Primary Care and Population Health

NYS Public Health and Health Planning Council Joint Committee Meeting

Dr. Jo Ivey Boufford, President
The New York Academy of Medicine
1. Improve health status and reduce health disparities for racial, ethnic, disability, socioeconomic and other groups.

2. Promote “Health in All” approach to assess the health implications of policies and actions that occur outside of the health sector, such as in transportation, community and economic development, education and public safety.
HOW HEALTH IMPROVEMENT IS PRODUCED

THE PUBLIC HEALTH SYSTEM

Assuring the conditions for the health of the public

- Communities
- Philanthropy
- Healthcare Delivery System
- Employers, Businesses & Unions
- The Media
- Academia
- Community Based Health & Human Service Agencies
- Other Governmental Agencies
- Policy Makers & Elected Officials Governmental & Non-Governmental Public Health

Adapted from: The Future of the Public's Health in the 21st Century. IOM 2003
MULTI-SECTORAL APPROACH TO IMPROVING HEALTH

The New York Academy of Medicine, developed for the International Society for Urban Health. 2016.
TOTAL POPULATION HEALTH

- Total Population
  - Complex patients
  - Covered by Health Plan A
  - Patients of Provider B

Adapted from Jacobson and Teutsch, 2012
The Importance of Primary Care

1000→800→327

- 217 visit physicians office (113 primary care)
- 65 complimentary/alt. provider
- 21 hospital outpatient clinic
- 14 home health care
- 13 ER
- <1 hospitalized in academic medical center
- 8 hospitalized

The 3 Buckets of Prevention

http://journal.lww.com/jphmp/toc/published-ahead

1. Traditional Clinical Prevention
   - Increase the use of evidence-based services

2. Innovative Clinical Prevention
   - Provide services outside the clinical setting

3. Total Population or Community-Wide Prevention
   - Implement interventions that reach whole populations

Health Care

Public Health

CDC