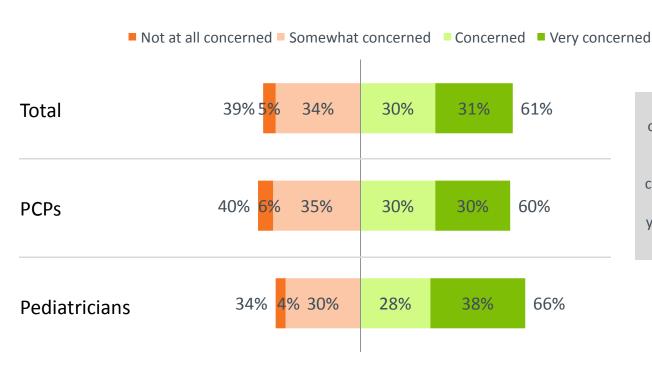
With the support of policymakers and the help of the healthcare system, patients could be connected with appropriate social need resources to greatly improve their overall health.

Impacts of healthcare support



Three in five physicians say they are at least concerned that the proposed cutbacks to social programs at the local, state and federal levels will negatively impact their patients' health. Three in ten are very concerned.

Concerns regarding cutbacks



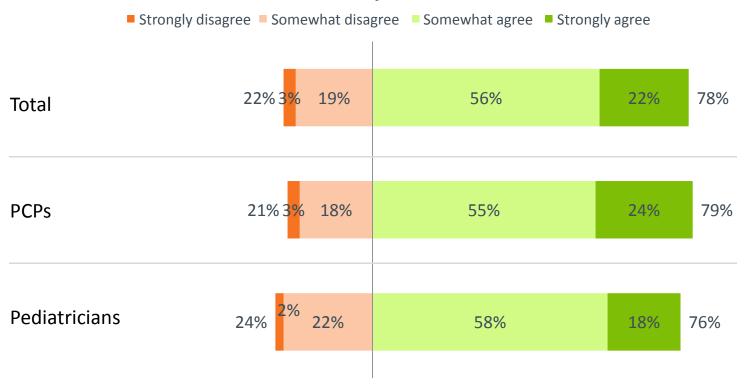
Physicians ages 61 and older are the most likely to say they very concerned about the proposed cutbacks to social programs (38% versus 30% ages 41 years and younger and 28% ages 42-60).

BASE: Qualified Respondents Total (n=1000); PCPs (n=690); Pediatricians (n=310)
Physician Age Sub-group 41 Years or Younger (n=318); 42-60 (n=541); 61 Years or Older (n=141)
Q1005 How concerned are you that proposed cutbacks to social programs at the local, state, and federal levels may negatively impact your patients' health?



Physicians generally do not believe current government policies are doing much to address the negative impact unmet social needs have on health.

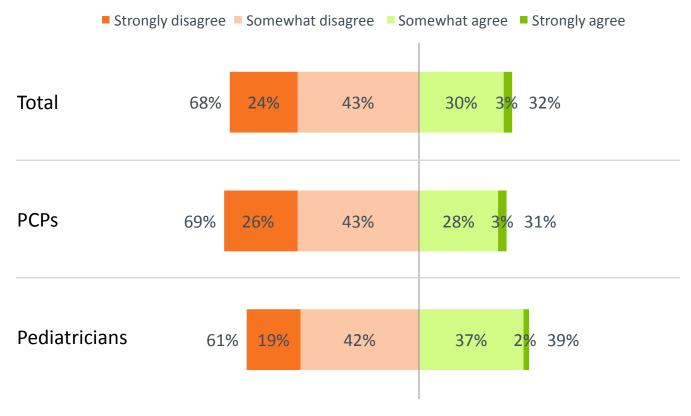
Current government policies are doing little to address the negative impact on health caused by unmet social needs.





Physicians do not express high hopes for ACOs' impact on healthcare. Less than one-third believe ACOs will improve the value of healthcare.

ACO (Accountable Care Organizations) will improve the value of healthcare.





Even though it is meant to improve healthcare, two in five physicians believe the widespread adoption of Medical Homes will hinder their ability to provide their patients quality care.

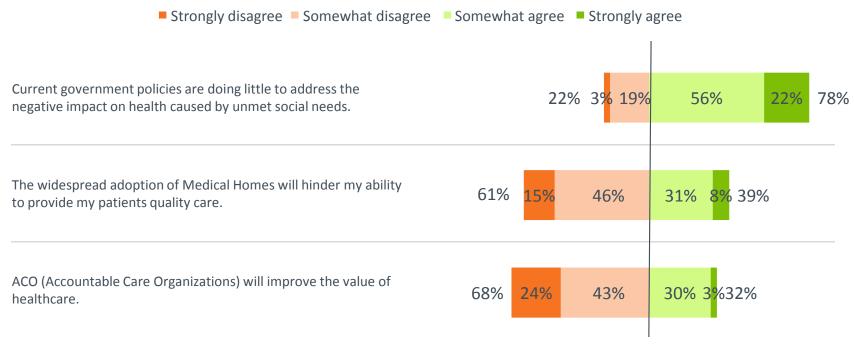
The widespread adoption of Medical Homes will hinder my ability to provide my patients quality care.





Most agree the government could do more to address the negative impacts unmet social needs are having on health. Additionally, physicians do not provide an overwhelmingly positive response towards either of the current health initiatives in place.

Government policies and health initiatives



BASE: Qualified Respondents Total (n=1000)

Q710 Please tell how strongly you agree or disagree with each of the following statements.

Q825 Please tell how strongly you agree or disagree with each of the following statements.

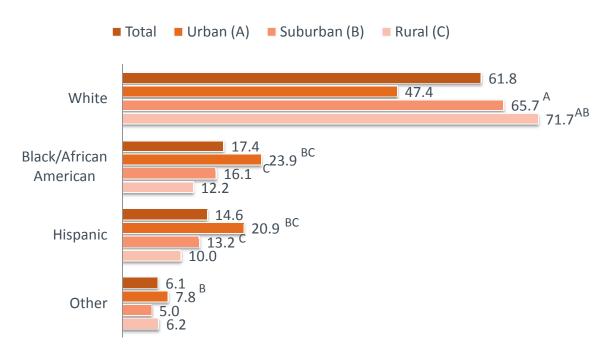
Q931 Please tell how strongly you agree or disagree with each of the following statements.

Urbanicity: Patient Profile



Physicians with patients in rural areas have the greatest proportion of White patients while those practicing in urban and suburban areas are more likely to have Black/African American and Hispanic patients.

Race/Ethnicity (Mean %)



LOW-INCOME SUB-GROUP			
	Urban (A)	Suburban (B)	Rural (C)
N=	231	226	185
White	43.8	61.5 A	69.2 AB
Black/African American	25.3 BC	19.3 C	13.4
Hispanic	23.4 BC	14.6 C	10.7
Other	7.5 B	4.6	6.7

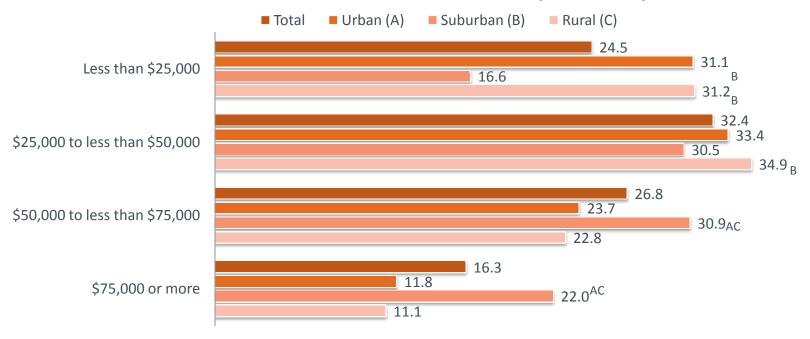
BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

Q810 About what percentage of your patients fall into the following racial or ethnic categories?



On average, physicians with patients in urban or rural areas are more likely to say a higher percentage of patients, on average, have household incomes of less than \$25,000. Those practicing in suburban areas report, on average, a higher percentage of patients with household incomes of \$50,000 or more.

Patients Household Income (Mean %)

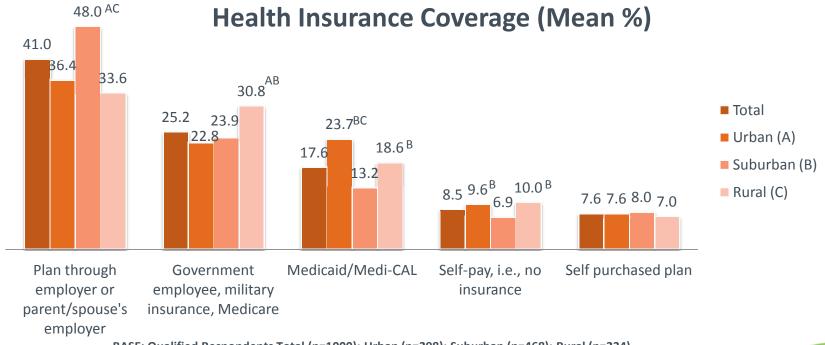


BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

Q815 About what percentage of your patients fall into the following yearly household income categories?



Physicians practicing in rural communities report the highest proportion of patients using government employee/military/ Medicare health insurance. Those practicing in urban communities report the highest percentage using Medicaid/Medi-Cal and those practicing in suburban communities report the highest percentage of patients with private insurance through an employer.



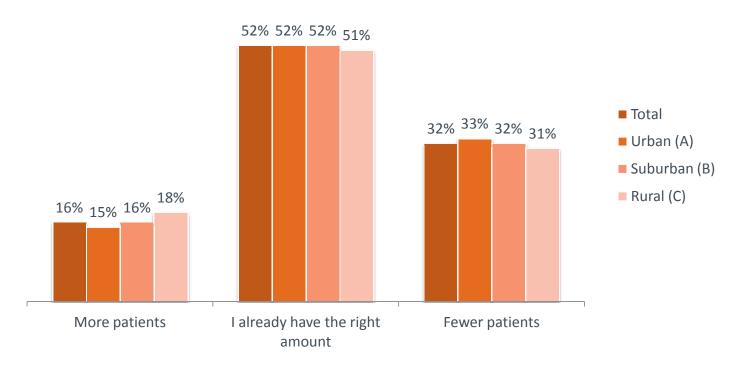
BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

Q800 Please estimate the percentage of your patients who have each of the following as their main source of health insurance coverage.



Some physicians are being stretched too thinly. Approximately one-third of all physicians, regardless of the community in which they practice, say they need fewer patients to meet all their patients' health needs.

Optimum patient population size



BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

Q705 In order to do your job to the best of your ability and meet all your patients' health needs, do you feel you need to have fewer patients, more patients, or do you already have the right number of patients?

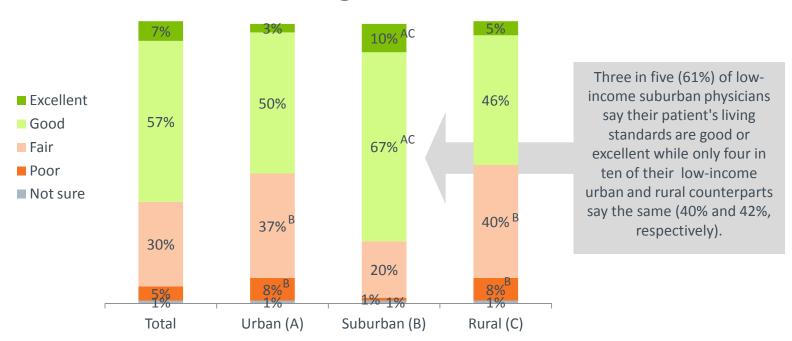


Urbanicity: Impact of Social Needs



Physicians with patients in the suburbs are most likely to say their patients general living standards are good, possibly related to the finding that patients in the suburbs are more likely to have household incomes of \$50,000 or more.

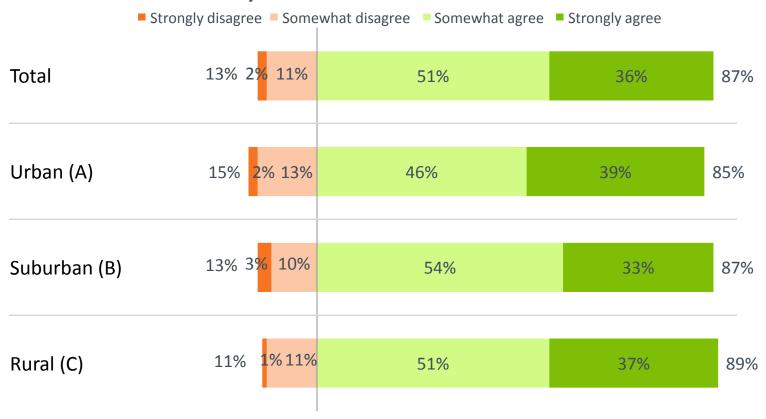
Patients' Living Standards





Regardless of which community physicians' patients live in, the vast majority agree unmet social needs are a universal issue.

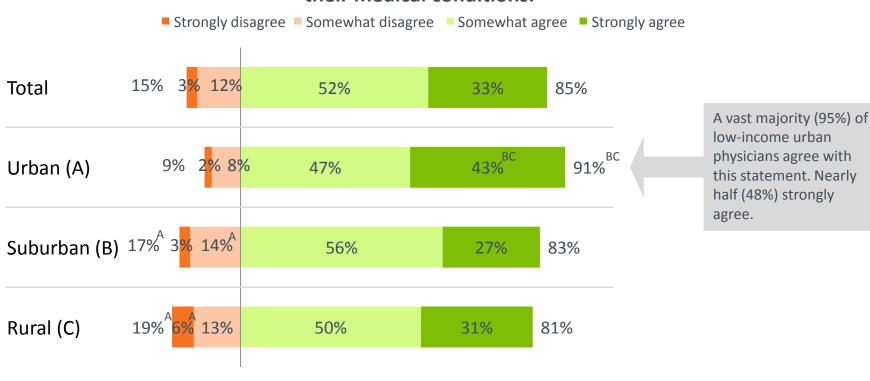
The problems created by unmet social needs are problems for everyone, not only those in low-income communities.





Most physicians recognize that addressing patients' social needs is as important as addressing their medical conditions, especially those with patients living in urban communities.

Addressing patients' social needs is as important as addressing their medical conditions.



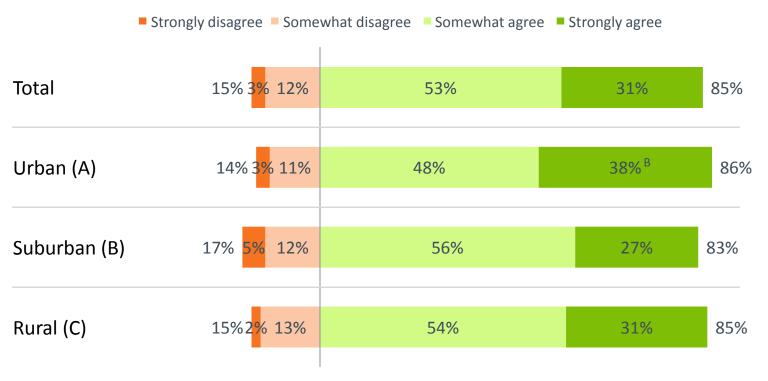
BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)
Low-Income: Urban (n=231)

Q931 Please tell how strongly you agree or disagree with each of the following statements.



Six in seven from all communities agree unmet social needs are directly leading to worse health for Americans. Physicians practicing in urban communities are more likely then those in suburban communities to strongly agree.

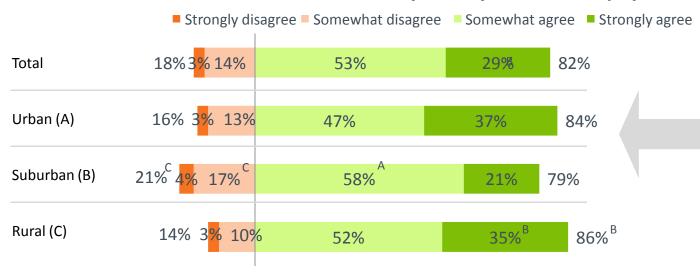
Unmet social needs are directly leading to worse health for Americans.





More than a third of physicians practicing in urban and rural communities strongly agree their patients frequently express unmet social needs beyond their control. In contrast, physicians treating suburban communities are less likely to agree, and in fact, one in five actually disagree with the statement.

My patients frequently express health concerns caused by unmet social needs that are beyond my control as a physician.



Nine in ten (90%) lowincome urban physicians agree with this statement, significantly more so than their low-income suburban counterparts (82%). Additionally, over four in ten (43%) strongly agree (versus 23% low-income suburban).

BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234) Low-Income: Urban (n=231); Suburban (n=226)

Q931 Please tell how strongly you agree or disagree with each of the following statements.



66

Three-quarters of physicians believe their patients' unmet social needs prevent them from providing quality care—led by nearly a quarter of physicians in urban and rural areas who strongly agree with this sentiments.

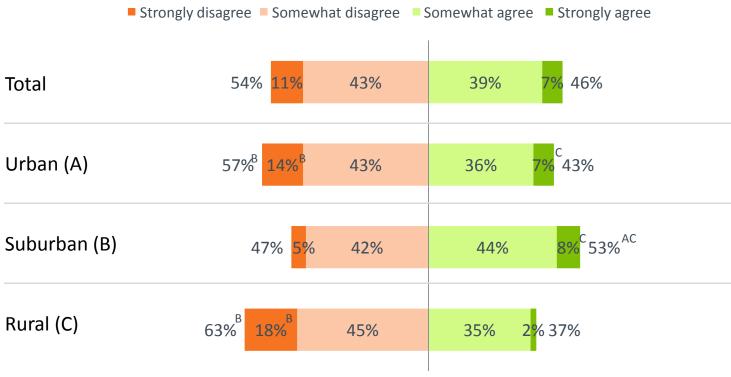
My patients' unmet social needs often prevent me from providing quality care.





Physicians whose patients live in the suburbs are most likely to say their patients have access to the resources they need to stay healthy.

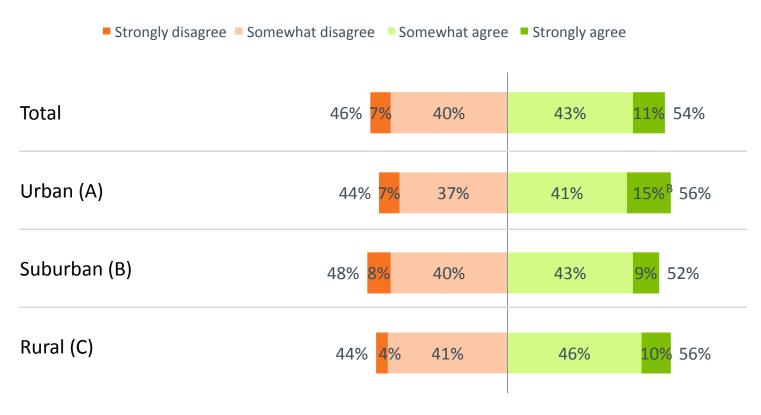
My patients have access to the resources they need to stay healthy.





Nearly half of physicians say they are not well-informed of the resources available to address their patients' unmet social needs.

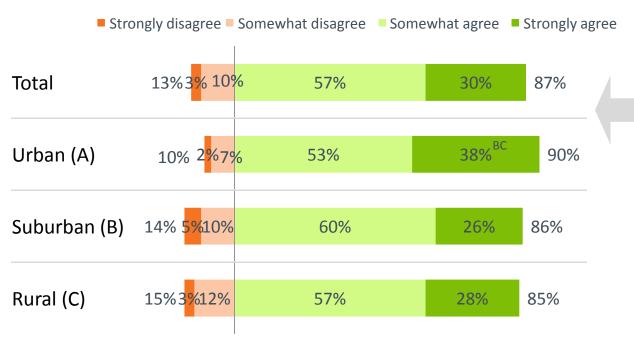
I am well-informed about most of the resources available to address my patients' unmet social needs.





An overwhelming majority of physicians agree that if more resources were available to help address their patients' unmet social needs, the quality of care they could provide would be improved— led by nearly two in five urban doctors who strongly agree.

If there were more resources available to help my patients address unmet social needs and thus lead healthier lives, I know that the quality of care that I am able to provide would also be improved.



Low-income urban physicians are more likely than their low-income suburban and rural counterparts to strongly agree (44% versus 28%, respectively).



Regardless of where they practice, the majority of physicians are only somewhat or not at all confident in their ability to address their patients' unmet social needs.

Confidence in Meeting Patients' Social Needs



BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234) Q905 How confident are you in your ability to address your patients' unmet social needs?

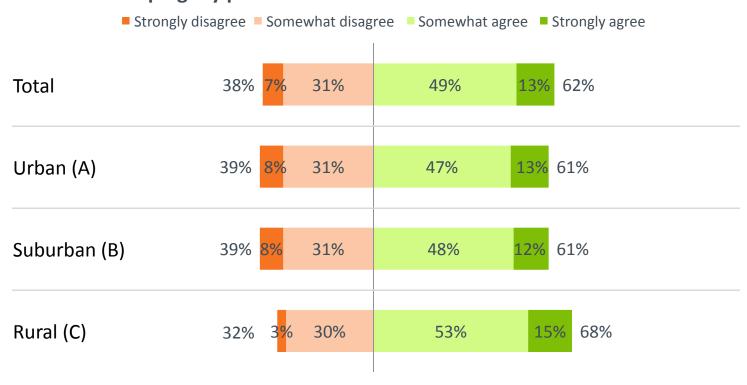


Urbanicity: Current State of Practice



Over three in five physicians in all communities feel they lack support in helping their patients and their families lead healthier lives.

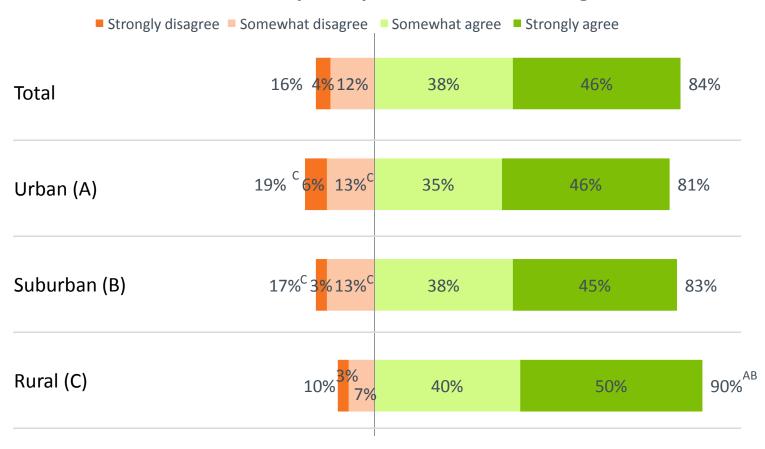
Besides my own staff and colleagues, I feel like I have little to no support in helping my patients and their families lead healthier lives.





The majority of physicians, especially those in rural communities, believe there is a primary care workforce shortage.

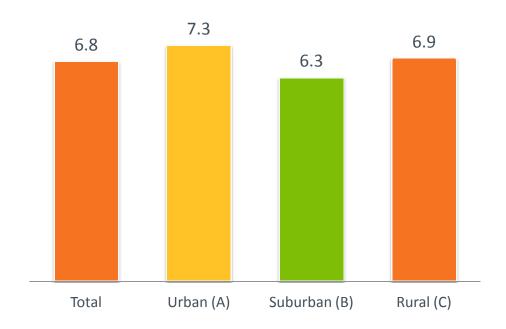
There is a primary care workforce shortage.





On average, physicians spend about 6 or 7 minutes addressing unmet social needs during a routine visit.

Minutes Spent (Mean %)



BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

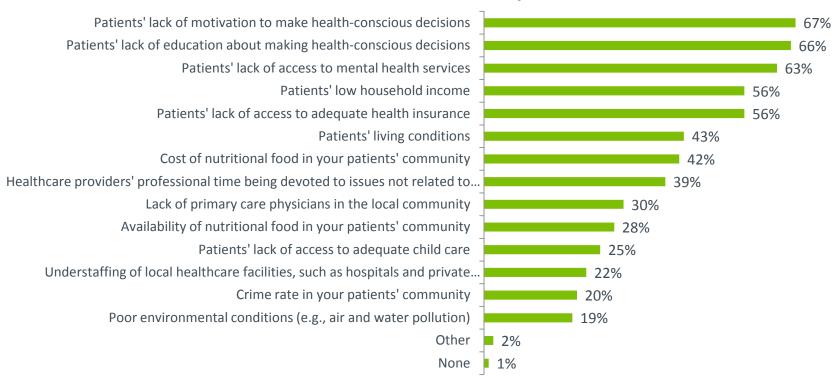
Q900 Please estimate the AVERAGE number of minutes you spend during a routine visit addressing unmet social needs.



Two-thirds of physicians practicing in urban communities feel their patients have been negatively impacted by their own lack of motivation and lack of education about making health-conscious decisions.

Negative impacts

Urban community



harris

Physicians practicing in suburban communities concur that lack of motivation is a top factor impacting their patients' health.

Additionally, over three in five mention their patients' lack of access to mental health services.

Negative impacts





BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

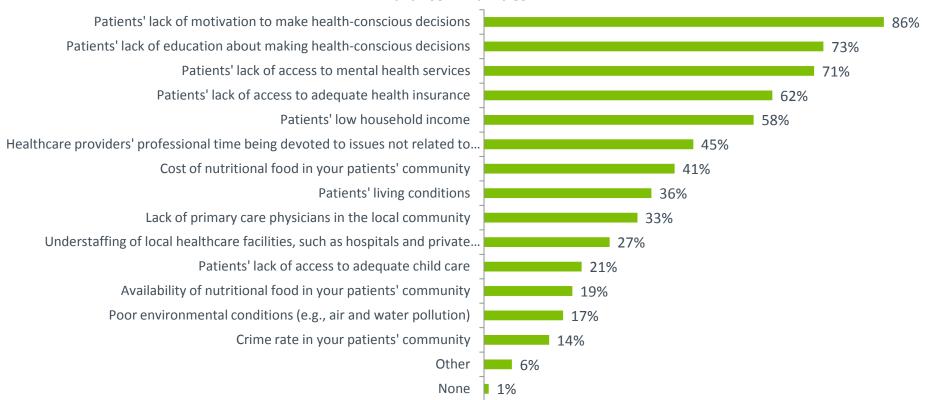
Q940 Which of the following factors, if any, do you feel are most negatively impacting your patients' health?



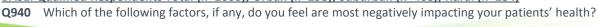
Physicians in rural communities express the greatest concern with their patients' lack of motivation with nearly nine in ten saying it is negatively impacting their patients' health.

Negative impacts

Rural communities

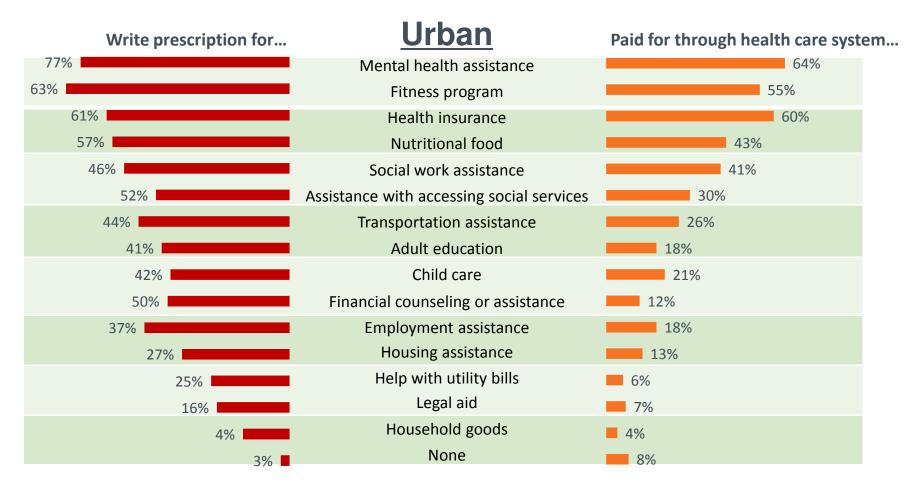


BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)





Physicians practicing in urban communities recognize the need for transportation assistance.



^{**}Responses with less than 1% are not shown

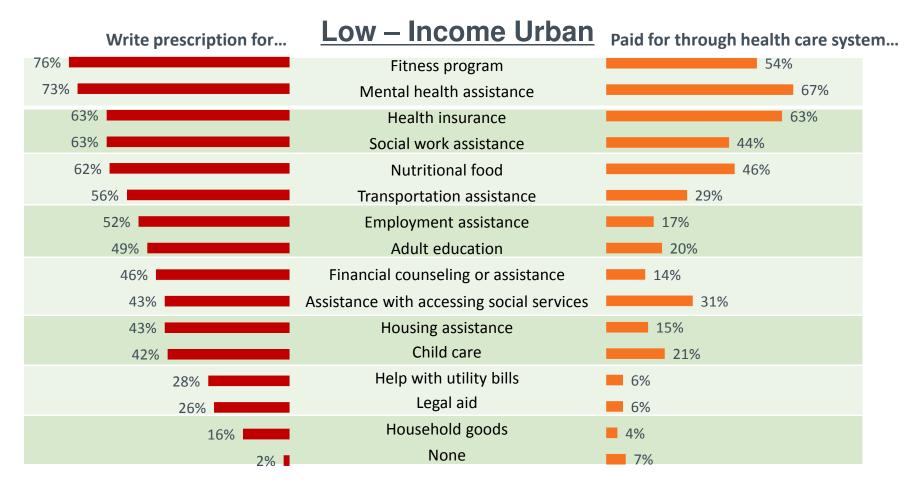
BASE: Qualified Respondents Urban (n=298)
Low-Income: Urban (n=231)

Q915 Which of the following, if any, do you wish you could write a prescription for?

Q920 Which of the following, if any, do you wish could be paid for through the health care system?



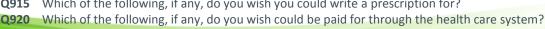
Physicians practicing in low-income urban communities more apt to see need for transportation, housing and employment assistance.



Responses with less than 1% are not shown

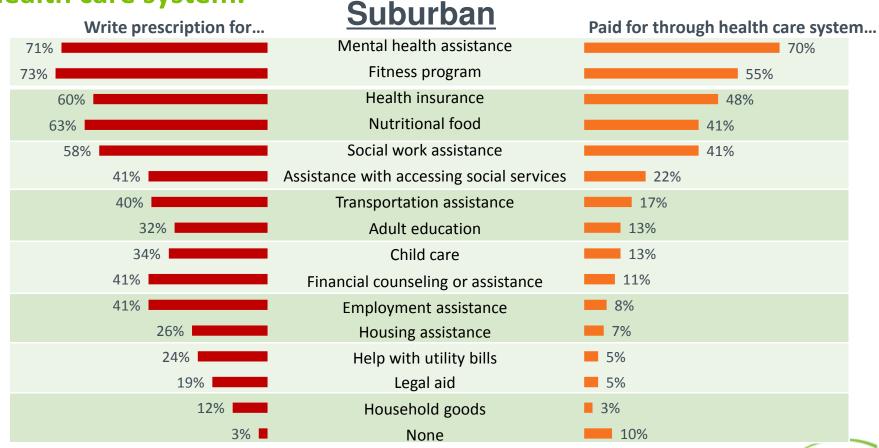
BASE: Qualified Respondents Low-Income: Urban (n=231)

Q915 Which of the following, if any, do you wish you could write a prescription for?





Seven in ten physicians practicing in suburban communities wish they could write a prescription for mental health assistance and the same proportion wishes it could be paid for through the health care system.



BASE: Qualified Respondents Suburban (n=468)

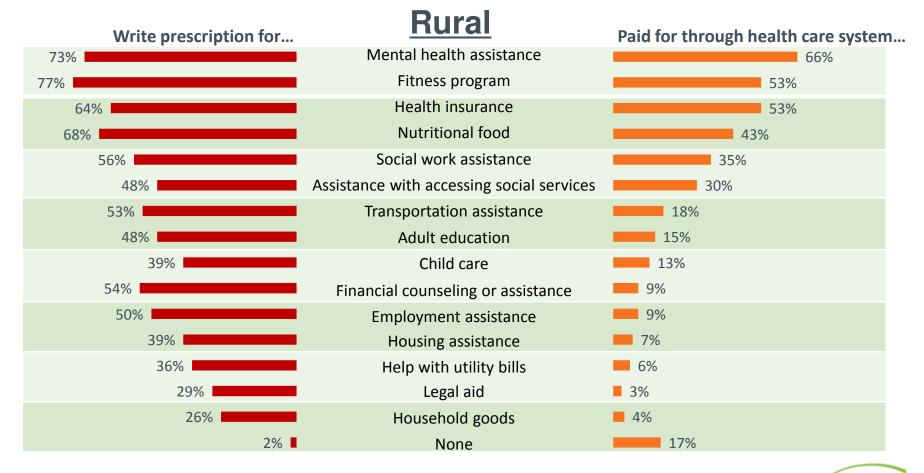
Q915 Which of the following, if any, do you wish you could write a prescription for?

Q920 Which of the following, if any, do you wish could be paid for through the health care system?



^{**}Responses with less than 1% are not shown

Over two-thirds of physicians practicing in rural areas wish they could write a prescription for nutritional food and over two in five wish the health care system would pay for it.

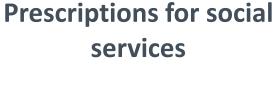


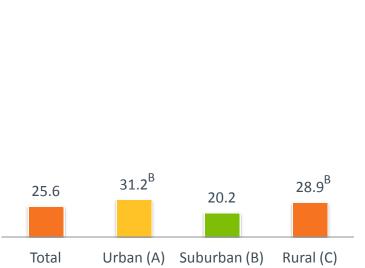
BASE: Qualified Respondents Total (n=1000); Rural (n=234)

**Responses with less than 1% are not shown

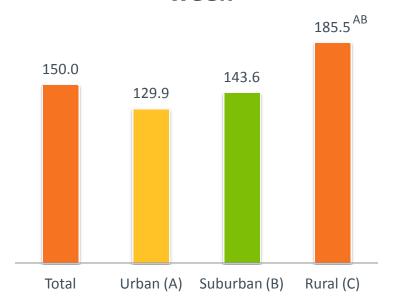
harris

On average, physicians are currently writing between 130 and 185 prescriptions per week. If given the opportunity, they would like to write 20 to 31 prescriptions for social services.



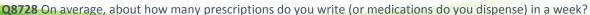


Prescriptions written in a week



BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

Q925 If you were able to write prescriptions for the social services listed in the previous two questions, about how many prescriptions would you write each week?





Urbanicity: General Attitudes on Healthcare

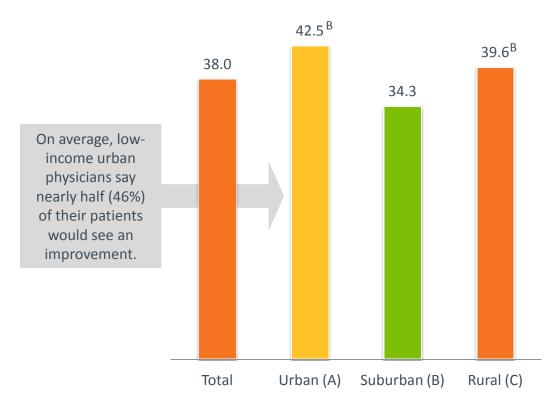


Physicians practicing in suburban communities report a significantly higher quality of healthcare available to their patients than doctors in urban or rural communities.





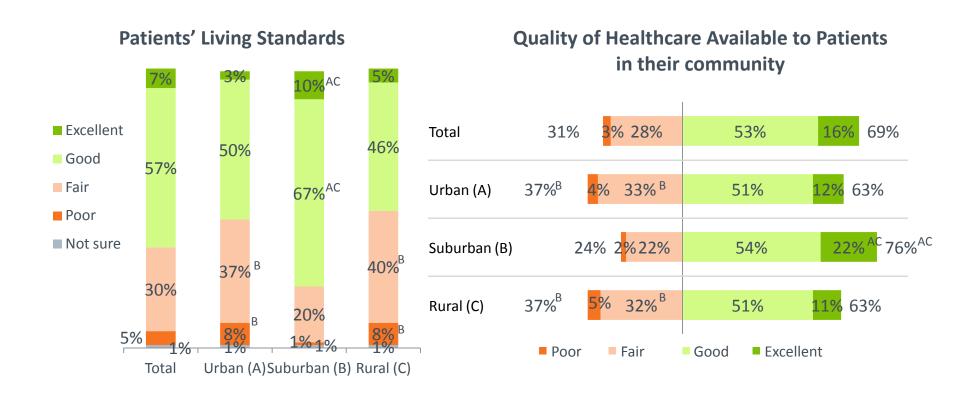
Physicians practicing in urban and rural communities say approximately two in five of their patients would see improvements in their health if the health care system did a better job of addressing their unmet social needs.



BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234) Low-Income: Urban (n=231)



Perceptions of patients' living standards and quality of healthcare they receive seem to go hand-in-hand.



BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

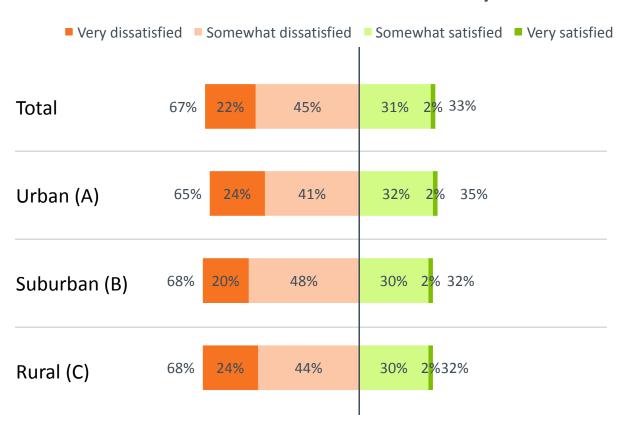
Q820 How would you describe the general living standards for most of your patients?

Q830 Which best describes the overall quality of healthcare available to your patients in their community?



Regardless of the type of community, roughly two-thirds of physicians express dissatisfaction with the current health care system.

Satisfaction with Current Health Care System



BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

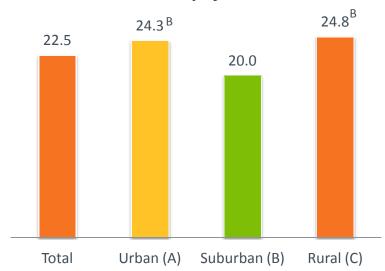
Q700 How satisfied are you with the current health care system?



Over one-third of physicians practicing in urban and rural areas describe the quality of healthcare available to their patients as fair or poor. Perhaps, this is because these physicians believe one-quarter of their patients do not have access to adequate health insurance.



Summary of Means



Quality of Healthcare Available to Patients in their community



BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234)

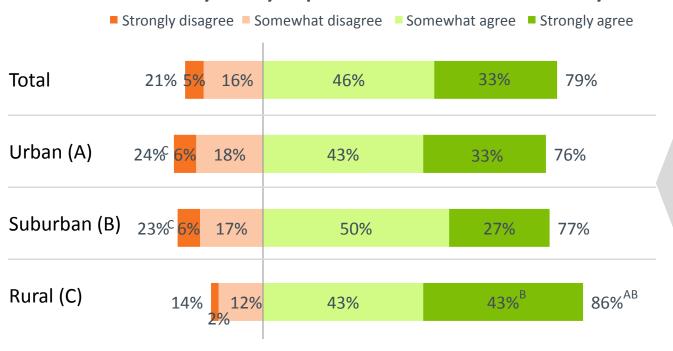
Q835 What percentage of your patients do not have access to adequate health insurance for their health needs?

Q830 Which best describes the overall quality of healthcare available to your patients in their community?

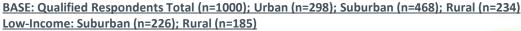


Inadequate health insurance coverage has hindered nearly four in five physician's ability to provide their patients with the care they need, with physicians in rural communities being affected the most.

I often have patients whose inadequate health insurance coverage has hindered my ability to provide them with the care they need.



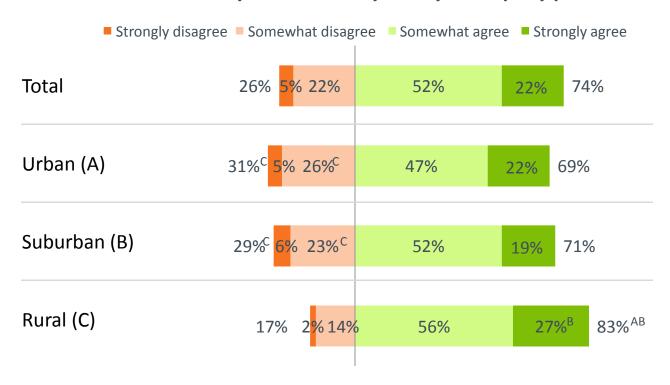
Low-income rural physicians are significantly more likely than lowincome suburban physicians to strongly agree that they have patients whose inadequate health insurance coverage has hindered their ability to provide them the care they need (47% and 32%, respectively).





In addition to inadequate health insurance, most physicians—particularly those practicing in rural communities—believe the healthcare system as a whole is limiting their ability to help their patients lead a healthy life.

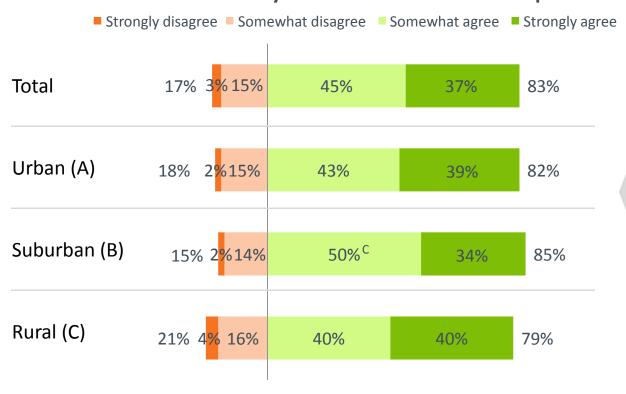
The current healthcare system limits my ability to help my patients lead healthier lives.





The majority of physicians practicing in all communities agree that the current healthcare system makes it next to impossible for them to spend enough time with their patients.

I wish I were able to spend more time with my patients, but our current healthcare system makes that next to impossible.



Low-income urban and suburban physicians are significantly more likely than low income rural to agree that they wish they were able to spend more time with their patients, but our current healthcare system makes that next to impossible (86% and 88% versus 77%, respectively).



Urbanicity: Government and Policy Impact



Physicians believe their patients would greatly benefit if the healthcare system covered their basic social needs. Over one-quarter of physicians in urban communities strongly agree.

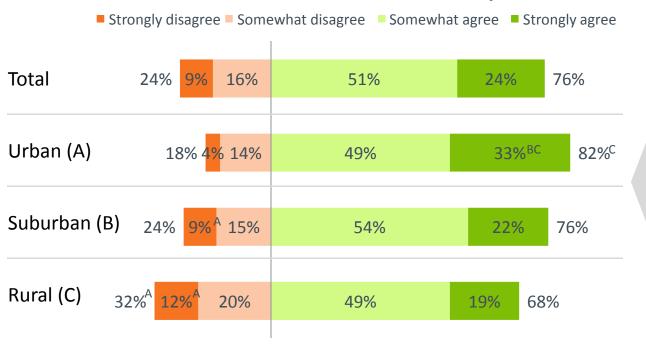
If the health care system covered basic social needs determined by a healthcare practitioner to play a role in the patient's health, there would be fewer health issues for patients.



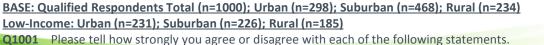


Most physicians wish the healthcare system would pay to connect their patients to resources addressing their unmet social needs— led by one-third of physicians practicing in urban communities who feel strongly about this.

I wish the healthcare system would pay for connecting patients to resources to address their unmet social needs if deemed important for overall health.

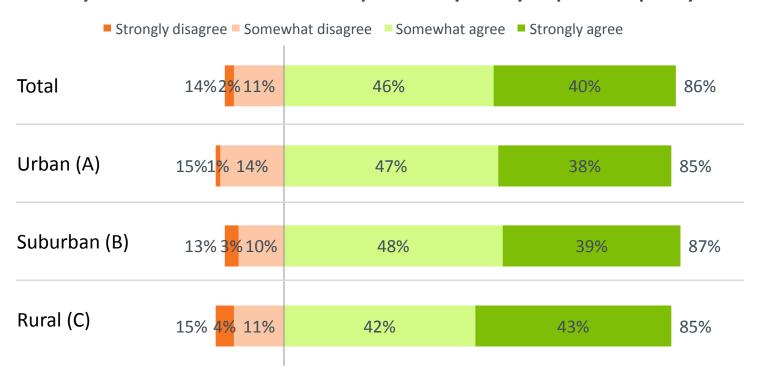


Low-income urban and suburban physicians are significantly more likely than those in rural communities to say they wish the healthcare system would pay for connecting patients to resources to address their unmet social needs (83% and 79% versus 67%, respectively).



The quality of healthcare physicians are able to provide largely relies on the actions of policymakers— the vast majority of physicians across all community types agree policymakers have a substantial impact on their ability to provide quality healthcare.

Policymakers have a substantial impact on my ability to provide quality healthcare.



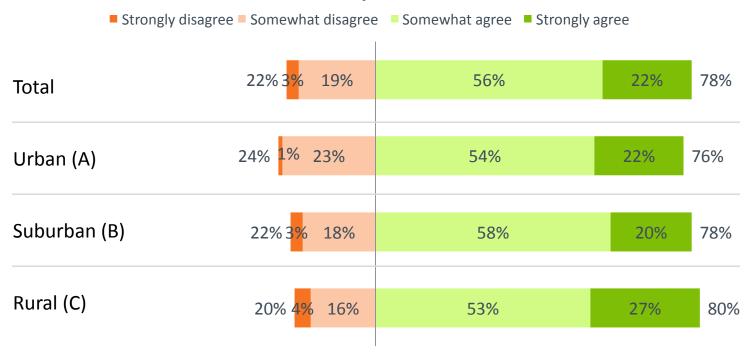
Between one half and two-thirds of physicians are concerned that proposed cutbacks to social programs on all levels will have a negative impact on their patients' health.





The majority of physicians across all communities feel that current government policies don't do enough to address the negative impact on health caused by unmet social needs.

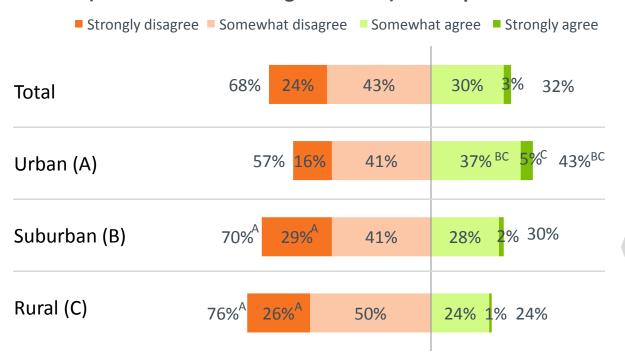
Current government policies are doing little to address the negative impact on health caused by unmet social needs.





While the majority of physicians across all communities disagree that ACOs will improve the value of healthcare, physicians practicing in urban communities are the most hopeful.

ACOs (Accountable Care Organizations) will improve the value of healthcare.



Low-income suburban and rural physicians are particularly skeptical about ACOs' ability to improve the value of healthcare, 70% of low-income suburban and 76% of lowincome rural disagree.

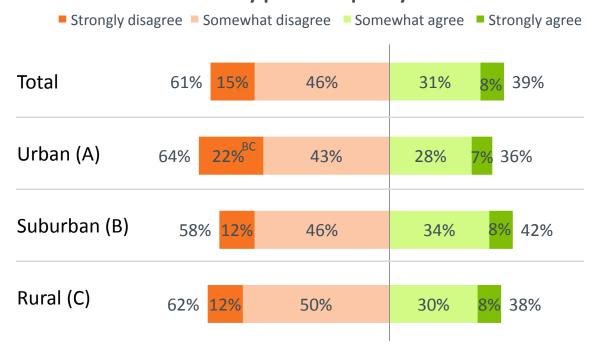
BASE: Qualified Respondents Total (n=1000); Urban (n=298); Suburban (n=468); Rural (n=234) Low-Income: Urban (n=231); Suburban (n=226); Rural (n=185)

Q710 Please tell how strongly you agree or disagree with each of the following statements.



Physicians generally disagree that the adoption of Medical Homes will hinder their ability to provide their patients quality care.

The widespread adoption of Medical Homes will hinder my ability to provide my patients quality care.





Demographics



Physician Demographics

	Total (n=1000)	PCPs (n=690)	PEDIATRICIANS (n=310)			
GENDER						
Male	62%	67%	43%			
Female	38%	33%	57%			
	Total (n=1000)	PCPs (n=690)	PEDIATRICIANS (n=310)			
AGE						
Under 42	20%	19%	24%			
42-60	20% 51%	19% 52%	24% 47%			
42-60	51%	52%	47%			

	Total (n=1000)	PCPs (n=690)	PEDIATRICIANS (n=310)		
YEARS SINCE GRADUATING MEDICAL SCHOOL					
Less than 11	10%	9%	13%		
11-20	26%	25%	27%		
21-30	24%	24%	20%		
31-40	30%	30%	30%		
Greater than 40	11%	11%	10%		
Mean	26.2	26.5	25.2		
Median	27	27	26		
	Total (n=1000)	PCPs (n=690)	PEDIATRICIANS (n=310)		
YEARS SINCE COMPLETE	(n=1000)	(n=690)			
YEARS SINCE COMPLETE Less than 11	(n=1000)	(n=690)			
	(n=1000) ING RESIDE	(n=690) NCY	(n=310)		
Less than 11	(n=1000) ING RESIDE 21%	(n=690) NCY 20%	(n=310) 23%		
Less than 11 11-20	(n=1000) ING RESIDE 21% 24%	(n=690) NCY 20% 24%	(n=310) 23% 24%		
Less than 11 11-20 21-30	(n=1000) ING RESIDE 21% 24% 23%	(n=690) NCY 20% 24% 23%	(n=310) 23% 24% 22%		
Less than 11 11-20 21-30 31-40	(n=1000) ING RESIDE 21% 24% 23% 28%	(n=690) NCY 20% 24% 23% 28%	(n=310) 23% 24% 22% 29%		

Physician Demographics

	Total (n=1000)	PCPs (n=690)	PEDIATRICIANS (n=310)
MEDICAL PRACTICE			
Mostly office- or clinic-based	83%	82%	86%
Equally hospital-based and office/clinic-based	7%	7%	5%
Mostly hospital- or lab-based	3%	3%	2%
Exclusively hospital- or lab-based	5%	5%	5%
Mostly hospice-based	*	*	1%
Mostly long-term care facility-based	1%	1%	*
Other	1%	1%	1%

	Total (n=1000)	PCPs (n=690)	PEDIATRICIANS (n=310)
OFFICE			
Single-specialty partnership or group (2 or more physicians)	41%	38%	51%
Multi-specialty partnership or group (2 or more physicians)	33%	33%	32%
Solo practice	27%	29%	16%

	Total (n=1000)	PCPs (n=690)	PEDIATRICIANS (n=310)	
AGES OF YOUR PATIENT POPULATION				
18 years or younger (pediatric)	20%	*	99%	
19 years to 64 years (adult)	9%	11%	1%	
19 years and older (adult and geriatric)	32%	41%	-	
65 years and older (geriatric)	7%	9%	-	
All ages	31%	39%	*	

Physician Demographics

	Total (n=1000)	PCPs (n=690)	PEDIATRICIANS (n=310)
PATIENTS SEEN PE			
Less than 51	14%	14%	18%
51-100	52%	55%	42%
101-200	30%	28%	36%
201-250	2%	2%	2%
More than 250	2%	2%	2%
Mean	104.1	102.8	109.1
Median	100	100	100

	Total (n=1000)	PCPs (n=690)	PEDIATRICIANS (n=310)		
PRESCRIPTIONS WRITTEN/MEDICATION DISPENSED PER WEEK					
Less than 51	26%	20%	52%		
51-100	29%	28%	31%		
101-200	27%	30%	15%		
201-250	4%	5%	1%		
More than 250	14%	18%	1%		
Mean	150.0	170.1	70.8		
Median	100	120	50		