Patients With High-Cost Chronic Conditions Rely Heavily on Primary Care Physicians

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Today's US physician workforce principally comprises specialists trained in the care of specific chronic conditions in the outpatient setting. However, a majority of patients seeking care for most of 14 high-cost chronic conditions, for example hypertension, were more likely to see a primary care physician than a specialist physician (69% vs. 24%, respectively). (J Am Board Fam Med 2014;27:11–12.)

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Primary care has been acknowledged as essential to the success of health care reform and the nation’s triple aim. However, the degree to which primary care physicians are depended on by an increasingly chronically ill US population may not be fully appreciated. Ostbye and colleagues show that primary care physicians hoping to meet current clinical guideline recommendations for patients with chronic conditions such as diabetes and hypertension would need an average of 10.6 hours per working day to care for each patient with multiple chronic conditions. Primary care physicians might be referred to as “complex care physicians,” particularly considering that they also are charged with identifying patient needs, offering preventive services, coordinating with community and public health resources, and facilitating behavior change.

References

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Figure 1. Number and percentage of outpatient chronic condition visits by physician type in the past year, based on the 2008 National Ambulatory Medical Care Survey. *P < 0.05 significant test done by SAS Procedure Surveyfreq Roa-Scott χ² test. COPD, chronic obstructive pulmonary disease.