

Vermont Health Care Innovation Project

2017 Provider Survey

Green Mountain Care Board



If you would prefer to complete this survey on-line, please go to

<http://survey.jsi.com/s3/VT-Provider>

enter this 4-digit ID number
and follow the instructions.



← 4-digit ID number

48172



INTRODUCTION AND INSTRUCTIONS

Better care, better health, and lower health care costs: These are the goals of the Vermont Health Care Innovation Project (VHCIP). Serving as a conduit between public and private actors in health care reform, VHCIP fosters collaboration among the Green Mountain Care Board, the Vermont Agency of Human Services, Medicaid, private health insurers, and health care providers in the state.

Through the State-led Evaluation Plan, conducted by John Snow, Inc. (JSI), under contract with the Green Mountain Care Board VHCIP proposes to answer research questions in three topical areas including:

- **Care Integration and Coordination**
- **Use of Clinical and Economic Data to Promote Value-Based Care**
- **Payment Reform and Incentive Structures**

We are seeking to draw on the knowledge and experience of those doing the work in the field to assist the VHCIP and its many stakeholders to reach its goal of transforming its health system to one that is value driven, offers high quality care, and is patient centered.

Survey questions draw from other surveys assessing similar reform efforts including Tracking Transformation: Survey Tool to Assess the Spread of Coordinated Care, Center for Outcomes Research & Education, Providence Health & Services; and State Innovation Models (SIM) Initiative Evaluation, RTI International, but all questions are tailored specifically to the Vermont Health Care Innovation Project.

The enclosed survey should take approximately 20 minutes to complete. Responses to the survey will be kept confidential and no individual respondent will ever be identified.

Results from the survey will be posted to the Vermont Health Care Innovation project at <http://healthcareinnovation.vermont.gov/>.

Please respond to all questions from the perspective of the practice where you spend the majority of your time.



If you would like to complete this survey on-line:

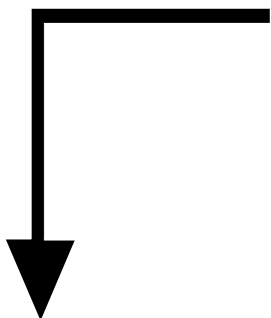
Please go to:

<http://survey.jsi.com/s3/VT-Provider>

enter your 4-digit ID number, and follow the instructions.

If you have any questions, please contact
Craig Stevens at JSI, 802-651-7402, craig_stevens@jsi.com.

Thank you very much for your input.



A. General Demographics

A1. In which Health Service Area (HSA) do you spend the majority of your time serving patients?

(check one that best applies)

- | | | | |
|-----------------------------------|-----------------------------------|-------------------------------------|------------------------------------|
| <input type="radio"/> Barre | <input type="radio"/> Middlebury | <input type="radio"/> Rutland | <input type="radio"/> Upper Valley |
| <input type="radio"/> Bennington | <input type="radio"/> Morrisville | <input type="radio"/> Springfield | <input type="radio"/> Windsor |
| <input type="radio"/> Brattleboro | <input type="radio"/> Newport | <input type="radio"/> St. Albans | |
| <input type="radio"/> Burlington | <input type="radio"/> Randolph | <input type="radio"/> St. Johnsbury | |

A2. What is your specialty?

- Family Medicine
- Internal Medicine
- Ob/Gyn
- Pediatrics
- Other Primary Care
- Other - non Primary Care, please specify:

A3. What is your training? (check all that apply)

- MD/DO
- NP/PA/APRN
- Other, please specify:

A4. Please indicate the category (or categories) that describe(s) the practice where you spend the majority of your time. (check all that apply)

- Solo practice
- Single-speciality primary care practice
- Multiple specialty group practice
- Group or staff model HMO
- Federally-qualified health center or rural health center
- Owned by a hospital or hospital system
- Academic medical center practice
- Patient centered medical home (PCMH)
- Other, please specify:

A5. How many providers (physicians, physician assistants, nurse practitioners) provide care either full-time or part-time in the practice where you spend the majority of your time?

- 1 provider
- 2-5 providers
- 6-10 providers
- 11-30 providers
- Over 30 providers



B. Care Coordination

OneCare Vermont defines care coordination in this way:

Care coordination activities promote a holistic and patient centered approach to ensure that a patient's needs and goals are understood and shared among providers, patients and families to improve quality of care, patient care experience and patient engagement in care plan/treatment plan goals as a patient interacts with health providers and settings.

B1. Based on the above definition, how well is the practice where you spend the majority of your time doing regarding care coordination?

- Very well
- Well in some ways, but not very well in others
- Not very well
- Poorly
- Don't know → **SKIP TO B3**

B2. What is needed (if anything) to improve care coordination in the practice where you spend the majority of your time? Please identify the top three needs.

- More care managers
- More access to training and standardized tools
- Better/higher reimbursement for care coordination services
- Better identification of patients in need of care management services
- Better knowledge of resources available to patients
- Better data capabilities to track patients
- More services to refer patients to
- Nothing more is needed
- Other, please specify: _____

B3. Based on the above definition, how well do you think the Health Services Area where you spend the majority of your time is doing regarding care coordination?

- Very well
- Well in some ways, but not very well in others
- Not very well
- Poorly
- Don't know → **SKIP TO B5 ON PAGE 3**

B4. What is needed (if anything) to improve care coordination in the Health Services Area where you spend the majority of your time? Please identify the top three needs.

- More care managers
- More access to training and standardized tools
- Better/higher reimbursement for care coordination services
- Better identification of patients in need of care management services
- Better knowledge of resources available to patients
- Better data capabilities to track patients
- More services to refer patients to
- Nothing more is needed
- Other, please specify: _____

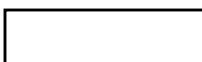


B5. Thinking of the past year, how would you describe your involvement in the following collaborative structures or activities?

	I am <u>unaware</u> of this structure/ activity	I am <u>aware</u> of this structure/activity, but my practice has not been involved	I have representation at this structure/ activity, but I am <u>not involved</u>	I am personally <u>involved</u> with this structure/ activity
a. Community collaboratives (also known as: regional collaboratives, UCCs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Integrated Communities Care Management Learning Collaborative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Core Competency training for front line care managers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Community Health Teams	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Accountable Community for Health Peer Learning Lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

B6. For patients identified as needing care coordination services in the practice where you spend the majority of your time, please rate the impact of the following in improving the quality of care coordination services.

	I am unaware or my practice has not been involved in this structure/ activity	<u>Significant and negative</u> impact	<u>Some negative</u> impact	<u>No</u> impact	<u>Some positive</u> impact	<u>Significant and positive</u> impact
a. Community collaboratives (also known as: regional collaboratives, UCCs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Integrated Communities Care Management Learning Collaborative	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Core Competency training for front line care managers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Community Health Teams	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Accountable Community for Health Peer Learning Lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



B7. When patients need to be linked to outside resources (i.e., external to the practice where you spend the majority of your time), how often is it...

	Never	Sometimes (less than 50% of the time)	Frequently (more than 50% of the time)	Always	Don't know or Not applicable
a. ...done well within my setting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. ... done systematically	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. ...actively accomplished (i.e., through designated staff person)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. ...passively accomplished (i.e., distributing a list of resources)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

B8. How would you rate the difficulty that you have in doing the following activities to get patients the services they need?

	Very difficult	Somewhat difficult	Average	Somewhat easy	Very easy	Don't know or Not applicable
a. Care coordination with providers within my practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Care coordination with providers outside my practice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Care coordination with Blueprint for Health Care Coordinators	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Care coordination with the Support and Services at Home (SASH) Program Wellness Nurses or Coordinators	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Assistance with transitions of care between one setting and another	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

B9. Is there anything else important you would like us to know about your views on care coordination?



C. Payment Reform

C1. Are any portion of payments to the practice where you spend the majority of your time based on performance for quality of care, costs, efficiency, or any other performance metrics for any insurer (e.g., Medicare, Medicaid, or commercial insurance groups)?

- Yes
- No → **SKIP TO C3**
- Don't know → **SKIP TO C3**

C2. To what extent would you say performance-based payments have affected decisions regarding clinical, administrative or other operational improvements at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know

C3. In which of the following ACOs does the practice where you spend the majority of your time participate?
(check all that apply)

- One Care Vermont
- Community Health Accountable Care (CHAC)
- VCP/Healthfirst
- None → **SKIP TO C7 ON PAGE 6**
- Don't Know → **SKIP TO C7 ON PAGE 6**

C4. To what extent has participation with ACO Shared Savings Programs affected your ability to improve quality of services at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know

C5. To what extent has participation with ACO Shared Savings Programs affected your ability to reduce health care costs at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know



C6. To what extent has participation with ACO Shared Savings Programs affected your ability to improve health outcomes for your patients at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know

C7. Does the practice where you spend the majority of your time participate in Blueprint for Health's payments?

- Yes
- No → **SKIP TO C11 ON PAGE 7**
- Don't know → **SKIP TO C11 ON PAGE 7**

C8. To what extent has participation in Blueprint for Health's payments affected your ability to improve quality of services at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know

C9. To what extent has participation in Blueprint for Health's payments affected your ability to reduce health care costs at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know

C10. To what extent has participation in Blueprint for Health's payments affected your ability to improve health outcomes for your patients at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know



C11. Does the practice where you spend the majority of your time participate in the Hub and Spoke Program for people with opioid dependence?

- Yes, as a Hub
- Yes, as a Spoke
- Do not participate → **SKIP TO C15**
- Don't know → **SKIP TO C15**

C12. To what extent has participation in the Hub and Spoke Program affected your ability to improve quality of services at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know

C13. To what extent has participation in the Hub and Spoke Program affected your ability to reduce health care costs at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know

C14. To what extent has participation in the Hub and Spoke Program affected your ability to improve health outcomes for your patients at the practice where you spend the majority of your time?

- Made a lot better
- Made somewhat better
- No change
- Made somewhat worse
- Made a lot worse
- Don't know

C15. How ready do you feel as a primary care provider to have some amount of your compensation tied to performance?

- Very ready → **SKIP TO C17 ON PAGE 8**
- Somewhat ready → **SKIP TO C17 ON PAGE 8**
- A little ready
- Not at all ready

C16. What is the length of time before you would be ready to have some amount of your compensation tied to performance?

- <1 year
- 1-2 years
- 3-5 years
- 6+ years
- Don't know



C17. How ready do you feel is the practice where you spend the majority of your time to have some level of payment based on performance?

- Very ready → **SKIP TO C19**
- Somewhat ready → **SKIP TO C19**
- A little ready
- Not at all ready

C18. What is the length of time before the practice where you spend the majority of your time would be ready to have some amount of its compensation tied to performance?

- <1 year
- 1-2 years
- 3-5 years
- 6+ years
- Don't know

C19. Which of the following would make you and/or the practice where you spend the majority of your time more ready to participate in alternative payment models, such as global payment, shared savings with downside risk, or other non-fee-for-service payment models?

	<u>Very</u> important to readiness	<u>Somewhat</u> important to readiness	<u>A little</u> important to readiness	<u>Not at all</u> important to readiness	Don't know or Not applicable
a. Being part of a larger organization to diminish individual risk and bear risk collectively	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Having better monitoring tools for patient tracking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Having better cost analytics and performance monitoring tools	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Having effective patient attribution methodology	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Having effective relationships with "right" partners ("right" in terms of fulfilling patient needs)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Having better data sharing capacities across partner organizations	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
g. Having a standard set of quality measures (across all payers) to track clinical performance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
h. Having more care management capacity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
i. Training and/or technical assistance for practice transformation expertise	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
j. Training and/or technical assistance to negotiate 3rd-party contracts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
k. Avoiding participation in MACRA or MIPS	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
l. Other, please specify:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



C20. In how many of your contracts with payers does the practice where you spend the majority of your time currently bear the following kinds of financial risk?

	None of our contracts (0%)	Some of our contracts (1-50%)	More than half of our contracts (>50%)	Don't know or Not applicable
a. Risk for physical health care	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. Risk for mental or behavioral health	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. Risk for care your patients get in a different setting (such as the ED)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Bundled payments around care episodes	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. Withholds designed to incentivize quality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Other kinds of risk arrangements not mentioned here, please specify:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

C21. What proportion of patients are covered by a risk-based contract at the practice where you spend the majority of your time?

- None (0%)
- Some of our patients (1%-50%)
- More than half of our patients (>50%)
- Don't know

C22. Is there anything else important that you would like us to know about your views on payment reform?



D. Data and Data Infrastructure

The purpose of this section is to understand your practice's utilization of data and perceived value of various data sources and infrastructure.

D1. Please state the extent to which you agree/disagree with the following statement:

Data drives the transformation of the practice where I spend the majority of time and the practice's behavior.

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

D2. How often do you use the following data systems in support of patient care or quality improvement?

	Often	Sometimes	Rarely	Never	Don't know or Not Applicable
a. EHR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. VITL/VITL Access	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. External patient registries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Internal patient registries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. ACO data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Blueprint data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

D3. Which best describes the data analysis capacity of the practice where you spend the majority of your time?

(check one that best applies)

- We rely primarily on internal support for data analysis
- We rely primarily on external support for data analysis
- Don't know

D4. Please state the extent to which you agree/disagree with the following statement:

I have adequate analytic capability and support to use data to improve patient care at the practice where I spend the majority of time.

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

D5. How capable is the practice where you spend the majority of your time using the following data sources for patient care or quality improvement?

	Very capable	Somewhat capable	A little capable	Not at all capable	Don't know or Not applicable
a. EHR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. VITL/VITL Access	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. External patient registries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Internal patient registries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. ACO data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Blueprint data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



D6. Please state the extent to which you agree/disagree with the following statement:

I have adequate access to quality reporting and measurement data at the practice where I spend the majority of time.

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

D7. How often do you use the following sources of quality reporting and measurement data?

	Often	Sometimes	Rarely	Never	Don't know or Not applicable
a. EHR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
b. VITL/VITL Access	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
c. External patient registries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
d. Internal patient registries	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
e. ACO data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
f. Blueprint data	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

D8. Which statement is most true in regards to event notification systems (such as Patient Ping)?

- Patient Ping is the primary event notification system I use
- I use some event notification system other than Patient Ping
- I do not use an event notification system → **SKIP TO D10**

D9. Please state the extent to which you agree/disagree with the following statement:

The event notification system has changed the way staff and the practice where I spend the majority of time behave.

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- Don't know

D10. Is there anything else important you would like to tell us about the practice's use of data (practice where you spend the majority of your time)?

**Thank you! Please Return in Business Reply Envelope to:
JSI, Survey Group, 44 Farnsworth Street, Boston, MA 02210**

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