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SPECIAL TOPICS

ORIGINAL RESEARCH: FEATURED ABSTRACT FROM THE
19TH NATIONAL CONFERENCE ON CHRONIC DISEASE PREVENTION AND CONTROL

Overcoming Barriers in Access to Specialized Health Care Services

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Track: Policy and Legal

The objective of this interdisciplinary statewide initiative was to identify factors limiting access to specialty care and to develop strategies to overcome these barriers. We focused on barriers that are amenable to resolution through health care policy, regulation, or statute and on innovative strategies that could be implemented within the resource constraints of our health care system.

A Quality Initiatives Workgroup (QIW) of the New York State Public Health Council (PHC) was convened to examine issues and potential resolutions associated with disparities in access to specialty care for New York State residents. The work group was composed of members of the PHC and experts from pertinent fields. In addition to gathering input from QIW panel members on clinical, analytical, and financial issues, the group set out to gather information through roundtable discussions with a broad range of experts (including regulators, insurers, providers, researchers, patient advocates, medical educators, and professional societies), literature reviews, and responses from a survey aimed at gaining a broad perspective on barriers and potential solutions to accessing specialty care.

The QIW's review of expert testimony, questionnaire responses, and research concluded that disparities in access to care exist and that these disparities have a significant and costly impact on the overall health of New York State residents. Factors associated with barriers to appropriate health care fall into the following categories: health care delivery issues (including provider awareness and implementation, patientprovider communications, and system navigation issues), availability of services, insurance coverage, and applied research and quality initiatives. Specific issues, goals, and recommended actions are identified in each of these areas. Sufficient evidence is available to support implementation of well-planned strategies aimed at reducing existing inequities. In evaluating strategies for overcoming barriers, the QIW recommends an initial focus on seven clinical areas: heart disease, stroke, cancer, major orthopedic conditions, diabetes, end-stage renal disease, and HIV/AIDS. These diseases impact a substantial portion of the population and have relatively mature and accepted clinical treatment protocols (thus making them amenable to monitoring). Additionally, inequities to care have been identified in the literature for these diseases.

Recommended actions — some of which are being implemented — will be discussed. These recommendations will provide a stimulus, foundation, and preliminary framework for groups to build upon; offer guidance for evaluating the provision of specialized services; identify challenges that cut across the health care sector; and provide a road map for remediation.

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