Evidence of Transition Planning Impact on Population Health, Patient Experience, and Cost of Care

Transition Planning is associated with benefits related to medical complications, adherence to care, patient experience, continuity of care, patient-reported outcomes, and cost. (Current as of 4/2014)

Reduced Medical Complications
- Cadario et al. (2009) – Diabetes Mellitus
- Gholap et al. (2006) – Diabetes Mellitus
- Holmes-Walker et al. (2007) – Diabetes Mellitus
- Logan et al. (2008) – Diabetes Mellitus
- Markowitz et al. (2012) – Diabetes Mellitus
- Vidal et al. (2004) – Diabetes Mellitus

Improved Patient-Reported Outcomes (Quality of Life, Functional Status, Perceived Health Status)
- Bent (2002) – Cerebral Palsy & Spina Bifida
- Chaudhry et al. (2013) – Cystic Fibrosis
- Maslow et al. (2013) – Chronic Illness
- Markowitz et al. (2012) – Diabetes Mellitus
- McDonagh et al. (2007) – Juvenile Idiopathic Arthritis
- Wiener et al. (2007) – HIV

Greater Adherence to Care
- Annunziato et al. (2013) – Liver Transplant Recipients
- Cadario et al. (2009) – Diabetes Mellitus
- Gholap et al. (2006) – Diabetes Mellitus

Improved Continuity of Care
- Wojciechowski et al. (2002) – Sickle Cell Disease

Positive Patient Experience
- Chaudhry et al. (2013) – Cystic Fibrosis
- McDonagh et al. (2007) – Juvenile Idiopathic Arthritis
- Shaw et al. (2007) – Juvenile Idiopathic Arthritis

Lower Cost
- Cadario et al. (2009) – Diabetes Mellitus
- Gilmer et al. (2012) – Mental Health Conditions
- Robertson et al. (2006) – Juvenile Idiopathic Arthritis
Evidence Citations


