

Better Primary Care from the People's Perspective

March 5, 2025



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AGENDA

- ★ Housekeeping
- ★ Why Commonwealth Funded This Research
- ★ Introductory Remarks
- ★ Findings from USofCare's 2024 Primary Care Listening Research
- ★ Primary Care Policy Landscape
- ★ Panel Discussion
- ★ Audience Q&A
- ★ Closing



Ask questions using the Q&A feature.



Automatic closed captioning is available.



This webinar is being recorded.

Today's Speakers



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& Co-Founder,
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Ann Greiner
Chief Executive Officer,
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Why The Commonwealth Fund Supported This Work



**The
Commonwealth
Fund**



Corrine Lewis
Assistant Vice President,
Delivery System Reform
Commonwealth Fund

Welcome & Introductory Remarks



Natalie Davis
Chief Executive Officer &
Co-Founder, USofCare

Welcome & Introductory Remarks



Ann Greiner
Chief Executive Officer,
Primary Care Collaborative



The Primary Care Landscape

There has been a significant **decrease in the availability** of primary care clinicians that has struggled to keep up with the demand

Source: [AAMC Resource and Action Institute](#)

Physician burnout is high

Source: [AAFP](#)

Consolidation means that stand alone primary care clinicians are **less common.**

Sources: [KFF](#); [Physicians Advocacy Institute](#)

Increase in virtual care options and the availability of urgent care facilities to meet high demand

Source: [Urban Institute](#)

NATIONAL POLL METHODOLOGY

The following findings were from a poll conducted with Morning Consult between August 29-September 6, 2024 among a sample of 3,306 adults including oversamples of Rural (N = 550) and POC (N = 550) adults. The interviews were conducted online and the data were weighted to approximate a target sample of adults based on age, gender, and race. Results from the full survey have a margin of error of plus or minus 2 percentage points.

FOCUS GROUPS METHODOLOGY

On October 9, 2024, two national focus groups were conducted via the online platform Discuss.io: one with rural adults and the other with young adults (ages 18–30).

LIMITATIONS

The survey was conducted among a stratified non-probability sample and then weighted to reflect the distribution of the national population. Since not every member of the population has an equal chance of being included in the sample, all of the findings may not accurately reflect the true distribution of opinions or characteristics. Additionally, the focus groups were conducted among select focus populations and by nature of the qualitative approach, are not generalizable to the general population.

AUDIENCE DEFINITIONS

People of Color: Adults who are non-White *and* not of Hispanic origin or descent

AIAN/AAPI = American Indian, Alaska Native, Asian American, Pacific Islander

Rural Adults: Adults who self-report they live in a rural area

Gen Z people born between 1997 and 2012

Millennials people born between 1981 - 1996

Gen X people born between 1965 - 1980

Baby Boomers people born between 1946 - 1964

KEY TAKEAWAYS

1 People are **generally satisfied** with their primary care and **highly prioritize** having a regular primary care clinician and receiving primary care services.

2 **Young adults, people living in rural communities, and people of color** face the biggest barriers to getting the primary care they need - primarily due to cost and access.

3 **Satisfaction with primary care increases as age increases** due to more established relationships with primary care clinicians and their health care coverage.

4 While insurance coverage ultimately guides the choice of primary care clinician, the ability of the **clinician to listen, communicate effectively, and is culturally responsive is most important** for adults when receiving primary care - particularly among people of color.



What People Consider *Primary Care*

- Routine physical exams
(e.g., reviewing medical history, checking heart, lungs, and other vital organs, getting blood work)
- Screening exams
(e.g., cholesterol, diabetes, depression)
- Prescription refills
- Treatment for general health concerns
(e.g. rash, infections, etc)
- Vaccines/immunizations
- Breast Exams
- Pap smear
- Chronic disease management

“I think primary care would be the care that you would receive that prior to going to say a specialist, that's what I would consider primary care. Anytime needing to go to a specialist, I don't think that's primary. So your first line of defense is that care at the primary.”

- Rural Black Woman, SC, Age 50-60

PRIMARY CARE SENTIMENTS

Focus group participants were asked to share the first word that came to mind upon seeing the following terms. Most words expressed around different aspects of the healthcare system were negative, but for primary care the sentiment was relatively neutral.

PRIMARY CARE

unhelpful appointments
doctor
delayed not-enough

expensive

unaffordable

fortunate

HEALTH INSURANCE

Canada

free
affordability employer

scam

unnecessary

HOSPITALS

needed crucial
lacking
stay-away closing lucrative
scary

MINUTE CLINICS

love
untrustworthy
unfamiliar
personal bad inadequate access
fast
unhelpful

HEALTHCARE SYSTEM IN THE U.S.

trash underdeveloped
expensive profits
horrible fair
complicated overpriced

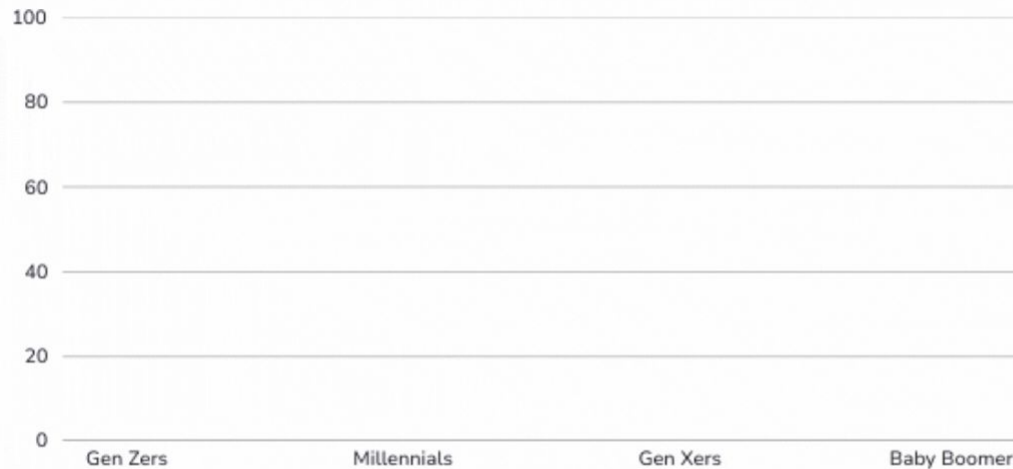
*Minute Clinics are walk in clinics designed to treat minor illnesses and injuries located inside some CVS Pharmacy and Target stores

Accessing Primary Care

When we asked 3,306 adults if they have received primary care services within the last 2 years in person or virtually...

74% of adults said they have received primary care services in person or virtual in the last 2 years

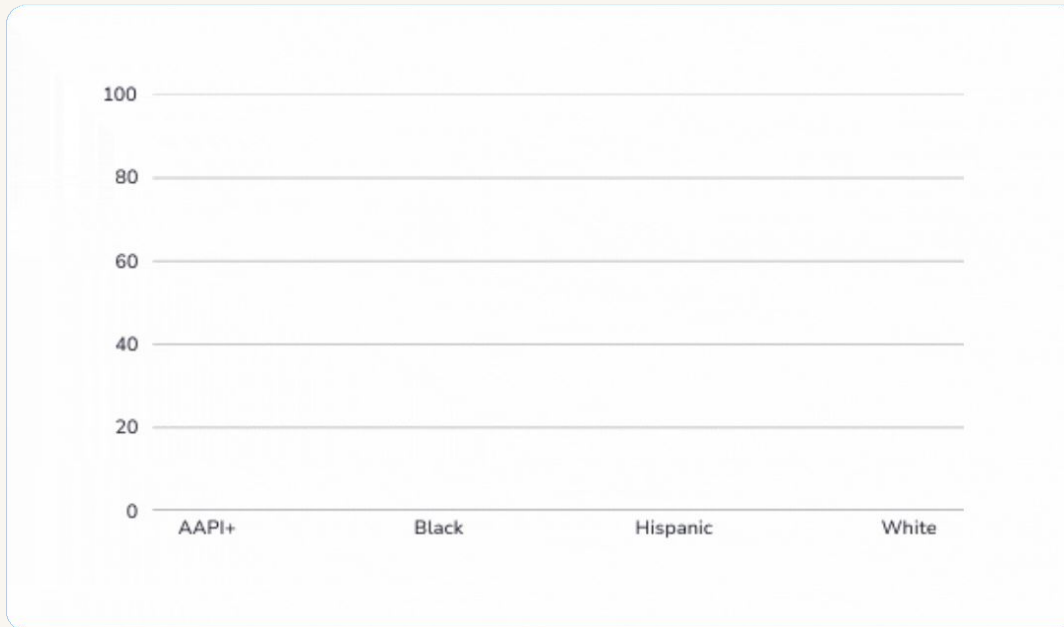
74%



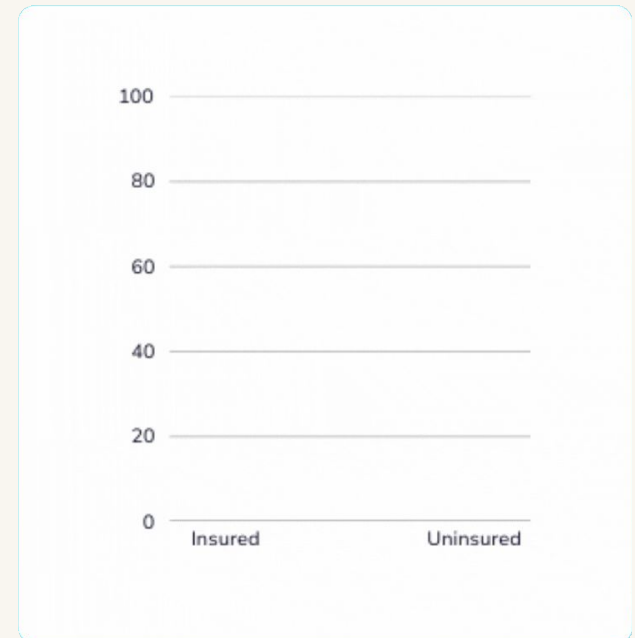
We saw that as age increased, the number of adults of receiving primary care services in the last 2 years also increased

Accessing Primary Care

We saw less utilization of primary care services among adults of color:



And without health insurance coverage:



Accessing Primary Care

Adults that have sought primary care services in the last 2 years went primarily for:

Less sought care for cold or flu (38%), Mental health concerns (27%) or chronic disease management (24%)

Accessing Primary Care

Adults have generally found it easy to access primary care services (80%) but we see that number drop to 74% among adults that identify as Asian, American Indian, Alaska Native, or Pacific Islander.

Reasons adults say primary care is difficult to access include:

- **health insurance issues**
- **scheduling and wait times**
- **financial constraints**
- **provider availability**

We also see the ease of access drop significantly among Gen Zers (69%) and Uninsured adults (50%)

Accessing Primary Care

Hospital closures, transportation, and affordability were top of mind among **rural focus group participants** when it comes to health care and primary care in their communities

hospital closures

transportation

affordability

“We recently lost one of our hospitals here. It's fortunate that I'm able to drive to health care, which is whichever way I go. If I go North or West, it's going to be an hour. But there's a large community of older folks here, or older than me. And a lot of them don't drive and you may see them next door trying to get a ride to a doctor's appointment or something.”

**BLACK WOMAN AGE 50-60,
RURAL SC**

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Affordability and Primary Care

the number of adults that said they did not need to see a doctor if they weren't sick.

26% of adults said they haven't received primary care in the last 2 years because **they couldn't afford it.**

said it was because they don't have health insurance.

This tells us that even with insurance, people are still feeling like they can't afford primary care.

Affordability and Primary Care

When we look more closely at the quarter of adults that say they don't seek primary care because they cannot afford it, we noticed that the **rural populations** in our sample were more likely to say they **couldn't afford primary care** (32% compared to 21% of urban and 24% of suburban populations).

“I mean, one of the major issues in my community is access to health care, basically affordable health care.”

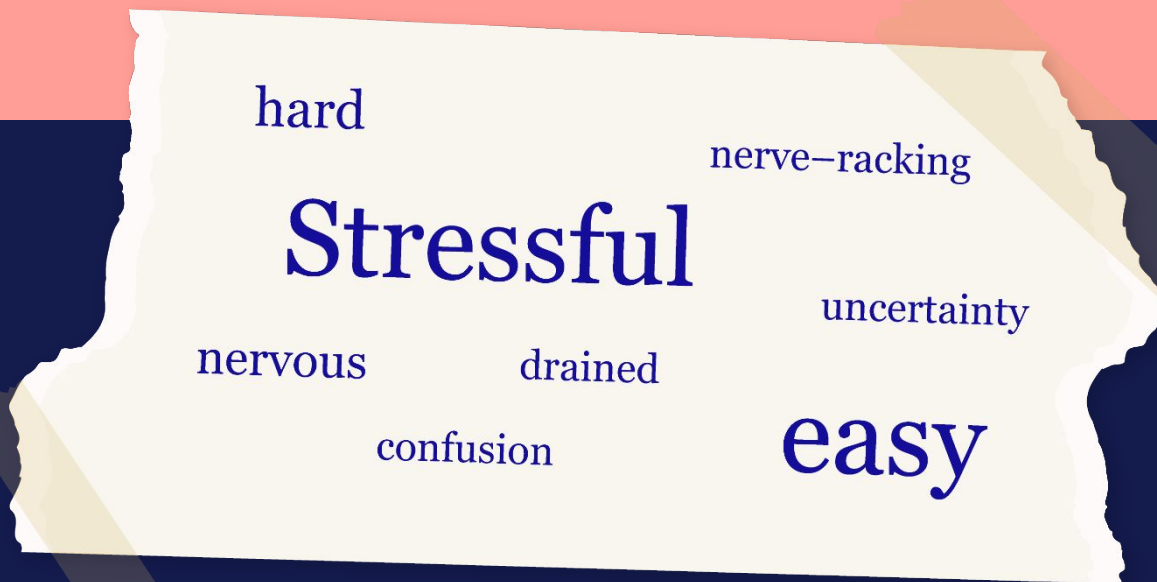
BLACK MAN AGE 50-60, RURAL FL

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Patient Experiences with Primary Care

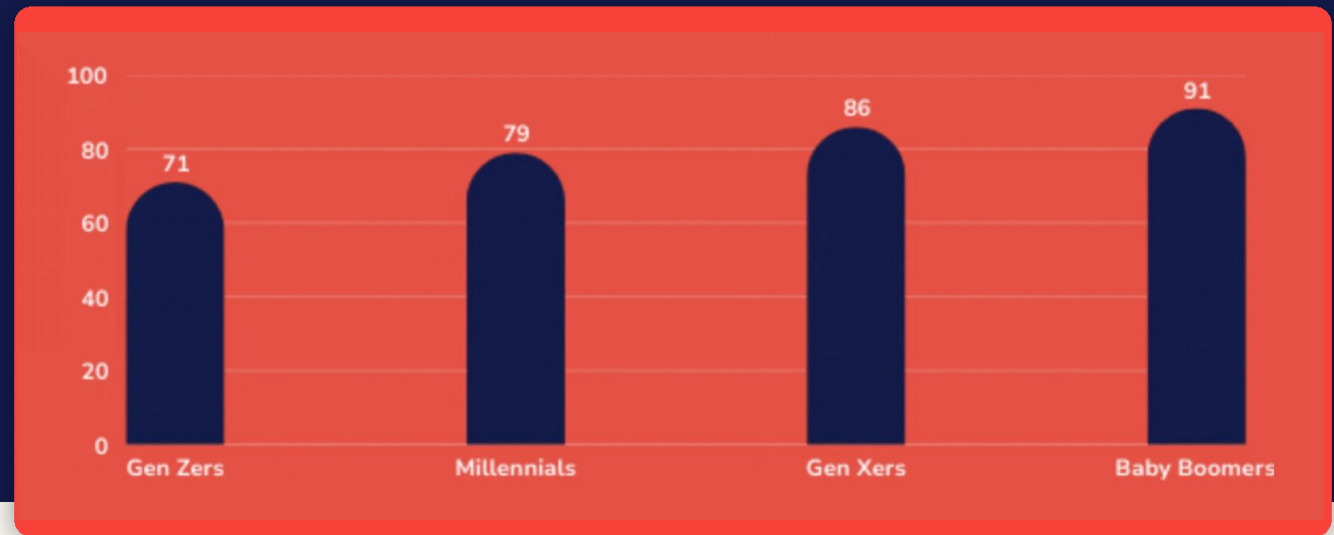
Emotions that come up when trying to find a primary care clinician:

[the bigger the word, the more often it was said]



Patient Experiences with Primary Care

When we asked how much of a priority it is for adults to have a regular primary care clinician, GenZers were much less likely to consider primary care a priority than Baby Boomers...



Adults main determining factor for choosing their PCP → they were in network (57%)

What's most important to adults when receiving primary care services?

Clear communication of diagnosis and treatment options (88%)

Others important factors include: **addressing the root** of health problems, timely follow up on test results and referrals, understanding medical history, **understanding what is covered** by health insurance, and convenient appointment times

Among adults of color and those living in urban communities, their clinician having a comprehensive **understanding of cultural and linguistic differences** was also an important trait they wanted to see in their PCP.



“ I was trying to find someone that I fit with, where we jive. And going from doctor to doctor, it's kind of hard because you want to make sure that when you come in, at least they remember who you are. Well maybe not who you are, but once they look at your chart and say, "Oh yeah, I remember we talked about X, Y and Z." I want that rapport with a doctor. I don't want to have to repeat everything again that I repeated a month ago.”

– Rural Focus group participant

Satisfaction with Primary Care

Within our sample, a large majority of adults overall reported being satisfied with their primary care services (92%). (N = 2,441)

Similar to the trends in **utilization** of primary care services by age, we saw a similar progression among age demographics when it comes to **how satisfied** adults are with their primary care services.

We noticed that as age increases, satisfaction increases which is largely due to better insurance coverage and established relationships and trust with their clinicians.

Top 3 reasons for dissatisfaction with primary care experience (N= 801):

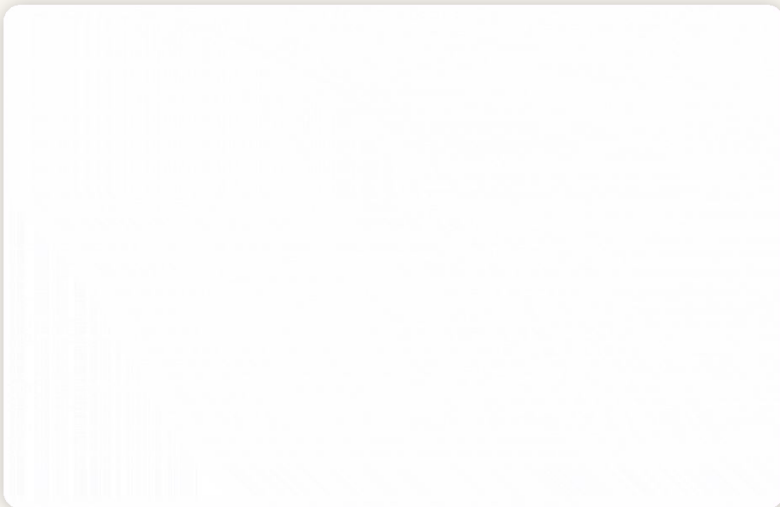
- Provider rushed through an appointment - 26%
- The provider did not spend much time with them - 23%
- The wait time at the doctor's office was too long 20%

Satisfaction with Primary Care

When we asked how satisfied or dissatisfied people are with their **health insurance coverage for primary care**:



When we look at satisfaction with health insurance coverage across demographics, we see the same trend with differences across age groups:



The reasons for dissatisfaction with their health insurance coverage for primary care were

- high out of pocket costs
- unexpected medical bills
- difficulty finding an in network provider

Barriers & Solutions

- ★ Rural and young people in our focus groups have a clear vision of how primary care in the U.S. should be: **accessible, affordable, and convenient.**
 - There are ways in which their experiences with primary care fall short of these ideals.
- ★ For rural participants, some live over an hour from the nearest quality medical center and people in their community lack transportation to get there and experience long wait times.
- ★ Young participants bemoaned expensive medical bills despite being insured, and their concerns not being taken seriously.

Participants associated accessibility with:

- **Appointment scheduling**
- **Shorter wait times**
- **Communication with practitioner for questions/concerns**
- **Having more options of practitioners**
- **Affordability for all**
- **Outreach and education**



Affordability and Access

- ★ Participants want to see lawmakers focus on reducing cost and increasing access to health care services.
- ★ Participants in both focus groups agreed that affordability was an issue in healthcare that needs to be addressed. Young participants especially expressed distrust of the health care system and believe that it values “profit over people.”
- ★ Rural participants expressed high agreement on *convenience* being an important element of access.
- ★ Affordability was linked to accessibility, along with factors such as: distance (particularly for rural participants), wait times both to get an appointment and once they arrive.
- ★ Younger participants had a broader variety of solutions they wanted to see, but most agreed that *lowering costs, especially for vision and dental care* was an important focus.



The Primary Care Environment

Ann Greiner, *Primary Care Collaborative*



Why this Research is Important

Patient views and expectations given the seismic changes in primary care over the last few decades:

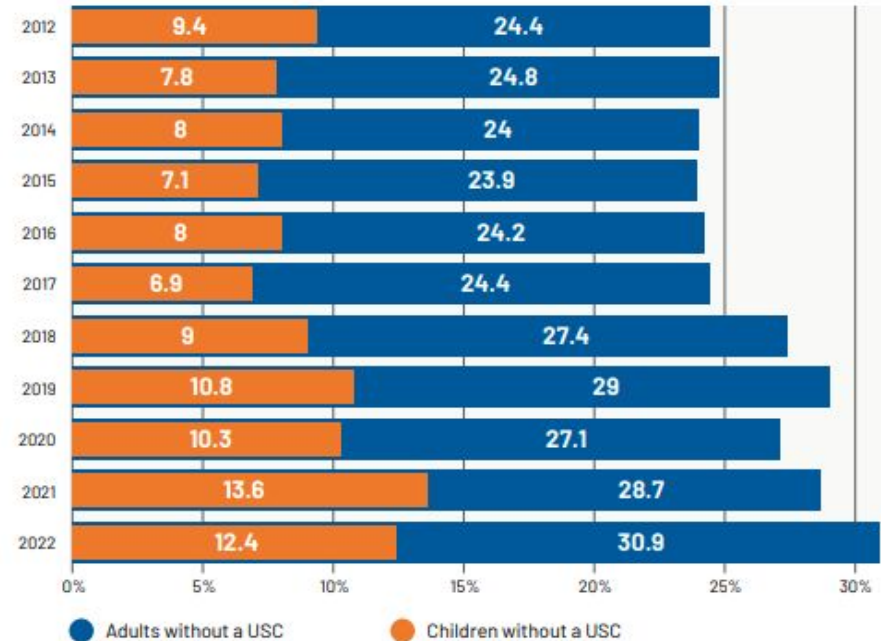
- **Where PC is Delivered** — a movement away from community-based, independent primary care
- **Who is Delivering PC** — It has become a team sport
- **Great Use of Technology** – more virtual primary care – along with bricks and mortar or just standalone remote primary care

Understanding how different people perceive primary care -- their preferences and values -- is critical as we take steps to strengthen this important foundation of our health care system.

Primary Care is Eroding

- Milbank Memorial Fund's Annual Scorecard reveals that **nearly 31% of adults and 12.5% lack a usual source of care.**
- We're seeing a **decline in the percentage of physicians, nurse practitioners and PAs working in primary care** – and new physicians are considerably more likely to go into specialties other than primary care (only 19% are becoming PCPs)

Figure 4. Percentage of US Population Without a USC Rises to Highest Level in Decade (2012–2022)



A Broader Assignment

Policymakers are increasingly looking to primary care to address a multiplicity of concerns, such as:

- Rising incidence of chronic conditions
- Mental health and substance abuse challenges
- Connecting vulnerable patients to community based social services
- Oral health and end of life care ...

But our investment in our health care system's foundation is continuing to erode.

👤 Primary Care Spend Perception...

New research published in the Annals of Family Medicine shows that **the public believes** primary care accounts for **60% of all health-related visits** and **50% of health care spending.**



... Versus Reality

While primary care *does* account for roughly half of all health care visits, it accounts for **less than 5% of all spending in the U.S. health care system.**



Polymakers Begin to Act

Administration – has advanced new primary care payment and delivery models through CMMI – including hybrid payment in MSSP’s PC Flex model – and bundled a group of codes in the fee schedule to pay a monthly prospective payment, the APCM code

Capitol Hill – Bipartisan legislation (Senators Cassidy and Whitehouse) and Medicare payment reform from Senate Finance Committee has advanced the idea of primary care hybrid payment



Panel Discussion



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Thank You!

Audience Q&A