

Easing regulations does not mean lower quality of cardiac care

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States that dropped regulations overseeing the performance of two common heart procedures showed no increase in death rates, according to researchers at Baylor College of Medicine (BCM), Rice University and Duke University Medical Center. The findings are available online in the journal *Health Services Research*.

The regulations, known as "certificate of need" or CON, require hospitals to obtain approval from a designated state agency before adding new facilities or offering especially costly services, said Vivian Ho, chair in health economics at Rice University's Baker Institute for Public Policy and associate professor of medicine at BCM.

"Certificate of need was meant to restrict health care costs and ensure high-quality care," said Ho, who is the lead author of the study. "It makes sure that new hospitals and facilities for specialized treatments aren't popping up where they aren't needed and instead are being spread out to areas where more will benefit."

Federal certificate-of-need regulations for cardiac care expired in 1986, and many states have since discontinued their CON programs. To determine whether health care is affected by a change in regulations, Ho and her colleagues reviewed Medicare inpatient claims between 1989 and 2002 for patients who received coronary artery bypass graft surgery and percutaneous coronary interventions, more commonly known as angioplasty.

"We found no overall increase in mortality rates for bypass or percutaneous procedures after states dropped the regulations," said Ho. "Trends in mortality rates for these procedures were similar across states, whether or not they maintained cardiac certificate of need."

Ho said the next step will be to look at how hospital costs are affected by changing regulations. Removal of cardiac certificate-of-need rules was associated with increased entry of new cardiac-care facilities, which may have raised the average cost per procedure.

The study, titled "Certificate of Need (CON) for Cardiac Care: Controversy Over the Contributions of CON," was funded by the National Heart, Lung and Blood Institute and can be found at [www3.interscience.wiley.com/jo ... rnal/120120473/issue](http://www3.interscience.wiley.com/jo...rnal/120120473/issue) .

Source: Rice University

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