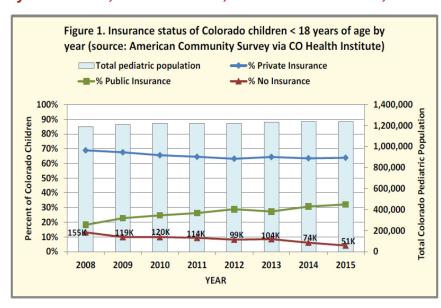
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Pediatric Medical Homes Could Be A Positive Path In Colorado

They Could Cut Down on ED Visits, Hospitalizations

By Carl Armon, Edwin Asturias, M.D. and James Todd, M.D.



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- his report summarizes our analysis of 2014-2015 trends in Colorado emergency department (ED) and hospital utilization rates for children with public or no insurance (Public/No) as compared to children with private insurance (Private). It reaches four important conclusions:
 - Increasing numbers of Colorado children had public health insurance (Public) in 2015 while a remaining 51,000 still had no insurance coverage (No).

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Oncology Medical Homes Cut Care Costs

First Time Such Models Go Beyond Theoretical Savings

By Ron Shinkman

hree programs that focus on placing oncology patients into patient-centered medical homes have demonstrated promising outcomes in turns of reducing costs for treating cancer, particularly for patients who are terminally ill.

According to data from the Medicare program, program expenditures in the last year of life for cancer patients ranges from \$56,784 for melanoma patients to \$140,891 for those with brain cancer, far higher than the average expenditure for a Medicare enrollee in the last year of life, which is just below \$39,000.

"As Medicare and other healthcare payers work to improve care and manage cost at the end of life, it will become increasingly important to implement innovative models of care for cancer patients," noted a recent study of alternative oncology care models published in the journal *Health Affairs*.

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