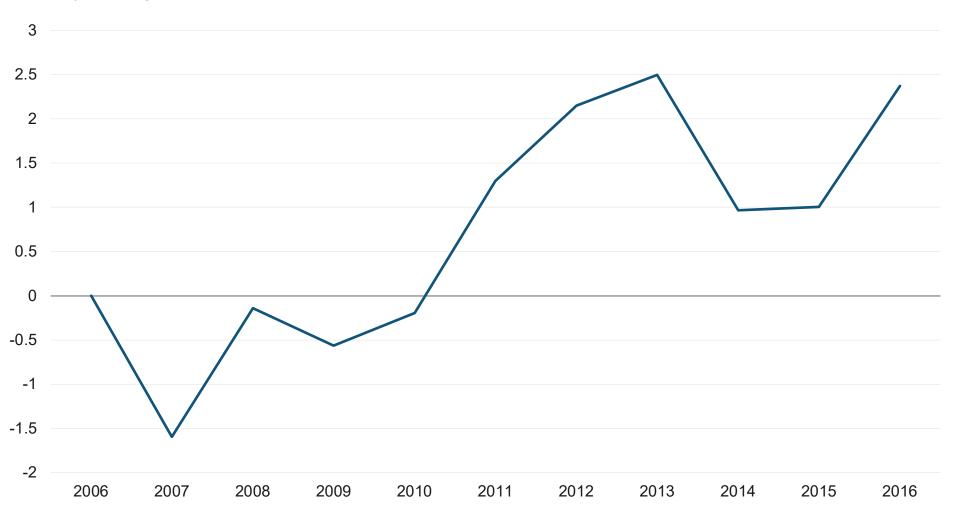
EXHIBIT 1 Adjusted Change in Visit Duration, Primary Care Physicians, 2006–2016

For adult patients ages 18–64

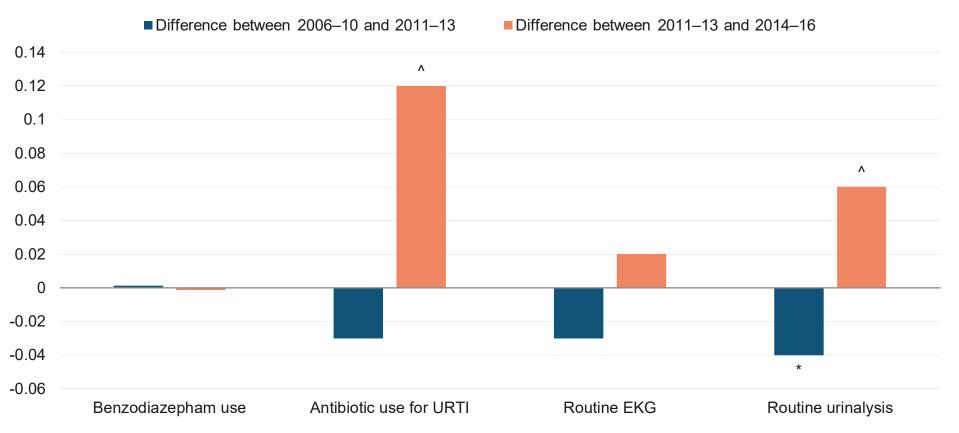


Data: Authors' analysis of the National Ambulatory Medical Care Survey (NAMCS), 2006-2016.



EXHIBIT 2 Trends in Adjusted Measures of Overuse, Primary Care Physicians, 2006–10/2011–13 and 2011–13/2014–16

For adult patients ages 18–64



Notes: URTI = upper respiratory tract infection. EKG = electrocardiogram. Stars indicate significant difference between the 2006–10 and 2011–13 periods; carets indicate significant difference between the 2011–13 and 2014–16 periods.

* p<0.1

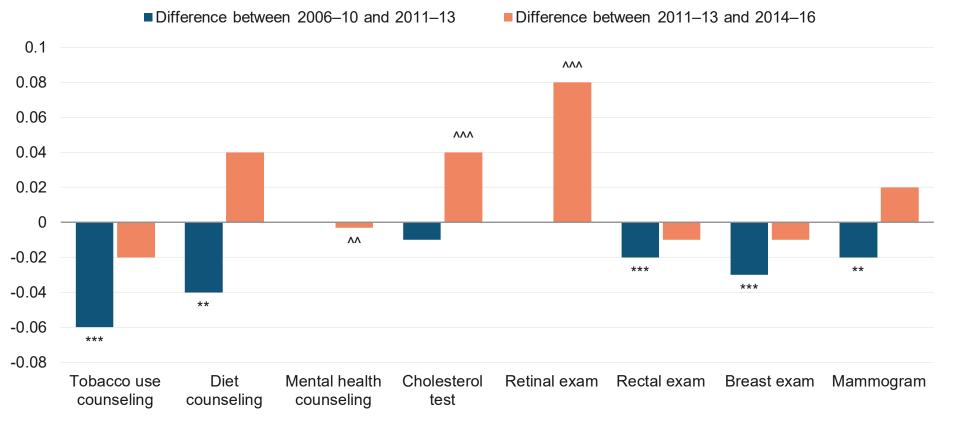
^ p<0.1

Data: Authors' analysis of the National Ambulatory Medical Care Survey (NAMCS), 2006–2016.



EXHIBIT 3 Trends in Adjusted Preventive Screenings and Counseling, Primary Care Physicians, 2006–10/2011–13 and 2011–13/2014–16

For adult patients ages 18–64



Notes: Only significant differences of p<0.05 shown. Stars indicate significant difference between the 2006–10 and 2011–13 periods; carets indicate significant difference between the 2011–13 and 2014– 16 periods.

** p<0.05 *** p<0.01

^^ p<0.05 ^^^ p<0.01

Data: Authors' analysis of the National Ambulatory Medical Care Survey (NAMCS), 2006–2016.



EXHIBIT 4 Trends in Adjusted Rates of Guideline-Concordant Care

	Unadjusted mean in 2006–2010	Adjusted difference between 2006–10 and 2011–13	Adjusted difference between 2011–13 and 2014–16
Treatment of CHF	0.34	-0.06	0.07
Beta blockers for CAD	0.41	-0.03	0.02
Hypertension treatment	0.57	-0.02	0.05^
Statins for hyperlipidemia	0.42	-0.02	0.00
Statins for DM	0.34	-0.01	0.04
Statins for CAD	0.48	-0.11**	0.08
Asthma treatment	0.46	-0.03	0.04
Treatment of depression	0.55	-0.04*	0.03

Notes: Guideline-concordant care for adults ages 18–64. CHF = chronic heart failure; CAD = coronary artery disease; DM = diabetes mellitus. Stars indicate significant difference between 2006–10 and 2011–13 periods; carets indicate significant difference between 2011–13 and 2014–16 periods.

* p<0.1 ** p<0.05

^ p<0.1

Data: Authors' analysis of the National Ambulatory Medical Care Survey (NAMCS), 2006–2016.

Source: Benjamin Zhu and Sherry A. Glied, More Is More: Expanding Access to Primary Care While Maintaining Quality (Commonwealth Fund, July 2021).

