

## **NC Academy of Family Physicians and NC Pediatric Society COVID-19 Impact Survey Results (May 5, 2020)**

### **Executive Summary**

As North Carolina continues to grapple with the COVID-19 pandemic, the NC Academy of Family Physicians and the NC Pediatric Society conducted a second survey of practicing primary care physicians. Just under 500 pediatricians and family physicians responded. The survey was conducted over four days From April 30-May 4. We conducted a similar survey from March 26-30, that resulted in 753 respondents. Looking at both surveys provides insight regarding trends in primary care throughout the COVID-19-pandemic.

Findings show that primary care physicians are suffering extreme financial distress, even worse than a month ago. Almost nine out of ten of respondents noted significant or extreme financial pressure and nearly two-thirds reported a 40 percent or more drop in patient volume. Multiple interventions are needed to keep North Carolina's primary care infrastructure intact.

Beyond immediate financial assistance, other supports that would be helpful include: Personal Protective Equipment (PPE); promotion of vaccinations and other preventive visits; stability in telehealth policies; and assistance in helping patients access mental health services.

Support since the last survey has been well-received, as indicated by the high percent of physicians utilizing telehealth, the declining percent of respondents reporting a need for help understanding how to use telehealth, and improved access to PPE, although it remains an ongoing need.

### **KEY TAKEAWAYS**

- **Primary care practices need immediate financial support to withstand the fiscal pressures of COVID-19. There is a serious chance that the state will lose primary care capacity if immediate assistance is not provided. Without a strong primary care infrastructure, access to care will decrease leading to diminished health quality and increased costs as patients are forced to seek care in higher-cost settings such as Emergency Departments.**
  - Financial pressure continues to increase on practices with 87 percent now reporting they are under significant or extreme financial pressure, increasing to 92 percent for physician-owned practices.

- The percentage of practices considering permanent closure or selling to a larger entity has grown exponentially since late March, with about one in ten considering such action (even higher for family medicine practices, rural practices and physician-owned practices).<sup>1</sup> These closures could leave some entire counties without primary care.
  - Practices are already taking significant steps to decrease cost. The percentage of practices reducing salaries (37 percent), furloughing employees (42 percent) and reducing hours (74 percent) all increased since late March. Physician-owned practices and pediatric practices are most likely to implement these cost reduction strategies.
  - Practices are taking steps to seek outside financial assistance. About half of the respondents applied for the Paycheck Protection Program (PPP). Ninety percent of practices that applied and have heard back from their bank received funding. About one-in-five respondents are utilizing bridge loans, lines of credit, or equity lines, with those numbers even higher for pediatricians and physician-owned practices.
  - Loans are seen as minimally helpful. Physicians expressed concerns about their ability to pay back short-term loans such as the Medicare Advanced Payment Program.
- **Primary care faces a devastating loss of patient volume and needs help in educating patients about the need for continued in-person visits and the availability of telehealth.**
    - Nearly two-thirds of physicians reported at least a 40 percent drop in patient volume. Pediatric (85 percent) and physician-owned practices (73 percent) reported an even greater drop in patient volume.
    - Patient knowledge of the availability of telehealth and patient technical ability to use telehealth remain key concerns
    - Respondents also noted significant concerns when insurers promote third-party telehealth services versus telehealth provided from the medical home.
    - Patient reluctance to come to the office for in-person visits is the largest perceived barrier to providing immunizations during this ongoing crisis.
- **Given all the inherent unknowns with COVID-19, physicians need policies and financial mechanisms that offer stability and clarity.**
    - In open-ended responses, physicians mentioned the need for stability in telehealth frequently, seeking longer-term clarity on payer policies and payments for telehealth, particularly with the expectation of additional coronavirus outbreaks in the fall/winter.
    - The Medicare Advanced Payment Program and Economic Injury Disaster Assistance Loan Program have been much less useful to primary care practices, both of which lacked clarity and suffered from major policy changes while being implemented.

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<sup>1</sup> Note: A respondent could answer yes to both permanent closure and selling. Overall, 6% responded considering permanently closing and 4% considered selling. Please see detailed responses below.

- **Practices are using the tools available to them.**
  - The vast majority of practices (93 percent) are utilizing telehealth to assist in care during this crisis.
  - Fewer physicians now report the need for technical assistance around telehealth, likely due to the supports provided by NC AHEC, CCNC, NC Medicaid, private insurers, and others during the five-week period between surveys.
  - Primary care practices are also taking a wide variety of actions to ensure that patients stay safe during in-office visits, such as separating sick and well patients while also using strategies to optimize PPE.
- **Other key findings included:**
  - Helping patients access mental health services is a growing need and increased significantly from March and was highest for pediatric practices (47 percent).
  - Finally, while PPE needs have eased a bit, they are still significant. Pediatric practices, rural practices and physician-owned practices have the greatest need. However, two-thirds of practices have still not utilized the DHHS website to request PPE.

The two associations are examining how to best support practices while they face these challenges. Some of these potential action items are included throughout the report, such as:

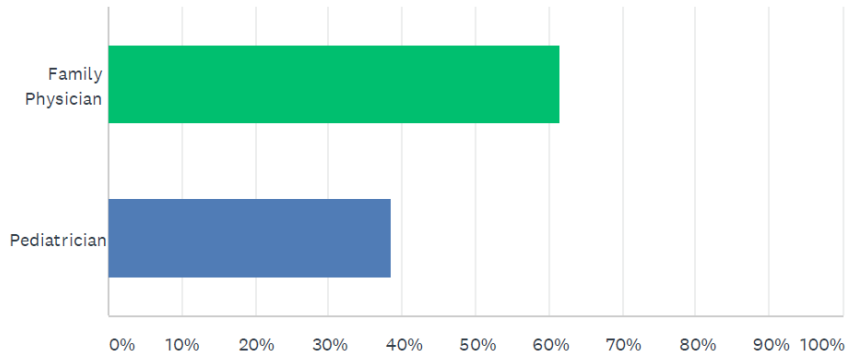
- Encourage the state and other payers to provide financial support to primary care practices and stability in telehealth policies.
- Work with the state to promote awareness on the importance of well-child and adolescent visits that include immunizations.
- Advocate for the Legislature to provide direct funding to independent primary care practices.
- Continue to educate practices about how to acquire PPE and particularly the DHHS website.
- Provide education on best practices regarding the need for in-person versus virtual visits.

# NC Pediatric Society and NC Academy of Family Physicians COVID-19 Impact Survey – Results (March 31, 2020)

Dates of Survey: Thursday, April 30 - Monday, May 4

Q1 Please indicate which type of physician you are (check one):

Answered: 495 Skipped: 0



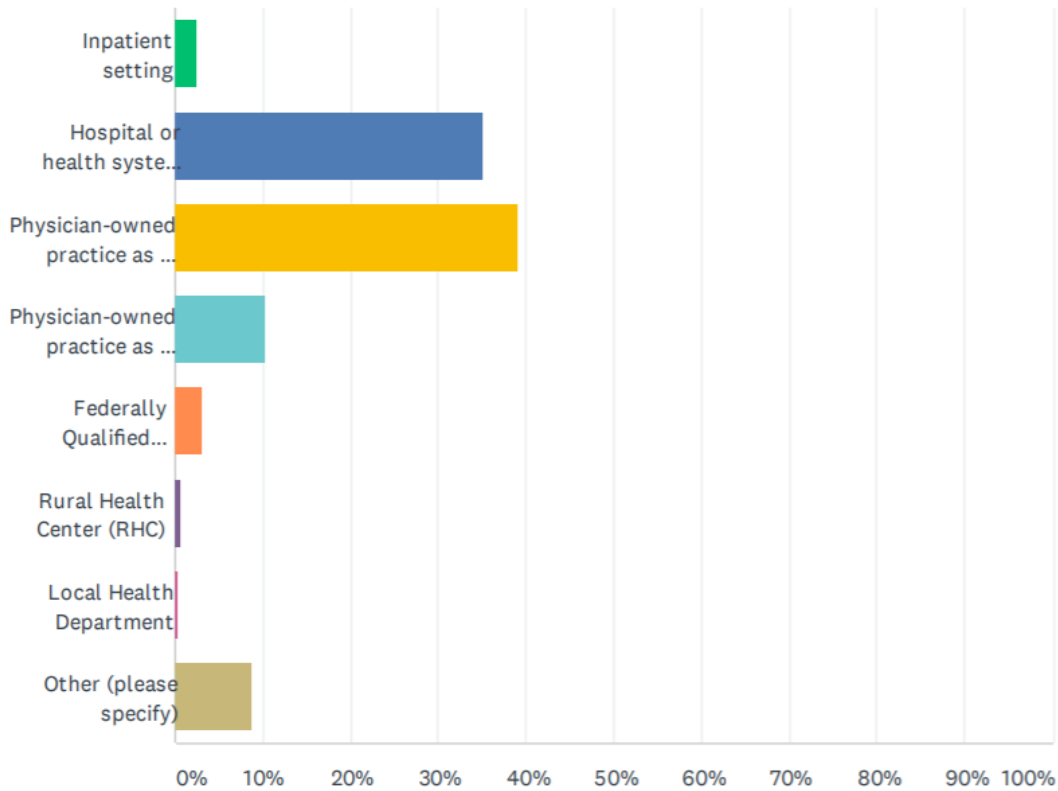
ANSWER CHOICES	RESPONSES	
Family Physician	61.41%	304
Pediatrician	38.59%	191
TOTAL		495

## KEY TAKEAWAYS:

- The distribution of respondents by specialty is very similar to just over a month ago, with the percent of family physicians in the respondent pool about two percent less in this survey, and pediatricians about two percent higher.

## Q2 What best describes your practice setting (check one):

Answered: 495 Skipped: 0



ANSWER CHOICES	RESPONSES	
Inpatient setting	2.42%	12
Hospital or health system owned outpatient practice	35.15%	174
Physician-owned practice as an equity partner	39.19%	194
Physician-owned practice as an employed physician	10.30%	51
Federally Qualified Health Center (FQHC)	3.23%	16
Rural Health Center (RHC)	0.61%	3
Local Health Department	0.40%	2
Other (please specify)	8.69%	43
TOTAL		495

## Practice Setting Cross Tabs

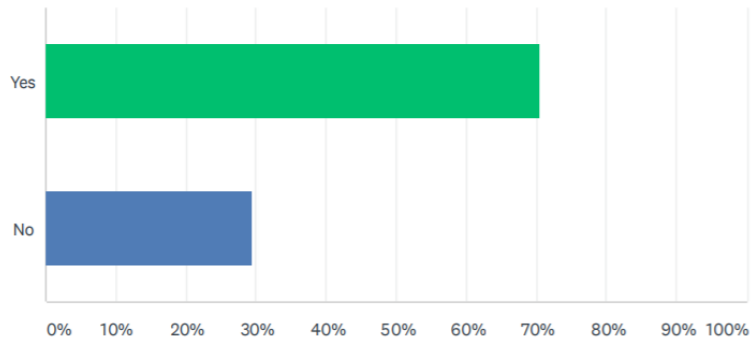
DESCRIBE YOUR PRACTICE SETTING (Percentage)	ALL	Peds	Fam Med	Rural	Physician- Owned	VFC
Inpatient	2.42	2.09	2.63	3.82		1.43
Hospital/System-Owned Outpatient	35.15	19.9	44.74	26.11		35.24
Physician-Owned as an Equity Partner	39.19	61.26	25.33	43.31	79.18	42.41
Physician-Owned as an Employee	10.3	12.57	8.88	12.74	20.82	10.03
Physician-Owned TOTAL Regardless of Your Status	49.49	73.83	34.21	56.05	100	52.44
FQHC	3.23	1.05	4.61	5.73		4.3
Rural Health Center	0.61	0	0.99	1.91		0.57
Health Department	0.4	0.52	0.33	0.64		0.57
Other	8.69	2.62	12.5	5.73		5.44

### KEY TAKEAWAYS:

- Physician-owned practices represented a higher percentage of respondents than in late March, but the distribution of practice types is still similar.
- As noted after our first survey, pediatric practices are more likely to be physician-owned than family medicine practices.
- Physician-owned practices are more likely to participate in the Vaccines for Children program.

### Q3 Do you participate in the Vaccines for Children (VFC) / State Vaccine Program?

Answered: 495 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	70.51%	349
No	29.49%	146
TOTAL		495

### VFC Cross Tab

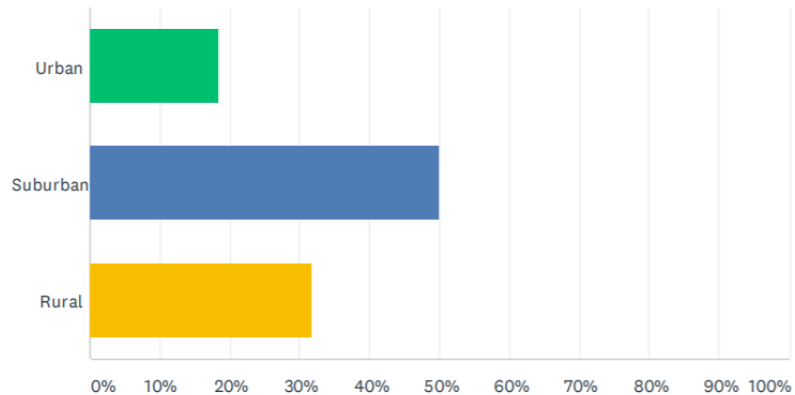
	ALL	Peds	Fam Med	Rural	Physician-Owned	VFC
VFC Provider YES	70.51	95.81	54.61	70.7	74.69	100

#### KEY TAKEAWAY:

- Not surprisingly, pediatric practices are more likely to take part in the VFC Program than family medicine practices.

## Q4 How would you describe your practice location (choose one):

Answered: 495 Skipped: 0



ANSWER CHOICES	RESPONSES
Urban	18.38% 91
Suburban	49.90% 247
Rural	31.72% 157
TOTAL	495

## Practice Location Cross Tabs

DESCRIBE YOUR PRACTICE LOCATION (Percentage)	ALL	Peds	Fam Med	Rural	Physician- Owned	VFC
Urban	18.38	15.71	20.07		13.47	17.77
Suburban	49.3	55.5	46.38		50.61	50.43
Rural	31.72	28.8	33.55	100	35.92	31.81

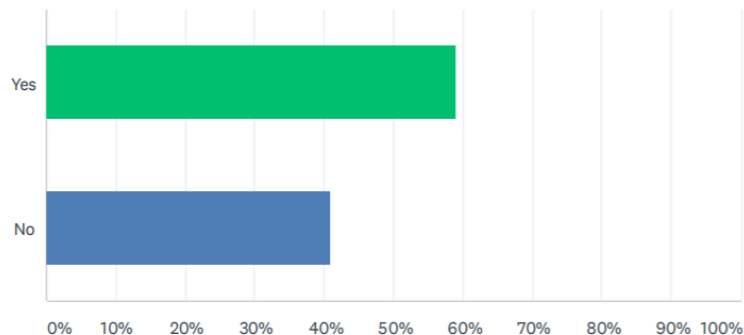
### KEY TAKEAWAYS:

- The breakdown for location of practices between the two surveys is almost identical.
- As stated in the first survey, family medicine practices are more likely to be in rural areas.



Q5 Personal Protective Equipment (PPE) such as gowns, masks, etc., has obviously been a problem for primary care physicians. Are you still having difficulty acquiring these items?

Answered: 495 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	58.99%	292
No	41.01%	203
TOTAL		495

### PPE Needs Cross Tabs

	ALL	Peds	Fam Med	Rural	Physician-Owned	VFC
April 30 - May 4 Survey	58.99	70.16	51.97	66.24	75.92	58.45
March 26 - 30 Survey	75.56	78.6	73.86	74.58	88.53	

#### KEY TAKEAWAYS:

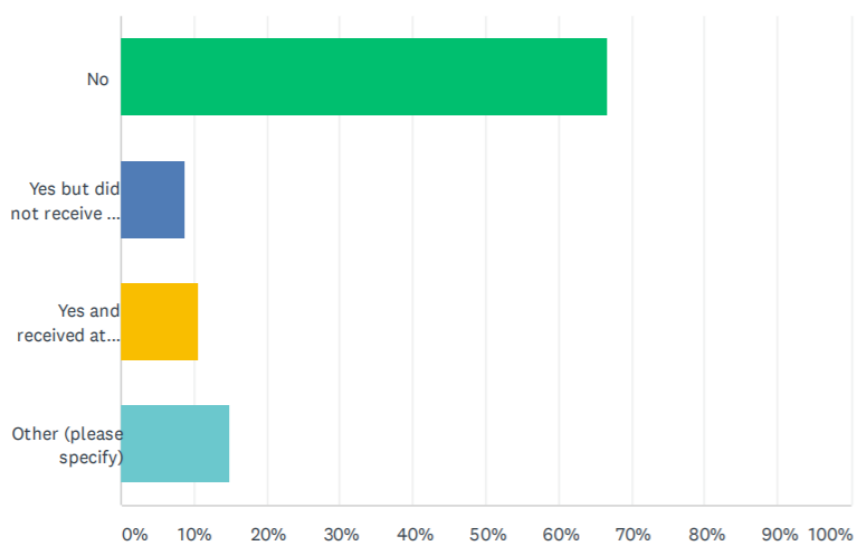
- While PPE needs have eased, they are still significant.
- Pediatric practices, rural practices and physician-owned practices have the greatest need.

#### POTENTIAL ACTION ITEMS:

- Continue to educate practices about how to acquire PPE.
- Continue to advocate for PPE needs of primary care practices during policy discussions.

## Q6 Have you used the NC Department of Health and Human Services central request web page / form to request PPE?

Answered: 495 Skipped: 0



ANSWER CHOICES	RESPONSES	
No	66.67%	330
Yes but did not receive any PPE	8.89%	44
Yes and received at least some PPE	10.71%	53
Other (please specify)	14.95%	74
Total Respondents: 495		

### Use of DHHS Website to Request PPE Cross Tabs

	ALL	Peds	Fam Med	Rural	Physician-Owned	VFC
No	66.67	56.54	73.03	66.24	55.51	64.47
Yes, Did Not Receive	8.89	13.61	5.92	10.83	16.73	9.46
Yes, Received at Least Some	10.71	14.66	8.22	9.55	17.14	12.03
Other	14.95	16.75	13.82	15.29	12.65	15.47

#### KEY TAKEAWAYS:

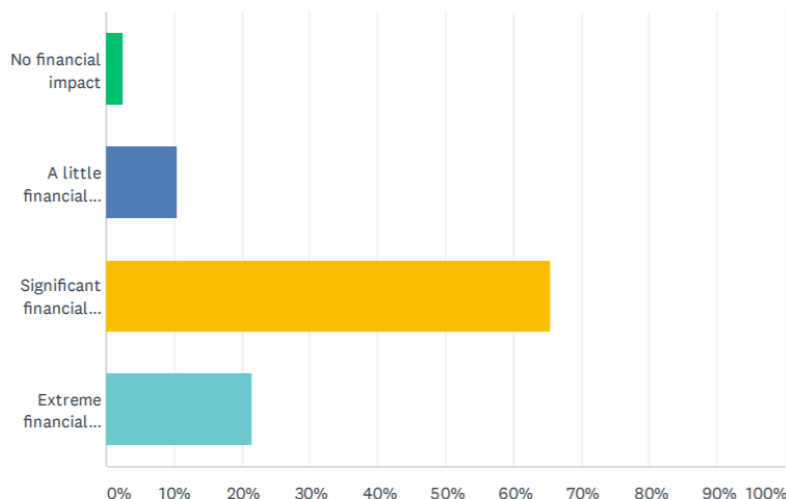
- Just over 50 percent of the practices requesting PPE through DHHS have received at least some PPE.
- Two-thirds of practices have still not utilized the DHHS website to request PPE.
- Physician-owned practices and pediatric practices are more likely to have requested PPE through NC DHHS.

#### POTENTIAL ACTION ITEMS:

- Continue to strongly promote the NC DHHS website and forms for PPE.
- Support NC DHHS efforts to monitor, increase and distribute PPE.

## Q7 What type of financial pressure has the COVID-19 pandemic put on your practice (check one)?

Answered: 495 Skipped: 0



ANSWER CHOICES	RESPONSES	
No financial impact	2.42%	12
A little financial impact	10.51%	52
Significant financial impact	65.45%	324
Extreme financial impact	21.62%	107
TOTAL		495

### Financial Impact Cross Tabs

FINANCIAL IMPACT (Percentage)	All-Late March	All - April/May	Peds	Fam Med	Rural	Physician-Owned	VFC
None	4.18	2.42	2.09	2.63	0.64	0.41	0.86
Little	12.53	10.51	6.28	13.16	12.74	7.76	7.74
Significant	63.21	65.45	59.69	69.08	66.88	63.27	67.05
Extreme	20.08	21.62	31.94	15.13	19.75	28.57	24.36
Significant or Extreme	83.29	87.07	91.63	84.21	86.63	91.84	91.41

#### KEY TAKEAWAYS:

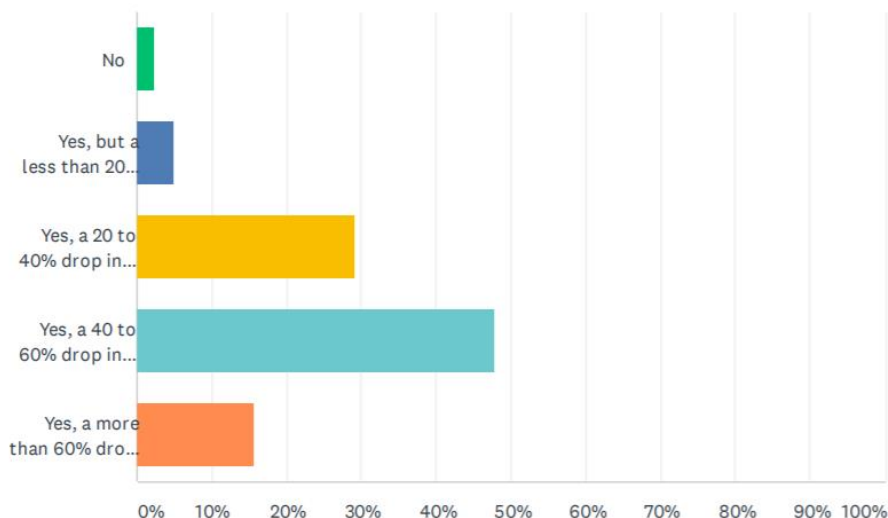
- Financial pressure continues to increase on practices with 87 percent now reporting they are under significant or extreme financial pressure.
- Not surprisingly, physician-owned practices are seeing the greatest financial impact. Pediatric practices, who are more likely to report being physician-owned, also report a slightly greater impact.

#### POTENTIAL ACTION ITEMS:

- Monitor the impact that the Medicaid rate increase and per member per month increase are having on practices.
- Advocate for similar relief with commercial insurance.
- Continue to link physicians with resources and education on fiscal relief opportunities.

**Q8 Many practices are reporting a decrease in volume of patient visit even when including telehealth. Are you experiencing a reduction in patient volume with telehealth visits included?**

Answered: 495 Skipped: 0



ANSWER CHOICES	RESPONSES	
No	2.22%	11
Yes, but a less than 20% drop in total patient visits	5.05%	25
Yes, a 20 to 40% drop in total patient visits	29.09%	144
Yes, a 40 to 60% drop in total patient visits	47.88%	237
Yes, a more than 60% drop in total patient visits	15.76%	78
TOTAL		495

**Percent Decrease in Visit Volume Cross Tabs**

Percent Decrease in Visit Volume	ALL	Peds	Fam Med	Rural	Physician-Owned	VFC
None	2.22	1.57	2.63	3.18	0	0.57
Less than 20%	5.05	1.05	7.57	4.46	3.27	3.15
20 to 40%	29.09	12.04	39.8	33.12	23.67	25.5
40 to 60%	47.88	60.73	39.8	48.41	56.33	53.58
More than 60%	15.76	24.61	10.2	10.83	16.73	17.19
TOTAL OVER 40%	63.64	85.34	50	59.24	73.06	70.77

**KEY TAKEAWAYS:**

- All primary care practices have experienced a devastating loss in patient visit volume.
- Pediatric and physician-owned practices have seen the greatest drop in patient visit volume.

**POTENTIAL ACTION ITEMS:**

- Encourage the state and other payers to provide financial support to primary care practices.
- Advocate for the Legislature to provide direct funding to independent primary care practices.
- Encourage public officials to promote the need to stay up to date on immunizations and other preventive care throughout this crisis.
- Use social and earned media to promote vaccinations, virtual visits, and other strategies to ensure patients are receiving needed care.
- Provide information to practices on using social and earned media in patient communications.
- Promote reminder/recall and other tools to help practices ensure that all North Carolinians are continuing to get the care they need, including vaccinations, preventive visits, and appropriate chronic disease management/monitoring.
- Develop and promote MOC opportunities that have reminder/recall elements to help increase patient volume while also allowing physicians to earn education credits.

## Q9 Please indicate your practice's status in regards to the following government aid programs:

Answered: 465 Skipped: 30

	APPLIED AND RECEIVED	APPLIED DID NOT RECEIVE	APPLICATION STILL PENDING	DO NOT QUALIFY FOR THIS PROGRAM (NOT APPLICABLE)	UNDECIDED WHETHER TO APPLY OR NOT	DID NOT APPLY	TOTAL	WEIGHTED AVERAGE
Paycheck Protection Program	39.87% 183	3.27% 15	11.55% 53	16.78% 77	7.19% 33	21.35% 98	459	3.06
Medicare Accelerated & Advanced Payment	12.47% 54	2.31% 10	6.47% 28	23.79% 103	10.85% 47	44.11% 191	433	4.46
Economic Injury Disaster Assistance Loan Program	4.90% 21	3.26% 14	8.39% 36	12.82% 55	14.22% 61	56.41% 242	429	4.91

### Cross Tabs for Paycheck Protection Program

#### Paycheck Protection Program (Percent)

Applied and Received  
Applied Did Not Receive  
Pending  
Do Not Qualify  
Undecided Whether to Apply  
Did Not Apply  
Percent of Those Who Applied Who Received

ALL	Peds	Fam Med	Rural	Physician-Owned	VFC
39.87	62.7	24.45	49.31	64.61	46.44
3.27	1.08	4.74	2.08	4.53	1.55
11.55	11.89	11.31	10.42	18.11	11.46
16.78	9.19	21.9	13.89	6.17	13.93
7.19	1.62	10.95	6.94	1.65	7.74
21.35	13.51	26.64	17.36	4.94	18.89
92.42	98.3	83.75	95.94	93.45	96.77

### Cross Tabs for Medicare Accelerated and Advanced Payment

#### Medicare Accelerated/Advanced Payment

Applied and Received  
Did Not Receive  
Pending  
Do Not Qualify  
Undecided Whether to Apply  
Did Not Apply  
Total  
Percent who Received Who Applied

ALL	Peds	Fam Med	Rural	Physician-Owned	VFC
12.47	4.17	17.74	15.6	13.6	12.25
2.31	0	3.77	1.42	1.75	1.32
6.47	2.98	8.68	3.55	5.7	5.96
23.79	36.31	15.85	22.7	27.19	24.17
10.85	4.76	14.72	12.06	4.39	12.58
44.11	51.79	39.25	44.68	47.37	43.71
100	100.01	100.01	100.01	100	99.99
84.37	100	82.46	91.67	88.57	90.24

## Cross Tabs for Economic Injury Disaster Assistance Loan Program

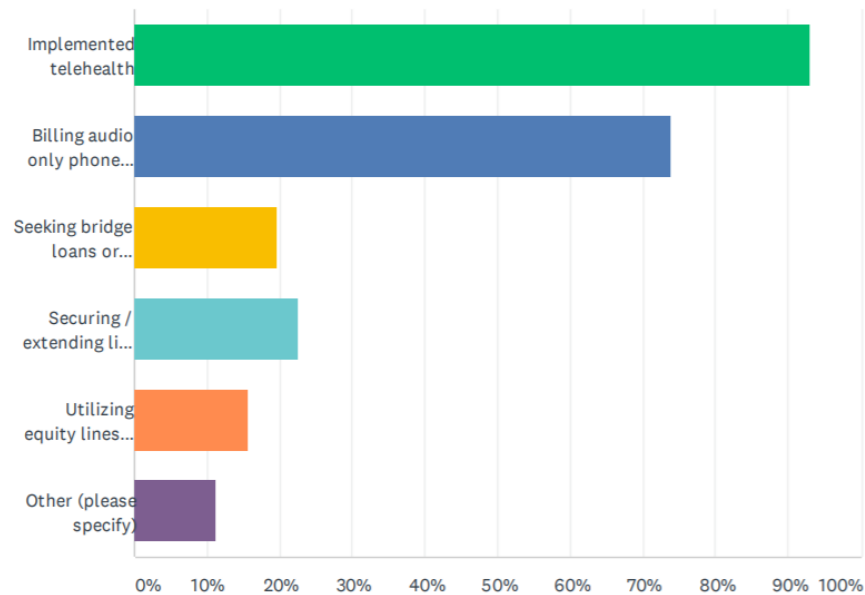
<b>Economic Injury Disaster Assistance Loan</b>	<b>ALL</b>	<b>Peds</b>	<b>Fam Med</b>	<b>Rural</b>	<b>Physician-Owned</b>	<b>VFC</b>
Applied and Received	4.9	5.99	4.2	4.35	7.39	5.7
Did Not Receive	3.26	2.4	3.82	2.9	4.35	2.68
Pending	8.39	8.98	8.02	4.35	13.48	8.39
Do Not Qualify	12.82	8.38	15.65	7.25	6.52	10.4
Undecided Whether to Apply	14.22	8.38	17.94	18.12	9.13	14.43
Did Not Apply	56.41	65.87	50.38	63.04	59.13	58.39
Total	100	100	100.01	100.01	100	99.99
Percent Who Received Who Applied	60	71.4	52.4	60	62.96	68

### KEY TAKEAWAYS FOR AL FEDERAL PROGRAMS:

- Many physicians have not gotten any assistance from federal programs. The Paycheck Protection Program has been used by far more than any other program with still only 40% applying and receiving this assistance.
- Over 90 percent of practices who applied for PPP and have heard back received funding.
- Not surprisingly, family medicine practices were much more likely to apply for the Medicare Advanced Payment Program, but less than a third of family medicine practices reported doing applying for the program, likely because of the short payback period. The large majority of those who did apply ended up receiving funding.
- The Economic Injury Disaster Assistance Loan Program has not been heavily utilized by primary care practices. This program has had policies changes mid-stream, indicating that programs that lack stability and clarity may be less useful.

## Q10 What other steps are you taking to improve revenue as a result of the COVID-19 pandemic (check all that apply)?

Answered: 491 Skipped: 4



ANSWER CHOICES	RESPONSES	
Implemented telehealth	93.08%	457
Billing audio only phone visits when appropriate	73.93%	363
Seeking bridge loans or business loans or assistance	19.76%	97
Securing / extending lines of credit	22.61%	111
Utilizing equity lines or lines of credit	15.68%	77
Other (please specify)	11.20%	55
Total Respondents: 491		



## Steps to Improve Revenue Cross Tabs

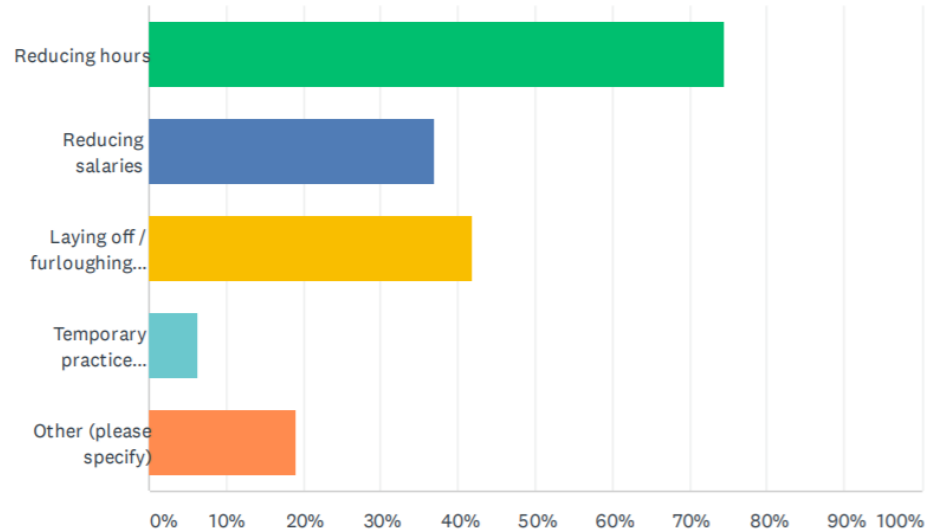
<b>STEPS TO IMPROVE REVENUE (Percentage)</b>	<b>All-Late March</b>	<b>All- April/May</b>	<b>Peds</b>	<b>Fam Med</b>	<b>Rural</b>	<b>Physician- Owned</b>	<b>VFC</b>
Implement Telehealth	90.28	93.08	95.81	91.33	91.56	93.03	96.55
Implement Audio Only Visits	66.94	73.93	70.16	76.33	72.08	68.44	78.74
Bridge Loans/Business Loans	14.44	19.76	29.32	13.67	21.43	33.2	22.7
Securing/Extending Lines of Credit	16.19	22.61	38.74	12.33	23.28	42.21	27.3
Utilize Equity Lines	12.15	15.68	27.75	8	14.94	29.92	16.68
Other	15.52	11.2	10.47	11.67	13.64	9.84	9.2

### KEY TAKEAWAYS:

- Every action designed to improve revenue increased between the late March and late April surveys.
- The vast majority of practices have implemented telehealth.
- Not surprisingly, physician-owned practices are more likely to seek bridge loans, lines of credit or equity lines. Given that a higher percentage of pediatric practices are physician-owned, a higher percentage of pediatric practices are also seeking these types of loans.
- Uptake of audio-visits occurred after rates were increased, suggesting that policy changes are having desired results.
- Pediatricians were far more likely to report having already taken out loans or lines of credits.

## Q11 What steps have you taken to reduce costs as a result of the COVID 19 pandemic (check all that apply)?

Answered: 484 Skipped: 11



ANSWER CHOICES	RESPONSES	
Reducing hours	74.38%	360
Reducing salaries	36.98%	179
Laying off / furloughing staff	41.94%	203
Temporary practice closure	6.20%	30
Other (please specify)	19.01%	92
Total Respondents: 484		

### Cost Reduction Measures Cross Tabs

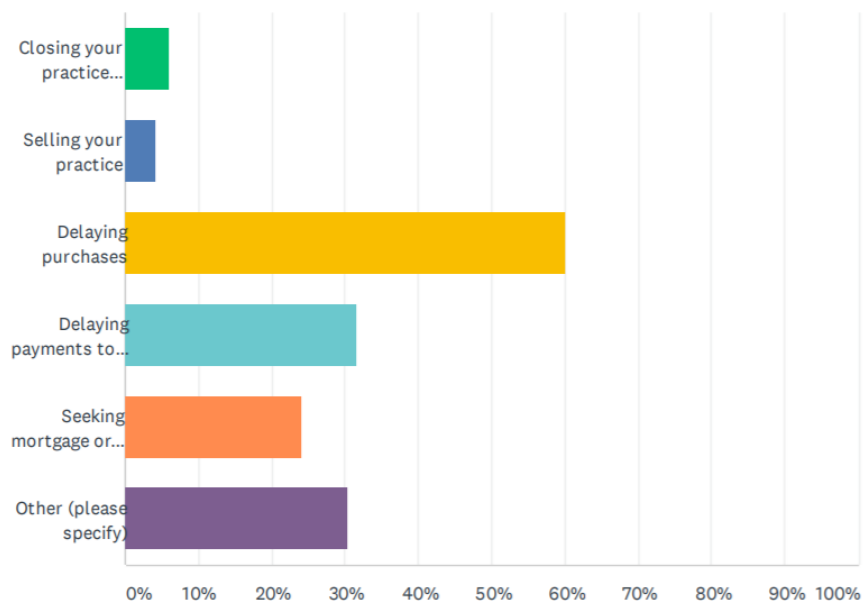
STEPS TO REDUCE COSTS (Percentage)	All-Late March	All-April/May	Peds	Fam Med	Rural	Physician-Owned	VFC
Reduce Hours	69.94	74.38	83.07	68.81	69.74	79.01	79.59
Reduce Salaries	23.93	36.98	45.5	31.53	31.58	39.09	41.69
Layoff/Furlough Employees	29.77	41.94	44.44	40.34	35.53	42.8	44.9
Temporary Closure	17.68	6.2	5.82	6.44	8.55	6.58	5.54
Others	27.07	19.01	17.46	20	17.11	18.11	15.74

#### KEY TAKEAWAY:

- The number of practices reducing salaries, furloughing employees, and reducing hours all increased since our last survey. A higher percentage of physician-owned practices are taking more severe cost reduction steps. This is also true for pediatric practices.

## Q12 Are you considering any of the following due to this pandemic (check all that apply)?

Answered: 406 Skipped: 89



ANSWER CHOICES	RESPONSES	
Closing your practice permanently	6.16%	25
Selling your practice	4.19%	17
Delaying purchases	60.10%	244
Delaying payments to vendors	31.53%	128
Seeking mortgage or other loan extensions	24.14%	98
Other (please specify)	30.30%	123
Total Respondents: 406		

## Other Actions Under Consideration Cross Tabs

ARE YOU CONSIDERING THESE (Percentage)	All-Late March	All-April/May	Peds	Fam Med	Rural	Physician-Owned	VFC
Permanently Closing	1.96	6.166	4.35	7.35	9.23	7.89	4.51
Selling Your Practice	1.96	4.19	3.73	4.49	3.85	6.58	2.78
Delaying Purchases	49.92	60.1	72.67	51.84	61.54	71.93	65.28
Delaying payments	24.71	31.53	54.04	16.73	28.46	48.25	37.15
Securing Mortgage/Loan Extensions	20.95	24.14	34.78	17.14	20.77	36.4	27.08
Others	37.32	30.3	18.01	38.37	26.92	14.47	26.04

### KEY TAKEAWAYS:

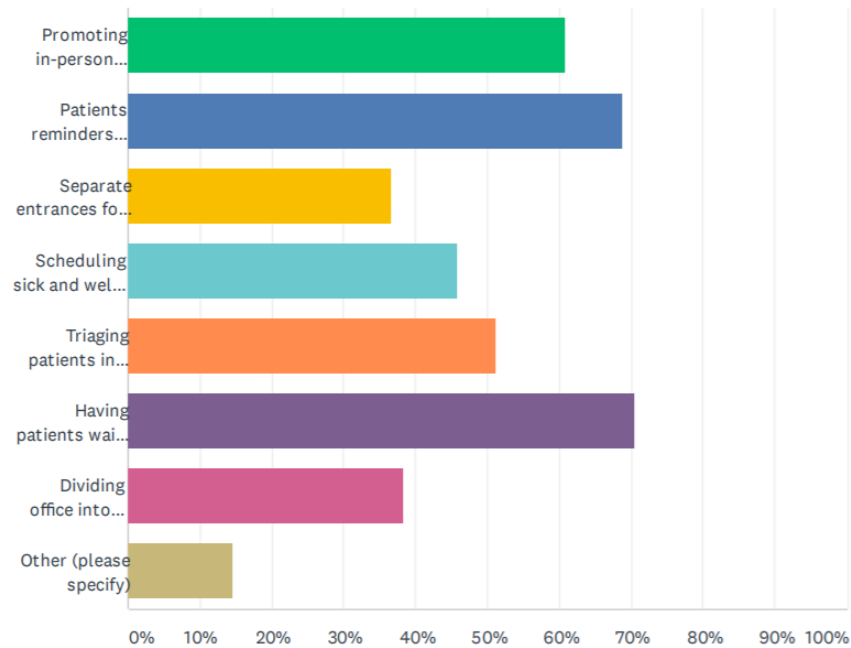
- The percentage of practices considering permanent closure or selling out to a larger entity has grown exponentially since late March. A higher percentage of family medicine practices, rural practices and physician-owned practices are considering such action.
- Every other cost saving measure has also increased since late March.
- Physician-owned practices are considering taking numerous cost-reducing actions across the board.
- There is a serious chance that the state will lose primary care capacity if immediate assistance is not provided.
- Fully 10 percent of physicians are considering permanently closing or selling their practice, increasing to 13% for rural practices and 14% for physician-owned practices. That level of practice losses would risk leaving some rural counties without primary care.
- Almost 5% of VFC providers are considering permanently closing.

### POTENTIAL ACTION ITEMS:

- Encourage the state and other payers to provide financial support to primary care practices.
- Advocate for the legislature to provide direct funding to independent primary care practices.
- Educate members about available financial resources and strategies to increase financial stability.

### Q13 What are you doing to prepare for the easing of restrictions (check all that apply)?

Answered: 495 Skipped: 0



●

ANSWER CHOICES	RESPONSES	
Promoting in-person visits and office safety via your website or social media	60.81%	301
Patients reminders (calls/e-mails) for physicals, well-child visits, etc.	68.89%	341
Separate entrances for sick and well visits	36.57%	181
Scheduling sick and well visits at different times of the day	45.86%	227
Triaging patients in their cars	51.31%	254
Having patients wait in their cars as opposed to the waiting room	70.51%	349
Dividing office into sick and well rooms with separate sick and well care teams	38.38%	190
Other (please specify)	14.55%	72
Total Respondents: 495		

## Preparation for Easing Restrictions Cross Tabs

### What are you Doing to Prepare for Ease in Restrictions

Promoting In-Person Visits

Patient Reminders

Separate Entrances (Sick and Well)

Sick/Well at Different Times of Day

Triaging Patients in Cars

Cars as Waiting Rooms

Dividing into Sick and well Rooms/Teams

Other

ALL	Peds	Fam Med	Rural	Physician-Owned	VFC
60.81	74.87	51.97	45.22	70.2	67.34
68.89	91.1	54.93	64.97	82.04	80.52
36.57	50.79	27.63	38.22	43.67	44.41
45.86	64.92	33.88	38.22	52.65	53.3
51.31	52.88	50.33	61.78	57.14	55.87
70.51	81.15	63.82	75.16	80.82	76.5
38.38	51.31	30.26	35.67	42.86	43.84
14.55	10.99	16.78	16.56	11.84	11.17

### KEY TAKEAWAYS:

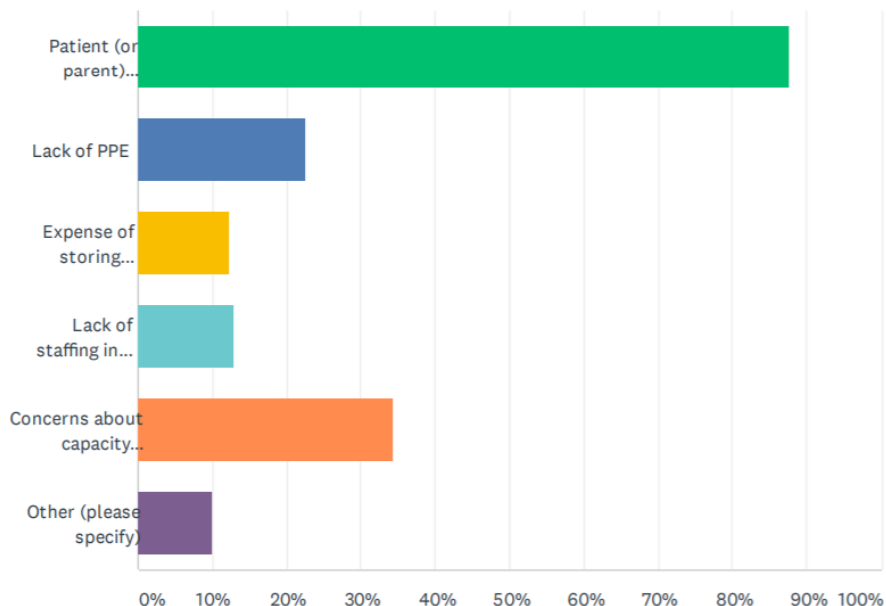
- Primary care practices are taking a variety of actions to begin increasing the number of face-to-face visits as restrictions ease.
- Physician-owned and pediatric practices are more likely to have considered various actions to help as in-person visits increase.
- In open-response questions, help preparing for more in-person visits was one of the top five identified needs

### POTENTIAL ACTION ITEMS:

- Provide needed guidance on steps practices should take as their volume of in-person visits increase.
- Provide education on best practices regarding which patients are best seen in person and which patients can be seen utilizing telehealth.
- Provide education on balancing a mix of in-person and virtual visits.
- Use earned and social media to promote visits.
- Urge state officials to promote visits, especially for vaccines.

**Q14 Given that many patients have clearly missed immunizations during this pandemic, what barriers to you see in giving vaccines in your office moving forward (check all that apply)?**

Answered: 483 Skipped: 12



ANSWER CHOICES	RESPONSES	
Patient (or parent) reluctance to come in for an in-person visit	87.58%	423
Lack of PPE	22.57%	109
Expense of storing appropriate vaccines	12.42%	60
Lack of staffing in your office	13.04%	63
Concerns about capacity (especially toward the beginning of the school year)	34.37%	166
Other (please specify)	10.14%	49
Total Respondents: 483		

<b>Barriers to Immunizations Going Forward</b>	<b>ALL</b>	<b>Peds</b>	<b>Fam Med</b>	<b>Rural</b>	<b>Physician-Owned</b>	<b>VFC</b>
Patient or Parent Reluctance	87.58	94.71	82.99	84.52	89.75	94.51
Lack of PPE	22.57	22.75	22.45	20	25.82	21.1
Expense of Storing Vaccines	12.42	7.41	15.65	12.26	15.57	8.67
Lack of Staffing in Office	13.04	8.47	15.99	9.03	7.79	11.56
Concern about Capacity (near school start)	34.37	48.68	25.17	30.97	33.61	39.88
Other	10.14	7.41	11.9	10.32	9.43	6.65

#### **KEY TAKEAWAYS:**

- Patient reluctance to come to the office for in-person visits is the biggest perceived barrier to providing immunizations during this ongoing crisis.
- Concern about capacity as students begin returning to school and the availability of PPE are also significant concerns.

#### **POTENTIAL ACTION ITEMS:**

- Work with state leaders to develop a public awareness campaign on the importance of well-child and adolescent visits that include immunizations.
- Use earned and social media to promote vaccination.
- Work with other partners, such as child advocacy groups, to promote vaccination.



## Q15 Are there other areas where you need specific assistance during this crisis (check all that apply)?

Answered: 466 Skipped: 29

ANSWER CHOICES	RESPONSES	
Human resources / benefits assistance	15.24%	71
Mental health / physician well-being assistance	19.53%	91
Childcare resources for you and/or your staff	22.32%	104
Nuts and bolts on implementing telehealth for the practice	13.30%	62
Nuts and bolts on providing telehealth from your own home	10.30%	48
Understanding coding and recent insurance changes on telehealth	34.76%	162
Patients' knowledge of the availability of telehealth	53.86%	251
Patients' technical ability to use telehealth	64.16%	299
Stronger internet access for the physician's home or office	18.45%	86
Internet access or stronger access for your patient	48.93%	228
Information about when to do an in person visit versus virtual well and other visits	29.61%	138
Helping patients access other resources (food, shelter, etc.)	36.91%	172
Helping patients access mental health services	40.99%	191
Other (please specify)	6.65%	31
Total Respondents: 466		

### Areas of Assistance Cross Tabs

<b>AREAS OF NEED (Percentage)</b>	<b>All-Late March</b>	<b>All- April/May</b>	<b>Peds</b>	<b>Fam Med</b>	<b>Rural</b>	<b>Physician- Owned</b>	<b>VFC</b>
HR/Benefits	16.81	15.24	19.23	12.68	12.5	16.1	14.71
Mental Health/Physician Well Being	20.73	19.53	18.13	20.42	14.47	16.1	21.32
Childcare for You or Staff	32.07	22.32	24.18	21.13	19.08	18.64	25.23
Nuts & Bolts on Telehealth for Practice	30.81	13.3	10.44	15.14	12.5	10.17	12.91
Nuts & Bolts on Telehealth for at Home	25.35	10.3	9.89	10.56	9.21	8.47	10.21
Understanding Coding	46.08	34.76	36.81	33.45	28.95	33.47	36.64
Patient Knowledge of Availability of Telehealth	56.72	53.86	58.79	50.7	56.58	52.12	58.56
Patient Technical Ability to Use Telehealth	57.84	64.16	62.09	65.49	72.37	59.75	68.47
Stronger Internet Access for Physician	19.89	18.45	19.23	17.96	19.08	19.92	19.52
Access to or Stronger Internet Access for patient	35.57	48.93	54.95	45.07	57.24	52.12	53.15
Info about when to do an in-person vs. virtual visit	36.83	29.61	25.82	32.04	25	23.31	31.23
Helping patient access other resources	35.57	36.91	43.96	32.39	34.21	34.32	41.14
Helping patient access mental health resources	36.55	40.99	46.7	37.22	30.92	41.95	44.74
Other	9.8	6.65	4.95	7.75	7.24	4.66	5.71

**KEY TAKEAWAYS:**

- Patient knowledge of the availability of telehealth and patient technical ability to use telehealth remain key and growing concerns.
- Fewer physicians report needing help with the nuts and bolts of telehealth, suggesting that supports provided by multiple groups have been helpful.
- On open-ended responses, numerous respondents mentioned the need for stability in telehealth policies and payment.
- Access to stronger internet service has become a growing concern.
- More physicians report needing help linking patients with mental health resources.
- Many of the other concerns primary care practices voiced in the last survey are flat or have eased slightly.

**POTENTIAL ACTION ITEMS:**

- Continue to promote telehealth visits to patients through various means.
- Advocate for broadband solutions for the state, particularly in our rural areas.
- Continue to work with partners to develop best practices on when to use telehealth versus in-person visits.
- Promote the NC Pediatric Access Line, the Collaborative Care Model and other strategies to help link physicians and patients with mental health resources.

**What one thing would be most helpful to you right now whether mentioned above or not (open response question)? – n=348**

**Please provide any additional comments or insights you may have (n=177)**

**Takeaways from Open-Ended Questions:**

Respondents are clearly looking towards the future, with many comments regarding the need for increased testing, re-opening practices/increasing in-person visits, preparing for back to school, and seeking stability and longer-term guidance on telehealth.

Several themes garnered significant comments during the open-ended questions:

- The need for immediate and concrete financial assistance received the most comments.
- The need for PPE continues to be a concern with frequent open-ended comments.
- Comments about the need for testing (including in-office testing) increased significantly compared to our past survey.
- The need for patient outreach and guidance on increasing in-person visits also garnered a significant number of comments.
- Finally, the need for long-term stability in telehealth policies and payments was mentioned in many comments as physicians look toward future waves of COVID-19. Respondents also expressed concerns about commercial insurance policies that promote remote third-party telehealth services versus telehealth provided through the medical home.

Other areas of concern mentioned frequently included::

- The need for more guidance on when to use telehealth and when to schedule an in-person visit.
- Mental health needs for self, staff, and patients.
- Development of a COVID vaccine.
- Helping staff who have been laid off or had hours reduced.