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Title

Understanding the experience of high-cost high-need patients taking part in a complex care primary care program

Priority 1 (Research Category)

Qualitative research

Presenters

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Abstract

Context: Over the years, a patient population that has received increased attention is high-cost, high-need (HCHN) patients. Research has shown that about 5% of patients account for nearly half of all U.S. health care spending, and that many of those costs could be preventable or modifiable. As a result, many health systems are now focusing on identifying and addressing the needs of these patients. A number of health systems have developed “intensive primary care” programs or “ambulatory intensive care units” to provide more targeted and comprehensive care to HCHN patients. However, a key piece that is missing in the evaluation of these programs that may provide insights into the effectiveness and sustainability is patient experience and perspectives.

Objective: To qualitatively examine the perspectives and experience of HCHN patients enrolled in a complex care program as part of one health system’s primary care transformation.

Study Design: Semi-structured qualitative interviews carried out April-July 2021.

Setting: A suburban primary care clinic in the Twin Cities, Minnesota.

Population Studied: Eighteen patients that were part of the Complex Care program.

Outcome measures: Patient experience within the program.

Results: There were 11 major themes that emerged which described patients' experience in the Complex Care program which were categorized into four domains. Patients discussed (1) how the program was introduced to them and their initial impressions, (2) their thoughts on the care team, including having a designated Complex Care team, the trust and relationship that they have with the team, how the team provides easy and prompt access to care, and how the team provides care continuity and coordination, (3) the Complex Care visits, including their thoughts on pre-visit planning, having more time in the visits, having team visits, and virtual visits, and (4) outcomes of the program, such as feeling that they are getting more comprehensive care and have improved health and a better patient experience.

Conclusions: The Quadruple Aim, which encompasses improving clinical outcomes, decreasing health care costs, while improving patient and care team experience, is widely accepted as a compass to optimize health system performance. The results of this work illustrate how Complex Care programs can positively impact the patient experience of HCHN patients.