

# Qualitative Study on Costs and Efficiencies in the U.S. Health Care System

**Purpose:** Available evidence finds accessing primary care physicians is associated with better health outcomes at a lower cost. How does this happen? What specific decisions or actions contribute to these differences in healthcare expense?

**Study Aims:** In this study, we will explore family physicians' medical decision making processes and knowledge of patient care experiences that explain differences of costs and overall health outcomes between primary care physicians and specialists.

**Subjects:** Family physicians who are teachers or residents in the Residency Research Network of Texas (RRNeT).

**Design:** This is a qualitative study of inefficiencies and savings in the health care system. Investigators seek narrative stories that illustrate ways that healthcare providers and/or patients generate unnecessary costs, or save the system from unnecessary costs. While investigators expect that family physicians participants will report about their own good/efficient behavior, investigators will also seek contradictory cases – for example, stories where expensive specialists saved costs or primary doctors were wasteful.

**This Year:** Medical students have collected approximately 30 narratives –'stories' – from physicians at their RRNeT site and surrounding community.