

Zur empirischen Ermittlung von evidenzbasiertem Patientennutzen in der Hausarztzentrierten Versorgung (HzV)

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The work examines the benefits patients get from GP-centered care in comparison to the results of conventional standard care. The investigation focuses on the patient as the receiver of medical care and defines the technical term “patient benefit”. Causal effects between a patients decision about participating in GP-centered care on one hand and achieved patient benefit on the other is demonstrated in a model of ambulatory care. To operationalize the model only indicators are used, whose advantageousness for the patient is medically well proven. For the ambulatory sector this applies especially for the QISA-catalogue of the AQUA-Institute.

The empirical analysis is carried out by using routine data from health insurance companies for over 430,000 patients. The comparison groups are formed by using the propensity-score-matching method. The results show that especially type 2 diabetes patients and patients over 70 years benefit from the GP-centered care. In both patient groups, the hospitalization rate is partly significantly lower than in the standard care.

The work highlights on one hand the need for epidemiological evidence when assessing the quality of care and shows on the other hand the limitations of the secondary data analysis. Furthermore the empirical findings justify a recommendation for patients to participate in the GP-centered care and support the demand for an expansion of the offer of alternative care models.