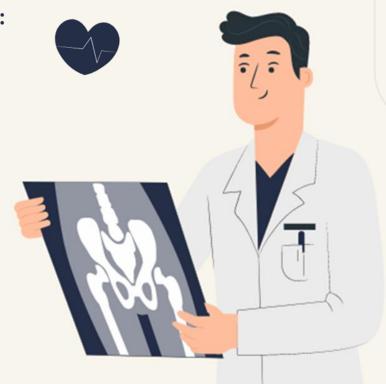
Family Physician Integrated Care System in Taiwan:

The Community Healthcare Group (CHCG), a collaborative model between PHC and Hospitals for high quality community healthcare

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Why A New Declaration

- While we have made great strides in health outcomes globally over the past 40 years, we
 face many ongoing challenges. A primary health care (PHC) approach is the most effective
 way to sustainably solve today's health and health system challenges.
- The PHC approach is foundational to achieving our shared global goals in Universal Health Coverage (UHC) and the health-related Sustainable Development Goals (SDGs).
- The new declaration has renewed political commitment to primary health care from Governments, non-governmental organizations, professional organizations, academia and global health and development organizations. It will be used to inform the UN General Assembly high-level meeting on UHC in 2019.
- The new declaration was also a chance to commemorate the 1978 Alma-Ata Declaration on Primary Health Care, and reflect on how far we have come and the work that still lies ahead.

The Importance of Primary Health Care

- Improve health quality
- Reduce costs
- Increase national health status
- Reduce health disparities

Medical centers

Regional and community hospitals

Primary Health Care

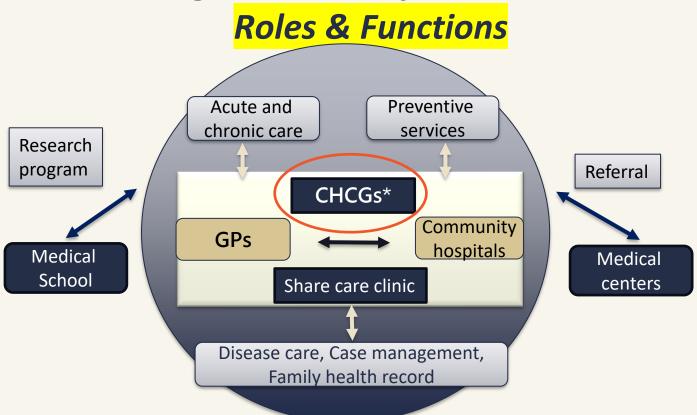
Source: Starfield B, Shi L, Macinko J. Contribution of primary care to health systems and health. Milbank Q. 2005;83(3):457-502.

Family Physician Integrated Care Plan starting 2003

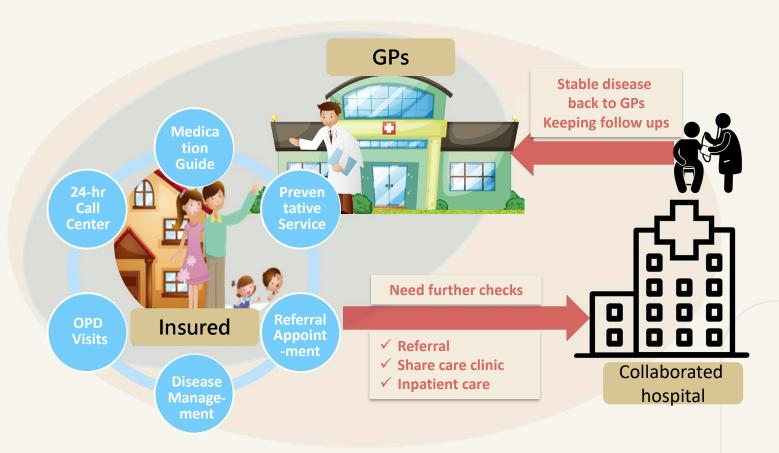
- 5 to 10 GPs, one fifth of which specialized in FM
- Recruit members from patients encountered
- Continuous and comprehensive care
 - o 24-hour call center
 - Health promotion
 - Disease prevention and treatment
 - Case management
 - Patient referral
- Regular meeting and sharing experiences
- Shared OPD clinic in the collaborative hospitals

Source: Department of Health, Taiwan, 2003

Models of Integrated Care System in the Community



Family Physician Integrated Care



Reimbursement Scheme

- Medical expense saved
 - Virtual Capital Actual Expense
- Per member administration fee
- Quality performance
 - o 24-hour call center
 - Health promotion and protection
 - Ambulatory care and acute care KPIs
 - Chronic disease care outcomes
 - Collaboration with responsible hospital to improve quality and continuity in patient care
 - Loyalty to the health care group
- The fee-for service payment was not effected whether join this program or not

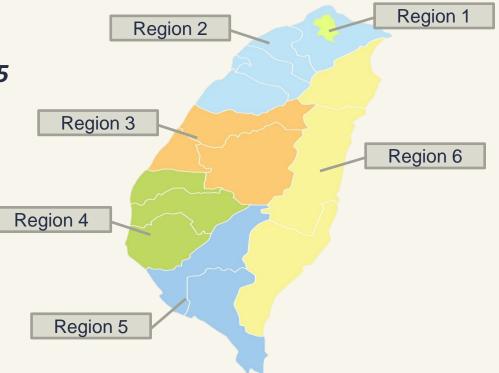


Community Health Care Groups (CHCG) in Taiwan

• 6 regions

• Totally 609 CHCGs in 2022

• Operational budget NTD 3.95 Billion (US\$ 0.12 Billion)



Physicians and Enrollees in the Project (2022)

- Clinics participated in CHCGs
 - Around 5,664 (53.5% of total clinics)
- Physicians participated in CHCGs
 - Around 7,833 (46.3% of total physicians)
- Enrollees
 - Around 6,002,000 (24.8 % of total population)

Partnership

Demonstration of a CHCG SanChong Community Health Care Groups

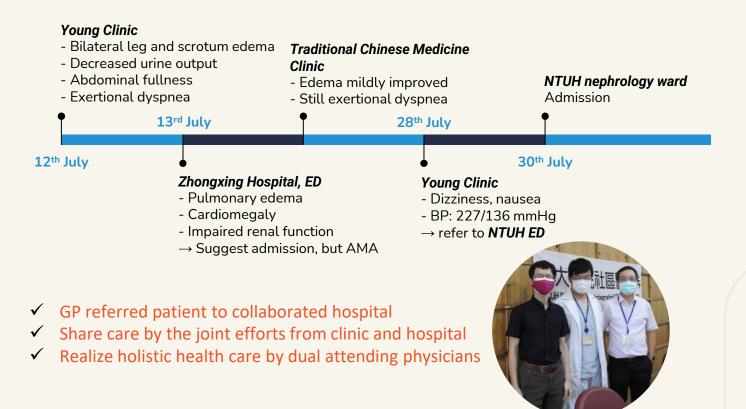
和尚港 通河西街二和 下竹圍 **CHCGs** 108 大同區 民生西路 五王谷 Green dots are CHCG clinics Yellow cross are hospitals Red circle is the imaginary line of the community

Collaborated community hospital

Collaborated
Medical center
NTUH

Case Study

National Taiwan University Hospital – SanChong CHCGs



SeminarsNational Taiwan University Hospital – SanChong CHCGs





Workshops

National Taiwan University Hospital – SanChong CHCGs









Health Education

National Taiwan University Hospital – SanChong CHCGs





Vaccination (COVID-19 & influenza)





Clinic Anniversary
Celebration





Prevent Disability in Community







During COVID-19 pandemic, Virtual meeting to discuss the outcome of preventing disability of the elderly (Jan 20, 2021)

Feedbacks

National Taiwan University Hospital – SanChong CHCGs

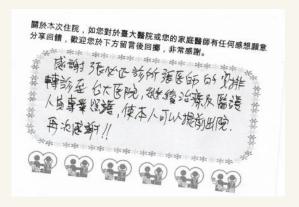
Caring Cards for Patients



Thank-you Cards for Physicians



Feedbacks from Patients





Performance

Outcomes in 2021

Family Physician Integrated Care Plan



296 collaborated hospitals 5,344 share clinics



24,458 attendees 736 events



47,034 calls

Medical care collaboration

Health education activities

24-hour call consultation

Patient Satisfaction

• 80% of the enrollees satisfaction on CHCGs





• 90% of the enrollees satisfaction on two-way referral

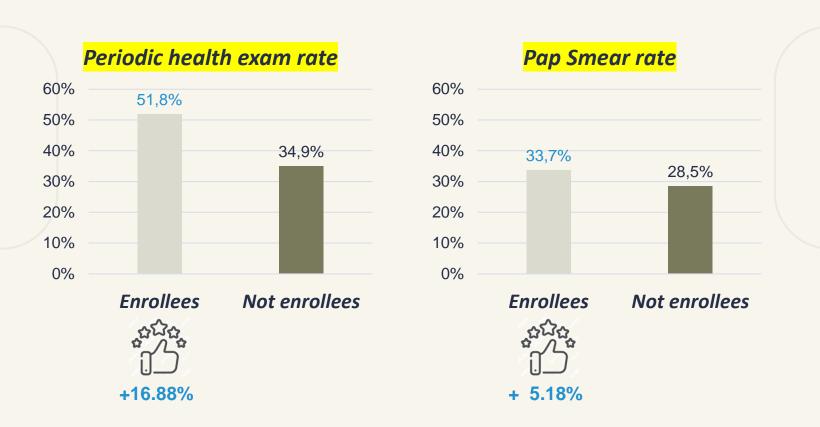
• > 80% of the enrollees preferred consultation with their family doctors before seeking medical attention in hospitals.

Family Physician Integrated Care Plan

- Reduce clinic visits, admission, medical expense and health insurance cost
- Increase satisfaction on medical care
- Strengthen the service of patient referral
- Emphasis on health promotion to have good results on disease prevention
- Pay for performance to ensure quality of care
- The design on performance feedback leads to a variety of business models to better health

Source: Chang et. al. The outcome and prospect of integrated care through family physician system. TMJ. 2011;54(8): 466-470.

Higher Adherence to Preventive Program



Saving Medical Expenditure

Family Physician Integrated Care Plan

Average medical expenditure among enrollees is lower than not enrollees during 2012 to 2021 (difference is ~ USD 300)



■ enrollees
■ not enrollees

Source: National Health Insurance Administration

Reducing OPD Visits Family Physician Integrated Care Plan

Average NO. of OPD visits among enrollees is lower than not enrollees during 2012 to 2021 (difference is ~ 2 visits)



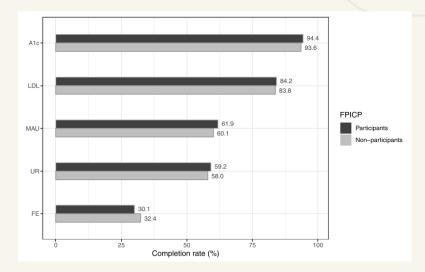
■ enrollees
■ not enrollees

Source: National Health Insurance Administration

Research evidence on performance of FPICP



Participation in the FPICP was associated with lower hospitalization for COPD/asthma and for diabetes or its complications.





Adherence of these tests among enrollees is higher than not enrollees, in terms of HbA1c, LDL, microalbumin test, and Urinalysis

Public Health Platform & Collaboration

Social Services

- Solitary elderly home care (since 1995)
 - o Since 1995
- Free meal delivery
 - o 180,000 meals in total
- Home visits
 - o 14,000 visits in total





CHCGs Helped in Infective Disease Control An Example of Flu Attack

Interventions provided by CHCGs

- Fever check-up
- H1N1 quick screening
- Anti-viral drug prescription and dispense

Outcomes

In Taipei, 284 clinics worked with 12 public health centers and 1 local health bureau to prevent virus transmission. Individuals were able to reach one clinic in 8-minute distance*

Services Can Be Added On To The Network

- H1N1
- Enterovirus oral screening
- Cancer screening
- Smoking cessation
- Weight control
- Vaccination
- And more...

Role and Responsibility of GPs 6 Anti-COVID-19 Strategies



Telehealth:
Home care for
mild cases



Anti-COVID-19 vaccination



Telehealth:
Diagnosis through
fast screening



PCR testing in clinics



Telehealth:
Evaluation and
prescription



Support fever check-up stations in the community



CHCGs' Efforts to COVID-19 Containment

Telemedicine care

- **1.** 609 CHCGs (100%) provide telemedicine care.
- **2. 4,716** *clinics from CHCGs* was the majority (62.7%) among total 7,520 clinics national wide.

Tele-home Care

- 1. 608 CHCGs (~100%) provide Tele-home care.
- **2.** 3,469 clinics from CHCGs was the majority (78%) among total 4,427 clinics national wide..

CHCGs' Efforts to anti-COVID-19 Vaccination

Multiple Channels

- Vaccination rate of *Taipei City Citizens* is the
 highest, compared to other
 cities.
- 2. Over half citizens vaccinated in clinics
- 3. CHCGs also went to longterm care facilities and homes to vaccinate those elderly or disability.

High Participation

- 1. 595 CHCGs (>99.5%) joined anti-COVID alliance.
- 2. 2,456 clinics from CHCGs was the majority (82.6%) among the 2,972 clinics national wide.

Case management

1. CHCGs *proactively follow up* the enrollees
who haven't received 3
doses of anti-COVID-19
vaccines, according to the
not-vaccinated list provided
by the NHIA.

Future Plan

New Goals

- Collaborate with National Health Insurance Administration to enroll the patients with high medical expenditure to the CHCGs, trying to reduce the unnecessary cost
- Collaborate with Health Promotion Administration to educate patients and proactively manage chronic diseases.
- Collaborate with Ministry of Health and Welfare to bridge community care to long-term care system

Key performance indicators

- ✓ Loyalty to CHCGs
- ✓ Risk factors control of chronic diseases
- √ 24-hour consultation
- ✓ Health promotion and protection

Value of CHCGs

Health Policy Participation

- 1. Check NHI PharmaCloud System
- 2. Upload test results timely
- 3. Assist enrollees to download My Health **Bank** and apply to health management

Health Promotion

- 1. Control *high risk life style* among patients with high blood pressure, high blood sugar or high cholesterol
- 2. Provide *health education* in community

Health Prevention

1. Periodic health exam for adults



2. PAP smear test



3. Fecal occult blood test

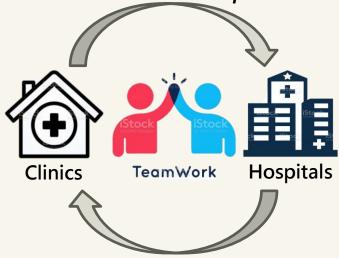


Gate keeper

- 1. Influenza vaccination rate among citizen over 65 y/o
- 2. First encountered care for acute infectious disease to secure the capacity of hospitals for severe cases

The Best Collaborative Model Between Hospitals and Clinics

CHCGs are the front-line gate keepers to refer patients in need to collaborated hospitals



CHCGs are the bridges to take care of the discharged patients back to community.



the Beitou Community Medical Group in Taipei City regularly holds meetings with collaborated hospitals (August 4th, 2021)



Thank You