



HOSPITAL AND PRIMARY CARE RESOURCE ALLOCATION

CASE STUDY

“ Including morbidity burden as an independent variable improves the predictive power and resource allocation accuracy is achieved. ”





The Ministry of Health in Chile is a Government agency that regulates public health and the execution of clinical and administrative processes in hospitals and other entities that provide health services.



OVERVIEW

The Ministry of Health in Chile used the ACG® System as a risk-adjustment mechanism to **improve health care resource allocation and better describe the disease profile of their population.**

CHALLENGES

Worldwide there is increasing interest in the improvement of health system resource allocation. In Chile, primary care resources are allocated based on the number of citizens assigned to a health care facility and their socio-demographic characteristics, not their morbidity burden.

METHODS USED

The study utilized EMR data from 16 primary care facilities during a 1-year period. Of 692,822 patients observed, 37% were seen in a primary care facility. The data included patient's age, gender and diagnoses codes as per ICD-10 classifications. This data was processed using the Johns Hopkins ACG System. Linear regressions were used to measure the ACG System's ability to explain resource use and ambulatory visit rates.

RESULTS

Utilizing the ACG System's predictive models, which incorporate morbidity burden, improved the ability to identify those most likely to be high users of primary health care in the coming year (see table).

RECOMMENDATIONS

Based on the findings, it is recommended that going forward, the population's morbidity burden is included in the resource allocation formula for primary care facilities.

The ACG System measures the morbidity burden of patient populations based on disease patterns, age and gender in primary health care settings.

PREDICTING PRIMARY HEALTH CARE COSTS	
MODEL	R ² ADJUSTED VALUE
Age + Gender	0.050
ACG System	0.261

SOURCES: Adjusted Clinical Groups Method (ACG) to allocate resources according to the disease burden of each health center March 1, 2016 Category: Muñiz P, Muñoz P F, Rojas J., Santelices C E