

Researchers develop a new method to transparently measure health care value

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In the United States, the transition from volume to value dominates discussions of health care reform. While shared decision making might help patients determine whether to get care, transparency in procedure- and hospital-specific value measures would help them determine where to get care.

In a [study](#) published in the June issue of *The Millbank Quarterly*, William B. Weeks, Gregory R. Kotzbauer, and James N. Weinstein of Dartmouth Institute for Health Policy and Clinical Practice, Geisel School of Medicine, used Hospital Compare and Medicare expenditure data for 2012 to construct a hospital-level measure of value. They used a numerator composed of quality care measures (satisfaction, use of timely and effective care, and avoidance of harms) and a denominator composed of risk-adjusted 30 day episode-of-care expenditures for four admission types: [acute myocardial infarction](#), [coronary artery bypass grafting](#), colectomy, and hip replacement surgery.

"By using publicly available data, we were able to construct a measure that informed consumers about the quality and costs of their health care choices," says Dr. Weeks. "Use of such measures could revolutionize how consumers make decisions about where to obtain care and encourage them to challenge traditional physician referral practices by using historical data on several aspects of health care quality and costs and weighing what aspects of [health care quality](#) matter most to them."

Study Focus

The authors note that, currently, there are no transparent measures that combine quality and costs in the public domain that can empower consumers to use a measure of value that compares hospital performance at the procedure level, so that they can determine where to obtain care. The measure uses publicly available data, so it is transparent to consumers and hospitals. It is also a construct of value that could be disaggregated into component parts so patients could weigh tradeoffs between cost and quality components in order to make better informed decisions.

Findings

The researchers found that:

- There was a substantial range of hospital-level performance on quality, expenditure, and values measures for the four common reasons for admission
- Hospitals' ability to consistently deliver high-[quality](#), low-cost care varied across the different reasons for admission
- With the exception of coronary artery bypass grafting, hospitals that provided the highest-value care had more beds and a larger average daily census than those providing the lowest-value care
- Transparent data can empower patients to compare hospital performance, make better-informed treatment decisions, and decide where to obtain care for particular [health care](#) problems.

More information: WILLIAM B. WEEKS et al, Using Publicly Available Data to Construct a Transparent Measure of Health Care Value: A Method and Initial Results, *The Milbank Quarterly* (2016). [DOI: 10.1111/1468-0009.12194](https://doi.org/10.1111/1468-0009.12194)

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