Use of Healthcare Services among Children with Disabilities Enrolled in an Accountable Care Organization

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What was the research about?
Children with disabilities have complex health needs that require care from many different doctors, nurses, and healthcare providers. These providers may be in different offices and locations. They may not coordinate with each other to care for patients. Accountable care organizations, or ACOs, are groups of healthcare providers, such as doctors and home health workers, who work together to provide patient care. The effects of ACOs on the care that children with disabilities receive are unclear.

In this study, the research team looked at the use of healthcare services by children with disabilities who took part in ACOs compared with children who didn't take part. The ACOs helped to coordinate children's care.

What were the results?
Compared with children not in ACOs, children in ACOs had more use of

- Check-ups
- Emergency room, or ER, visits
- Specialty mental health services
- Antidepressant, anticonvulsant, and antianxiety medicines
- Follow-up doctor visits after starting medicines for attention-deficit/hyperactivity disorder
- Home-based physical, occupational, and speech language therapies

Compared with children not in ACOs, children in ACOs had the same use of

- Primary care doctor visits
- Hospital visits
- Primary care and hospital follow-up visits after being in the hospital
- Antipsychotic and asthma medicines
- Office-based physical, occupational, and speech language therapies

Compared with children not in ACOs, children in ACOs had less use of

- Home health services

What did the research team do?
The research team looked at Ohio Medicaid claims records from 2011 to 2016, for 64,383 children with a range of disabilities. These disabilities included physical or behavioral health problems that lead to struggles in daily life. The team compared children's use of healthcare services over time among children who took part in ACOs and those who didn't. This analysis was part of a larger study that looked at the experiences of children with disabilities and their
families with care coordination before and after taking part in ACOs. The team found that caregivers didn’t perceive that taking part in ACOs increased their access to care coordination services.

For children in ACOs, 65 percent were white, and 29 percent were African American. The average age was 12, and 66 percent were boys. Of the children in ACOs, 72 percent of parents or caregivers reported getting help with coordinating care. For children not in ACOs, 50 percent were white, and 46 percent were African American. The average age was 13, and 65 percent were boys.

Families of children with disabilities, health organizations, and doctors gave input on the study.

What were the limits of the study?
The three-year follow-up may not capture the long-term effects of ACO use. The study looked only at services covered by Medicaid. Children may have used other health services not covered by Medicaid.

Future research could look at healthcare use for children with disabilities in ACOs located in other regions and states. Research could also look at why children who used ACOs in this study visited the ER more than those who didn’t use ACOs.

How can people use the results?
States and policy makers can use these results to learn more about how statewide ACO programs affect the use of healthcare services for children with disabilities.

To learn more about this project, visit www.pcori.org/Song224.