

Care costs lower for practices with more high-needs patients

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(HealthDay)—Lower spending and utilization are seen for practices with

a higher proportion of high-needs patients, according to a study published in the March issue of *Health Affairs*.

Dori A. Cross, from the University of Michigan in Ann Arbor, and colleagues examined two scale-related characteristics that could predict how well physician practices delivered care to a high-needs population: the proportion of high-needs [patients](#) in the practice and practice size. Data from four years on commercially insured, high-needs patients in Michigan primary care practices were assessed.

The researchers found that, compared with practices with smaller proportions of high-needs patients, those with a higher proportion of high-needs patients (>10 percent of the practice's panel) had lower [spending](#) and utilization. Small practices with one or two physicians had lower overall spending than large practices, but not less utilization. Performance on a composite measure of process quality was slightly worse for practices with a substantial proportion of high-need patients and for small practices, compared with their associated reference group.

"Practices that treat a high proportion of high-needs patients might have structural advantages or have developed specialized approaches to serve this population," the authors write. "If so, this raises questions about how best to make use of this knowledge to foster high-value care for high-needs patients."

More information: [Abstract](#)
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