

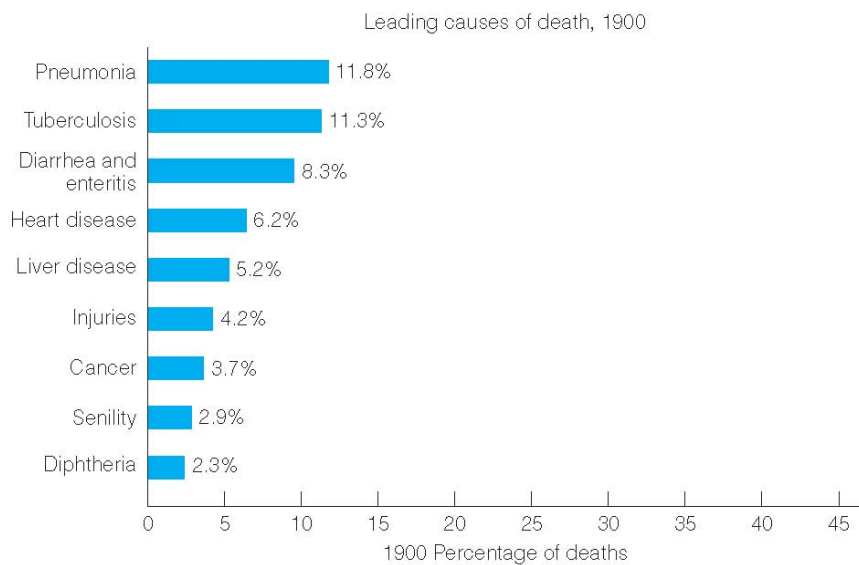


Learning Objectives

- Define health policy and health services research
- Identify and develop relevant well framed health policy research questions
- Describe public use and other common data sources for health policy research



Causes of Death - 1900



Causes of Death - 2009

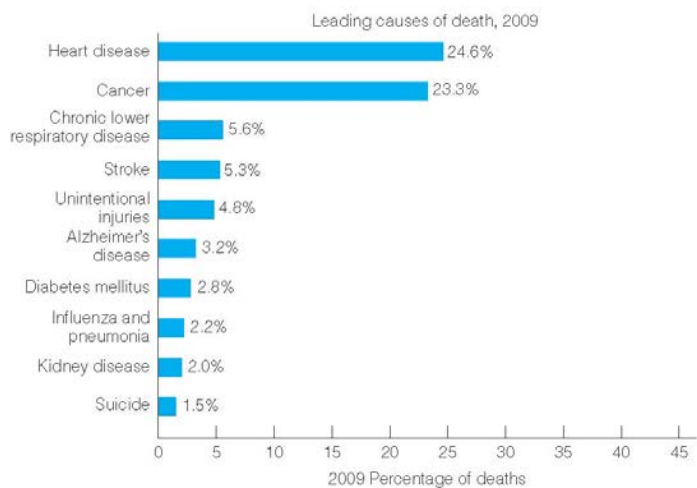


FIGURE 1.1 Leading causes of death, United States, 1900 and 2009.

Source: *Healthy people, 2010, 2000*, by U.S. Department of Health and Human Services, Washington, DC: U.S. Government Printing Office; "Deaths: Final Data for 2009," 2011, by Kochanek, K.D., Xu, J., Murphy, S.L., Miniño, A.M., & Kung, H.-C., *National Vital Statistics Reports*, 60(3), Table B.



Actual Causes of Death, U.S., 2000

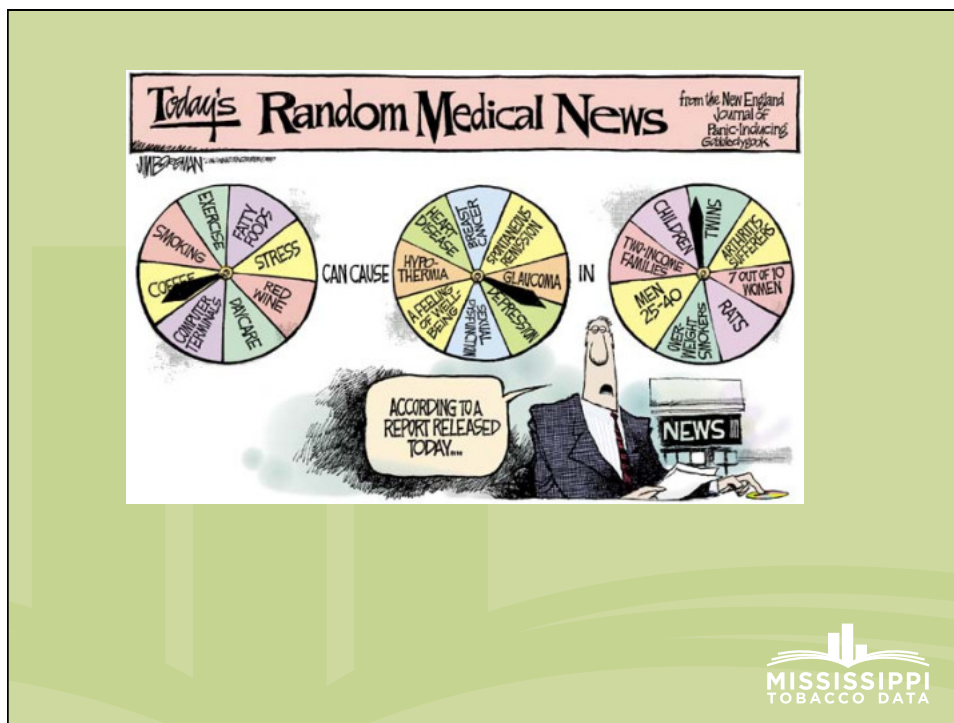
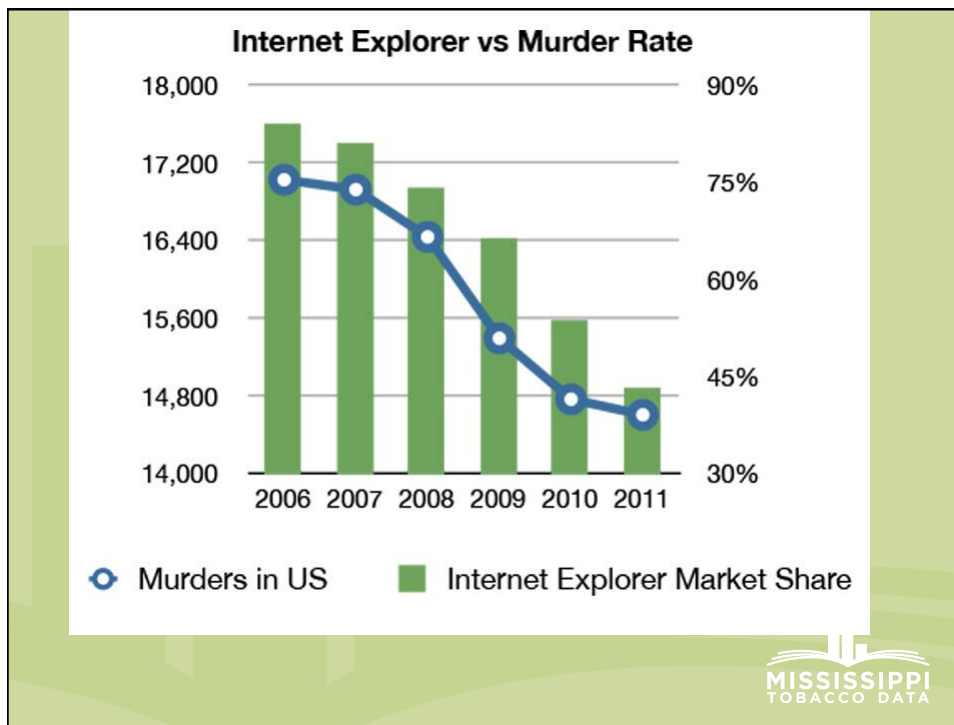
- Tobacco: 18.1%
- Poor diet and physical inactivity: 16.6%
- Alcohol abuse: 3.5%
- Microbial agents: 3.1%
- Toxic agents: 2.3%
- Motor vehicle: 1.8%
- Firearms: 1.2%
- Sexual behavior: 0.8%
- Illicit drug use: 0.7%



Health Risk Factors

- Risk factor - any characteristic or condition that occurs with greater frequency in people with a disease than people free from a disease
- Nonmodifiable
- Modifiable
- Environmental







Primary Prevention

- Seeks to prevent the onset of specific diseases via risk reduction: by altering behaviors or exposures that can lead to disease.
- Education
- Taxation
- Health Policy
 - Health policy refers to decisions, plans, and actions that are undertaken to achieve specific health care goals within a society.



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MISSISSIPPI
TOBACCO DATA

THE ROANOKE TIMES
Monday, September 20, 2004

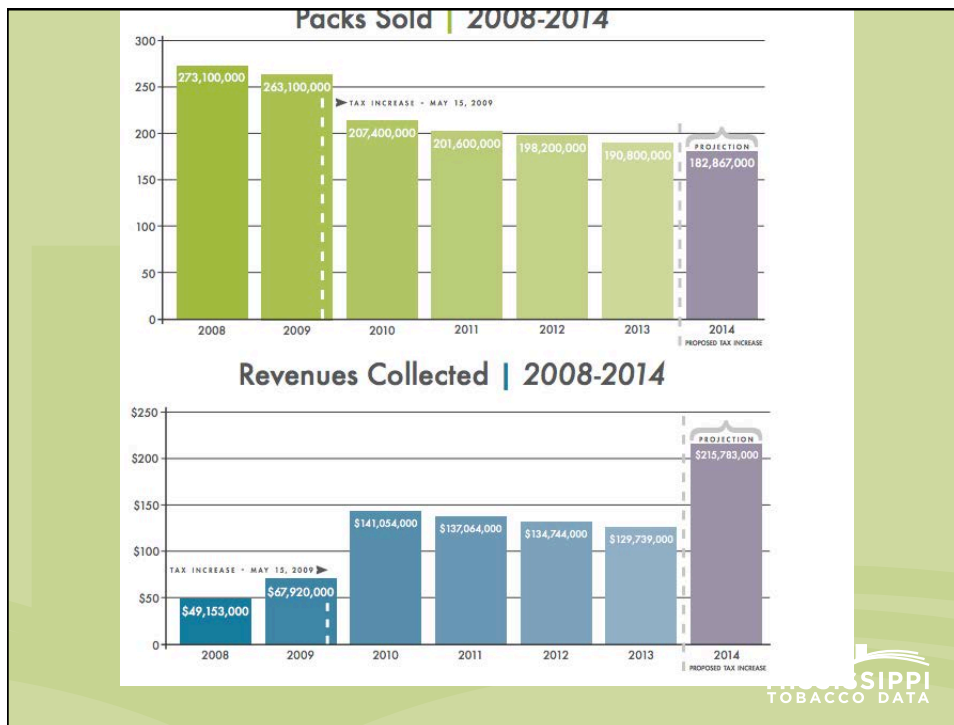


STEPHANIE KLEIN-DAVIS | The Roanoke Times

Mellisa Williamson, 35, a Bullitt Avenue resident, worries about the effect on her unborn child from the sound of jackhammers.

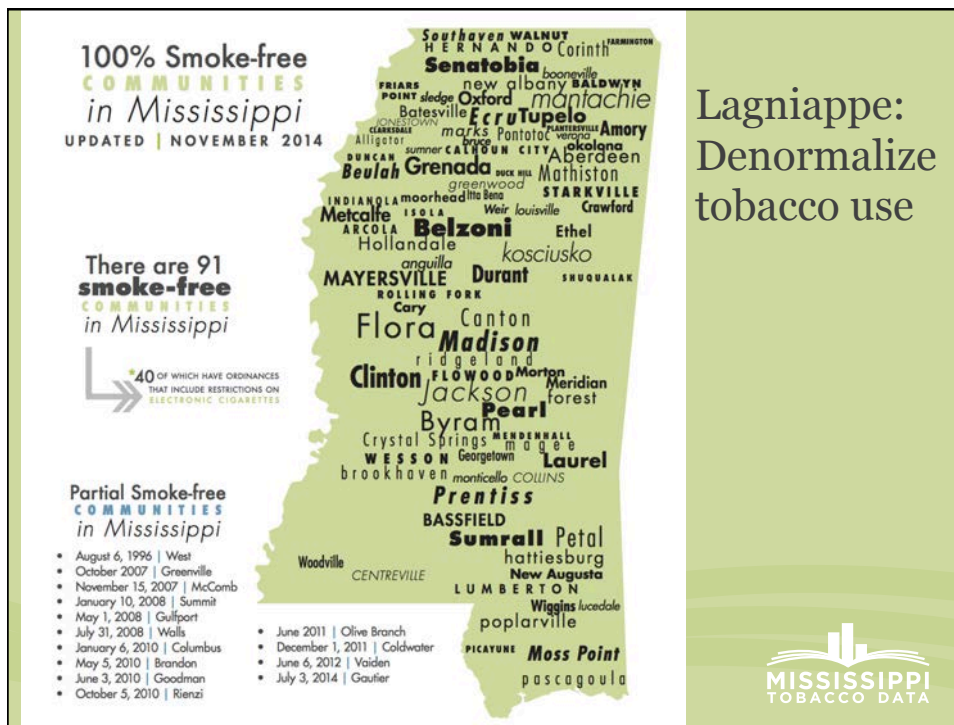
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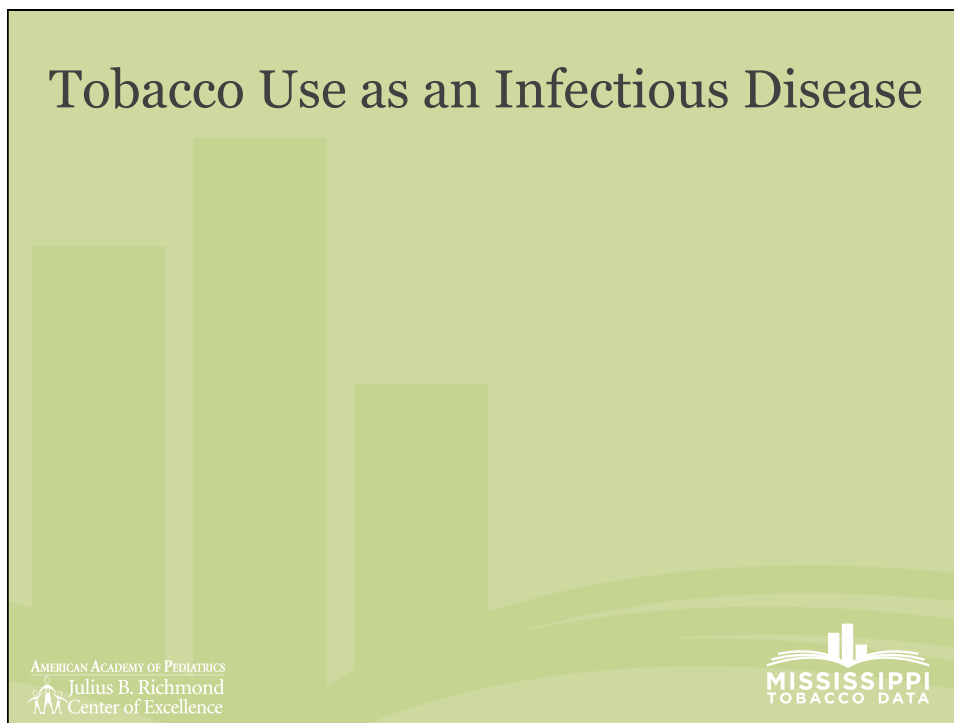


Health Policy: Tobacco

- Restrictions on use
- Age restrictions on sales
- Employment



Lagniappe:
Denormalize tobacco use





CAMEL
PLEASURE
TO
BURN

SURGEON GENERAL'S WARNING: Cigarette
Smoke Contains Carbon Monoxide.

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TOBACCO DATA

Age of Sale for Tobacco

- Nicotine addiction in adolescents is a multi-year process
- A policy that made obtaining cigarettes more difficult could interrupt the progression to daily smoking
- A person who is not daily smoking at age 21 is not likely to progress to daily smoking
 - 90% of those who buy for kids are under the age of 21

Source: Rob Crane, OSU

Health Policy: Physical Fitness

- Worksite Health Promotion
- Built Environment
- Others?



When is a health policy appropriate?

- Does the behavior harm others?
- Does the behavior cost other people money?
- What is the cost effectiveness of the intervention?
- Does the intervention place restrictions on individual and commercial freedoms?



The Intervention Ladder

- Eliminate choice
- Restrict choice
- Guide choice through disincentives
- Guide choice through incentives
- Guide choice through changing the default policy
- Enable choice
- Provide information
- Do nothing or simply monitor

2013 Mississippi Social Climate Survey

Would you favor or oppose a law in MS that would prohibit smoking in most public places, including workplaces, public buildings, offices, restaurants, and bars?

Favor = 82.1%

Oppose = 14.0%

Neither favor nor oppose = 3.9%

Health Services Research

AcademyHealth defines health services research as the multidisciplinary field of scientific investigation that studies how social factors, financing systems, organizational structures and processes, health technologies, and personal behaviors affect access to health care, the quality and cost of health care, and ultimately our health and well-being. Its research domains are individuals, families, organizations, institutions, communities, and populations.



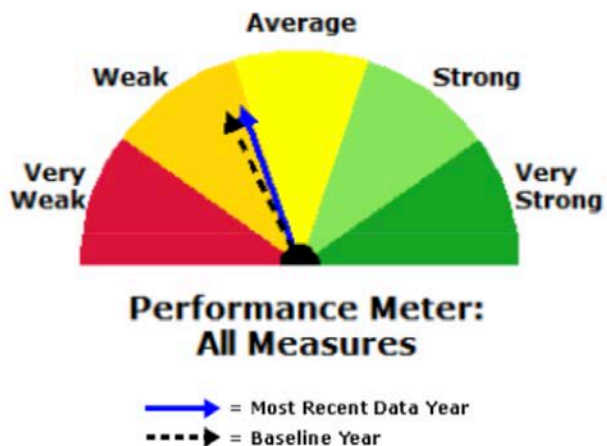
Health Services Research

And, in the simplest terms, HSR is the science/field of study that asks:

What works?
For whom?
At what cost?
Under what circumstances?



FIGURE 1. MISSISSIPPI HEALTH SYSTEM PERFORMANCE MEASURES, 2010 AND 2011



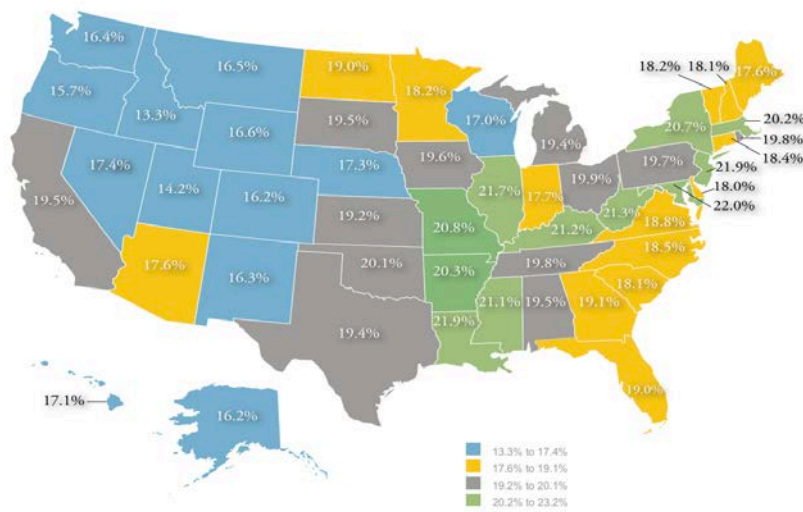
Source: Agency for Healthcare Research and Quality. (2011).



Source: C4MHP



FIGURE 2. MEDICARE PREVENTABLE HOSPITAL READMISSION RATES WITHIN 30-DAYS, 2003-2004



Source: Jencks et al., New England Journal of Medicine. (2009).



Source: C4MHP



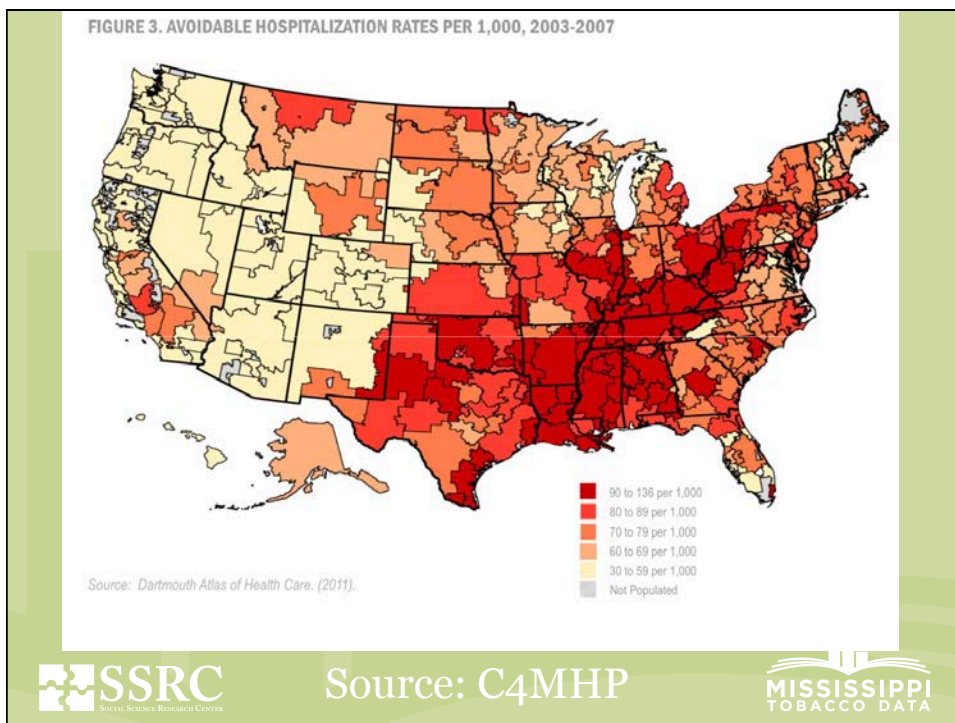
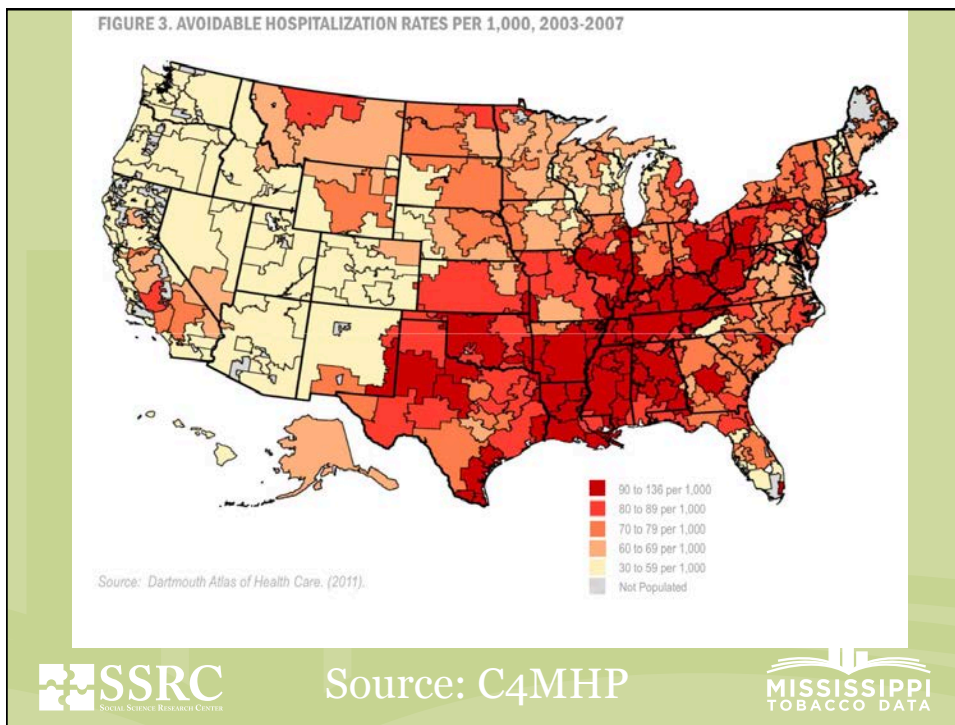
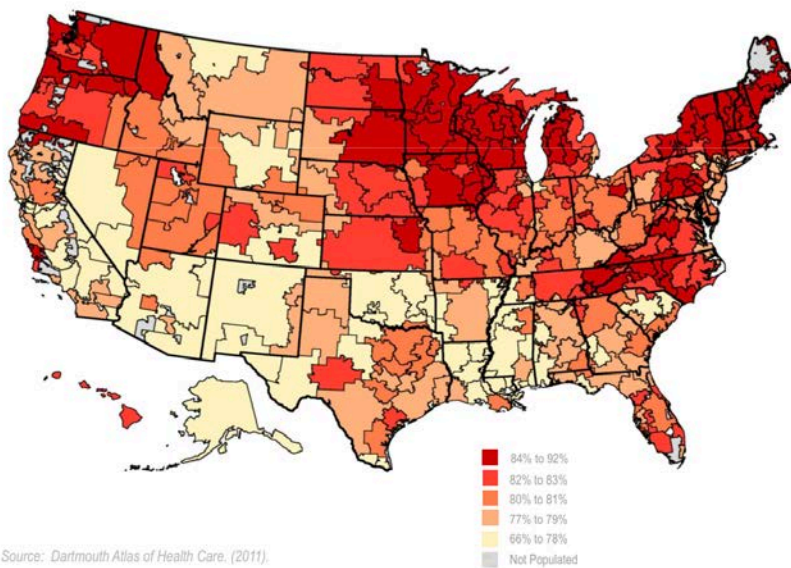


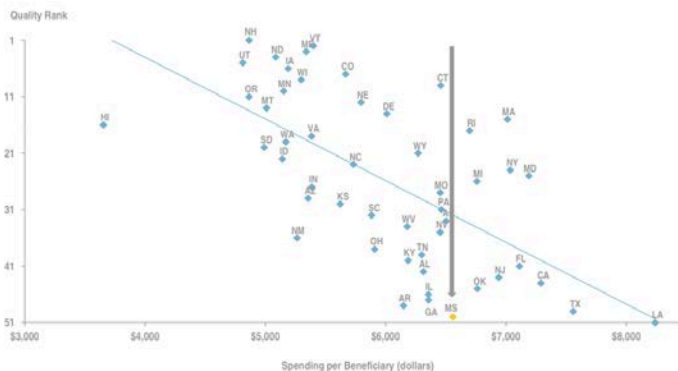
FIGURE 5. MEDICARE ENROLLEES WITH DIABETES RECEIVING HEMOGLOBIN A1C TESTING, 2003-2007



Source: C4MHP



FIGURE 12. MEDICARE SPENDING AND STATE HEALTH CARE QUALITY RANK, 2000-2001



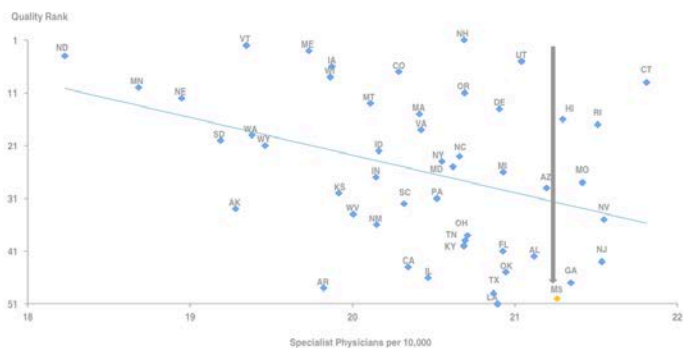
Source: Copyrighted and published by Project HOPE/Health Affairs as Baicker K, and Chandra A. (2004). Medicare Spending, The Physician Workforce, And Beneficiaries' Quality Of Care Health Affairs (Millwood). April 2004; w4 184-197 DOI 10.1377/hlthaff.Q4.184 The published article is archived and available online at www.healthaffairs.org/. Note: For quality ranking, smaller values equal higher quality.



Source: C4MHP



FIGURE 13. SPECIALIST PHYSICIANS AND STATE HEALTH CARE QUALITY RANK, 2000



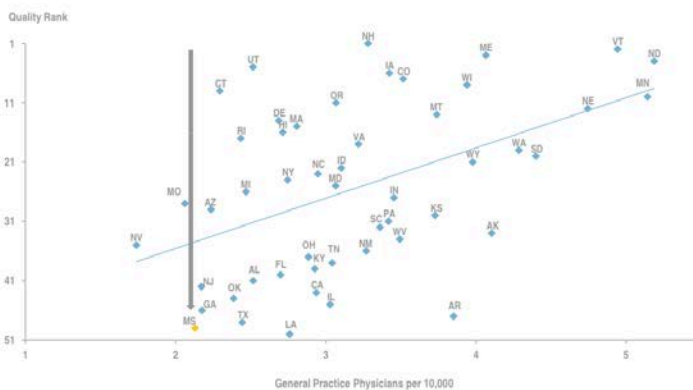
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Source: C4MHP



FIGURE 14. GENERAL PRACTICE PHYSICIANS AND HEALTH CARE QUALITY RANK, 2000



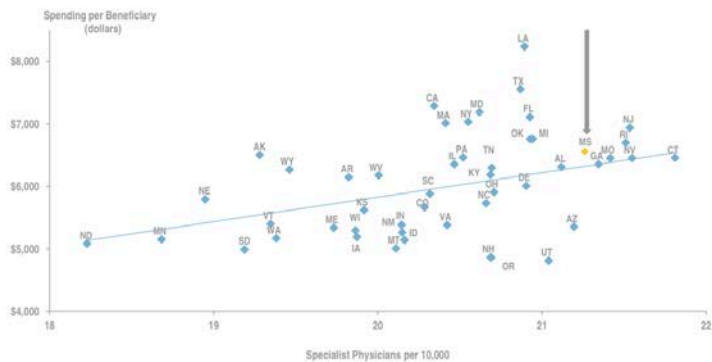
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Source: C4MHP



FIGURE 15. SPECIALIST PHYSICIANS AND MEDICARE SPENDING, 2000



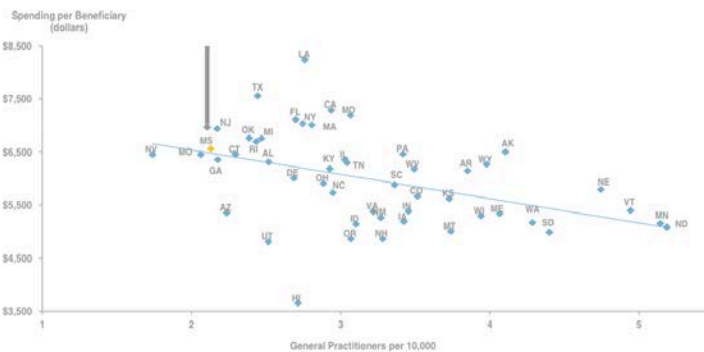
Source: Copyrighted and published by Project HOPE/Health Affairs as Baicker K, and Chandra A. (2004). Medicare Spending, The Physician Workforce, And Beneficiaries' Quality Of Care Health Affairs (Millwood). April 2004; w4 184-197 DOI 10.1377/hlthaff.Q4.184 The published article is archived and available online at www.healthaffairs.org/. Note: For quality ranking, smaller values equal higher quality.



Source: C4MHP



FIGURE 16. GENERAL PRACTICE PHYSICIANS AND MEDICARE SPENDING, 2000

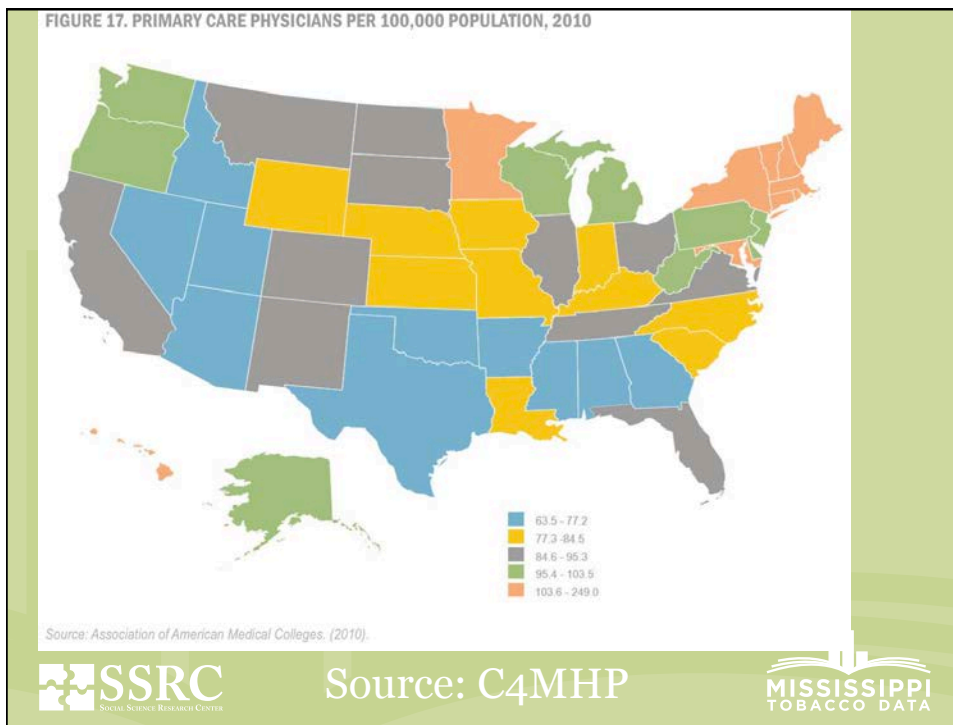


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Source: C4MHP



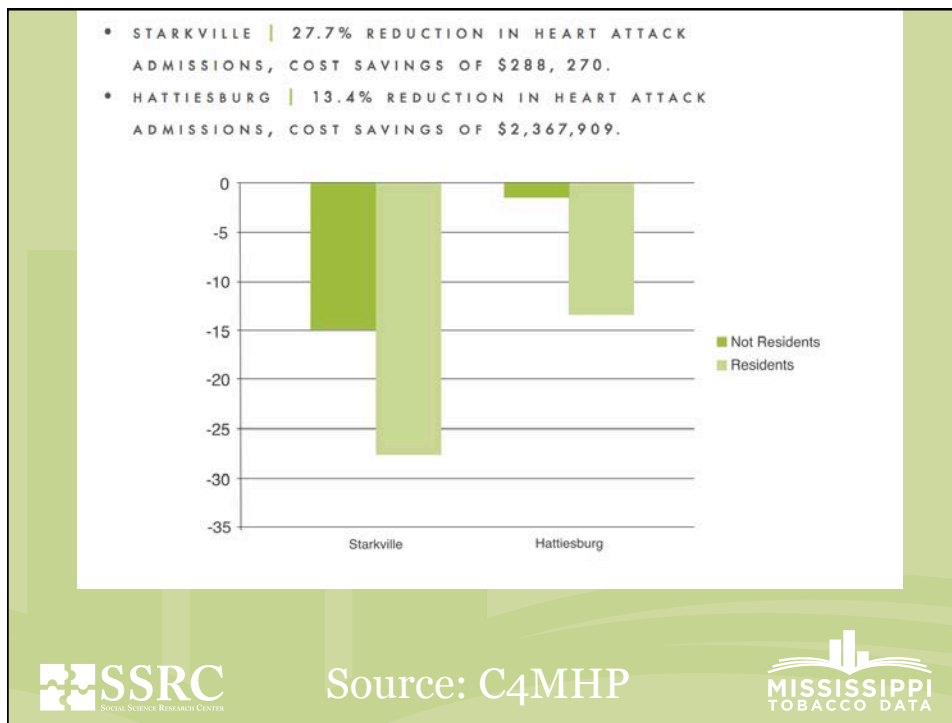


Medicaid Costs & Secondhand Smoke

	ATTRIBUTABLE POPULATION RISK	TOTAL COSTS	COSTS ATTRIBUTABLE TO EXPOSURE TO SECONDHAND SMOKE
POPULATION - BIRTH TO AGE 17			
LOW BIRTH WEIGHT CODES - ICD CODES THAT BEGIN WITH 765	18.0%	\$85,240,444	\$15,343,280
ACUTE LOWER RESPIRATORY ILLNESS (BIRTH TO AGE 5 ONLY) - ICD CODES THAT BEGIN WITH 480-488, 466	25.0%	\$28,551,853	\$7,137,963
OTITIS MEDIA AND MIDDLE EAR EFFUSION - ICD CODES THAT BEGIN WITH 382	14.0%	\$16,501,901	\$2,310,266
ASTHMA - ICD CODES THAT BEGIN WITH 493	35.0%	\$28,344,206	\$9,920,472
POPULATION - AGES 18+			
HEART ATTACKS AND OTHER HEART DISEASES - ICD CODES THAT BEGIN WITH 410	6.9%	\$12,149,244	\$838,298
LUNG CANCER - ICD CODES THAT BEGIN WITH 162	4.9%	\$12,204,636	\$598,027
		\$182,992,283	\$36,148,306

DATES OF SERVICE: 07/01/2012 - 06/30/2013

SPECIFIED DIAGNOSIS PRESENT IN EITHER THE PRINCIPLE DIAGNOSIS FIELD OR OTHER DIAGNOSIS CODES 1-4 POSITIONS



Research Designs

- Non-intervention Studies
 - Exploratory
 - Descriptive
 - Comparative/Analytical
- Intervention Studies
 - Experimental
 - Quasi-experimental
 - Pre-post experimental

Resources

- BRFSS: <http://www.cdc.gov/brfss/>
- YRBS: <http://www.cdc.gov/HealthyYouth/yrbs/index.htm>
- County Health Rankings: <http://www.countyhealthrankings.org/>
- C4MHP: <http://www.mshealthpolicy.com/>



For More Information

- Visit mstobacodata.org

