

# PULSE OF CONSUMERS AND PHYSICIANS: The 2019 Texas Medical Center Survey of the US and Texas YEAR 5



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# From the Texas Medical Center Health Policy Institute



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# The Panel



**Stephen H. Spann, MD, MBA**  
Vice President for Medical Affairs  
Founding Dean, College of Medicine  
University of Houston



**Vivian Ho, PhD**  
Director of the Center for Health and  
Biosciences  
Rice University Baker Institute for Public  
Policy



**Robert E. Jackson, MD, MACP**  
Clinical Professor of Medicine Weill Cornell  
Medical College - Houston Methodist Hospital  
Officer at Large Harris County Medical Society

# The Nation's Pulse: Year Five

- This year, we surveyed 2,750 participants
  - 2,000 consumers with oversampling permitting Texas comparison
  - 750 physicians: 375 generalists and 375 specialists
- Survey was completed June-July 2019
- Luminas, LLC used a standard online protocol
- \*  $p < 0.05$  significant difference
  - with  $N = 2,750$ , so “small” differences count



# Consumers and physicians: Four Key Areas



**National issues**



**Reducing the cost of  
health care**



**Physician compensation and the  
health care workforce**

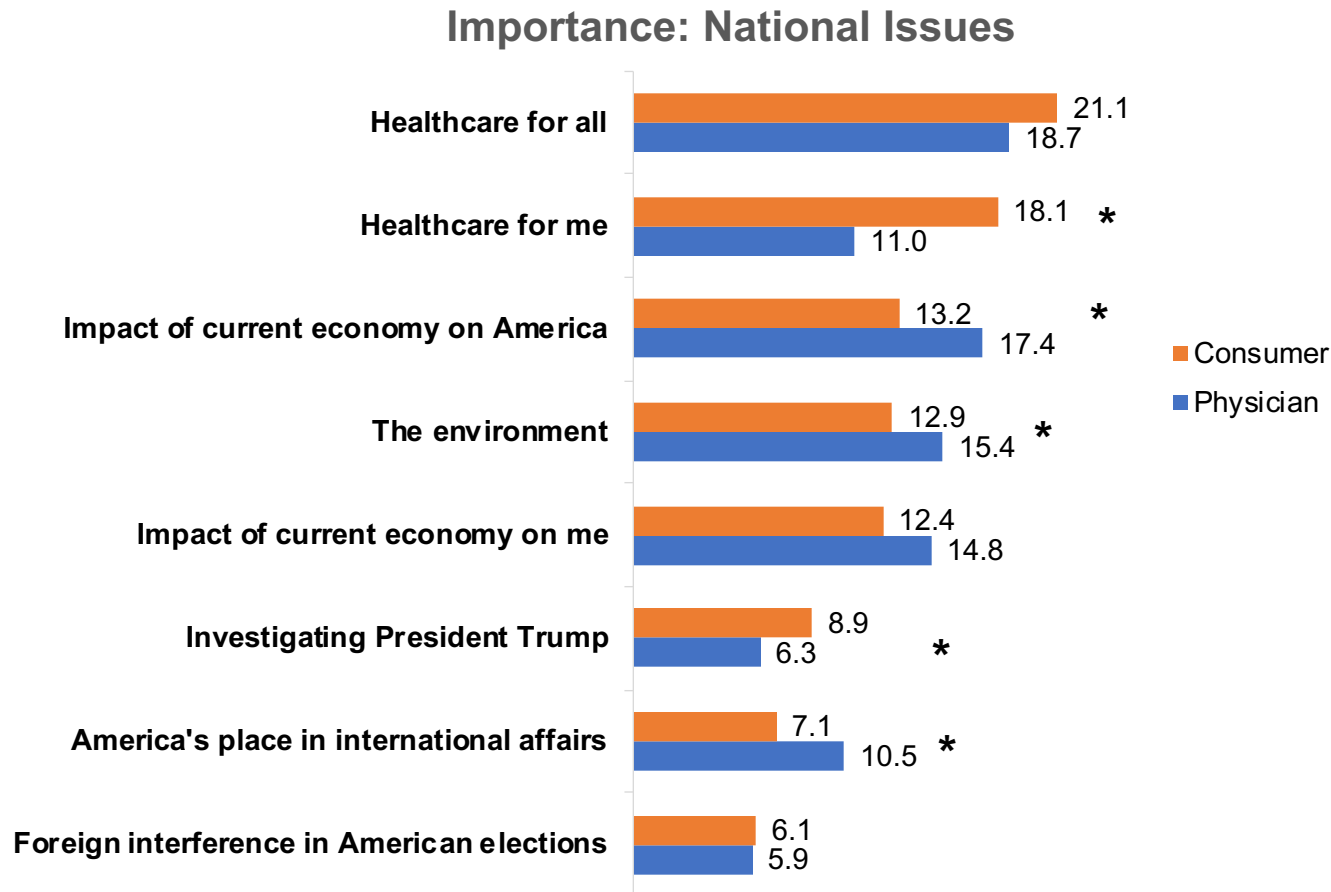


**The 2020 election**

# NATIONAL ISSUES

- Health care has ranked at the top of issues in the presidential campaign... Health care for all, or health care for me?

# Consumers and physicians rank health care for all as #1.



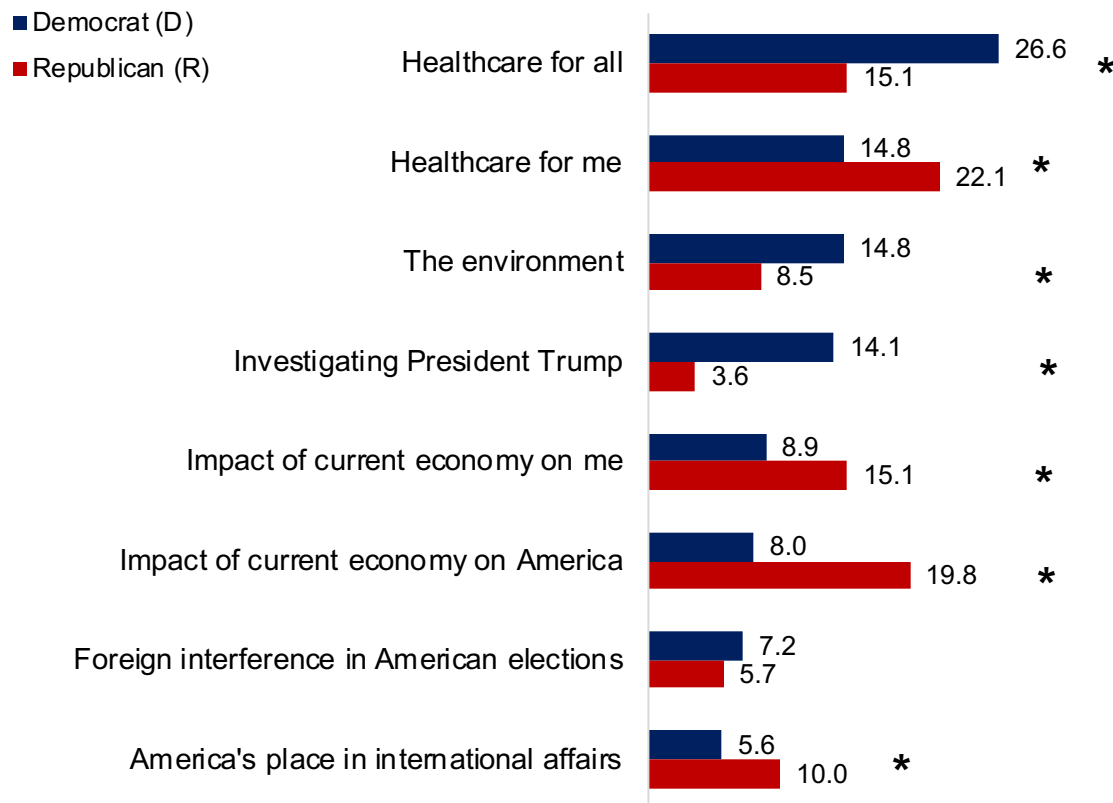
**BASE: ALL QUALIFIED RESPONDENTS** (Physician (n=750); Consumer (n=1500))

Q532. Imagine you have 100 votes to cast across the following issues. Where will you put them relative to what is important to you?

# Health care for ALL is the most important issue to Democrats, and health care for ME to Republicans.

## Importance: National Issues

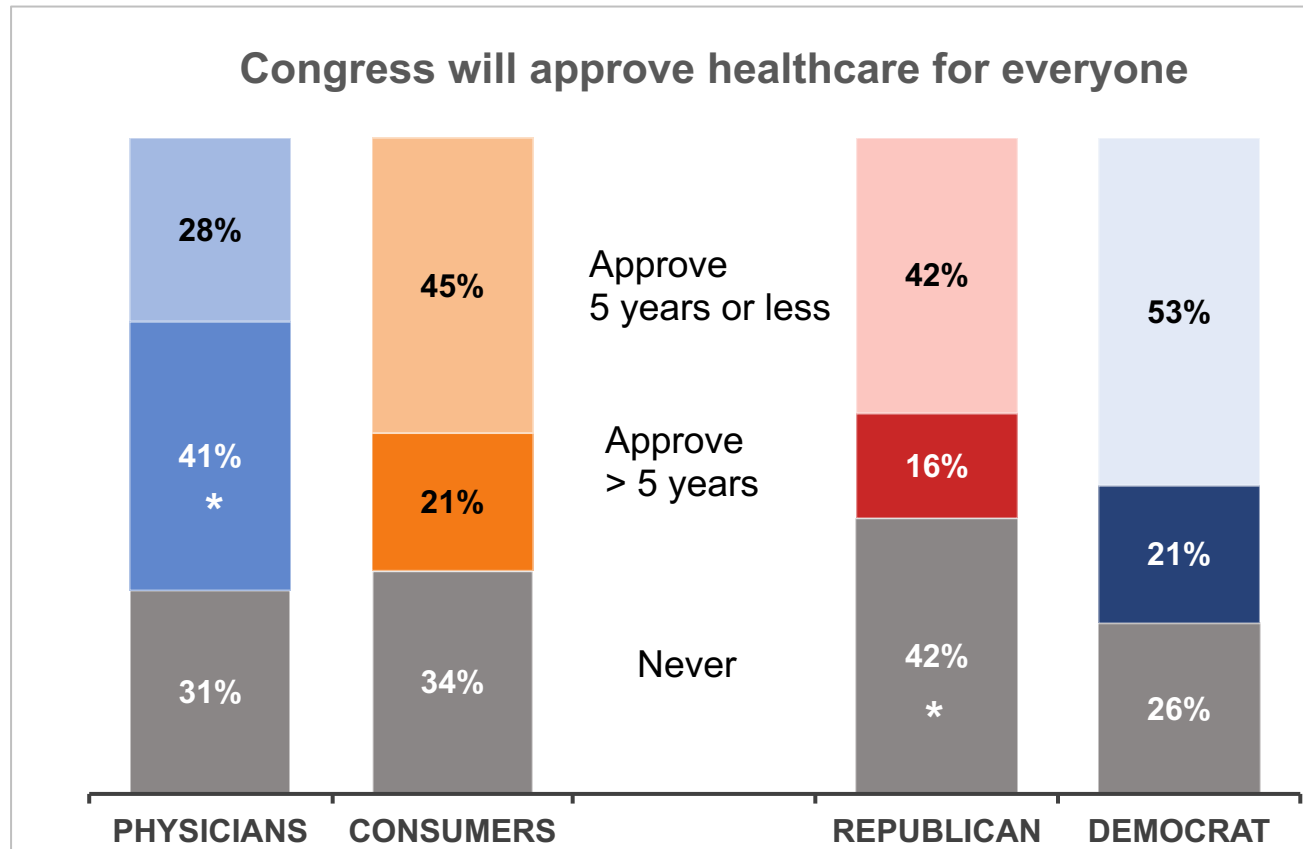
### Party Affiliation



BASE: ALL QUALIFIED RESPONDENTS (n=1500)

Q307. Imagine you have 100 votes to cast across the following issues. Where will you put them relative to what is important to you?

About 2/3 of physicians and consumers say that everyone will have health care coverage, but physicians say it will take longer. More Republicans say that we will never have health care for everyone, but still >50% say we will.

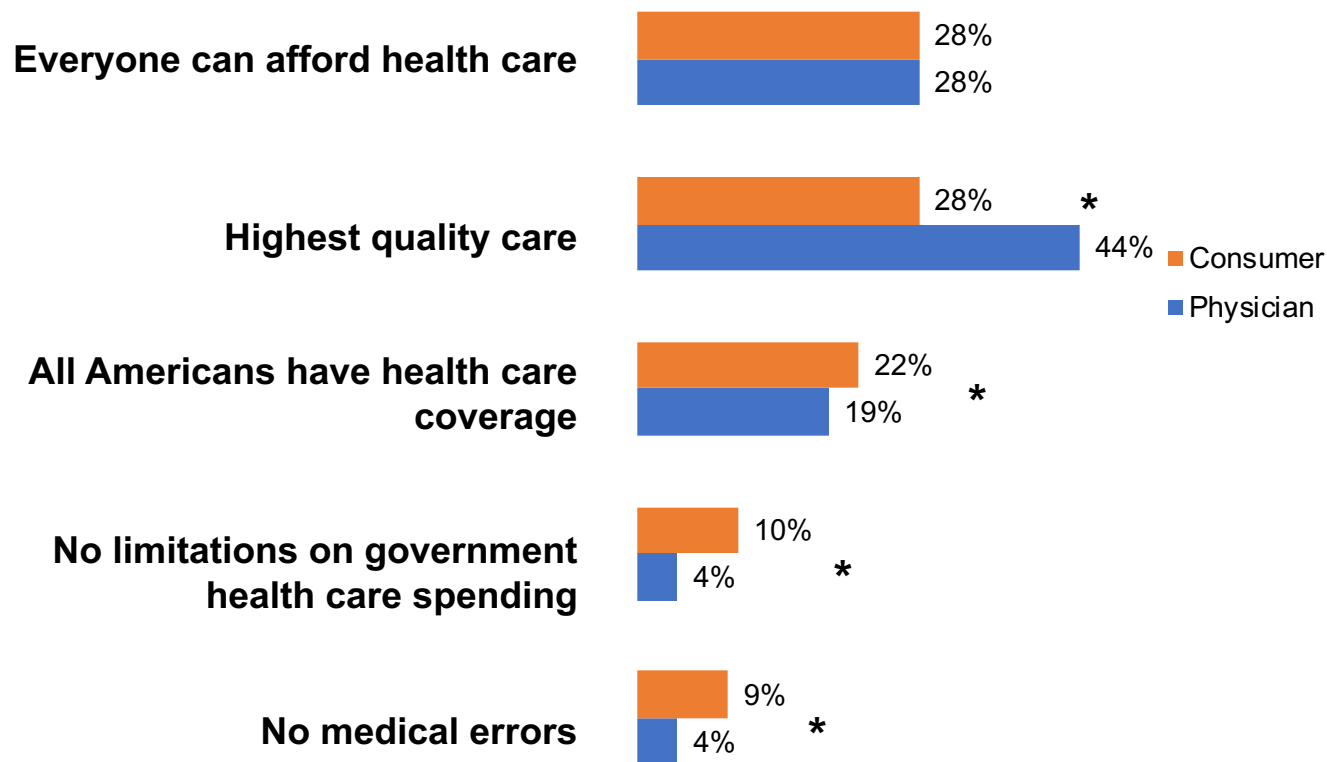


**BASE: ALL QUALIFIED RESPONDENTS** (n=1500)

Q230. When do you think Congress will approve a plan so everyone in America has health insurance coverage?

# Consumers: Affordability for everyone is most important. Physicians: High quality health care

## Most important characteristic of health system



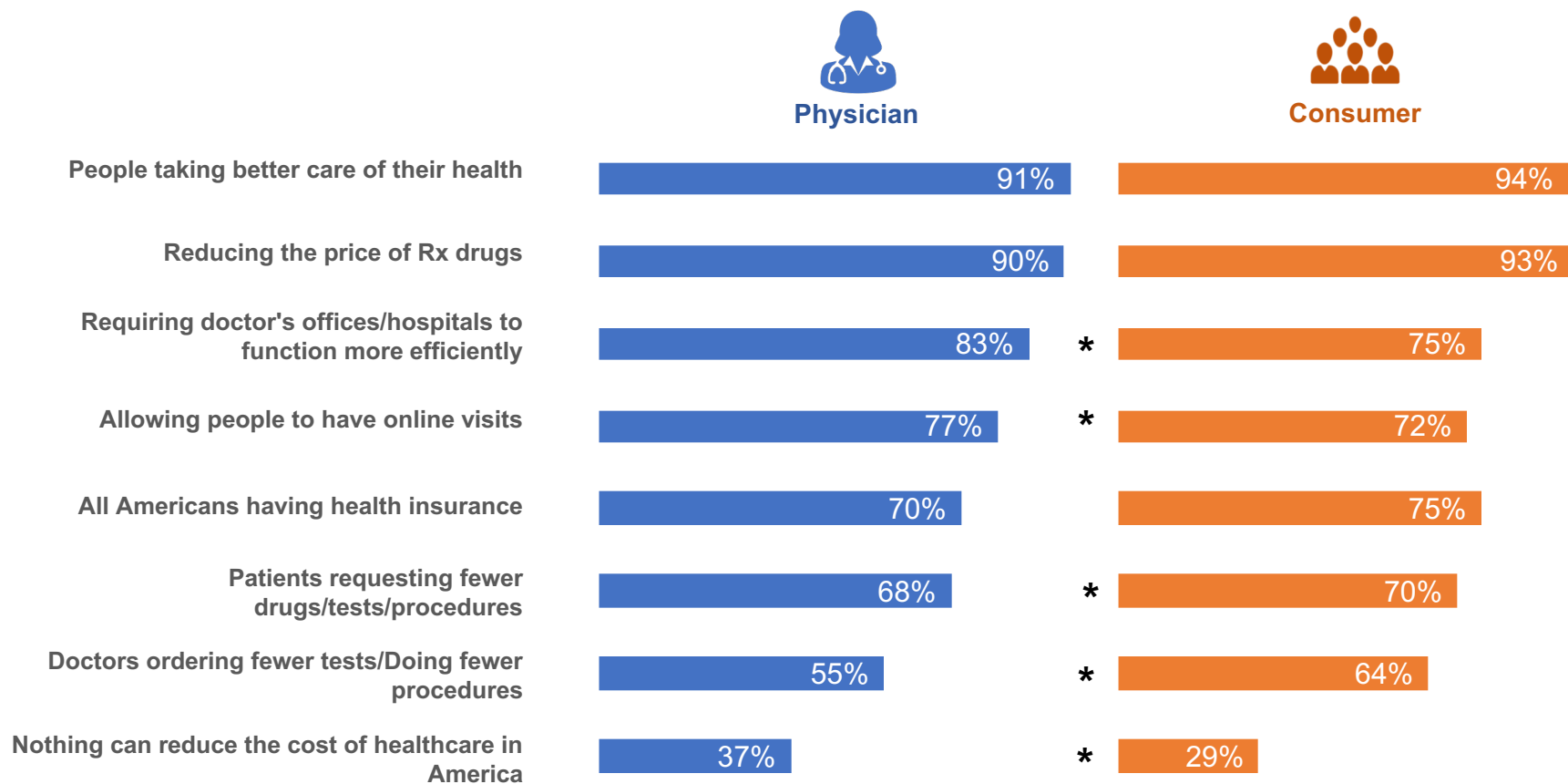
**BASE: ALL QUALIFIED RESPONDENTS** (Physician (n=750); Consumer (n=1500))  
Q505. Which of the following is the most important feature of your ideal health system?

# REDUCING THE COST OF HEALTH CARE

1. Take better care of ourselves
  - 40% of life expectancy is human behavior [McGinnis, Health Affairs](#)
2. Voluntary payments to help others
3. Reducing unnecessary tests/procedures
  - Waste \$200 bn per year on “overtreatment” [Berwick, JAMA](#)
4. Paying physicians a salary

# Consumers and physicians agree that taking better care of themselves is the best way to reduce the cost of health care.

## Reducing the Cost of Health care ( % agree)



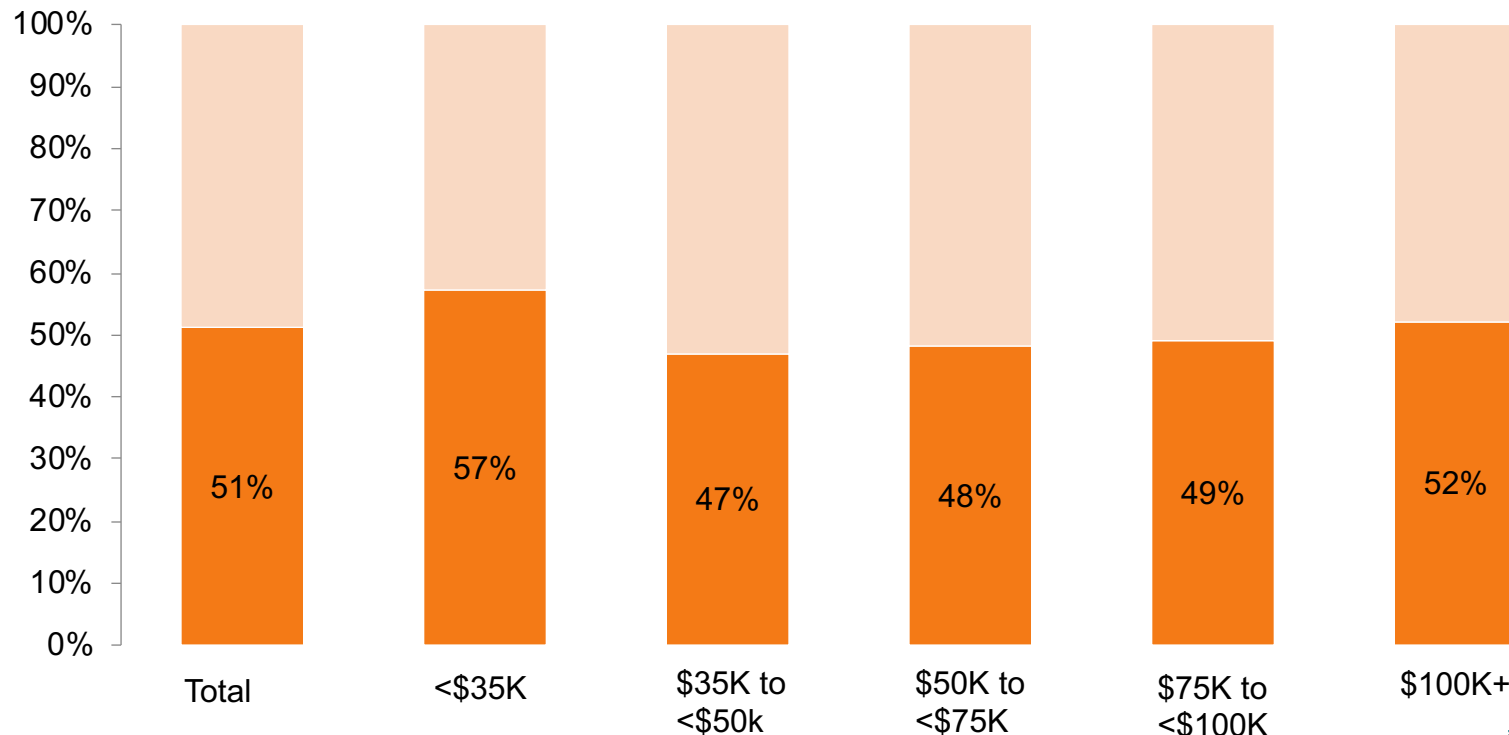
**BASE: ALL QUALIFIED RESPONDENTS** (Physician (n=750); Consumer (n=1500))

Q405P/Q235C How much do you agree or disagree that each of the following could play an important role in reducing the cost of healthcare in America?



About half of Americans, especially those with household incomes <\$35K are willing to pay more for healthcare so that everyone in the country has insurance

### Willingness to Pay More by Income



**BASE: ALL QUALIFIED RESPONDENTS** (n=1500)

Q203. On average Americans spend 11% of their annual salary on out-of-pocket healthcare costs (not including what their employer might pay). Based on your income, this means that you do/would pay roughly \$(...) in out-of-pocket costs per year. How much more in out-of-pocket costs would you be willing to pay annually so that everyone in America has health insurance?

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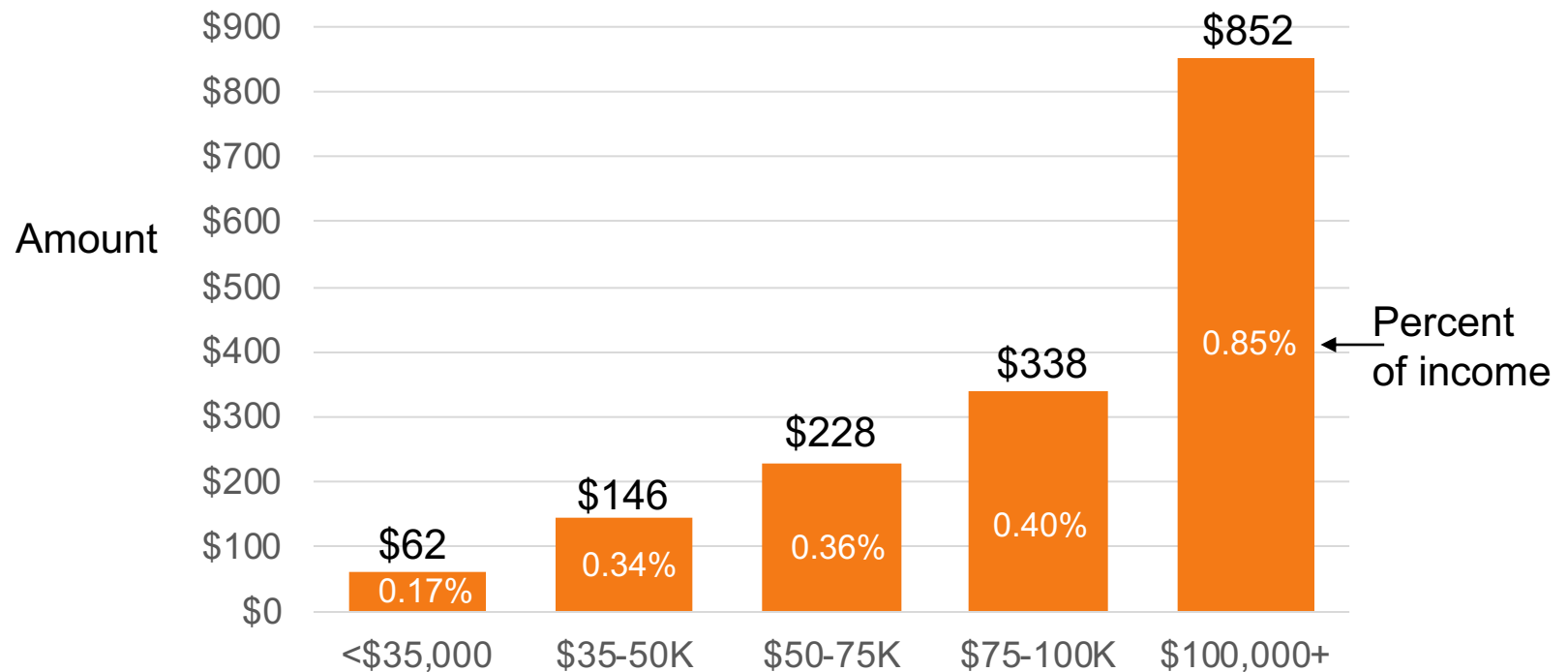
TEXAS  
MEDICAL  
CENTER

# The percent of income that consumers are willing to pay increases with income



Consumers

Of those willing to pay **more**, amount consumers would pay by income



**BASE: ALL QUALIFIED RESPONDENTS** (n=1500)

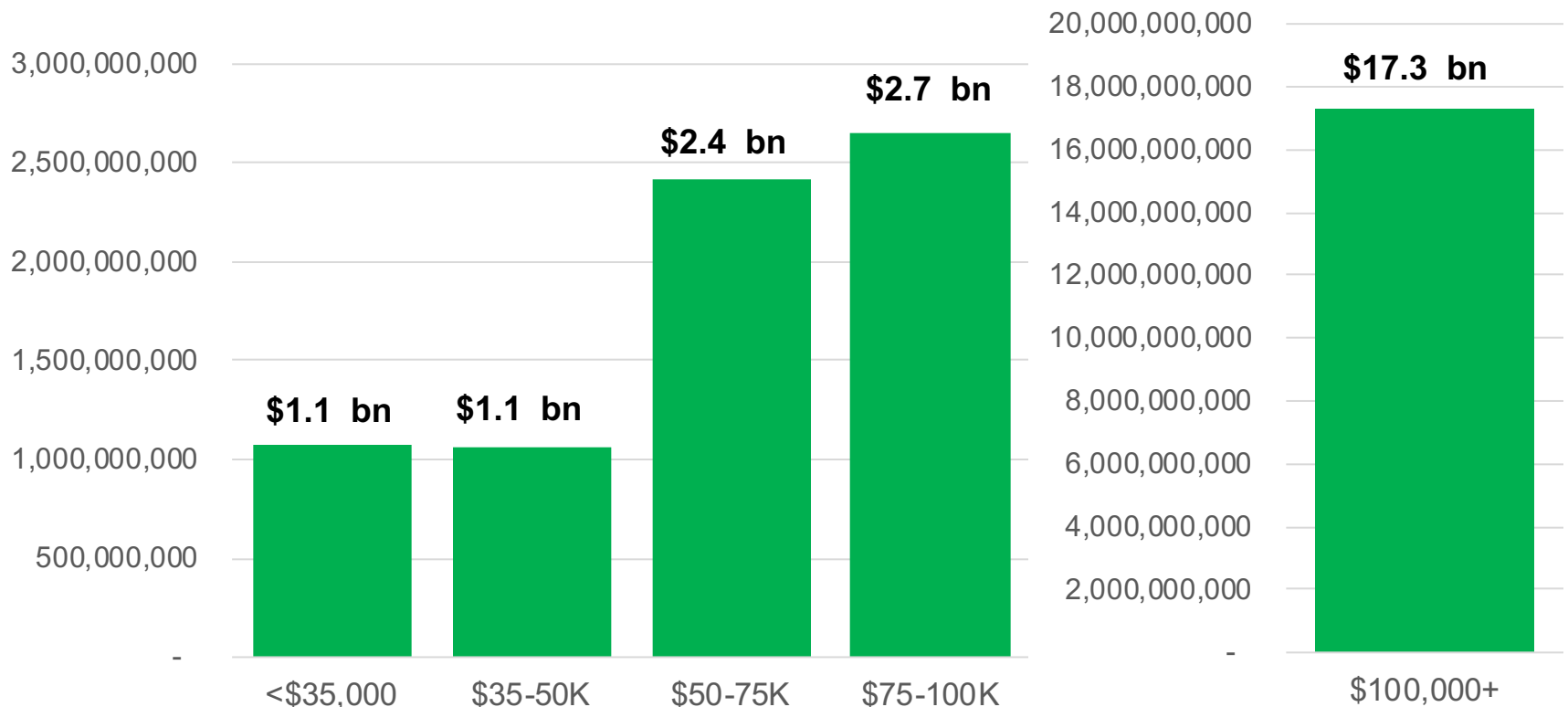
Q203. On average Americans spend 11% of their annual salary on out-of-pocket healthcare costs (not including what their employer might pay). Based on your income, this means that you do/would pay roughly \$(...) in out-of-pocket costs per year. How much more in out-of-pocket costs would you be willing to pay annually so that everyone in America has health insurance? [NOTE: corrected for income]

TMC

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CENTER

# “Small amounts” to support health care for others add up: \$24.5 billion

## Voluntary contributions



**BASE: ALL QUALIFIED RESPONDENTS** (n=1500)

Q203. On average Americans spend 11% of their annual salary on out-of-pocket healthcare costs (not including what their employer might pay). Based on your income, this means that you do/would pay roughly \$(...) in out-of-pocket costs per year. How much more in out-of-pocket costs would you be willing to pay annually so that everyone in America has health insurance?

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# 7 in 10 physicians and consumers agree that physicians do excessive testing



29%

71%

Other physicians, not me,  
do excessive testing



33%

67%

Other people's physicians, not mine, do  
excessive testing

**BASE: ALL QUALIFIED RESPONDENTS** (Physicians (n=750); Consumers (n=1500))  
Q415. Please indicate whether you agree or disagree with the following statement.

# The need to avoid malpractice lawsuits drives excessive testing more than making an accurate diagnosis; income a consideration for >50%

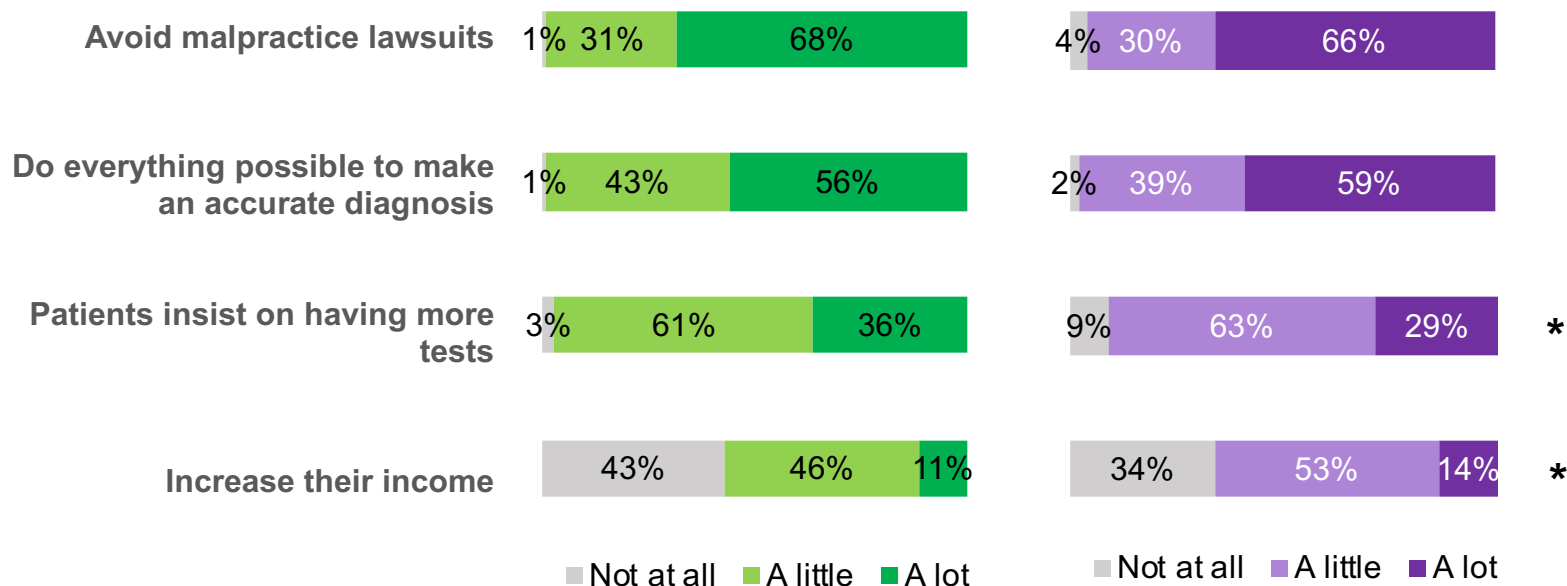
## Drivers of Excessive Testing



Generalist



Specialist



**BASE: ALL QUALIFIED RESPONDENTS** (Generalist (n=375); Specialist (n=375))  
Q408. How much does each of the following impact why doctors might order tests that many consider excessive?

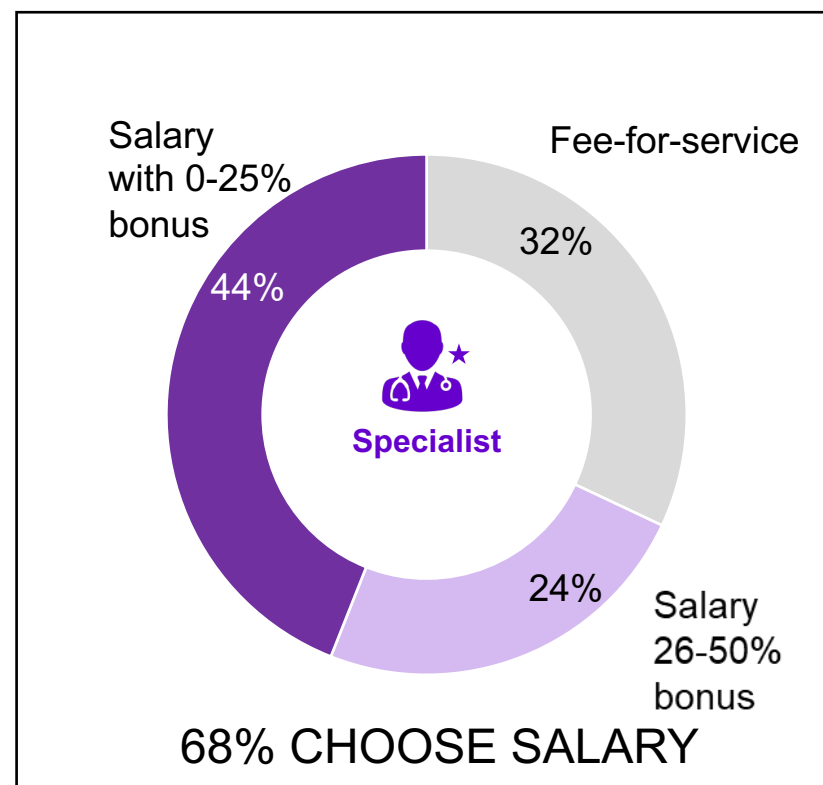
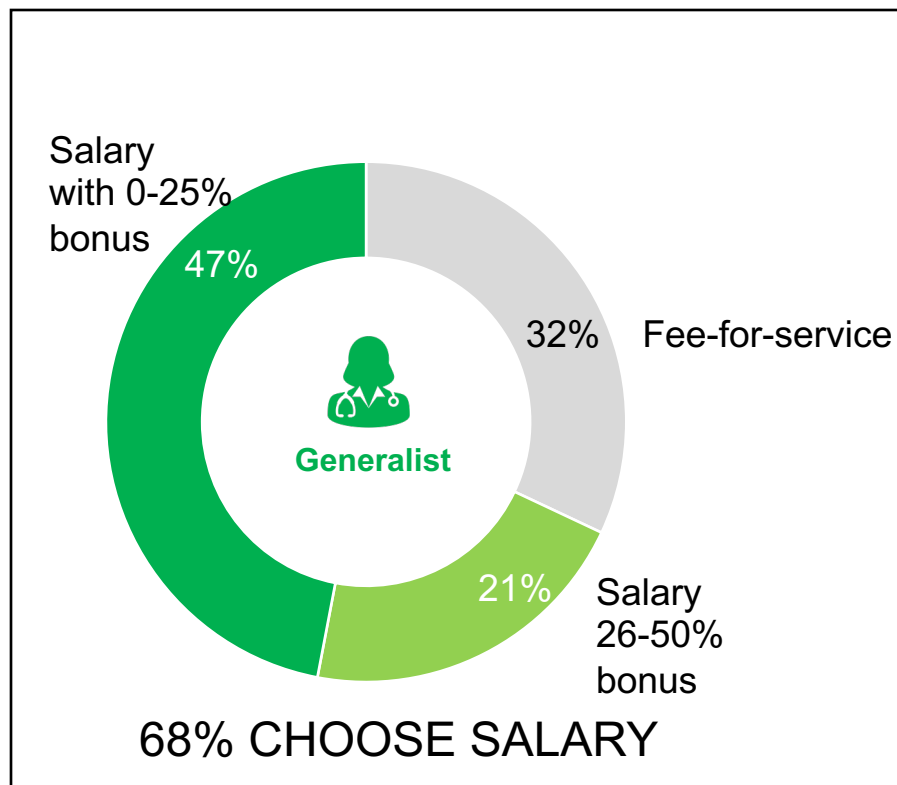
# PHYSICIAN COMPENSATION

- Physicians paid salary do 8% to 33% fewer tests and procedures than those paid fee-for service.
- Therefore, paying physicians by salary could reduce costs by reducing tests and procedures

[Gosden, T. Cochrane Database Systematic Reviews](#)

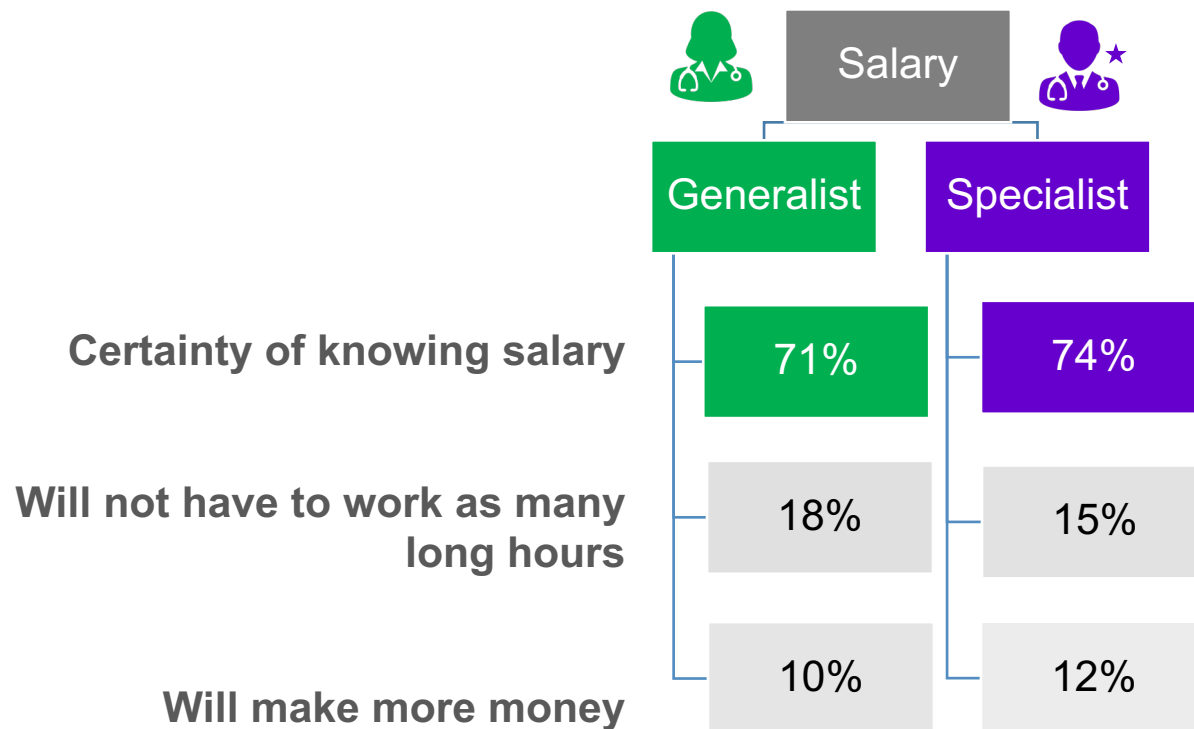
# Both generalists and specialists want to be paid by salary.

## Ideal Payment Mechanism for Physicians



# Of those physicians who selected salary as their ideal payment mechanism, they did so because they want certainty in knowing their salary

## Reasons for Selecting Salary



**BASE: SALARY AS IDEAL PAYMENT MECHANISM** (Generalist (n=248); Specialist (n=255); Texas (n=58); National (n=475))

Q315. Please indicate the primary reason you selected salary (versus fee-for-service) as your ideal payment mechanism.



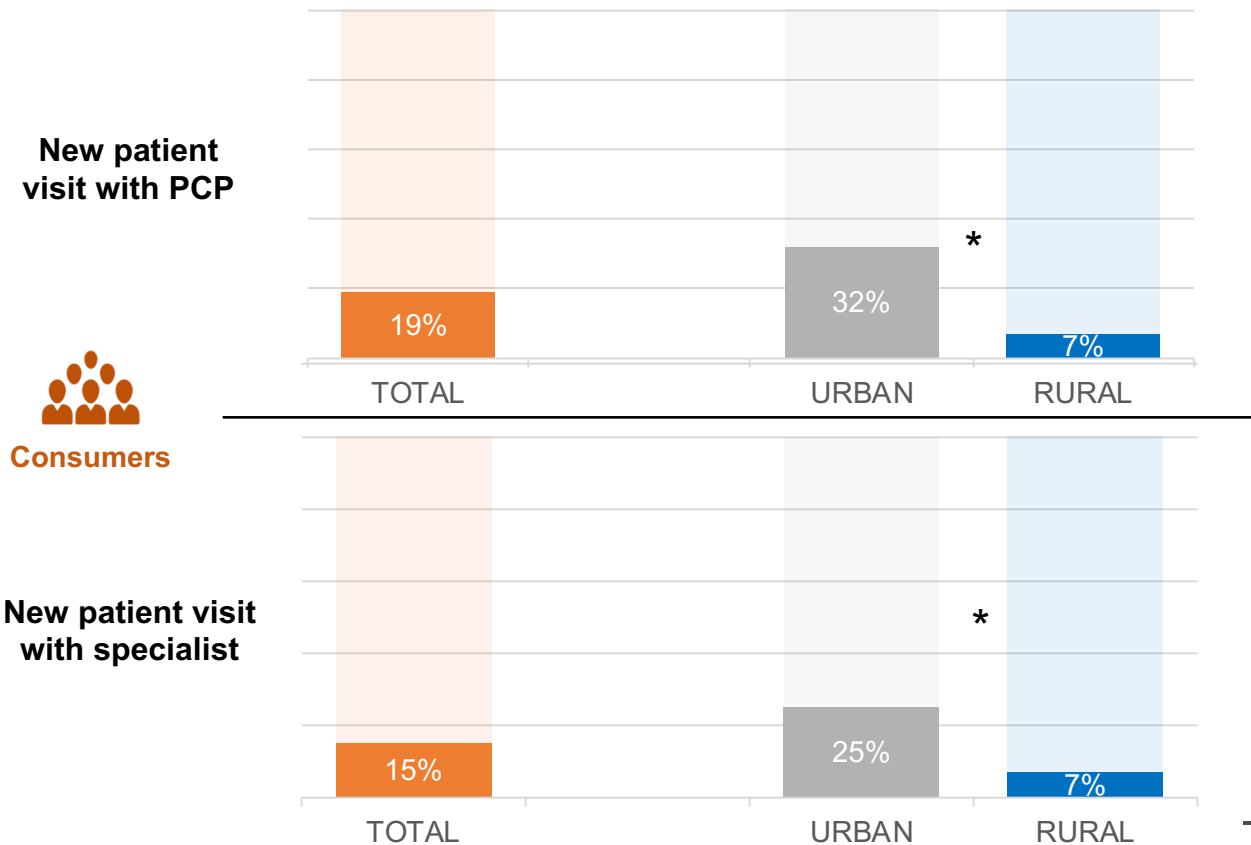
# HEALTH CARE WORKFORCE

- AAMC: By 2032, shortage of 46,900-121,900 physicians (very broad range)
- Best to measure “shortage” by patient appointments
  - But urban physician appointments are more due to insurance shortage than physician supply. [Grumbach, Health Affairs](#)

Less than 1 in 5 have trouble scheduling  
an appointment.

Urban residents have more trouble than rural.  
This is true for PCP and Specialists - both new and return.

### Had Trouble Scheduling PCP and Specialist Appointments in Past 12 Months? By Urban/Rural

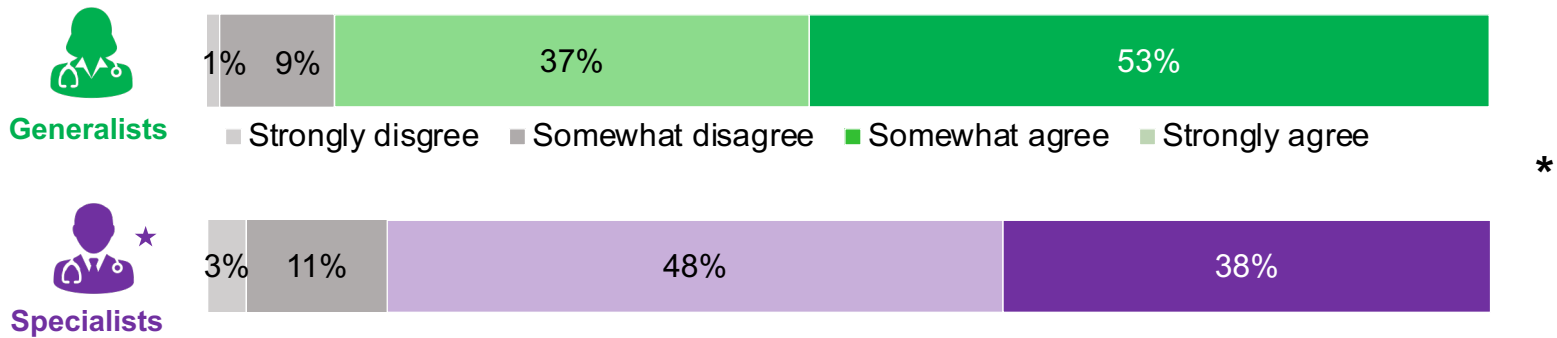


BASE: ALL QUALIFIED RESPONDENTS (n=1500)

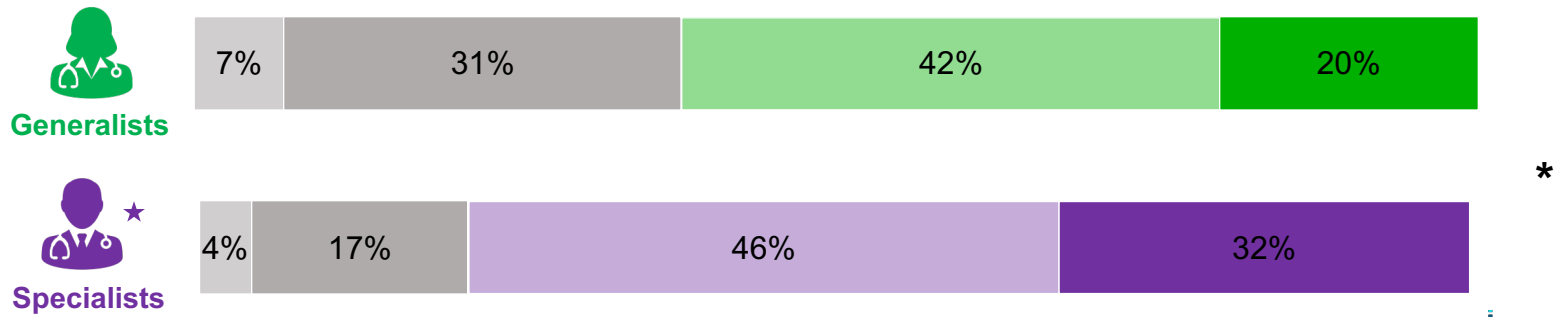
Q120. In past 12 months, have you had trouble scheduling a ...?

# Well over 50% of physicians predict shortages in 5 years of both primary care and specialists; more primary care shortages than specialists; much uncertainty

## Physicians predicting a shortage of generalists



## Physicians predicting a shortage of specialists



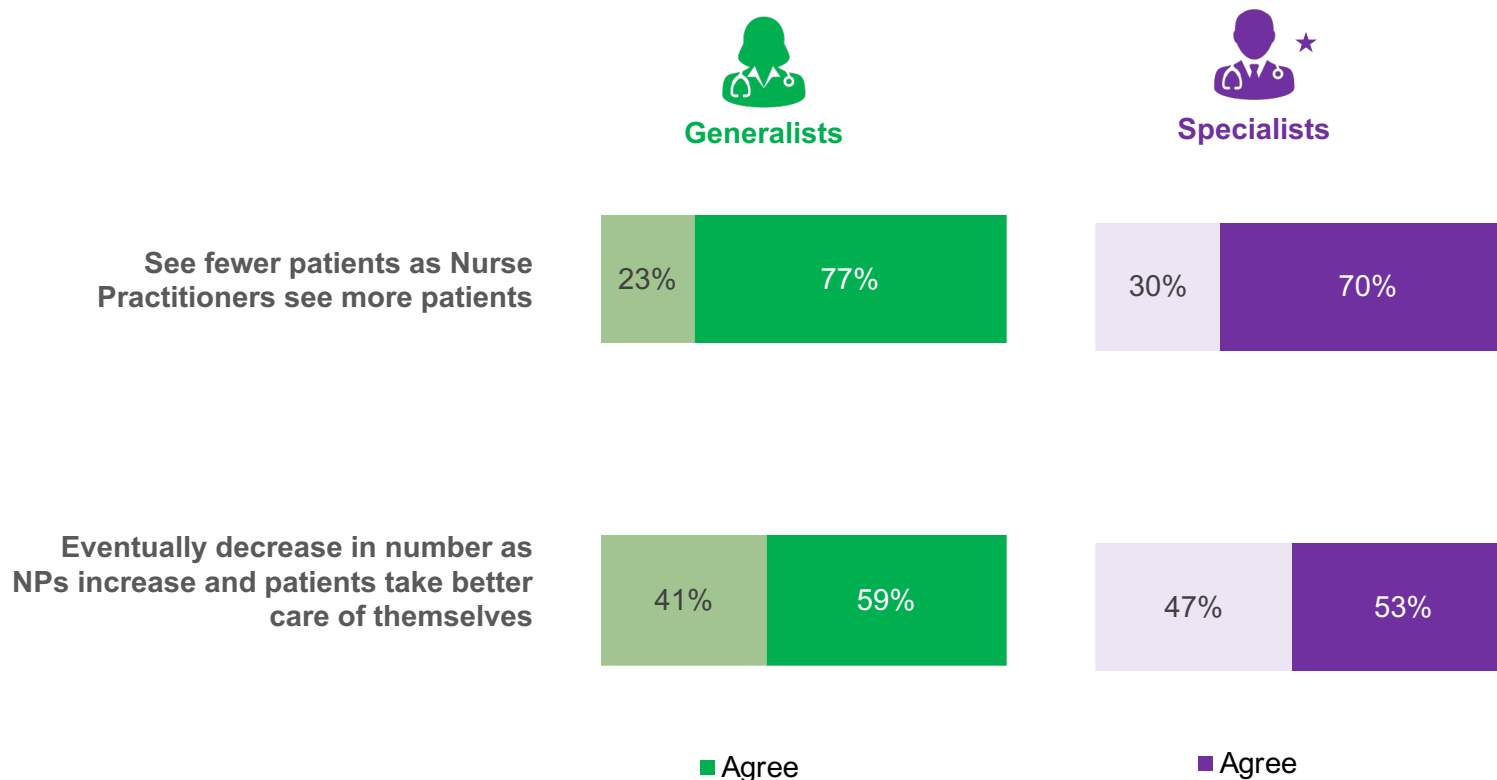
BASE: ALL QUALIFIED RESPONDENTS (Generalist (n=375); Specialist (n=375);

# WAYS TO DEAL WITH FUTURE POSSIBLE SHORTAGE

1. Add nurse practitioners
2. Postponing physician retirement
  - Retirement greatest effect on supply: if retire 2 years later, adds 85,000 to workforce by 2032
3. Service requirement in underserved areas
4. Education of future physicians

[AAMC Workforce Update](#)

# The role of the PCP in 5 years: Will see fewer patients, decrease in number with more Nurse Practitioners



**BASE: ALL QUALIFIED RESPONDENTS** (Generalist (n=375); Specialist (n=375))

Q420. How much do you agree or disagree with the following statements? In the next 5 years, primary care physicians will...?

# 6 in 10 consumers find NP acceptable instead of PCP and about half say NP acceptable instead of specialist

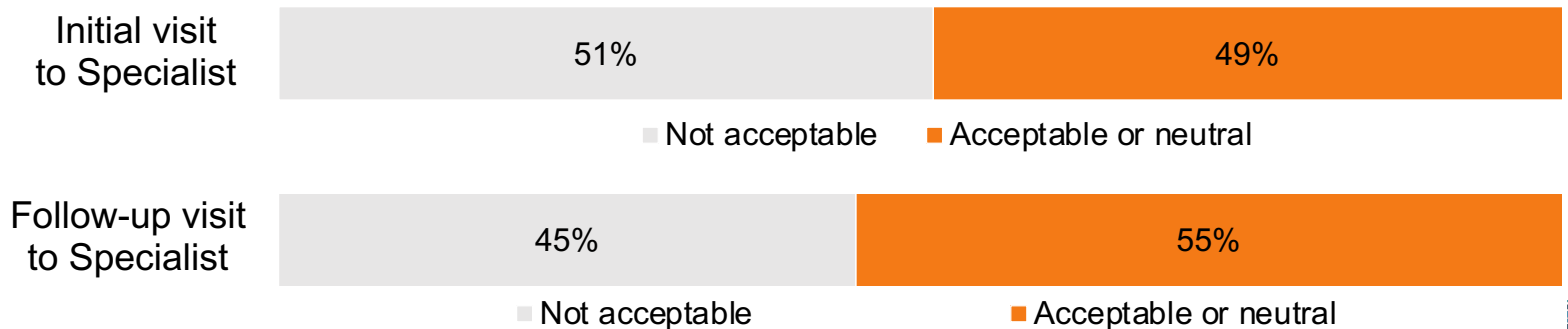


Consumers

## NP PCP visit instead of physician



## NP Specialist visit instead of physician



BASE: ALL QUALIFIED RESPONDENTS (n=1500)

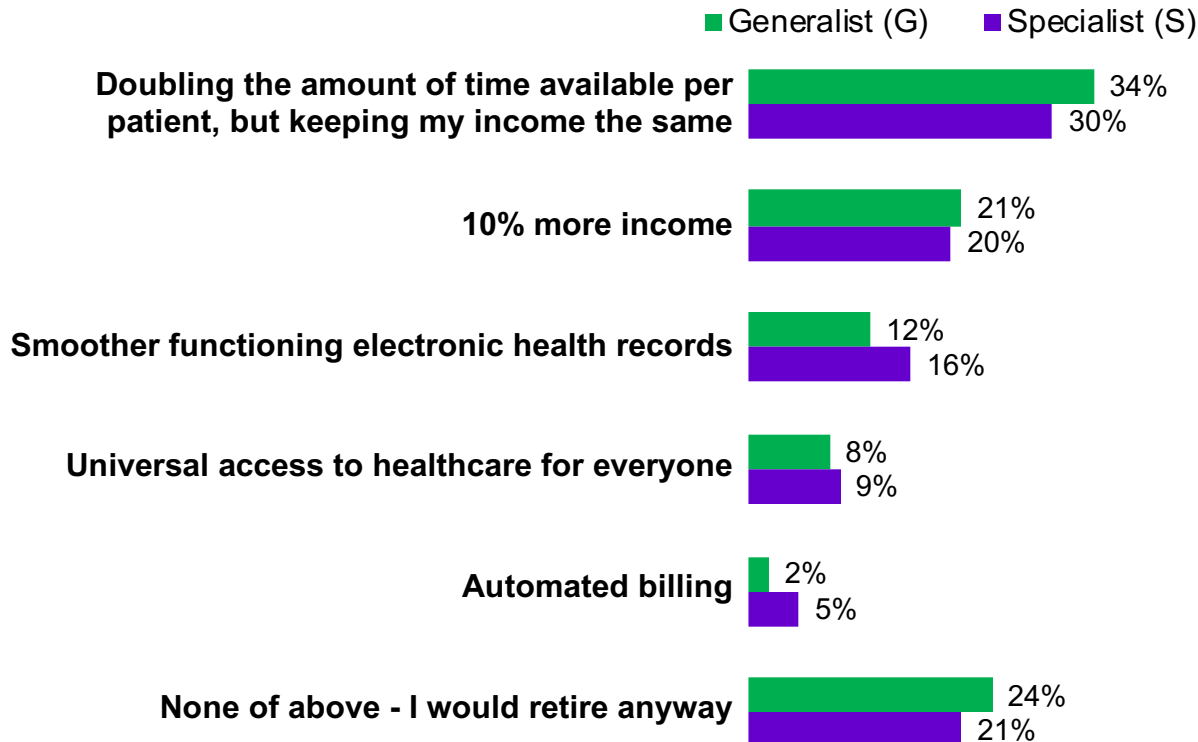
Q115. Please indicate how you would feel in the following situations.

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# Postponing physician retirement: About 4 in 5 might change their plans for retirement; Doubling time spent with patients could keep physicians from retiring.

## Change in the Practice of Medicine that Would Keep Physician from Retiring

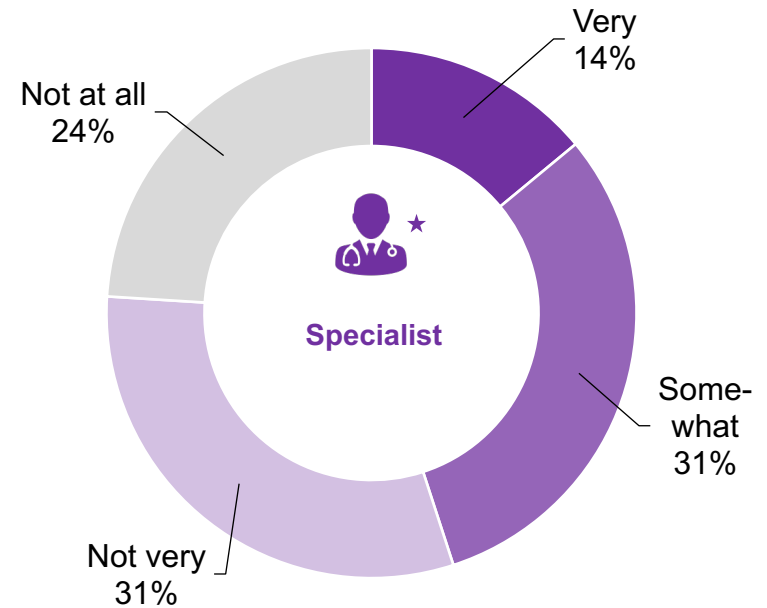
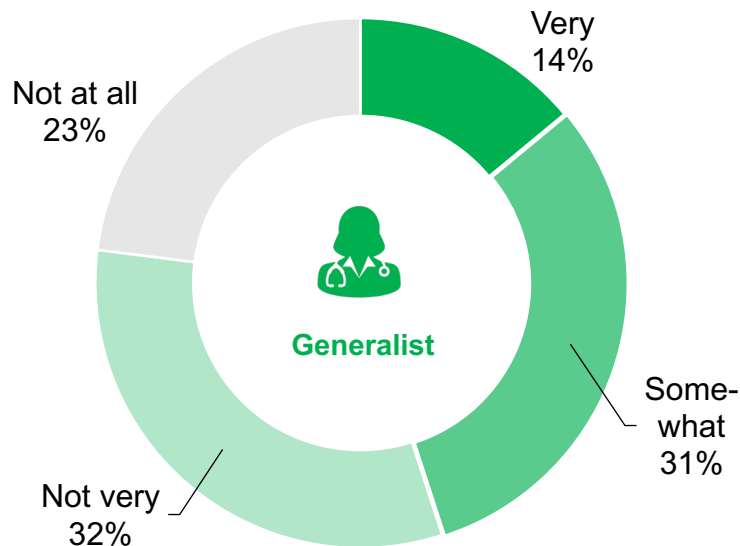


**BASE: ALL QUALIFIED RESPONDENTS** (Generalist (n=375); Specialist (n=375))

Q260. If you were planning to retire in the next 5 years, what one change in the practice of medicine would keep you from retiring then?

# Some enthusiasm for graduation requirement that med students serve two years in underserved area prior to residency: Could add 40,000 physicians

## Enthusiasm: Graduation Requirement That Med Students Serve Two Years in Underserved Area Prior to Residency

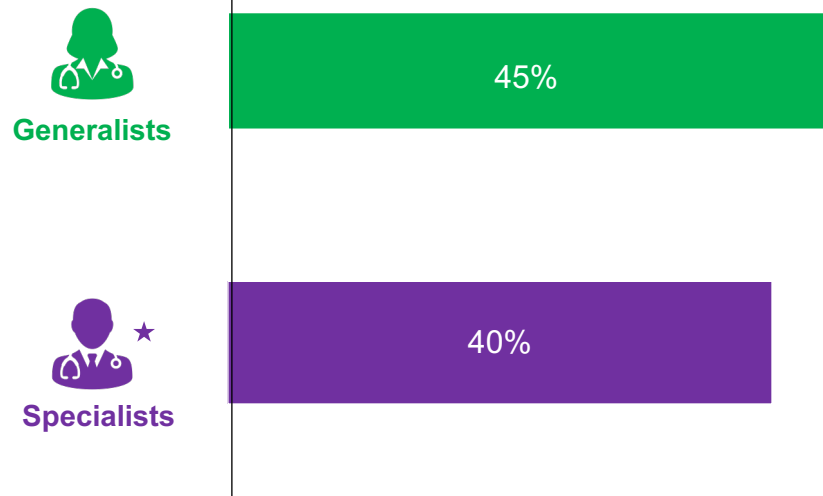


**BASE: ALL QUALIFIED RESPONDENTS** (Generalist (n=375); Specialist (n=375);)

Q650. How enthusiastic would you be about a requirement that graduating medical students serve two years in an underserved area prior to residency?



# More than 4 in 10 physicians say that the United States Medical Licensing Exam does NOT test what is necessary to be a practicing physician



## **Perspective: Leveraging the Health Care Workforce: What Do We Need and What Educational System Will Get Us There?**

Garson, Arthur Jr. MD, MPH

Academic Medicine: [November 2011 - Volume 86 - Issue 11 - p 1448-1453](#)

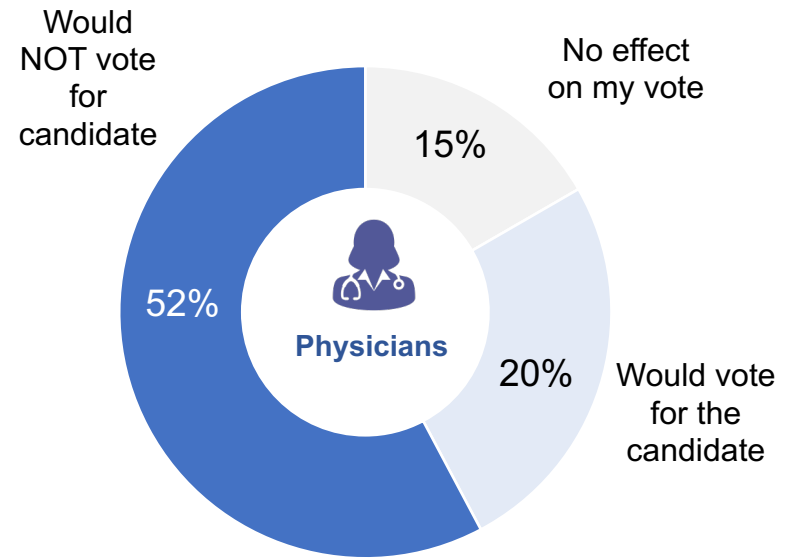
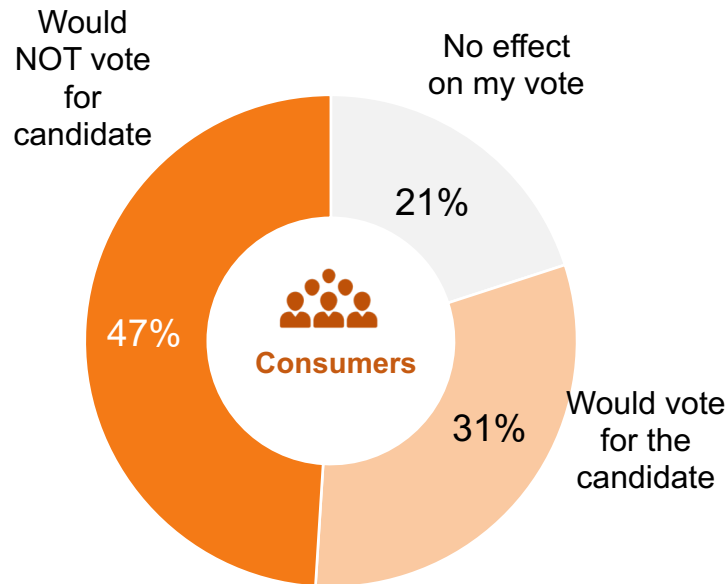
# THE 2020 ELECTION

- How Republicans and Democrats deal with Medicaid differs.
- In July 2017, Sen John McCain cast the deciding vote defeating the American Health Care Act supported by President Trump.
- This would have taken Medicaid away from 14 million people and cut Medicaid expense by \$834 billion.

# About half of consumers and physicians would NOT vote for a candidate in their district who proposed reducing Medicaid

## Reducing Medicaid

*If a candidate running for office in my district proposed reducing Medicaid in my state, I would NOT vote for that candidate.*



**BASE: ALL QUALIFIED RESPONDENTS** Q535. Please indicate how much you agree or disagree: If a candidate running for office in my district proposed reducing Medicaid in my state, I would vote for that candidate.

# More than 80% of President Trump's base would like to see his health plan before the election

***I PLAN TO VOTE FOR PRESIDENT TRUMP***  
***'I would like to see President Trump's proposal for healthcare change before the 2020 election'***

  
**Consumers**

80%  
Agree

  
**Physicians**

88%  
Agree

**BASE: PLAN ON VOTING FOR PRESIDENT TRUMP IN 2020 ELECTION**

Q340. Please indicate how much you agree or disagree with the statement: I would like to see President Trump produce a proposal before the 2020 election about how he plans to change the current healthcare system.

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# 16% of consumers and 23% of physicians from President Trump's base would NOT vote for him if he proposed cutting Medicaid

## *I PLAN TO VOTE FOR PRESIDENT TRUMP*

*If President Trump proposed reducing Medicaid coverage for those who need it,  
I would NOT vote for him.*



Consumers

16%  
would  
not vote  
for him



Physicians

23%  
would  
not vote  
for him

\*Caution: Small base

**BASE: PLAN ON VOTING FOR PRESIDENT TRUMP IN 2020 ELECTION**

Q555. Please indicate how much you agree or disagree: If President Trump proposed reducing Medicaid coverage for those who need it, I would vote for President Trump.

# Demographics

	Total	Generalists	Specialists
<b>Gender</b>	(750)	(375)	(375)
Male	67%	63%	68%
Female	33%	37%	31%
<b>Age</b>			
Mean	49.6	49.7	49.5
<b>Years in Practice</b>			
Mean	19.7	19.9	19.6
<b>Primary Work Setting</b>			
Mostly office- or clinic-based	61%	79%	53%
Mostly or exclusively hospital-based	16%	9%	19%
Mostly long-term care facility-based	3%	3%	2%
Mostly hospice-based	3%	2%	4%
Equally hospital-based and office/clinic-based	16%	6%	21%
Other	1%	0%	2%

# Demographics (cont'd.)

	Total	Generalists	Specialists
<b>Size of Organization</b>	(750)	(375)	(375)
1	13%	15%	12%
2-10	28%	34%	26%
11-50	20%	20%	20%
51-100	10%	9%	10%
100+	28%	21%	32%
Don't know	1%	1%	1%
<b>Income</b>			
Mean	\$288,900	\$276,500	\$294,700