Figure 1. Nine of 10 Health Care Opinion Leaders Think Fundamental Change Is Required to Achieve Gains in Quality and Efficiency of Care in the United States

“Overall, what is the magnitude of changes in the delivery system (the way providers are organized and care is delivered) that you believe is necessary to achieve significant gains in the quality and efficiency of care in the United States?”

Only modest changes are needed—most of the U.S. delivery system operates well

- No changes are needed: 0%
- Fundamental change is required: 89%
- Not sure: 3%

Figure 2. Policy Strategies to Improve Health Care Delivery Organization

“How important do you think each of these are in improving health system performance?”

<table>
<thead>
<tr>
<th>Policy Strategy</th>
<th>Very important</th>
<th>Important</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strengthening the primary care system</td>
<td>72</td>
<td>18</td>
<td>90</td>
</tr>
<tr>
<td>Encouraging care coordination, and the management of care transitions</td>
<td>68</td>
<td>22</td>
<td>90</td>
</tr>
<tr>
<td>Promoting care management of high-cost/complex patients</td>
<td>62</td>
<td>26</td>
<td>88</td>
</tr>
<tr>
<td>Encouraging the integration/organization of providers, both within and across care settings</td>
<td>48</td>
<td>34</td>
<td>82</td>
</tr>
<tr>
<td>Promoting health information exchange networks/regional health information organizations</td>
<td>32</td>
<td>35</td>
<td>67</td>
</tr>
</tbody>
</table>

Figure 3. Health Care Opinion Leaders Cite Payment Reform as Important Strategy to Improve Health Care Delivery Organization

“How important do you think each of these are in facilitating delivery system reform?”

- **Payment reform (i.e., moving away from fee-for-service payment)**
  - Very important: 59
  - Important: 20
  - Total: 79

- **Government regulatory changes**
  - Very important: 46
  - Important: 33
  - Total: 79

- **Private- and public-payer collaboration**
  - Very important: 41
  - Important: 35
  - Total: 76

- **Consumer engagement/empowerment**
  - Very important: 27
  - Important: 41
  - Total: 68

- **Increased provider competition on quality/efficiency**
  - Very important: 27
  - Important: 34
  - Total: 61

- **Voluntary accreditation/certification**
  - Very important: 6
  - Important: 24
  - Total: 30

Figure 4. Strong Support for Supplemental Payments to Primary Care Doctors for Providing High-Quality Care

“Below are some specific payment reform strategies that have been suggested to facilitate delivery system reform. Please indicate your level of support for each one.”

- **Providing supplemental payments to primary care (on top of fee-for-service) for delivering comprehensive, coordinated, and accessible care**
  - Strongly support: 51
  - Support: 33
  - Total: 84

- **Incentives for avoiding unnecessary hospitalizations and rehospitalizations**
  - Strongly support: 39
  - Support: 45
  - Total: 84

- **Capitation or other special payment arrangements for organized delivery systems**
  - Strongly support: 35
  - Support: 32
  - Total: 67

- **Episode-based payments for acute hospitalizations**
  - Strongly support: 27
  - Support: 36
  - Total: 63

- **Expansion of pay-for-performance programs**
  - Strongly support: 20
  - Support: 34
  - Total: 54

Figure 5. Three-Quarters of Health Care Opinion Leaders Think Organized Delivery Systems Are More Likely to Deliver High-Quality and Efficient Care

“Please indicate whether or not you agree with the following statements about organized delivery systems.”

Organized delivery systems are more likely to deliver high-quality care than non-organized systems

Agree: 76
Strongly agree: 32
Total: 108

Organized delivery systems are more likely to deliver efficient care than non-organized systems

Agree: 74
Strongly agree: 29
Total: 103

Organized delivery systems are more likely to deliver patient-centered care than non-organized systems

Agree: 57
Strongly agree: 29
Total: 86

Note: Organized delivery system is defined as one which provides enhanced access to care, care coordination, participates in health information exchange, and has hospitals, physician practices, and other providers working together to improve quality and efficiency.

“How likely do you think it is that the results of an organized delivery system can be achieved with the following?”

Note: Organized delivery system is defined as one which provides enhanced access to care, care coordination, participates in health information exchange, and has hospitals, physician practices, and other providers working together to improve quality and efficiency.

Figure 7. Strong Support for Special Payment Arrangements to Organized Delivery Systems

“Below are some interventions to stimulate greater participation in organized delivery systems (including informal, or “virtual” systems). Please indicate your level of support for each.”

- **Organized delivery systems should have access to special payment arrangements (capitation, episode-based payment, etc.)**
  - Strongly support: 34
  - Support: 36
  - Total: 70

- **The government should provide infrastructure support in areas where formal organized delivery systems don’t naturally develop**
  - Strongly support: 25
  - Support: 38
  - Total: 63

- **Providers should be given financial incentives to practice in an organized delivery system**
  - Strongly support: 25
  - Support: 35
  - Total: 60

- **Patients should be given financial incentives to join an organized delivery system**
  - Strongly support: 19
  - Support: 29
  - Total: 48

Note: Organized delivery system is defined as one which provides enhanced access to care, care coordination, participates in health information exchange, and has hospitals, physician practices, and other providers working together to improve quality and efficiency.
Figure 8. Health Care Opinion Leaders Who Support Government Funding of Infrastructure Say Information Technology Services Should Be a High Priority to Develop Organized Delivery Systems

Percent of health care opinion leaders who believe that the government should provide infrastructure support in areas where formal organized delivery systems don’t naturally develop.

Note: Organized delivery system is defined as one which provides enhanced access to care, care coordination, participates in health information exchange, and has hospitals, physician practices, and other providers working together to improve quality and efficiency.

Figure 9. Seven of 10 Health Care Opinion Leaders Agree That Medical Homes Are More Likely to Deliver Patient-Centered Care

“Please indicate whether or not you agree with the following statements about medical homes?”

A health system that emphasizes medical homes is more likely to deliver patient-centered care than a system that doesn’t

- Strongly agree: 37
- Agree: 35
- Total: 72

A health system that emphasizes medical homes is more likely to deliver high-quality care than a system that doesn’t

- Strongly agree: 37
- Agree: 29
- Total: 66

A health system that emphasizes medical homes is more likely to deliver efficient care than a system that doesn’t

- Strongly agree: 28
- Agree: 32
- Total: 60

Overall, the U.S. health care delivery system should be based on a medical home system of care

- Strongly agree: 33
- Agree: 21
- Total: 54

Note: Medical homes are defined as patient-centered primary care practices that are designed to offer accessible, continuous, and coordinated care. Optimally, they utilize multi-disciplinary teams and health information technology, and actively try to engage their patients in care management and shared decision-making.

“Many functions of the medical home model of care are not currently reimbursed under the current payment system. Several payment models have been proposed to support the medical home. Please indicate your level of support for each one.”

For certified medical homes, supplement fee-for-service payment with a prospective per-member/per-month capitated fee (e.g., a “case management” fee)

- **Strongly strongly:** 32
- **Support:** 39
- **Total:** 71

For certified medical homes, offer the option to replace fee-for-service payment with a comprehensive per-member/per-month capitated fee for all primary care services

- **Strongly strongly:** 31
- **Support:** 32
- **Total:** 63

Create additional fee-for-service procedure codes for medical home functions such as care coordination, case management, etc.

- **Strongly strongly:** 18
- **Support:** 31
- **Total:** 49

Award primary care practices an annual bonus payment based on medical home certification

- **Strongly strongly:** 15
- **Support:** 32
- **Total:** 47

Note: Medical homes are defined as patient-centered primary care practices that are designed to offer accessible, continuous, and coordinated care. Optimally, they utilize multi-disciplinary teams and health information technology, and actively try to engage their patients in care management and shared decision-making.

Figure 11. Two-Thirds of Opinion Leaders Support Financial Incentives for Patients with Chronic Conditions to Register with a Medical Home

“Please indicate your level of support for the following mechanisms of encouraging patients to register with medical homes.”

<table>
<thead>
<tr>
<th>Scenario</th>
<th>Strongly Support</th>
<th>Support</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patients with chronic illness should be given a financial incentive</td>
<td>32</td>
<td>35</td>
<td>67</td>
</tr>
<tr>
<td>(e.g., reduced premiums or copays) to register with a medical home</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All patients should be given a financial incentive to register with a</td>
<td>21</td>
<td>30</td>
<td>51</td>
</tr>
<tr>
<td>medical home</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patients with chronic illness should be required to register with a</td>
<td>15</td>
<td>20</td>
<td>34</td>
</tr>
<tr>
<td>medical home</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>All patients should be required to register with a medical home</td>
<td>6</td>
<td>16</td>
<td>22</td>
</tr>
</tbody>
</table>

Note: Medical homes are defined as patient-centered primary care practices that are designed to offer accessible, continuous, and coordinated care. Optimally, they utilize multi-disciplinary teams and health information technology, and actively try to engage their patients in care management and shared decision-making.

Figure 12. Half of Health Care Opinion Leaders Think Growth of Retail Clinics Is a Positive Development

“Overall, do you think the rapid growth of retail clinics over the past two years is a positive or negative development for health care in the United States?”

- Very positive: 16%
- Somewhat positive: 38%
- Neither positive nor negative: 19%
- Somewhat negative: 16%
- Very negative: 6%
- Not sure: 4%

Figure 13. Majority of Opinion Leaders Support Coordinating Care from Retail Clinics with Regular Care

“Do you support a requirement for retail clinics to coordinate their services with traditional health care system?”

- Strongly support 41%
- Support 27%
- Somewhat support 19%
- Do not support 9%
- Not sure 3%

**Figure 14. Opinion Leaders Feel That Retail Clinics Provide More Convenient, Lower-Cost Care**

“Below are some beliefs about retail clinics. Please rate your level of agreement with each of the following statements.”

Percent responding “strongly agree/agree”

- Retail clinics are more convenient for patients than traditional care settings: 75%
- Retail clinics provide services at lower cost than traditional care settings: 50%
- Retail clinics further fragment care delivery in the United States: 49%
- Retail clinics provide inferior quality of care than traditional care settings: 11%