Understanding the Utilization of Healthcare Services

A female perspective

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Site Placement: Central Mississippi Health Services, Jackson, MS (CMHS)
Introduction

Community-Based Study designed to investigate the utilization of healthcare services in a unique sub-population of the community served by Central MS Health Services, Inc. (CMHS)

**WHO:** women of child-bearing ages, between 15-35 years

**WHAT:** makes this group unique is the decrease likelihood for chronic disease management, therefore decreased chance they will have ongoing relationship with primary care provider, other than OB/GYN

**HOW** does this cohort of women utilize healthcare services?
Background

**WHY**

is this information **SIGNIFICANT?**

Inappropriate utilization of healthcare:

1. Increases overall cost of health care
2. Affects access and quality of care
3. Affects optimization of health status

Employing community-based investigation to bridge gap between population-based medicine and patient-centered medical home model
Methodology

Women seen at CMHS Southwest Clinic for OB/GYN service were surveyed if they were:

1. between the ages of 15-35 years old
2. diagnosed with any chronic diseases

Survey Questions:

1. Do you have a primary care physician
2. When was your last visit
3. Was it (last visit) a physical or annual appt
4. Annually, do you see your OB/GYN more than a/your Family medicine/Internal Medicine physician
5. Have you been diagnosed with any chronic illnesses
6. When was your last visit to the Emergency Room
7. What did you go to the ER for...were you admitted?
8. How many times have you been to the ER in the last three years
Results  n=32

Have PCP?
- Yes: 9; 28%
- No: 23; 72%

Last Visit with PCP
- <1 year: 1; 3%
- <3 years: 31; 97%
- 5+ years: 0

Sought Preventative Care Last PCP Visit
- Yes: 11; 34%
- No: 21; 66%

Identified OB/GYN as PCP
- Yes: 9; 28%
- No: 23; 72%
Results

Type of ER Visit

- Emergent: 10; 32%
- Non-Emergent: 21; 68%

Most Recent ER Visit

- < 3 mo: 21; 66%
- 3 to 6 mo: 2; 6%
- 6mo- 1 year: 3; 10%
- 3 years: 3; 9%
- 5+ years: 2; 6%
- Never: 1; 3%

Number of ER Visits in 3 years

- 0 to 1: 8; 25%
- 2 to 5: 15; 47%
- 5 to 10: 6; 19%
- 10+: 3; 9%
Discussions

**Key Findings:** Greater than 70% identified their OB/GYN as their PCP, with more than 90% seeking preventative care annually. However, most (70+%) of the women had visited the ER more than 3 times in the last three years. Majority (60+%) of the ER visits where for non-emergent care.

- This Community-based study was able to uncover a issue with utilization of care in this population that is malleable to education and collaboration.
Recommendations

- Community Health Care Centers should model CMHS and include OB/GYN services to reach a sub-population that may not otherwise develop PCP relationship.

- OB/GYN and Family Medicine alliance to redirect women seeking women’s health with cofounding risk factors to appropriate service for prevention/management.

- Use creative measures such as emails or postcards to maintain contact with patients that may not have reoccurring appointment.

- Federal agency should supply incentives to CHCs engaging in community-based study to improve quality of care.
Conclusions

• The decrease likelihood of this sub-population to receive chronic management of disease may be causing an increase and inappropriate use of emergency care; which further exacerbates high-cost of health care.

• There is a significant cost savings when federally insured patient (Medicaid/Medicare) seek ambulatory care in clinics instead of emergency rooms

• Community-based studies at the clinic level can tie population-based medicine to patient-centered medicine to identify area for improvement and activate the appropriate resources to rectify issue to optimize health and the health of our health care system
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