

AHRQ Data Resources Patient Centered Medical Home

National Committee On Vital and Health Statistics May 20, 2008





AHRQ overview
 AHRQ data resources for PCMH
 Medical Expenditure Panel Survey
 Implementation of new measures





Agency for Healthcare Research and Quality

Mission: To improve the quality safety and effectiveness of healthcare for all Americans

Vision: As a result of AHRQ's efforts, American healthcare will provide services of the highest quality, with the best possible outcomes, at the lowest possible costs



AHRQ Data Resources

Hospital Cost and Utilization Project

 Discharge record information from hospitals nation-wide organized into databases and tools, Ambulatory surgery databases and ED databases.

Consumer Assessment of Health Plans (CAHPS)

- Family of standardized surveys that allows consumers and patients to report on their experiences with health care. Unique in its standardization of process and emphasis on saliency to consumers/patients
- Medical Expenditure Panel Survey
 - Large, ongoing, longitudinal survey of households and medical providers capturing a wide range of information about, health care use, quality, access, expenditures and health insurance



MEPS Household Component

- Approximately 13,000 households and 33,000 persons annually
- Represents the civilian, noninstitutionalized population
- Households participate in 5 interviews over 2 ½ years to yield 2 calendar years of medical use and expenditure data
- Data collection is through a single household respondent (CAPI) with a selfadministered questionnaire to all adults



MEPS HC Core Content

Demographics

- Use, charges and payments for medical services
- Health status
- Conditions associated with medical events and priority conditions
- Employment
- Health insurance coverage



MEPS HC Supplemental Content

Access to care
Preventive care
Quality of care for priority conditions
CAHPS measures
Other serf reported information for adults
Income and assets



MEPS Medical Provider Component

- Survey of the specific providers identified as sources of care by the household
- Supplements the household's expenditure data
- Focus on payments made for medical care, especially for high cost events, and those events where the household may be less aware of the payments
- Written permission from patients and cooperation of the medical provider



MEPS Medical Provider Component

All hospitals (and associated physicians)
All home health agencies
All pharmacies
A sample of office-based physicians



PCMH characteristics in MEPS

Usual source of care/ specific provider at that source

Access

- wait for appointments
- phone access
- Some aspects of patient centered care
- Some aspects of satisfaction and patient evaluation of quality



Implementing changes

Time horizon is relatively long (PRA) clearance, steps to data release) Time in federal surveys is a precious commodity Household vs. person Ongoing vs. periodic Ease of administration to the general public Testing and evaluation – CAHPS model