



PRIMARY CARE LARGELY OPEN BUT STRUGGLING

PRESS RELEASE

WASHINGTON, September 1, 2020 – The Larry A. Green Center, in collaboration with the Primary Care Collaborative (PCC), today released new data that shows that primary care is shrinking at precisely the time it is needed to help the country get back on its feet. In just the past month, 2% of practices have closed, another 2% are considering bankruptcy, and 10% are uncertain of their solvency for the coming month. Previous federal and commercial efforts have provided time-limited, modest support that is not enough to help sustain primary care practices and enable them to meet myriad COVID-19 challenges. One in 5 clinicians is now considering leaving primary care, and 13% are uncertain of their future in the profession.

Data from the survey of clinicians also reveals worsening patient health and social conditions. The most commonly observed conditions are: higher levels of mental health concerns (86%); more sleep issues (77%); and weight gain (73%). In addition, 34% of clinicians have seen higher levels of food insecurity among patients, 38% have seen higher levels of housing insecurity, and 58% report an increase in patients struggling to pay bills.

“Primary care, as we know it now, was born during the civil unrest of the 1960s. Social justice is woven into its fabric,” said Rebecca Etz, PhD, co-director of The Larry A. Green Center. “Clinicians’ workloads have increased, environmental threats have increased, and they are trying to address social issues that contribute to health inequities. And still, we watch them fall. When will policy makers acknowledge primary care is too critical to collapse?”

“Patients – many who have delayed care and are in economic jeopardy with federal unemployment support sunseting – are presenting with a broader array of needs,” said Ann Greiner, President and CEO of PCC. “Primary care is responding by strengthening partnerships with public and behavioral health yet experiencing historic drops in revenue. We say to public and private policy makers: Primary care needs an immediate lifeline!”

The survey was conducted by the Larry A. Green Center, a research group in Richmond, Virginia. The survey is part of a regular Green Center series, sponsored by foundations, to look at the attitudes of primary care clinicians and patients during the COVID-19 pandemic and the abilities of practices to meet patients’ needs.

The survey of clinicians was fielded August 21-24, 2020, and received 636 responses from 47 states. 74% of respondents identify their practice as family medicine, 11% as internal medicine, 6% as pediatrics, 4% as geriatrics, and 3% as other. Settings include 24% rural, 11% community health centers, 10% in schools/offices, and 31% in designated patient-centered primary care homes. 29% have 1-3 clinicians in the practice, 30% have 4-9 clinicians, 41% have more than 10 clinicians. 43% are owned by a health system, 30% are self-owned, 12% are independent and large-group, and 3% are government-owned. 10% are convenience settings, and 4% are membership-based.

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About the Primary Care Collaborative:

Founded in 2006, the [Primary Care Collaborative](https://www.pccollab.org/) (PCC) is a nonprofit multi-stakeholder membership organization dedicated to advancing an effective and efficient health system built on a strong foundation of primary care and the patient-centered medical home. Representing a broad group of public and private organizations, PCC’s mission is to unify and engage diverse stakeholders in promoting policies and sharing best practices that support growth of high-performing primary care and achieve the “Quadruple Aim”: better care, better health, lower costs, and greater joy for clinicians and staff in delivery of care.

About The Green Center:

The Larry A. Green Center for the Advancement of Primary Health Care for the Public Good is a research group founded by Rebecca Etz, PhD at Virginia Commonwealth University and Kurt Stange, MD, PhD at Case Western Reserve University. The Green Center works to reclaim and reconstitute the intellectual foundations of primary care, to advance the science of medicine learned and practiced within layered and competing social frameworks of meaning, and to deliver on a now 50 year old promise: better health and improved health care through a synergistic focus on both humanism and healing. We are nimble, inquisitive, curious, and open. We make personal doctoring and innovation visible.