

The State of Medical Directors in Alabama

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Study Design

Qualtrics Survey delivered through ALMDA listserv. No required items. Registry design.

Study approved as exempt by the University of Alabama Medical IRB.

- 34 responses included 32 medical directors
- These 32 medical directors cover 81 nursing homes (approx. 1/3 of nursing homes in Alabama)
- Medical Directors report directing from 1-18 nursing homes. Median is one.
- <5% report being an employee of a nursing home.
- 98% report also being an attending physician at the facility

Demographics

- Mean and Median age: 62
 - Youngest 40
 - Oldest 84
- 87% male, 13% female
- Specialty
 - 62% Family Medicine
 - 34% Internal Medicine
 - 6% Geriatrics
- CMD 51%

- Practice other than Nursing Home 84%
- Hospital privileges 50%
- 34% plan to retire within 5 years
 - 63% plan to retire within 10 years
- Average tenure as medical director 18 years
- Hours per week at each nursing home
 - 9.5 hours mean
 - 8 hours median
- Only 43% report incentives to attend MD continuing education

Nursing Homes

- Size range 37 to 182 beds
 - Mean 106, median 100
- 46% in rural or small town
- 97% report 3 or fewer attending physicians in facility
- 5 facilities (13%) reported vent or tracheostomy patients
- Only 16% report having a corporate medical director
- 13.5% report having lab facilities on site
 - Only 1 facility reports on-site xray facilities
- 48% have a waiting list for LTC beds

Facility Ownership

Private/single facility corporate	24%
Corporate/private equity	60%
Government	16%

Consultant Services (answered for 37 facilities)

	Number reporting	Percent reporting
Podiatry	31	84
Psychiatry	30	81
Eye care	27	73
Dental care	24	65
Physiatry	2	5
Nephrology*	1	2.7
Pharmacy*	1	2.7
Contract with mental health group*	1	2.7
Mental health advanced practitioners*	1	2.7
Orthopedics	1	2.7
Dermatology	1	2.7

Working with APPs

- 88% work with NP or PA
 - Most work with 1 (mean 1.66)
 - Highest is 12 (Alabama law max is 9.0 FTE (360 hours))
- APP employed by MD or employer 49%
- APP employed by facility or third party 75%

Medical Director participation

- Involved in vetting/hiring/monitoring of consultant services: 35%
- Participate in QAPI meetings: 95%
 - QAPI meets monthly in 57%
 - Quarterly 35%
 - Weekly 8%
- Meeting with administrator
 - Weekly 46%
 - Monthly 24%
 - Quarterly 16%
 - Less than quarterly 14%

- Meet with DON
 - Weekly 68%
 - Monthly 16%
 - Quarterly 8%
 - Less than quarterly 8%
- Star rating
 - 5 stars 35%
 - 4 stars 8%
 - 3 stars 11%
 - 2 stars 5%
 - 1 star 3%
 - No answer 38%

Medical Director Compensation

- Data is incomplete
- Some confusion over what number to report
- Can make some general observations/assumptions

Observations and Discussion

- We're old and we're male.
- More than half plan to retire within 10 years (1/3 within 5 years)
- The "SNF-ist" movement has started but does not dominate LTC in Alabama
- We have no idea whether we're fairly compensated for our work
- We need more education about what is required of us and our facilities regarding participation in QAPI and patient care admin
 - Medicaid rules about vent/trach patients?
- Many of our APPs are employed by outside entities
- Not many doctors see LTC patients anymore

F841

"Although the medical director is not required to sign policies, the facility must be able to show that the development, review, and approval of resident care policies included his/her input."

"Medical director responsibilities must include their participation in:

- Administrative decisions including recommending, developing and approving facility policies related to residents care. Resident care includes the resident's physical, mental and psychosocial well-being;*
- Issues related to the coordination of medical care identified through the facility's quality assessment and assurance committee and other activities related to the coordination of care;*
- Organizing and coordinating physician services and services provided by other professionals as they relate to resident care;*
- Participate in the Quality Assessment and Assurance (QAA) committee or assign a designee to represent him/her. (Refer to F865)."*

Next Steps...
