



From the Editor

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Innovations in Care Delivery strives to highlight articles that feature advances in care delivery in our *Editor's Blog*, *Editor's Top Five Recommended Reading*, and *Latest Articles* sections. Periodically, we also include interviews with leaders in the field of health services research.

Editor's Blog

Recent IICD blogs have discussed issues relating to cost effectiveness of thrombectomy, the success gap for women in academic neurology, and refining the algorithms for auto-antibody testing in myasthenia gravis. Our goal is to highlight health services research articles published in *Neurology* or *Neurology: Clinical Practice* and to give opinions by experts in the field.

Editor's Top Five Recommended Reading & Latest Articles Sections

Check out our collection of *Neurology* articles related to innovations in care delivery.

Lin et al.¹ used Medicare data to describe variation in the density of neurologists by geographic regions in the United States. The authors found that the density of neurologists varied about 4-fold from the lowest to the highest quintiles of neurologist density. Conversely, the prevalence of neurologic conditions did not substantially differ.¹ Of patients with a neurologic condition, 24% were seen by a neurologist, ranging from 21% in the lowest quintile regions to 27% in the highest quintile regions. Most of the difference was comprised of dementia, pain, and stroke conditions seen by neurologists. By contrast, very little of the difference comprised Parkinson disease and multiple sclerosis, both of which had a very high proportion (>80%) of neurologist involvement even in the lowest quintile regions.¹

In addition, check out the article from Hill et al.² about out-of-pocket costs for neurologic care for patients. The authors used a large database of privately insured patients over the period of 2001–2016. They found that about 90% of E/M visits and about 50% of diagnostic test involved an out-of-pocket cost in 2016. The mean out-of-pocket costs have increased over time and in 2016 ranged from about \$50 for E/M services to about \$240 for an MRI. Having a high deductible health plan was the most important predictor of out-of-pocket costs.²

References

1. Lin CC, Callaghan BC, Burke JF, et al. Geographic variation in neurologist density and neurologic care in the United States. *Neurology* Epub 2020 Dec 23.
2. Hill CE, Reynolds EL, Burke JF, et al. Increasing out-of-pocket costs for neurologic care for privately-insured patients. *Neurology* Epub 2020 Dec 23.

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What's Happening in Innovations in Care Delivery

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