

MEMORANDUM

TO: Colorado Medical Society
FR: Mr. Benjamin Kupersmit
RE: 2015 Member Survey – Organizational Positioning
DT: June 1, 2015

Introduction

Kupersmit Research is pleased to present this overview of the results of the 2015 CMS Organizational Positioning Survey. The survey probed:

- Satisfaction with CMS generally
- Impressions of CMS publications/events
- Engagement with CMS (current and desired)
- Satisfaction with the governance structure of CMS

We had a total of 520 CMS physicians complete the survey, resulting in a margin of error of $\pm 4.3\%$ at the 95% confidence level. Where available, we present trends versus historical data, including the 2008, 2010 and 2013 membership surveys.

Overview

Highlights from the survey:

- The 2015 CMS Survey reveals generally stable satisfaction with CMS (on the heels of some softening over the years).
 - We see slightly lower ‘satisfaction’ and slightly higher ‘recommendation’ scores, with both just at the margin of error versus our 2013 member survey.
 - However, we have seen declines on two key metrics: ‘communicating well with members’ and ‘providing opportunities for members to give input,’ while other attribute ratings have remained stable or improved slightly.
- Members continue to rely on CMS for advocacy and information, and continue to rely primarily on Colorado Medicine and ASAP as their main sources of information.
- A core of members (18%) view themselves as being either “very active” or “active” in terms of their engagement with CMS, 21% feel they are “involved” and a majority (61%) say they are just “minimally involved.”
 - Looking to the future, 23% want to be “very active” or “active,” 30% want to be “involved” and 35% want to be “minimally involved” (and 11% are unsure).
- CMS members want the organization to become more balanced in its approach to governance in general philosophy.
 - Specifically, 53% approve and 8% disapprove of the current governance structure; 52% approve and 15% disapprove of opening elections for President-elect and AMA delegates to all members via electronic/US mail, and similar percentages approve (54%-13%) of opening elections for Board of Directors to all members.
 - Support is much narrower (32%-27%) for eliminating the House of Delegates.

Satisfaction with CMS

- General satisfaction scores have declined slightly (right at the margin of error), with 52% saying they are either “extremely” or “very” satisfied as members of CMS, and an additional 40% “somewhat” satisfied. 7% are “not very” or “not at all” satisfied.
 - In 2008, 61% were generally satisfied, and in 2010, 56% said as such. The percent who are not satisfied has stayed consistent (at 7%) across the 2008-2010-2015 surveys.
 - We see key differences among subgroups:
 - Satisfaction is about even among PCPs and specialists (historically, PCPs have given consistently higher satisfaction scores).
 - Satisfaction is highest among sole practitioners, employees at Hospitals/IHDS/Academic/Government (H/I/A/G) institutions, and among retired physicians; scores are relatively lower among owner/partners and employees in private practice.
 - Scores increase along with the age of respondents (rising from 44% among those 30-45 (similar to the 42% among residents/med students) up to 61% among those who are 65 or older.

- At the same time, recommendation scores have risen slightly (also right at the margin of error), with 57% “certain” or “very likely” to recommend (though they have certainly not climbed back to the 2008-2010 level). One-third (31%) say “somewhat” likely, and 11% are not likely to recommend.
 - The percentage that would recommend stood as high as 72% in 2008 and 65% in 2010; it dropped to 53% in 2013, and has rebounded slightly to 57% in 2015.
 - The percentage who would not recommend reached a high of 15% in 2013, and has dropped to 11% (in line with 2010 levels).

Table 1: How likely would you be to recommend to a colleague that they become a member of the Colorado Medical Society?				
	<u>2008</u>	<u>2010</u>	<u>2013</u>	<u>2015</u>
Certain	28%	27%	20%	20%
Very likely	44	38	33	37
Somewhat likely	21	25	31	31
Not very likely	5	8	13	9
Not at all likely	2	2	2	2

- Key trends from the cross-tabs include:
 - Likelihood to recommend is quite similar among PCPs and specialists (historically, PCPs had given higher scores).
 - Scores are highest among sole practitioners, H/I/A/G physicians and those who are retired.
 - Likelihood to recommend CMS rises with age: among physicians age 30-55, 52% would recommend, while among those 56-64, 58% would recommend, and among those 65+ fully 78% would recommend.

- As Table 2 below indicates, members continue to rely on the Colorado Medical Society mainly for advocacy and information, with social networking, community involvement and professional development ranking near 20%. Endorsed vendor discount programs and practice management score an 8%.

Table 2: For which of the following do you rely on the Colorado Medical Society? Please select all that apply.			
	<u>2008</u>	<u>2013</u>	<u>2015</u>
Advocacy	77%	70%	74%
Information and communication	68	62	64
Community involvement	26	20	22
Professional development	14	13	19
Endorsed vendor discount programs	13	9	8
None of the above	9	14	12

- Subgroup analysis indicates key differences among CMS member physicians:
 - While all physicians rely on CMS for advocacy, scores are highest among H/I/A/G employees, owner/partners in private practice and sole practitioners.
 - Similarly, while all physicians rely on CMS for information, we see particularly high scores among retired physicians, sole practitioners and H/I/A/G physicians.
 - Sole practitioners, retired physicians and residents/med students are most likely to say they rely on CMS for social and networking opportunities.
 - Retired and H/I/A/G physicians are more interested in community involvement.
 - Residents/med students are more interested in professional development than others.
 - Sole practitioners are most likely to cite practice management and vendor discounts.

- As Tables 3a and 3b indicate, CMS scores strongly overall on ‘communicating well with members’ and ‘giving members a chance to provide input,’ but these scores have declined over time. Scores are softer overall for ‘positive impact on my career’ and ‘reflects my priorities,’ but these scores are improving somewhat versus the previous survey.
 - Currently, 54% give CMS top scores regarding communication; these ratings had been as high as 67% in the 2010 survey.
 - Similarly, 44% give CMS high scores regarding input and suggestions, which has dropped from a high of 58% in the 2008 survey.
 - While still down over the long-term, there has been slight upward movement on ‘positively impacting career’ (currently at 34%) and ‘reflecting priorities’ (31%).

<i>Table 3a: Does this apply 100%, very strongly, somewhat, not very much or not at all to the Colorado Medical Society? 2015 Results</i>	<i>100%</i>	<i>Very</i>	<i>Somewhat</i>	<i>Not very</i>	<i>Not at all</i>	<i>Not sure</i>
Communicates well with membership on the issues facing the medical profession	8%	46	34	5	1	5
Gives members like me a chance to provide my input and suggestions	10%	34	33	11	3	10
Has a positive impact on my career as a physician in Colorado	7%	27	40	14	4	8
Reflects my priorities	3%	28	44	14	3	9

<i>Table 8b: Tracking “Applies 100%” + “Applies Very Strongly”</i>	2008	2010	2013	2015
Communicates well with membership on issues facing medical profession	-	67%	57%	54%
Gives members like me a chance to provide my input and suggestions	58	54	50	44
Has a positive impact on my career as a physician in Colorado	44	39	30	34
Reflects my priorities	42	39	26	31

- Subgroup analysis indicates only slight differences among members on ratings regarding communication, though general trends suggest that older physicians tend to give higher scores than younger physicians (and residents/med students are more likely to say they are “unsure”).
 - We see that owner/partners and employees in private practice give soft scores regarding ‘chance to provide input,’ ‘positive impact on my career’ and ‘reflects my priorities,’ with H/I/A/G physicians somewhat more positive and sole practitioners the most positive.

Information

- As Tables 4a and 4b below indicate, *Colorado Medicine*, the CMS magazine, continues to receive positive reviews, with 65% of members saying they read it and it is “very” or “somewhat” worthwhile, and 11% who do not find it worthwhile (and another 25% saying they do not access it). Scores have declined slightly over time, and are down (but within the margin of error) in this latest survey.
- Two-thirds read ASAP, the CMS e-mail newsletter, and 57% find it worthwhile to do so (while 8% say it is not worthwhile); another 35% does not access ASAP. Scores are up somewhat versus the 2008 survey (but down from a particularly high 2010 survey).
- Considerably fewer members access CMS’s website, with just 26% saying they do so (and the bulk of them finding it at least “somewhat” worth it). Overall, percentages have stabilized somewhat after dropping considerably from 2008-2010 into 2013.
- One-quarter (27%) of members say they attend the annual meeting and it is worthwhile, while 3% say it is not (and 71% say they have not attended). Scores have rebounded somewhat since the 2013 survey.
- Similarly, 20% say the Spring Conference is worthwhile, and 3% say it is not (while 77% have not attended).

<i>Table 4a: For each of following, do you read/access/attend? If yes, is it interesting and worth your time to do so? 2015 Results</i>	Read, very worth it	Somewhat worth it	Not very	Not at all	Do not access
Colorado Medicine, the Colorado Medical Society magazine	18%	47	10	1	25
ASAP, the CMS email newsletter	17%	40	8	0	35
The Colorado Medical Society website	6%	25	3	0	65
The Colorado Medical Society annual meeting	15%	12	2	1	71
The CMS Spring Conference*	11%	9	2	1	77

*Asked for first time

<i>Table 4b: Tracking “Very” + “Somewhat”</i>	2008	2010	2013	2015
Colorado Medicine, CMS magazine	71%	79%	68%	65%
ASAP	51	75	N/A	57
The Colorado Medical Society website	35	44	24	28
The Colorado Medical Society annual meeting	31	36	20	27

- Readership of CMS publications varies by key subgroups:
 - Retired physicians, sole-practitioners and H/I/A/G physicians, as well as those over age 55, give the highest ratings to *Colorado Medicine* (with upwards of 75% saying it is worthwhile to read).
 - ASAP gets similarly higher scores from sole practitioners, retired physicians and those in H/I/A/G settings, and also gets somewhat higher marks from those over age 55.
 - Very few residents/med students report that they read *Colorado Medicine*, but readership of ASAP is considerably higher among them.

Engagement

Introduction to Engagement Section

“There are different ways that physicians engage the various organizations in which they have membership. Broadly speaking, these are:

- *Very active*, as a leader in the organization
- *Active*, as members who attend events, read publications, give input on key issues and encourage others to take actions or engage, but would rather not take a leadership role in the organization
- *Involved*, as members who read publications, want to be educated and aware on key issues, and might attend an event or take an action (call a legislator, sign a petition) if a major issue came up that was relevant to them
- *Minimally involved*, as members who might occasionally browse publications or correspondence, but are unlikely to take actions or participate in in-person events”

- As Table 5 indicates, 18% of members describe their current level of engagement with CMS as “very active” or “active,” and 21% say they feel they are “involved.” A majority (60%) feels they are “minimally involved.”
 - Looking to the future, we see no change in the percent who want to be “very active,” but an increase of 5 points in the percent who want to be “active” and a jump of 9 points in the percent who want to be “involved.” One-third (35%) want to remain “minimally involved,” and we see a 9 point increase in the percent who say “not sure.”

<i>Table 5: Current vs. Desired Engagement</i>	Very active	Active	Involved	Minimally involved	Not sure
Describe your current engagement with CMS	7%	11	21	60	2
Preferred engagement for next 3-5 years	7%	16	30	35	11

- Subgroup analysis indicates:
 - The percent who are currently “minimally involved” drops with age: among those 30-55, 66% say as such, versus 55% among those 46-55 and 49% among those 65+.
 - Owner/partners in private practice (69%), those employed in private practice (67%) and residents/med students (72%) are most likely to say “minimally involved.”
 - Sole practitioners are more likely to say they are “very active” or “active” (29%), followed by retired physicians (27%) and H/I/A/G/ physicians (21%).

- We examined the difference between current levels of engagement and desired engagement:
 - We see the biggest drop in “minimally involved” among owner/partners in practice, followed by employees in practice and H/I/A/G physicians (with drops of 20-30 percentage points); for contrast, retired physicians only dropped 2 percentage points, from 43% currently saying they are “minimally involved to 41% saying they want to be “minimally involved” in the future.
 - We see the largest drop in “minimally involved” among younger physicians (30-55), with physicians 55-64 close behind.
- As Table 6 indicates, roughly one-quarter are “certain” or “very likely” to participate in a range of ideas from the survey, with another 20%-30% saying they are “50/50” in terms of their interest.
 - The most popular ideas overall include public health campaigns, tools and resources to support physicians in their practices, annual grass-roots listening sessions and a physician leadership program.
 - Other programs with somewhat softer levels of interest include tools and resources for employed physicians, a formal mentoring program for younger physicians and opportunities for social gatherings.

<i>Table 6: The following are some ideas being considered by CMS. How likely would you be to participate in or utilize each?</i>	Certain	Very likely	50/50	Not that likely	Not at all likely
Visible public health campaigns with ways for physicians to get involved to support community health	5%	23	33	23	12
Tools and resources to support physicians in managing their practices	4%	23	24	22	24
Annual local-grassroots listening sessions to gather physician feedback on specific issues that impact your community	3%	22	33	25	12
A leadership program where physician can learn the skills they need to become leaders in their profession and communities across the state	6%	18	27	29	18
Tools and resources aimed at helping employed physicians	4%	18	22	17	32
A formal mentoring program where more seasoned physicians mentor early career physicians	4%	14	27	28	22
More social gathering opportunities (golf outings, cycling groups, volunteer opportunities)	3%	10	28	29	27

“Not sure” response not shown

- Key trends from the cross-tabs emerge:
 - Public health campaigns are most popular (with higher “certain” + “very likely” scores) among H/I/A/G physicians, physicians age 30-45, and physicians who practice in a town/rural setting.
 - Annual grassroots sessions are most popular among sole practitioners, owner/partners in private practice and H/I/A/G physicians, and those in a town/rural setting.
 - Tools and resources for practice management are most popular among sole practitioners, owner/partners in private practice and residents/med students.
 - Physician leadership training is most popular among residents/med students, physicians age 30-55 and those in a town/rural setting.
 - Tools and resources for helping employed physicians are most popular among physicians employed in private practice and H/I/A/G physicians.
 - Both formal mentoring opportunities and social gathering opportunities are considerably more popular among residents/med students than others.

Governance

Introduction to Governance Section

These next few questions will ask you about CMS and the way it makes decisions as an organization (in terms of choosing the strategic direction of the organization, which issues to focus on, where/how to expend resources, etc.).

Broadly speaking, medical societies like CMS fall into roughly two categories:

- Top down: An elected leadership drives the organization’s agenda and focus, while members are educated and participate in a supportive role
- Grass-roots: Members participate in driving the organization’s agenda and focus, and are active in debating and choosing the direction of the organization

- Nearly one-half of members feel CMS is mostly a top down organization, and a solid majority would like to see the organization become more balanced in its overall governing philosophy/approach.
 - Currently, 48% feel CMS is either “totally” top down (10%) or “mostly” top down (38%), while 25% feel it is balanced, 4% feel it is “mostly” grass roots and 23% are unsure.
 - Thinking about the future, 12% want CMS to be “mostly” top down, 59% want to see CMS be balanced, and 17% want it to be grass roots either “mostly” (14%) or “totally” (3%).

<i>Table 7: Describe CMS vs. Prefer for CMS</i>	Totally top down	Mostly top down	Balanced, 50/50	Mostly grass roots	Totally grass roots	Not sure
Best describes CMS currently?	10	38	25	4	0	23
Prefer for the future of CMS?	0	12	59	14	3	12

- Of the 520 respondents to the survey, 95 are currently in some leadership role in CMS (on the Board of Directors, in the House of Delegates, serving on a committee).
 - Among those in a leadership role, 67% feel CMS is currently a top-down organization, while 29% feel it is balanced; among those not in leadership, 45% say top down, 24% say balanced and 27% say they are unsure.
 - Looking to the future, those in a leadership role want to see CMS become balanced (68%), while 16% want CMS to be top down and 16% want CMS to be a grass roots organization; among those who are not in a leadership role, 58% want to see CMS become balanced, while 11% want it to be top down and 18% want it to be grassroots (and 14% are unsure).
 - Subgroups most likely to say they want CMS to be “balanced” in the future include H/I/A/G physicians and those who are employed in private practice.

- About one-half of CMS members feels familiar with the way CMS is governed by its Board of Directors and House of Delegates, including 20% who are “very” familiar and 28% who are “a bit” familiar. Another 52% say they are not familiar with the current governance structure of CMS.
- Among those in a leadership role, 96% are familiar, including 71% who are “very” familiar; among those not in a leadership role, 38% are familiar, including 9% who are “very” familiar.

Description of Current Governance

Currently, CMS is governed by a House of Delegates with supreme policy-making authority whose power is delegated between annual meetings to a Board of Directors responsible for ongoing management of Society affairs. Delegates are appointed by component and specialty societies according to CMS membership criteria established in the CMS bylaws. Members of the Board of Directors are nominated by the component societies and voted in by the Board of Directors and House of Delegates. Delegates meet once per year to approve Board decisions made throughout the year and to consider other policy positions for the Society.

- After seeing this information, 53% of CMS members approve, and 8% disapprove (with 23% saying “neither” and 17% saying “not sure”) of the current governance structure.
 - Among those in a leadership role, 69% approve, including 34% who “strongly” approve and 35% who “somewhat” approve, while 13% disapprove (with 4% “strongly” and 9% “somewhat” disapproving).
- As Table 8 below indicates, a majority of CMS members approve of ‘opening elections for CMS President and AMA delegates to all CMS members who respond electronically and/or by US mail,’ with 52% approving and 15% disapproving (including 20% who “strongly” approve and 3% who “strongly” disapprove), while 34% say “neither” or “not sure.”
 - Among those in a leadership role, 55% approve (including 26% who “strongly” approve) and 32% disapprove (including 9% who “strongly” disapprove); among not in a leadership role, 52% approve (with 19% “strongly”) and 11% disapprove (with 2% “strongly”).

- Similarly, 54% approve of ‘opening elections for Board of Directors to all CMS members who respond electronically and/or by US mail,’ (including 20% who “strongly” approve), while 13% disapprove (including 2% who “strongly” disapprove) and 34% say “neither” or “not sure.”
 - Among those in a leadership role, 51% approve (with 20% “strongly”) and 27% disapprove (with 8% “strongly”); among those who are not in a leadership role, 55% approve (with 20% “strongly”) and 10% disapprove (with 1% “strongly”).
- CMS members are split on the question of replacing the House of Delegates with a ‘structure where individual members would have significant input’ instead, with 32% approving of such a change (including 9% “strongly” approving) and 27% disapproving (including 9% “strongly” disapproving. Another 40% say “neither” or “not sure.”
 - Among those in a leadership role, 41% approve (including 15% who “strongly” approve) and 42% disapprove (with 20% “strongly”); among those not in a leadership role, 31% approve (with 8% “strongly”) and 25% disapprove (including 7% “strongly”).

<i>Table 8: Some state medical societies are reforming their governance structure in various ways. Do you approve or disapprove?</i>	Strongly approve	Somewhat approve	Neither/not sure	Somewhat disapprove	Strongly disapprove
Opening elections for CMS President-elect and AMA Delegates to all CMS members electronically and/or by US mail instead of by the House of Delegates at the annual meeting as is the current practice	20%	32	34	12	3
Opening elections for the Board of Directors to all CMS members who respond electronically and/or by US mail instead of by the House of Delegates at the annual meeting as is the current practice	20%	34	34	11	2
Eliminating the House of Delegates in favor of a governance structure where individual members would have significant input into the strategic direction and priorities of CMS (through regular, online/in-person forums and elections open to interested members) and an empowered Board of Directors	9%	23	40	18	9

Conclusions

The survey suggests that CMS ratings have begun to stabilize, with the exception of declining ratings on ‘communicating well with members’ and ‘giving members a chance to provide input.’ Given that advocacy is at the top of members’ priorities for CMS (particularly for physicians in active practice), it is critical that you more clearly highlight the way CMS policies, legislative efforts and its programs/ offerings for members directly impact physicians’ careers and day-to-day practice across Colorado.

The ongoing challenge of maintaining relevance continues: the survey reminds us again that it is critical for CMS to speak via the right channel at the right time with the right type of information/ message to penetrate the clutter that surrounds physicians. The goal is clear: let them know you are standing up for them.

Indeed, it seems we are in the “new normal” perhaps, after a period of intense change. As we just saw in the ‘Barriers to Care’ survey, the escalating intrusion of cost and insurance into the patient-doctor relationship is having a deep effect on physician satisfaction and their ability to care for their patients; they need to know you are fighting and advocating for them to remove these barriers and maintain the integrity of the physician-patient relationship.

The survey also indicates that members are not currently as involved with CMS as they would like to be, but that their interest in engaging through specific activities tends to be limited to a core of 15-20% of physicians (and mostly those later in their career). This is not surprising, given the limited time physicians have and the numerous frustrations and barriers they face just in providing care to their patients; they key is finding the right touch points to communicate what you are doing on their behalf that is relevant to them, and giving them opportunities to be as involved as they can.

Of course, membership as a whole will be more involved in times of significant challenges (i.e., when liability or health reform are being considered by legislators). The key is creating a connection in these times of crisis that a) shows even the most casual members that CMS has made a significant difference on their behalf, and b) motivates those inclined to participation to perhaps give input and be heard, or participate in person, or ultimately, consider becoming a part of CMS leadership.

It is clear that CMS faces an ongoing challenge (like many membership organizations today) in engaging the next generation of its members. In our view, you need to show younger physicians who are ‘minimally involved’ that they can engage in a way that is convenient and fits their lifestyle; show them CMS is savvy and can deliver information how they want it/when they want it, and they (in turn) can engage CMS as much or as little as they want and still make a difference for themselves and their profession.

At the same time, CMS should continue to show that you value and want to engage older CMS physicians (particularly those approaching retirement). Every organization has a core of “very active” participants, often the most seasoned members, and CMS is no different. As you move to reposition the organization and adapt for the future, it will be critical to continue to show these physicians that you value their participation and their experience, and will continue to fight so their remaining years practicing medicine can be positive – and not a constantly frustrating fight to care for their patients despite hassles and barriers to effective care.

Methodology

This survey was administered online by the Colorado Medical Society. The survey was in the field from April 3-May 19, 2015. A total of 520 Colorado Medical Society members (including med students and physicians) responded to the survey, for a margin of error of $\pm 4.3\%$ at the 95% confidence level.