



Adult Provider Willingness to Accept Young Adults into their Practice: Results from Three Integrated Delivery Systems



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Background

Pediatric providers and families often report that adult providers (AP) are unwilling to accept young adults (YA) with chronic illnesses into their practices. Surveys of APs report that lack of youth preparedness for adult care, communication from pediatric providers, training and infrastructure result in reluctance to accept new YA patients. To gauge AP willingness to accept new young adult patients, three integrated health care delivery systems -- Henry Ford Health System (HFHS), Cleveland Clinic (CC) and University of Rochester (UR) -- surveyed a sample group of primary care APs. These AP surveys represent a new area of applied transition research.

Methods

HFHS, CC, and UR sent an electronic survey to selected groups of adult primary care providers, including family medicine, med-peds and internal medicine clinicians, during 2016 to learn about their willingness and availability to care for youth with and without chronic health conditions. The survey was mailed to 752 APs: 219 from CC, 358 from UR and 175 from HFHS. 117 responded for an average 16% response rate.

Results

The majority of the APs in all three integrated health systems were interested in accepting some or all YA. The most important reasons given for not accepting or limiting YAs were a full practice panel, lack time given current appointment schedules, and training or experience gaps. Of note, over 50% of the APs were willing to accept YA with a range of chronic medical and behavioral conditions. The APs' top requested supports are: care coordination, information on community resources, lists of adult specialists who care for YA, short term consultations by pediatric providers, and additional training on YA health. Financial incentives were ranked as the lowest need by the 2 systems that do not have salaried providers (UR and HFHS). Limitations of the findings are that not all the questions were worded exactly the same and not all providers answered all the questions. Also the questions on AP's willingness to accept YA with specific chronic illnesses did not elicit whether the AP would assume responsibility for the supervision of the YA's chronic condition.

Survey Results

Will you accept new young adult patients ages 18-25?*				
	CC	UR	HFHS	Total
Yes to all	76.92% (60/78)	47.96% (47/98)	76.92% (10/13)	61.90%
Yes, but only without cc (+)	3.85% (3/78)	3.06% (3/98)	15.38% (2/13)	4.23%
Yes but only with cc	2.56% (2/78)	8.16% (8/98)		5.68%
No, none	17.95% (14/78)	40.82% (40/98)	7.69% (1/13)	29.10%
If you are NOT accepting new young adult patients WITH chronic conditions, what are the important reasons for this decision?***				
Practice is full	16.67% (13/78)	100.00% (3/3)	37.50% (3/8)	21.35%
Lack of time in appointment	1.28% (1/78)	100.00% (3/3)	42.86% (3/7)	7.95%
Will you accept new young adult patients with the following specific conditions?				
Asthma	75.64% (59/78)	100.00% (7/7)	100.00% (12/12)	80.41%
Obesity	71.79% (56/78)	100.00% (7/7)	92.31% (12/13)	76.53%
Depression	69.23% (54/78)	100.00% (6/6)	92.31% (12/13)	74.23%
Autism Spectrum Disorder	57.69% (45/78)	66.67% (4/6)	69.23% (9/13)	59.79%
Sickle Cell Disease	52.56% (41/78)	66.67% (4/6)	84.62% (11/13)	57.73%
Cystic Fibrosis	50.00% (39/78)	66.67% (4/6)	69.23% (9/13)	53.61%

If you prefer NOT to accept ANY new young adult patients, what are the important reasons for this decision?***				
	CC	UR	HFHS	Total
Practice is full	17.95% (14/78)	100.00% (38/38)	66.67% (4/6)	45.90%
Lack of time in appointment	1.28% (1/78)	47.22% (17/36)	50.00% (3/6)	17.50%
Training or experience gaps	5.13% (4/78)	11.11% (4/36)	50.00% (3/6)	9.17%
What kind of support is necessary to accept YA with cc?				
Care coordination support	66.67% (52/78)	87.50% (77/88)	100.00% (12/12)	79.21%
Information on community resources for young adults	51.28% (40/78)	84.09% (74/88)	91.67% (11/12)	70.22%
List of adult specialists who care for young adults	55.13% (43/78)	73.03% (65/89)	83.33% (10/12)	65.92%
Short term pediatric consultation support	34.62% (27/78)	74.16% (66/89)	90.91% (10/11)	57.87%
Additional training on specific pediatric onset diseases	26.92% (21/78)	67.05% (59/88)	83.33% (10/12)	50.56%
Additional training on young adult health	16.67% (13/78)	57.47% (50/87)	63.64% (7/11)	39.77%
Financial incentives	10.26% (8/78)	46.51% (40/86)	41.67% (5/12)	30.11%

(+) chronic Conditions

Note: HFHS has a different question for the starred questions:

*Will you accept new young adult patients ages 18-25 without chronic conditions?

**If you prefer to limit or not accept new young adult patients WITH chronic illness, what are the important reasons for this decision?

***If you prefer to limit/not accept YA without chronic illness, what are the important reasons for this decision?

Conclusions

Contrary to the reported pediatric and parental concerns, the majority of AP survey respondents from three different integrated delivery systems were willing to see some or all YA and over half of AP respondents were willing to see YA with a broad variety of medical and behavioral conditions. Health systems looking for APs to care for YA should seek those clinicians who do not have full patient panels and offer care coordination infrastructure support, a list of adult specialists and community resources for YA as well as pediatric consultation support and training on pediatric illnesses. Health systems should consider an adult provider survey when initiating a health care transition improvement process.

Survey Questions for Adult Providers about their Willingness to Accept Young Adults With and Without Chronic Illnesses

from Poster by Got Transition, Cleveland Clinic, Henry Ford Health System and University of Rochester presented at the 2016 Baylor Health Care Transition Research Consortium

Suggested questions and options for answers:

1. Will you accept new young adult patients ages 18-25?
 - a. Yes, all
 - b. Yes, but only those without chronic illness
 - c. Yes, only those with chronic illness
 - d. No, none
2. If you prefer NOT to accept ANY new young adult patients, what are the important reasons for this decision?
 - a. Full practice
 - b. Lack of time in appointment
 - c. Payment for RVUs for time needed to care for YA
 - d. Problem with Adherence to care of YA
 - e. High no show rate for appts by YA
 - f. Training and/or experience gaps
 - g. Specialty referral difficulties
 - h. Lack of pediatric consultation support
 - i. Lack of care coordination
3. Will you accept new young adult patients with the following specific conditions?
Answer for each below: yes or yes, but only oversee their primary care needs or yes, but with pediatric provider consultation support or no
 - a. Asthma
 - b. ADHD/ADD
 - c. Autism Spectrum Disorder
 - d. Congenital Anomalies
 - e. Congenital Heart Disease
 - f. Cystic Fibrosis
 - g. Depression/behavioral health problem
 - h. Genetic disorders (Down Syndrome, Rett Syndrome, CHARGE Association)
 - i. Juvenile arthritis
 - j. Obesity
 - k. Type 1 Diabetes
4. If you are NOT accepting new young adult patients WITH chronic conditions, what are the important reasons for this decision?
 - a. Practice is full
 - b. Lack of time in appointment
 - c. Payment for RVUs for time needed to care for YA
 - d. Problem with Adherence to care of YA
 - e. High no show rate for appts by YA
 - f. Training and/or experience gaps

- g. Specialty referral difficulties
 - h. Lack of pediatric consultation support
 - i. Lack of care coordination
5. What kind of support is necessary for you/your practice to accept YA with chronic illness?
- a. Additional training on young adult health issues
 - b. Additional training on specific pediatric onset chronic diseases
 - i. If yes, please list specific diseases
 - c. Care coordination support
 - d. List of adult specialists who will accept care of young adults
 - e. Information on community resources
 - f. Financial incentives
 - g. List of dentists willing to care for YA with CC
 - h. PT/OT willing to care for YA with CC
 - i. Registered dieticians willing to care for YA with CC
 - j. Respiratory therapists willing to care for YA with CC
 - k. Short Term pediatric consultation support

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