

Access to Care - A Pilot Study in Los Angeles

Rachel E. Rosenheck
Kathryn R. Challoner, MD

Harvard School of Public Health; Keck School of Medicine of the University of
Southern California

Objective: To assess the pattern of primary care access in a sample of emergency department (ED) patients in an inner city Los Angeles county hospital.

Methods: Bilingual surveys designed to measure access to primary health care were administered to patients in the ED waiting areas and bedside of LAC+USC Medical Center during the month of January 2007.

Results: Two hundred and six patient surveys were completed and analyzed. Sixty-three percent of patients indicated that they currently had no health insurance and 68 % stated their annual household income as \$20,000 or less. Thirty-six percent of survey participants stated that they went to the ED to seek primary care, as compared to an urgent care, community health center or physician's office. Two percent stated that they had not obtained annual eye examinations, and 69% stated that they had not obtained annual dental care. Finally, 56 % of patients in the survey indicated that they had failed to see a doctor, get recommended treatment, or filled prescriptions due to cost, thus delaying timely treatment of medical conditions.

Conclusion: In this survey of inner-city patients in a single facility, the ED was used for primary care by over one-third of the survey participants. This pattern contributes to overcrowding at a time when EDs are strained to capacity and vulnerable to closure. Further investigation is needed to determine all the barriers to primary care access of this sample of patients. For example, if hours of operation, transportation or inability to obtain clinic appointments in a timely manner are also factors. However cost of ongoing primary care and lack of insurance were identified as significant determinants. A significant percentage of patients also indicated that they were not receiving timely primary care and prevention. Sustainable alternatives must be developed to overcome these barriers to accessing primary care.