Avoidable utilisation of hospital care among elderly patients with significant health care needs – Should outcome measures be used to incentivise quality improvement in primary care?

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Abstract

Purpose and theory: Fragmented services and poor access to primary care physicians are important explanations behind an excessive use of hospital care by elderly patients with multiple chronic conditions. This study analyses the potential of using indicators reflecting utilisation of hospital care to incentivise primary care units to improve quality of care and coordination with community services for elderly patients.

Methods: Both qualitative and quantitative data was collected from primary care services in Region Skåne, Sweden. Qualitative data was collected from a sample of eight primary care units using blinded interviews and compared with indicators of hospital utilisation. In a quantitative analysis, data from 150 primary care units was analysed in regression models using utilisation of hospital care as the dependent outcome variable and a number of independent variables reflecting location and ownership of provider, socioeconomic status of registered individuals and process measures indicating good quality care towards elderly patients.

Findings and discussion: Results indicate that outcome measures reflecting utilisation of hospital care are highly sensitive to the socioeconomic status of registered individuals and location of providers. With a high risk of type I (false positive) and type II (false negative) errors, outcome measures such as utilisation of hospital care should be used with great caution to incentivise quality improvements among primary care units.

Keywords:
primary care, incentives, outcome measures, hospital utilisation