



QUICK COVID-19 PRIMARY CARE SURVEY

SERIES 21 FIELDED SEPTEMBER 18 – 21, 2020



Population health is in decline, primary care is under water, and major disruptions to medical supply chains all signal that our health system is buckling. The health of the population has weakened during the pandemic with half of clinicians noting that overall physical health of the population has declined. In addition, 41% say the health of those with chronic conditions is noticeably worse, and 86% report a pandemic-specific decline in the population's mental health. At the same time, only 1 in 5 surveyed clinicians report their fee-for-service volume is within 10% of pre-pandemic levels and nearly half (47%) endorsed the statement that despite a somewhat rosier economic picture, their clinical workforce is fragile. Heading into flu season, shortages of PPE (33%) and flu vaccine (13%) are now a major concern.

While the picture for primary has improved since April, practice viability is still at risk

- 54% have experienced pandemic-related furloughs and layoffs
- 26% say at least 1/3 of practice work continues to be unpaid
- 28% have permanently reduced the size of their staff because of COVID-19
- 19% report clinicians in their practice have retired early because of COVID-19, or are planning on it
- 15% say clinicians in their practice have left the office because of COVID-19, or are planning on it
- 7% are unsure if their practice will remain open past December without financial assistance

The primary care work force is stretched thin with uneven burden

- 74% of clinicians report they are working between 6 and 20 hours a week unpaid
- 32% say that although their practice or health system received financial relief, clinicians or staff did not
- 34% report female practice members lose more hours than men b/c of pandemic-era child or elder care needs
- 53% of clinicians say that their mental/emotional exhaustion is at an all-time high
- 71% say that the need to be on constant high alert is mentally exhausting
- 35% are experiencing video fatigue, including strained eyes, neck, and low energy from video reliance

A quick assessment of primary care practice readiness for flu season shows signs for concern, not all COVID-19 related

- 12% have no practice plan for the flu season
- 13% have a plan to address the flu this year, but are unable to get supplies, such as vaccine
 - "Trying to give flu shots but the shipments have come too late and [arrived] spoiled twice due to Federal Express being overwhelmed. We need supplies but our logistics are failing." Virginia
- 17% have a plan and some supplies but still struggle with others, such as rapid flu tests and PPE

Policy Implications – Primary care continues to shrink as we enter into flu season and a potential second COVID-19 wave. Disruptions to supply chains from hurricanes in the South and wildfires to the West have added to this bleak picture. Additional targeted support for primary care is needed from public and private payers to address growing patient needs, including addressing vaccine hesitancy and the ability to get and administer vaccines safely.

Sample – This survey fielded by The Larry A. Green Center, in partnership with the Primary Care Collaborative, had 457 respondents from 45 states: 69% Family Medicine, 9% Pediatrics, 15% Internal Medicine, 5% Geriatrics, 1% mental/behavioral health, 1% other. Clinician types: 72% MD, 5% DO, 15% NP, 3% PA, and 5% other. Settings included: 24% rural, 12% community health centers, 7% in schools/offices, and 31% in designated patient-centered primary care homes. 31% had 1-3 clinicians; 28% had 4-9 clinicians; 40% had 10+ clinicians. 33% self-owned, 12% independent and large group, 38% owned by a health system, and 4% were government owned. 8% were convenience settings and 3% were membership-based.

Patient panels within sample – (small defined as >10%, large as >50%): 33% have small Medicaid panel, 21% have large; 18% have small Medicare panel, 27% have large; 54% have small uninsured panel, 4% have large; 33% have small low-income panel, 31% have large; 51% have small non-English speaking panel, 8% have large; 30% have small minority panel, 29% have large; 6% have small multiple chronic conditions panel, 66% have large.

"I'm not doing flu shots or testing this year-my staff is burned out now and I cannot add this on to them." Arizona
"Our health system actually REDUCED patient access to flu clinics due to financial constraints." Michigan
"We are closing as we enter the flu season." Texas

Among open text comments...

Signs that the system is buckling...

- I want to quit primary care. 5 PCPs have quit, and the managers just give the rest of us their patients but won't pay us or give us time to do the extra tasks. Oregon
- It has been challenging. We have done a good job but still the impact of isolation has been huge and the fatigue is high... our NP resigned May 31 due to COVID and other things. No replacing her due to cost and loss. North Carolina
- Everyone is stressed. We keep losing staff and new staff make mistakes. Patient complaints and demands. HELP! Massachusetts
- Very fatiguing to juggle patient care and safety, protecting staff, productivity concerns, parenting and decisions on schooling, activities, potentially being exposed and unable to work because of allowing children to play sports, weighing mental and physical health for so many we feel responsible for, arguing about masks with patients. South Dakota
- Able to make overhead and payroll the last 4 months but at the expense of no income for myself the last 4 months. Colorado
- Every department is expressing burnout. We are losing employees now that schooling is at home and they have to be home with kids. More mistakes and complaints daily. We are truly stressed at every level. Financially we're actually ok. Massachusetts
- Physicians need relief, we are running on empty. Our patients are struggling, we are physically exhausted and undercompensated for long hours of unpaid work on nights and weekends to keep pace. Texas
- We received a note from our ACO informing us that we were not meeting our breast cancer screening goal. This is simply abusive. We have so much on our plate and only so much time. Zero assistance. Our assessment was to reduce influenza risk but if screening mammograms are more important than this should be shared. We only have so much time. Illinois
- How can we get our vaccines & supplies shipped? In the last 2 months we've had 3 shipments arrive spoiled b/c Fed ex was late delivering them. We need help fixing this issue. I can only guess how many vaccines are being wasted in the country. Virginia
- Still struggle with finding reasonably priced PPE, allocations for needles, gloves, etc are also challenging. Delaware
- Admin says "the health care environment is changing; things are different" to justify permanent staff reductions. But provider's duty to provide safe, high quality care has not changed. Volume of appts in provider schedules has not changed. West Virginia
- At this point, my loyalty is to my patients as individual human beings. Any loyalty or trust I used to feel to the larger society has been shattered - possibly irredeemably so. Colorado

... and disruptions in supplies make flu season planning difficult

- Flu vaccine is cost prohibitive for small practices. Oregon
- Intend to do mass vaccinations and rapid flu testing; really struggling to obtain supplies. Colorado
- Working on testing plan. We have supplies. No flu vaccine yet. Ordered. Do not know when will get it. Texas
- We have already seen delays in getting vaccine, we are told, due to distribution problems from hurricanes in the south and fire smoke in the west. Oregon
- Unfortunately, there is massive disruption to the distribution of flu vaccine. We have had to reschedule up to 200 flu vaccine appointments because we did not receive shipments on the scheduled date. We can't catch a break. Financially, we are not certain that Sanofi will modify their return policy and we may lose money on flu vaccine. Illinois
- We pre-booked our flu vaccinations in anticipation of supply issues and we're still scrambling to procure flu vaccines. We will do rapid flu testing, however, we're anticipating supply issues to continue to limit our testing as well. Idaho
- We hope to have rapid flu testing; however, the kits are currently on backorder. We have no cohesive plan and will probably continue to wing it like we have been doing the past 6 months. Tennessee
- We already ran out of high dose flu vaccine. We have no rapid flu testing. New York
- Flu season will put an additional burden on our practice given the symptoms of flu and COVID are so similar... more in-person visits, more testing (currently not adequate), more PPE which will deplete our limited supply. California
- Flu vaccine clinics, rapid flu testing, we will need to treat all flu-like symptoms as PUIs (full PPE, isolation, decontamination) which will put further strain on our already strained system. Maryland
- Trying to get a safe process in place for testing for flu and COVID, we have some testing supplies but our employees are afraid and don't want to be involved in obtaining tests and we hope we have enough people to do it. Missouri
- We currently see febrile pts with resp symptoms outside at the end of the day (with full PPE) and we are trying to figure out what to do when there is an increase in #s and bad weather. We don't have negative-pressure rooms and ventilation will be an issue. Being unable to safely use nebulizers indoors will be a problem (esp babies with croup). Lots of logistical issues. Still having trouble getting enough swabs to test for COVID-19. Frustrating to need to be overly selective in whom we test. Virginia
- We are not planning to do flu testing since we cannot ensure reimbursement for rapid COVID testing (No fee schedule set in NC) and feel we shouldn't test one without the other. We plan to see patients with acute illness virtually (at least initially) so that we can ensure our other patients it is safe to come into our office for wellness and routine follow-up appointments for their chronic conditions. North Carolina