

AHRQ Long COVID Care Network

Primary Care-Integrated Long COVID Care to Improve Outcomes for Minoritized Adults in New York City



Institution

Icahn School of Medicine at Mount Sinai

Geographic Service Area

New York City

Priority Population

Underserved populations in New York

Project Period

2023–2028

Contact

Principal Investigators

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Project Overview

Mount Sinai Health System (MSHS) established its initial Post-COVID center in May 2020. Building on this foundation, the health system launched a specialized, primary care-integrated Long COVID clinic in February 2024 through the AHRQ Long COVID Care Network initiative. The clinic is located in Mount Sinai's Internal Medicine Associates practice in East Harlem. The clinic aims to serve residents of Harlem and the South Bronx, both low-income, marginalized communities in New York City severely impacted by COVID-19 and at higher risk for Long COVID.

Operated by primary care clinicians, the clinic has enhanced its person-centered approach by incorporating a patient navigator who assists with coordinating care for individuals with Long COVID. The staff members reflect the demographic and cultural background of the diverse patient population, with many speaking fluent Spanish. Additionally, a neuropsychologist and social worker are part of the team, further supporting patients' comprehensive needs. This new clinic will not only improve access to care for underserved communities but also reduce wait times and provide a platform for testing innovative Long COVID treatment methods.

Notable Features

- The MSHS Long COVID clinic utilizes a primary care-led Long COVID care delivery model. This approach integrates Long COVID care directly into primary care settings and incorporates a community-based strategy to effectively reach and engage underserved, marginalized populations.
- MSHS maintains a Post-COVID-19 Registry, a diverse cohort of over 2,000 post-COVID-19 patients and matched controls, with approximately 50% representing marginalized groups. Data collected through the Mount Sinai AHRQ Long COVID Care Network initiative at each patient visit will be used to measure the outcomes of patients treated at the Long COVID clinic compared to those receiving standard care.

Project Goal: Establish a Long COVID Specialty Practice to Serve Socioeconomically Disadvantaged Populations

Specific Aims

The MSHS Long COVID aims to 1) expand access to comprehensive Long COVID care by creating a specialized Long COVID clinic integrated with primary care; 2) equip local primary care clinics (satellite practices) in predominantly minoritized communities with tools and resources to better support patients with uncomplicated Long COVID; 3) develop, implement, and disseminate educational programs on Long COVID care for primary care clinicians; and 4) Evaluate the impact of the project on patients' access to and satisfaction with care and healthcare utilization, quality, and costs.

Empowering Clinicians Through Specialized Long COVID Training

Staff and clinicians at the primary care-integrated Long COVID clinic have undergone training on clinical decision support tools and workflows specific to Long COVID. They have also been trained in an abbreviated protocol developed by the Mount Sinai team on shared care planning and shared decision making, in order to foster a trusted therapeutic relationship. The specialized Long COVID primary care clinic will disseminate best practices to local specialists and primary care clinicians. Staff are planning to train primary care Clinical Champions—volunteers with an interest in Long COVID—who will engage in training on Long COVID management, participate in weekly interdisciplinary rounds, and attend monthly operations meetings. Serving as a Clinical Champion offers primary care clinicians the opportunity to become local thought leaders in Long COVID and enhance access to specialized care. Clinician surveys, interviews, and focus groups will be used to measure the effectiveness of these educational efforts.



Expanding Access to Care for Marginalized Populations With Long COVID

The MSHS Long COVID clinic employs a primary care integration model that enhances patient co-management through collaboration between primary care clinicians and Long COVID specialists. This approach streamlines resource sharing, communication, and the seamless transfer of management back to primary care once Long COVID needs are addressed. By embedding comprehensive Long COVID specialty services within primary care, the clinic increases access for patients with Long COVID and coordination of care with specialty services. By developing a primary care team with expertise in Long COVID and offering co-located commonly needed services (e.g., behavioral health), patients with Long COVID will be effectively managed in a familiar setting with culturally-matched staff.

The clinic is also partnering with community-based organizations to engage patients who have limited or no routine contact with the healthcare system. Collaborations with Little Sisters of the Assumption Family Health Services (LSA) and AIRnyc aim to increase Long COVID awareness and connect patients to essential social and wraparound services. In the second phase of this project, the clinic will extend its model to additional primary care settings. These sites will be equipped with Long COVID decision-making support protocols and clinical training to manage patients with mild Long COVID symptoms, while referring more complex cases to the Long COVID specialty clinic. This extension aims to improve access to high-quality Long COVID care in underserved communities. Over the course of the project, MSHS will use patient satisfaction surveys, clinic reports, clinician and staff interviews, focus groups, random chart reviews, and observations of clinic operations to measure the effectiveness of the project.

By the Numbers

- Mount Sinai's clinic is the only Long COVID clinic in a health system serving **more than 1 million** adults across New York City
- **28%** of patients identify as Hispanic. The patient distribution by ethnicity includes **6%** Asian, **14%** Black or African American, **24%** Other, **1%** Other Pacific Islander, and **56%** White

"The project is significant for its partnership with community-based health and social service providers for reaching minoritized, low-income patients, its effort to widely extend the reach of Long COVID care, and its focus on equipping primary care providers with tools and knowledge to treat Long COVID patients."

- Juan Wisnivesky, Principal Investigator



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