Risk Adjustment for Measuring Health Care Outcomes, Fourth Edition

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By Topic: Risk Management, Delivery of Care

Book Description

The fourth edition of Risk Adjustment for Measuring Health Care Outcomes presents the fundamental principles and concepts of risk adjustment for comparing outcomes of care and explains why risk adjustment is a critical tool for measuring quality and setting reimbursement rates. This book is a comprehensive guide to the issues raised by risk adjustment, including the pros and cons of different data sources, the validity and reliability of risk adjustment methods, the effects of various statistical modeling approaches, and concerns relating to special populations.
The fourth edition features:

- A new chapter on the role of risk adjustment in managing healthcare organizations
- New information on risk factors, including genetics and social and environmental determinants of health
- Perspectives on electronic health records and new health information technologies
- Explanations of new statistical methods for comparing provider outcomes and their implications for risk adjustment

Instructor Resources: Discussion questions and PowerPoint slides of the book exhibits. To see a sample, click on the Instructor Resource sample tab above.
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Health care quality is defined as “the degree to which health care services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.” Quality measures “quantify the quality of a selected aspect of care by comparing it to an evidence-based criterion that specifies what is better quality.” The ultimate goal of quality measurement is to provide better, more affordable care that improves population health.

Risk adjustment for measuring health care outcomes includes measures of access to care, processes of care, structures of care, patient satisfaction, and health outcomes.