

Does Diversity of Primary Care Practices Improve Outcomes for Medicaid Beneficiaries?

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ABSTRACT: Diversity at an organizational level may have several benefits, including improved provider cultural sensitivity and cultural competency. This study assesses the organizational (i.e., practice-level) diversity of primary care physicians (PCPs) who care for Medicaid patients using a unique score of practice diversity.

Using data on Medicaid-participating physicians from the Transformed Medicaid Statistical Information System (T-MSIS) and those physicians' race and ethnicity from the Association of American Medical Colleges (AAMC), we explored the racial and ethnic diversity of the primary care physicians at the practice level. We also compared it to Medicaid patients' diversity served by these practices. As the first step of this process, we created a summary file of nearly 400,000 primary care physicians, which contained data on physician-patient dyads for each type of service rendered (for instance - office visits, prescriptions, minor procedures, etc.). Next, we created another file that can indicate the 'catchment area' for each practice using information on the managed care plans of beneficiaries. Thus, we overcame the issue of providers not being part of managed care plan networks, a known access barrier. The team is acquiring physicians' race-ethnicity data from AAMC and expects to complete physician-patient linkage soon. As the final step of the analysis, we will calculate quality outcomes at the beneficiary level and compare whether being served by more diverse organizations is associated with better outcomes.

Key Words: Diversity, health equity, Medicaid, primary care.