

State Innovation Model

May 18, 2015

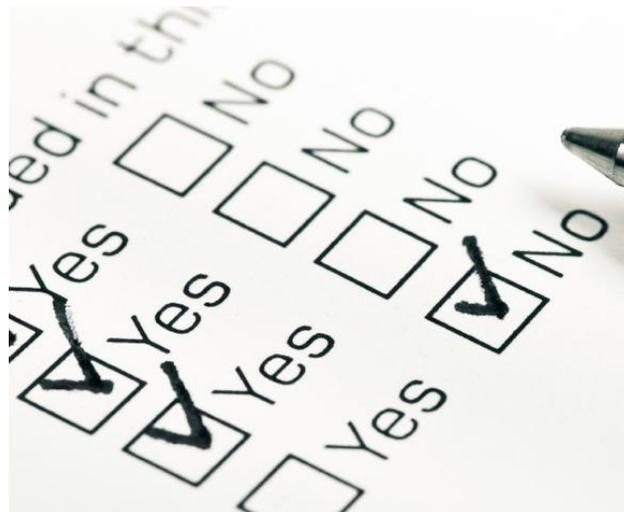
Healthcare Delivery, Behavioral Health, and Cultural Competency – New Physician Survey Released

A physician survey conducted by UConn Health and the Yale School of Public Health, and funded by the State Innovation Model, was released to the [Healthcare Innovation Steering Committee](#) on April 9th.

The survey asked 1,081 physicians across Connecticut questions ranging from their job satisfaction to their thoughts about patient-centered medical homes.

One component of the [State Innovation Model](#) (SIM) is payment reform. Previous estimates suggest that up to 60% of primary care physicians are participating in shared savings arrangements. Notably, the percentage of primary care physicians who said they are currently in an **Accountable Care Organization (ACOs) or shared savings arrangement** was approximately 39%. The low percentage may reflect a lack of awareness among front-line physicians that they are in such a program. This is consistent with SIM Steering Committee recommendations that much more physician education and outreach is needed about the care delivery and payment reforms that have become a major feature of Connecticut's healthcare landscape.

One disturbing finding reveals that a full 80% of physicians feel that referring patients for **behavioral health issues** is very or somewhat challenging. This is in sharp contrast to the 38% of physicians who find it very or somewhat challenging to refer to other specialists. This finding is consistent with other Connecticut-based studies, such as the [Sandy Hook Advisory Committee Final Report](#), and the Office of the Healthcare



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Advocate’s [Access to Mental Health and Substance Abuse Services report](#). SIM’s [Quality Council](#) is considering the significance of this access barrier in the design of its consumer care experience survey, which will be tied to value-based payment.

Additionally, despite widely-acknowledged evidence of the effectiveness of **patient-centered medical homes** (PCMHs), only 35% of surveyed physicians believe that the quality of care in this model is better. Fifty percent also said that obtaining a medical home designation is challenging. Despite this mixed picture, 42% of physicians expressed an interest in state funded support. SIM’s Advanced Medical Home Glide Path will provide needed practice transformation support to assist practices in this critical venture. However, these findings point to the importance of using SIM and other avenues to inform and engage physicians about the benefits of advanced care delivery models that drive value.

The great majority of physicians have **Electronic Health Records** (EHRs) but only a minority seem to be using them. In fact, nearly half of respondents perceive EHRs to have a negative effect on care efficiency and communication. Fewer than half see them as improving quality. SIM’s Advanced Medical Home Glide Path pays special attention to integrating EHRs into every-day practice in a way that improves quality and gets physicians the data they need to drive improvement.

When asked about **cultural competency**, most physicians reported “very little” (42%) or “some” (48%) formal training in how to improve communication with patients from diverse ethnic or cultural backgrounds.

Twenty-five percent reported having communication difficulties with 10% or more of their patients in the last 12 months. When having such difficulties, a majority (73%) reported asking a family member or friend to interpret, a practice not recommended for [culturally and linguistically appropriate care](#).

It is evident more needs to be done around cultural competency. The SIM Advanced Medical Home [standards](#) include new must-pass criteria for language interpretation services, which are not must-pass in the NCQA 2014 standards.

These results provide key information for the State Innovation Model as it works toward primary care transformation, particularly through the Advanced Medical Home Glide Path and the Community & Clinical Integration Program. We have to listen to and learn from our physician and consumer partners to ensure that these reforms provide real value.