

Paper Summary

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Physician Patient-Sharing Networks and the Cost and Intensity of Care in US Hospital

- Trying to assess how the structure of patient-sharing networks of physician within hospitals might contribute to variation in the cost and intensity.
- data: patient-sharing network from 2006 medicare data + information about hospitals and physician from AMA 2006 annual survey.
- Method: Assigning physician to primary hospital; for each hospital, Use measurements (adjusted degree, between centrality) of the network structure, and some other hospital control variables as predictors; hospital measures of spending and care intensity in the past two years as response variable. Run regression.

Physician Networks and Ambulatory Care-sensitive Admissions – Objective: Determine the relationship between rate ambulatory care-sensitive hospital admissions varies across physician networks /network characteristics..

- Data : 2008 medicare , 987,000 beneficiaries in 5 states.
- Confine instead of looking the patient-sharing network spanned by physicians across the country, look at small networks among physicians within small communities – PPC physician practice community. PPCs are found through network algorithm.

For each PPCs, it has certain beneficiaries (Beneficiary Annual Summary File), certain physicians (AMA masterfile). + physician adjusted degree and between centrality. some PPCs level characteristics are calculated from physicians (percentage of primary care physicians, mean adjusted degree etc)

regression on the beneficiary level, with its own characteristics and community characteristics. Use the ACSA's as response (# of Ambulatory Care-sensitive Admissions).