Testing Integrated Primary Care and Public Health Models for Prevention Delivery

Glen P. Mays
University of Kentucky, glen.mays@uky.edu

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Testing Integrated Primary Care and Public Health Models for Prevention Delivery

Glen Mays, PhD, MPH
University of Kentucky

glen.mays@uky.edu
Factors driving growth in medical spending

Health spending growth rate 1996-2006

Growth rate due to cost per case

Growth rate due to prevalence

Roehrig et al. Health Affairs 2011
Factors driving growth in medical spending

- Unmet social needs have large effects on medical resource use and health outcomes.
- Most primary care physicians lack confidence in their capacity to address unmet social needs.
- Linking people to needed health and social support services is a core public health function.
2012 Institute of Medicine Recommendations

- Use NIH Clinical and Translational Science Awards to evaluate existing and new local and regional models of primary care and public health integration
- Encourage adoption and diffusion of successful models through CDC, HRSA, and CMS funding
- Explore expanded use of community health worker models
- Incorporate models for effective health information exchange

Stimuli in the Affordable Care Act

- $10 billion Prevention & Public Health Fund
- CMMI demonstration programs
- Medicaid Health Home pilots
- CDC community health worker program
- Enhanced IRS requirements for hospital community benefits
- CMS focus on hospital readmission prevention
The national picture: organizations contributing to public health delivery

- Local health agency
- Other local government
- State health agency
- Other state government
- Hospitals
- Physician practices
- Community health centers
- Health insurers
- Employers/business
- Schools
- CBOs

% Change 2006-2012
-50% -30% -10% 10% 30% 50%

Scope of Delivery 2012

### Leading models of integration

#### Summary of Features and Components for Models Linking Medical Care and Social Support Services

<table>
<thead>
<tr>
<th>Intervention Process</th>
<th>VBH</th>
<th>SCO</th>
<th>CCP</th>
<th>Mercy</th>
<th>GRACE</th>
<th>CMP</th>
<th>EDPP</th>
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<td>Baseline health assessment</td>
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<td>Individualized care plan</td>
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<td>Specialized intervention protocols</td>
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<td>Specialized training for service providers</td>
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<td>Ongoing monitoring</td>
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<td>Coaching in self-management</td>
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<td>Link to or communication with primary care physician or practice</td>
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<td>Use of electronic health records</td>
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<td>Referral to or arrangement for medical services</td>
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<td>Caregiver support</td>
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</tbody>
</table>

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Gayle Shier, Michael Ginsburg, Julianne Howell, Patricia Volland and Robyn Golden

Strong Social Support Services, Such As Transportation And Help For Caregivers, Can Lead To Lower Health Care Use And Costs

*Health Affairs, 32, no.3 (2013):544-551*
Leading models of integration

By Holly C. Felix, Glen P. Mays, M. Kathryn Stewart, Naomi Cottoms, and Mary Olson

THE CARE SPAN

Medicaid Savings Resulted When Community Health Workers Matched Those With Needs To Home And Community Care
Resources in Kentucky: Homeplace and Local Health Departments

Ratio of Navigator to Potential Client

<table>
<thead>
<tr>
<th>Ratio</th>
<th>Color</th>
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<tbody>
<tr>
<td>Less than 250</td>
<td>Green</td>
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<td>250 to 365</td>
<td>Yellow</td>
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<td>365 and Over</td>
<td>Red</td>
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</table>

Childress MT. 2013
A new research opportunity for CTSAs and PBRNs

2013 Request for Proposals
Proposal Deadline: May 22, 2013

STRENGTHENING TRANSLATIONAL RESEARCH IN PUBLIC HEALTH: COLLABORATING WITH CLINICAL AND TRANSLATIONAL SCIENCE AWARD (CTSA) INSTITUTIONS

A new research opportunity for CTSAs and PBRNs

- Develop and pilot an integration strategy
- Develop metrics and data sources for evaluation of processes and outcomes
- Acquire preliminary data for larger AHRQ or PICORI study
For More Information

Glen P. Mays, Ph.D., M.P.H.
glen.mays@uky.edu

Email: publichealthPBRN@uky.edu
Web: www.publichealthsystems.org
Journal: www.FrontiersinPHSSR.org
Research archive: http://works.bepress.com/glen_mays

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University of Kentucky College of Public Health
Lexington, KY