



Effective Health Care

Home-based Primary Care Interventions

Nomination Summary Document

Results of Topic Selection Process & Next Steps

- The topic, *Home-based Primary Care Interventions*, will go forward for refinement as a systematic review. The scope of this topic, including populations, interventions, comparators, and outcomes, will be further developed in the refinement phase.
- When key questions have been drafted, they will be posted on the AHRQ Web site and open for public comment. To sign up for notification when this and other Effective Health Care (EHC) Program topics are posted for public comment, please go to <http://effectivehealthcare.ahrq.gov/index.cfm/join-the-email-list1/>.

Topic Description

Nominator(s): Individual

Nomination Summary: The nominator is interested in the comparative effectiveness of physician house calls on outcomes among the elderly, disabled, and those with multiple comorbidities. The nominator is interested in a range of interventions that deliver primary care services within the home. These include multidisciplinary, team-based interventions, as well as those conducted by private practice physicians. The nominator acknowledges uncertainty regarding the comparative effectiveness related to outcomes such as mortality and disease severity.

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Population(s): Elderly, disabled or homebound adults living in the community who require primary care for a chronic disease or disability

Intervention(s): Home-based primary care programs utilizing in-home visits for chronic disease management or health maintenance.

Comparator(s): Usual care, defined as scheduled or unscheduled care in an outpatient clinic

Outcome(s):

Mortality, quality of life, patient satisfaction, nursing home admissions, Health care utilization (e.g., ER visits, hospital admissions), cost, relevant disease-specific outcomes (e.g., glycemic control, depression, blood pressure control)

Policy and/or Clinical Context from Nomination: The Independence at Home demonstration currently being conducted by CMS may lead to the expansion of home-based primary care programs in Medicare populations and populations covered by private insurance.

Key Questions from Nominator: What is the comparative effectiveness of physician house calls on outcomes and total cost in disabled and elderly populations with multiple comorbidities?

Considerations

- The topic meets all EHC Program selection criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)
- Home-based primary care refers to models of care in which preventive or acute care is delivered in the patient's home rather than in an office-based clinic or acute-care setting. Home-based primary care interventions appear to have increased in prevalence since the 1990s, which may be reflective of the aging of the US population and an increase in the number of individuals living with physical or cognitive impairments who may benefit from services provided in the home.
- Efforts such as the Independence at Home Demonstration by the Centers for Medicare & Medicaid Services (CMS) are currently underway and aim to provide Medicare beneficiaries with longitudinal primary care coordination that includes home visits. (For more information, see <http://innovation.cms.gov/initiatives/independence-at-home/>)
- There are also a number of recently published studies evaluating these care delivery models. An AHRQ systematic review can therefore be used to inform clinical decisions about the use of these services and could identify potential research gaps.