

How the Linkage Between Care Process and Outcomes Varies by Comorbidity

Principal Investigator: Katherine L. Kahn, MD
Institution/Partners: University of California Los Angeles
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Description

Busy frontline clinicians face challenges in delivering quality healthcare for patients with multiple chronic conditions. Better clinical processes of care are known to be associated with better health outcomes. This study analyzes the extent to which comorbidities and age influence the observed relationships between processes and outcomes and seeks to make explicit the consequences of applying recommendations designed for individual diseases to patients with multiple conditions.

Specific Aims

1. Analyze whether burden of illness predicts quality of care process scores.
2. Examine how other factors, including patient age, demographics, and use of health services, predict quality of care process scores.
3. For health outcomes that are known to improve with better care, analyze the extent of variability that results from comorbidity, patient characteristics, and use of services.
4. Develop strategies to refine quality measures for patients with multiple comorbidities and other aspects of complexity to promote care processes that are most beneficial to patients.

Main Objective

Examine how comorbidities and age influence the observed relationships between clinical processes and health outcomes.

Chronic Conditions Considered

Diabetes
Asthma
Chronic obstructive pulmonary disease (COPD)
Ischemic heart disease

Preventive Services Considered

This project did not address a specific clinical preventive service.

Study Design & Population

Observational epidemiological study

939 chronically ill patients from 39 medical organizations who allowed detailed medical record review

Strategies Addressed from the National MCC Strategic Framework

- 1.B. Define appropriate health outcomes
- 4.C. Increase clinical health research

