visits toward one or two specialties and otherwise. The medical expenditures, OPD
ical expenditure reimbursed by NHI, OPD visits, number of prescribed medication
model. The medical and medication-related issues were reviewed by prescribers,
medication utilization evaluation (MUE) systems were established to facilitate the
2009 to December 2010 (implementation period). Those who used to visit one or two
Total OPD visits in Taiwan toward CMUH during January 2008 to June 2009 (baseline

OBJECTIVES:

To find the factors of the child's care and their complex healthcare needs. The objective of this study is to examine well-being and experiences of caregivers of children with different chronic conditions. METHODS: The study was cross-sectional and was responses of caregivers of children with chronic conditions (aged 5 to 17 years) from the National Survey of Children's Health, 2007. We created a hierarchy of chronic conditions to classify children from our analytic sample in 6 mutually exclusive groups: Autism Spectrum Disorder (ASD), Developmental delay/Learning disability, Attention deficit hyperactivity disorder/behavioral problems, Depres-

OBJECTIVES: The well-being of caregivers of children with chronic conditions can be influenced by several aspects of their child's care and their complex healthcare needs. The objective of this study is to examine well-being and experiences of caregivers of children with different chronic conditions. METHODS: The study was cross-sectional and was responses of caregivers of children with chronic conditions (aged 5 to 17 years) from the National Survey of Children's Health, 2007. We created a hierarchy of chronic conditions to classify children from our analytic sample in 6 mutually exclusive groups: Autism Spectrum Disorder (ASD), Developmental delay/Learning disability, Attention deficit hyperactivity disorder/behavioral problems, Depression/anxiety, Speech/hearing/visual problems, and Diabetes/asthma. We assessed caregiver well-being in three dimensions: physical health, mental health, and emo-
tional stress. Healthcare experiences were measured in two domains: Access (health insurance adequacy and consistency, and unmet healthcare needs), Qual-
ity (family-centered care- FCC, and effective care coordination- ECC). All analyses were adjusted for the for the complex survey design, to derive national estimates. Chi-
square tests, logistic and multinomial logistic regressions were performed in SAS

RESULTS: Of 206 students, 159 completed the survey (response rate of 77.18%). Mean age of participants was 26 (±3.2) years with 65.41% female and 81.13% had previous pharmacy work experience. The average score of herbal knowledge was 9.28 (±1.80; maximum score of 15). Students with higher knowledge had positive attitude towards herbal medications (OR=1.26; 95% CI=1.01-1.57). Students who were work experience had positive attitude towards herbal medications (OR=2.93; 95% CI=1.05-8.14). However, 81% students believed that they did not have sufficient knowledge of herbal medications and 91% stu-
dents reported that they needed more information. CONCLUSIONS: Higher knowl-
dge leads to a positive attitude towards herbal medications among pharmacy students indicating that they may recommend such products to patients. Evaluat-
ing the role of such recommendations to improve patients health outcomes is the direction for the future.

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CGER VERSUS NICE: DO THE CONCLUSIONS IN CGER REPORTS CORRESPOND CLOSLEY TO THE COMPARATIVE EFFECTIVENESS ASSESSMENTS MADE IN HTA REPORTS?

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OBJECTIVES: While non-US agencies such as NICE (National Institute for Health and Clinical Excellence) in the UK have been conducting Health Technology As-

Evaluation of chronic conditions to classify children from our analytic sample in 6 mutually exclusive groups: Autism Spectrum Disorder (ASD), Developmental delay/Learning disability, Attention deficit hyperactivity disorder/behavioral problems, Depression/anxiety, Speech/hearing/visual problems, and Diabetes/asthma. We assessed caregiver well-being in three dimensions: physical health, mental health, and emo-
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dge leads to a positive attitude towards herbal medications among pharmacy students indicating that they may recommend such products to patients. Evaluat-
ing the role of such recommendations to improve patients health outcomes is the direction for the future.

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THE IMPACT OF INTEGRATED MEDICAL CARE SERVICES FOR LOYAL PATIENTS IN A MEDICAL CENTRAL UNDER TAIWAN'S UNIVERSAL HEALTH INSURANCE PROGRAM

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OBJECTIVES: With very few restrictions on choosing physicians under National Health Insurance (NHI) program in Taiwan, patients could visit outpatient depart-
ments (OPD) in a tertiary medical facility to seek the primary care other than secondary care. This study was to examine the impact of Integrated Medical Care
(IMC) services in China Medical University Hospital (CMUH), a 2000-bed medical center, in Taiwan. METHODS: Those patients who made more than 50% of their total OPD visits in Taiwan toward CMUH during January 2008 to June 2009 (baseline period) were recognized as CMUH loyal patients. They were invited to utilize the offered pluralistic IMC services, including integrated, geriatric and pharmaceutical care clinics, in addition to usual primary and specialty clinics, during December 2008 to December 2010 (implementation period). Those who used to visit one or two specialties in the CMUH care system were the most interested. The comprehensible reimbursement for medication utilization evaluation (MUE) systems were established to facilitate the cooperation between pharmacists and medical health management therapy management model. The medical and medication-related issues were reviewed by prescribers, clinicians, pharmacists, nurses, and the clinical MUE team. The medication utilization reimbursement by NHI, OPD visits, number of prescribed medication (Rx) and emergency department (ED) visits in CMUH during baseline and imple-
mentation periods were examined. RESULTS: Of 11,902 loyal patients, 75% made visits toward one or two specialties or two specialties. The medical expenditures, OPD