



In the Literature

Highlights from Commonwealth Fund-Supported Studies in Professional Journals

Patients with Lower Activation Associated with Higher Costs; Delivery Systems Should Know Their Patients' 'Scores'

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Synopsis

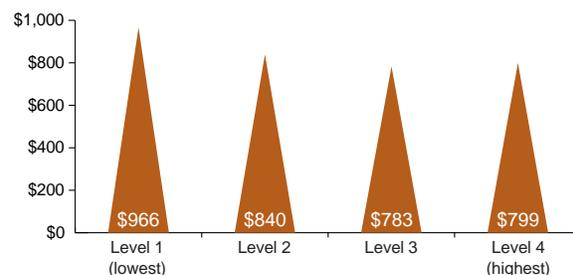
In a bid to improve health outcomes and lower costs, many health care delivery systems are seeking to make patients more active participants in treatment decisions and the management of their care—a strategy often referred to as “patient activation.” A Commonwealth Fund–supported study of a large care delivery system in Minnesota found that patients with the highest level of patient activation had significantly lower costs than those who were the least activated.

The Issue

To provide more effective care and lower costs, an increasing number of hospital systems, medical practices, and other care providers are agreeing to take on increased responsibility and financial risk for the outcomes of their care. This shift has necessitated greater attention to the role that patients' behaviors play in their treatment, and the possibility that activated patients—those able to make informed health care choices and manage their medical conditions—are a key to lower overall health care costs. In prior studies, interventions that provide patients with peer support, tailored coaching, and improved skills for asking questions during office visits have been shown to increase patient activation.

Patients Who Are More Actively Engaged in Their Care Have Lower Costs Than Patients Who Are Less Engaged

Predicted per capita billed costs in dollars, January–June 2011, by patient activation method (PAM) level



Notes: Inpatient and pharmacy costs not included. Dollar amounts are adjusted for differences in disease severity and demo graphics.
Source: Adapted from J. H. Hibbard, J. Greene, and V. Overton, “Patients with Lower Activation Associated with Higher Costs; Delivery Systems Should Know Their Patients' ‘Scores,’” *Health Affairs*, Feb. 2013 32(2):216–22.

Key Findings

- In 2010, patients with the lowest activation “scores” had predicted average health care costs that were 8 percent higher than costs for patients with the highest activation scores.

- Among patients with high cholesterol, those with the lowest activation scores had 12 percent higher predicted costs compared with patients with the highest activation scores. For patients with asthma, those with the lowest activation had 21 percent higher costs.
- In the first half of 2011, patients with the lowest activation had 21 percent higher costs than patients with the highest activation. This analysis included outpatient care costs for both primary and specialty care, as well as laboratory costs.

Addressing the Problem

“Patients who have more knowledge, skill, and confidence in managing their health, and who are more adept at navigating and using the health care system, appear to incur lower costs,” the authors conclude. Even after controlling for variables like demographics and severity of condition, the researchers were able to predict costs based on activation scores, indicating that “even sicker patients can make a difference in their costs of care through their own actions and choices.” Having information about their patients’ relative activation level can also help health care providers manage patient populations better. For instance, patients with a heavy disease burden and lack of self-management skills may need more support and outreach than patients who are similarly ill but better equipped to make decisions and manage their condition. Armed with this information, providers can more effectively target outreach efforts.

“Strategies designed to support greater patient activation have the potential to affect costs, regardless of whether patients’ illness burden is high or not.”

About the Study

The authors examined data from primary care patients enrolled with Fairview Health Services, a nonprofit health system in Minnesota with 41 primary care clinics, specialty clinics, and hospitals. More than 33,000 patients were included in the sample. Patient activation data were derived from a measure that asks patients to agree or disagree with such statements as, “I am confident that I can tell a doctor my concerns, even when he or she does not ask.” For 2010, the study included inpatient and outpatient care costs for both primary and specialty care, as well as pharmacy and laboratory costs. Because of changes in the data system, the 2011 analysis excludes inpatient and pharmacy costs.

The Bottom Line

As health care delivery systems move to assume greater responsibility for the costs and outcomes of care, they should be aware that patients’ ability and willingness to manage their health are crucial to maximizing outcomes and minimizing costs.

Citation

J. H. Hibbard, J. Greene, and V. Overton, “Patients with Lower Activation Associated with Higher Costs; Delivery Systems Should Know Their Patients’ ‘Scores,’” *Health Affairs*, Feb. 2013 32(2): 216–22.