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Rural physicians more likely to participate in quality improvement efforts and discuss costs of care with patients, according to a new survey

A new study in the National Rural Health Association's *Journal of Rural Health* finds rural primary care physicians are more likely to participate in quality improvement activities than their urban counterparts.

"I hope this study helps dispel myths about rural health care," said Alan Morgan, NRHA CEO. "Quality health care can be found in rural towns all across America. Rural primary care often faces significant challenges with equal or better patient outcomes. It's time to start looking at what's done right in rural."

A survey of 2,000 rural and urban family practitioners indicated that while rural communities may have fewer training options, rural primary care physicians are significantly more likely to participate in quality improvement activities.

The study also found that rural physicians were more likely to agree that physicians should discuss the costs of care with their patients and to report having added Medicaid or uninsured patients during the preceding year.

"Rural physicians are dedicated to providing high quality care and committed to supporting safety net patients," said study co-author Anne Kirchhoff, PhD, University of Utah assistant professor of pediatrics. "The Affordable Care Act should help more primary care providers receive payments for care they currently provide without charge. But as the Medicaid expansion is limited to only half the states, many rural providers will still shoulder a disproportionate cost burden compared with urban physicians."

Rural doctors surveyed were also more likely to participate in error-reduction initiatives and in reviews of other physicians' records and to feel prepared to contribute to quality improvement efforts.

"Despite our results and other evidence, the perception still exists that rural primary care is not as good as that available in cities," said study co-author Eric G. Campbell, PhD, Harvard Medical School professor and Massachusetts General Hospital Mongan Institute for Health Policy director of research. "So we needed to learn more about the factors driving that misperception and the role it may play in the continuing shortage of rural physicians in the U.S."

These findings correlate with other recent research, including a <u>2013 study</u> which indicates rural health care quality is equal to or better than urban care and the cost per Medicare beneficiary is 3.7 percent less for patients treated in rural areas versus those who seek urban health care.

"Primary care physicians in rural areas are just as equipped and capable to work in the Affordable Care Act environment that focuses on value," Morgan added.

The peer-reviewed article on the study, supported by a grant from the Columbia University Institute on Medicine as a Profession, is available here.

Gary Hart, PhD, University of North Dakota School of Medicine and Health Sciences professor and director of the Center for Rural Health, is also a co-author of the *Journal of Rural Health* report.

NRHA is a nonprofit organization working to improve the health and wellbeing of rural Americans and providing leadership on rural health issues through advocacy, communications, education and research. NRHA membership is made up of more than 21,000 diverse individuals and organizations, all of whom share the common bond of an interest in rural health.

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