What Most Valuable Care Providers Are Saying

What the Providers of America’s Most Valuable Care Are Saying About How They Provide High-Value Care to Their Patients

**Banner Health Clinic Internal Medicine – Phoenix, AZ**
“When addressing health, wellness or a particular condition with our patients, I think it’s important for them to understand in plain, clear English what something is, what it means to them, why we need to treat it, and what will happen if we don’t. It’s important that we spend the necessary time and help our patients feel like they have the resources they need to successfully manage their medical issue. Patients who are better informed about their chronic health condition will experience better outcomes clinically.” —Lurlyn Pero-Anderson, MD

**Baptist Medical Group, Memphis Primary Care – Memphis, TN**
“Our practice is committed to being responsive to patients, not only to their health, but to any concern or question that may arise. We find that, if you take the time to listen to your patients and develop relationships with them, they are more apt to follow your advice, which leads to better health outcomes and less unnecessary testing. We always look at ways to improve our practice to better accommodate the patient’s needs.” —Freddie Everson, MD

**Family Physicians Group – Kissimmee, FL**
“Our multi-disciplinary team approach allows the physicians to focus on what they were trained to do—patient care. Having sub-specialists come to the office is a huge help, and the need for specialists who understand and share your vision for patient-centered care is important. Surgery preparation happens in the office, which includes blood work and EKGs, for example. We also prepare patients emotionally and socially for what to expect after surgery and how much time to take off. Our doctors go to the hospital when their patients have been admitted. It’s not just surgery and medicine that get patients well. It’s everything that goes on around the patient to support him or her. Quality healthcare is about looking at the whole patient—medical, social, emotional and financial.”
—Nayana Vyas, MD

**Florida Medical Clinic Internal Medicine – Zephyrhills, FL**
“I always wanted the focus to be on value, not volume. When I first started the practice, I was so busy that I couldn’t spend quality time with my patients so I added an extender to increase my capacity. By focusing on the quality of the patient visit, as opposed to volume, we were able to develop a system that focused on comprehensive care of the whole patient. We took pains to know everything about every patient. Our patients appreciated the detailed approach and rewarded us with loyalty. As a rule, we don’t take on more patients than we can handle just for the sake of growing our practice. Instead, we take care of the patients we have really well. That is our philosophy.” —Chandresh Saraiya, MD

**Northwest Family Physicians – Crystal, MN**
“Providing high-quality care is the equal responsibility of everyone in our office, from the front desk staff to the business office to the physicians. Our team approach helps us move patients through the office efficiently without compromising quality. Standing orders and protocols help us do this. Our physicians are skilled in performing many procedures that may otherwise get referred out. By making quality care everyone’s job, our patients end up healthier and happier.” —James Welters, MD

**Ridgewood Med-Peds – Rochester, NY**
“We do the best we can to give the patient the best care possible, and that holds true even when we’re sending them somewhere else for that care. To achieve this, we work with a certain group of specialists, and provide them with complete information on the patient, often through our electronic health records. We include why he or she is coming to them and what our expectations are. By the time a referral reaches the specialist, we ensure he or she has all of the information they need to accurately and appropriately treat the patient.”
—John Chamberlain, MD

**St. Jude Heritage Medical Group – Yorba Linda, CA**
“Physicians and operations managers work together, which increases efficiency in patient care and clinical outcomes. For example, all of the primary care medical assistants were educated on clinical measures that are being looked at today—whether they be pay-for-performance or otherwise—to give context to certain procedures. Not only would they know how to examine a diabetic patient’s feet, but they would understand why this is important. This bottom-up approach has empowered staff to come up with their own ways to improve clinical outcomes. When the medical assistants felt more connected to what
“Each clinical measure meant, it gave them greater interest in improving those measures.” —Khaliq Siddiq, MD

**South Cove Community Health Center – Quincy, MA**

“Because we serve a non-English speaking Asian population, we provide our patients with culturally-focused care and help them navigate every aspect of their health care 24 hours a day, 7 days a week. We speak their languages and account for culturally sensitive issues, so we can quickly understand their health needs and assist them in getting the care they need. For example, if they need to go to the ED, we send records ahead of time and provide a translator. Our patients travel many miles for us because of the language, culture and quality of care they receive.” —Eugene Welch, Executive Director

**SureCare Medical Center – Springboro, OH**

“Having cross-trained staff helps us do a lot more for our patients and prevents referrals out. For example, fracture care and many dermatology procedures are done in-house. At least five of our providers are very comfortable with performing a lot of common dermatology procedures, and their staff are too. If a provider wants to do a procedure, he makes sure his medical assistant gets the training needed to do it. It allows us to refer patients to each other before having to refer out.” —Joe Garland, DO

**USAA Health Services – San Antonio, TX**

“Standing orders allow us to effectively treat our patients’ symptoms and get them back to work quickly. For example, if a patient comes in to the onsite health center with sinus symptoms, they could have allergies, but the symptoms may also meet the criteria for strep throat. There is a standing order in place to run a rapid strep test. If the test is positive, we can then get them in with a provider almost immediately. If the test is negative, our RNs educate them on how to manage their symptoms and encourage them to come back to the onsite health center if they don’t improve.” —Donna Garcia, NP

**Snapshots of Most Valuable Care Providers**

See healthcare providers in communities large and small who are consistently delivering better value: high-quality care at a lower-than-average total cost.

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