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The effects of diabetes shared care program completion on diabetes related preventable hospitalizations in Taiwan

Yu Hsiu Lin¹, Yia Wun Liang² and Hsiao Feng Chang³

¹National Chung Cheng University, Taiwan

²National Taichung University of Science and Technology, Taiwan

³Cheng Ching Hospital-Chung Kang Branch, Taiwan

Introduction & Aim: Previous studies showed that diabetes patients enrolled in the diabetes shared care program have better health outcomes and healthcare utilization than their counterparts, however, most of these studies results were limited in generalization because of the sample size. Accordingly, this study aims to investigate the effects of the completion of diabetes shared care program on Preventable Hospitalizations (PH).

Method: This study applied a longitudinal design to examine 2011-2014 claims data capturing health care utilization obtained from the academic database of National Health Research Institute. All study subjects aged 18 and over who were diabetes patients. PH is defined based on AHRQ's PQIs. Multilevel logistic regression has been used to explore the effect of the completion of diabetes shared care program on diabetes-related preventable hospitalizations, after adjustment for other variables.

Results: Patient who were completely enrolling the diabetes shared care program, 40-64 years old group, without catastrophic and living in the area of higher physician density were found to have lower probability of having PH, while female, living in Northern/Central/Southern divisions area, having more comorbidity and low income level were found to have higher probability of having PH, after adjusting for individual and area characteristics.

Conclusion: This study demonstrated that the completion of the DM shared care program affects the probability of PH. Consequently, diabetes shared care program should be promoted and practiced on a broader scale.

lynnctc@gmail.com

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