



CALIFORNIA
HEALTHCARE
FOUNDATION

SNAPSHOT

Uncoordinated Care: A Survey of Physician and Patient Experience

2007

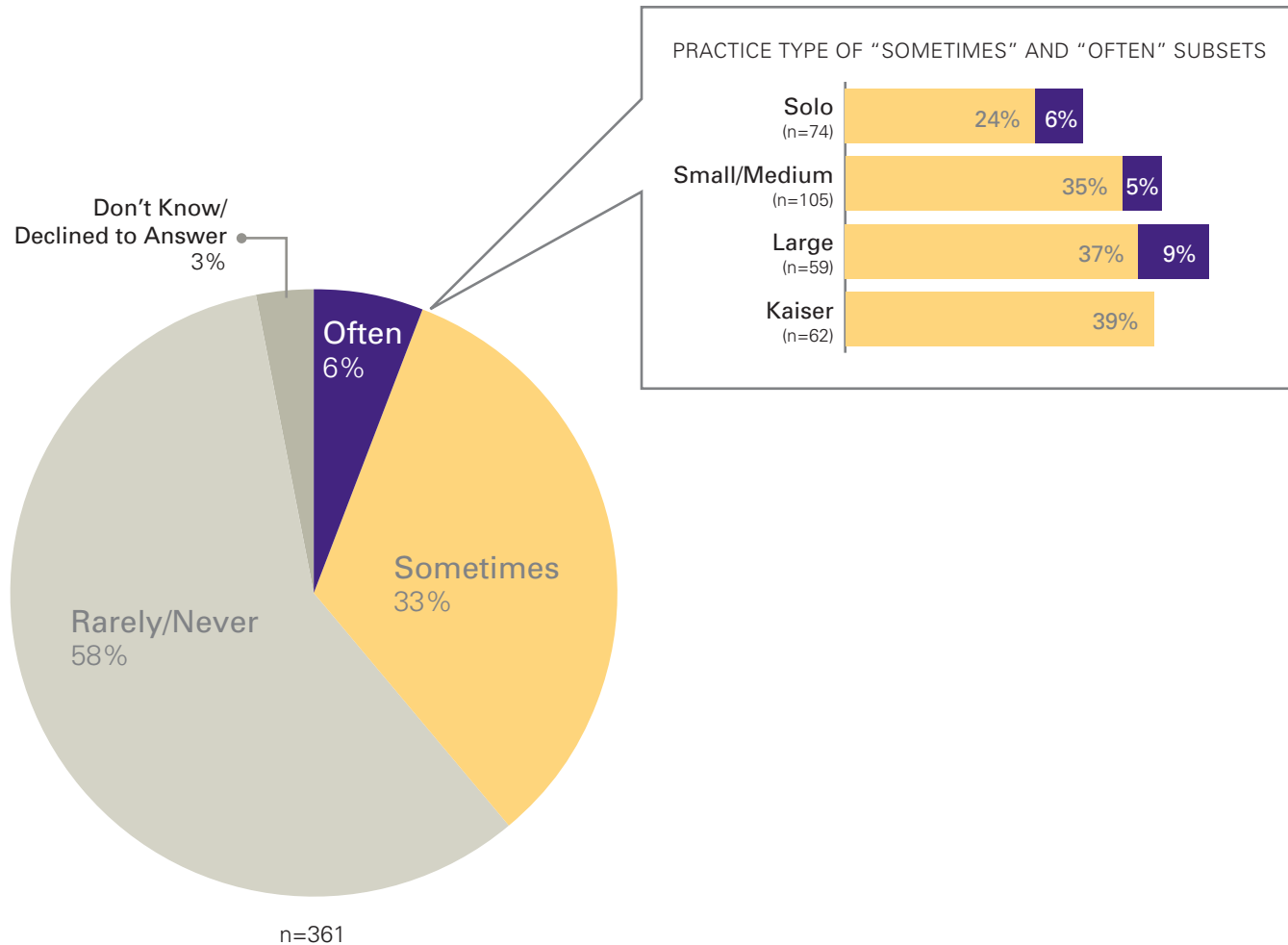
Introduction

California's 36,000 primary care doctors are the point of entry for most patients needing care. In our fragmented health care system, they are often the only doctors who are responsible for the overall picture of a patient's health and health care. How well do they coordinate care and communicate with their patients? The California HealthCare Foundation asked Harris Interactive to survey the state's primary care physicians for a check-up on how they view their relationship with their patients.

- Four of every ten physicians report that their patients have had problems with coordination of their care in the last 12 months.
- More than 60 percent of doctors report that their patients "sometimes" or "often" experience long wait times for diagnostic tests.
- Some 20 percent of doctors report having their patients repeat tests because of an inability to locate the results during a scheduled visit.
- In spite of reporting difficulties coordinating care, physicians rarely use email to communicate with other providers.

The report finds that solo practitioners are better at some things, like coordination of care, but lag in others, like electronic access to test results and notifications of potentially dangerous drug interactions, while large health care systems like Kaiser Permanente perform better.

Patient Problems with Coordination of Care Across Providers and Sites, 2007



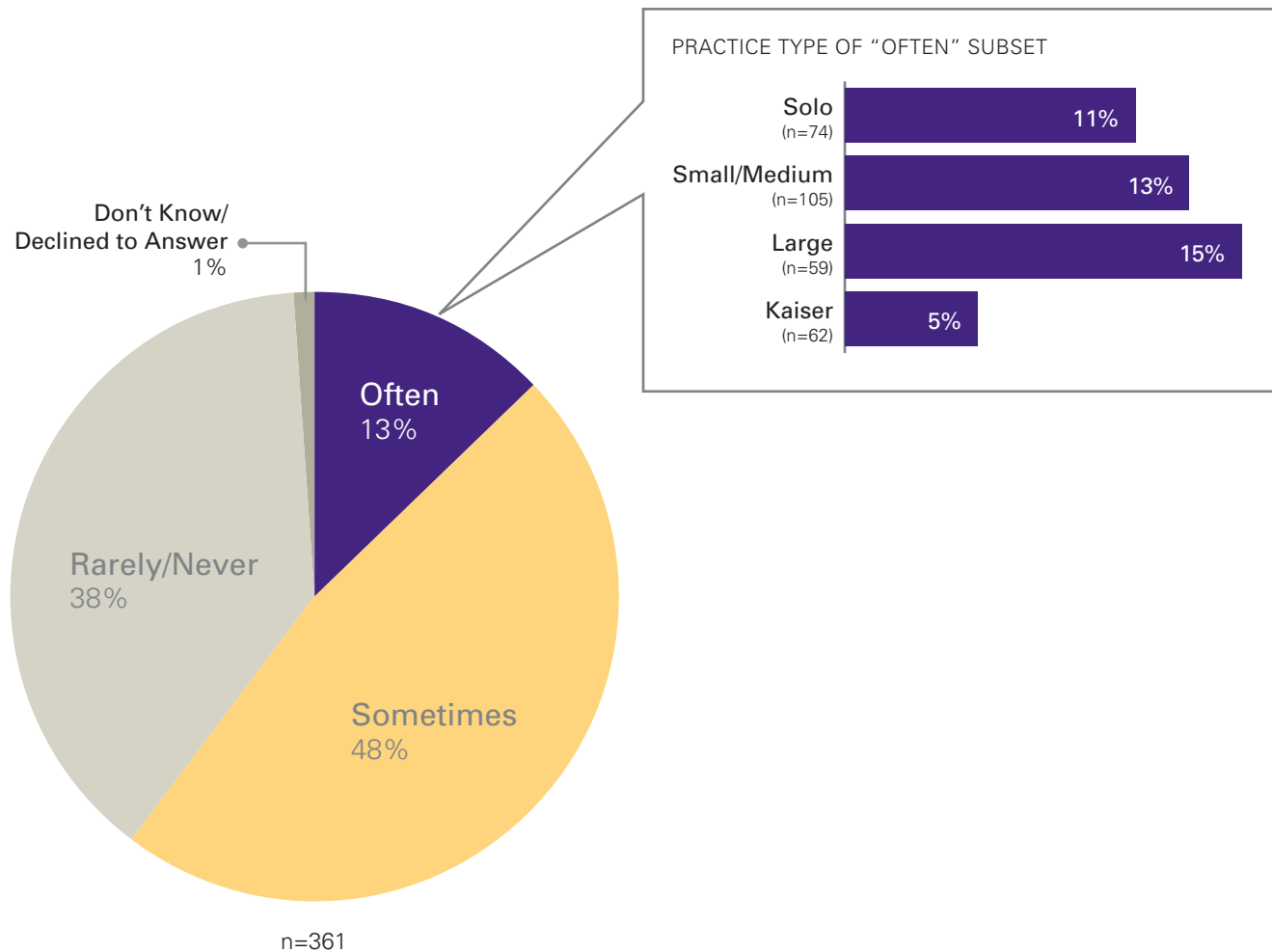
Uncoordinated Care Survey

About 40 percent of California physicians reported that over the past 12 months their patients experienced problems because care was not well coordinated across multiple sites or providers.

Solo practices were least likely to report that their patients experienced problems with coordination.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Frequency of Long Wait Times for Patients Needing Diagnostic Tests, 2007



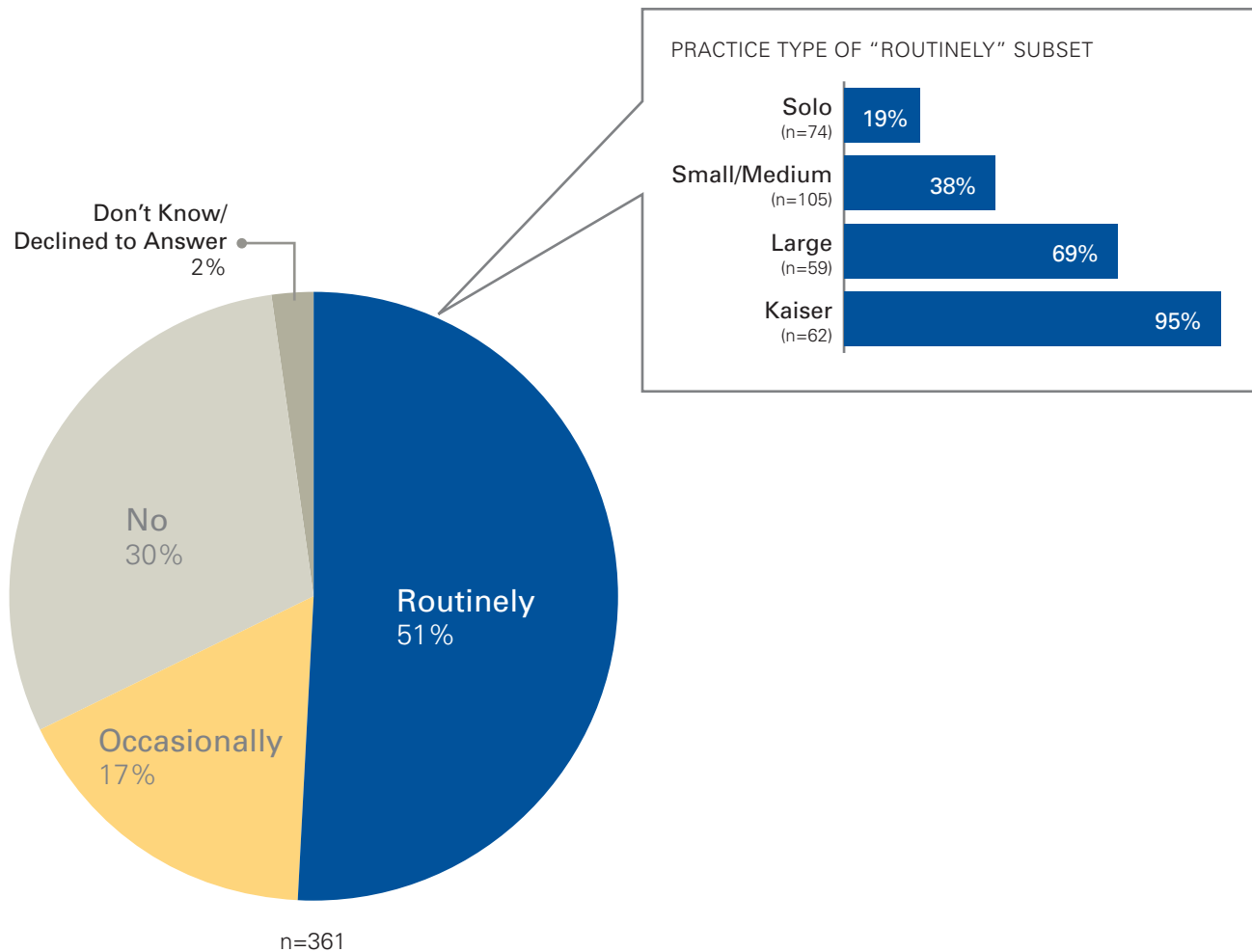
Uncoordinated Care Survey

Thirteen percent of California physicians report their patients often experience long waiting times for diagnostic tests.

Long waiting times are less frequent within Kaiser's fully integrated system.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Electronic Access to Diagnostic Test Results, 2007



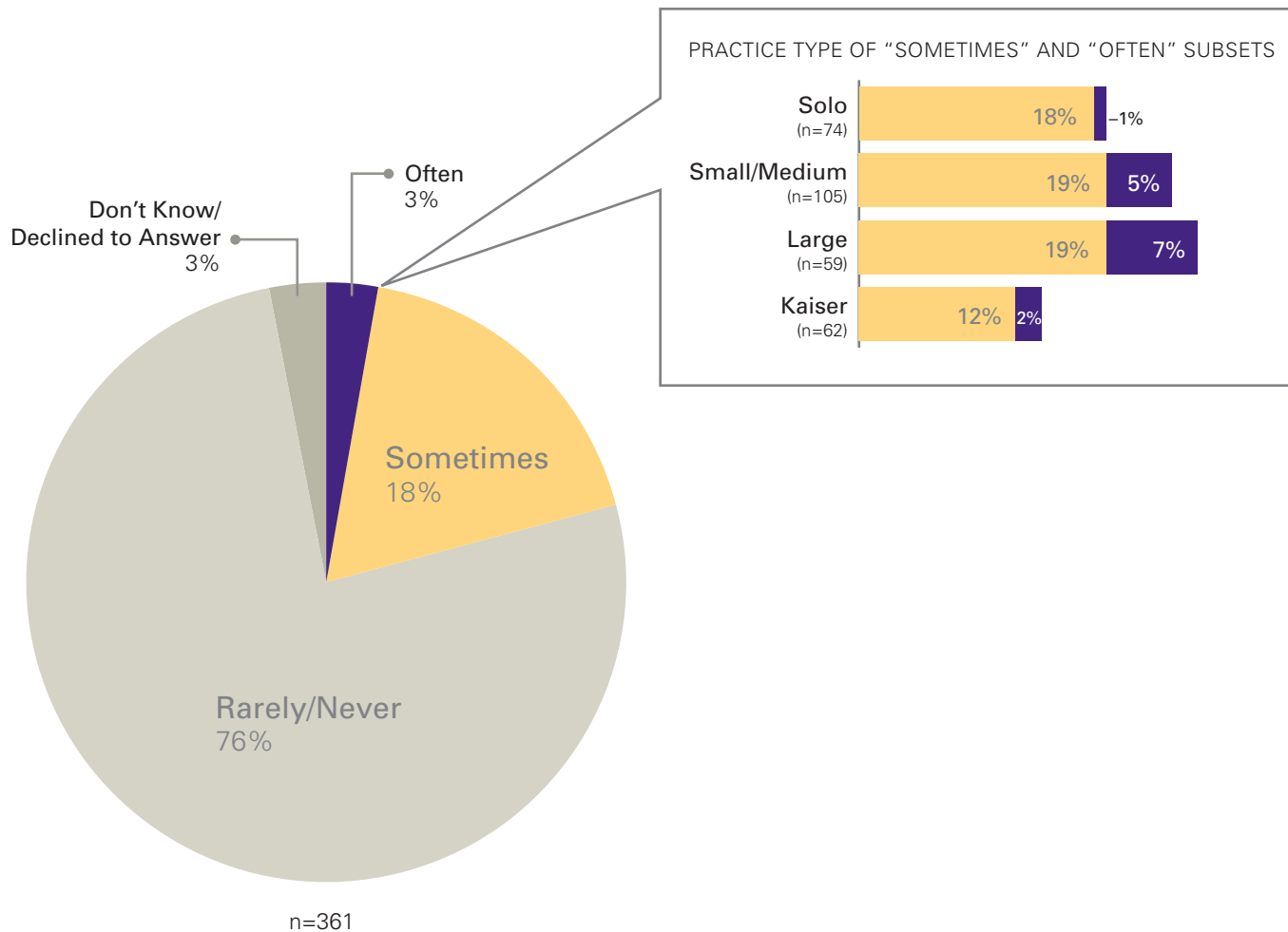
Electronic access to diagnostic test information allows results to be viewed earlier, decreases the ordering of unnecessary tests, and enables more timely intervention.

Over half of the physicians surveyed reported they routinely access test results electronically. The larger the group, the more likely that the physicians access test results electronically.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

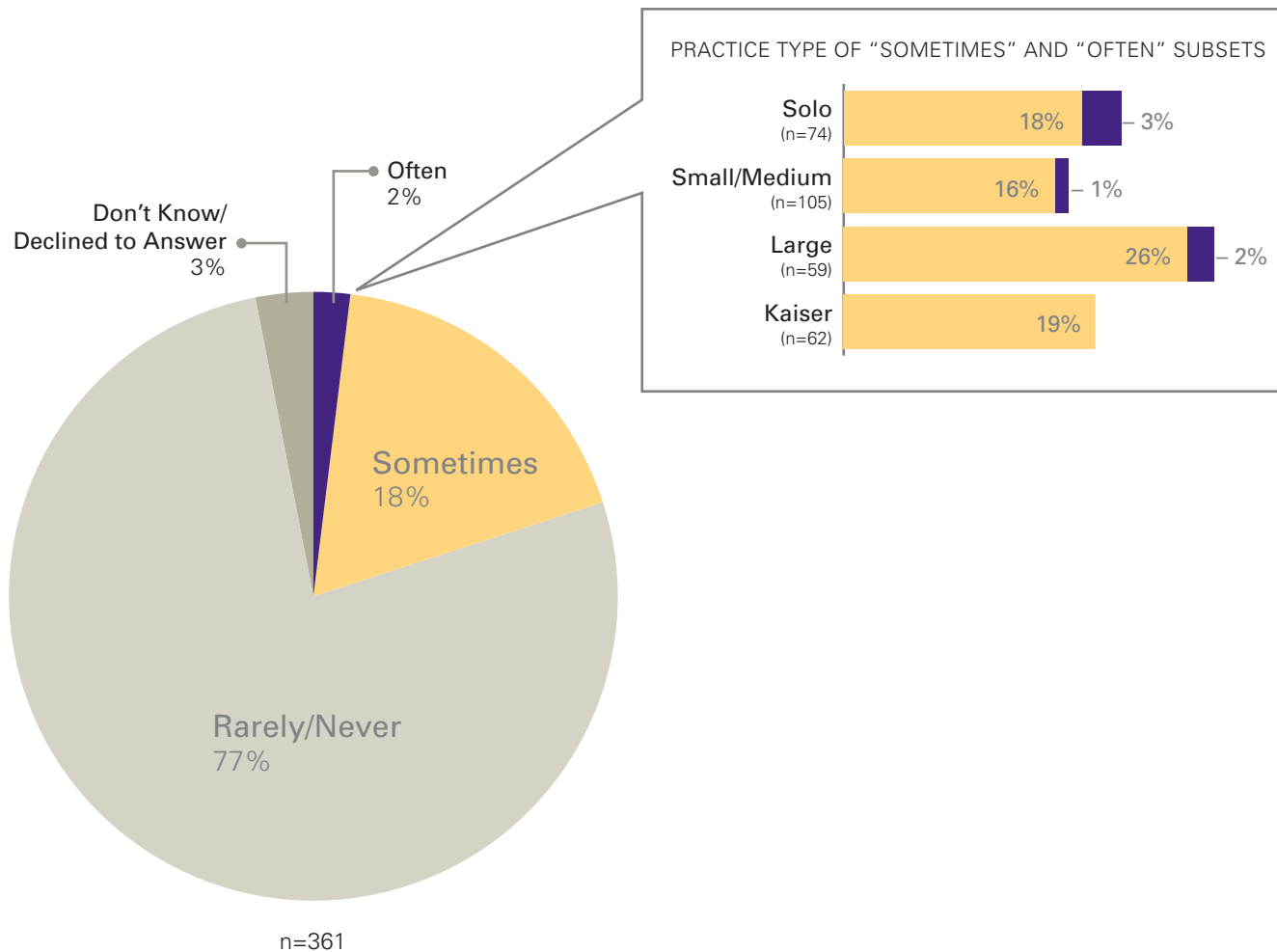
Frequency of Repeated Tests or Procedures, 2007

Over the past 12 months, 21 percent of physicians in California reported that their patients sometimes or often had tests repeated because the findings were not available at the time of the patient's scheduled visit.



Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Patients Receiving Untimely or Inappropriate Follow-up on Positive Test Results, 2007

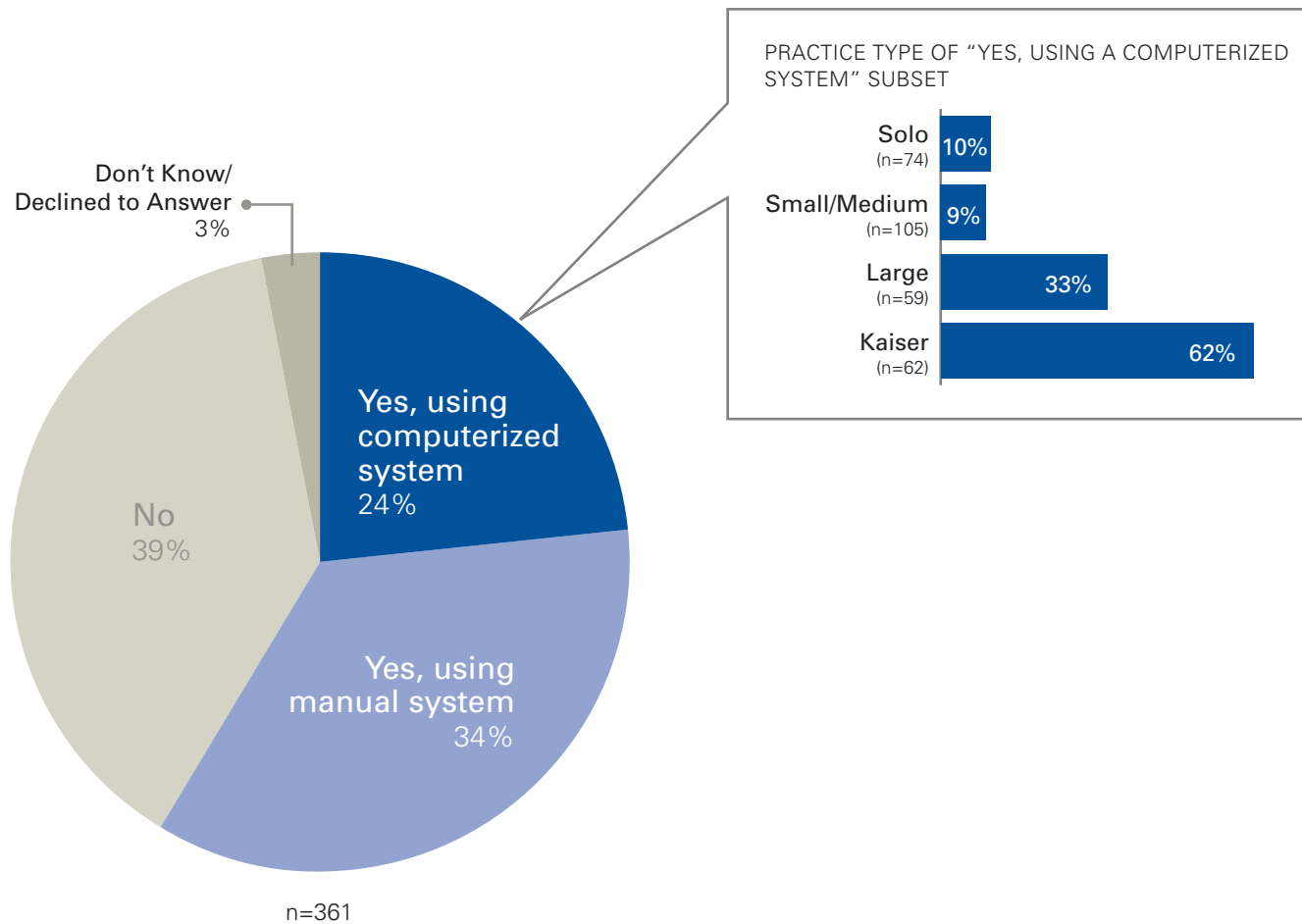


Uncoordinated Care Survey

Twenty percent of California physicians reported that their patients may not have received timely or appropriate follow-up on positive test results, which can lead to complications and delays in treatment.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Receipt of Patient Test Result Alerts, 2007



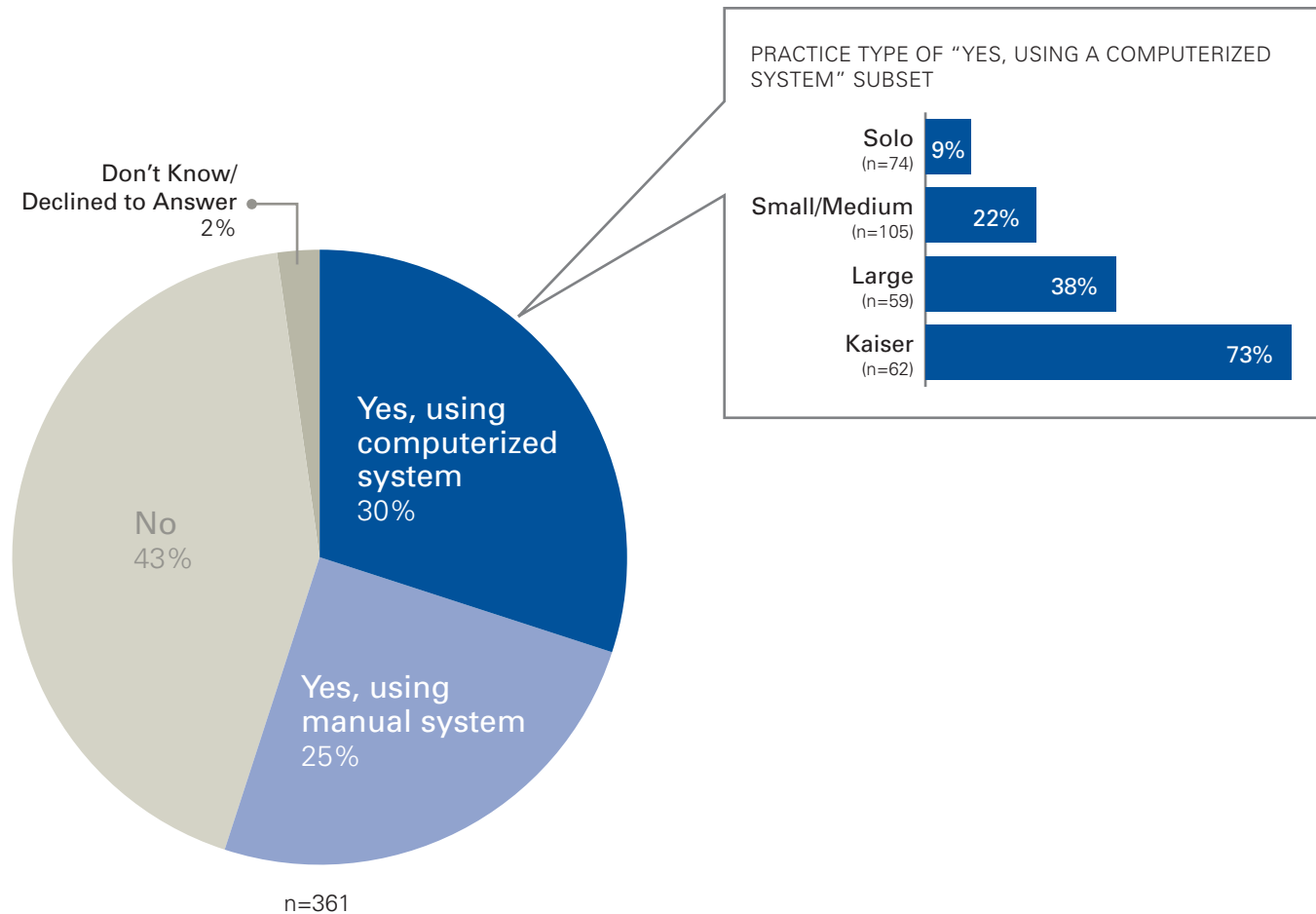
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Almost 60 percent of California's physicians receive an alert to provide patients with test results. However, less than 25 percent of these are received using a computerized system.

Kaiser's physicians receive automated alerts or prompts almost twice as often as do physicians at other large practices.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Physician Receipt of Drug Dose/Interaction Alert, 2007



Uncoordinated Care Survey

Over 40 percent of California's physicians do not have a process in place to receive notification about a potential drug dose or interaction.

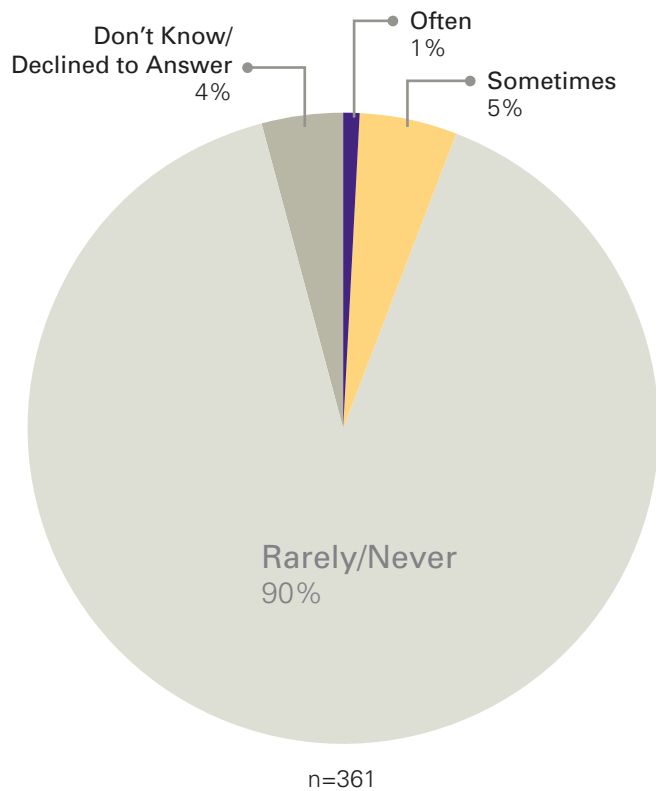
Physicians belonging large practices are more likely to receive the prompt electronically.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

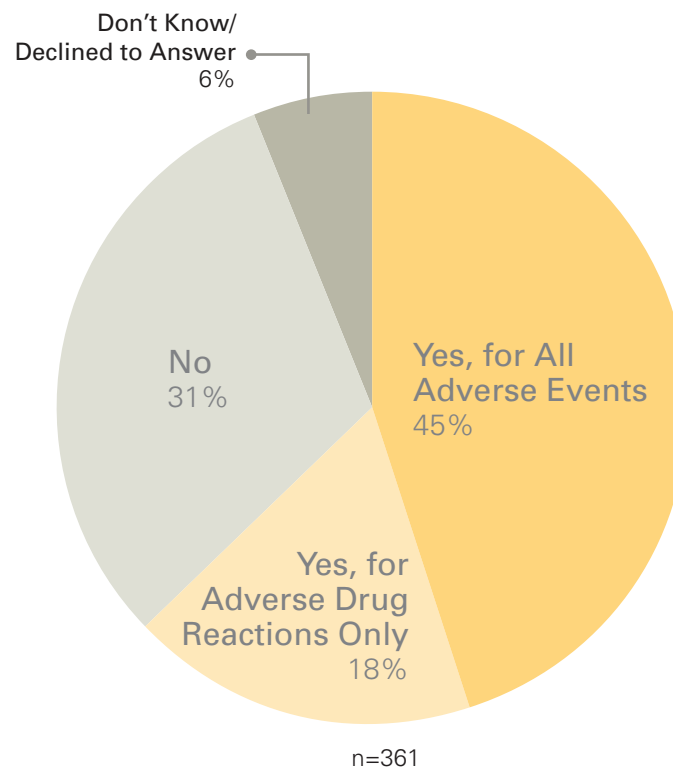
Adverse Drug Events, 2007

Uncoordinated Care Survey

Received Wrong Drug/Dose or Preventable Drug Interaction



Documented Process for Adverse Events

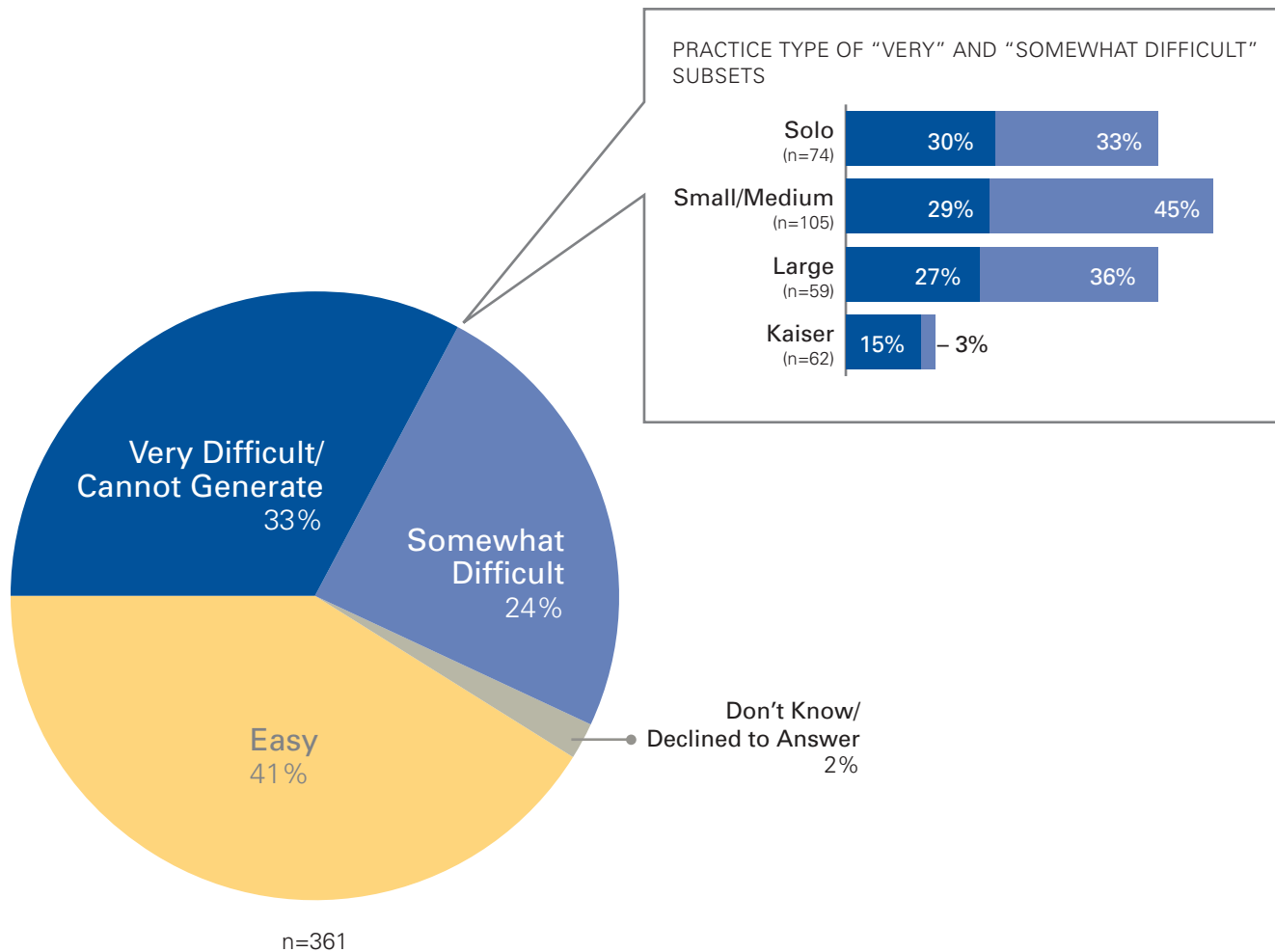


Six percent of California physicians reported that their patients may have received the wrong drug, wrong dose, or had a preventable drug interaction.

Thirty-one percent of physicians do not have a documented process for follow-up and analysis of adverse events, including drug reactions.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Patient Medication List Compilation, 2007



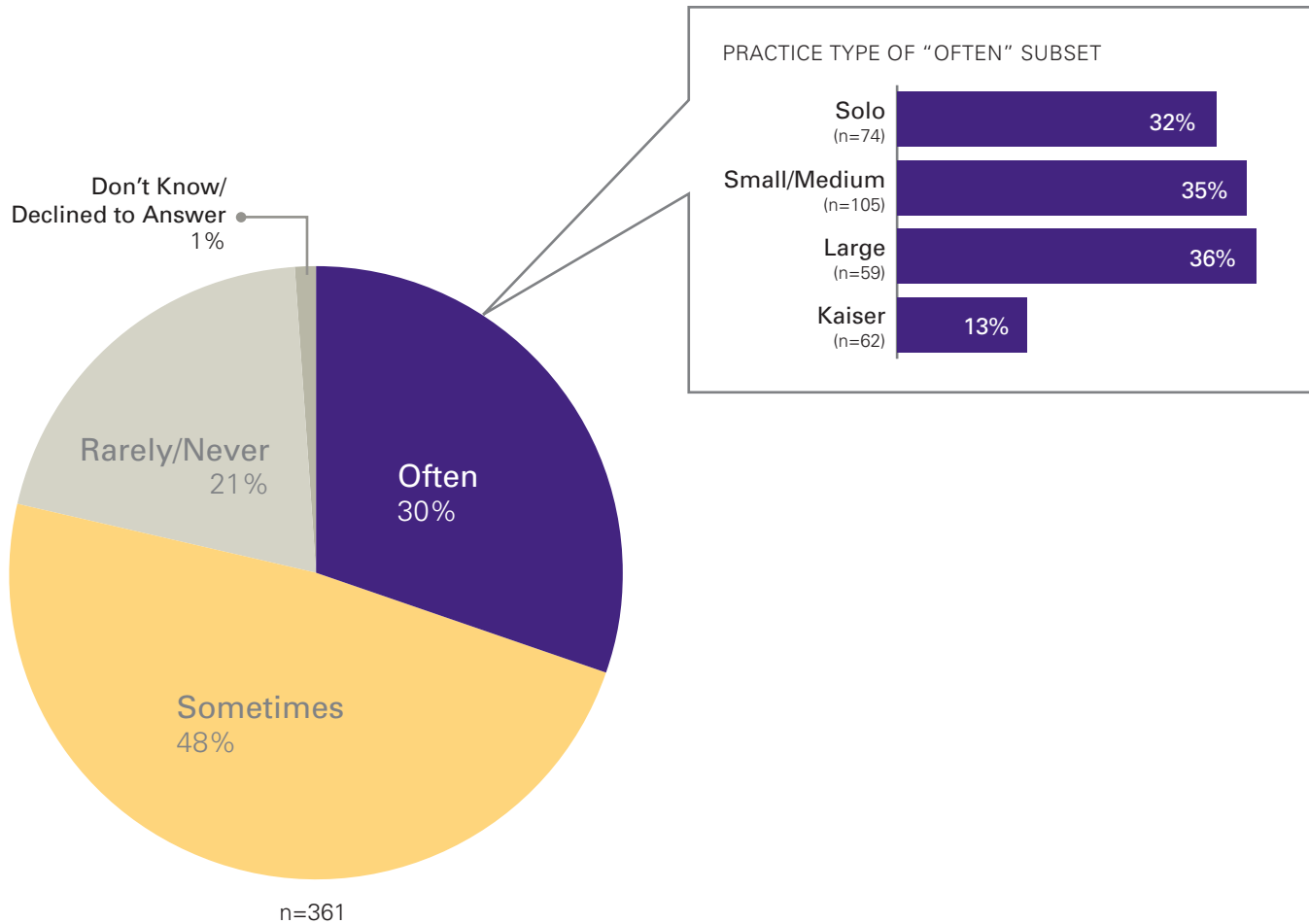
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Fifty-seven percent of physicians reported that it was difficult to compile a comprehensive list of their patient's medications, including those from other doctors, using their current patient medical records system.

Kaiser physicians have less difficulty generating a list of medications than physicians in other practices.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

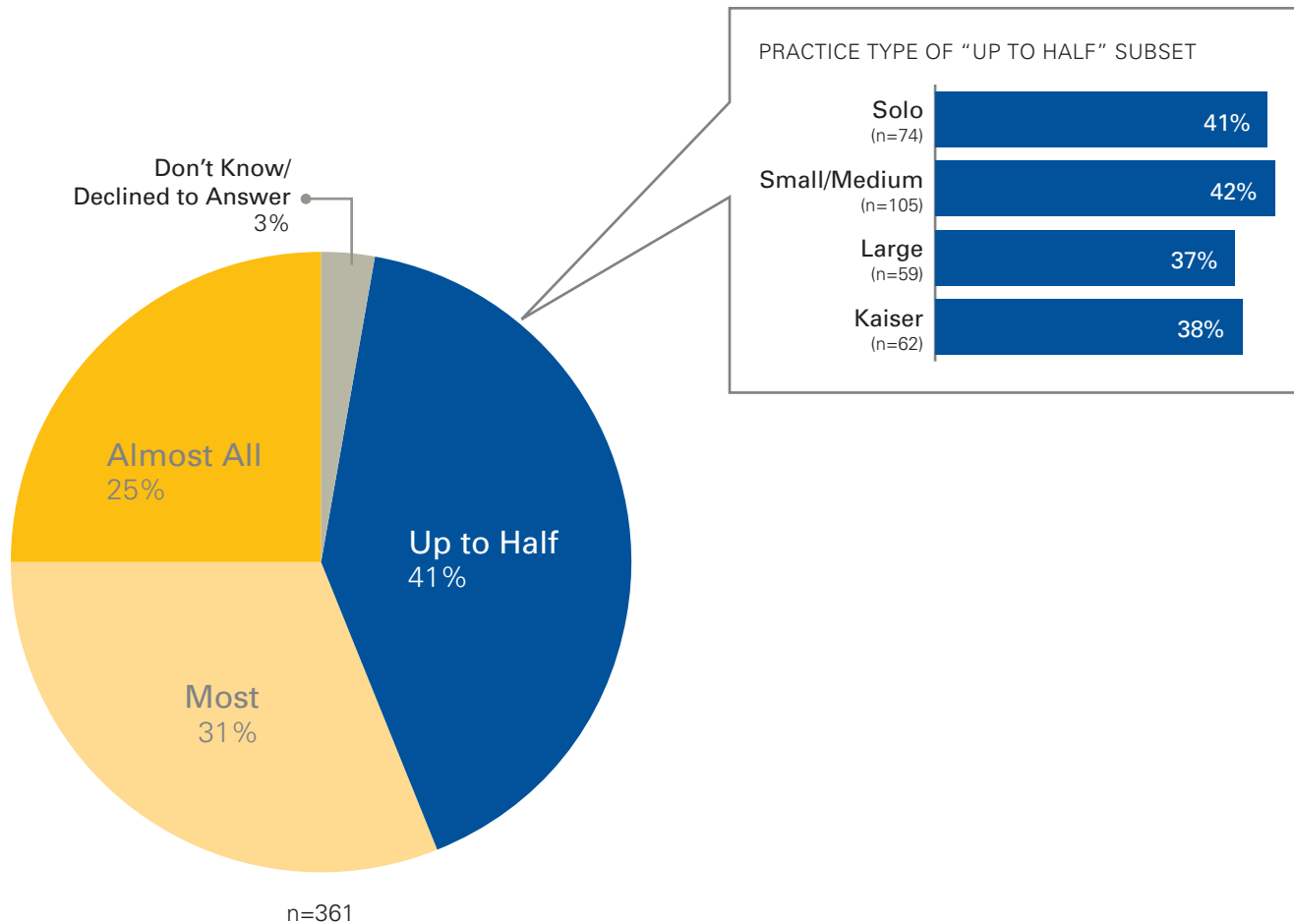
Patients Experiencing Long Wait Times for Specialists, 2007



Almost one-third of California physicians say their patients often experience long wait times for specialist/consultant visits.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Physicians Receiving Patient Referral Results, 2007

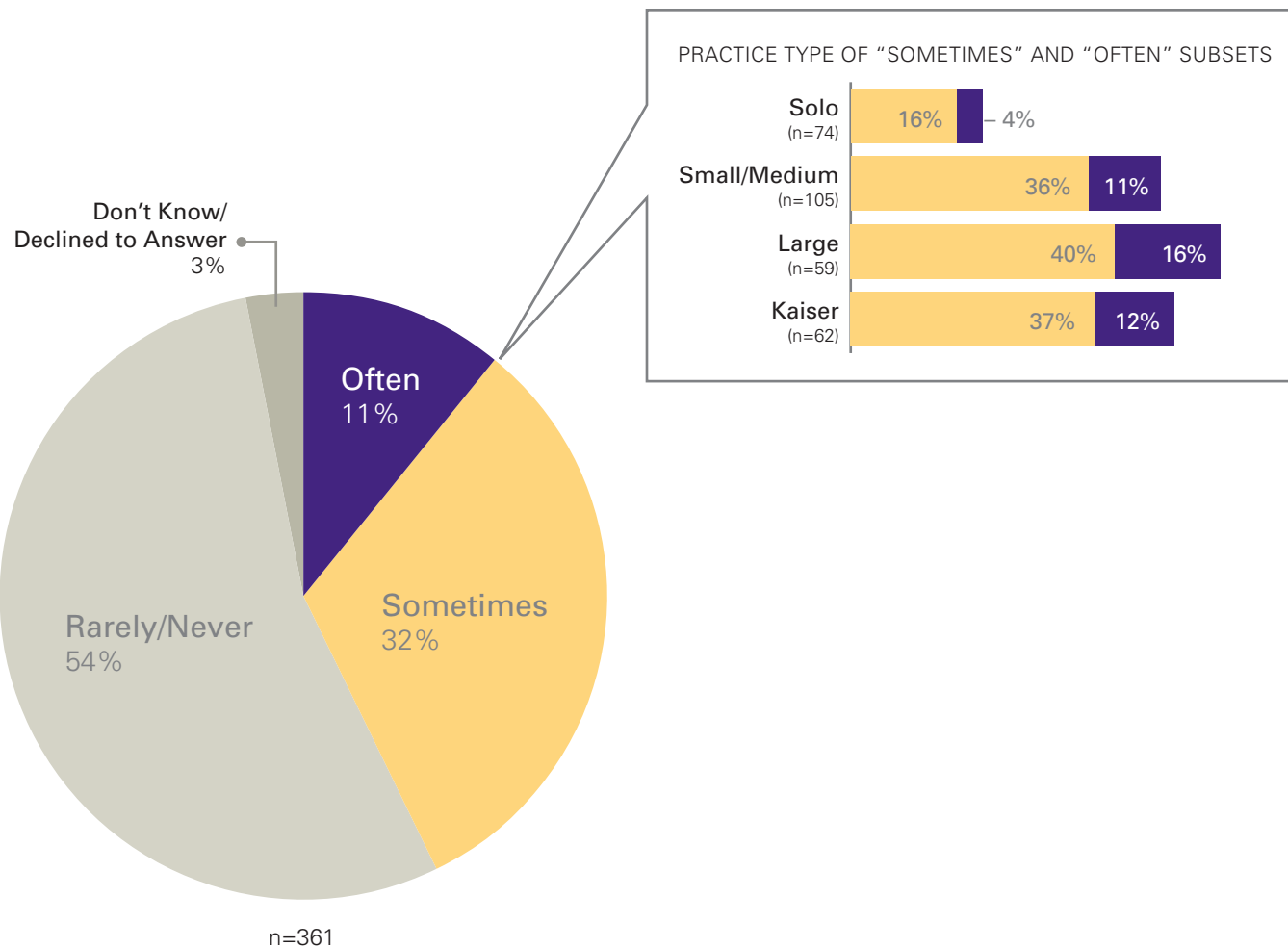


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Forty-one percent of California physicians reported problems with receipt of referral results. For these physicians, results were missing up to half of the time.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Patient Records/Clinical Information Unavailable at Time of Visit, 2007



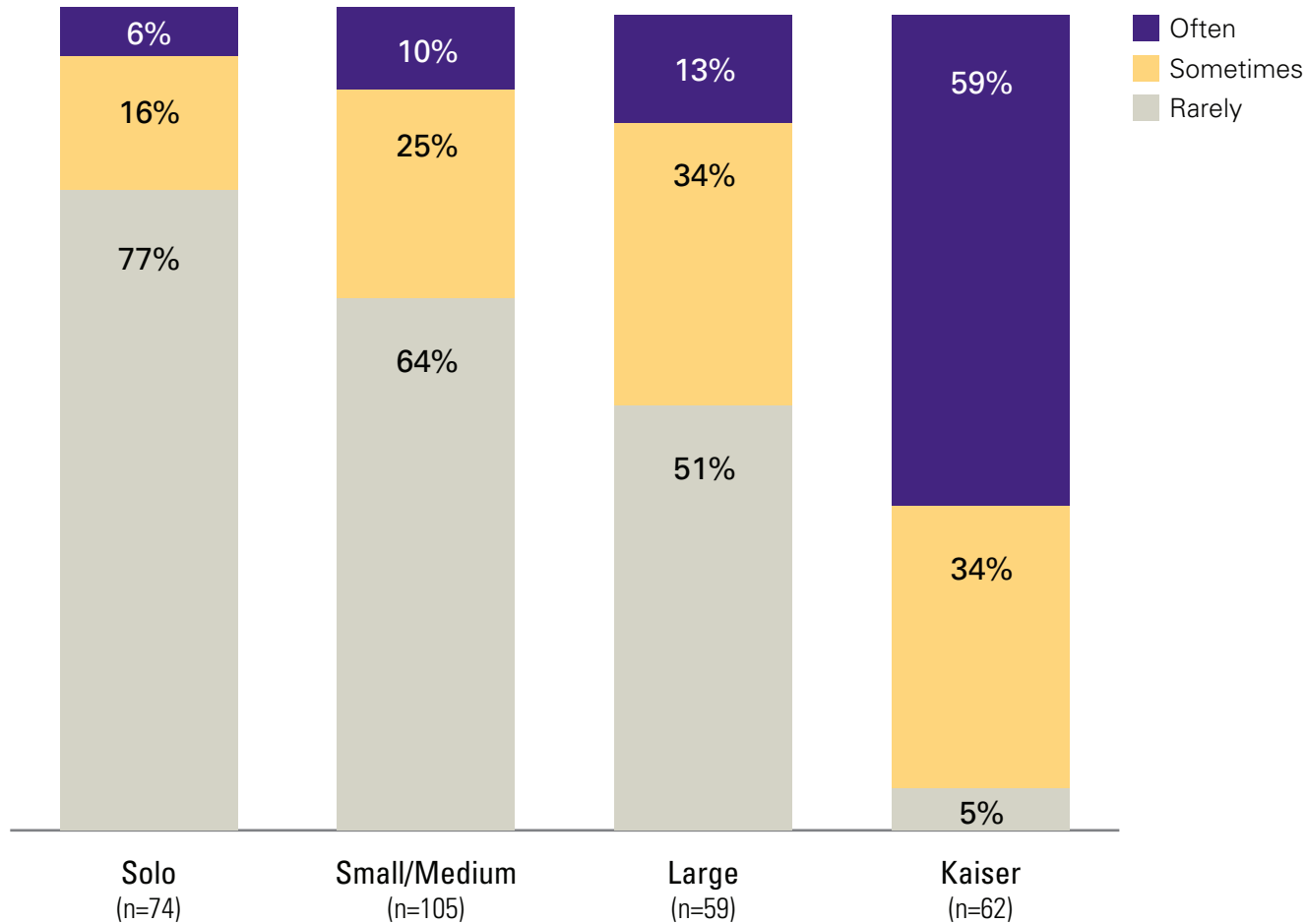
Source: Harris Interactive, *Health Perspectives in California*, June 2007.

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Over 40 percent of California physicians reported that their patient's medical record or other relevant clinical information may not have been available at the time of a scheduled visit.

Solo practices are least likely to report that their patients have had a negative experience due to a lack of coordination of information in their office.

Email Communication with Other Physicians, by Practice Type, 2007

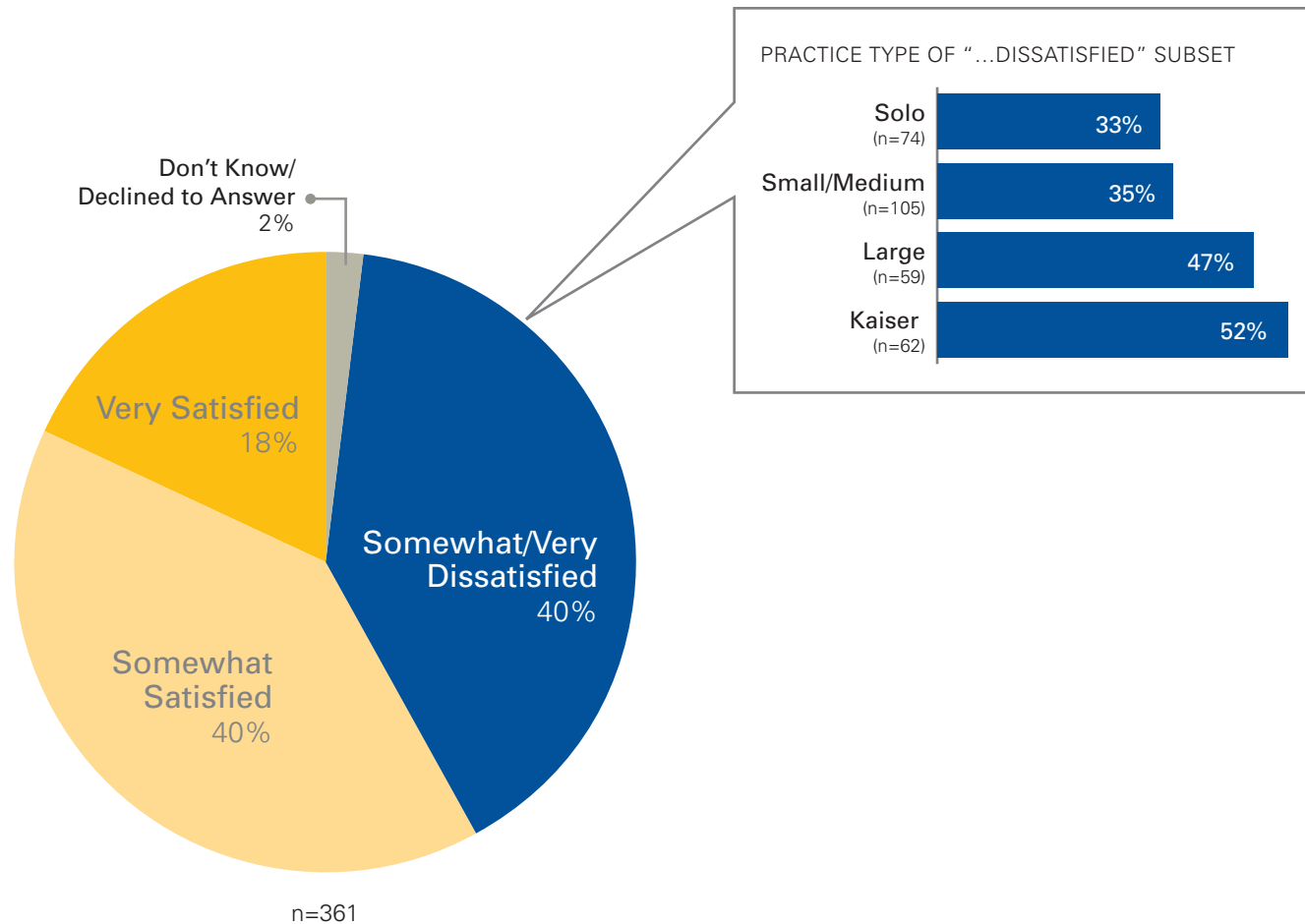


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In spite of reporting difficulties with coordination of care, physicians rarely use email to communicate with other physicians. This is particularly true in small and solo practices.

Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Physician Satisfaction with Time Spent per Patient, 2007



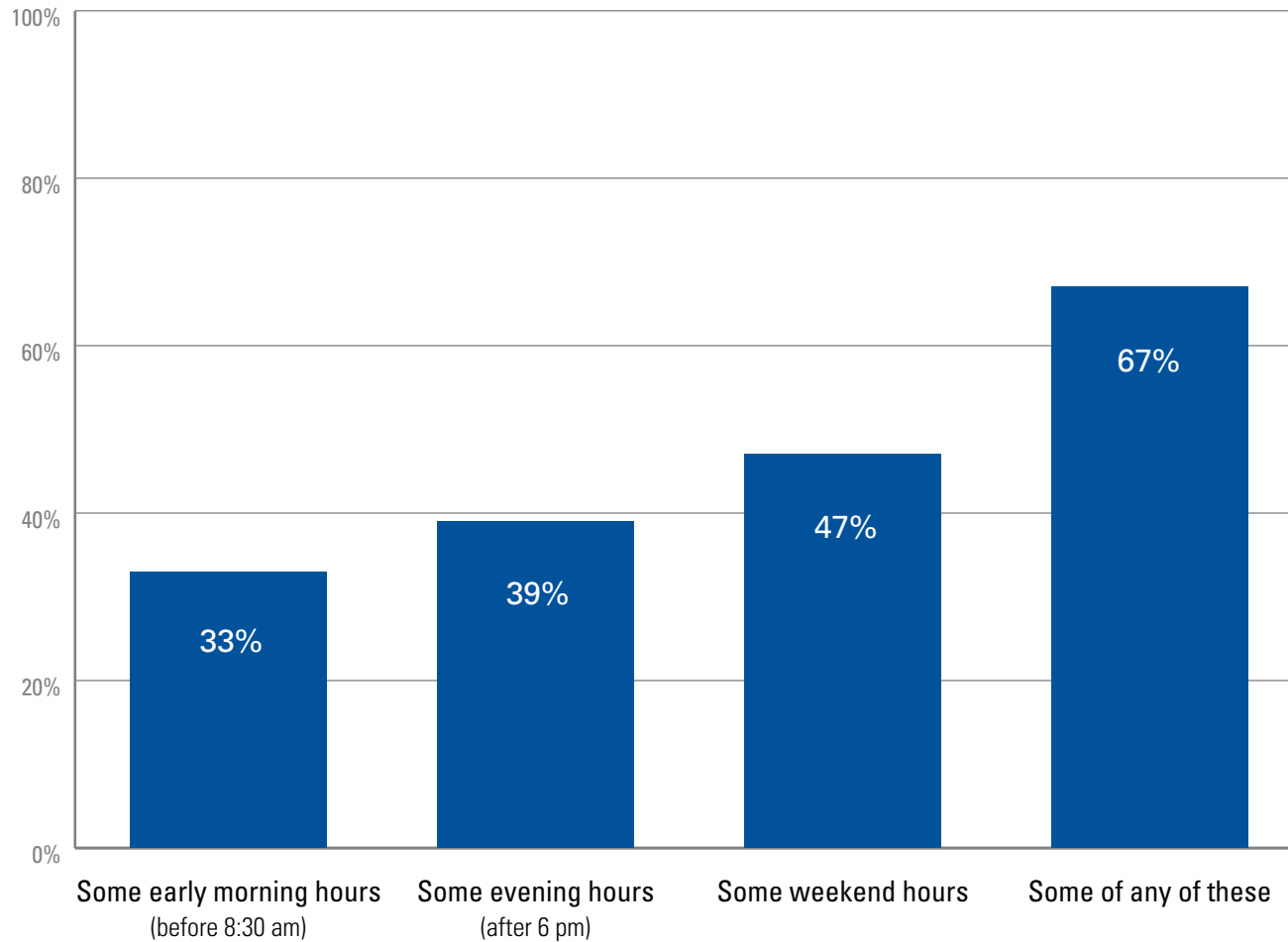
Sources: Harris Interactive, *Health Perspectives in California*, June 2007. The Commonwealth Fund, *Diagnostic Scope of Exposure to Primary Care Physicians in Australia, New Zealand, and the U.S.*, June 2007.

Uncoordinated Care Survey

Forty percent of California physicians wish they could spend more time with their patients. Large practices, including Kaiser, were more likely to report dissatisfaction with the amount of time spent per patient.

The average American spends about 30 minutes per year with a primary care physician. The U.S. Prevention Services Task Force recommends an average of 37 minutes a year for children and 40 minutes for adults.

Office Hours Available to Patients, 2007

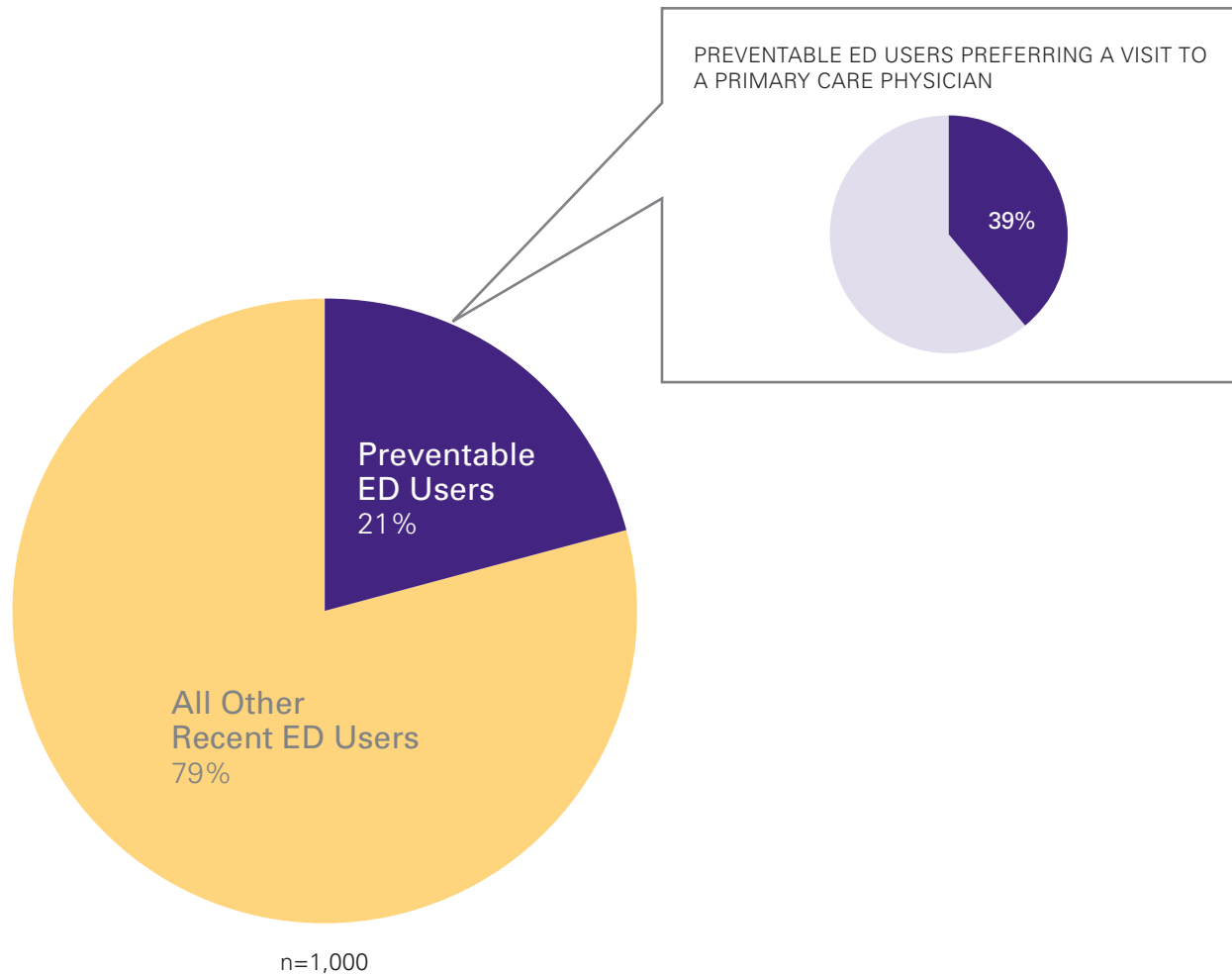


Source: Harris Interactive, *Health Perspectives in California*, June 2007.

Uncoordinated Care Survey

Over two-thirds of California physicians report that they offer either early morning, evening, or weekend appointments.

Preventable ED Visits*, 2006



*ED (emergency department) users are those whose last visit to the ED either (a) occurred during weekday business hours and was for a problem that could have been treated by a PCP or; (b) was for a problem that could have waited longer than 24 hours to treat.

Source: Harris Interactive, *Exploring ED Use in California*, July 2006.

Uncoordinated Care Survey

In California, the lack of access to a PCP is the number one reason patients go to the emergency department, according to primary care and emergency physicians.

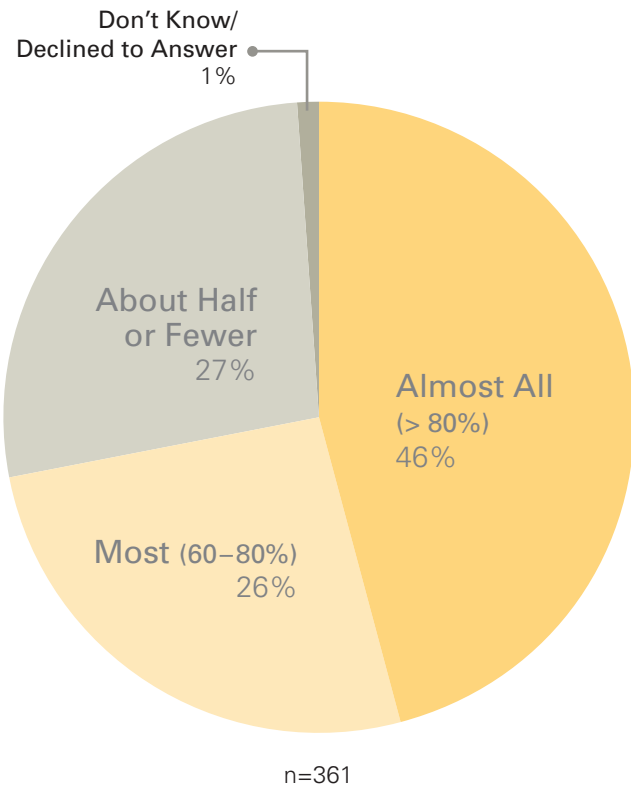
Of the 21 percent of patients whose visits could have been prevented, almost 40 percent said they would have gone to a PCP instead of the ED if they could have gotten an appointment within 1 to 3 days.

Same Day Appointment Availability, 2007

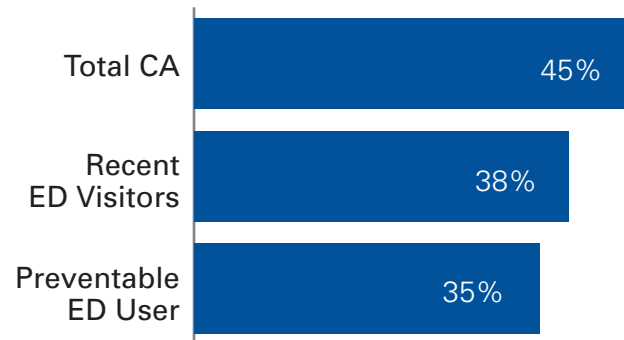
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In a recent survey, 46 percent of primary care physicians reported that their patients were able to get a same day appointment. However, 38 percent of recent ED visitors reported they were able to get a same day appointment the last time they needed medical attention.

Primary Care Physicians



Consumers



Source: Harris Interactive, *Exploring ED Use in California*, July 2006.

Patient Desire for Email Communication with Physicians, 2007

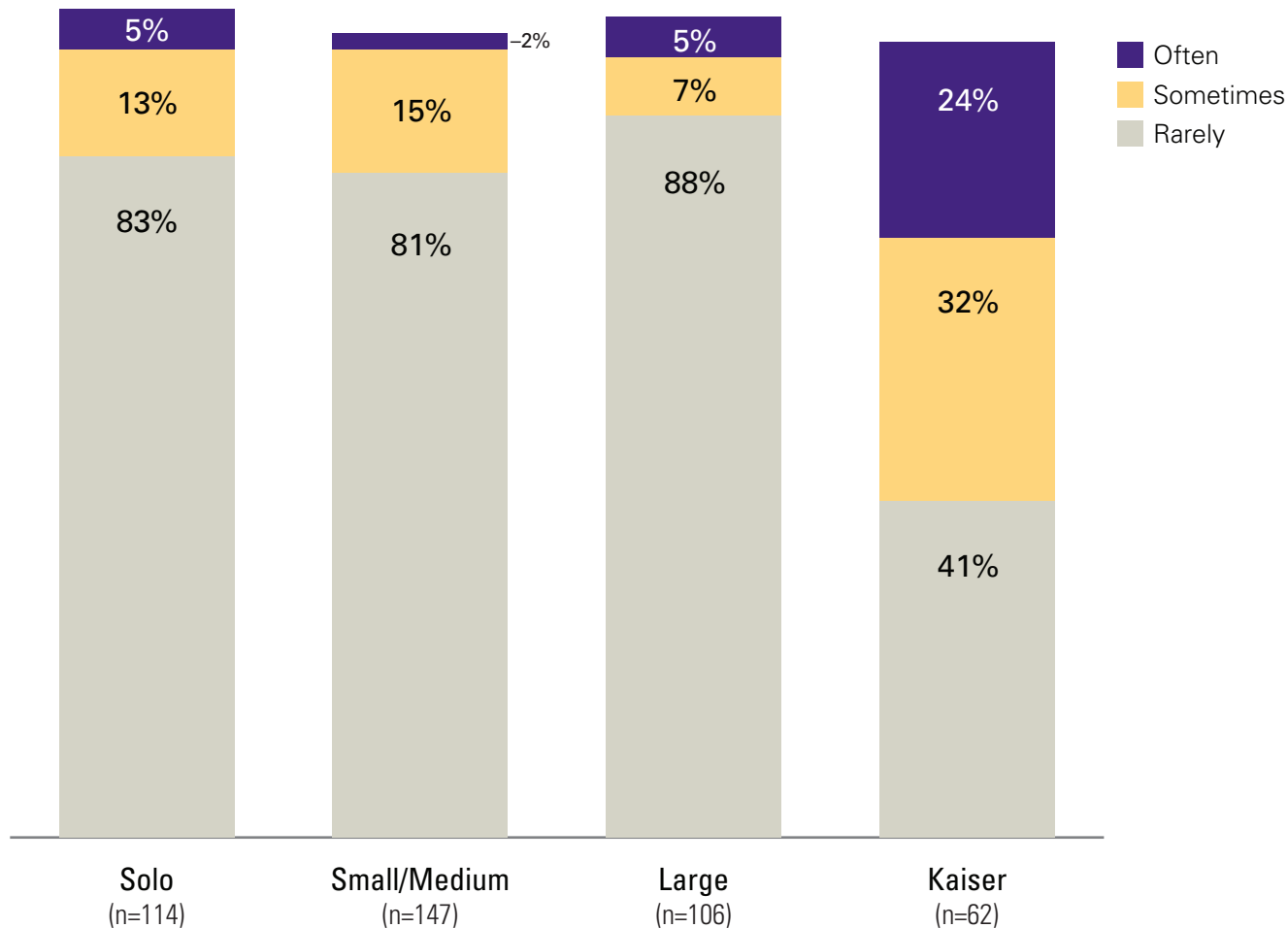
	USE IT NOW	WOULD LIKE TO HAVE IT
Email to communicate directly with my doctor	4%	74%
Ability to schedule a doctor's visit via the Internet	3%	75%
Receive the results of diagnostic tests via email	2%	67%
A home monitoring device that allows me to send medical information—like blood pressure readings or blood tests—to the doctor's office via the telephone or email	2%	57%
Reminders via email from my doctors when you are due for a visit or some type of medical care	4%	77%

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A survey of online adults indicates that the overwhelming majority would like to communicate directly with their physician via email, to receive the results of diagnostic tests via email, and to receive email reminders for visits or other medical care issues.

Source: Harris Interactive, *The Benefits of Electronic Medical Records Sound Good, but Privacy Could Become a Difficult Issue*, February 2007.

Email Communication with Patients, by Practice Type, 2007



Uncoordinated Care Survey

Online communication between physicians and patients has been identified as one of a limited number of information technologies targeted for rapid development by the American Health Information Community.* However, few physicians use email to communicate with patients regarding treatment.

*The American Health Information Community is a federal advisory board that makes recommendations on the development and adoption of health information technology to the U.S. Department of Health and Human Services.

Sources: Harris Interactive, *Health Perspectives in California*, June 2007 and *The Benefits of Electronic Medical Records Sound Good, but Privacy Could Become a Difficult Issue*, February 2007.

Conclusions

Clearly there is room for improvement in the interactions that primary care physicians have with other providers and their patients. Though technology can help—and larger medical groups have an advantage in the adoption of health information tools—it is not the final answer. Even physicians with access to medical record systems still report problems with developing comprehensive medication lists for their patients, problems with patient records sometimes being unavailable at the time of a patient visit, and delays receiving and retrieving patient referral results.

As frustrated as physicians may be with these information gaps, patients bear the brunt of the problem. Repeated tests and procedures, long waits to receive results from diagnostic tests, and inadequate follow-up have a negative impact on patients.

Improving communication channels, perhaps even expanding the use of modern mechanisms such as email, can go along way toward improving the quality and “patient-centeredness” of health care delivery.

Sources

The Commonwealth Fund, *Diagnostic Scope of Exposure to Primary Care Physicians in Australia, New Zealand, and the U.S.*, June 2007.

The Commonwealth Fund, *Physician's View on Quality of Care: Findings from The Commonwealth Fund National Survey of Physicians and Quality of Care*, May 2005.

Harris Interactive, *The Benefits of Electronic Medical Records Sounds Good but Privacy Could Become a Difficult Issue*, February 2007.

Harris Interactive, *Exploring ED Use in California*, June 2006.

Harris Interactive, *Health Perspectives in California*, June 2007.

The National Academy of Sciences, *Crossing the Quality Chasm: A New Health System for the 21st Century*, 2000.

Methodology

This chart pack includes key findings from Harris Interactive® survey.

The survey was conducted by mail with 361 interviews obtained between February 26 and May 23, 2007. The survey data was weighted by gender, years in practice, office or hospital setting, and specialty to represent the statewide population of physicians in California. Sixty-one of the respondents did not provide information on their practice size and therefore were excluded from practice size analyses.

The sample was drawn for the current AMA master file of all medical doctors practicing in California.

Acknowledgment

The instrument used in the survey of primary care physicians was based on one developed by The Commonwealth Fund for their international survey of physicians. The California HealthCare Foundation is grateful for the generosity of The Commonwealth Fund in allowing use of the survey and for advice in the development of this variation.

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