[492] Outcomes of Outpatient Integrated Medical Care Services across Times in a Medical Center

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**Background:** The majority of patients with multiple chronic diseases tended to visit single hospital persistently, which accounted for 3.5% of all beneficiaries and 19.3% of covered national health insurance expenses in Taiwan.

**Objectives:** The aim of this study was to examine the outcomes change across time in 2013 after implementing the Integrated Medical Care (IMC) services for loyal outpatients.

**Methods:** Among the listed 3271 patients, who were loyal health care users with multiple chronic illnesses and selected by National Health Administration, were involved in IMC services in China Medical University hospital (CMUH) since April 2013. Such IMC services were established to offer the patient-centered integrated, geriatric and/or pharmaceutical care clinics, in addition to via usual primary and specialty clinics, in the outpatient units via clinical practitioners since 2010. The outcomes, i.e., changes of outpatient medical expenditure, number of outpatient visit, emergency department (ED) visits, inpatient visits (IP) and number of prescribed medication (Rx) in CMUH across months in 2013, were examined to compare with the first month of implantation (April) using nonparametric analysis approaches and time series analysis.

**Results:** The changes of medical expenditures, number of outpatient visits and Rx per person per month were statistically significant different (e.g., decreasing in June, September and increasing afterward) and relatively less, while comparing to that in April in 2013. However, the numbers of IP and ED visits were not statistically significant different across months.

**Conclusions:** The change patterns of outcome indicators across months in 2013 were various, while the trends of total medical expenditures, number of outpatient visit and prescribed medications were similar but relatively less than that in April. Further evaluation for such trends would be helpful to broadcast the changes in 2014 whenever the IMC services are continuously implemented in CMUH.

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