SPECIALTY ACCESS FOR THE UNINSURED PROGRAM (SAUP): SYSTEM COSTS BEFORE AND AFTER ENROLLMENT

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BACKGROUND

• The Specialty Access for Uninsured Program (SAUP) is a Milwaukee County health system collaborative in which safety net primary care clinics are paired with hospital/health systems.

• Typically, primary care clinics provide primary care services, while health systems provide a network of specialists.
  - Aurora Walker’s Point, a Free Clinic in Milwaukee, WI, is able to provide some specialty services at the clinic.

• Patients are referred for a single episode of care, and return to the primary care provider (PCP) for ongoing care management.

• All specialty services including usual and customary specialty consultation, testing, and treatment are “covered” under SAUP at no cost to patients.

PURPOSE

To examine the clinical, geodemographic, and cost features of our SAUP patients and their journey to specialized care.

METHODS

• We prospectively identified and retrospectively reviewed patients ≥ 18 years of age residing in Milwaukee County that were enrolled in SAUP during 2017.

• To be eligible for SAUP patients must:
  - Be established patients of Aurora Walker’s Point Community Clinic
  - 200% at or below the Federal Poverty Level
  - Unable to secure public or private insurance

• Cost data was identified per patient for the year prior to SAUP enrollment (2016), the year of SAUP enrollment (2017), and the year following SAUP enrollment (2018).
  - Costs in 2016 and 2018 were adjusted to match 2017 costs.

• Statistics:
  - Retrospectively data collection
  - Descriptive statistics were used to describe the overall characteristics of our cohort.
  - Paired T-tests were used to compare cost and care related differences (e.g., number of hospital admits 12-months prior to and following SAUP enrollment).

RESULTS

• Of the original 99 patients enrolled in SAUP during 2017, 13 were excluded for not following up with care.

• Mean Age = 46.5 years
• Mean BMI = 30.8 kg/m²
• 97.7% Hispanic/Latino
• 93.0% Spanish as Preferred Language
• 51.2% Female
• 84.9% lived within two Milwaukee County zip code boundaries

Clinical History of SAUP population

• 24.4% diabetes
• 20.9% hypertension

Managed Care Measures

• Mean time between PCP visit and specialty service -30.9 days (Median 25.0 days)

Figure 1 describes baseline patient demographics, clinical history, and managed care measures.

Figure 2 depicts the percentage of specialty services to which patients were referred.

• Mean charges/patient significantly increased between 2016 and 2017 ($7,048.00 vs. $35,091.00; p=0.002) and between 2016 and 2018 ($7,048.00 vs. $14,552.00; p=0.034).

• However, mean charges/patient significantly decreased between 2017 and 2018 ($35,091.00 vs. $14,552.00; p=0.013).

• Patient charges year after enrollment were correlated with Charlson score and patient charges prior to enrollment.

CONCLUSIONS

Charge increases during the years of specialty episode care are reflective of care delivered. A significant decline in the number of no show visits indicates the possible development of a clinic relationship, often seen when patients establish trust in a medical home.

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