

General practitioner installation and ramp-up phase: does vertical integration play a role in General practitioner's care patterns and incomes in the early carrier?

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Abstract:

France, has generalized a practice level accreditation and add-on payment to promote Multi-Professional Primary Care Groups (MPCGs) in the counterpart of several requirements. Team-based practices are intended to improve both the efficiency of ambulatory care delivery and the working conditions of healthcare. This mode of practice has already proved quite popular among young doctors but its propensity to transform GPs' way of practicing as well as the sustainability of this attractiveness for young physicians is unclear. To evaluate the relation between MPCGs' practice and GPs early career activity volume, patterns and income, we compared GPs who enrolled into MPCG at the very beginning of their self-employed activity with similar GPs who didn't. Without reaching the identification of a causal relation, our empirical strategy combined standard OLS estimations with the properties of an exact matching to narrow the GPs self-selection concerns and improve the confidence in our results. We found that practice patterns of the MPCGs' GPs differed from other GPs from the very early career: they see more patients during the year without delivering more medical care and services, thus achieving both lower visits and prescriptions per patient rates. In terms of incomes, finally, we found no evidence of significative financial fragility of the device

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