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The association of doctor-patient race concordance with health services utilization.

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We examined a national sample of African-American, white, Hispanic, and Asian-American respondents to test the hypothesis that when patients are race concordant with their physicians, they are more likely to utilize health services. The analysis used the 1994 Commonwealth Fund Minority Health Survey to construct a series of multivariate models. Using three dimensions of health services utilization, we found support for the hypothesis. Compared to patients whose regular doctors are of a different race, patients who are of the same racial or ethnic group as their physicians were more likely to use needed health services (OR=.62; 95% CI .46, .81); were less likely to postpone or delay seeking care (OR=.78; 95% CI .65, .94); and reported a higher volume of use of health services (OR=2.68; 95% CI 2.07, 3.45). Analysis within race-specific sub-samples found this pattern to be most consistent among white and African-Americans and less prevalent among Hispanic and Asian-Americans. Adjusting the models for health status and a variety of other known predictors of health care utilization did not substantially affect the relationship between doctor-patient race concordance and health services use.

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