PERRYUNDEM
RESEARCH/COMMUNICATION

Topline Results
Survey of Physicians
On Advance Care Planning Conversations
Fielded February 18 to March 7, 2016
Margin of sampling error = ± 3.6 percentage points

March 2016

N = 736 physicians nationwide who see patients 65 and older, including:

- N = 470 internists/primary care providers (MOE = ± 4.5 percentage points)
- N = 266 specialists: oncologists, pulmonologists, cardiologists (MOE = ± 6.0 percentage points)
- Oversample of n = 102 California physicians for a total of n = 202 (MOE = ± 6.9 percentage points)

** Denotes Kaiser Family Foundation question asked among the public*[1]

Introduction

This is a survey about physicians' views toward advance care planning, goals of care, and end-of-life conversations. The survey is sponsored by three non-profit foundations. Your responses to these questions are completely confidential. Thank you for your participation.

IF ASKS ABOUT FOUNDATIONS:
California Health Care Foundation
Cambia Health Foundation
John A. Hartford Foundation

[1] http://files.kff.org/attachment/topline-methodology-kaiser-health-tracking-poll-september-2015

Screening

	Total (N=736)	PCP (N=470)	Specialty (N=266)	Calif. (N=202)

1. What is your primary medical specialty? CODED OPEN END

Primary care	7	11	-	7
Internal medicine	33	50	-	32
Family practice	24	37	-	21
General practice	2	3	-	3
Oncology	11	-	33	17
Pulmonology	12	-	34	11
Cardiology	11	-	33	9
Other TERMINATE	-	-	-	-
DK/REF TERMINATE	-	-	-	-

2. Do you see patients who are age 65 and older on a regular basis?

Yes	100	100	100	100
No TERMINATE	-	-	-	-
DK/REF TERMINATE	-	-	-	-

3. How often do you see patients 65 and older who you would not be surprised if they died within the next year? Do you see these patients:

Everyday or almost every day	53	50	58	52
Several times a week	21	22	20	18
At least once a week	11	12	9	11
At least once a month	9	9	8	11
Less often than that	6	6	5	7
DK/REF	0	0	0	1

Own Views

4. Have you ever had a conversation with your own doctor or health care provider about your wishes for your care at the end of your life, or not? **Close wording (added "your own")*

Yes	48	47	50	49
No	52	53	50	50
DK/REF	1	1	-	1

Coverage Benefit

This year, Medicare will start covering advance care planning as a separate service provided by physicians and other health professionals who bill Medicare using the physician fee schedule.

Advance care planning is defined as conversations which cover the patient's specific health conditions, their options for care and what care best fits their personal wishes, including at the end of life, and the importance of sharing those wishes in the form of a written document.

	Total (N=736)	PCP (N=470)	Specialty (N=266)	Calif. (N=202)

5. In your own opinion, how important is it that health care providers have these conversations with patients? Would you say:

Extremely important	51	48	56	56
Very important	38	41	34	34
Somewhat important	10	10	9	7
Not too important	1	1	1	1
Not at all important	0	0	1	1
DK/REF	-	-	-	-

6. How often do you talk to patients 65 and older about issues related to advance care planning or end of life care?

Everyday or almost every day	21	22	18	18
Several times a week	31	29	33	36
At least once a week	20	19	22	18
At least once a month	15	14	16	12
Less often than that	13	15	10	16
DK/REF	0	-	0	-

7. Do you support or oppose this new Medicare benefit that reimburses providers for these discussions? Is that strongly or somewhat support/oppose?

Strongly support	66	66	65	67
Somewhat support	29	29	29	24
Somewhat oppose	3	3	4	5
Strongly oppose	1	0	1	3
DK/REF	2	2	2	2

	Total (N=736)	PCP (N=470)	Specialty (N=266)	Calif. (N=202)
8. Does this new benefit make you more likely to talk with patients who are 65 and older about advance care planning, or not? IF YES: Does it make you much more/somewhat more likely?				
Yes, much more likely	35	36	33	35
Yes, somewhat more likely	40	41	39	30
No	24	22	28	34
DK/REF	1	1	2	2
9. Have you had this conversation and billed Medicare for it this year?				
Yes	14	14	12	17
No	85	84	87	81
DK/REF	1	2	1	2
10. In general, whose responsibility should it be to initiate these conversations about advance care planning with Medicare patients:				
The patient or family's responsibility	15	17	12	18
Your responsibility	75	75	74	66
Another doctor's responsibility, or	4	2	8	6
A different type of health care provider, like a nurse or social worker's responsibility?	4	5	4	7
DK/REF	2	2	2	3
11. Do you feel you have enough of the right kind of training to talk to patients about advance care planning and their end-of-life wishes, or not?				
Yes	74	72	78	75
No	16	17	15	16
DK/Not sure	10	11	7	10
REF	0	0	-	-

Motivations

Here are some potential outcomes of talking with patients about advance care planning, goals of care, and end-of-life wishes. For you personally, how important is each of these as a reason to talk with your patients about these issues? RANDOMIZE

		Extremely Important	Very Important	Smwt important	Not very important	Not at all important	DK/REF
12. You would be better able to honor your patient's values and wishes	Total	54	38	7	0	0	0
	PCP	54	40	6	0	-	-
	Spe.	54	35	10	1	0	1
	CA	51	42	6	1	0	-
13. Patients and family members may be more satisfied with their care	Total	40	41	16	2	1	0
	PCP	39	42	16	2	1	0
	Spe.	43	37	16	3	1	1
	CA	40	38	14	5	2	1
14. It could save health care costs	Total	29	34	27	6	4	1
	PCP	30	36	25	6	4	1
	Spe.	28	30	30	7	5	1
	CA	33	32	22	7	4	2
15. It could increase the number of patients who receive hospice care	Total	24	33	30	9	3	1
	PCP	23	34	31	9	2	0
	Spe.	26	32	28	9	3	1
	CA	25	33	26	10	5	1
16. It could reduce unnecessary or unwanted hospitalization at the end of life	Total	52	35	11	1	0	0
	PCP	51	38	11	1	0	0
	Spe.	54	31	13	1	0	1
	CA	50	32	15	1	1	-

Practice

	Total (N=736)	PCP (N=470)	Specialty (N=266)	Calif. (N=202)

17. In your practice or health care system, is there a formal system for assessing patients' end-of-life wishes and goals of care, or not?

Yes, formal system	29	28	31	34
No formal system	67	69	64	63
DK/REF	3	3	4	4

18. Is there a place in your electronic health record system that indicates whether or not a patient has an advance care plan? This might be a check box or a yes or no indicator.

Yes, there is a place in the EHR	59	58	60	61
No, there is not a place in the EHR	24	25	22	24
NO EHR (VOL.)	9	10	7	7
DK/REF	8	6	11	7

19. Does your electronic health record system allow you to see the actual contents of a patient's advance care plan?

Yes	54	56	50	58
No	31	32	30	29
DK/REF	15	12	20	13

Barriers

Think about your patients 65 and older with a serious illness. Have any of the following ever gotten in the way of talking to them about their end-of-life wishes? IF YES: how often does this get in the way for you…. RANDOMIZE

		Frequently	Some times	Not too often	Never gets in way	DK/ REF
20. You don't want a patient to feel that you are giving up on them	Total	12	36	32	19	0
	PCP	12	34	33	21	0
	Spe.	11	42	32	16	-
	CA	15	25	36	23	1
21. You don't want a patient to give up hope	Total	10	36	36	19	0
	PCP	11	35	35	18	0
	Spe.	8	38	36	19	-
	CA	11	35	35	20	1
22. You're not sure the time is right	Total	13	47	28	11	1
	PCP	14	47	27	11	1
	Spe.	10	48	31	11	-
	CA	13	47	27	13	1
23. There's disagreement between family members and the patient	Total	16	49	30	5	1
	PCP	13	49	34	4	0
	Spe.	21	49	24	5	1
	CA	19	47	25	8	1
24. You don't have time with everything else on your plate	Total	30	36	19	15	1
	PCP	33	37	17	13	-
	Spe.	24	33	22	19	2
	CA	26	33	21	20	-
25. It might be an uncomfortable conversation	Total	14	37	28	21	1
	PCP	14	36	30	20	1
	Spe.	13	41	23	22	1
	CA	10	39	29	21	0

		Frequently	Some times	Not too often	Never gets in way	DK/ REF
26. Someone else should be having the conversation with them instead of you	Total	7	27	34	32	1
	PCP	4	26	35	34	1
	Spe.	11	28	32	29	1
	CA	10	28	29	31	2
27. You may be unsure what is culturally appropriate for the patient	Total	5	39	37	19	1
	PCP	6	37	37	20	1
	Spe.	3	41	38	17	0
	CA	7	38	34	19	3

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28. In general, do you consider conversations about end-of-life care to be: ROTATE

More challenging or	53	54	52	48
More rewarding?	35	34	36	32
BOTH (VOLUNTEER ONLY)	6	6	6	12
DK/REF	6	6	7	8

Training End of Life

29. During conversations about end-of-life care, how often do you feel unsure of what to say? Would you say:

Frequently	8	9	5	6
Sometimes	38	37	39	32
Not too often	34	37	30	33
Rarely or never	20	16	26	28
DK/REF	0	0	-	0

30. Have you had any training specifically on talking with patients and families about end-of-life care, or not?

Yes	29	29	29	34
No	68	68	69	63
DK/Not sure	3	3	3	3
REF	-	-	-	-

Demographics

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Finally, some demographic questions just for statistical purposes.

31. Which of the following best describes your medical practice?

Mostly office or clinic based	73	86	50	73
Mostly hospital based	7	6	10	6
Equally hospital and office/clinic based	19	7	40	20
Mostly long-term care facility based	1	1	0	1
Mostly hospice based	-	-	0	0
DK/REF	0	0	-	-

32. IF OFFICE OR CLINIC: How would you describe your office or clinic?
Total, n=678; PCP, n=437; Specialty, n=241; California, n=188

Solo practice	22	25	16	17
Single-specialty partnership or group	53	47	64	50
Multi-specialty partnership	25	27	20	33
Not office-based	0	0	-	1
DK/REF	0	1	-	-

33. Do you bill under Medicare fee-for-service, or not?

Yes	85	86	84	79
No	10	9	11	17
DK/REF	5	6	5	4

34. Just to make sure we have a representative sample, what is your age?

Under 40	9	9	9	4
40 to 49	28	28	28	27
50 to 59	33	33	33	30
60+	30	30	30	38
DK/REF	-	-	-	-

35. Are you from a Hispanic, Latino, or Spanish-speaking background?

Yes	2	3	2	3
No	96	96	98	95
DK/REF	1	2	0	2

	Total (N=736)	PCP (N=470)	Specialty (N=266)	Calif. (N=202)
36. What is your race? READ IF NECESSARY				
White	75	77	73	67
Black/African-American	2	2	1	1
Latino/Hispanic	1	1	1	2
Asian American	11	11	12	19
Arab American	1	2	0	1
Indian/Pakistani	6	5	9	4
Other (SPECIFY)	0	0	1	0
DK/REF	4	4	3	6
37. What percent of your patient population is <u>not</u> white – that is, what percent is racially or ethnically diverse? Your best guess is fine.				
<25%	44	45	42	23
25% to 49%	35	33	40	34
50% to 74%	17	17	17	35
75% +	4	6	2	8
DK/REF	-	-	-	-
Gender				
Male	81	78	88	78
Female	19	22	13	23