Easing Administrative Burden

Many Michigan physicians report experiencing burnout, and this number is increasing. The vast majority report administrative burdens and regulatory requirements, including charting and paperwork, were significant contributors to their stress. The plethora of performance measures with little overlap across health plans, prior authorization requirements, and complex coding and billing guidelines have compounded the problem.

What Is the Problem?

- 43% of Michigan physicians report experiencing burnout
- The proportion of physicians experiencing burnout is increasing from 31% to 39% to 46% in 2018, 2021, and 2023 respectively
- Administrative burdens and regulatory requirements, including charting and paperwork, were attributed to stress by 85% of Michigan physicians
- The methodologies for determining an attributing provider vary from one health plan to another

Elements to Integrate for Improvement

- Centers for Medicaid and Medicare Services (CMS) has created The Universal Foundation as a set of high-priority quality measures to streamline performance incentive metrics
- A strong association exists between the use of population health management tools and lower burnout rates
- AI-enabled scribe tools can reduce time spent on EHR documentation

What Can You Do?

Payers:

- Utilize a **common set of quality metrics** such as CMS' Universal Foundation across health plans in Michigan
- All payers should agree upon and **use a common attribution methodology,** which should emphasize voluntary attribution across all product lines that honors a member's choice of primary care provider
  - Members across coverage types should be allowed to declare their preference and to renew this election annually
- **Fund targeted financial and technical assistance for small, independent, and rural practices** to help them adopt technology that streamlines operational and clinical tasks, including incentives for interoperable solutions that seamlessly integrate with existing EHRs to reduce duplicative data entry and minimize workflow disruptions
  - Patient registry-based tools are associated with improved health outcomes and lower physician burnout. These tools should be integrated with current EHRs

Professional Organizations:

- Adopt uniform policies that support transparency, independent validation, and continuous auditing of clinical AI tools, ensuring they are safe, effective, and trustworthy for use in medical practice

Other:

- **Explore the creation of a public benefit corporation to serve as a hub to ease the administrative burden experienced by primary care physician practices**
  - This organization would allow small groups to purchase optional support such as: shared billing infrastructure, credentialing support, EHR optimization, human resources and payroll systems, patient scheduling and communication platforms, and assistance with payer negotiations and value-based care contracting