WHAT HEALTH QUALITY INDICATORS IN MISSISSIPPI
REVEAL ABOUT THE HEALTH CARE SYSTEM
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Research Objective
- Examine Prevention Quality Indicators (PQIs) for community hospitals in Mississippi as compared to PQIs for the United States.
- Determine strategies for improving quality of the health care system in Mississippi.

Methods

Qualitative
- Stakeholder scan with the following health care leaders:
  - Patients
  - Providers
  - Health Officials

Quantitative
- Mississippi PQI data analyses.
- United States PQI data analyses.
- Literature review on the following:
  - legislation
  - research
  - best practices

Stakeholder Scan (AHRQ) Prevention Quality Indicators (PQIs):
- Determine strategies for improving quality
- Examine Prevention Quality Indicators (PQIs)
- Agency for Healthcare Research and Quality
- hospital billing claims at discharge for patients in 2010 (n = 40,753) from all payer
- for community hospitals in Mississippi as

Figure 1. Heart Condition PQI Rate Differences Mississippi vs. United States, 2010

Figure 2. Diabetes Condition PQI Rate Differences Mississippi vs. United States, 2010

Figure 3. Lung Condition PQI Rate Differences Mississippi vs. United States, 2010

Figure 4. Infection Condition PQI Rate Differences Mississippi vs. United States, 2010

Figure 5. Leg Amputation Rates in Medicare Enrollees per 1,000, 2003-2007

Principal Findings

Study Population
- Preventable hospitalizations of Mississippi patients in 2010 (n = 40,753) from all payer hospital billing claims at discharge for the following conditions defined by the Agency for Healthcare Research and Quality (AHRQ) Prevention Quality Indicators (PQIs):
  - Diabetes Conditions (n = 6,150)
  - Lung Conditions (n = 9,282)
  - Heart Conditions (n = 14,251)
  - Infection Conditions (n = 11,070)

Principal Findings

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Conclusions
- Mississippi's health care system is heavily weighted toward high cost, tertiary acute care.
- Changes in health care are occurring rapidly and require adapting to new rules/structures.
- Opportunity exists to shift the health care system toward high quality preventive care rather than managing delayed care outcomes.

Policy Considerations
- Research shows some of the following interrelated, coordinated policies can work in concert to improve health care quality:
  - Increase providers trained in primary and preventive care to enable better disease management of certain acute and chronic conditions.
  - Incorporate health professionals in planning care delivery and payment systems changes.
  - Alter payment systems to provide incentives for improved outcomes rather than rewarding higher volume of health care services.
  - Accelerate adoption of electronic health records to provide clinicians with the tools needed to improve health care coordination and monitor quality improvement.
  - Periodically review data on performance of the health care system, determine additional data needs, and enhance data systems to support ongoing quality improvement.
  - Enhance quality measurement by reporting core quality measures for Medicaid-eligible adults to the Centers for Medicare and Medicaid (CMS).

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