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April 8, 2014



### **Objectives**



- Describe cost of disparities in the US
- Describe Connecticut's disparities analysis
- Discuss application of the results & next steps

#### Acknowledgments



- Original Analysis
  - David A. Mann MD, PhD. Cost of Disparity Analysis & Using Disparity Data for Policy presented on May 14, 2013 at the Connecticut DPH.
- DPH Reviewers of the Connecticut Analysis
  - Margaret Hynes, Justin Peng, Mehul Dalal, Lloyd Mueller, Jon Olson,
     Olga Armah
  - Chronic Disease Surveillance & Evaluation Committee (CHAPS)
  - Population Health Statistics & Surveillance Epidemiologists
  - Community Health & Prevention Section Epidemiologists & Program Staff

# The Economic Burden of Health Inequalities in the United States



- Published September 2009 (<u>www.jointcenter.org</u>)
- The Joint Center for Political & Economic Studies
- Investigators: LaVeist, Gaskin & Richard
- From 2003-2006 there were \$229.4 billion in direct medical costs from minority disparities
  - \$57.35 billion/year
- 30.6% of direct costs for African Americans, Asians
   & Hispanics were due to disparities

# Estimate Connecticut's share of the \$57.35B



- Used population statistics
- The cost of the disparity for the Black population in Connecticut should be between \$550 million and \$650 million a year

# Acute Care Hospital Inpatient Discharge Database (HIDD)



- All 31 acute care hospitals are required by law to submit inpatient discharge data to OHCA
- Information taken from medical record abstracts and hospital bills
- Data coded for billing purposes not for surveillance
- Hospitalizations: discharges from the hospital
  - Number of discharges not unduplicated patients
- 2011 data

## Calculating the Frequency Disparity



1. Calculate the ratio of the Black Hospital Discharge Rate to White Hospital Discharge Rate (in each age group)

2. Calculate Black % Excess (in each age group):

Black to White Hospital Discharge Rate Ratio – 1
Black to White Hospital Discharge Rate Ratio

3. Calculate the Black excess hospital charges (in each age group & sum):

Black % Excess x Black Total Charges

### Frequency Disparity - CT



 The excess charges from more hospital discharges among Black residents (frequency disparity) is

\$588 million

### Severity Disparity - CT



- Average charges of Black hospitalizations are higher than the average charges for Whites
- Difference in average charges multiplied by the non-excess Black discharges
  - Non-excess Black discharges = White discharge rate
  - \$3,295 x (11,358 discharges per 100,000 population)

\$37 million

### Black Total Excess Charges - CT



- Frequency Disparity + Severity Disparity
  - \$588 million + \$37 million

\$625 Million in excess charges 36% of Black total charges

#### Hospital Charges vs. Cost



- Results are excess in hospital charges, not the actual cost of the hospitalization
- The amount of money a hospital charges the payer for services or supplies
  - Hospital charges may not include physician fees
- Charges are usually more than payments

### Hospital Charges vs. Cost



- Hospital Ratio of Cost to Charge (RCC)
  - Ratio of total operating expense to the total of gross patient charges plus other operating revenue
  - A lower ratio is more favorable, since it indicates a greater difference between the cost and charges billed for providing patient services
  - -2011 Connecticut RCC = 0.38

### Black Total Excess Cost (estimated) - CT



- RCC x Black Total Disparity (charges)
  - 0.38 x \$625 million

Black Total Disparity (estimated cost) = \$237 million

#### Limitations



- Race and ethnicity may be either self- or observerreported
  - May be subject to misclassification
- The estimates may be conservative
  - Combines:
    - Conditions for which the minority population has higher hospital discharge rates and/or higher charges and
    - Condition for which the minority population has lower hospital discharge rates and/or lower charges
- The estimates are for one point in time

### **Next Steps**



- Analyze more years of data
- Subset by payer (public and private)
- Subset by age

#### Application



- Improving quality and containing costs
- Engaging stakeholders in minority health initiatives
- Tracking progress in reducing disparities

#### Conclusion



- Black total excess charges in Connecticut are estimated to be about \$625 million
- Black total excess hospital cost is estimated to be about \$237 million
- These are conservative estimates with limitations
- Reducing health inequalities could result in cost savings as well as improved population health

#### For more information, contact:



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