

# AAFP News: *AFP Edition*

## *Policy and Health Issues in the News*

### **Study Shows Primary Care Relationship Reduces ED Visits and Hospitalizations**

Results from a recent study show that patients who have an ongoing relationship with their primary care clinician are less likely to visit the emergency department (ED) or be admitted to the hospital. Researchers in California sought to learn whether insurance coverage and a consistent relationship with a primary care clinician could reduce rates of hospitalizations and ED visits. They tracked uninsured patients who had experienced barriers to health care access; most were women older than 50 years who spoke English as their primary language. During the first two years of the study, patients were not required to exclusively visit their chosen primary care clinician. As a result, only 40% of visits during the study's second year were adherent to the chosen primary care clinician. Nonadherence contributed to high rates of ED visits and hospitalizations. When the study began its third year, patients were required to visit their chosen primary care clinician for nonurgent care, and could change primary care clinicians only twice per year. Patients who stayed with their chosen primary care clinician were more likely to have no ED visits (2.1% change) or hospital admissions (1.7% change). For more information, go to <http://www.aafp.org/news/practice-professional-issues/20150805califprimcare.html>.

### **Task Force Targets Opioid Abuse**

The American Medical Association Task Force to Reduce Opioid Abuse has released the first of several national recommendations to address the growing epidemic of opioid abuse in the United States. Comprised of 27 physician organizations, including the American Academy of Family Physicians (AAFP), the task force was formed to identify best practices to combat opioid abuse and to swiftly implement these practices in physician offices across the United States. The group will initially focus on urging physicians to register for and use state-based prescription drug monitoring programs (PDMPs) as part of their decision-making process when considering treatment options. The initiative also seeks to significantly enhance physicians' education about safe, effective, and evidence-based prescribing with an online resource that offers information on PDMPs, the risks and benefits of prescribing opioids, managing pain, treating substance use disorder, and overdose prevention. For more information, go to <http://www.aafp.org/news/health-of-the-public/20150729opioidtaskforce.html>.

### **Insurance Mergers May Reduce Choice, Raise Costs, AAFP Warns Regulators**

Insurance companies that already have an influx of new patients could reduce the benefits of competition if federal regulators permit the proposed mergers of large carriers, the AAFP recently warned government officials. Four of the five largest health insurance companies have announced plans to pursue mergers: Aetna with Humana, and Anthem with Cigna. Two of the largest Medicaid managed care companies, Centene and Health-Net, have also announced plans to merge. In response, the AAFP sent letters to the Department of Justice's Antitrust Division and to congressional leaders about the consequences of consolidation by large insurers, including the potential effects on patient care. "The AAFP is profoundly concerned that these mergers, if allowed to be finalized, may result in decreased choice for consumers, higher costs for purchasers, and potentially establish mass disruptions in continuity of care due to changing and narrowing networks of physicians and hospitals," the letters read. The AAFP asked government regulators and elected officials to review the proposed mergers carefully to ensure that the health profession can continue to be innovative, deliver quality care, and reduce costs. For more information, go to <http://www.aafp.org/news/government-medicine/20150729mergers.html>.

### **Groups Call for Results from All Clinical Trials**

Hundreds of thousands of Americans have taken part in clinical trials that have never reported their findings. As a result, information from these trials could be lost forever, leading to missed opportunities to educate physicians in the treatment of their patients. This issue led to the launch of the AllTrials USA campaign, which is calling for all past and present clinical trials in the United States to be registered and report their results. The AAFP has joined with the other medical societies, universities, patient-support groups, and consumer groups in support of the initiative. AllTrials has already seen some success, including from its advocacy for the new European Union law that will require all drug clinical trials in member countries to be publicly registered and report their results. For more information, go to <http://www.aafp.org/news/health-of-the-public/20150729alltrials.html>.

— AAFP AND AAFP NEWS STAFF

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