

Intensive management program benefits high-risk patients

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(HealthDay)—For high-risk patients, use of an intensive management

program is associated with greater receipt of outpatient care with no increase in total costs, according to a study published in the June 19 issue of the *Annals of Internal Medicine*.

Jean Yoon, Ph.D., from the U.S. Department of Veterans Affairs in Menlo Park, California, and colleagues examined whether augmenting usual primary care with team-based intensive management reduces utilization and [costs](#) for high-risk patients in five U.S. Department of Veterans Affairs medical centers. A total of 2,210 patients with an average of seven chronic conditions were randomized to intensive management and usual care (1,105 patients to each).

The researchers found that 44 percent of the patients assigned to intensive management received intensive outpatient care, with three or more encounters in person or by telephone, and 18 percent received limited intervention. The mean inpatient costs decreased more for the intensive management than the usual care group from the pre- to post-randomization periods (-\$2,164). Compared with the usual care group, outpatient costs increased more for the intensive management group (\$2,636), which was driven by more use of primary care, home care, telephone care, and telehealth. Before and after randomization, the mean total costs were similar in the two groups.

"High-risk patients with access to an intensive [management](#) program received more [outpatient care](#) with no increase in total costs," the authors write.

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