

Survival rates in trauma patients after Massachusetts health insurance reform

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A study of survival rates in trauma patients following health insurance reform in Massachusetts found a passing increase in adjusted mortality rates, an unexpected finding suggesting that simply providing insurance incentives and subsidies may not improve survival for trauma patients, according to a report published online by *JAMA Surgery*.

Massachusetts introduced <u>health care reform</u> in 2006 to expand <u>health insurance</u> coverage and improve outcomes. Some previous research has suggested improved <u>survival rates</u> following injury in patients with insurance. But the relationship of insurance to survival after injury may not be well understood. Some might expect that survival after traumatic injury may be unrelated to a person's insurance status because all injured persons have access to emergency care, according to the study background.

Turner Osler, M.D., M.Sc., of the University of Vermont, Colchester, and coauthors conducted a study of more than 1.5 million patients hospitalized following traumatic injury in Massachusetts or New York, a neighboring state that did not institute health care reform like Massachusetts. The study examined the 10 years (2002-2011) surrounding reform in Massachusetts.

The rates of uninsured trauma patients in Massachusetts decreased steadily from 14.9 percent in 2002 to 5 percent in 2011. The authors also found health care reform was associated with a passing increase in the adjusted mortality rate that accounted for as many as 604 excess deaths



during four years.

"Fortunately, the increase in mortality among trauma patients following Massachusetts HCR [health care reform] resolved within a few years. It may not be possible to retrospectively reconstruct the causal pathway responsible for the increased excess deaths following HCR and its subsequent resolution. ... There are compelling arguments for providing health insurance to all citizens of the United States but our analysis suggests that simply providing health insurance incentives and subsidies does not improve survival for trauma patients. ... Ours is thus a cautionary tale for health care reformers: successful HCR for trauma patients will likely require more complex interventions than simply promoting health insurance coverage legislatively," the study concludes.

In a related commentary, Jarone Lee, M.D, M.P.H., of Harvard Medical School, Boston, writes: "The implications of the study are immediately evident; however, we must interpret the results within the correct context. The study reports an interesting association that is not causation. ... Overall, the results of the study add to the national debate and require further study. If the findings prove true, the study adds to the growing discussion that health insurance is only one - albeit an important - aspect of the solution to our nation's health care crisis."

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