

Does a patient's type of medical insurance impact their quality of care in hospitals?

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A considerable body of health policy research has documented differences in hospital characteristics as contributing factors to differences in the quality of care. An article appearing in the October issue of *Health Affairs* examines the extent to which a patient's type—or lack—of insurance may also play a role. Johns Hopkins Bloomberg School of Public Health authors, Darrell J. Gaskin, PhD, Associate Professor, Health Policy and Management, and Eric Roberts, MA, PhD candidate in health economics, along with author, Christine S. Spencer, ScD, executive director of the School of Health and Human Services at the University of Baltimore, compared hospital quality for patients according to their insurance status using pooled 2006-08 State Inpatient Database records from the Agency for Healthcare Research and Quality (AHRQ).

They compared in-hospital quality according to [patients' health insurance](#) using AHRQ's innovative Inpatient Quality Indicators. Specifically, they look at risk of dying in the hospital for patients admitted for common surgical procedures and medical conditions. Examples are hip replacement, coronary by-pass surgery, heart attack and pneumonia. Among the findings: Patients with private insurance had lower-than-expected mortality for 12 of 15 quality indicators compared to Medicare. However, Medicare patients had better outcomes for congestive heart failure, stroke and pneumonia than privately insured patients.

"The study suggests that within-hospital differences in quality exist

across payer types. In particular, patients with Medicare appear to receive notably worse care than patients with [private insurance](#) on the majority of Inpatient Quality Indicators," said Gaskin. Mortality rates are influenced by the characteristics of both hospitals and patients, which suggests that specific policy interventions should vary by Inpatient Quality Indicator, type of hospital, and type of payer. In addition, there were several indicators on which privately insured patients received notably worse care than patients in the other payer groups. Spencer concludes, "We recommend that policymakers pay particular attention to how well patients fare under various insurance plans, since the type of insurance does appear to make a difference in the care that hospitals provide."

Provided by Johns Hopkins University Bloomberg School of Public Health

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