Factors Associated with a Patient Centered Medical Home among Obese and Overweight Children

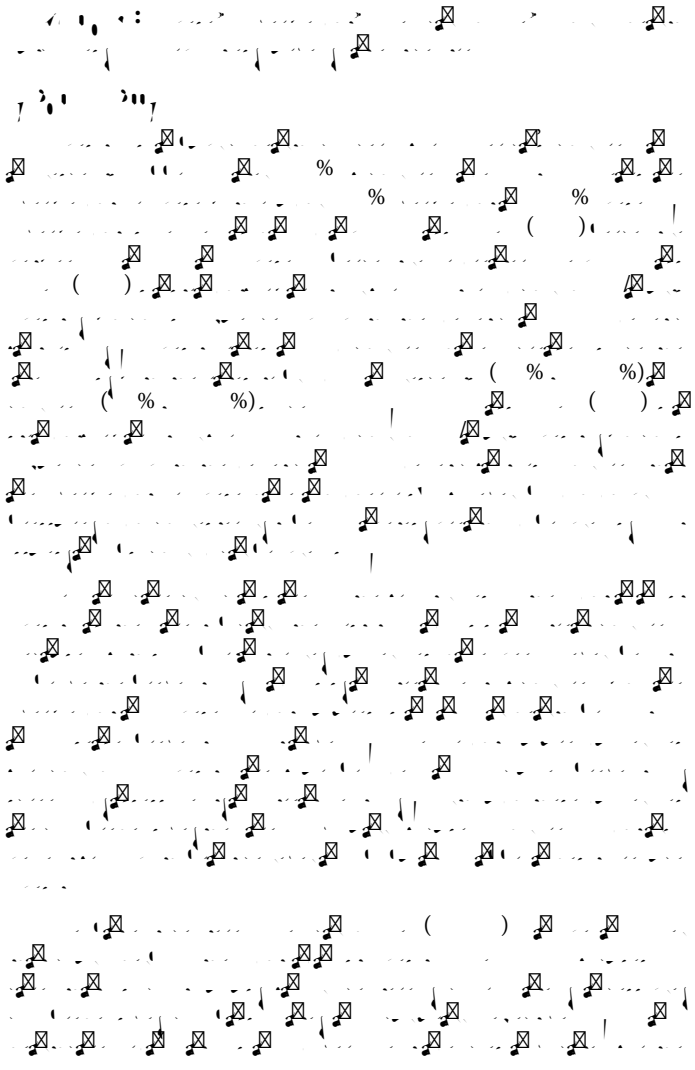
[1]Department of Health Policy and Administration, The Pennsylvania State University, State College, Pennsylvania, USA
[2]Institute for Child Health Policy, Department of Health Outcomes and Policy, University of Florida, Gainesville, Florida, USA

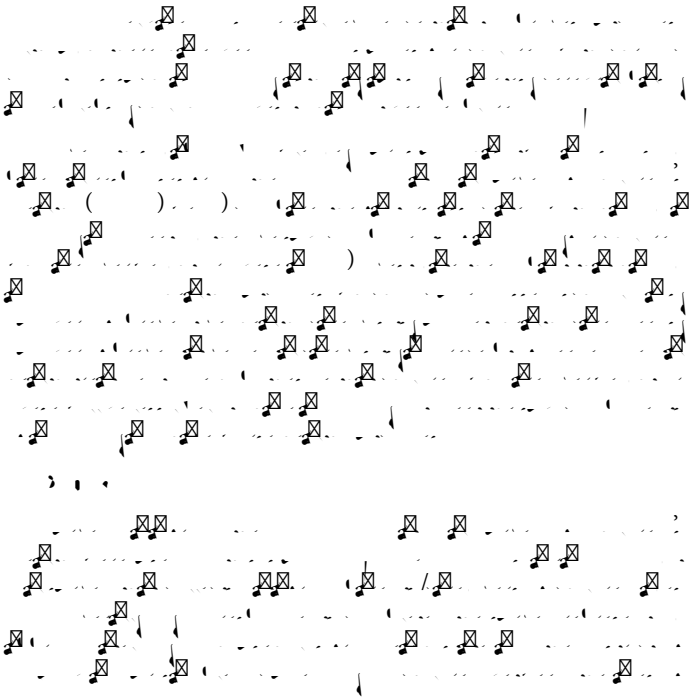
This study aims to determine the frequency of overweight and obese children that have a Patient Centered Medical Home (PCMH), the factors associated, and the effect of having one on several common child outcomes.

43,501 children from the 2011-2012 National Survey of Children's Health were analysed for this study. Descriptive, bivariate, and multivariate analyses were conducted.

Parents report that 54% of overweight and obese children have a patient centered medical home. Results from the multivariate models suggest that just being overweight and obese was not associated with having a medical home. However, when comorbidities were accounted for overweight and obese children were less likely to have a medical home and had decreased outcomes as compared to their underweight/healthy weight peers. Obese and overweight children with comorbidities were more likely to have a personal doctor but less likely to have effective care coordination.

The PCMH is a model that could be used to improve health and health outcomes for the most vulnerable children. However, obesity should be taken as a chronic condition just as other conditions and addressed on a routine bases. The PCMH model offers a vehicle to develop and implement population-based processes to identify, assess, and manage care for these children.



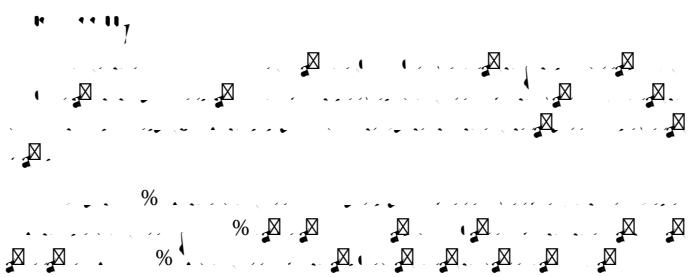


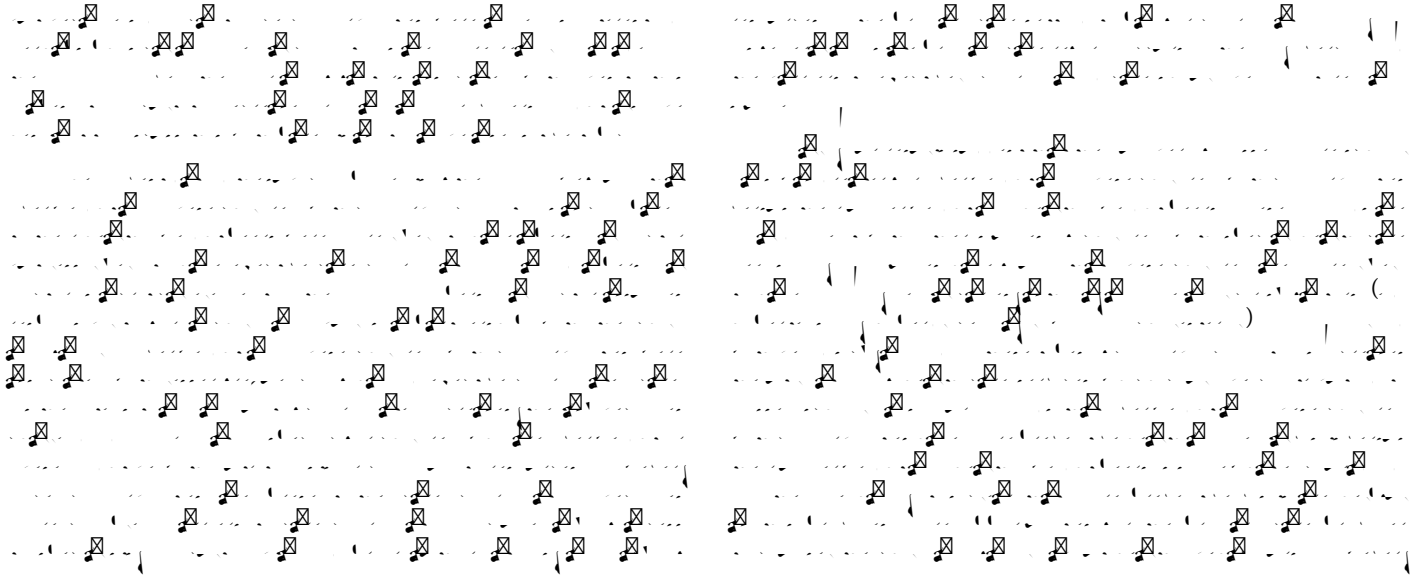
Caprice Knapp, Department of Health Policy and Administration, The Pennsylvania State University, University Park, PA 16820, USA, Tel: (814) 863-2900; E-mail: cxk47@psu.edu

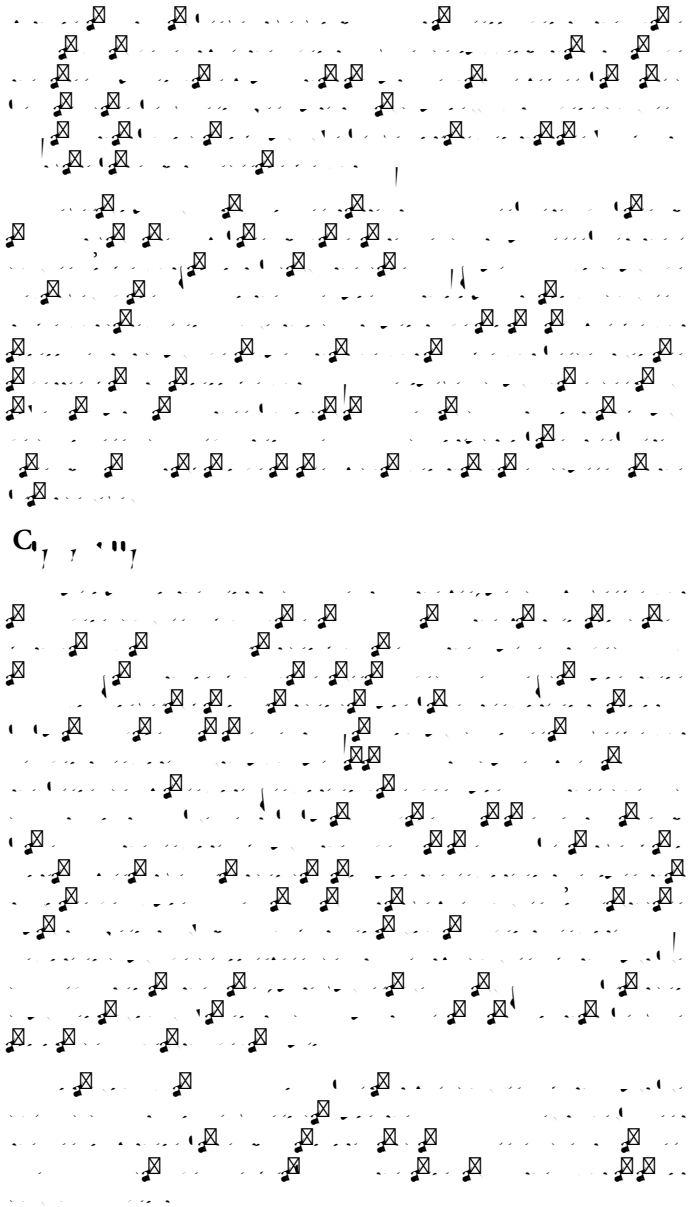
January 09, 2015; February 28, 2015; March 03, 2015.

Knapp C, Alford S, Ranka R (2015) Factors Associated with a Patient Centered Medical Home among Obese and Overweight Children. J Community Med Health Educ 5: 331. doi:10.4172/21610711.1000331

Knapp C, Alford S, Ranka R (2015) Factors Associated with a Patient Centered Medical Home among Obese and Overweight Children. J Community Med Health Educ 5: 331. doi:10.4172/21610711.1000331







1. Ogden CL (2012) Prevalence of obesity and trends in body mass index among US children and adolescents. JAMA 307: 483-490.
2. Brown DE (2009) Effects of ethnicity and socioeconomic status on body composition in an admixed, multiethnic population in Hawaii. American Journal of Human Biology 21: 383-388.
3. Fareed M, Afzal M (2014) Evidence of inbreeding depression on height, weight, and body mass index: A population-based child cohort study. American Journal of Human Biology 26: 784-795.
4. Ogden CL, MD Carroll (2010) Prevalence of Obesity Among Children and Adolescents: United States. Centers for Disease Control and Prevention.
5. (2012) Centers for Disease Control and Prevention. Basics About Childhood Obesity.
6. (2013) American Academy of Pediatrics. Bright Futures.
7. (2013) American Academy of Pediatrics. Bright Futures Guidelines: Physical Activity.
8. (2004) American Academy of Pediatrics Medical Home Initiatives for Children With Special Needs Project Advisory Committee, Policy statement: organizational principles to guide and define the child health care system and/or improve the health of all children, Pediatrics 113: 1545-1547.
9. Cooley WC (2009) Improved Outcomes Associated With Medical Home Implementation in Pediatric Primary Care, Pediatrics 124: 358-364.
10. Knapp C (2012) Factors Associated with a Medical Home Among Children with Attention-Deficit Hyperactivity Disorder. Maternal and Child Health Journal 16: 1771-1778.
11. Toomey SL, Homer CJ, Finkelstein JA (2010) Comparing Medical Homes for Children with ADHD and Asthma. Academic Pediatrics 10: 56-63.
12. Blumberg SJ (2012) Design and operation of the National Survey of Children's Health, 2007. Vital and health statistics. Programs and collection procedures 55:1-149.
13. Kuczmarski RJ (2000) CDC growth charts: United State 314: 1-27.
14. Hinojosa MS, Fernandez-Baca D, Knapp C (2012) Factors associated with family-provider partnership among children with ADHD. Family medicine 44: 463-470.
15. (2012) Statistical Analysis Software for Professionals, Cary, NC.
16. (2007) Child and Adolescent Health Measurement Initiative, National Survey of Children's Health. Data Resource Center for Child and Adolescents.
17. Kaye N, Takach M, Fund C (2009) Building medical homes in state Medicaid and CHIP programs. National Academy for State Health Policy Washington, DC.
18. (2013) National Center for Medical Home Implementation.
19. Lindeke LL (2002) Family-centered care coordination for children with special needs across multiple settings. Journal of Pediatric Health Care 16:290-297.
20. McAllister JW, Presler E, Cooley WC (2007) Practice-Based Care Coordination: A Medical Home Essential. Pediatrics 120:723-733.
21. (2014) U.S. Department of Health and Human Services. Key Features of the Affordable Care Act.
22. Muñoz MG, Martín MA, de Dios JG (2013) Systematic review about dental