

Survey of Texas Physicians

Meaningful Use



Physicians Caring for Texans

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TMA 2015 Physician Survey on Meaningful Use

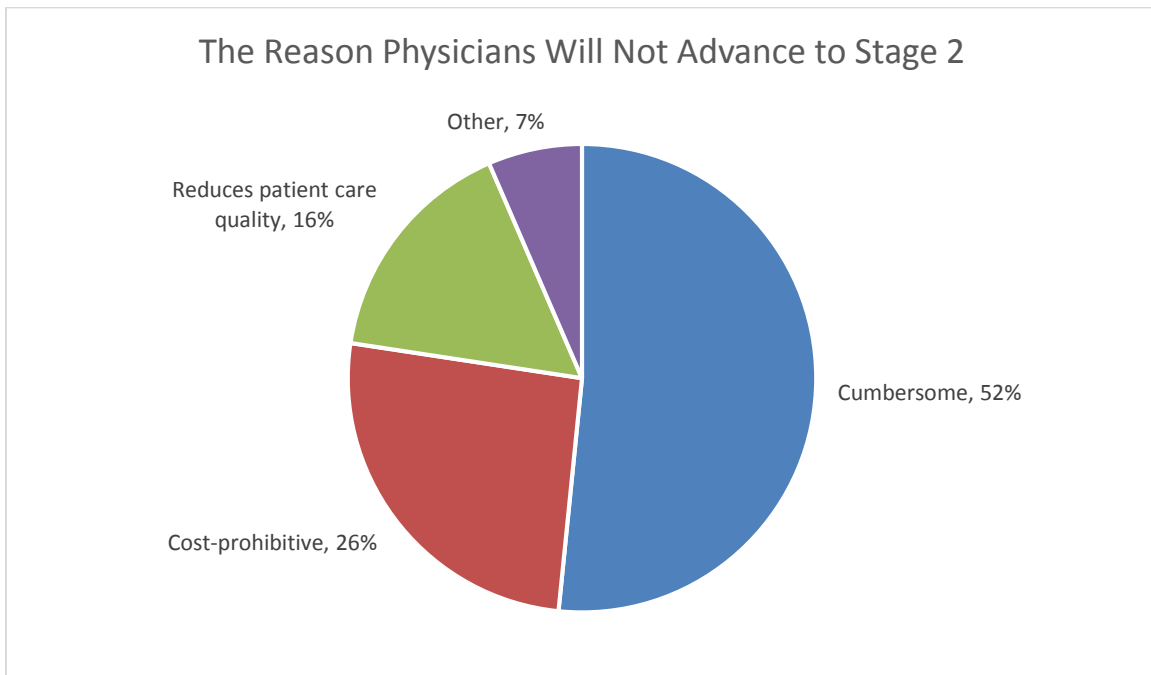
The Texas Medical Association conducted a survey of Texas physicians who have participated in the Center for Medicare & Medicaid Services (CMS) Meaningful Use (MU) program to identify issues and develop data to support TMA advocacy efforts. In April of 2015, physicians were surveyed regarding their opinion and experiences with MU. Approximately 10,943 Texas physicians who participated in the CMS MU program with email addresses in the TMA database were emailed a personalized link to the survey. Responses were received from 543 physicians for a 5 percent response rate.

Physicians were identified as two types of users. Continuous users achieved Meaningful Use three consecutive years and/or advanced to Stage 2. Discontinuous users skipped a year.

Summary of Findings

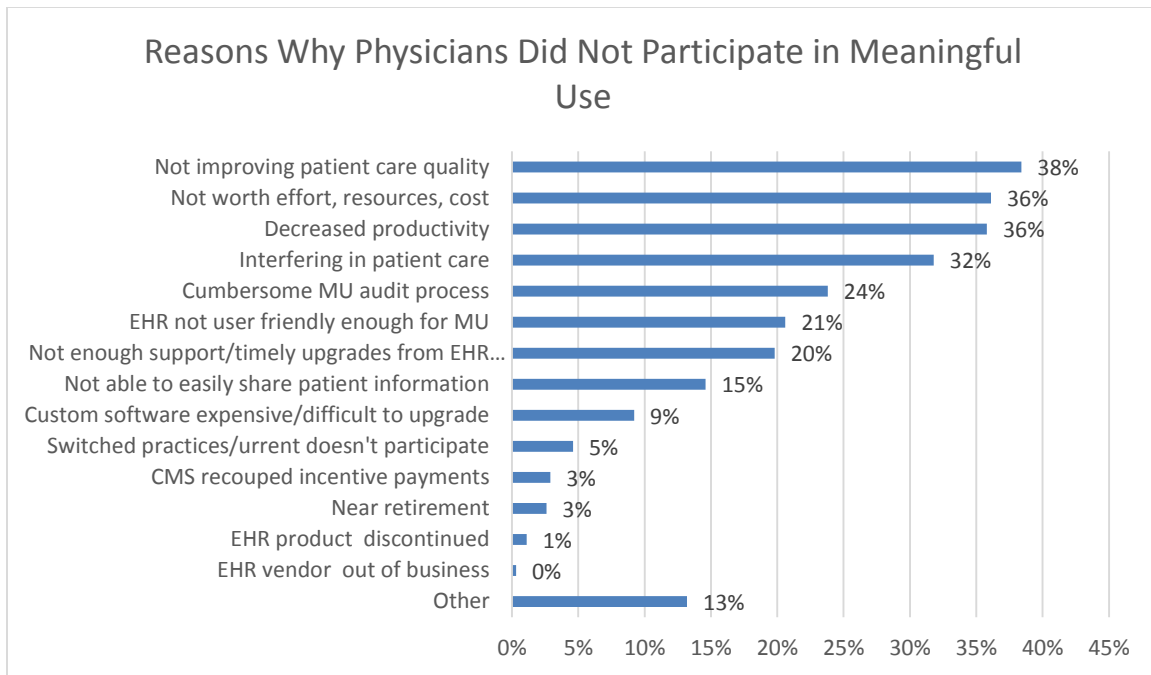
Reasons Will Not Advance in Meaningful Use (Q2-3)

Among physicians who successfully achieved MU for at least one year, 80 percent have or will advance to stage 2. Those who are not planning to advance report the protocols are cumbersome (52 percent).



Reasons for Not Participating in the Meaningful Use Program (Q5)

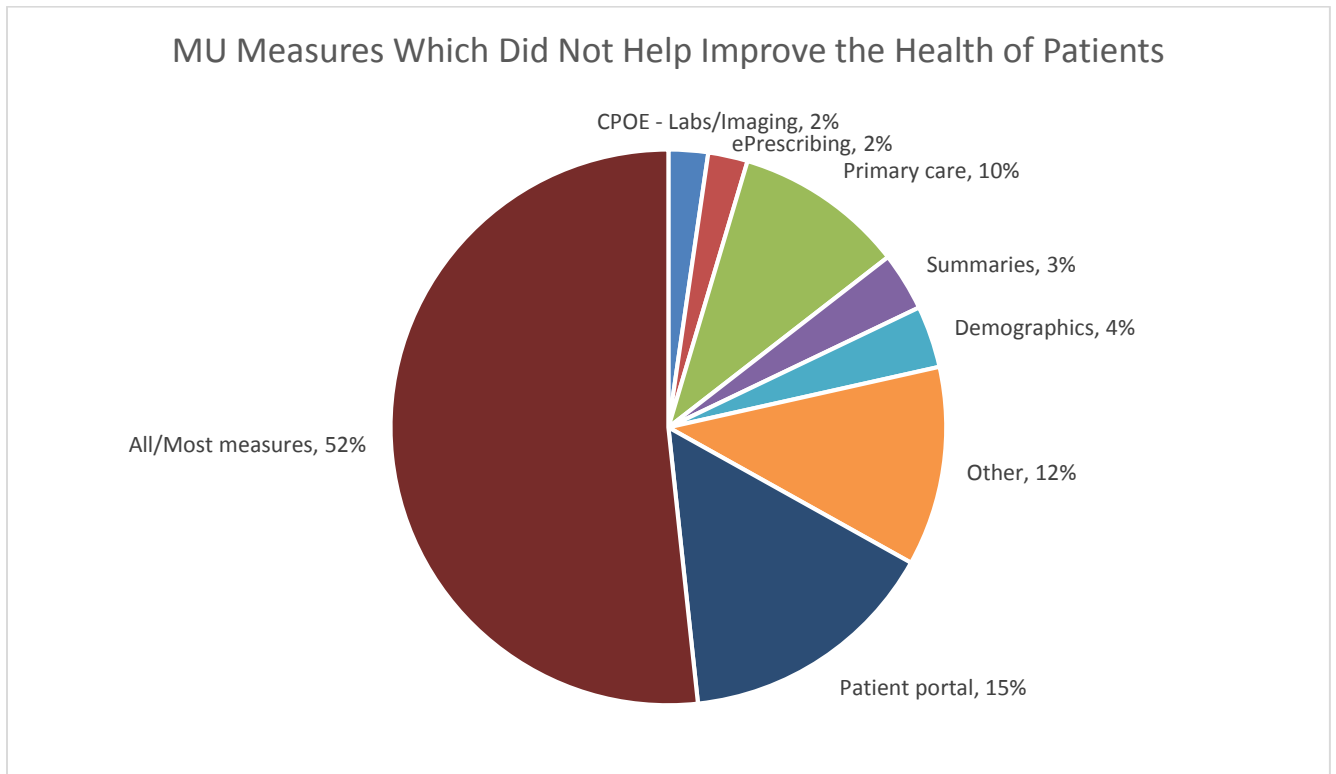
Among physicians who skipped a year or did not participate in MU, they primarily report it was not improving the quality of patient care (38 percent).



Other reasons physicians did not participate in MU because they did not meet deadlines or criteria.

Unhelpful MU Measures (Q6)

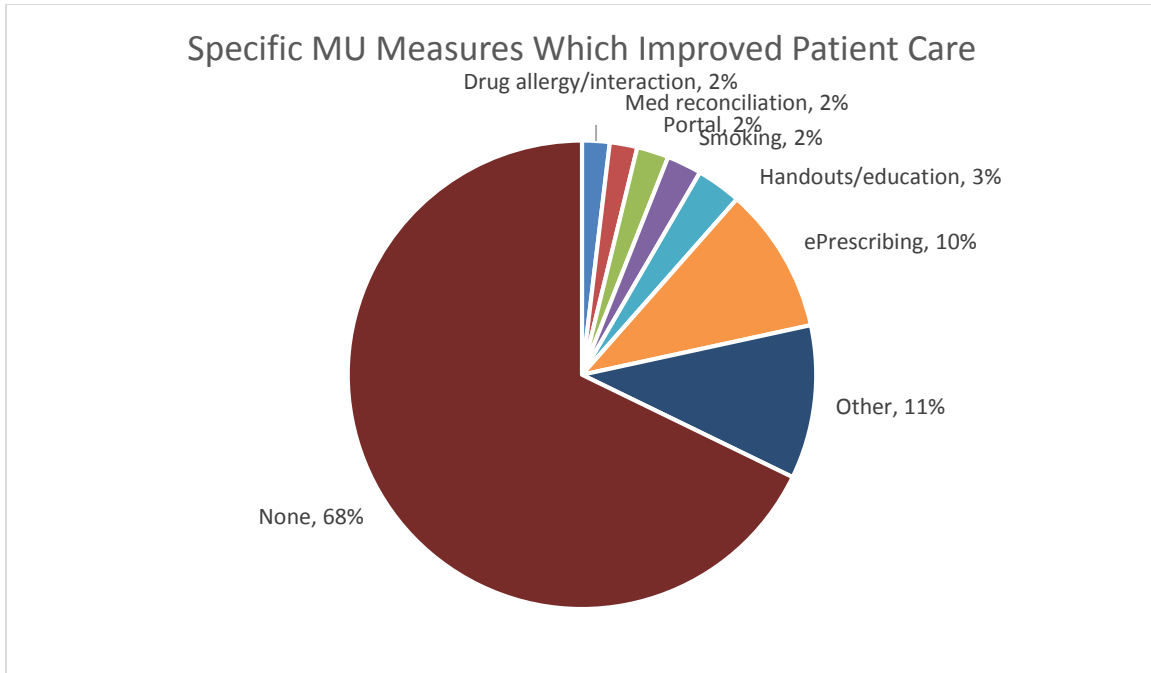
Physicians were asked to specify which MU measures were not helpful or did not improve patient care. Overall, the majority of physicians report all or most of the measures are not meaningful to care (52 percent).



Fifteen percent of physicians specify the patient portal does not accurately measure patient engagement nor improve patient care. Ten percent of physicians' specify the primary care measures are not helpful to a specialist.

Helpful Meaningful Use Measures (Q7)

Physicians were asked if they found any specific MU measures helpful in improving the quality of patient care. Overall, the majority of physicians report no or none of the measures helped them improve patient care or safety (68 percent).

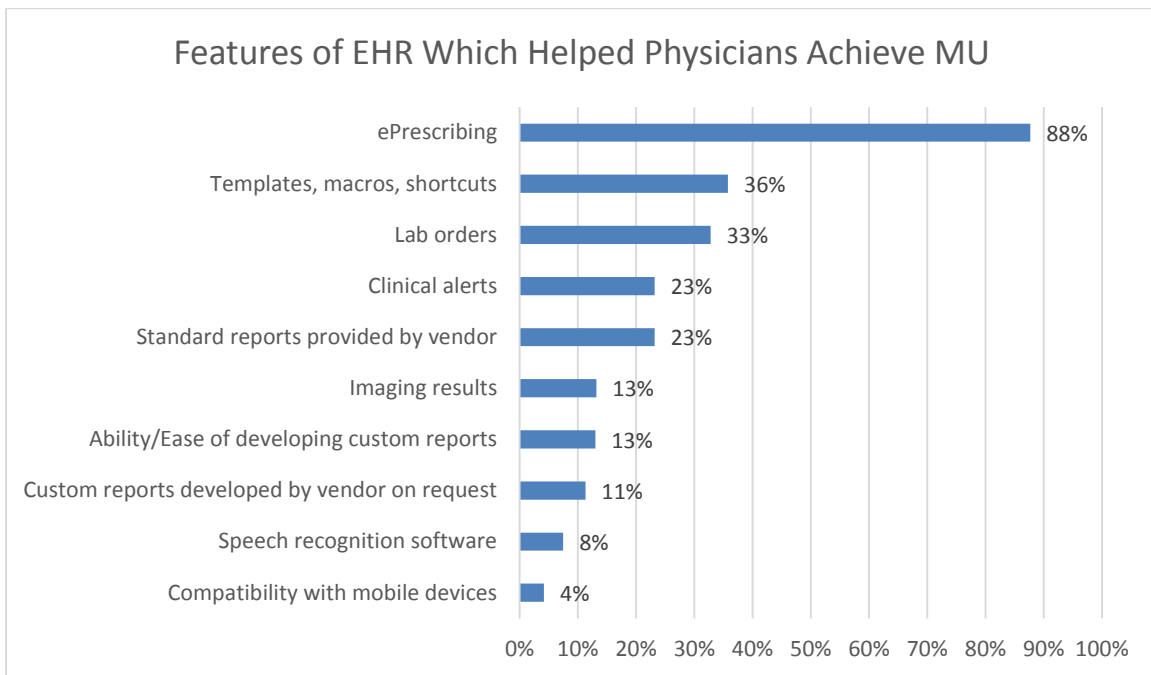


Incentive Payment Adequacy (Q8)

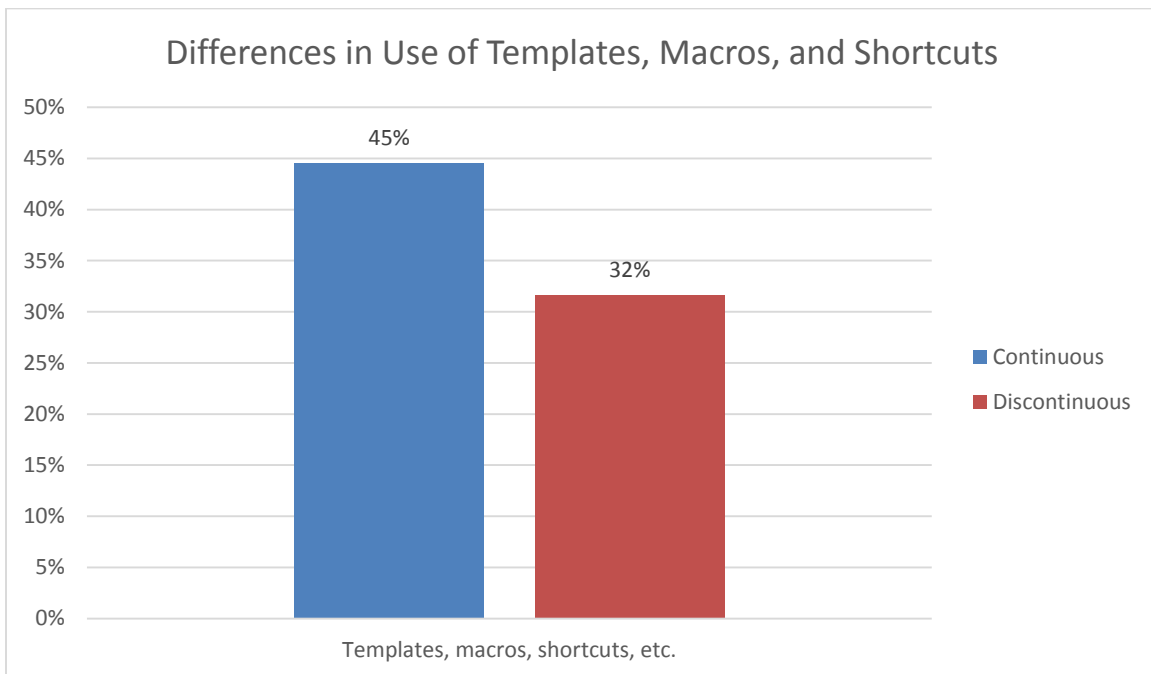
Ninety percent of physicians report the incentive payments do not cover the cost of participating in and reporting for MU.

Features of EHR Which Helped Physicians Achieve MU (Q9-10)

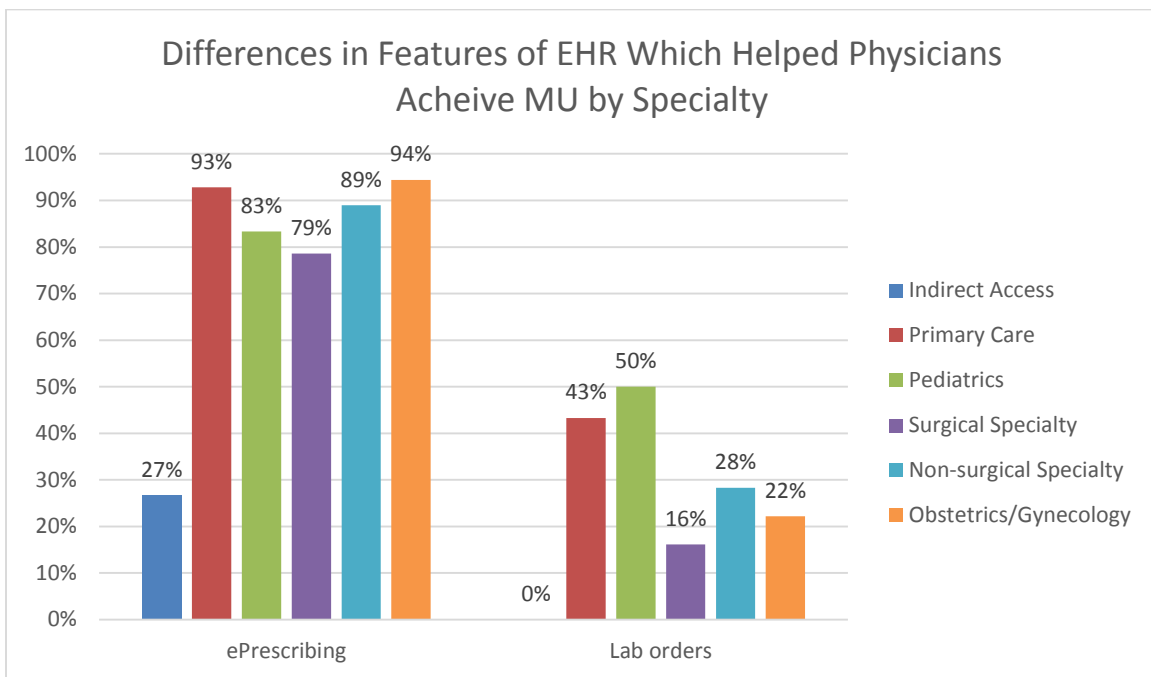
Physicians most frequently report ePrescribing is the feature of their EHR which helped them achieve MU (88 percent).



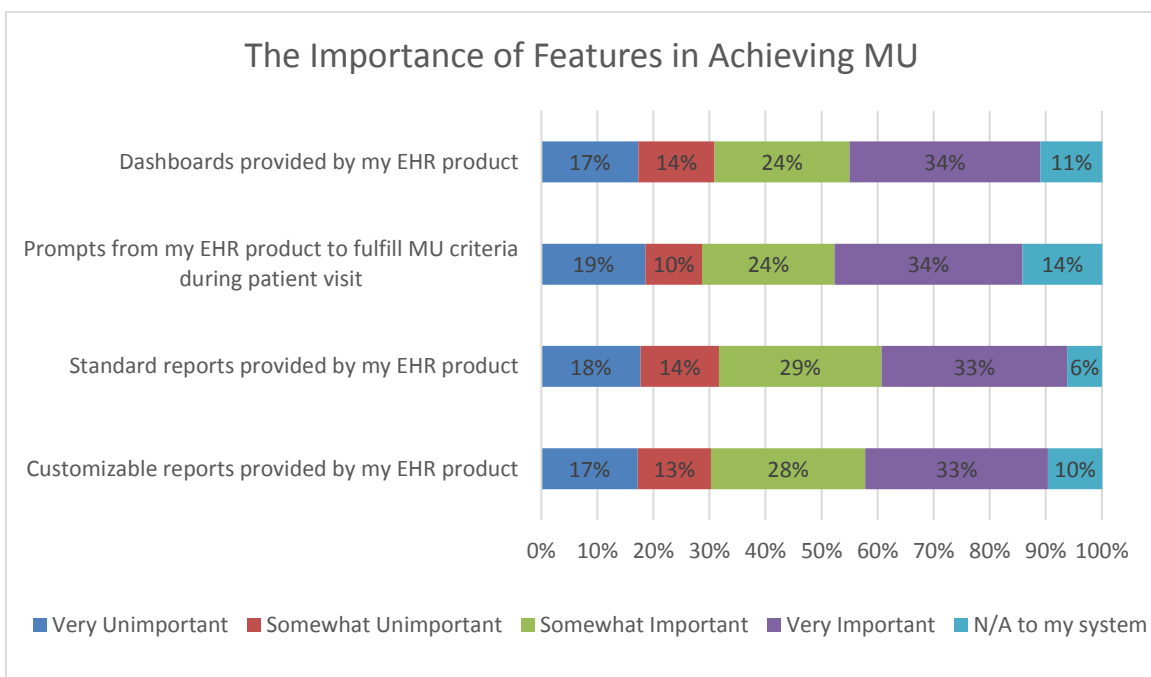
There are statistically significant differences between continuous and discontinuous users and which features helped them achieve MU. Continuous users were more likely to use templates, macros, and/or shortcuts.



Physicians in Obstetrics and Gynecology (94 percent) followed by Primary Care (93 percent) are most likely report ePrescribing helped them achieve MU. Pediatricians are more likely than other physicians (50 percent).

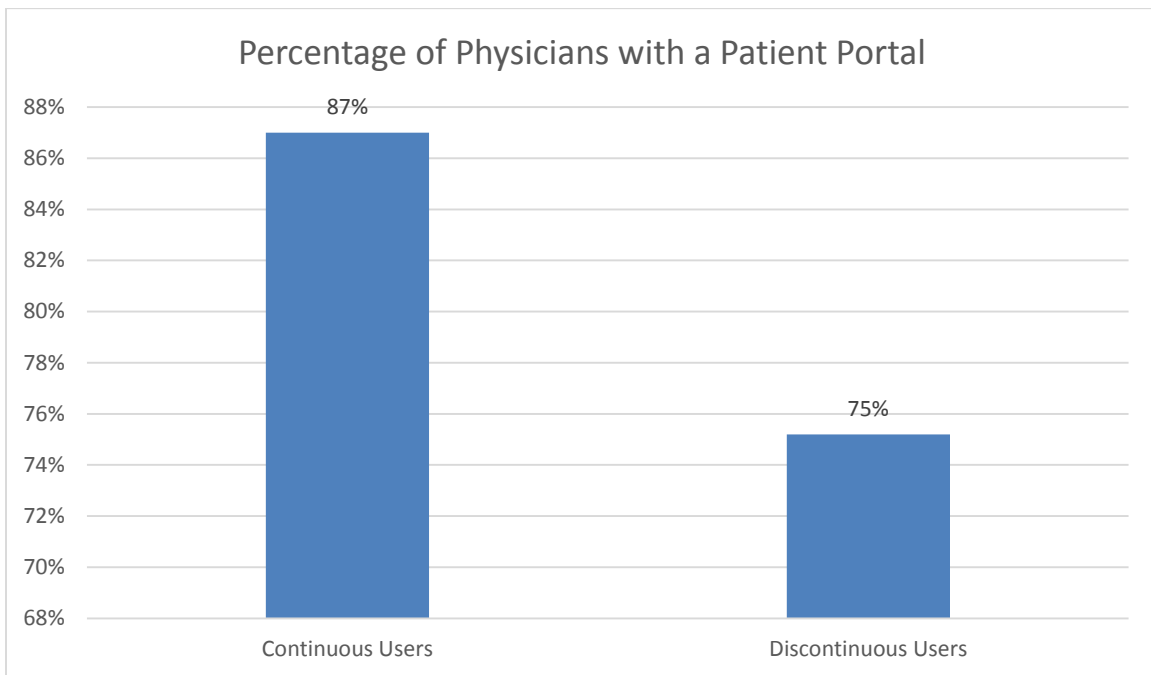


Physicians found standard reports provided by their EHR (62 percent) important in achieving MU.

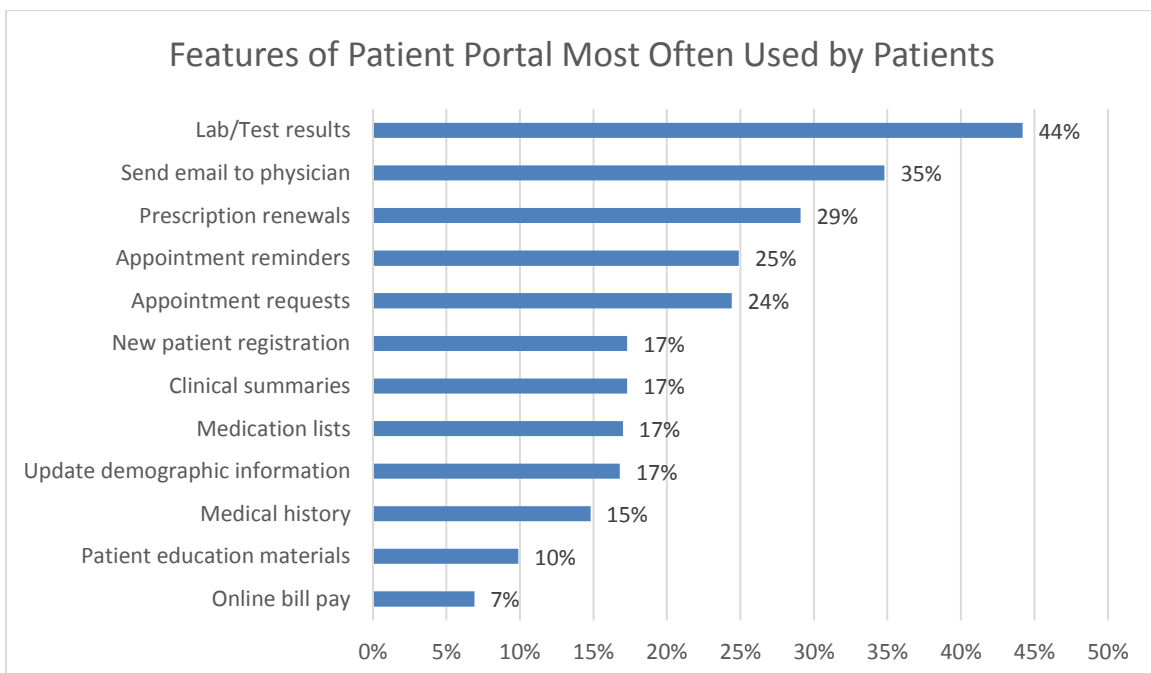


Physician Use of Patient Portal (Q11-12)

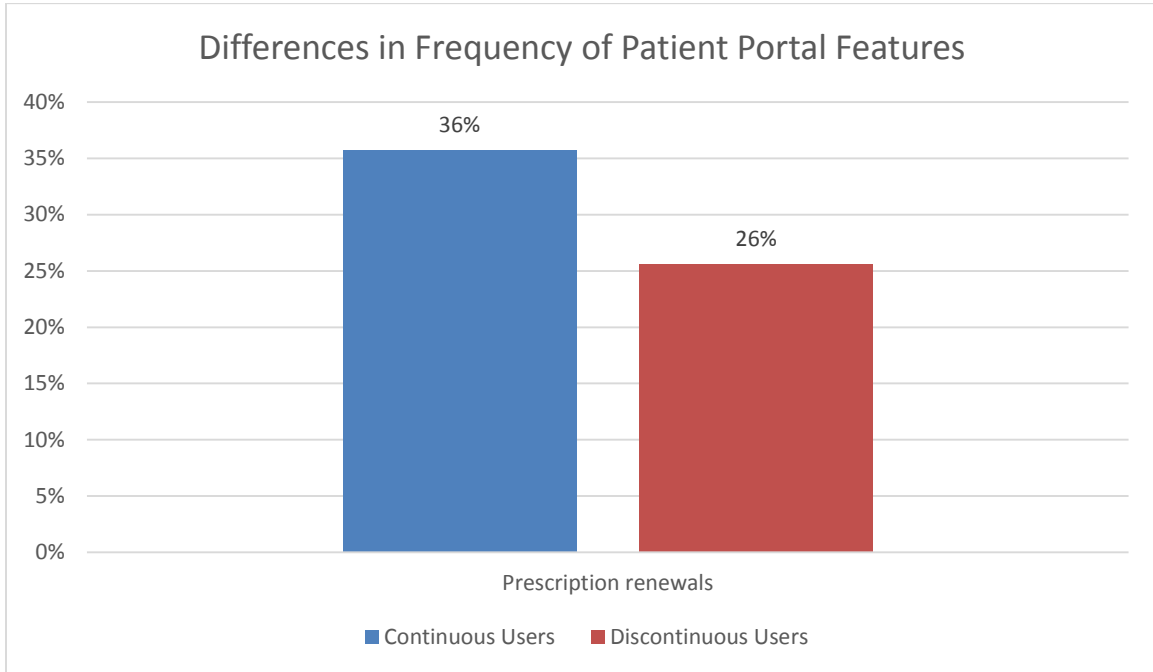
Eighty percent of physicians have a patient portal. Continuous users are more likely to have a patient portal (87 percent).



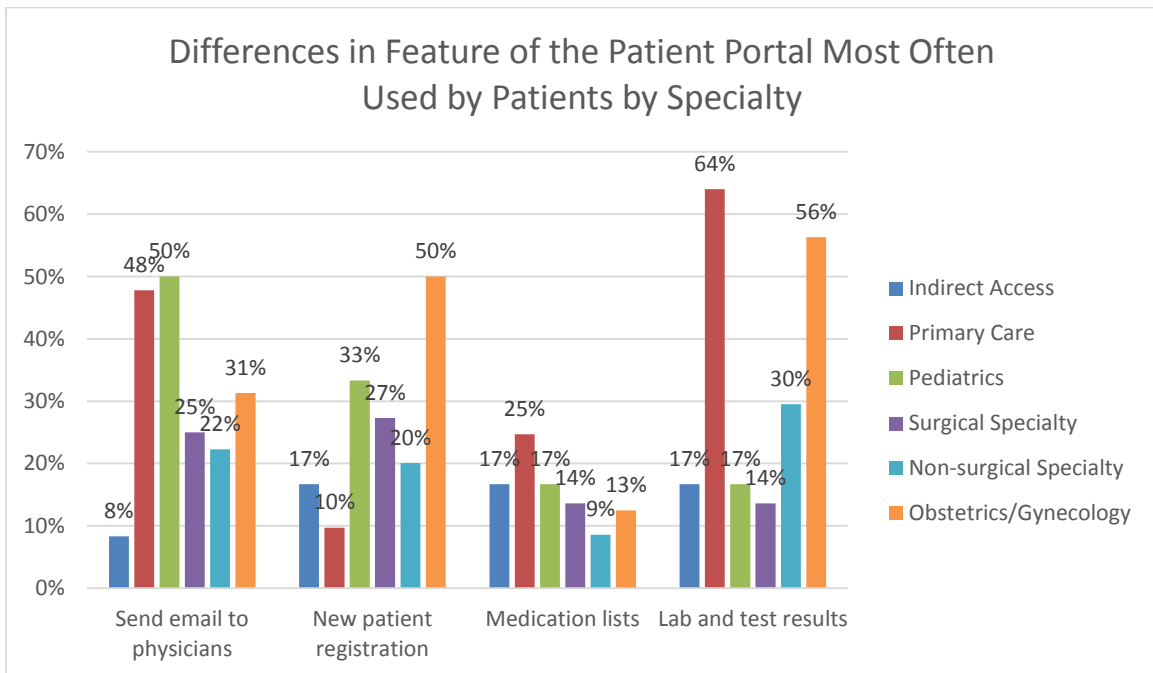
A large minority of physicians who have a portal report the lab and test results is the feature of their portal that is most often used by patients (44 percent) followed by sending email to physician (35 percent).



There are statistically significant differences between continuous and discontinuous users and the features of their patient portal most often used by patients. Continuous users are more likely to report their patients use prescription renewals through their patient portal.

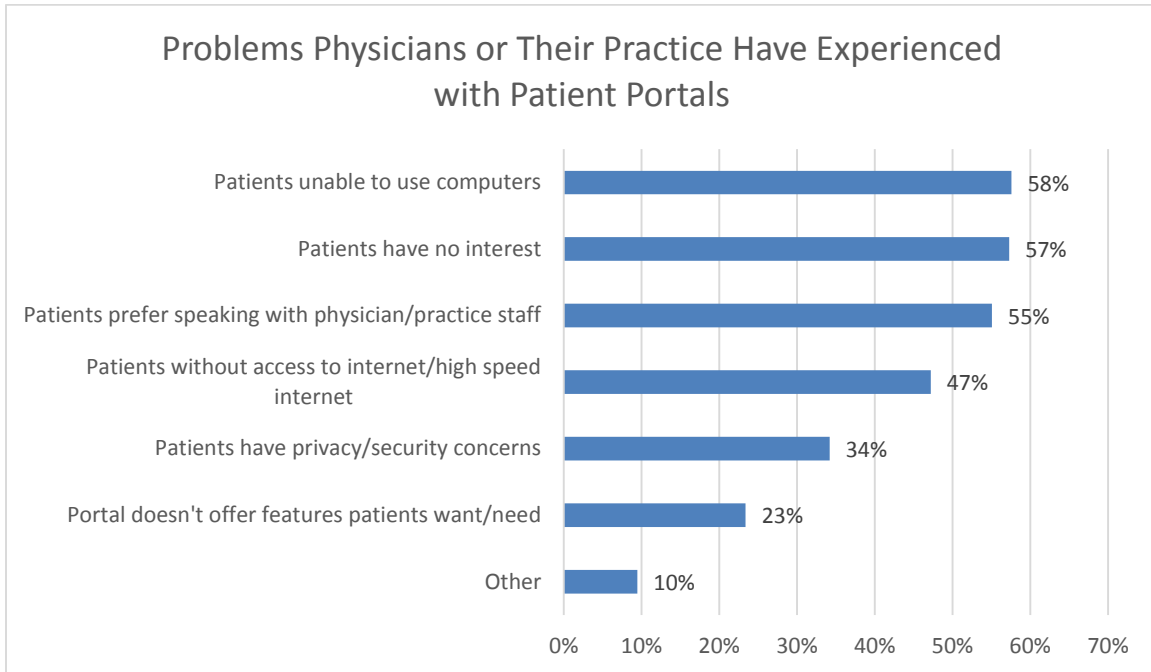


Few Indirect Access physicians report their patients email through a patient portal (8 percent) and few physicians in non-surgical specialties report their patients use medication lists (9 percent) on a patient portal.



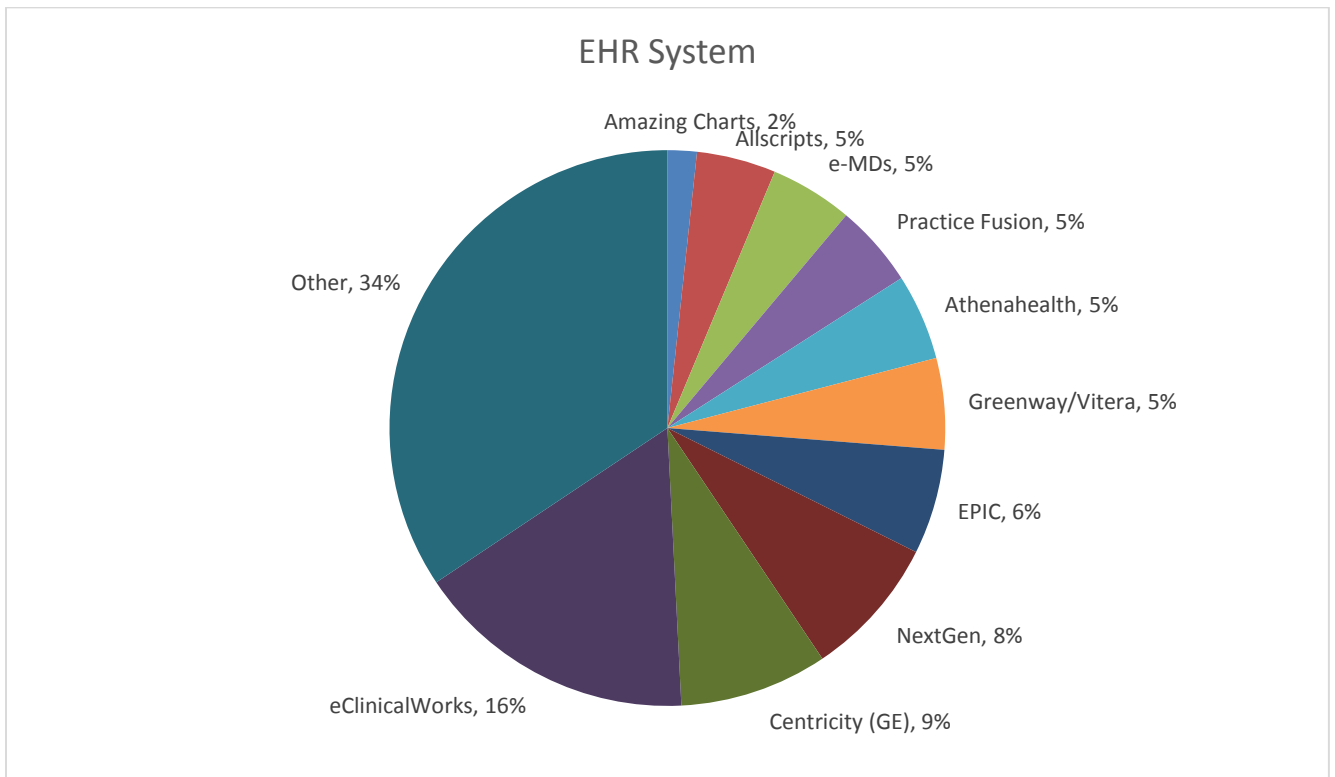
Practice Experience with Patient Portal (Q13)

Physicians were asked about problems they or their practice has experienced with patient portals. The majority of physicians have patients unable to computers (58 percent), with no interest in using a portal (57 percent), and/or patients who prefer speaking to the physician and/or practice staff (55 percent).

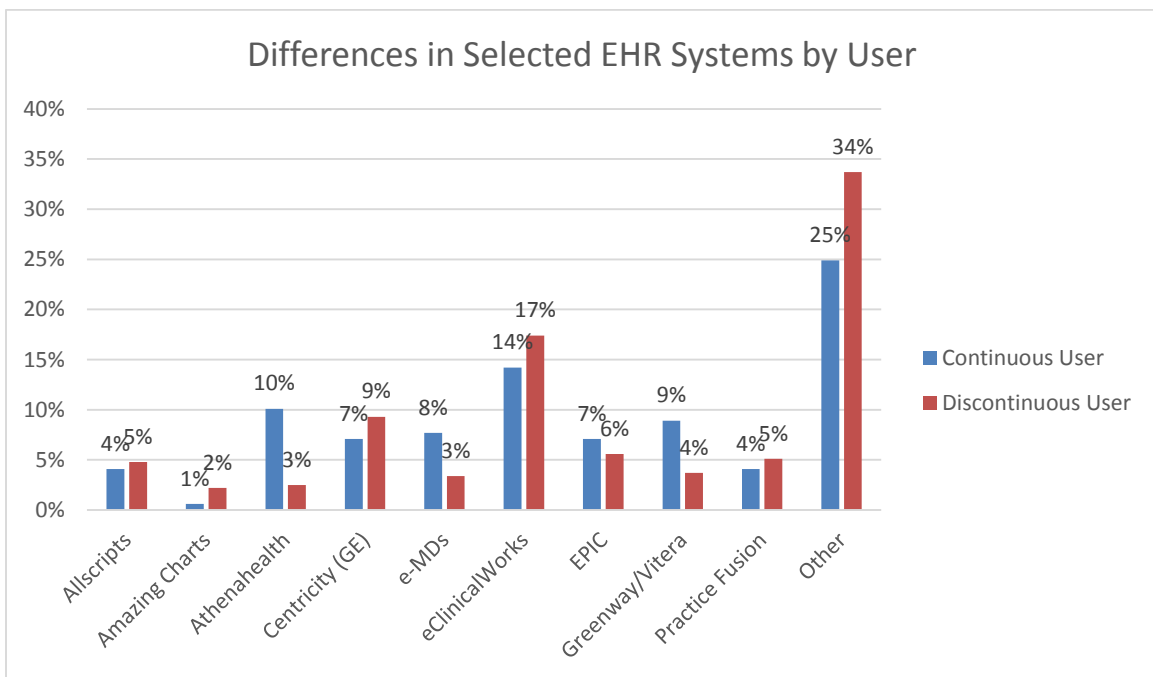


EHR System (Q14)

As in previous surveys, physicians are using numerous EHR systems.

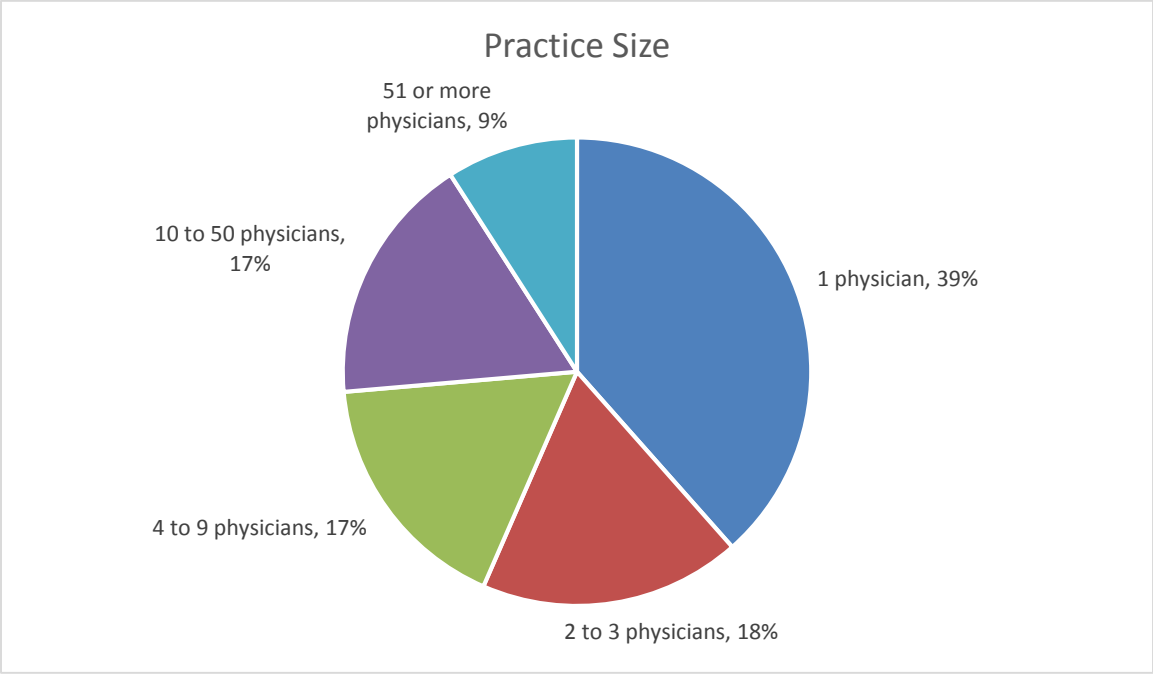


Continuous users are more likely to use Athenahealth (10 percent), Greenway/Vitera (9 percent), and e-MDs (8 percent) compared with discontinuous users.



Practice Size (Q15)

Physicians report there a median of three physicians in their practice. The majority of physicians practice with 1 to 3 physicians (56 percent).



Physician Demographics

Gender

	%
Male	71
Female	29

Age

	%
40 and younger	16
41 to 50	27
51 to 60	34
61 and older	23

Specialty

	%
Indirect Access	4
Primary Care	43
Pediatrics	1
Obstetrics/Gynecology	4
Surgical Specialty	13
Non-surgical Specialty	36

County

	%
Bexar	6
Dallas	14
Harris	17
Tarrant	6
Travis	9
Rural	8
Small and urban	38
Rio Grande Valley	4

TMA Membership Status

	%
Member	92
Nonmember	8

Survey Appendix

2015 MU Survey

Continuous Users

1. CMS records indicate you successfully achieved Meaningful Use (MU) for at least one year. Is this information correct?

- Yes
- No

2. Have you or will you advance to stage 2?

- Yes
- No

Answer If Have you or do you plan to advance to stage 2? No Is Selected

3. Why not?

4. CMS records indicate you achieved Meaningful Use (MU) at least one year, but skipped at least one year afterwards. Is this correct?

- Yes
- No

5. Please select the reason or reasons why you did not participate in MU? (Check all that apply.)

- Cumbersome MU audit process
- CMS recouped incentive payments
- EHR vendor went out of business
- EHR product was discontinued
- Not enough support or timely upgrades from EHR vendor
- EHR is not user friendly enough for MU
- Customization of software made it expensive and difficult to upgrade
- Not worth the effort, resources, and cost to participate in MU
- The criteria for MU significantly decreased my productivity
- I switched practices and the practice I am currently with does not participate in MU
- Not able to easily share patient information
- It was interfering in patient care
- It was not improving the quality of patient care
- Near retirement
- Other (please specify): _____
- N/A - I didn't skip a year of MU

6. Which MU measures did NOT help you improve the health of your patients [increased patient safety concerns or decreased quality of patient care]?

7. Did you find any specific MU measures helpful in improving the health of your patients [decreased or mitigated patient safety issues or increased the quality of patient care]?

8. Are the incentive payments adequate to cover the cost of participating in and reporting for MU?

- Yes
- No

9. Did any of the following features of your EHR help you achieve MU? (Check all that apply.)

- Standard reports provided by vendor
- Custom reports developed by vendor on request
- Ability and ease of developing custom reports
- Clinical alerts
- ePrescribing
- Lab orders
- Imaging results
- Speech recognition software
- Templates, macros, shortcuts, etc.
- Compatibility with mobile devices
- Other (please specify): _____

10. How important are the following features in achieving MU?

	Very Unimportant	Somewhat Unimportant	Somewhat Important	Very Important	N/A - to my system
Standard reports provided by my EHR product	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Customizable reports provided by my EHR product	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Dashboards provided by my EHR product	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Prompts from my EHR product to fulfill MU criteria during patient visit	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11. Do you have a patient portal?

- Yes
- No

Answer If Do you have a patient portal? Yes Is Selected

12. Which feature or features of your patient portal are most often used by patients? (Check all that apply.)

- Online bill pay
- Send email to physician
- Clinical summaries
- New patient registration
- Ability to update demographic information
- Prescription renewals
- Appointment requests
- Appointment reminders
- Medication lists
- Lab and test results
- Medical history
- Patient educational materials
- Other (please specify): _____

13. What, if any, problems have you or your practice experienced with patient portals? (Check all that apply.)

- Patients without access to Internet or high speed Internet
- Patients unable to use computers
- Patients prefer speaking with physician or practice staff
- Patients have privacy and security concerns
- Portal doesn't offer features patients want or need
- Patients have no interest
- Other (please specify): _____
- N/A - I have no experience with patient portals

14. Which EHR system are you currently using in your practice?

- Allscripts
- Amazing Charts
- Athenahealth
- Centricity (GE)
- Cerner
- e-MDs
- eClinicalWorks
- EPIC
- Greenway/Vitera
- NextGen
- Practice Fusion
- Practice Partner (McKesson)
- Sevocity (Conceptual Mindworks)
- I only use a practice management system, e-prescribing system, hospital system, or home-grown system.
- Other (please specify below): _____
- Not applicable – I am not currently using an EHR

15. How many physicians are in your practice?