

2016 IN DATA

Looking back on a year of healthcare insights

By James Furbush | December 28, 2016

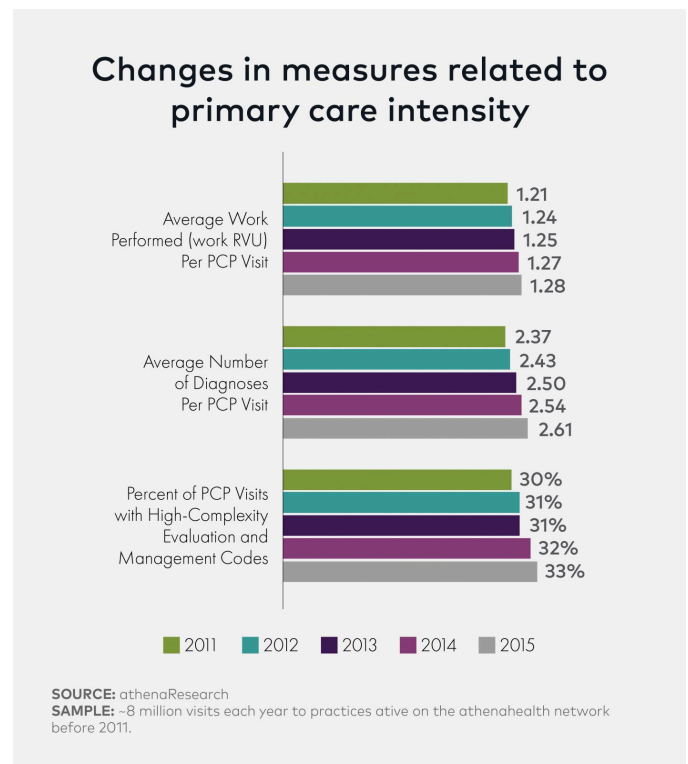
What can you learn from a network of 85,000 providers and 100 million patient interactions every year? The state of clinical trends, the effects of shifting business models, and the fallout from some of the year's biggest healthcare stories.

Throughout the year, athenaInsight examined data from athenahealth's network and spun it into stories and infographics that confirmed suspicions, challenged assumptions, and illuminated the state of American healthcare. Here is a collection of some of the most provocative, compelling data we unearthed in 2016.

1. Primary care physicians are working harder than ever

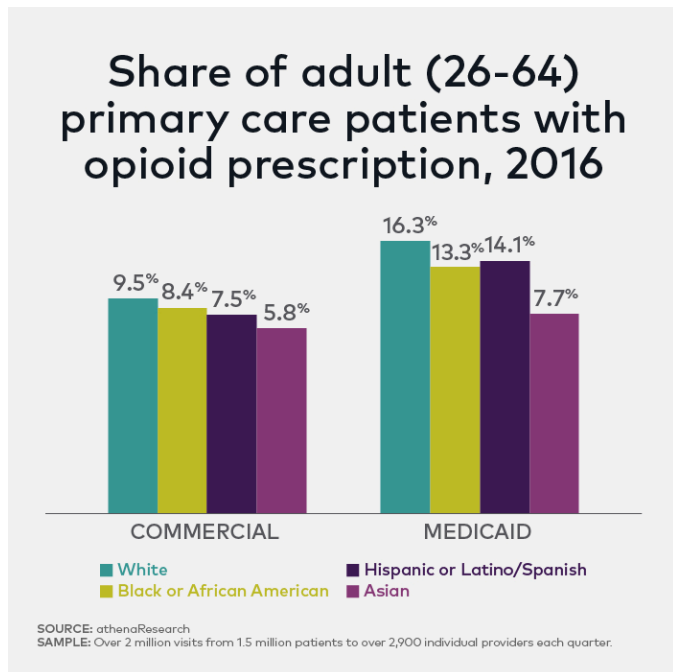
athenaInsight's 2016 Physician Engagement and Leadership Index found that engagement among doctors is low across the board, but it's particularly low for primary care physicians. A study of 40 million visits showed that even as nurse practitioners and physician assistants take on more work, primary care doctors are working harder than ever and taking on more complex cases with

multiple diagnoses. This infographic drills into the factors that are bringing PCPs down.



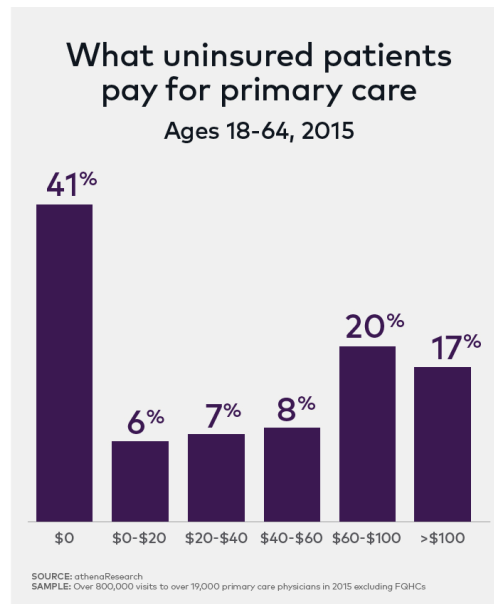
2. For opioid prescriptions, race makes a difference

How does race and ethnicity impact a patient's pain treatment? An analysis of prescribing patterns – based on more than 2 million primary care visits from 1.5 million patients – found markedly different rates of opioid prescriptions among white and minority patients. We asked doctors and addiction experts to discuss possible causes, which could range from physician bias to patient behavior.



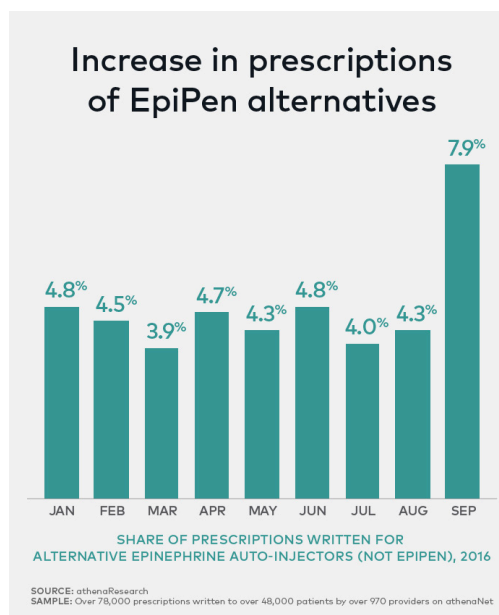
3. Many uninsured patients get free primary care

There are a host of reasons why people remain uninsured, from the absence of Medicaid expansion in many states to a poor understanding of subsidies and exchanges. But athenahealth's research into the effects of the Affordable Care Act uncovered another factor that may contribute, for some, to the decision to stay uninsured: They already have access to free or low-cost primary care.



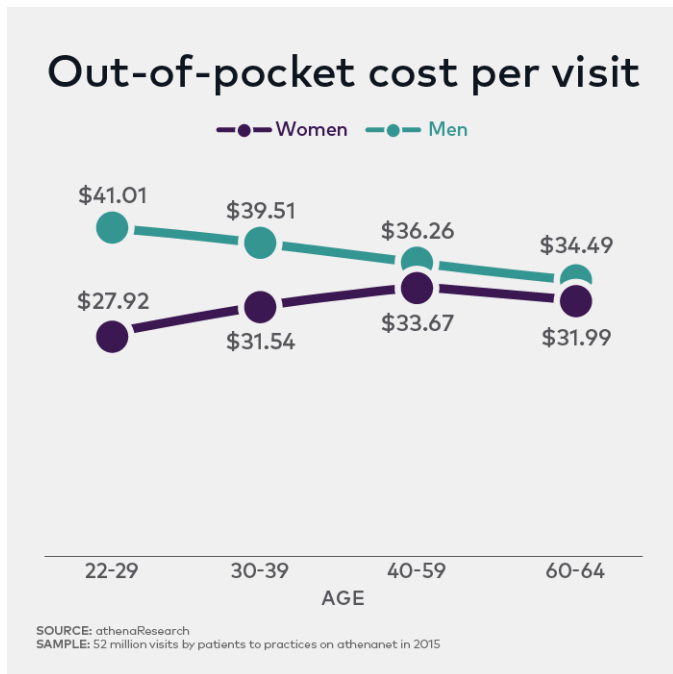
4. Are alternatives to EpiPen on the rise?

It was one of the biggest pharma stories of the year: Consumers' and lawmakers' fury over news that Mylan had raised EpiPen prices dramatically since it purchased the drug in 2007. But has public outcry damaged the company's brand? Data from 78,000 prescriptions to more than 48,000 patients found that, a month after Mylan's price hikes drew headlines, physicians were prescribing alternatives to EpiPen at a higher rate than ever.



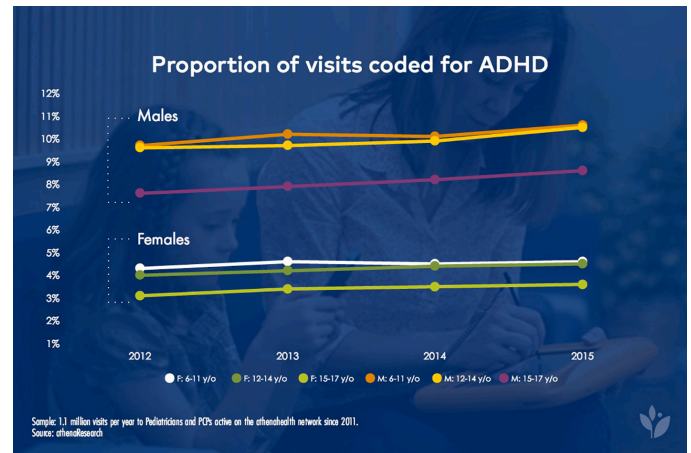
5. Men pay more than women out-of-pocket

With the rise of high-deductible health plans, patients are paying far more out-of-pocket for their healthcare – and driving the push for greater price transparency. But do all patients bear the costs equally? An analysis of 52 million patient visits found that, for most of their lives, men pay more out-of-pocket than women do, likely owing to differences in insurance coverage and patient behavior.



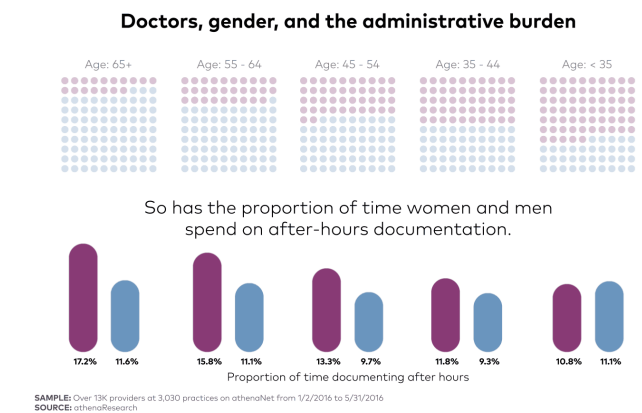
6. Doctors are spending more time treating ADHD

A study of 11 million patient visits to primary care providers found that, over the past four years, physicians have been spending more time treating ADHD – and ADHD treatment accounts for more than 10 percent of visits with 6-to-14-year-old boys. This infographic breaks down the patient demographics of ADHD visits in the first half of 2016.



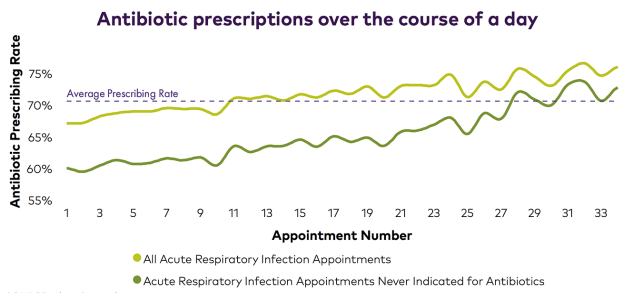
7. Women doctors do more paperwork after-hours

The proportion of paperwork that physicians do after-hours depends, in part, on their gender and age. A study of more than 13,000 providers showed that men and women fresh out of medical school do nearly equal amounts of after-hours documentation. But among older doctors, women are far more likely to finish their paperwork late at night. Will younger doctors eventually face the same disparity?



8. Antibiotics are prescribed more in the afternoon

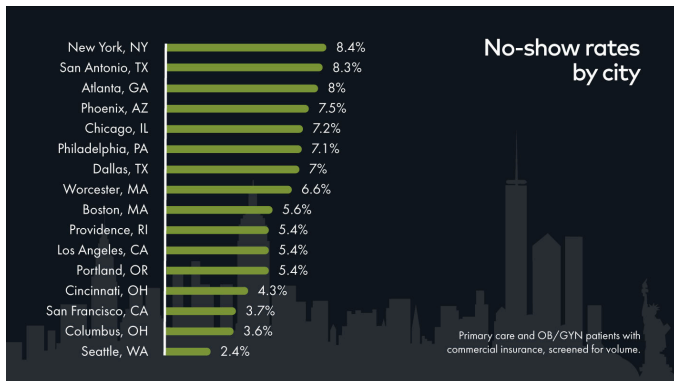
Over the course of the day, humans gradually put less time and energy toward making decisions. Providers aren't immune – especially as their days fill up with more appointments. A study of 175,000 patient visits found that doctors were 13 percent more likely to prescribe an antibiotic in the 13th appointment of a day, and 19 percent more likely by the 24th appointment. We asked experts for their perspective on decision fatigue's role in clinical care.



SOURCE: athenaResearch

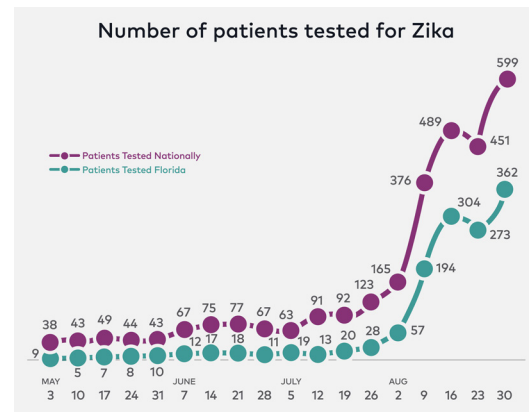
9. Where do the no-shows live?

Around the country, providers struggle when patients don't show up for appointments. An examination of 54.3 million patient visits revealed which cities see the most no-shows, broke down no-show rates by specialty and insurance type, and revealed which notification tactics work best to bring patients in. Can you guess which city has the highest no-show rate?



10. The state of Zika testing

The first four locally transmitted cases of Zika in Florida were confirmed on July 29, 2016. Over the height of the spring and summer, athenaInsight tracked the number of Zika tests ordered, in Florida and nationwide, to shed light on the demographic trends behind the scare. And in a case of "network medicine" in action, Borinquen Health Care Center of Miami Dade, a federally qualified health center, reached out to more than 1,400 men and women who fell into at-risk age groups and may have needed testing.



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