

AAFP News: *AFP Edition*

Policy and Health Issues in the News

Survey Finds Insurance, New Health Care Models Are Physicians' Greatest Worries

Results from a recent survey show that insurance companies and new performance measurements are the main cause of concern for primary care physicians, not patient care. The annual survey conducted by the Commonwealth Fund and the Kaiser Family Foundation included responses from 1,624 primary care physicians. It found that most physicians recognize the benefits of new technologies, payment reform, and performance measurements, but struggle to make so many practice changes in a short time. The survey showed that more than one-half of primary care physicians are paid based on the quality or efficiency of care, whereas one-third are paid strictly on fee-for-service. Three of 10 primary care physicians said that their practice is qualified as a medical home or an advanced primary care practice. The greatest concern the survey showed was that new models are changing the dynamics of payment and patient care. One-half of physicians said the increased use of quality metrics has a negative impact on quality of care; less than one-fourth considered the use of these metrics to be positive. For more information, go to <http://www.aafp.org/news/practice-professional-issues/20150908commonwealthsurvey.html>.

Physicians Report Declining Satisfaction with Electronic Health Records

Physicians have become increasingly dissatisfied with their electronic health record (EHR) systems, according to a recently published report. In 2010, 61% of physicians said they were satisfied or very satisfied with their EHRs, compared with just 34% in 2014. Of the physicians who responded to the 2014 survey, 55% said it was difficult or very difficult to use their EHR to improve efficiency, 72% said it was difficult or very difficult to use their EHR to decrease their workload, 54% indicated that their EHR system increased their total operating costs, and 43% said they had not yet overcome productivity challenges associated with implementation of their EHR. The report was based on data from 940 respondents and was compiled by AmericanEHR Partners and the American Medical Association, in association with the American Academy of Family Physicians (AAFP) and the American College of Physicians. For more information, go to <http://www.aafp.org/news/practice-professional-issues/20150825ehrsatisfaction.html>.

CMS Aims to Reduce Costs in Medicare Advantage Plans

The Centers for Medicare and Medicaid Services (CMS) will soon open the application process for a new value-based insurance design model that aims to reduce costs in Medicare Advantage health plans. CMS plans to have the value-based model operational on January 1, 2017, and will test the model for five years in Arizona, Indiana, Iowa, Massachusetts, Oregon, Pennsylvania, and Tennessee. The value-based model gives Medicare Advantage plans the flexibility to design their insurance packages with extra benefits and reduced cost sharing to patients who have diabetes, chronic obstructive pulmonary disease, congestive heart failure, hypertension, coronary artery disease, or mood disorders. Patients with a history of stroke also will be included in the test model. According to CMS, the model will test the hypothesis that if Medicare Advantage plans offer targeted extra supplemental benefits or reduced cost sharing to patients who have certain chronic conditions, the end result will be higher-quality, more cost-efficient care. For more information, go to <http://www.aafp.org/news/government-medicine/20150911valueinsurance.html>.

AAFP Paper Offers Family Medicine Approach to Poverty

Poverty is an “insidious, self-perpetuating problem that affects generations of families” and can be an obstacle to patients’ health, according to a recent paper published by the AAFP. The article addresses how family physicians can mitigate the effects of poverty on health by understanding each patient’s challenges and coping strategies, and knowing what community resources are available to support them and improve health outcomes. The authors explain that poverty and low-income status are associated with a variety of adverse health outcomes, including shorter life expectancy, higher rates of infant mortality, and higher death rates for the 14 leading causes of death. The article offers many practical approaches to helping impoverished patients, from simple compassion and understanding to forming realistic care plans and advocating for social change. For more information, go to <http://www.aafp.org/news/health-of-the-public/20150909povertypaper.html>.

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