

Health reform: How community health centers could offer better access to subspecialty care

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The Affordable Care Act will fund more community health centers, making primary care more accessible to the underserved. But this may not necessarily lead to better access to subspecialty care.

In a new study, researchers from the David Geffen School of Medicine at UCLA and colleagues investigated the ways in which [community health](#) centers access subspecialty care. They identified six major models and determined which of those six offered the best access:

Tin cup

Center providers rely on [personal relationships](#) with informal networks of subspecialists (the most prevalent [model](#)).

Hospital partnership

Center has a contract with a community hospital for subspecialty care.

Buy your own

Center hires subspecialists.

Telehealth

Telecommunications equipment is used to connect patients with subspecialists.

Teaching community

Centers train primary-care resident physicians and integrate subspecialists as faculty.

Integrated system

Centers are integrated with local government health systems or safety-net hospitals having subspecialist networks.

Of the six, the researchers found that the "integrated system" model offered the most comprehensive access to subspecialty care.

Payment reform is needed to move community [health centers](#) toward becoming part of integrated systems. Two new initiatives of the Centers for Medicare and Medicaid Services (CMS) can help. First, the State Innovation Models initiative will provide \$275 million for states to plan, design and test new payment and delivery system models that aim to involve all payers and providers in the state. Also, the CMS has issued guidance describing pathways for how states can design and implement integrated care models for Medicaid populations. The new research offers guidance for states in creating such models.

The research is published in the August issue of the journal *Health Affairs*.

More information: content.healthaffairs.org/content/31/8/1708.abstract

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