Title
Addressing health-related quality of life for persons with non-communicable diseases through Emergency Medical Services delivery of Mobile Integrated Healthcare

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Abstract/Objective:

Background: Chronic or non-communicable diseases (NCDs) are global killers. NCDs result in premature death and disability and present a clear and present danger to global and local economies. This paper will discuss research results from a study that analyzed a population of adults with NCDs and how mobile integrated healthcare (MIH) reduced hospital readmissions and improved their overall health-related quality of life. In the U.S., NCDs are responsible for seven out of ten deaths yearly and account for 86% of healthcare costs. Globally, NCDs account for 41 million deaths annually. Approximately 15 million of those deaths are premature and occur in people between the ages of 30 and 69, which can be a significant segment of the global labor supply.

Methods: Secondary data analysis of MIH admission and discharge data from 2015 through 2019. Data were compiled from an Emergency Medical Services provider in the south-central U.S. using the EQ-5D-3L quality of life survey instrument; ($N = 645$).

Results: Slightly more than half (54.4%) of MIH patients were enrolled for 31-60 days, and 86% of enrollees did not require hospital readmission upon graduation from the program. The gender distribution was predominantly female (53.8%), and approximately half of the cases (48.44%) were reported to be cardiovascular-related NCDs. The difference in scores between the pretest and posttest EQ-5D-3L surveys was statistically significant ($p = .000$), which may indicate an increase in perceived quality of life.

Conclusions: MIH should be considered as a NCD intervention strategy. While further study is warranted, the results of this research found an 86% reduction in hospital readmissions for persons with NCD, and a 20-point increase in self-reported, perceived quality of life was measured by the post-test survey.