

Does Objective Quality of Physicians Correlate with Patient Satisfaction Measured by Hospital Compare Metrics in New York State?

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Introduction

It is unclear whether publicly reported benchmarks correlate with the quality of physicians and institutions. We investigated the association of patient satisfaction measures from a public reporting platform with the performance of neurosurgeons in New York State.

Methods

We performed a cohort study involving patients undergoing neurosurgical operations from 2009-2013, who were registered in the Statewide Planning and Research Cooperative System (SPARCS) database. This cohort was merged with publicly available data from the CMS Hospital Compare website. A propensity adjusted regression analysis was used to investigate the association of patient satisfaction metrics with neurosurgeon quality, as measured by their individual rate of mortality and average length-of-stay (LOS).

Results

Overall, 166,365 patients underwent neurosurgical procedures during the study. Using a propensity adjusted multivariable regression analysis we demonstrated that undergoing neurosurgical operations in hospitals with a greater percentage of patient-assigned “high” score were associated with higher chance of being treated by a physician with superior performance in terms of mortality (OR 1.90; 95% CI, 1.86 to 1.95), and a higher chance of being treated by a physician with superior performance in terms of length-of-stay (LOS) (OR 1.24; 95% CI, 1.21 to 1.27). Similar associations were identified for hospitals with a higher percentage of patients, who claimed they would recommend these institutions to others.

Conclusions

Merging a comprehensive all-payer cohort of neurosurgery patients in New York State with data from the CMS Hospital Compare website, we observed an association of superior hospital-level patient satisfaction measures with the objective performance of individual neurosurgeons in the corresponding hospitals.

Learning Objectives

By the conclusion of this session, participants should be able to:

Identify whether publicly reported benchmarks correlate with the quality of physicians and institutions for neurosurgery patients

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