Assuring an Adequate Primary Care Workforce and Transforming Primary Care

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Abundant research evidence indicates that health systems and regions with a strong foundation of primary care have:

- Better population health outcomes
- Better quality of care
- More preventive care
- Lower costs
- More equitable care and mitigation of health disparities
But the Primary Care Workforce Foundation in the US is Crumbling

- Plummeting numbers of new physicians entering primary care
- Primary care shortages throughout US
- Growing problems of access to primary care and “medical homelessness”
Family Medicine Residency Positions and Number Filled by U.S. Medical School Graduates

Proportions of Third-Year Internal Medical Residents Choosing Careers as Generalists, Subspecialists, and Hospitalists

Percent of New PAs Entering Family Medicine Parallels the Rise and Fall of MDs Going into Family Practice 1991-2005

*PAs graduating in year immediately preceding the census reference year are considered New Graduates.

Dr. Katherine J. Atkinson of Amherst, Mass., has a waiting list for her family practice; she has added 50 patients since November.
US Primary Care Health Professional Shortage Areas By County (2006)

Legend
- A Full PC HPSA (n=1381, 44.0%)
- A Partial PC HPSA (n=667, 21.2%)
- Not A PC HPSA (n=1093, 34.8%)

>750 vacancies for PCPs at Community Health Centers (2004)

Data Source: HRSA (08/03/2006) Prepared by The Robert Graham Center
Why Not Primary Care?

• Predisposing Factors
  – Underlying personality disposition, career aspirations
• Educational Environment
• Practice Environment
  – Compensation
  – Worklife Satisfaction
Feedback to UCSF Students About Their Interest in Family Medicine

“Why would you want to be a family doctor? They’re basically glorified triage nurses.”

“But you’re too intelligent for family practice!”

“Family practice is an evil plot by Congress!”

Source: Fam Med, 1995
The Widening Physician Payment Gap

- Diagnostic Radiology
- Orthopedic Surgery
- Primary Care
- Family Medicine

Source: Robert Graham Center
Percentage of Positions Filled With US Seniors vs Mean Overall Income By Specialty

“Across the globe doctors are miserable because they feel like hamsters on a treadmill. They must run faster just to stay still.”

Morrison and Smith, BMJ, 20001
A primary care physician with a panel of 2500 average patients would spend:

- 7.4 hours per day to deliver all recommended preventive care [Yarnall et al. Am J Public Health 2003;93:635]

- 10.6 hours per day to deliver all recommended chronic care services [Ostbye et al. Annals of Fam Med 2005;3:209]
A Comprehensive Strategy is Required to Revitalize Primary Care and Rebuild the Primary Care Workforce

• “Push” factors
  – Medical school admissions policies
  – Medical education orientation

• “Pull” factors
  – Financial incentives
    • Physician payment reform
    • Loan repayment and scholarships
  – Transforming primary care practices into high-performing, joyful workplaces

T Bodenheimer, K Grumbach, R Berenson. A Lifeline for Primary Care. NEJM 2009; 360:2693
What Do We Mean By The Patient Centered Medical Home?

- Rittenhouse & Shortell: 4 Cornerstones of the PCMH
- Primary Care
- Patient-Centered
- New Model Practice
- Payment Reform
  - Needs to be coordinated, multi-payer approach
Group Health Cooperative of Puget Sound
Primary Care Redesign Pilot

- Patient Centered Medical Home model piloted at one site in 2007
  - Avg PCP panel size reduced from 2327 to 1800
  - Longer face-to-face visits and scheduled time for phone and email encounters
  - Increased team staffing and teamwork
  - HIT
  - Panel management
Group Health PCMH Pilot: Controlled Evaluation 12 Month Outcomes

- Improved continuity of care
- Better patient experiences (6 of 7 measures)
- Better composite quality of care score
- Reductions in ED visits and Ambulatory Care Sensitive Hospitalizations
- No difference in total costs

Source: R Reid et al. Am J Managed Care 2009;15:e71
Group Health PCMH Pilot: Effect on Clinic Staff

- Baseline Percent with High Level Emotional Exhaustion:
  - Control Sites: 34.5%
  - PCMH Site: 33.3%

- 12 Months Percent with High Level Emotional Exhaustion:
  - Control Sites: 30.0%
  - PCMH Site: 9.7%

p = .02
From Medical Homes to Medical Neighborhoods

- High performing primary care necessary but not sufficient
- Concept of “Accountable Care Organizations”
  - True integrated delivery systems (Kaiser, Henry Ford, VA)
  - Virtual organizations
1° Care

2° Care

3° Care

Medical Home

Medical Neighborhood
The Concept of Integrated Care

• Ann Beal, Aetna Foundation:
  – “Integrated health care starts with good primary care and refers to the delivery of comprehensive health care services that are well coordinated with good communication among providers; includes informed and involved patients; and leads to high-quality, cost-effective care. At the center of integrated health care delivery is a high-performing primary care provider who can serve as a medical home for patients.”
Transforming the Delivery of Primary Care is a Workforce Policy