International Journal of Integrated Care

Huang, Y et al 2018 Luohu Model: A template for integrated urban health care systems in China. *International Journal of Integrated Care*, 18(S2): A244, pp. 1-8, DOI: dx.doi.org/10.5334/ijic.s2244

POSTER ABSTRACT

Luohu Model: A template for integrated urban health care systems in China

18th International Conference on Integrated Care, Utrecht, 23-25 May 2018

Yixiang Huang[1], Xin Wang[1], Lijin Chen[1], Stephen Birch[2]

1: School of Public Health, Health Development Research Center, Sun Yat-sen University, People's Republic of China;
2: Department of Clinical Epidemiology & Biostatistics, McMaster University, Hamilton, Canada

Introduction: Emerging from the epidemiological transition and the accelerated population aging process, a fragmented healthcare delivery system with little effective collaboration among institutions in different tiers of the system cannot meet the demands of the population in China, especially the elderly with chronic diseases. The report by WHO in 2016 and the guideline by the General Office of the State Council in April 2017 proposed medical consortia to achieve people-centered integrated care in China. On Sep 1st 2017, China's National Health Planning Commission introduced the Luohu model to the whole country and encouraged all urban cities to learn from Luohu.

Policy context and objective: Patients, who do not trust the service quality of district hospitals and community health stations CHSs, have to seek services in the crowded city hospital. "Line up for 3 hours, treatment for 3 minutes" became a problem. "Less illness, less hospital admissions, lower financial burdens, and better services" are the goals of Luohu health reform. Objectives of this study are to introduce strategies and evaluation results structure, process and outcome of the Luohu case during Aug 2015-Aug 2017.

Highlights: There are three core strategies for integration in Luohu. First, the establishment of the hospital group as an independent corporation with six resource-sharing centers and six administrative centers in Aug 2015. Second, development of a new health insurance policy "Global budget, balance retained". Third, building family doctor teams in CHSs. Under these strategies, integrated care systems for the elderly and patients with chronic disease have emerged. Eleven detailed strategies summarized by the Rainbow Model will be introduced at the conference.

Structure and process evaluations showed increases in health resources and care provision in CHSs and collaboration between hospitals and CHSs in terms of two-way referrals of patients. Outcome evaluation was conducted with Triple Aims. During the two years, the case management rates of patients with diabetes and hypertension has increased. However, there are more new cases of several diseases because of screening and early detection programs. Patients were more satisfied with care in Luohu. But, expenditure have exceeded global budgets and there has been no balance of health insurance funds in the hospital group in the past two years.

Comments on transferability: The Luohu model was introduced across the country on Sep 1st 2017, and this was followed by more than 1500 policy makers from health and other social sectors covering 321 cities receiving on-site learning. Its three core strategies were transferable in most urban district health care systems of China.

Conclusions: There are four lessons from Luohu model. First, engagement of all stakeholders is essential for designing and implementing the reform, especially multiple administrations and residents. Second, organizational integration is a prerequisite for integrated care in China nowadays. Third, care integration must occur simultaneously with payment reform under the health insurance program. Fourth, normative integration for changing behaviors of physicians and institutions is required.

Discussion: Although the Luohu model was introduced to all urban cities of China, its policy influence is uncertain.

Keywords: hospital group; integrated care; district health care system