THE LARRY A. Green Genter

QUICK COVID-19 PRIMARY CARE SURVEY

SERIES 14 FIELDED JUNE 12-15, 2020



In public and private payer responses to the COVID-19 pandemic, primary care clinicians and staff are becoming overlooked collateral damage and feel as though they have been forgotten or ignored. More than 80% are experiencing high levels of burnout and 1 in 5 have no access to known resources for support. The supply of personal protective equipment (PPE) is elusive or non-existent for many primary care practices. Clinicians and staff are worried about their healthy patients not receiving necessary preventive services; concerned their sicker patients are getting worse through care deferred or delayed; worried about their livelihoods (jobs and income), contracting COVID-19, and potentially bringing it home to their families.

Clinician well-being has been severely damaged during the pandemic

- Nearly half say that their personal burnout (44%) and their office burnout (48%) is at an all-time high
 - For 36%, their physical well-being has suffered
 - o For 45%, their psychological well-being has suffered
- 65% report the well-being of their families is also suffering as a result of their work
- 63% are reporting severe and near severe stress levels over the past 4 weeks
- 41% struggle to know when their workday ends

What do they need to stay open? We asked. 1,770 responses offered. 90% fell into actionable categories:

- Top of the list: PPE (21%) most with severely limited access; 1 in 5 have limited patient volume as a result
- Safe return of in-person office visits full workloads of non-in-person care fails to keep practices viable (16%)
- Financial assistance increasing receivables now are inadequate for recovery from losses (17%)
- Telehealth support must continue the future of primary care will have telehealth as a useful and necessary component, but not if the plug on coverage levels is pulled (12%)

Clinicians continue to report sources of strain, which dovetail with their comments above. In the <u>last 4 weeks</u>:

- 5% report their practice is now (temporarily or permanently) closed
- 25% of clinicians have skipped or deferred their salaries
- 39% have needed to layoff or furlough clinicians or staff
- 12% had staff guit saying that COVID-19 has made work unsafe for them
- 9% had offers to hire new clinicians rescinded
- 60% report non-face-to-face patient volume at an all-time high 14% have had telehealth billing being denied
- 15% report that they've had to DESTROY expired vaccines/medication

Risk of COVID-19 is higher for those with comorbidities; challenges accessing that care are a serious problem

- 78% of clinicians report a majority of their patient population present with multiple chronic conditions
- 60% of practices are limiting well/chronic care
- 48% report that their patients are not scheduling well/chronic visits even when they're offered

Policy Implications – Without immediate private and public payer action to stabilize (short-term) and strengthen (long-term) primary care, primary care will not readily survive the next wave of the pandemic.

Methods – This survey fielded by The Larry A. Green Center, in partnership with the Primary Care Collaborative. The survey invitation was fielded June 12-15, 2020 with thousands of primary care clinicians across the country.

Sample – 763 respondents from 49 states. Family Medicine (67%), Pediatrics (6%), Internal Medicine (11%), Geriatrics (4%), and 12% other. Settings included 21% rural, 17% community health centers, 10% in schools/offices. 31% had 1-3 clinicians; 28% had 4-9 clinicians; 40% had 10+ clinicians. 27% self-owned, 14% independent and large group, 36% owned by a health system. 10% were convenience settings and 5% were membership-based.

"No leadership. No unity. We are alone. We are unlikely to survive." Washington DC

Larry Green Center: www.green-center.org Primary Care Collaborative: www.pcpcc.org 3rd Conversation: www.3rdconversation.com

Practices are closing.

That's it. I'm done. Iowa

In NYC because of furlough. Virginia I was laid off 4 weeks ago. Oregon

I am retiring. New Mexico

I will sell my practice or shut it down. North Carolina.

I have been laid off. Washington. Furloughs Furloughs. Pennsylvania The pandemic killed my practice. Texas I have been furloughed. Arizona

My office closed. Arizona Closed my office. Wyoming

I have made the firm decision to close my practice. Oregon Voluntary retirement or early sabbatical. My options. Washington

Furloughed. I will be applying for unemployment. Florida

Many senior physicians have retired. Michigan

I have become the sole provider in my area. California

Feels like a suicide mission. I quit. Rhode Island

I was laid off. Virginia I was laid off. Texas

Lost my practice. Oklahoma

Leaving practice. Very sad. Rhode Island

I have been furloughed. Florida

Closing my practice. Retiring early. Tennessee Applied for unemployment. Minnesota

I am retiring early. Oregon Our office is closing. Indiana Closing my practice. Kansas

We have been furloughed. Massachusetts

I have been furloughed. Colorado

Our employees quit from fear. New Jersey Will have to close my practice. Washington.

My office opened in January. We are now closed. Texas

- We furloughed a large percentage of our organization due to lost revenue. Connecticut
- My receptionist quit due to fears of contracting COVID and taking it home to family. Ohio
- My practice will be included as a casualty of coronavirus. My patients received letters this month announcing the closure of a trusted friend of 22 years. New Jersey

The collateral damage to our primary care workforce was preventable.

- I am becoming depressed with each passing day. I think about killing myself every day. Washington
- I feel like giving up. I care so much for my patients but how long can I keep this up? Delaware
- I suspect that in another year, the family medicine practice I served over the past 23 years will be closed. Wisconsin
- Physician suicide, burnout, I'm seeing it happen. Michigan
- Nerve wracking and depressing as hours get cut back and my daughter wonders if I will get COVID-19 and die. Texas
- No one cares. We are in this alone. Illinois
- I feel like I was hung out to dry. Take chances with my health or abandon my patients were my only choices. New York.
- Burn out is significant. Compounded by the enormous emotional weight will be dangerous. Please help. Connecticut
- Our leadership doesn't care about us. Michigan
- We are alone, patients are alone, we spend all our financial savings, and no one cares for us. Massachusetts
- We own our practice. We have not paid ourselves since the start of the pandemic. Oregon
- With clinical practices dealing with budget, hiring freezes, and closure, our health care system will be under-resourced to be able to handle the load. Throw in a second wave of COVID-19 infections and outcomes could easily be worse. California
- This job is now an actual killer. Delaware
- Significant amount of suicide ideation. Oregon
- There will be a toll on front line primary care teams in the form of exhaustion, depression and burnout. Oregon
- The fear is unbearable. Difficult. Running out of steam. Maine
- Financially devastating, logistically exhausting. Michigan.
- My hours are 9, 10, 11 and now 12hr days. My company says we are doing a great. My salary has been reduced. Washington
- Our operations are eviscerated. Our finances are ruined. Morale is at an all time low. Senior physicians have retired. Michigan
- Had to pull out most of my money in retirement and take second mortgage to keep practice from totally closing. North Carolina
- It was already very hard, now it's a horror show. Michigan
- This pandemic is so mentally, physically and emotionally exhausting. What does the future hold? Florida
- I am horribly depressed. Everything I've built is crumbling. I feel like there's no hope primary care will recover. Texas
- Our physicians haven't been paid since February. It will be a terrible impact if we collapse. Washington
- Crushingly busy. Destroying my life. Herculean efforts to keep COVID out of our long-term care facility. Fighting with every ounce of energy I can muster. Traumatized. Maybe this will kill me and all my patients and all my family. DC
- Devastating impact; fighting for survival, landlord demanding rent. Primary care will be mortally wounded. California
- I have filed for unemployment. I have been a practicing primary care provider for 30 years. This is devastating. California
- I've been working without pay since March 1. Maryland