



# New Hampshire Medical Society

External Research Report Summary &  
Implications

Devine Marketing Group

June 23, 2011



# Background/Objectives

The New Hampshire Medical Society conducted research to help understand current brand perception and attitudes among four target groups:

- Current Members
- Former Members
- Prospective Members
- Other Healthcare Professionals, Legislators & Regulators

## **Objectives of Research:**

- The key objective is to understand NHMS's key branding variables among specified target audiences including:
  - Reasons for Joining/Not Joining/Leaving
  - Overall Satisfaction/Favorability
  - Perceived Value
  - Current Programs, Services & Activities Preference & Ranking
  - Key Benefits
  - Future Programs, Services & Activities Interest Level
- The research will help develop an effective brand strategy and communications platform for NHMS, as well as guide NHMS in future marketing efforts.



# Methodology

- The methodology utilized a web-based survey format to current, former and prospective members, and other healthcare & legislator/regulator professionals.
- The survey took place 5/12 - 6/14/2011.
- The survey was emailed to participants with a link directing them to the survey.
  - We sent out an initial request and 3 Reminder emails to help illicit a stronger response rate.
  - Surveys were sent out under Dr. William Kassler's signature.
- For those current members that we did not have an email address for, we sent a post card directing them to the web url to give them an opportunity to participate in the survey.
- Additionally, we populated the Other Healthcare professionals survey by asking the following associations to provide the survey link to their members:
  - NH's Medical Group Management Association (MGMA)
  - NH Hospital Association (NHHA) to send to the state's 26 hospital CEOs



# Response Rate

- A total of 3,449 survey participant requests were sent out with 737 responses received over the 3 week period
- Overall response rate was excellent at 21.4%
  - Other Healthcare/Legislators and Current Members with email addresses was a strong response rate with a 31.1% and 26.4%, respectively.

NHMS Survey Response Rate: 6/13/2011 12:24pm			
Survey	# of Responses	Sent	% Response Rate
Other Healthcare/Legislators	125	402	31.1%
Prospective Members	97	556	17.4%
Former Members	75	367	20.4%
Current Members Total	440	2124	20.7%
<b>Total</b>	<b>737</b>	<b>3449</b>	<b>21.4%</b>
Current Members with email	391	1481	26.4%
Current Members w/o email	49	643	7.6%



# Membership

## Key Findings/Implications

### Key Findings

- Most Current members have been with the Medical Society for a long time (11+ years) and join to be connected, informed and for the advocacy efforts— for both physicians and public health.
- Former members tend to leave the Medical Society within the first 5 years, primarily as they do not recognize the value and believe it is too expensive.
- Prospective members are unaware of the value, see it as expensive, and do not recognize the benefit of belonging beyond their Specialty Society membership.
- While Current members have a high renewal intent, conversion for Former and Prospective members is low.

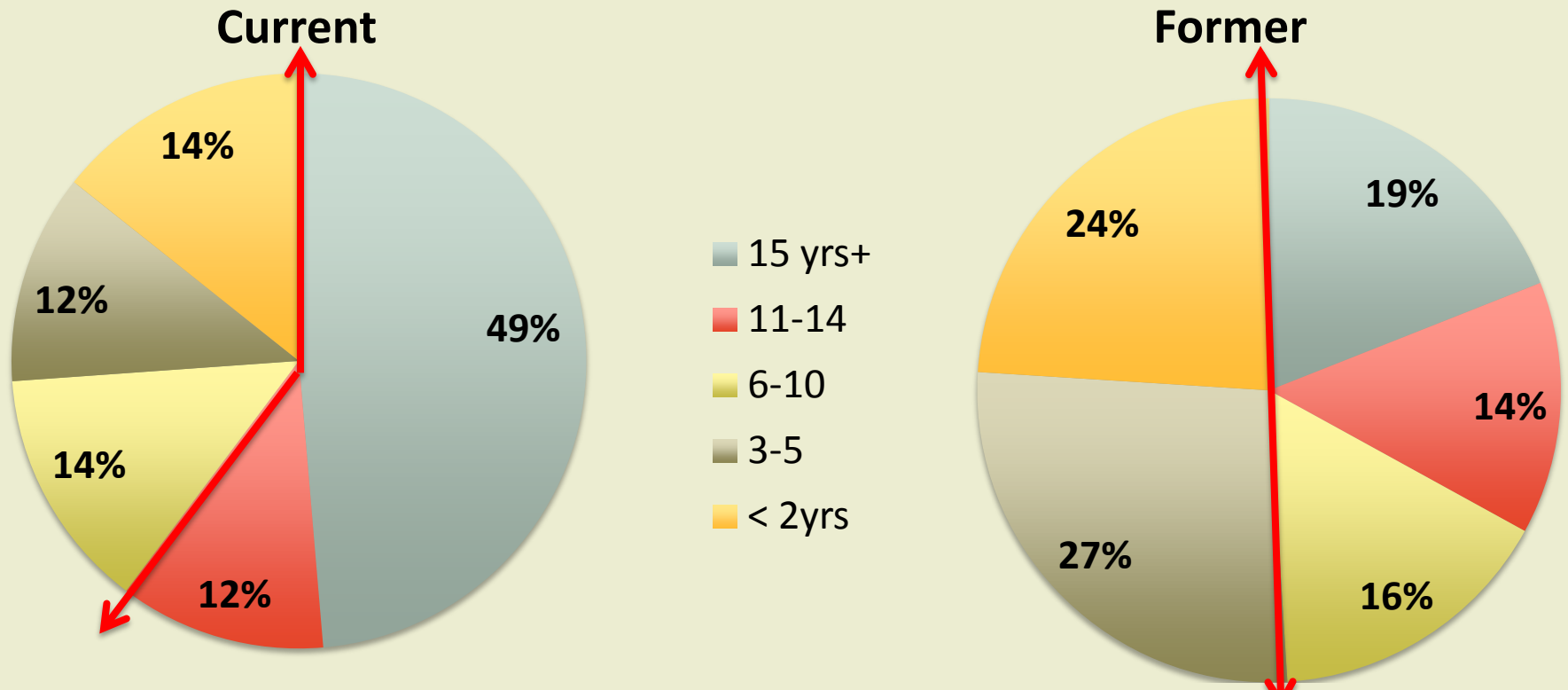
### Implications

- ✓ NHMS needs to better and more consistently demonstrate its value, in particular to prospective members and newer members (who appear to be more vulnerable in the first couple of years) to continue to grow and retain its membership base.
- ✓ NHMS must communicate competitive differential versus Specialty organizations to get incremental membership, in particular for Prospects.



# Membership Longevity

- Over 60% of Current Members have been members for 11+ years with *almost half* of members having membership for 15 or more years.
- Over half* of Former members retained membership for 5 years or less.

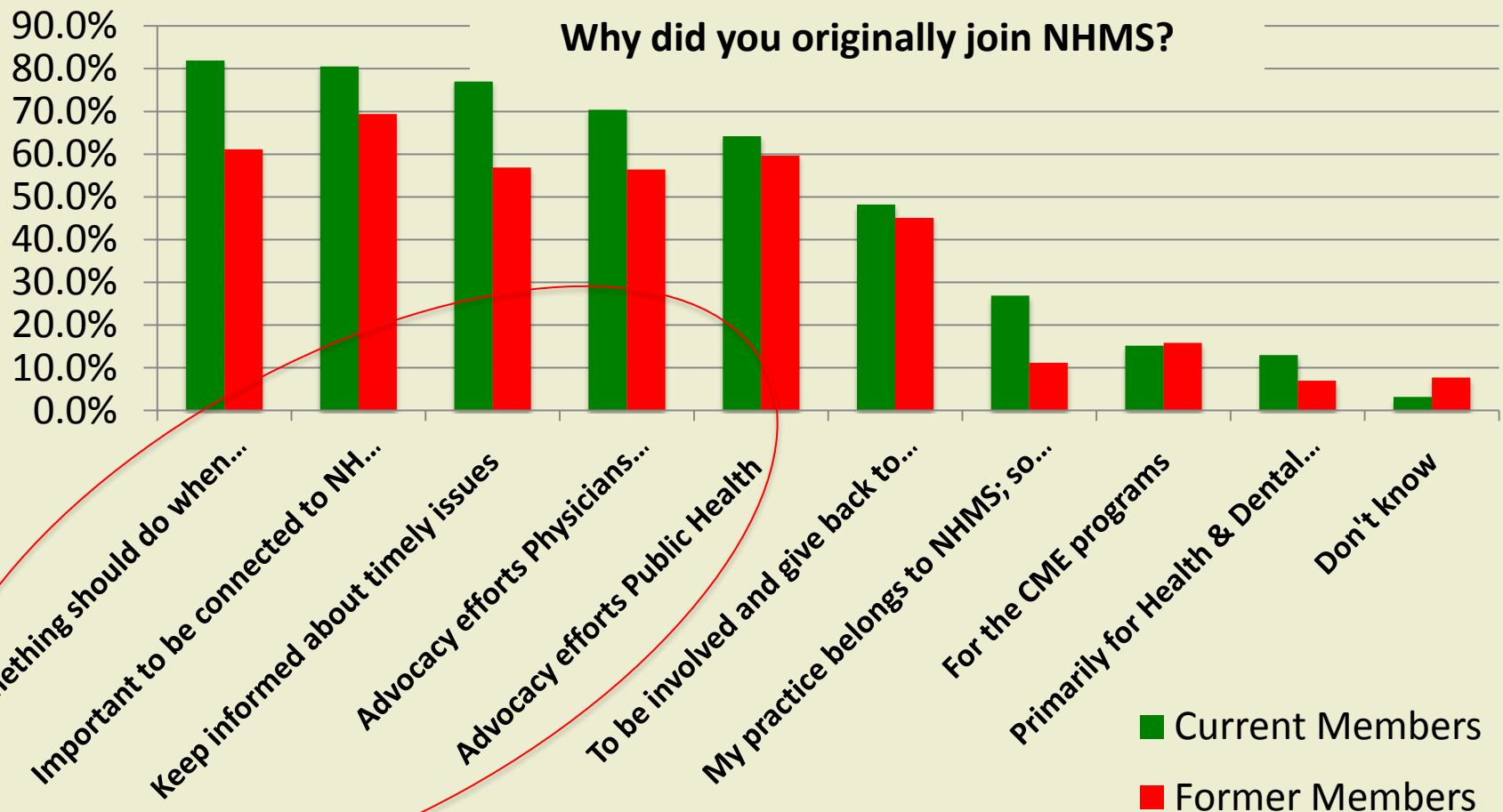


Approximately how long have you been/were you a member of NHMS?



# Reasons for Joining

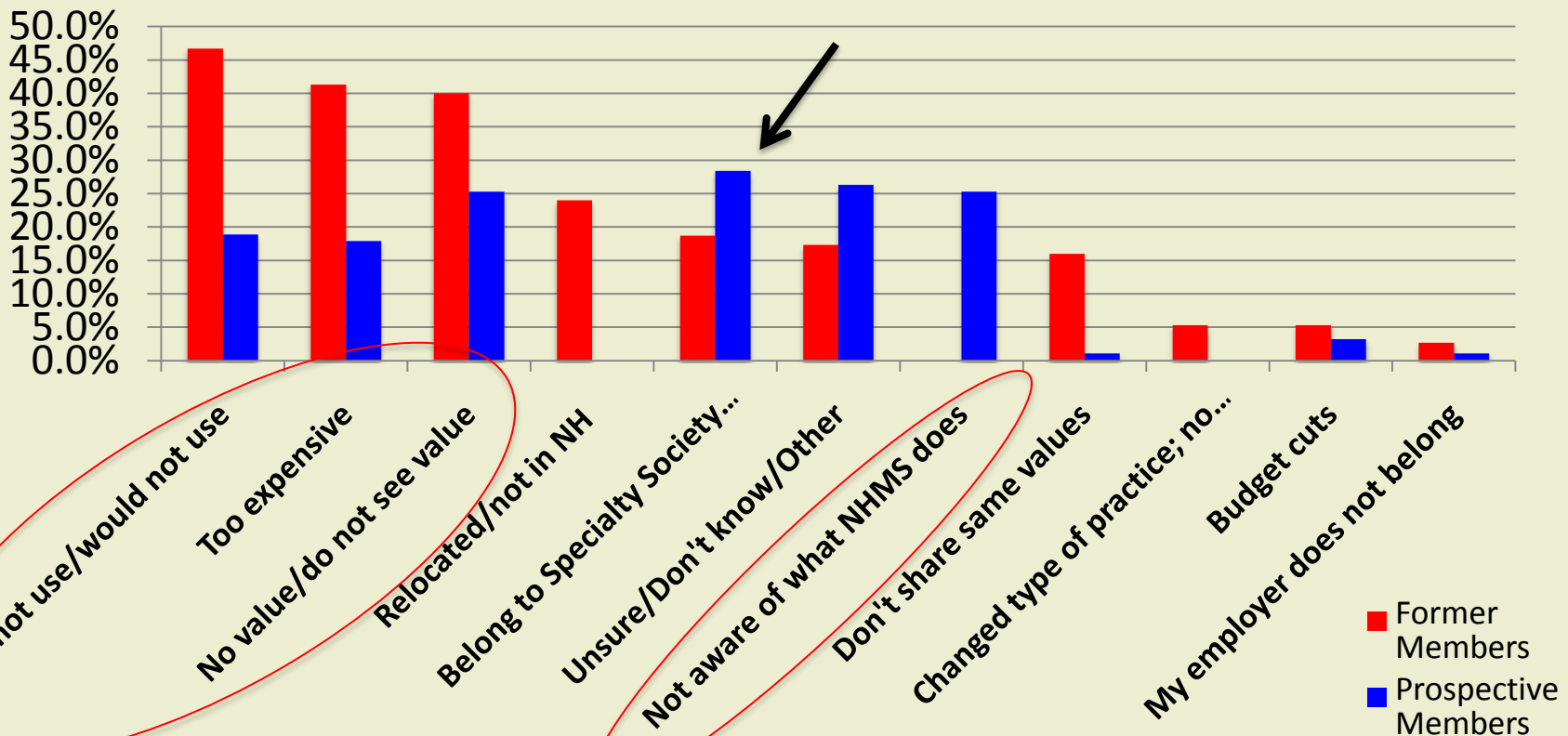
- Sense of belonging/connectivity, keeping informed and advocacy are top reasons why NHMS members –both current and former joined NHMS





# Reasons for Leaving/Not Joining

- Not understanding the value proposition or lack of awareness of what NHMS provides is driving the decision to leave/not join NHMS.
- Additionally, for Prospective members who belong to Specialty Society only, we will need to demonstrate incremental value for adding NHMS membership.



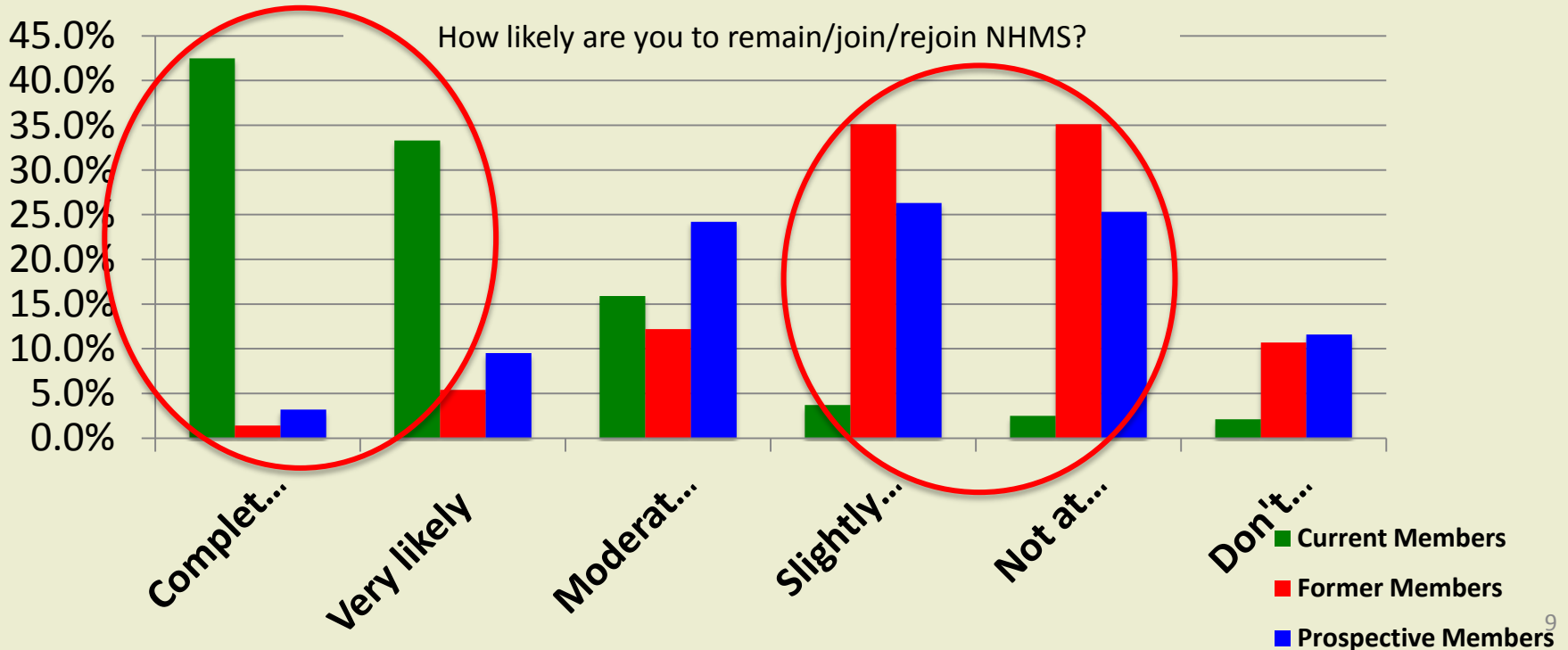




# Membership

## Remaining/Rejoining/Joining

- Our members provide a consistent and loyal membership base with over 70% completely/very likely to remain a member.
- Prospective members represent a better target opportunity to convert to membership than Former members.
  - It may be harder to regain Former members. 70.2% indicate not at all/slightly likely to rejoin.





# Annual Dues

## Key Findings/Implications

### Key Findings

- Annual dues are being paid or expected to be paid, for the most part, by the physicians themselves and NOT by their employers.

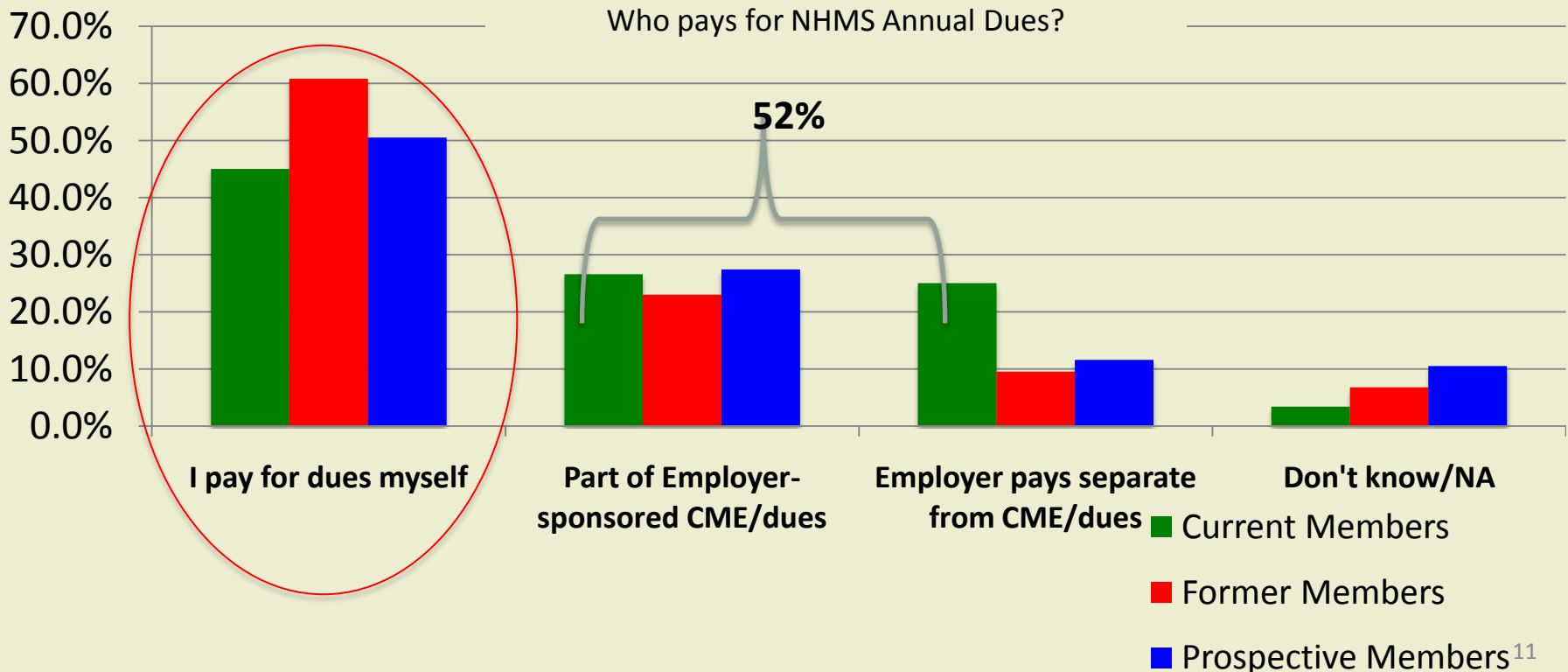
### Implications

- It is essential to demonstrate ROI to members, especially since it is coming out of their pockets.
- We need to communicate and better differentiate NHMS's role and competitive differentiation especially versus state Specialty societies. This is particularly true for Prospects.
- NHMS should evaluate annual due fees to be more attractive. Ideas to be considered:
  - Trial membership rate
  - Sliding scale (especially for those retired; perhaps for those only seeking advocacy benefits)
  - Discounts for paying multiple years at once (like MA Medical Society)
  - Being able to pay by Credit Card
  - Deeper incentives for joining when participating in CME programs



# Annual Dues Payment

- Former and Prospective members pay or expect to pay for the annual dues themselves, 61% and 51%, respectively. Therefore, ROI is important to demonstrate to them.
- Current member dues are split – either being paid for by their employer (52%) or they pay for the dues themselves (45%).





# Satisfaction/Favorability

## Key Findings/Implications

### Key Findings

- Overall, Current members and Other Healthcare Professionals, Legislators & Regulators are satisfied and favorable to NHMS.
- Driving this satisfaction and favorability are the staff at NHMS, advocacy efforts and the belief that NHMS is a well run, hard-working organization driven to help physicians and the betterment of public health.
- Former members and Prospective members' satisfaction/favorable ratings are lower, primarily due to not seeing the value for their money, belief of a lack of relevance for them and unaware of NHMS's benefits.
- While NHMS does not have an awareness issue as an organization, it does have a communications issue on its relevant benefits.

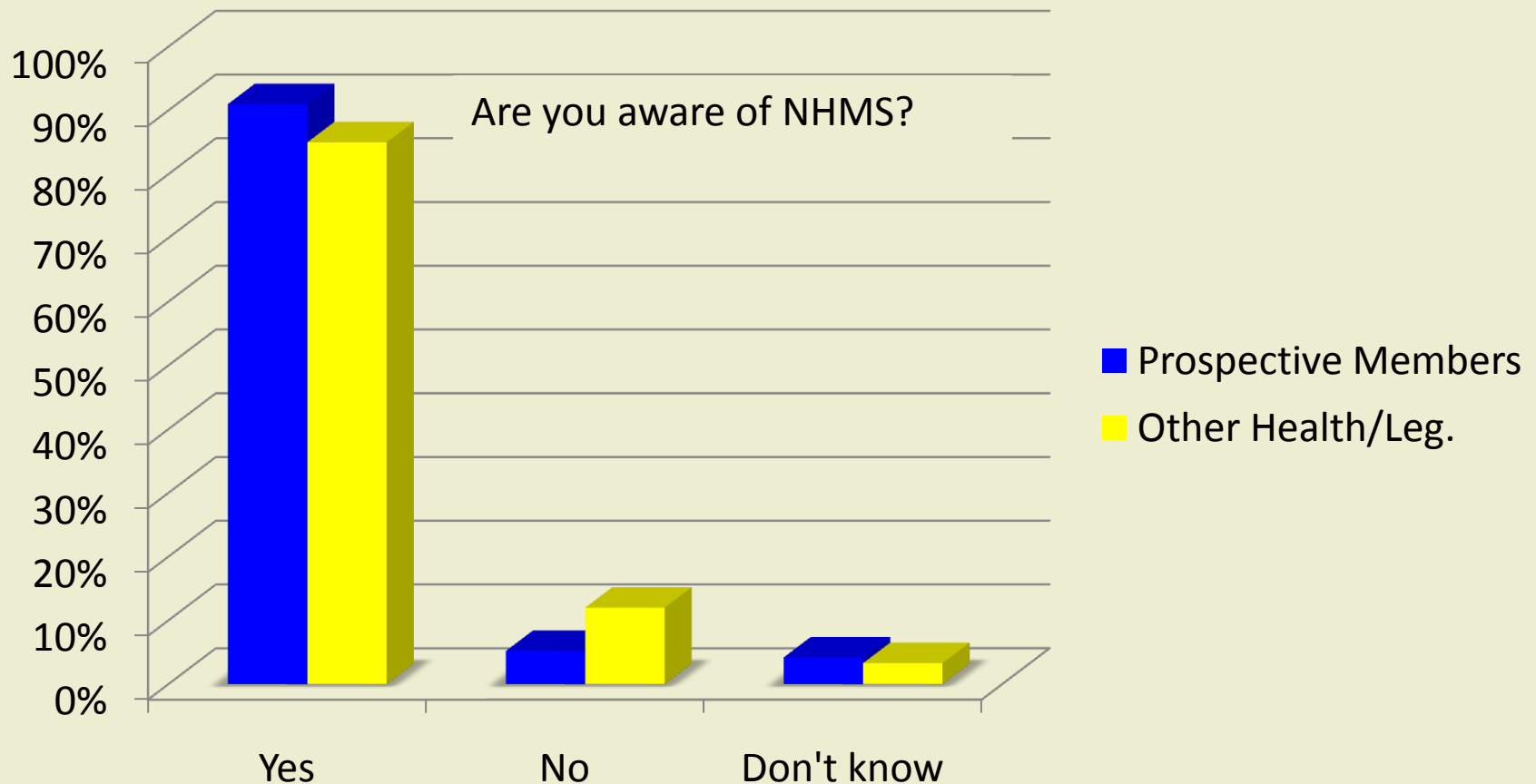
### Implications

- ✓ NHMS has a positive brand image upon which to grow.
- ✓ NHMS needs to better and more consistently demonstrate its value, in particular to prospective members and newer members (who appear to be most vulnerable in the first couple of years) to continue to grow and retain its membership base.
- ✓ An opportunity exists to better connect with relocating physicians to the state to make them feel welcome and aware of NHMS's benefits.



# Awareness Levels

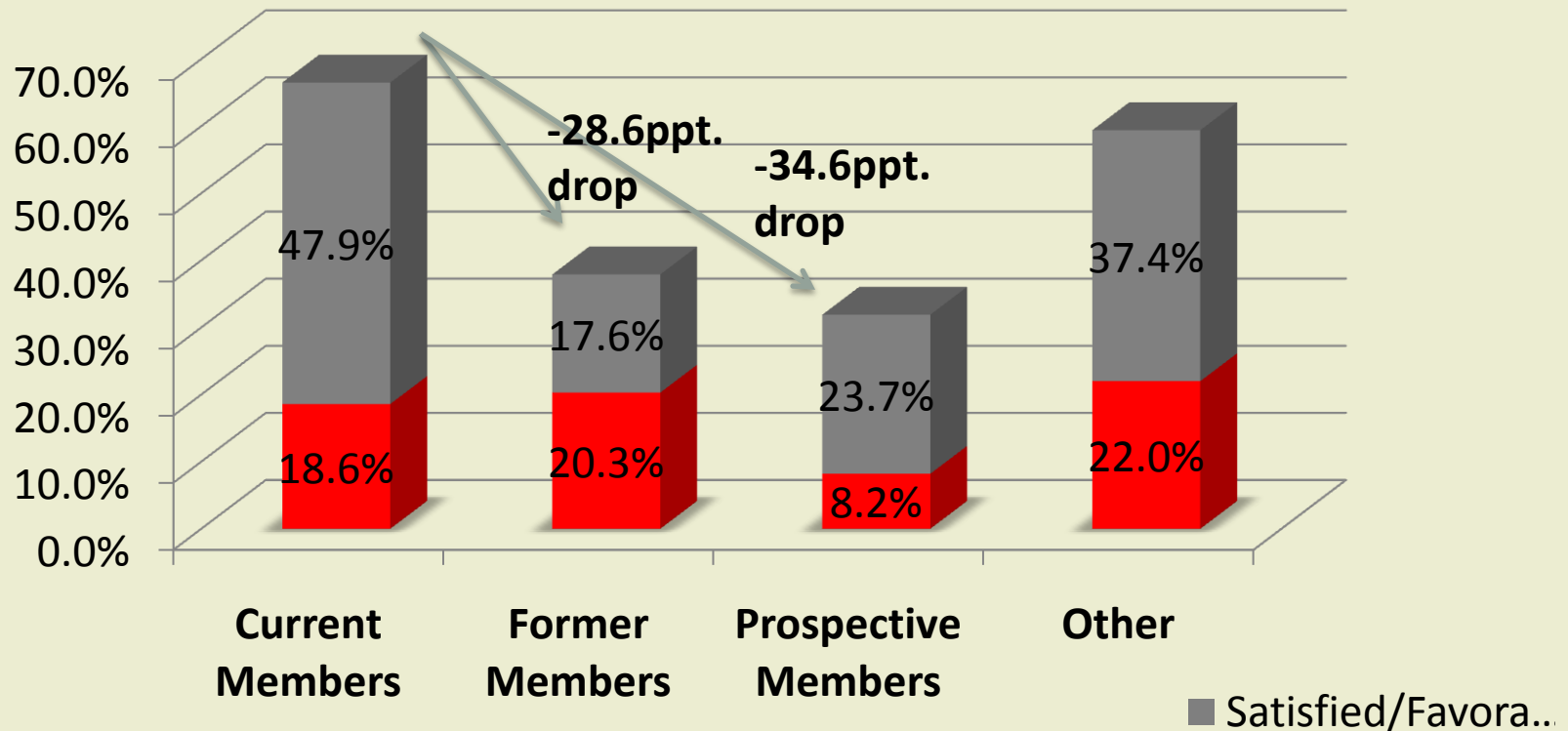
- NHMS does not have an awareness issue with *high* awareness levels among Prospects and Other Healthcare Professionals, Legislators & Regulators





# Satisfaction/Favorability

- Satisfaction and favorability is highest among Current Members and Other Healthcare Professionals/Legislators at 66.5% and 59.4%, respectively.
- Former members and prospective members have lower satisfaction/favorability levels at 37.9% and 31.9%, respectively.





# Satisfaction/Favorability Comments

- Current members are the strongest advocates for NHMS and feel that the organization is worthwhile, relevant and has helped them in their profession.
- We need to build on this positive base to translate it to Prospects and ensure newer members recognize NHMS's worth and value.

## Current Members

- *"A competent and active advocate for NH physicians"*
- *"Because the society serves a useful purpose for a physician who is practicing independently"*
- *"NHMS has helped me with my profession"*
- *"NHMS seems to be on top of all the important issues"*
- *"Because this organization is an inclusive org rather than an exclusive org. Efforts by this group are cohesive within the medical profession."*
- *"I feel it does a good job in helping increasingly busy physicians have some form of representation and fellowship."*



# Satisfaction/Favorability Comments

- Legislators especially appreciate NHMS's value and believe they do a good job advocating for physicians.

## Other Healthcare Professionals, Legislators & Regulators

- *“Bi-State has had a long-standing relationship with NHMS. We appreciate the willingness of NHMS staff to work together on issues of joint importance and the fact that NHMS staff do not hesitate to reach out on topics of mutual interest.”*
- *“They do a tremendous job lobbying for physicians, however physicians just don't seem as involved with the NHMS like they were 20+ years ago.”*
- *“NHMS does an excellent job of representing its members and working with colleagues in the health care field on advocacy matters. I highly value and appreciate their efforts to collaborate with other stakeholders.”*
- *“My work with them in the NH Legislature has been consistently positive (it helps that we are often on the same "side" of the issues).”*





# Factors Driving Satisfaction/Favorability

- Overall, NHMS is perceived as a well-run, hard working, friendly organization by members and other healthcare professionals/legislators whom many know and appreciate by
  - *“Have worked with NHMS staff on public health legislation - very professionally done.”*
  - *“Hard working organization, which follows legislative issues closely.”*
  - *“Very friendly staff”*
  - *“Janet has done a remarkable job, as have the NHMS staff...”*
  - *“Because of the efforts of Janet Monahan.”*
  - *“I’ve always had a good relationship with them and Joy ...”*
  - *“Joy Potter and Barbara Brown are very helpful. ..”*
  - *“Timely updates by Janet and Mary are extremely helpful.”*
  - *“With the addition of Scott Colby as Executive Director, I have found my experience with NHMS to be far more favorable than it previously was. He is attuned to physician needs and responds promptly to questions and concerns.”*



## Factors Driving **LESS** Satisfaction/Favorability

- Many feel the cost is too expensive.
  - *“Do good work but dues way too expensive.”*
  - *“I didn't need the insurance or the CME.”*
  - *“I have a favorable opinion of the Society but since I am semi retired they are too expensive to join.”*
  - *“The cost of membership is also a sizable proportion of my annual CME allotment.”*
  - *“As a psychiatrist, I feel I get more for my money by joining the New Hampshire Psychiatric Society.”*
  - *“Our employer stopped paying and it was too expensive for me to continue as an individual. Basically, the expense to join wasn't worth it.”*



# Factors Driving **LESS** Satisfaction/Favorability

- Many are unaware of the benefits and feel that it lacks relevance to them.
  - NHMS needs to be more *relevant* to hospital-based and hospital-owned physicians especially since this is a growing trend in the state.
- 
- *“Haven’t really seen any benefit to being a member.”*
  - *“It has been irrelevant to practicing physicians since 1989.”*
  - *“It was not of use to me in my every day practice.”*
  - *“I have enjoyed legislative updates, but don't use other services. I feel much of the structure is designed for private physician groups and being part of a hospital system, few of the benefits are relevant. The drop in membership is a very significant factor for my consideration of joining/rejoining.”*
  - *“I work at a hospital-owned practice that provides the vast majority of support that I need, making NHMS services essentially irrelevant.”*
  - *“I think that passage of the new budget makes me wonder just how relevant the NHMS is. Since more and more physicians are employed, what happens to hospitals directly impacts our wellbeing... Maybe given the employment models that have developed there should be more partnering with NHHA.”*



## Factors Driving **LESS** Satisfaction/Favorability

- Need to better capture *new physicians who move to the state* by increasing awareness, demonstrating benefits and perhaps a targeted welcome outreach program.
- *“I am new to the area and have not heard much about it.”*
- *“Just moved to NH. I’ve been meaning to join, but have been lost in the transition.”*
- *“Being new to the State, I am not aware of what the Society is active in at the State or national level. The 2 state senators I have met also did not mention the Society as of yet. I have attended a few of the state-wide trauma meetings and also have not heard any mention of the Medical Society.”*
- *“Have only been here for about a year and do not really know much about it.”*
- *“I have no info as I recently moved to the State.”*
- *“I am relatively new to the state and haven’t had the chance to interact much with the Society.”*



## Factors Driving **LESS** Satisfaction/Favorability

- Some feel that NHMS does not best represent their interests.
- *“I felt there were multiple problems with NHMS: I feel it is too tilted toward specialists and their interests; there seemed to be little interest in Family Practice and primary care. It always seemed to support candidates in elections who were chosen for their views on malpractice. In general, this meant supporting Republican candidates. I felt that overall Democratic candidates and their concern for public health issues, fairness and equity were more in line with my own views and it seemed counterproductive to support an organization that was supporting candidates with PAC money that I was personally voting against. I saw little value in what I was getting from my money.”*



## Factors Driving **LESS** Satisfaction/Favorability

- *“Aside from efforts towards medical liability reform, the NHMS seemed just like any other physician's lobby and not directed enough towards system reform.”*
- *“ I felt that the leadership was very conservative, almost partisan favoring Republican conservative issues. I was very uncomfortable with that.”*
- *“NHMS seemed to focus a great deal on financial issues, to the exclusion of others. I felt it was a much more conservative group than I wanted to be a part of.”*
- *“I tried to get membership interested in networking for research recruitment, but practices were not interested.”*
- *“At the one meeting I went to it appeared to be populated by very conservative specialists whose business-motivated discussions put me off. That's not why I'm in medicine.”*



# Factors Driving **LESS** Satisfaction/Favorability

- Some feel the Society is ineffective in bringing about change and is too political.
- *“I also belong to the MA Med society. For the same dues, I receive weekly NEJM and Electronic privileges. I have seen little personal benefit to NHMS, and certainly NO advocacy for physicians and their issues on a more practical level. We are one of very few states in which a physician can not prescribe benign drugs for self or family. NHMS appears to function as an arm of the Medical Board, rather than an independent body.”*
- *“Please advocate for ALL of your members and don't become a surrogate for Hospitals and the government.”*
- *“The Society seems to have changed over the past ten years. What appeared to be a force for patients and physicians, now seems to be politically correct, endorsing the current government...Stop apologizing for being physicians!”*
- *“Well meaning talkative folks who like to sit around a table and jawbone. Not particularly effective, but it's all we got.”*
- *“Too close ties to the politicians and wants to rock the boat as little as possible.”*



# Value

## Key Findings/Implications

### Key Findings

- Current members believe that they get a good value for their membership, however, Former members do not recognize the membership's worth.
- A total of 80% of combined current and former members saw no direct impact for them or their practice.

### Implications

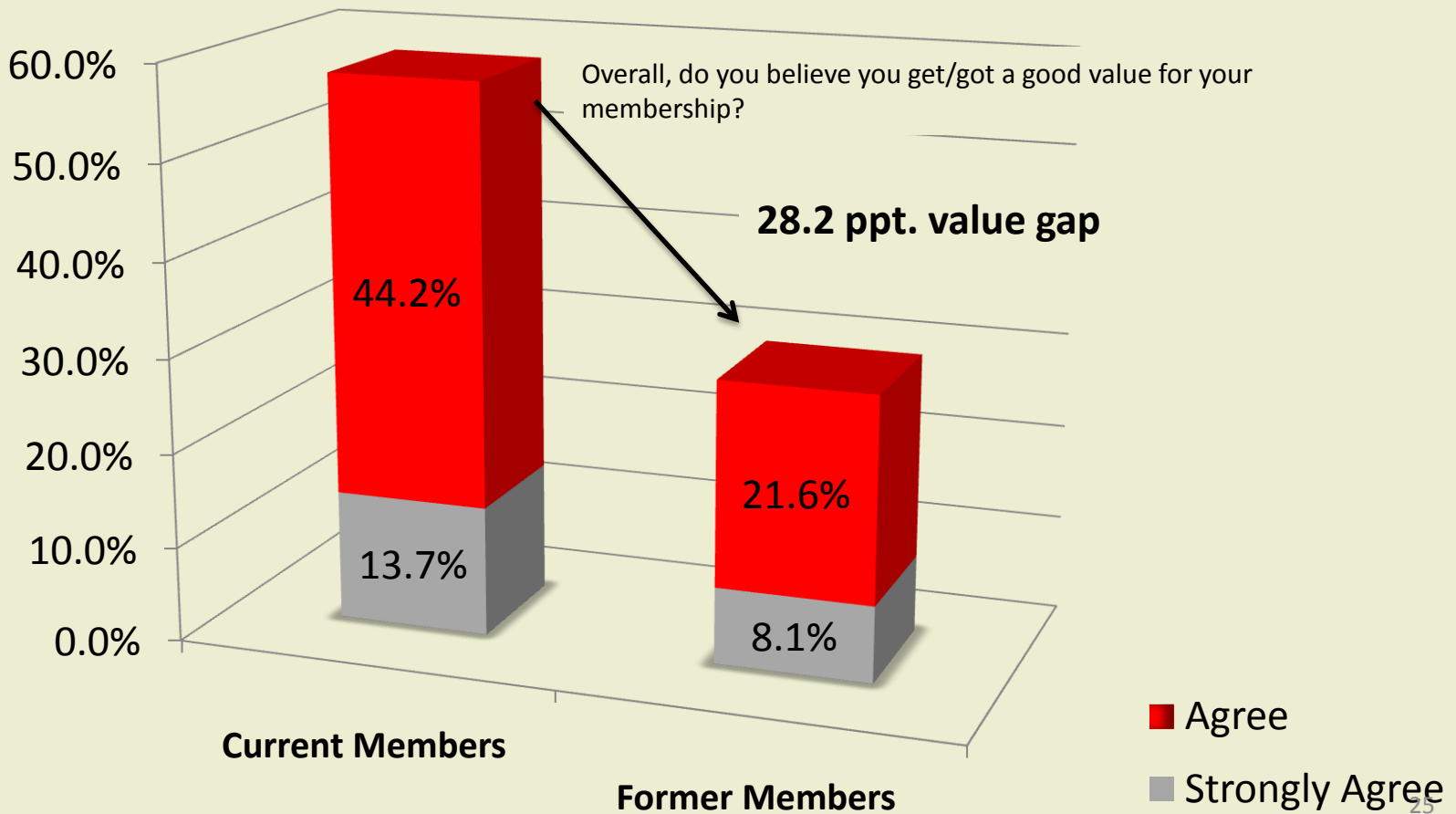
- ✓ NHMS needs to better communicate the organization's effectiveness as a whole – collectively for all physicians and down to the individual physician level if possible.





# Value

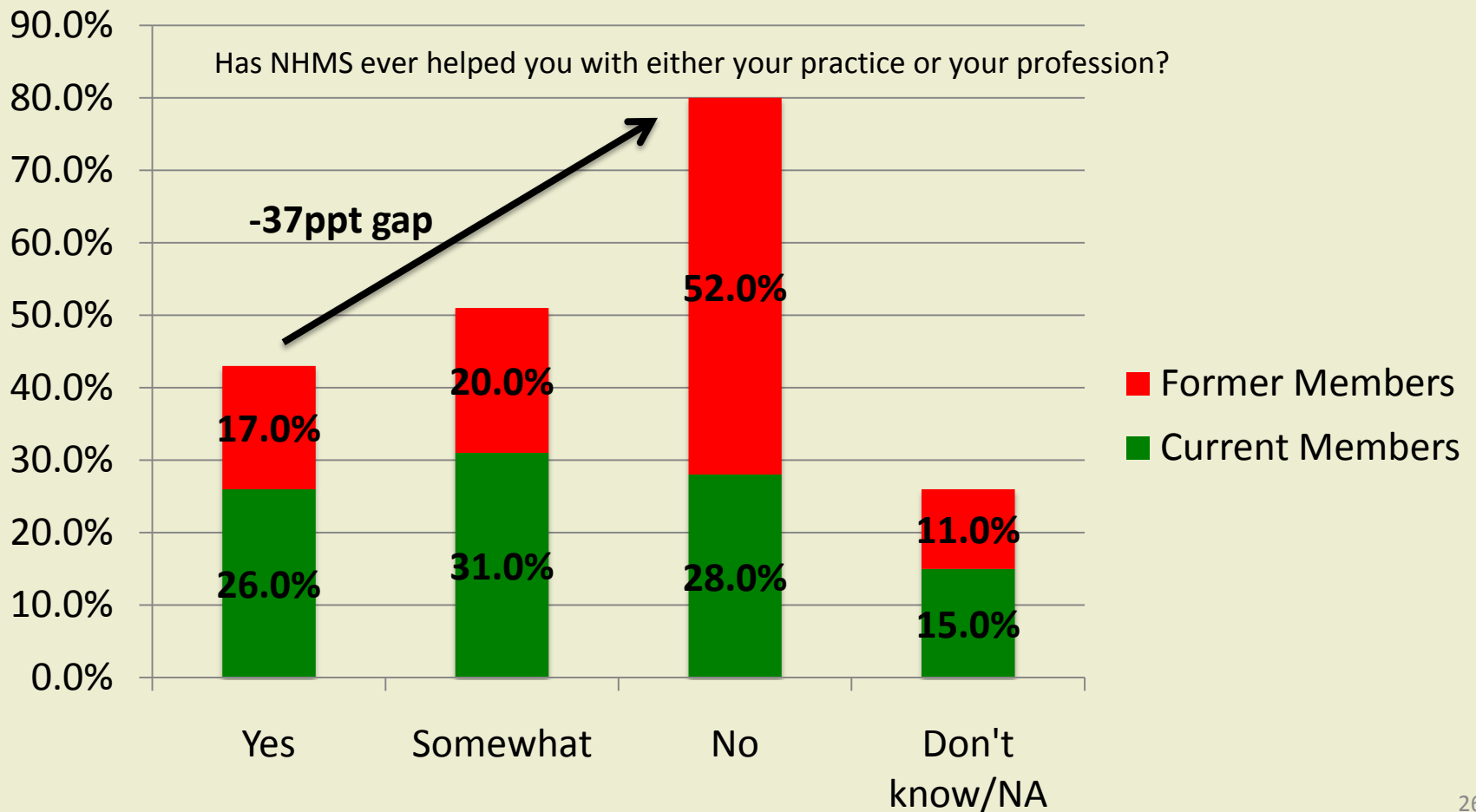
- Close to 60% of Current members believe they get a good value for their membership, compared with less than a third of Former members.





# Demonstrated Value

- There exists opportunity to better demonstrate NHMS's value on how it can help members either individually or collectively.





# Specific Ways NHMS Has Helped

- For the most part, mentions were centered around advocacy, CME programs and resources, such as timely information, health insurance and Specialty Society support.

- *“NHMS has alerted me to some legislation that would impact our profession.”*
- *“Networking with neighboring practices; Helping with insurance; Keeping informed.”*
- *“Having someone in Concord watching over 420 citizen legislators gives me a great sense of security.”*
- *“Tort legislation- pretrial panel”*
- *“The alliance with the NH Pediatric Society was a positive move for the pediatricians in the state.”*
- *“Health insurance, keeping abreast of relevant issues.”*
- *“Kept me current on public health and political issues. CME’s.”*
- *“I have sent my staff to some educational programs and I have done some CME. The Lyme program this year was excellent.”*
- *“Medical insurance, support of radiology society, organization of insurance relations.”*
- *“Supporting my stand on malpractice management, supporting JUA fund management.”*



# Key Benefits

## Key Findings/Implications

### Key Findings

- Collective strength (particularly helping physicians have a greater impact together), information resource, and networking/connectivity are seen as the key drivers.
- Health & Dental insurance and low cost CME programs are not as valued BUT are seen as “must haves” for cost of entry for many.
- Leadership in helping physicians navigate the changing healthcare system is not seen as a current key benefit of NHMS but is indicated as a want/need.

### Implications

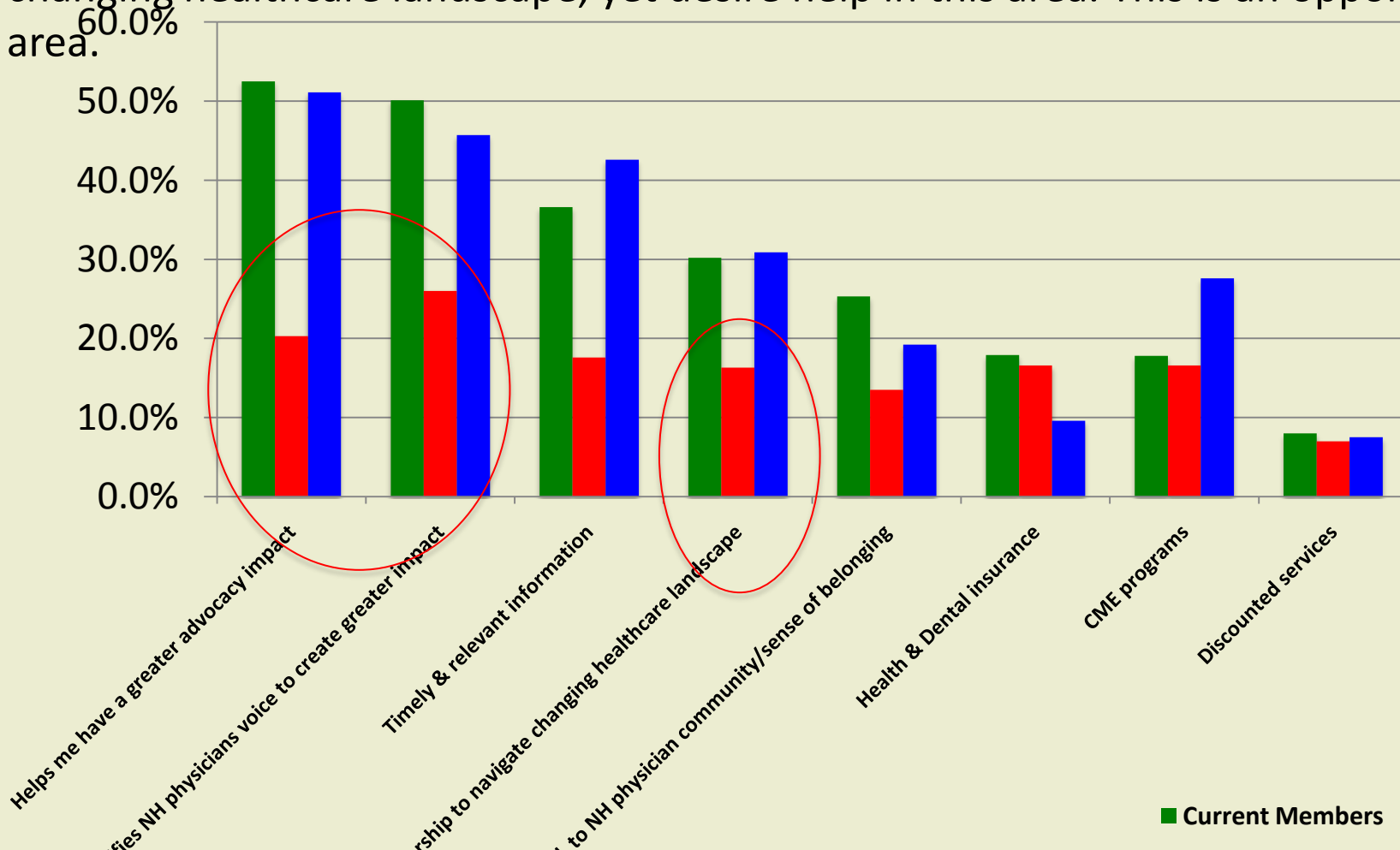
- ✓ It is important to continue rallying the organization behind advocacy issues as many recognize its importance. However, perhaps increased polling of members and where they stand might help them to feel greater inclusion and relevance to have their voices heard and reflected.
- ✓ Demonstrating pro-active leadership in helping physicians navigate the changing healthcare system will help solidify NHMS’s leadership role and increase its net worth to members and non-members alike.



# Key Benefits

The greatest benefit appears to be the collective strength and qualifications that NHMS provides especially on advocacy issues— for both physicians and public health.

- Only about 1/3 of respondents view NHMS as a leader to help navigate the changing healthcare landscape, yet desire help in this area. This is an opportunity area.





# Role of NHMS

- For Other Healthcare Professionals, Legislators & Regulators, they believe NHMS's primary role is for advocacy.
  - *"Advocating for physicians and system changes to improve the quality of care for NH residents."*
  - *"To advocate for patients, physicians and public health improvement in New Hampshire."*
  - *"To advocate for physicians and healthcare in NH at the state and national level."*
  - *"It is my understanding and belief that the role of the Medical Society is to not only represent the best interests of physicians, other health care providers and patients throughout New Hampshire but also to work at the state level influencing public policy that will help improve the health and wellness of the population."*
  - *"A society of doctors should work independently to develop best practices and allow the maximum amount of innovation and calculated risk to bring about a prosperous, effective medical industry within the state. The group should figure out how to remove as much legislative burden as possible to allow maximum competition and a free market approach to health care."*

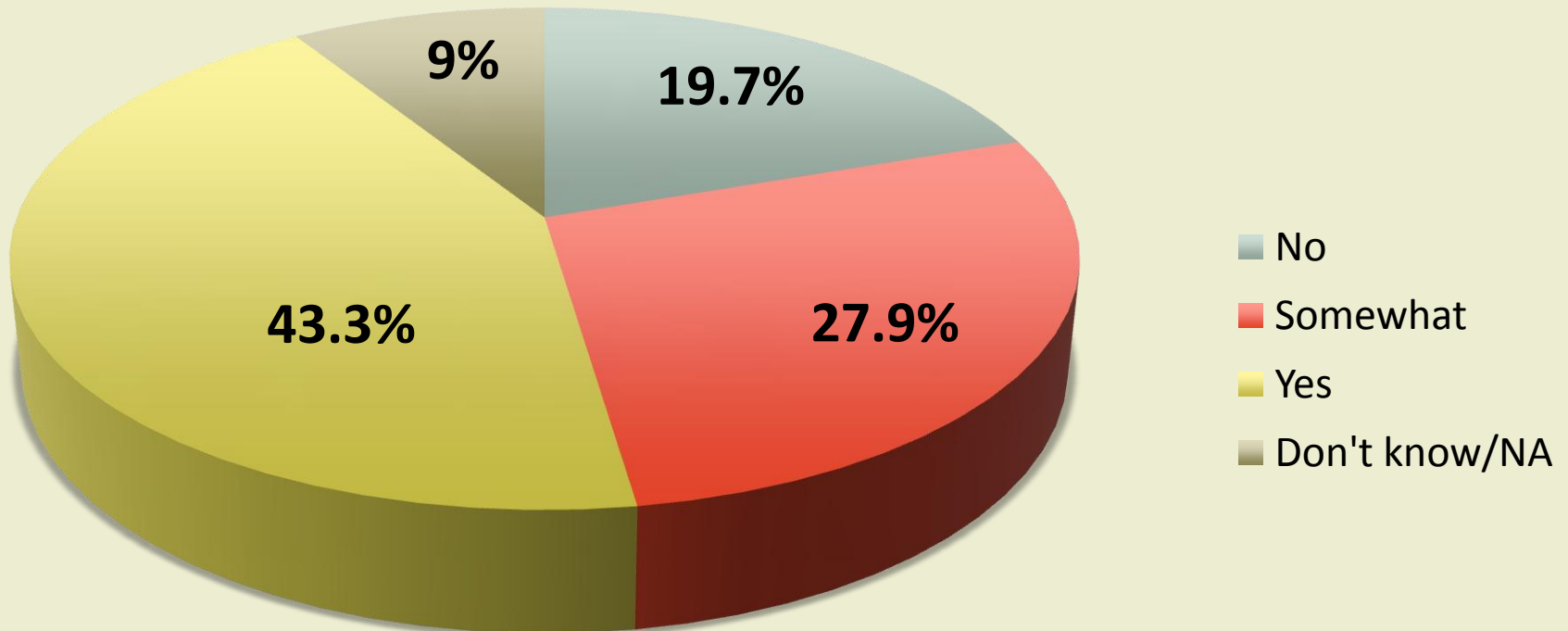


# Valued Resource

- NHMS is valued as a partner for advocacy, perspective on critical issues, and an information resource with over 70% stating they view NHMS as a resource (Yes and Somewhat combined).

## Other Healthcare/Legislators/Regulators

Do you view NHMS as a resource for you and/or your organization?

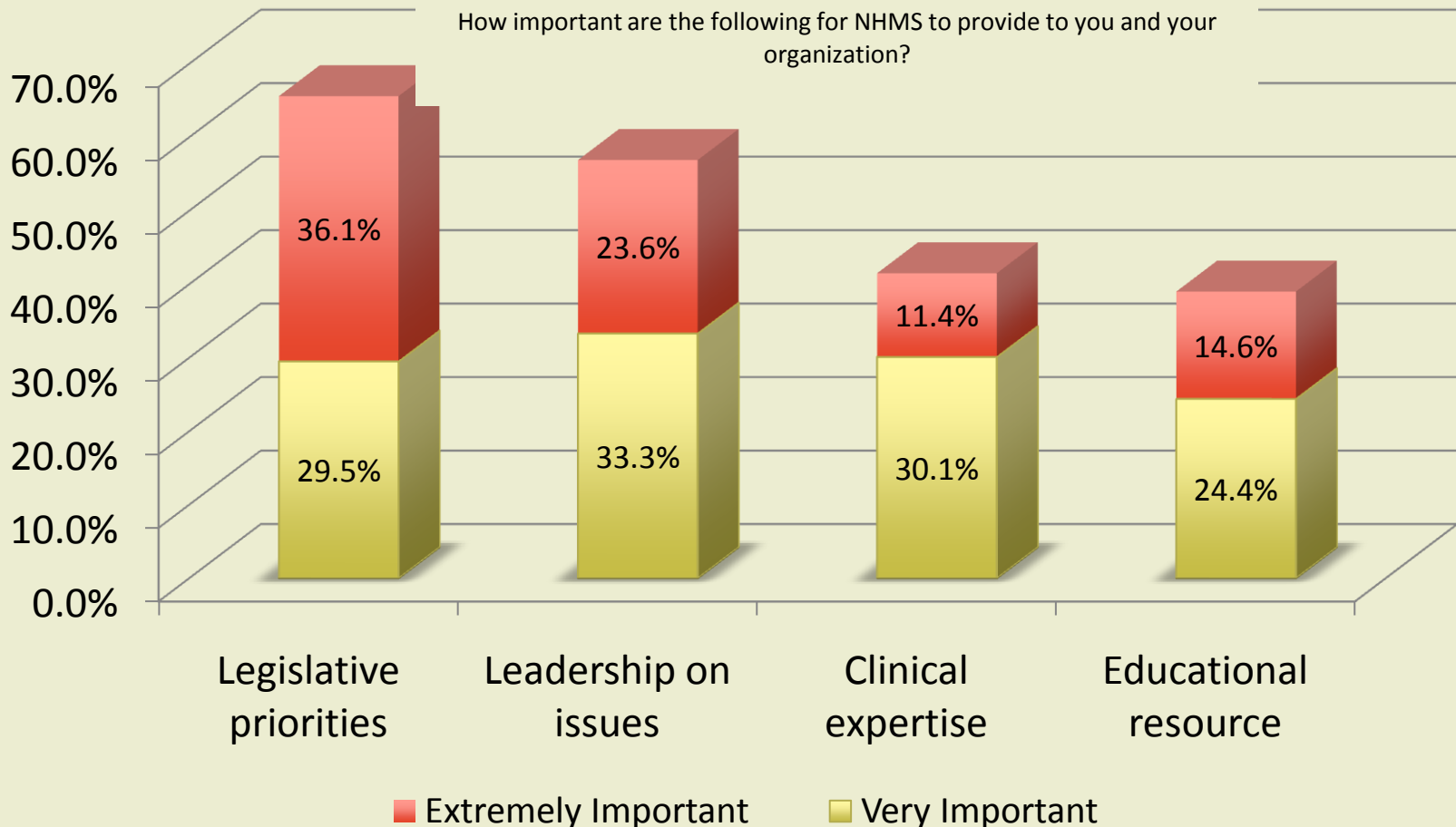




# Key Benefits

Among Other Healthcare Professionals, Legislators & Regulators

- Helping to set legislative priorities, leadership on issues promoting public health and providing clinical expertise on current issues are NHMS's most important benefits for Other Healthcare Professionals, Legislators & Regulators.







# Valued Resource

## Among Other Healthcare Professionals/Legislators & Regulators

- *“We collaborate on public policy issues of importance to our mutual member organizations.”*
- *“NHMS is the first place I call if I have a question that involves physicians and how they practice. NHMS has relationships with the Board of Medicine and other organizations that impact our industry. NHMS has been very effective in connecting us to other organizations and individuals when we have needed this.”*
- *“As an employee of a health insurance company, I am aware of the essential importance of a strong provider community in assuring competent care to our members. I am aware that our medical director works closely with the Society and values that opportunity to collaborate with that segment of the physician community in the state.”*
- *“As a NHMGMA member, I am fully aware of the huge contribution Janet, Scott and others do to keep our legislators informed about their decisions on healthcare bills.”*
- *“A trusted organization to contact for information, to check with for unintended consequences in legislation and to request guidance in dealing with physical and mental services needed.”*



# Programs: Current and New Key Findings/Implications

## Key Findings

- Advocacy for both physicians and public health is viewed by all as the most important resource that NHMS provides.
- All audiences desire for increased leadership and help in navigating the changing healthcare system, increased resources including on-line reference materials and legal information.

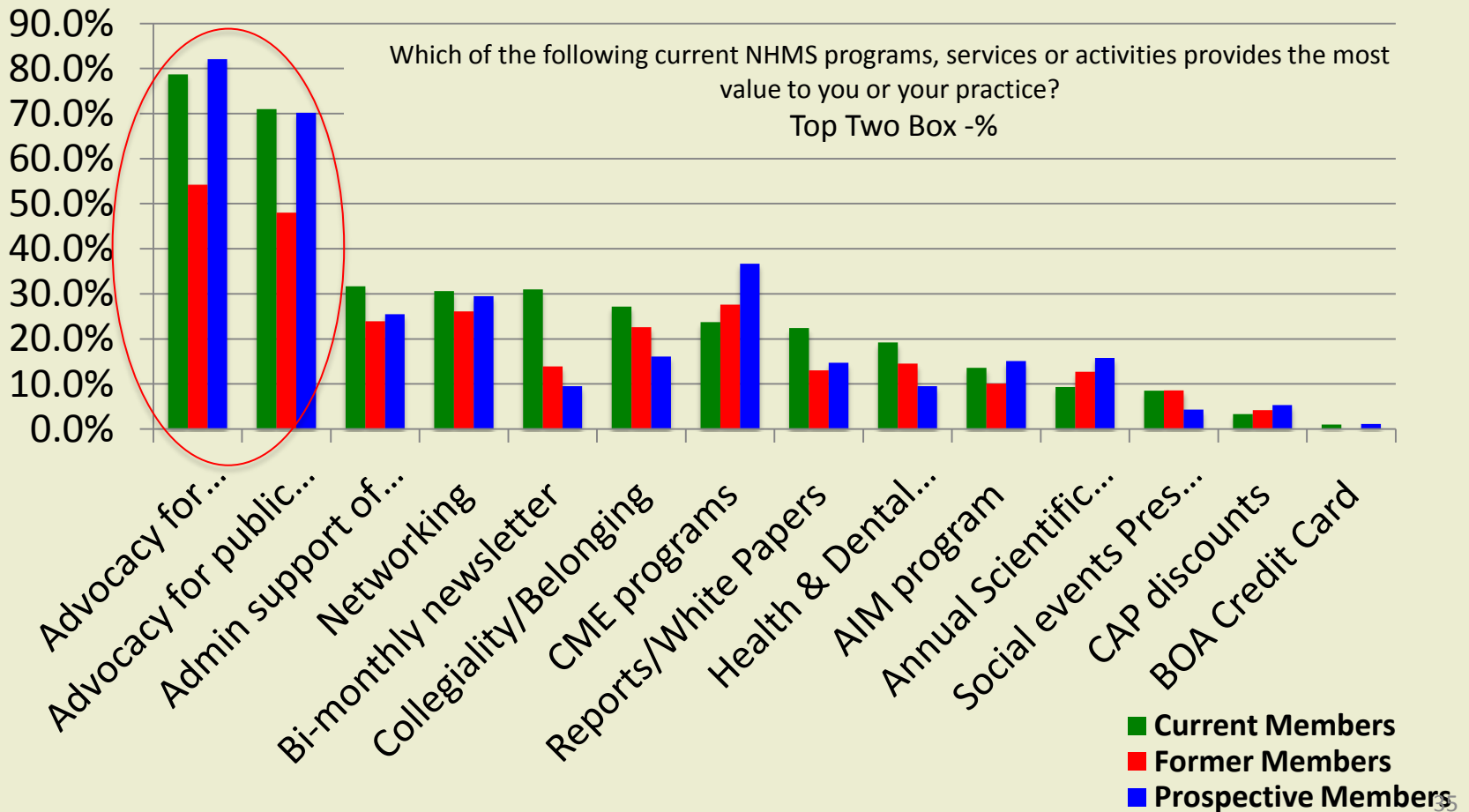
## Implications

- ✓ NHMS strengths are:
  - ✓ unifying physicians and in particular for advocacy efforts,
  - ✓ providing an important resource AND support to physicians, and
  - ✓ helping to lead and educate as healthcare continues to change and evolve.
- ✓ NHMS should evaluate its programming to reflect these desires to continue to evolve and grow.



# Current Program Preferences

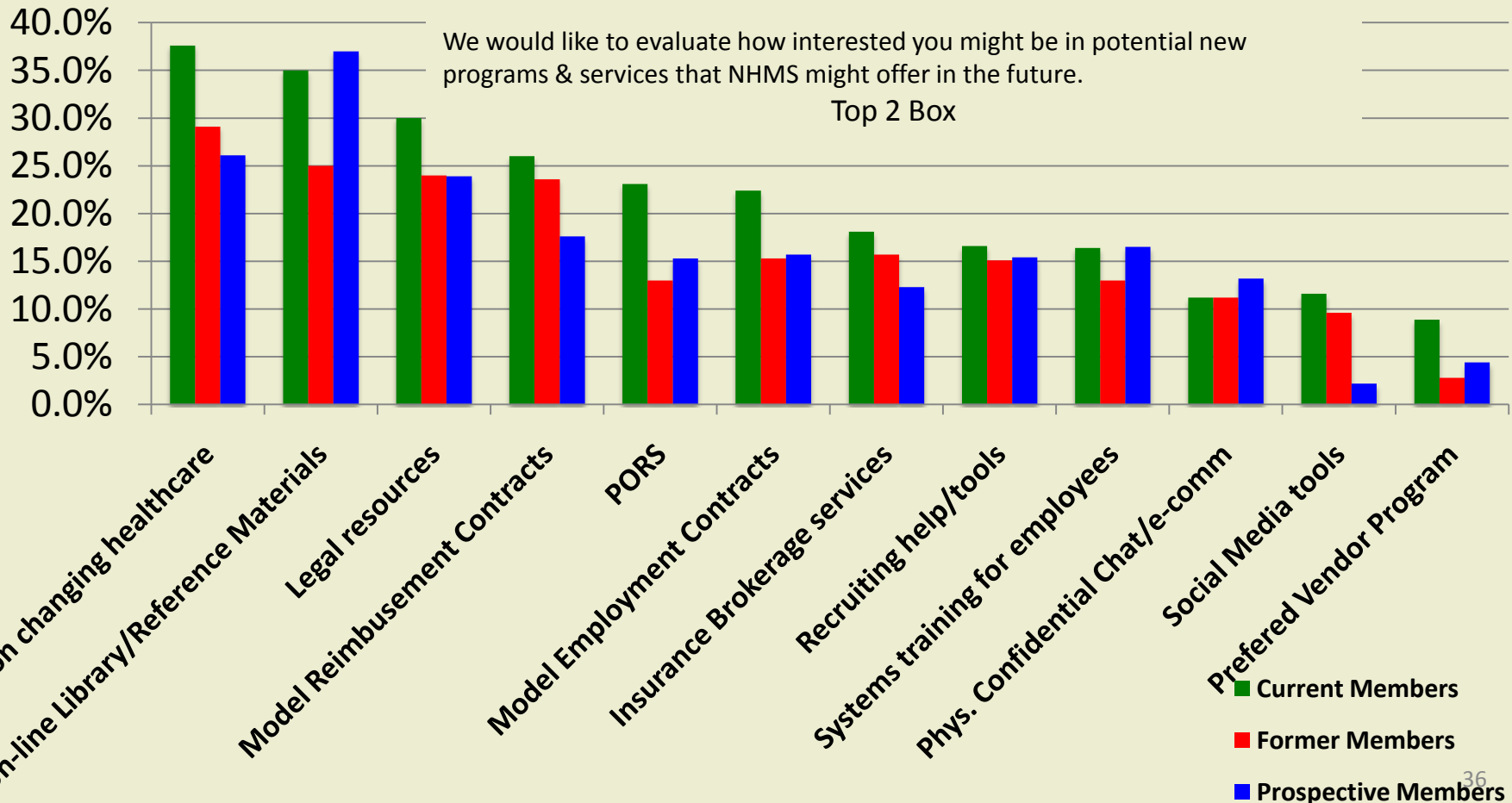
- Advocacy for physicians and public health issues, administrative support for state Specialty Societies and networking are the most valued programs





# New Program Preferences

- All audiences desire even *more resources* such as seminars on changing healthcare, on-line reference materials, legal resources and PQRS.





# Needs/Concerns

## Key Findings/Implications

### Key Findings

- Physicians feel overburdened especially with the increasing administrative tasks and daily dealing with insurance companies, leaving them little time to practice medicine.
- Specifically, they want tort reform, help with Medicaid/Medicare reimbursement and help with navigating healthcare landscape including understanding changing regulations and legislation.

### Implications

- NHMS might be able to offer real value and a point of difference with strong leadership and support:
  - Continued advocacy efforts – for both physicians and public health
  - Providing educational resources for physicians and their staff
  - Expertise and support in understanding and navigating the challenging healthcare landscape (including dealing with insurance companies, Medicaid/Medicare reimbursement, etc.)

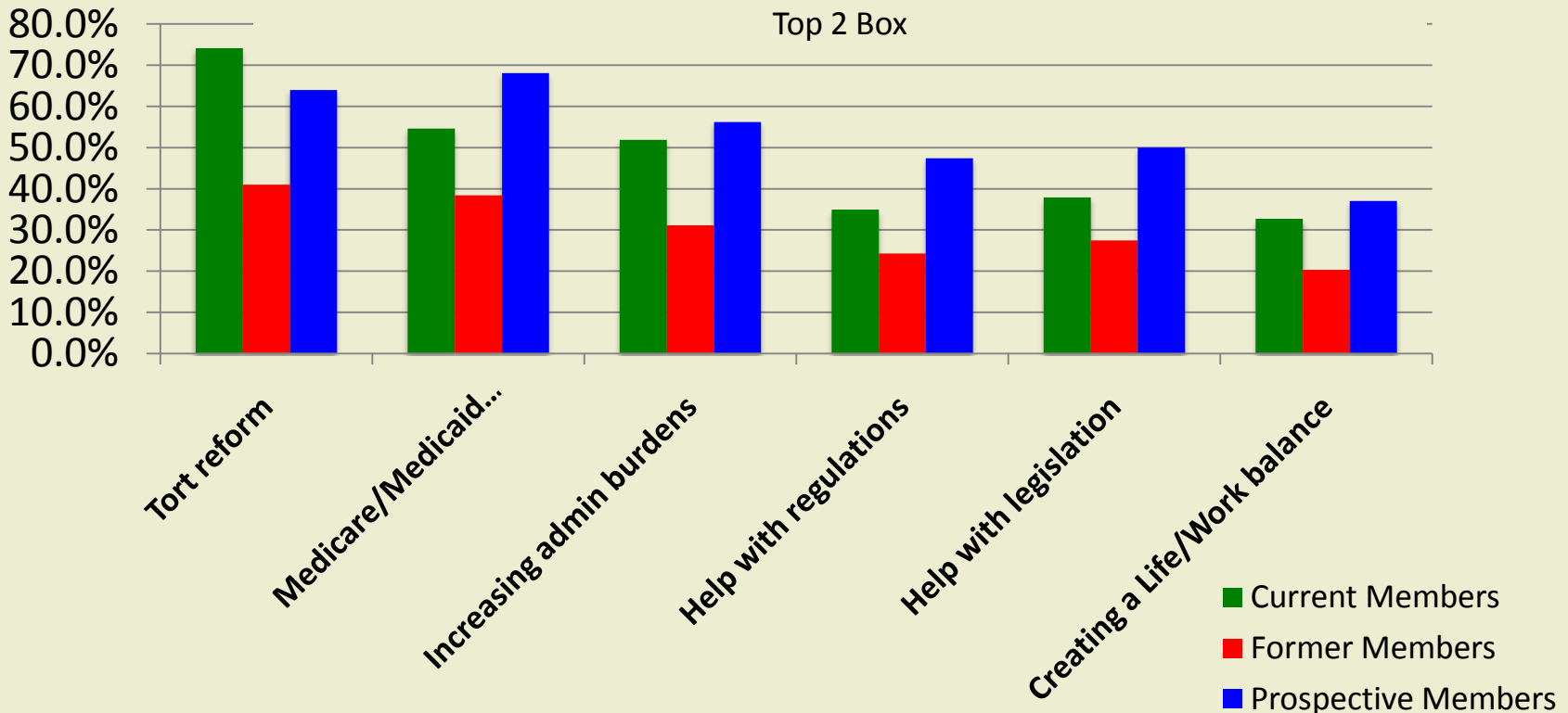


# Needs/Concerns

- Greatest needs/concerns are: tort reform, Medicare/Medicaid reimbursement and help with the increasing administrative burdens and understanding the changing healthcare regulations & legislation in priority order.
- Former members expressed a much lower level of needs/concerns which could be indicative of their lack of awareness/skepticism of how NHMS can help in these areas.

How important are the following needs/concerns to you, your practice and your profession?

Top 2 Box





# Needs/Wants

- Leadership/advocacy/support in helping navigate the challenging healthcare landscape are priorities.

- *"I feel the current healthcare system is irrevocably broken. Support to "navigate the changing..." is helpful, but we really need to work as a unified group (probably on a national level) to steer the creation of a whole new system. This is my MOST important concern.*
- *"Largely advocacy—see the role of the British Medical Association which in the UK functions as a union for physicians. There are good lessons to be learned from that."*
- *"Perhaps some sort of malpractice coverage service. I also think that a service that could provide assistance for MD's being sued would be extremely valuable."*
- *"In reality, 'organized medicine' has seldom spoken effectively and persuasively with One Voice in a credible and responsible way so that both the general public and those that determine healthcare policy listen and REACT."*
- *"I'd like to see more individual communication and a detailed membership book outlining all aspects of the Society. The local reps should be in frequent touch with their constituency, especially with regard to hot topics such as EHR, Obamacare, Malpractice insurance and bills in the state hopper."*



# Needs/Wants

- *“Why don’t you organize the NH physicians to STOP the darned regulations and unwanted changes –they benefit very few types physicians, but disadvantage many.”*
- *“Providing skills to be a physicians leader for healthcare reform.”*
- *“Advocate to get the government regulation out of medicine. The burdens of the governmental compliance are crushing. Absolutely crushing.”*
- *“1. Advocacy for changing to a single payer system; 2. Advocacy for real health care reform; 3. More aggressive public health advocacy.”*
- *“As a solo clinician... it could be helpful for a job/opportunity blog or "notice board" through NHMS for physicians to advertise that they are searching for a position/ etc.”*
- *“I wish something could be done about the day-to-day dealing with insurance companies...”*
- *“I wish everything wasn't in Concord and resources were more web based: webinars, Skype meetings etc.”*
- *“Before taking a position on a topic do a survey like this one. Going to meetings at the NHMS are not an option for those of us that have no time for family let alone more meetings.”*





# Wants/Needs by Business Type

## Hospital vs. Independent/Solo

- Hospital-based/office-based practice owned by hospital and independent group practice/solo physicians have similar wants/needs.
  - Advocacy with a collective voice
  - Physician support/resource
  - Information/Education
  - Connectivity

### Wants/Needs by Selected Business Type

#### Hospital-based/Office-based Practice owned by Hospital

Advocacy: Representing physicians in current climate

Physician support especially when there is an employer issue

Want help with negotiating employer/employee contracts

Tort Reform

Timely updates especially on legislative issues

Being connected/networking

Cohesive network - with one voice

#### Independent Group Practice/Solo Practitioner

Advocacy: keep an eye on state government issues concerning health care.

Physician support: with NHBOM; malpractice suits

Tort Reform

Timely updates especially on legislative issues

Being connected/networking

Cohesive network - with one voice



# Needs/Wants Hospital-based/Hospital-owned Practices

- *"I can see the advocacy in the email alerts. I think the society could reach out to physicians more. I am glad that you are doing this survey."*
- *"Very complicated to know exactly what you are doing legislatively. E-mail newsletter is hard to read and follow. Not being a political person, I cannot keep track of the major issues that are affecting medicine in the state."*
- *"Keeping up to date on goings on in legislation. Advocacy for medicine in state government."*
- *"Malpractice premiums, legislative reform, practice management education."*
- *"Meeting colleagues and referring physicals around the state is very beneficial. It keeps us from being isolated and narrow-minded."*
- *"Representing physicians in the current climate of increased budget cuts and enormous state funding issues."*
- *"Physician advocacy when there is an employer/employee issue."*
- *"Better centralization of CME credits / opportunities"*
- *"Reimbursement maintenance / improvement, tort reform, workforce recruitment."*



# Needs/Wants Hospital-based/Hospital-owned Practices

- *"I would like to see the society continue to address the needs of the employed physician - perhaps some employment, contracting, negotiating seminars. It may be that in the future the physicians will need more of a "union" than individual silo assistance from the society. There was previously a sense of us vs. them when dealing with the employed vs. private practitioner at the society. Unfortunately, newer physicians must be employed due to debt burden. I would like to see a younger physician committee or social network as when looking at the president's party, it is a group of "old-timers" who the younger physicians may not know, may not feel comfortable with and with the hierarchy of medicine may be difficult to break into. "*
- *"Don't duplicate what supports may already be available, i.e. MGMA, but increasing online supports and continued assistance with the new legislative changes is great."*



# Needs/Wants Hospital-based/Hospital-owned Practices

- *“As physicians, I believe we've lost control of how we manage, deliver and provide our medical services. It appears that others (government, insurance companies, etc.) have gotten the strong hold on MDs. Although the NHMS is a vital asset, and perhaps a necessity, in helping curb the bureaucracy and legislation forced upon physicians, my opinion is that it cannot perform in the manner it should to support its goals because all of the political red tape. (What really is necessary is a physician strike, which we cannot do.) Short of that it'll always be a political smoldering fire where physicians are losing and turning into ashes. We're fighting a battle where, ultimately, others will win. NHMS is not at fault, but the system it functions within is. NHMS may provide programs, political muster, advocacy, etc., etc. but how effective are they?????”*



# Wants/Needs Independent/Solo Physicians

- *“The Medical Society needs to advocate more directly for physician practices and less about esoteric public health issues. While most health issues are important, they are meaningless without physicians to implement them. Our medical system is crumbling, perhaps more so here in NH than other places. If we can not secure a more viable physician friendly environment in this state, there will be no role or need for a medical society or any public health advocate.”*
- *“Active in advocacy, keeps an eye on state government issues concerning health care. Who else would do that?”*
- *“Occasional info re occasional questions that arise. We have been in and out of the insurance plan.”*
- *“Helped me when I left Concord Hospital employment with retaining the retirement benefits I was due. Helped my current practice afford to provide medical and dental insurance to myself and my employees.”*



# Wants/Needs Independent/Solo Physicians

- *“I feel that NHMS should be an immediate and strong advocate if and when a member physician has an issue with the NH Board of Medicine. The NHBM is a "black box" which can leave a physician feeling powerless, thus there is an opportunity for NHMS to step up for it's members.”*
- *“A need to galvanize the medical community into one cohesive group to better meet and overcome the challenges ahead.”*
- *“Continue to advocate for all physicians. Most important to support independent physicians and have independent physicians remain an integral part of the NHMS leadership despite the fact that much of your income must come from places like Dartmouth and other hospital owned physicians.”*



# Wants/Needs Independent/Solo Physicians

- *“Great job. No unanimity with in the physician group Poor performance in legislative affairs. Open up. Don't keep it an old boys network.”*
- *“As a Family Physician practicing Integrative Medicine, I believe that the society's activities have little bearing on my day-to-day practice issues.”*
- *“Provide clear, concise updates regarding latest government rules/regulations”*
- *“Work to provide Tort reform”*



# Wants/Needs by Business Type Hospital vs. Independent/Solo

- The NHMS has the opportunity to unify ALL physicians across the state –regardless of business practice through:
  - Leadership and proactive guidance and advocacy on the changing and challenging healthcare issues and regulations
    - Being the “watch dog” and champion for physicians and healthcare
    - Important to reach out to ALL physicians to ensure their voice is heard
  - Education:
    - Education on changing healthcare environment for physicians and their staff
    - Education for hospital-employed physicians on contract negotiations with their hospital employers
    - Education on malpractice and other important issues to them. Perhaps a poll on what types of seminars would be helpful to them. Also, for those who cannot attend in person, webinars.
  - Physician Support/Champion:
    - NHMS has opportunity to position itself as THE physician champion/advocate
    - Support for help with hospital employer issues, NHBOM; malpractice; etc.
    - A strong resource/support for physicians
    - Providing resources including timely information to help keep them informed and make their demanding jobs easier:
      - “How-to series”





# Conclusion

- NHMS is perceived by current and former members and other healthcare professionals, legislators & regulators as a trusted, valued organization with a strong, supportive staff.
- Physician advocacy, using one voice for the collective membership, is the *strongest* benefit for all audiences.
  - This benefit, however, is enjoyed by ALL physicians, including *non-members*, potentially lowering membership's perceived value.
  - NHMS needs to continue to demonstrate that they are advocating for ALL member physicians and are not viewed as “too political.”
- Leadership and help in navigating the changing healthcare landscape is a strongly stated member need.
  - An important NHMS opportunity area is to demonstrate this leadership and expertise and to create services to meet this need.
- NHMS needs to demonstrate the positive ROI derived from member fees, particularly since many physicians pay the annual dues themselves.
  - NHMS needs to improve communication of their successes, aggressively showing how they directly benefit members and how they improve the level of public health.
  - NHMS needs to be more competitive in differentiating themselves from other Professional societies.
- An opportunity to position NHMS as the advocate for ALL physicians
  - NHMS needs to provide physicians compelling reasons to belong, reasons that their hospital employer (nor Professional Specialty society) cannot provide.

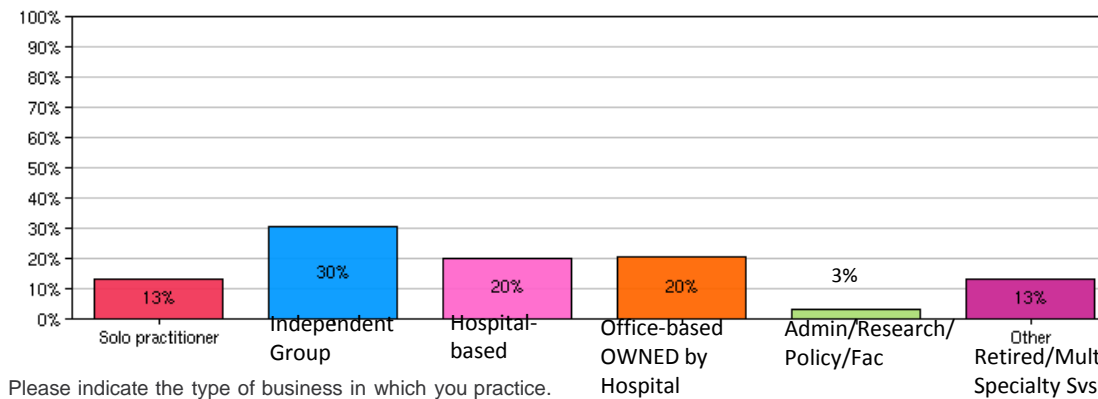
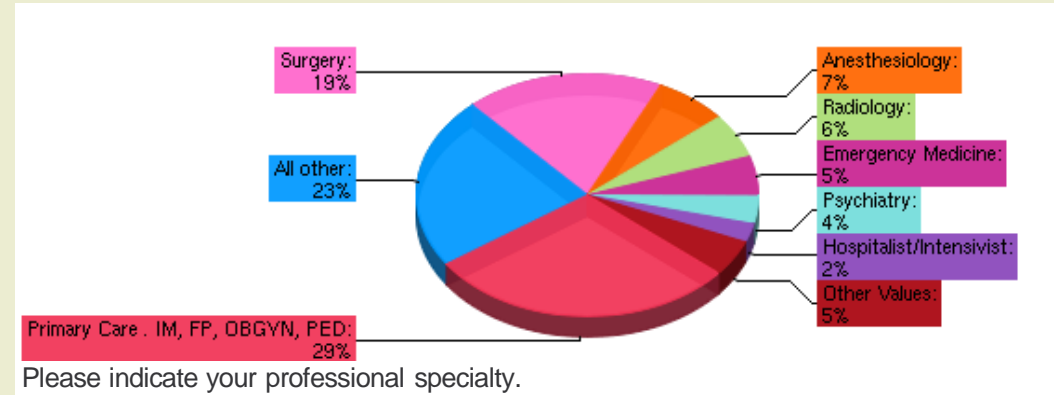
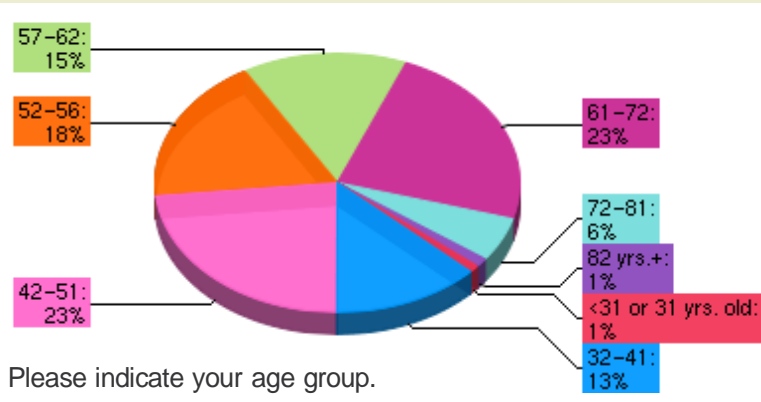


# APPENDIX



# Profiles of Respondents: Current Members

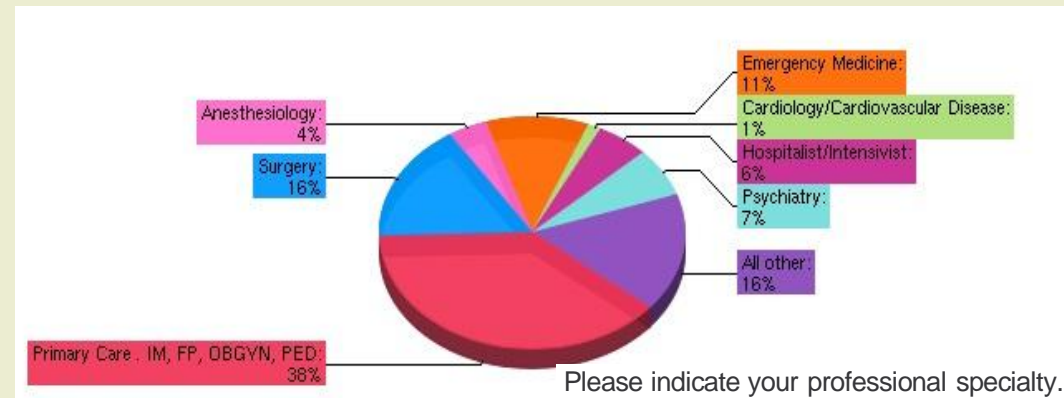
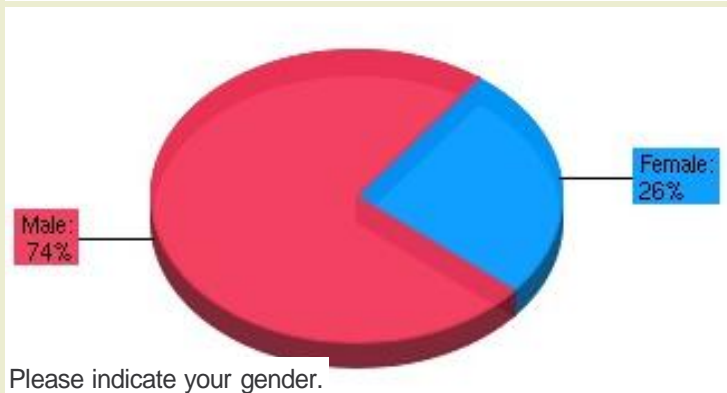
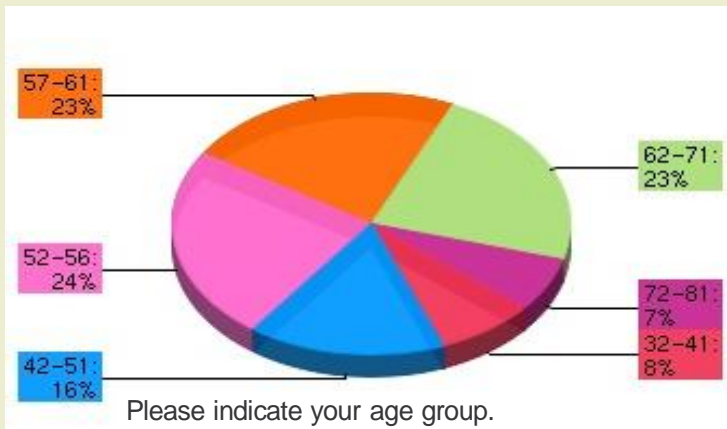
- Current Member respondents:
  - Primarily Male
  - Avg. Age: 51.3 years old





# Profiles of Respondents: Former Members

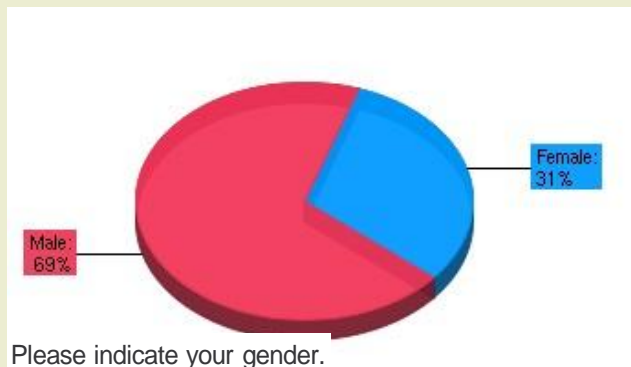
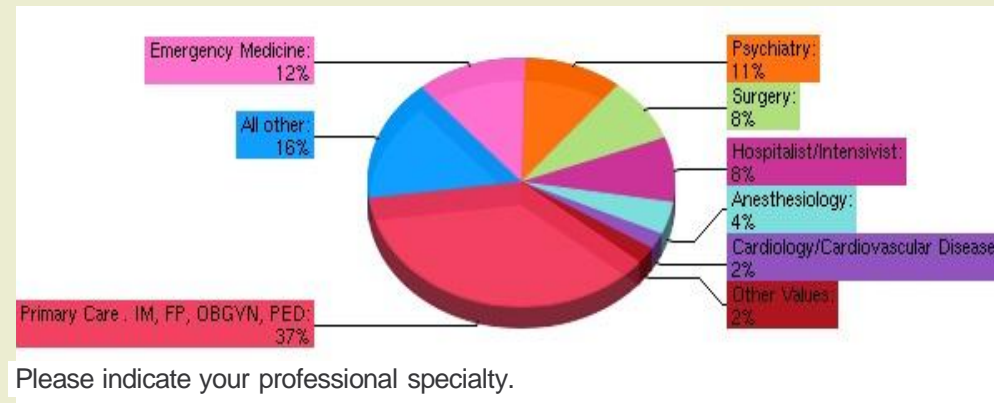
- Former Member respondents:
  - Primarily Male
  - Avg. Age: 53.5 years old





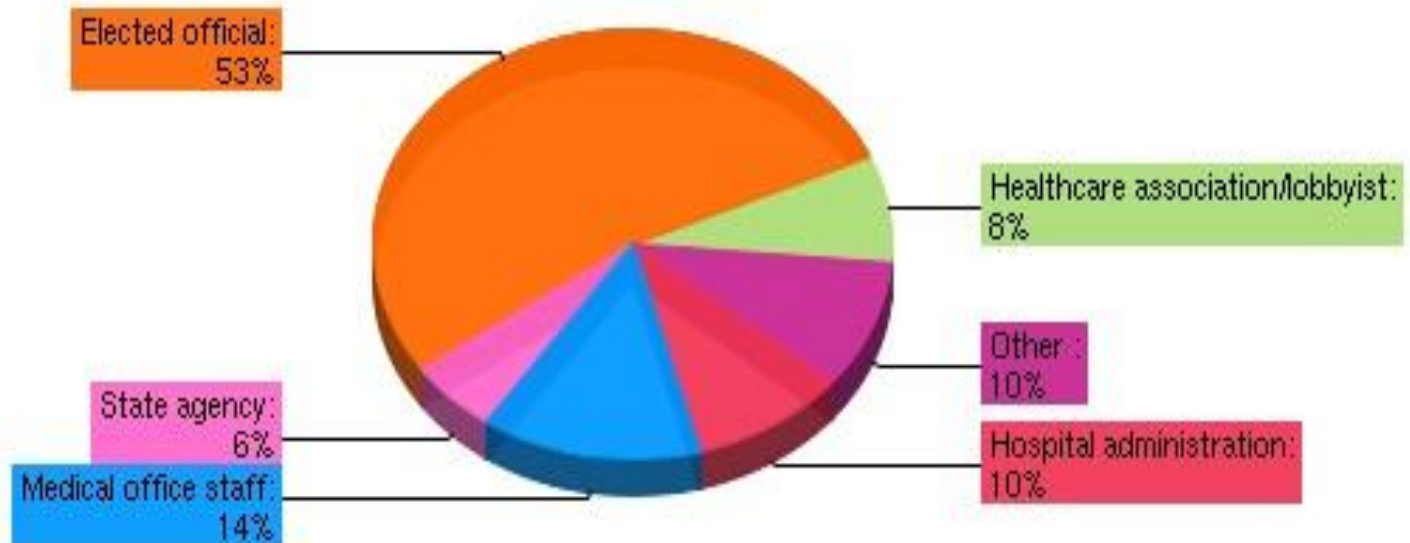
# Profiles of Respondents: Prospective Members

- Prospective Member respondents:
  - Primarily Male
  - Avg. Age: 44.5 years old





# Profiles of Respondents: Other Healthcare Professionals/Legislators & Regulators



Please indicate your professional area.