

Women’s Centered Medical Home: Offering Access to Quality Care in the Public Safety Net

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BACKGROUND

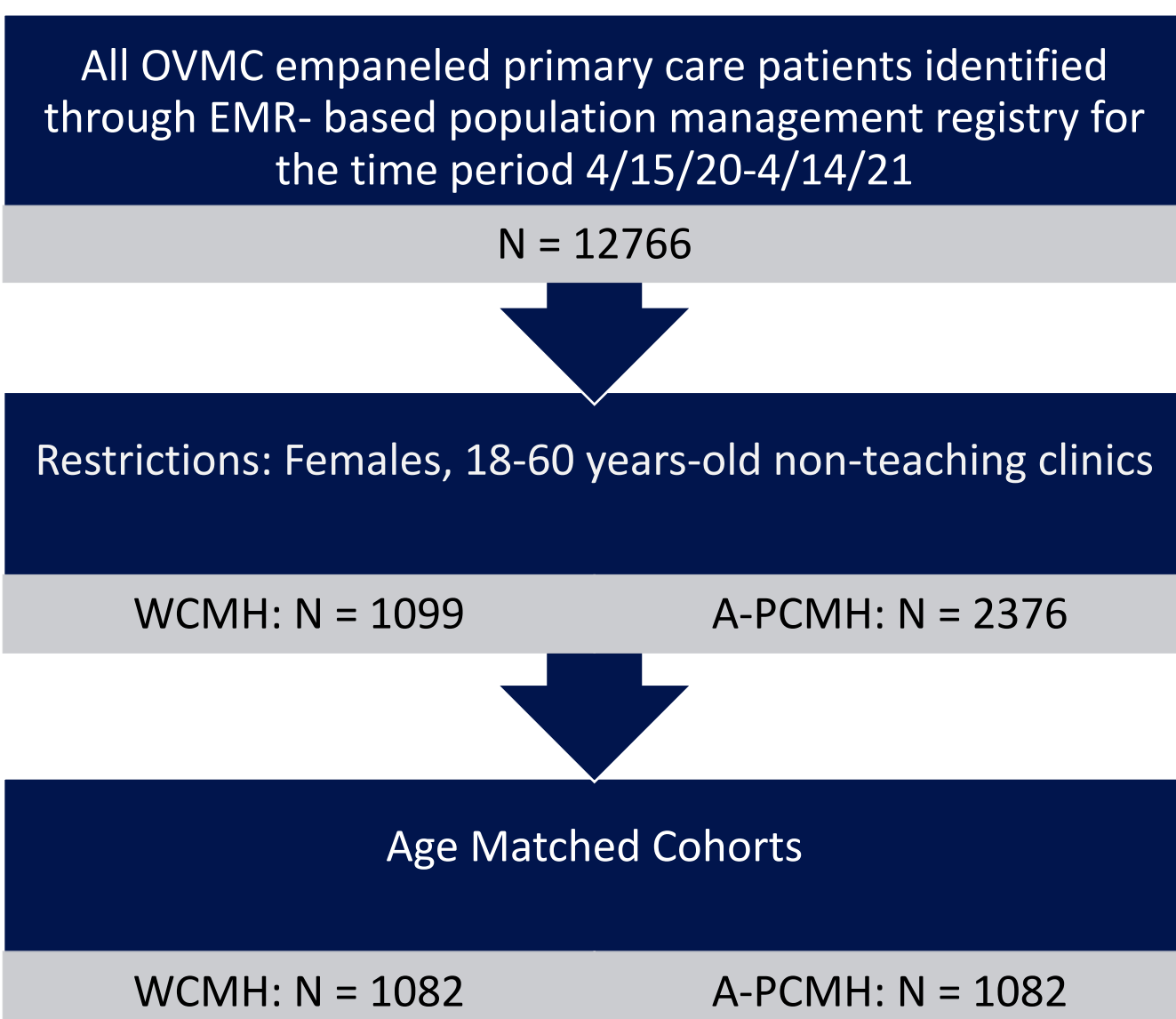
Women in underserved communities face greater challenges when seeking access to healthcare and have worse health outcomes¹. This is primarily due to increased burdens from social determinants of health (i.e. navigating time off work, childcare, and transportation) and having inadequate insurance coverage. Patient-Centered Medical Homes (PCMH) with primary care physicians have been established as part of the safety net in order to improve access and quality of care². At Olive View-UCLA Medical Center (OVMC), the first Women’s Centered Medical Home (WCMH) was established June 2014 in which OBGYN physicians provide women’s and primary care³.

OBJECTIVE

Determine the performance of the WCMH in meeting screening guidelines for women’s health and primary care preventative measures:

- As set forth by the CA Department of Health Care Services’ Quality Incentive Pool (QIP) Program (PY4)
- As compared to an Adult PCMH (A-PCMH) at OVMC

METHODS



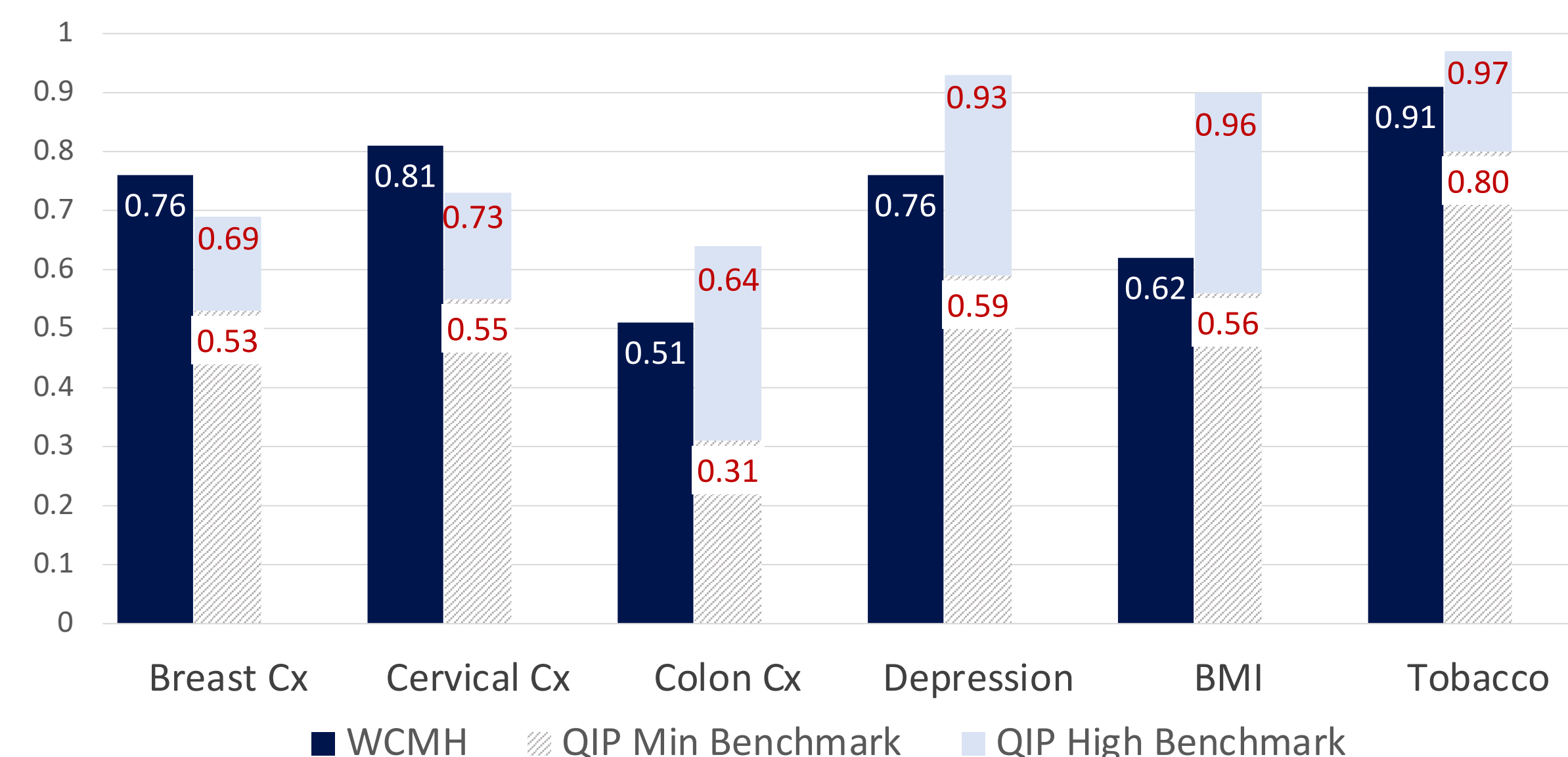
- Quality Metrics:**
Age-based indications and frequency of screening follow national standards set by Accountable Care Organizations (ACO), National Quality Forum (NQF), United States Preventative Services Task Force (USPSTF), or American Cancer Society (ACS)
- Statistical Analysis:**
 - Chi-Square Test with p-value < 0.05 significant
 - Post Hoc Analysis with Bonferroni correction for demographic data, p-value < α significant

Patient Cohort Characteristics

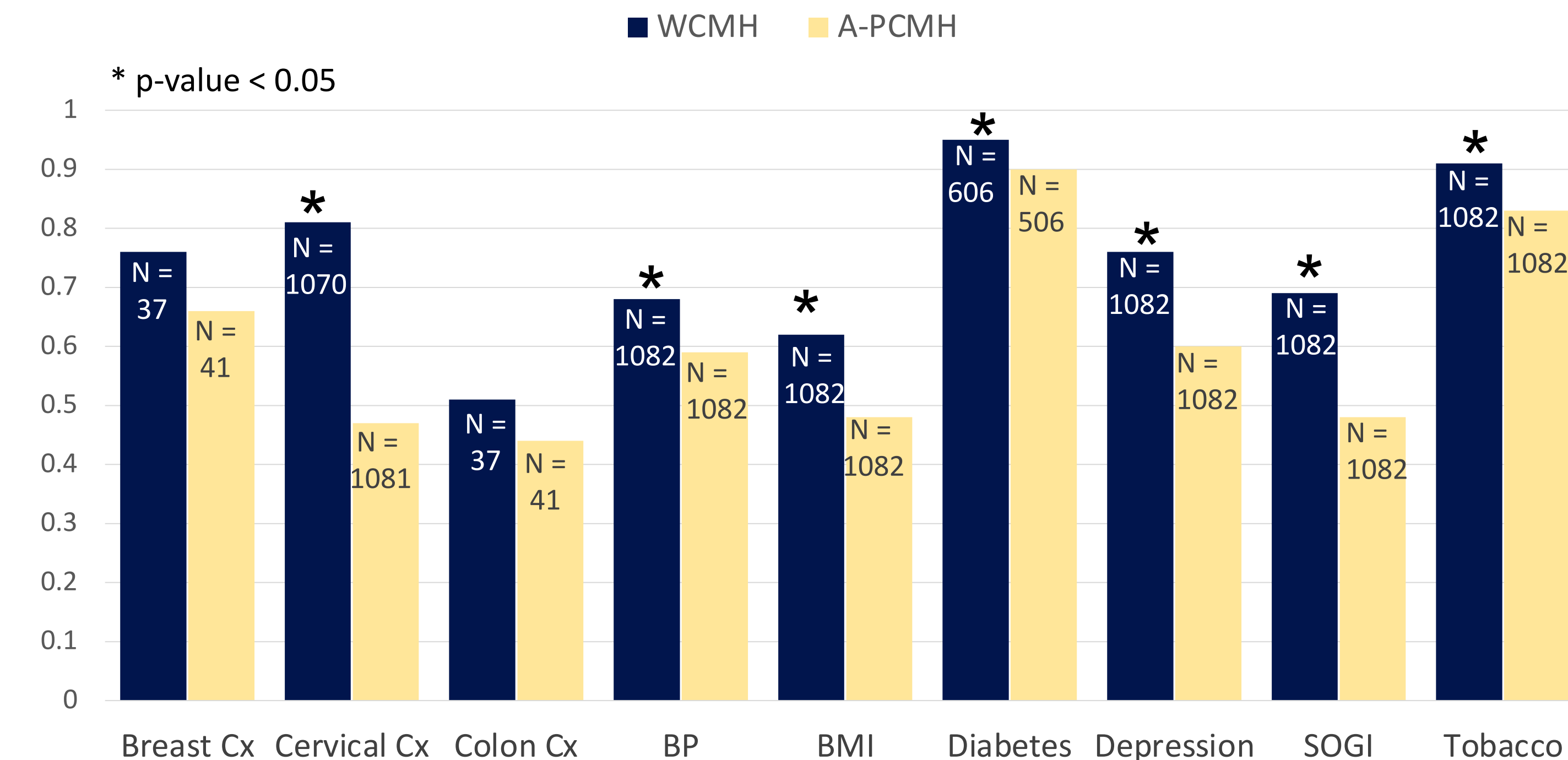
Demographics	WCMH (N=1082)	A-PCMH (N=1082)	p-value
Race/Ethnicity			$\alpha = 0.005$
Latino	77.60%	66.00%	< 0.001*
Black	2.77%	2.87%	0.90
White	1.20%	2.31%	0.05
Asian	4.15%	2.96%	0.13
Other	14.23%	26.15%	< 0.001*
Preferred Language			$\alpha = 0.025$
Spanish	45.28%	31.61%	< 0.001*
English	53.88%	65.24%	< 0.001*
Other	0.83%	3.14%	< 0.001*
Payer Source			$\alpha = 0.006$
Medi-Cal/Medicare	42.62%	69.57%	< 0.001*
Restricted Medi-Cal	45.39%	17.66%	< 0.001*
ATP/ Self Pay	9.42%	7.38%	0.09
Other State Program	2.58%	5.37%	0.001*

* p-value < α

WCMH QIP Screening Performance



WCMH vs A-PCMH Screening Performance



CONCLUSIONS

- The WCMH at OVMC exceeded minimum QIP benchmarks for all metrics and exceeded high benchmarks for breast and cervical cancer
- The WCMH at OVMC completed significantly more screenings in all categories except breast cancer and colon cancer when compared to A-PCMH
- Women’s Centered Medical Homes can serve as effective primary care sites for women in underserved communities

FUTURE DIRECTIONS

- Assess effects of demographics (race/ ethnicity, language, insurance type) and number of comorbidities on screening outcomes
- Implement more WCMHs in under-resourced settings to provide comprehensive care to women with limited ability to access care

REFERENCES: 1. Ramondetta LM, Meyer LA, Schmeler KM, Daheri ME, Gallegos J, Scheurer M, Montealegre JR, Milbourne A, Anderson ML, Sun CC. Avoidable tragedies: Disparities in healthcare access among medically underserved women diagnosed with cervical cancer. *Gynecol Oncol*. 2015 Dec;139(3):500-5. doi: 10.1016/j.ygyno.2015.10.017. Epub 2015 Oct 21. PMID: 26498912;PMCID: PMC7418500.
2. Chu L-H, Tu M, Lee Y-C, Sayles JN. The Impact of Patient-Centered Medical Homes on Safety Net Clinics. *The American Journal of Managed Care*. <https://www.ajmc.com/view/the-impact-of-patient-centered-medical-homes-on-safety-net-clinics>. Published August 2016.
3. Hurd WW, Barhan SM, Rogers RE. Obstetrician-Gynecologist as Primary Care Provider. *THE AMERICAN JOURNAL OF MANAGED CARE*. September 2001.