


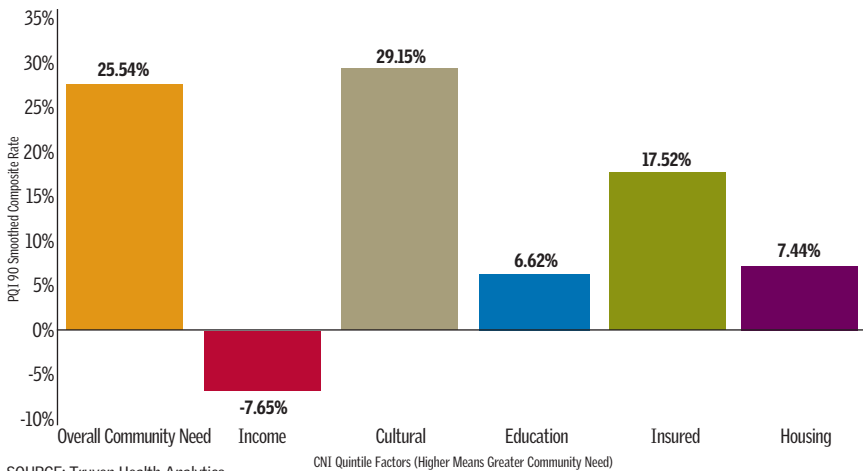
# FACTFILE

## Community Need and Preventable Hospitalizations

Truven Health Analytics™ evaluated the extent to which community need—a measure of the underlying economic and social factors that affect the overall health of a community, including income, cultural/language barriers, education, insurance and housing—is associated with elevated rates of preventable hospitalizations or an increased risk of hospitalization believed to be preventable with quality ambulatory care. The results of this investigation reveal a modest but statistically significant association between community need and an increased risk of hospitalizations that are believed to be preventable with good-quality ambulatory care. 

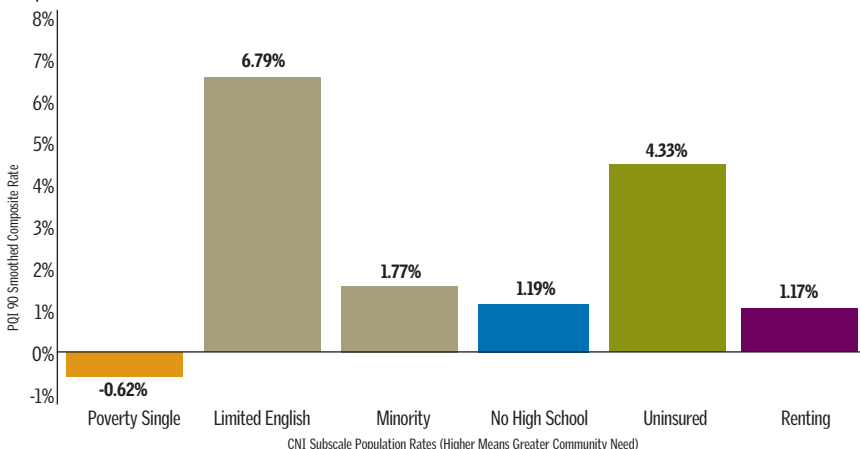
### PERCENT IMPACT ON PQI SMOOTHED COMPOSITE RATE FOR EACH UNIT INCREASE IN THE CNI QUINTILE SHOWN

Some aspects of community need, specifically culture (minority and lack of English language proficiency) and insurance barriers (lack of health insurance and employment) are more strongly associated with increased rates of potentially preventable hospitalizations.



### PERCENT IMPACT ON PQI SMOOTHED COMPOSITE RATE FOR EACH PERCENT INCREASE IN THE NUMBER OF PEOPLE IN THE COMMUNITY

Among the barrier submeasures, the percent of the population lacking English language proficiency and health insurance are more strongly associated with increased rates of potentially preventable hospitalizations.



### About the Data

Here is some background regarding the data in this report.

- The Agency for Healthcare Research and Quality (AHRQ) Prevention Quality Indicators (PQI) are a set of measures that can be used with hospital inpatient discharge data to identify quality of care for "ambulatory care-sensitive conditions." These are conditions for which good outpatient care can potentially prevent the need for hospitalization or for which early intervention can prevent complications or more severe disease. The PQIs are population-based and adjusted for covariates.
- Hospital inpatient discharge data from FFY 2014 were extracted from the Truven Projected Inpatient Data Base (PIDB) in accordance with the format for input into the AHRQ PQI SAS version 5.0 (2015) software. ZIP codes were included in the extracted data for mapping to geographic areas.
- The discharge data were mapped by ZIP, and then by state and county to the Truven Community Need Index (CNI 2015).
- Limitations: The PQI results found in this study are based on administrative claims data. Because these data are not true epidemiologic data, it is not appropriate to interpret the reported assumptions as causal. The results reported here are suitable only for demonstrating an association between CNI and PQI.

### Community Need Index Definitions

Here is a look at the major barriers, which are based on submeasures for percent composition of community.

#### Income Barrier

- Percentage of households below poverty line, with head of household age 65 or older
- Percentage of families with children under 18 below poverty line
- Percentage of single female-headed families with children under 18 below poverty line

#### Cultural Barrier

- Percentage of population that is minority (including Hispanic ethnicity)
- Percentage of population over age 5 that speaks English poorly or not at all

#### Education Barrier

- Percentage of population over age 25 without a high school diploma

#### Insurance Barrier

- Percentage of population in the labor force, age 16 or older, without employment
- Percentage of population without health insurance

#### Housing Barrier

- Percentage of households renting their home

For more information email [info@truvenhealth.com](mailto:info@truvenhealth.com); call 1-800-525-9083, option 4; or visit [www.truvenhealth.com](http://www.truvenhealth.com)

### Upcoming Topic:

> Hospital Performance

### FACT FILE PARTNER:



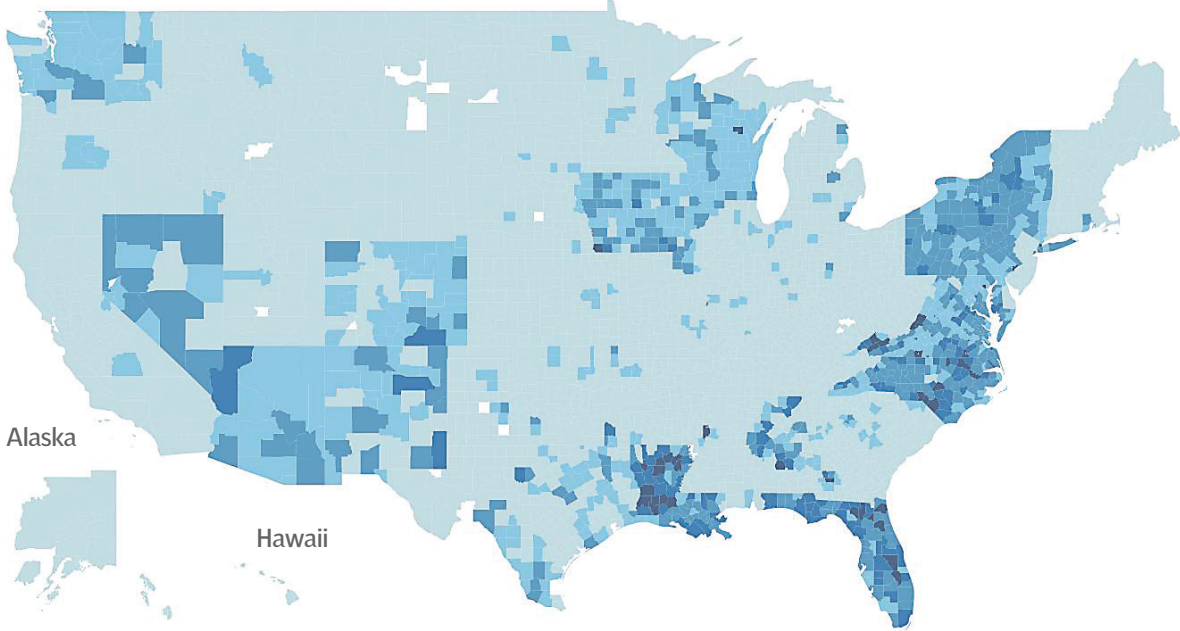
## COMMUNITY NEEDS BY LOCATION

In the graphics below, we map the the PQI 90 percentages and overall Community Need Index score. Each map shows the level of quality or need at the county or parish level. Darker shades indicate lesser quality and higher need. Associations are strongest where shading is similar—dark shading with dark shading and light shading with light shading.

### PQI 90 POTENTIALLY PREVENTABLE HOSPITALIZATION RATE PER 100,000 POPULATION

(Darker shading indicates lower quality)

0.00%  2.50%



### COMMUNITY NEED INDEX COMPOSITE SCORE (Darker shading indicates greater need)

1.000  5.000

