

An Index for Measuring Systemic Overuse in the Privately Insured

Allison Oakes, PhD Student

Department of Health Policy & Management

 oakes_ah



JOHNS HOPKINS
BLOOMBERG SCHOOL
of PUBLIC HEALTH

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What is Quality of Care?

- “The degree to which health services...**increase the likelihood of desired health outcomes and are consistent with professional knowledge.**” –IOM, 1990
- There are three types of quality problems in health care: **underuse, misuse and overuse.**
- Due to a new emphasis on optimizing care “value,” **overuse has become a topic of increasing interest.** (LipitzSSynderman, 2017)



Overuse

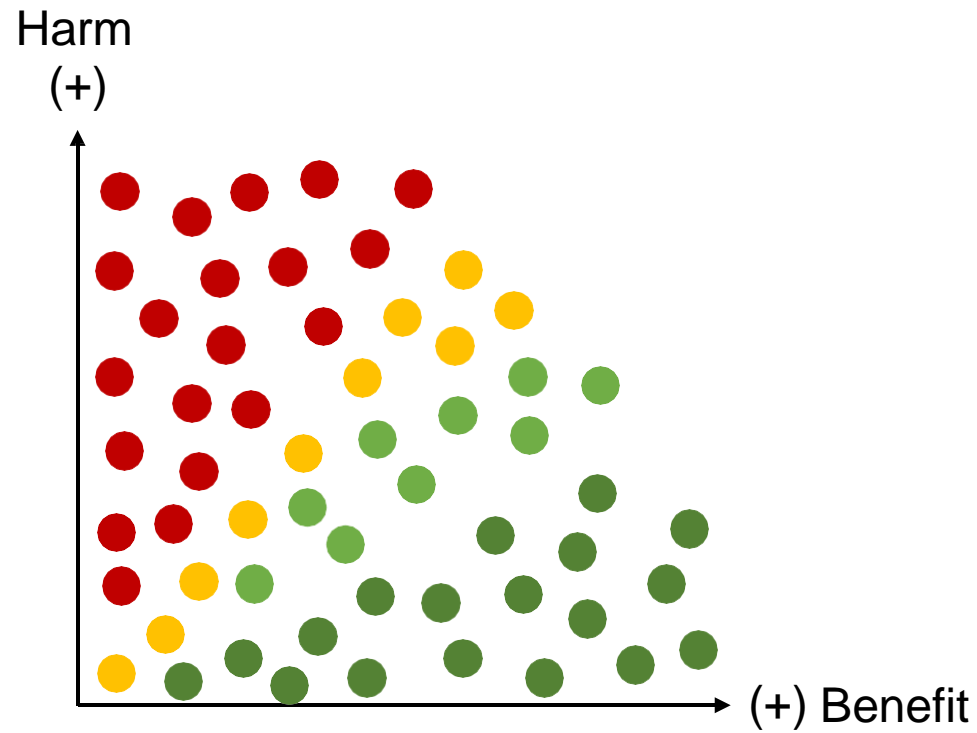
- Is the **provision of health care services for which harms outweigh benefits.** (AHRQ, 2013)
- Diverse types of health care services have been identified as contributing to overuse. (Brownlee, 2017)
- Overuse is **prevalent, costly and harmful.**

Improvement in overuse could **1) enhance the health of populations** and **2) reduce spending.**

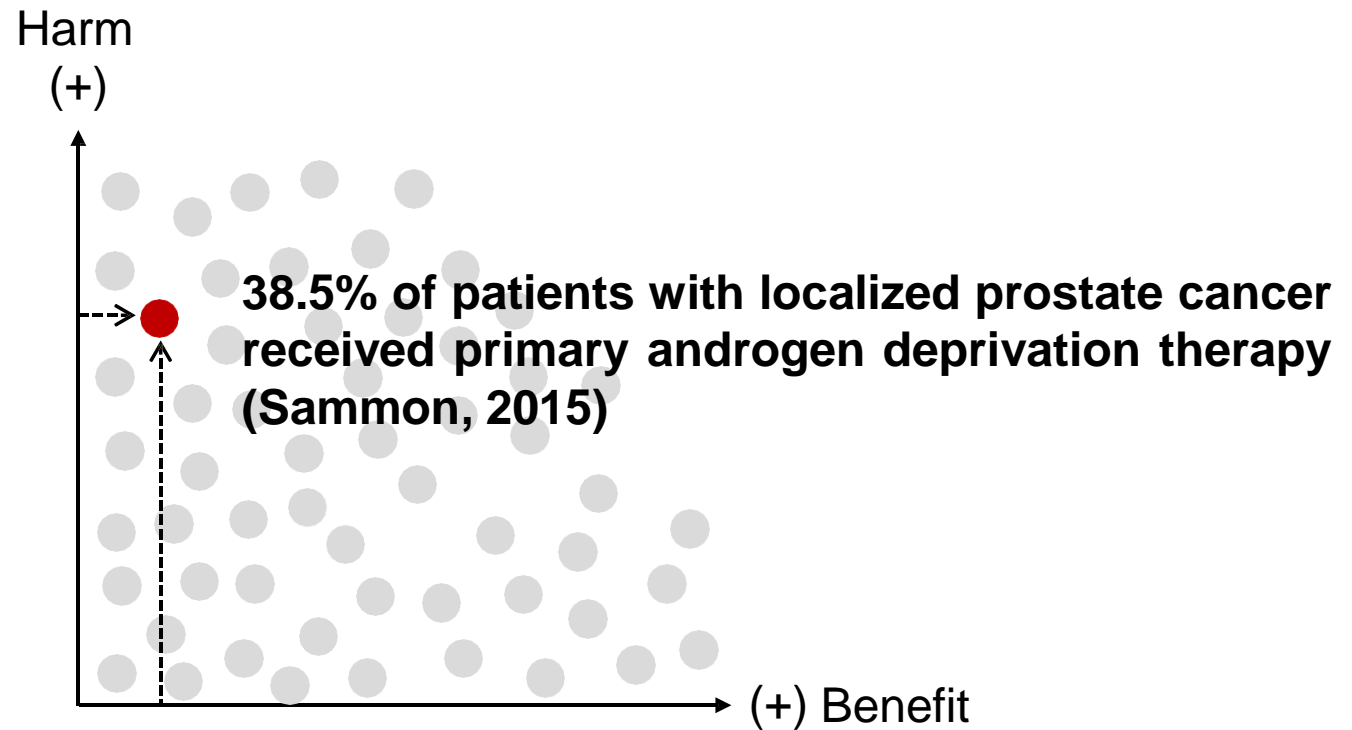
(Berwick, 2008N Segal, 2013)



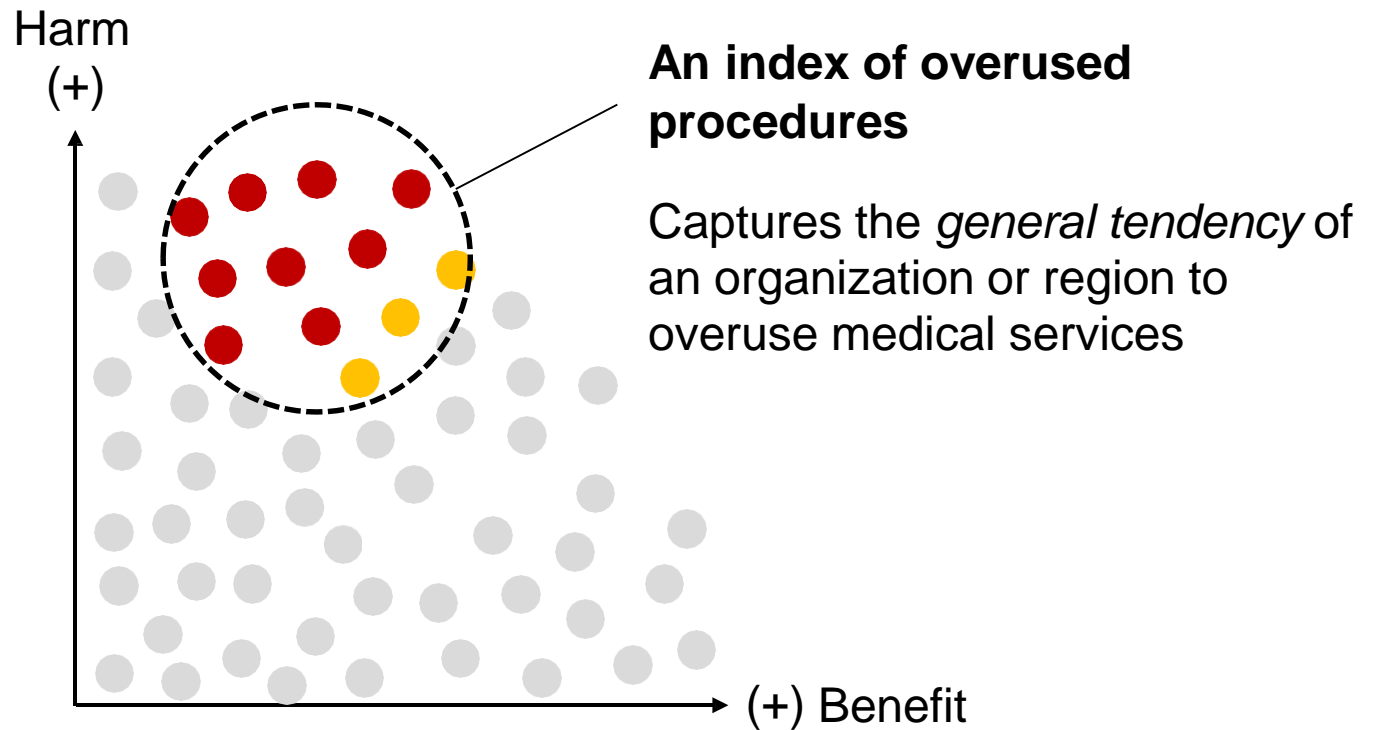
Overuse



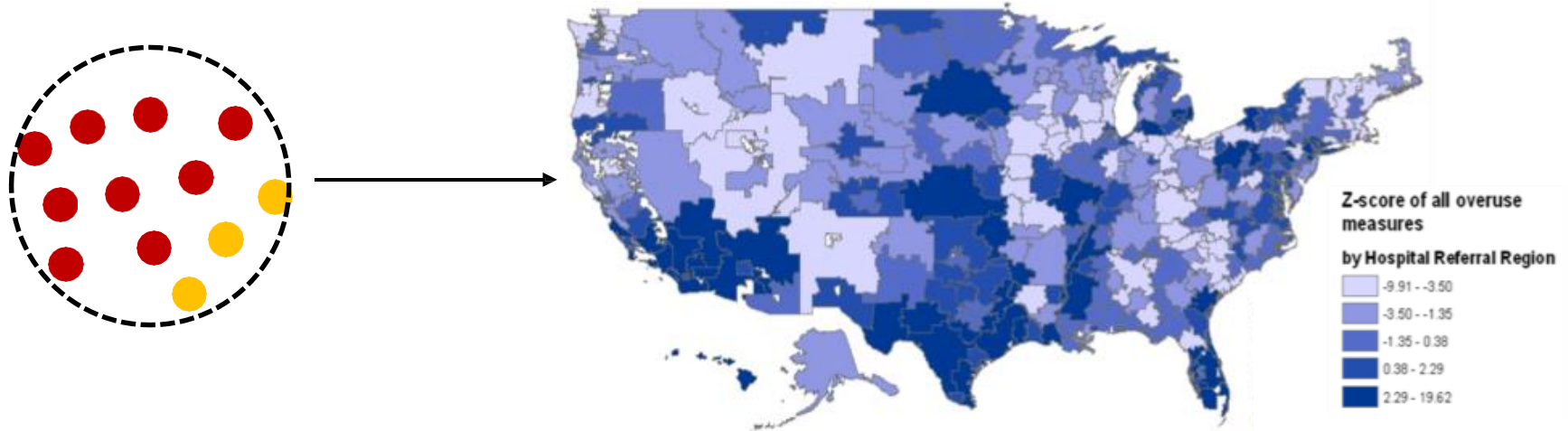
Overuse



Systemic Overuse



Systemic Overuse in Medicare



- The Johns Hopkins Overuse Index (JHOI) includes 20 indicators
- Among 2008 beneficiaries, 14% experienced ≥ 1 overuse event \rightarrow varied across Hospital Referral Regions
- The JHOI was correlated with 30 day postdischarge mortality and overall costs (Segal, 2015)
- Other groups have used different sets of indicators to document overuse in this population (Colla, 2014Q Schwartz, 2014)



Study Objective

- Adapt the JHOI for application to privately insured, 18C64 year old adults
- Generate a normalized overuse index for each Metropolitan Statistical Area in the United States using data on 30 million privately insured adults in the 2010 Truven MarketScan Commercial Claims and Encounters Database



Results

– Research in progress



Discussion

– Research in progress



Questions?

Thank You!

