CONFERENCE ABSTRACT

Impact of Covid-19 Pandemic on Primary Health Care Utilization in Alberta

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Robin Walker¹, Richard Golonka^{1.3}, Lisa Cook^{1.4}, Mary Modayil^{1.3}, Tanmay Patil¹, Wei Zhao¹, Rob Skrypnek¹, John Hagens^{1.2}, Judy Seidel^{1.2}

1: Alberta Health Services, Canada

2: University of Calgary

3: University of Alberta4: University of Lethbridge

Introduction: Since March 2020, Alberta's provincial healthcare delivery system has seen significant changes in how patients have used the system during the COVID-19 pandemic, which has led to indirect impacts of on people with other health conditions. The impact of these changes on patient outcomes, acuity, healthcare utilization, capacity and resource needs is unknown, and are expected to be far-reaching and last several years. As the first point of contact with the health system, primary health care is critically important as part of the overall coordinated approach to managing indirect impacts of COVID-19.

Aims, Objectives, Theory or Methods: The aim of this analysis was to examine patterns of healthcare delivery and utilization within primary health care in Alberta, Canada during the COVID-19 pandemic as compared to prior years. A repeated cross-sectional study was conducted from 2017-2020 among patients who had at least 1 visit to a primary care physician. Variables included in the analysis included: demographics, primary care utilization (in-person, virtual), cancer screening, and acute care utilization.

Highlights or Results or Key Findings: Between 2019 and 2020, diagnosis rates in primary care increased for infections (including COVID-19 visits) by 179%, and for mental health conditions by 13.6%. Primary care health services utilization for other conditions decreased, such as respiratory illnesses by 39.5%. Cancer screening rates for those with at least one primary care visit in 2020 decreased by 5%.

In-person primary care physician visits decreased by 3.3 million (22%), while virtual consults increased by 3.1 million a nearly 100% increase over the 3313 virtual visits prior to the pandemic. In total, the number of in-person and virtual visits/consults decreased by 1.2% (n=181,000). Over the COVID-19 pandemic virtual visits within primary health care went from 0% to a high of 40% in April 2020, stabilizing at ~22% by March 2021. Additionally, 305,613 Albertans accessed primary care at least once in 2017, 2018 and 2019 but were not seen either in-person or virtually in 2020.

Conclusions: Virtual visits offset the decrease in in-person visits during the COVID-19 pandemic. Careful management of patients who did not receive care in 2020, and increased severity of chronic conditions and mental health demands will need to be examined in light of the impact of the pandemic on primary care.

Implications for applicability/transferability, sustainability, and limitations: This analysis focuses on clinical service delivery within primary health care – the indirect impacts of COVID-19. A post-COVID strategy is being developed by primary care stakeholders, including patient representatives, to provide evidence-informed recommendations that support organizational preparedness, policy and operational decision-making as the province moves into post-COVID recovery.