Kathy Blake, MD, MPH, shares key findings on successful private practices

AMA's Moving Medicine video series amplifies physician voices and highlights developments and achievements throughout medicine.

Featured topic and speakers

In today’s episode of Moving Medicine, AMA Chief Experience Officer Todd Unger chats with Kathleen Blake, MD, MPH, the AMA's vice president of health care quality, who shares new research on what makes high-performing physician practices so successful and where more support for private practices is needed.

Speaker

- Kathleen Blake, MD, MPH, vice president, health care quality, AMA

Transcript

Unger: Hello, this is the American Medical Association's Moving Medicine video and podcast. Today we're joined by Dr. Kathleen Blake, the AMA's vice president of health care quality in Santa Fe, New Mexico, who will share her research on what makes high-performing physician practices so successful and where more support for these practices is needed.

I'm Todd Unger, AMA's chief experience officer in Chicago. Dr. Blake, it's great to have you back. The AMA in collaboration with Mathematica, an outside data research organization, recently conducted a qualitative study on high-performing physician practices. So before we go and dive into the results of that research, why don't you just start by telling us a little bit about what drove you to do this study and analyze the kind of data on what makes a physician practice high-performing?

Dr. Blake: So several things, Todd, and it's wonderful to be here. The first, really, question that we were intrigued by is that we know that many practices face a lot of challenges, but we wanted to learn from the practices that had recorded and been recognized for high performance. How did you do it?
What was the secret sauce? And we then wanted to be able to share that with a much broader audience.

The second was that we knew that these practices were independent, physician-owned but AMA studies have shown that there are fewer physicians practicing in that model than in years past, though I would remind the audience, it's still very close to 50%. So though the numbers are down, the remaining participants, it's still a very big number. So those were our guiding principles going into this study.

**Unger:** So I'm interested to hear about what you found. What were those common attributes across successful private practices?

**Dr. Blake:** So there's no one-size-fits-all. I hesitate to try and give you one particular attribute, except that they are fiercely proud and identify strongly with their practices. And so by identifying in that way, it's also with their patients, it's with their community, that there is a connectedness that, for them, is a very strong motivation.

**Unger:** Is that what we would call an owner’s mentality in some ways?

**Dr. Blake:** It is. And it's an owner's mentality in the sense of "This is on me. I am responsible." And these were physicians who liked having that responsibility because they could make the decisions based on a complex set of circumstances in their environment. They also liked the fact that they didn't have to go through multiple layers of administration to make a decision, that they could especially hire the people they worked with. And that was especially important with respect to bringing in new physicians but it also applied to the office managers, the nurses, the other people that they would be working with to take care of patients.

**Unger:** We just covered a number of, I guess, what would be perceived as advantages, the independence and ability to make your own decisions, hire who you want to, hopefully cut through some of the bureaucratic parts of this. Are there any other distinct advantages that you picked up on in the research?

**Dr. Blake:** The other advantages were that really it goes back to that connectedness to the community, that they would frequently develop what you might call a kitchen cabinet of experts who they would work with. And it might be people in the school system or bankers or attorneys, various advisors. And so for them, that also was an advantage. And then their patients were, just as the doctors knew they were accountable, their patients knew that the doctor was accountable. And so there was, I think, a strong bond that is perhaps harder to establish when you are at a very large health system level.

**Unger:** So you mentioned upfront there’s been a trend, a decline in somewhat the percentage of
practices that are private and independent but still in there at about half right now. And I know a big part of this study was to look at potential threats to private practice. Can you give us a few of the challenges that even those which you would call highly successful reported facing?

**Dr. Blake:** Yes. So there is no question that the administrative burden of running a practice is quite separate from the clinical burden and the clinical knowledge and excitement and reward that comes with taking care of patients. So these were physicians who had to be both caregivers, doctors, as well as business people. So the changing of rules, regulations, payment schedules sometimes on a yearly basis was very difficult.

The second was that they had made large investments in electronic health records systems in particular, and they knew fundamentally that they were not fully leveraging the capabilities of those systems with respect to data analysis, population health, things like that. But a lot of times doing those things takes both time and money. So that was a challenge.

Another challenge that they reported was being able to identify and recruit and retain young physicians to join the practice. And some of that they felt was because young physicians now, as they go through medical school and then through their graduate medical education, may not spend time with private practices. They may spend most of their time at an academic medical center.

And then lastly, these were physicians who said, "We just don't have the financial wherewithal to provide oftentimes the same kind of benefit packages, recruiting incentives that a large health system has."

**Unger:** Yeah, those are pretty significant challenges. And in the face of that, where do you see the biggest opportunities to support private practice in the future?

**Dr. Blake:** So I think there are several. There are some models out there for what we might call support networks, similar to the U.S. Department of Agriculture program for communities to be able to get guidance. That was actually a section of the Affordable Care Act. It's never been funded but it is outlined in detail. So that is one.

The second is to be able to increase that exposure of the younger physicians. Because for these practices to be sustainable, their founding doctors need to be able to retire but they also need to know that the doors will stay open because young people come. And we're seeing some of that. Some of the academic medical centers are doing that, particularly those in states where there is a large rural community. So that is something where greater exposure early on.

URL: https://www.ama-assn.org/practice-management/private-practices/kathy-blake-md-mph-shares-key-findings-successful-private
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And then in terms of some of the regulatory burdens, I think you know as well as anyone, Todd, AMA is profoundly committed to lowering the administrative burdens for physicians, not just those in private practice, but across the board. And I think that will make a big difference.

**Unger:** Absolutely. And you and your colleagues are working on that particular part. You've also developed a number of resources for private practices. Can you talk about what those are and where folks would find those?

**Dr. Blake:** Glad to. So one of them is a set of resources specifically related to contracting because the private practice physicians, the independent practitioners told us they didn't have the leverage that a large health system might have. So this is about the types of organizations that you can join to really negotiate as a group, such as an ACO. There is also model contracts that we put in there that help doctors see what items they want to be sure that they cover.

And then we have developed, through the AMA Steps Forward website, a whole series of resources that are very applicable to private practice. How to ensure patient satisfaction, how to implement team-based care, how to train people so they have career paths. So I call these news you can use. These are nuts-and-bolts, bread-and-butter types of things so that these practices can succeed.

**Unger:** Dr. Blake, thank you. And thank you to your colleagues for the work you're doing to support private practice. That's it for today's episode. We'll be back shortly with another Moving Medicine video and podcast. In the meantime, click subscribe on our YouTube channel, Apple, Spotify or wherever you listen to your podcasts. You can find all our videos and podcasts at ama-assn.org/podcasts. Thanks for joining us. Please take care.

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