Benefits of a Patient-Centered Medical Home for Patients With Chronic Conditions: Improvements in the Quality of Care While Reducing Costs

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Background

- Navy Medicine implemented the patient-centered medical home model of care—Medical Home Port (MHP)—across its enterprise by June 30, 2011
- Designed to increase access to care, improve the quality of care, control costs, and improve patient satisfaction
- Given the system-wide implementation, Navy Medicine wanted to understand the effectiveness of the MHP

Research Objective

- To understand the effect of the MHP on healthcare utilization and costs for patients, especially differences for patients with and without chronic conditions

Study Design & Population

- Using a pre-post design, conducted a retrospective analysis of patient-level utilization data from the Military Health System (MHS) MHPs (M2)
- Studied seven family medicine (FM) and pediatric (Peds) MHPs that are part of the MHS at Navy facilities
  - Naval Hospital Oak Harbor (NHOH), NH Pensacola (NHP), Naval Health Clinic Charleston (NHCC), and NHQ Quantiaco (NHQ)
- Patients included enrolled active duty and their dependents, along with retirees and their dependents (3,500 – 10,800 enrollees per MHP)
- Identified patient chronic conditions using the Agency for Healthcare Research and Quality’s Clinical Classification Software categories
  - 2 or more outpatient encounters for 1 or more emergency room (ER) or inpatient stays with an ICD-9 diagnosis of one of 17 chronic conditions

Findings

- MHP implementation resulted in cost and cost variation reductions
- PNPM changes were very similar (in %) for chronic and non-chronic patients. However, because patients with chronic conditions cost 2 to 3 times more than those without chronic conditions, the MHP has a greater dollar cost reduction for those with chronic conditions
- After MHP implementation, utilization of inpatient and ER services decreased and provider continuity improved (these results not shown)
- Findings suggest the MHP can not only improve the care for patients with chronic conditions, but also can reduce the overall costs and variation of costs

Conclusions & Implications

- Approximately 25% of enrollees have a single chronic condition, while 45% have at least one chronic condition

Funding Source, Approvals, Disclaimer

- U.S. Department of the Navy, Bureau of Medicine and Surgery
- Western IRB (Protocol #20101816); Office of the Assistant Secretary of Defense for Health Affairs/TRICARE Management Activity (TMA), Human Subjects in Research Protection Office (Protocol # CCD-ID-2015-3A); Data Use Agreement (DUA) received from TMA (DSA #110-707B)
- The views expressed in this presenter are those of the authors and do not necessarily reflect the official policy or position of the Department of the Navy, Department of Defense, nor the U.S. Government

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