

Study Finds Patients' Insurance Status Does Not Affect Quality of Care

Primary care physicians spend just as much time during office visits with so-called "safety-net" patients as they do with those who have private insurance, according to a study published in the September 2013 issue of *Health Affairs*. The study was based on National Ambulatory Medical Care Survey data from 2006 to 2010 and included 31,825 observed primary care visits with nonelderly patients. Researchers compared visits among patients who had Medicaid, no insurance, or private insurance. Insurance type did not significantly affect visit length or the level of preventive health counseling provided. Overall, patients spent an average of 18.53 minutes with a primary care physician, with a specific breakdown as follows: 18.46 minutes for patients with private insurance, 17.95 minutes for patients with Medicaid, 19.82 minutes for patients who self-paid, and 19.53 minutes for patients with other types of insurance. On average, new patient visits were more than three minutes longer than visits with established patients. For more information, go to <http://www.aafp.org/news-now/practice-professional-issues/20131003healthaffairs-paytime.html>.

Job Satisfaction Is Top Priority for Students

More than 60% of medical students say that enjoying their work is the most important factor in choosing a specialty, according to research published in the October 2013 issue of *Academic Medicine*. More than 1,000 first-year medical students from 11 schools were surveyed to determine how lifestyle issues affected their choice of specialty. As the students' interest in practicing primary care decreased, so did their perception of the importance of working with underserved patients and in rural areas. Having control over their work schedule was among the most important factors (15% of respondents), followed by having enough time off (14%) and enjoying the work environment (9%). Only 1% of respondents said financial compensation was the most important factor. Respondents rated five lifestyle domains and 21 medical specialty characteristics using a 5-point scale; a ranking of 1 indicated not important and a ranking of 5 indicated extremely important. Students who listed primary care as their first choice of specialty assigned the following rankings: time with family (4.6), work/life balance (4.6), personal time outside work (4.3), collegiality of coworkers (4.1), opportunities to work with underserved populations (3.8), average salary (2.7), rural practice opportunities (2.4), research opportunities (2.3),

and perceived prestige of the field (2.1). In comparison, students who said they were least interested in primary care gave higher rankings in three areas: average salary (3.6), perceived prestige of the field (2.9), and research opportunities (2.8). For more information, go to <http://www.aafp.org/news-now/education-professional-development/20131009first-yr-student-surv.html>.

Graham Center Projects State-by-State Demand for Primary Care Physicians

The American Academy of Family Physicians' Robert Graham Center for Policy Studies in Family Medicine and Primary Care recently issued primary care physician workforce projections for each state for the next 25 years. The projections rely on a combination of factors to gauge current and future workforce needs on a state-by-state basis, focusing heavily on increased patient demand that is likely to result from an aging population, overall population growth, and coverage expansions due to the Patient Protection and Affordable Care Act. The workforce projections also contain potential solutions to strengthen the primary care pipeline, including physician payment reform, dedicated funding for graduate medical education, increased funding for primary care training, and medical school debt relief. For more information, go to <http://www.aafp.org/news-now/practice-professional-issues/20131007wrkforceproject.html>.

Tool Compares Health Exchange Plan Prices

The U.S. Department of Health and Human Services has launched an online tool that allows federal health exchange users to compare average monthly health plan premiums. The tool, which can be used by individuals to compare personal or family coverage premium options or by business owners to gauge premium costs for employees and their families, does not calculate potential tax credits or subsidies, and it does not give information about copays or deductibles. In addition to providing premium estimates, the tool defines and offers examples of essential health benefits that all plans are required to cover; provides a chart that shows household sizes and income levels that qualify for lower costs; and describes the various plan levels available. The tool is available at <https://www.healthcare.gov/find-premium-estimates>.

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