

PREVENTING HOSPITALIZATIONS WITH MACHINE LEARNING

by Lili Beit



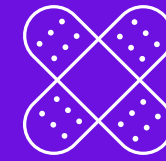
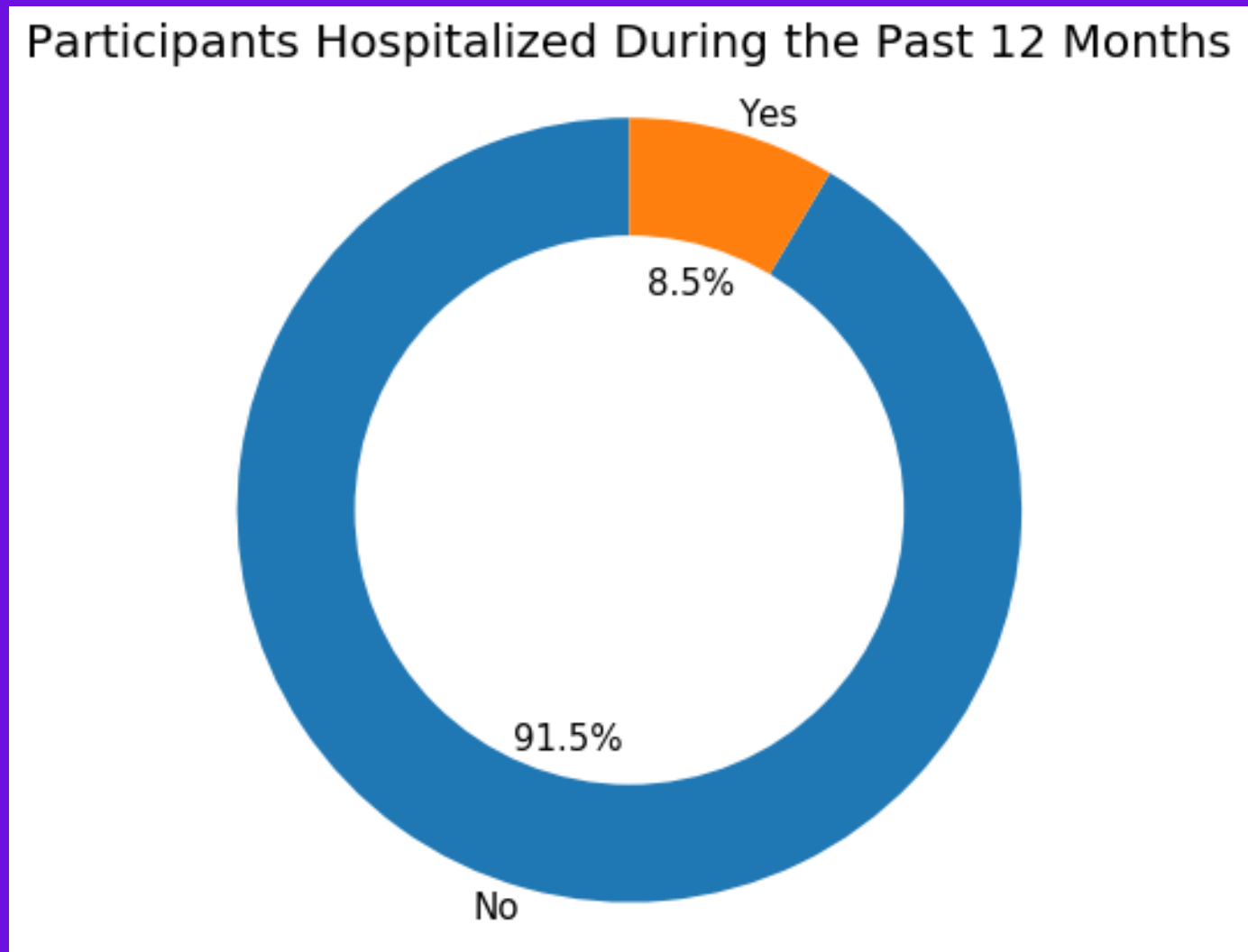
BUSINESS PROBLEM

- Predict which patients will be hospitalized over the next 12 months, based on demographic information and medical conditions
- Generate a list of high-risk patients, with a precision rate above 20%
- **Value-based payment systems** incentivize provider networks to deliver high-quality care at low cost
- A **predictive model** can help providers identify high-risk patients
- Targeting these patients for **outreach** can prevent hospitalizations and reduce health care costs
- Provider networks that reduce costs are entitled to a share of the **savings** to insurers

DATA

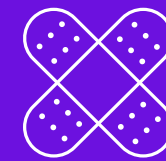
NATIONAL HEALTH AND NUTRITION EXAMINATION SURVEY (NHANES)

2017-2018



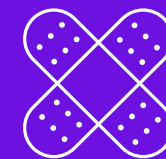
SURVEY POPULATION

- Nationally representative sample of 9,000 participants, from counties across the U.S.
- Excluded participants under two years old



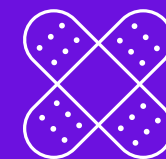
PREDICTORS

- Demographic information
- Medical conditions (prior to 1 year ago)
- Prescription drug use (prior to 1 year ago)



HOSPITALIZATIONS (THE TARGET)

- Only 8.5% of participants were hospitalized over the past year
- This excludes hospitalizations for childbirth



DATA GAPS AND AMBIGUITY

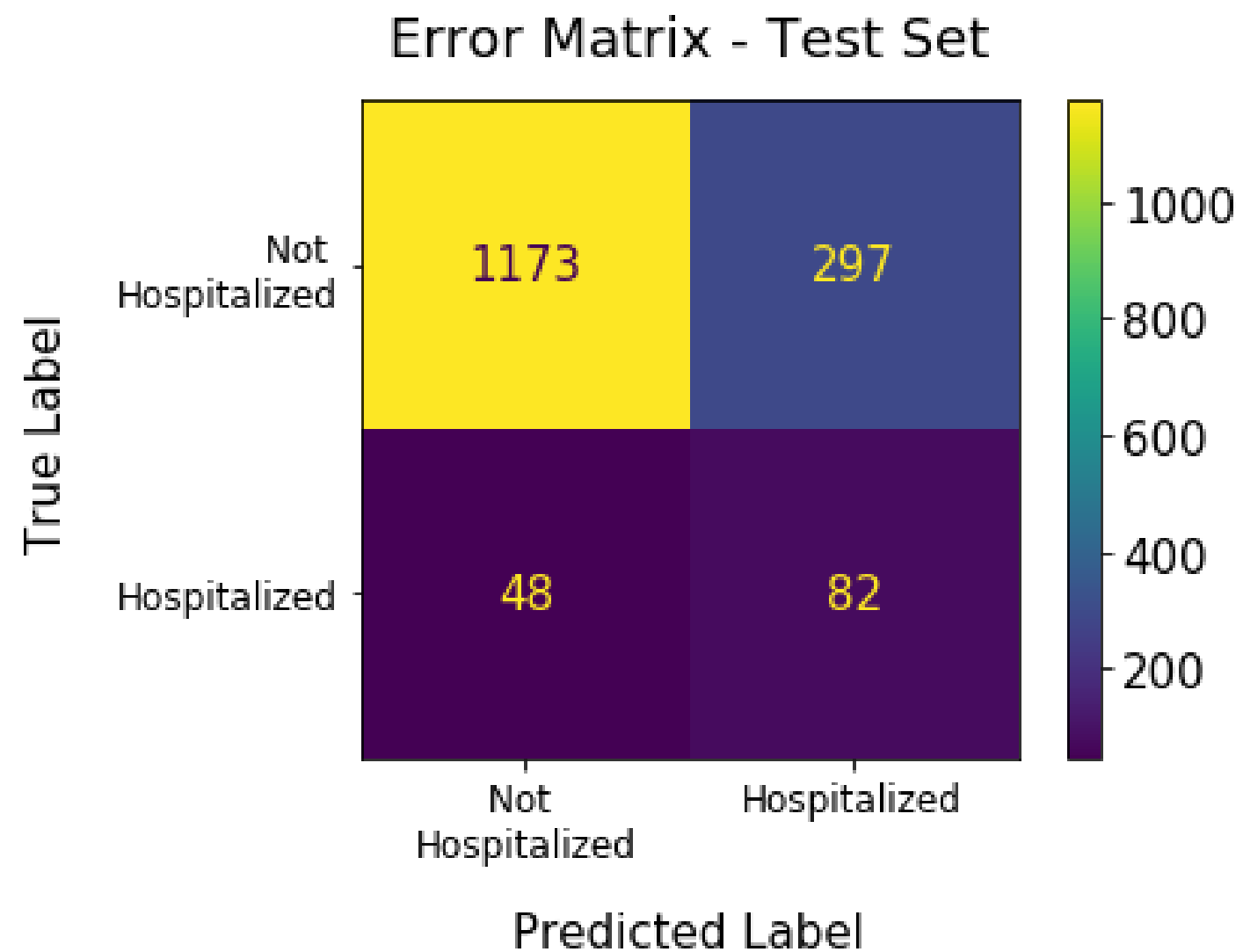
- Not true EHR data, relies on participant memory
- COPD
- Patients over 80

MODELING

LOGISTIC REGRESSION

Recall / Sensitivity: 0.64

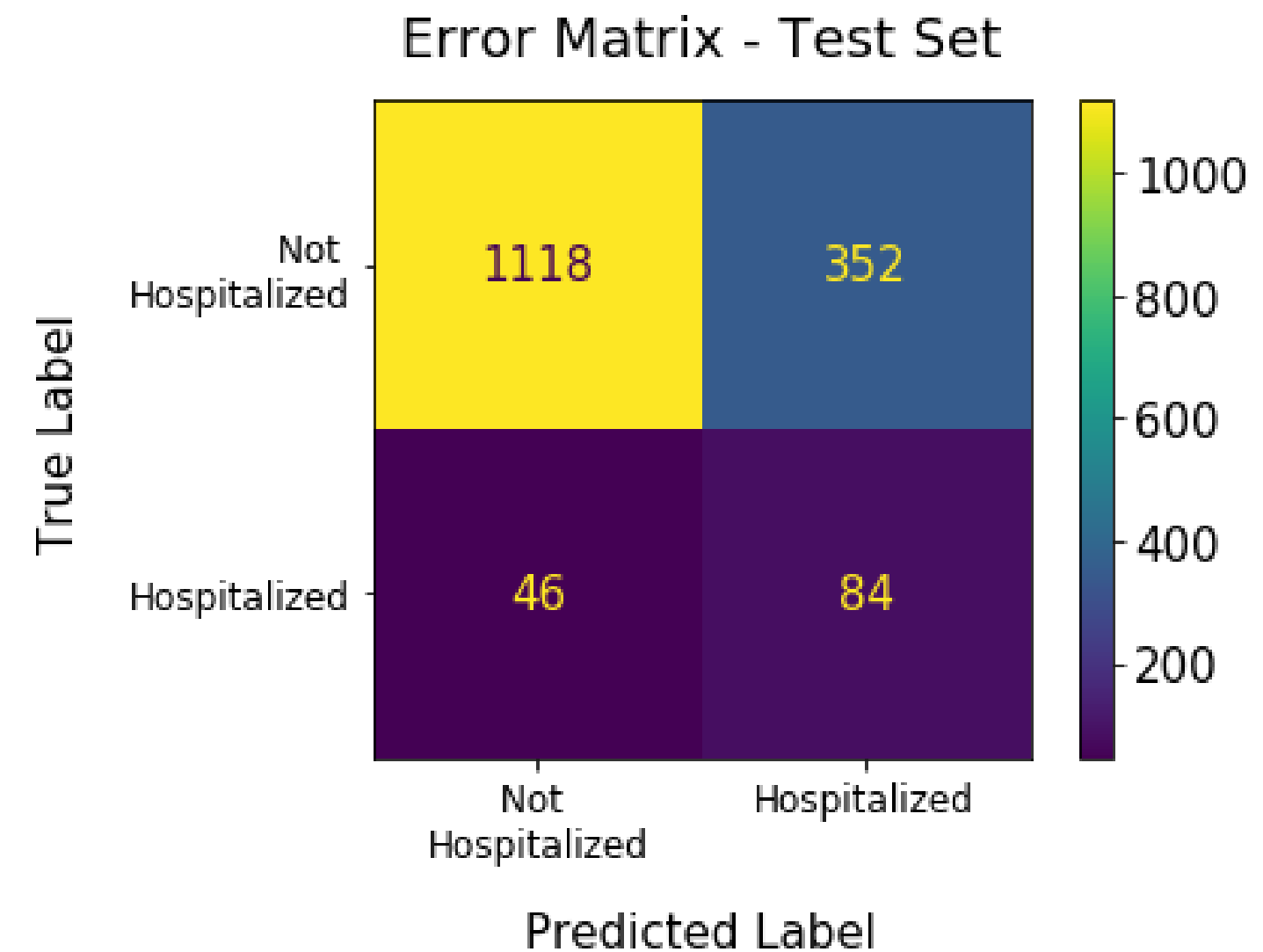
Precision / Specificity: 0.21



RANDOM FOREST

Recall / Sensitivity: 0.67

Precision / Specificity: 0.19



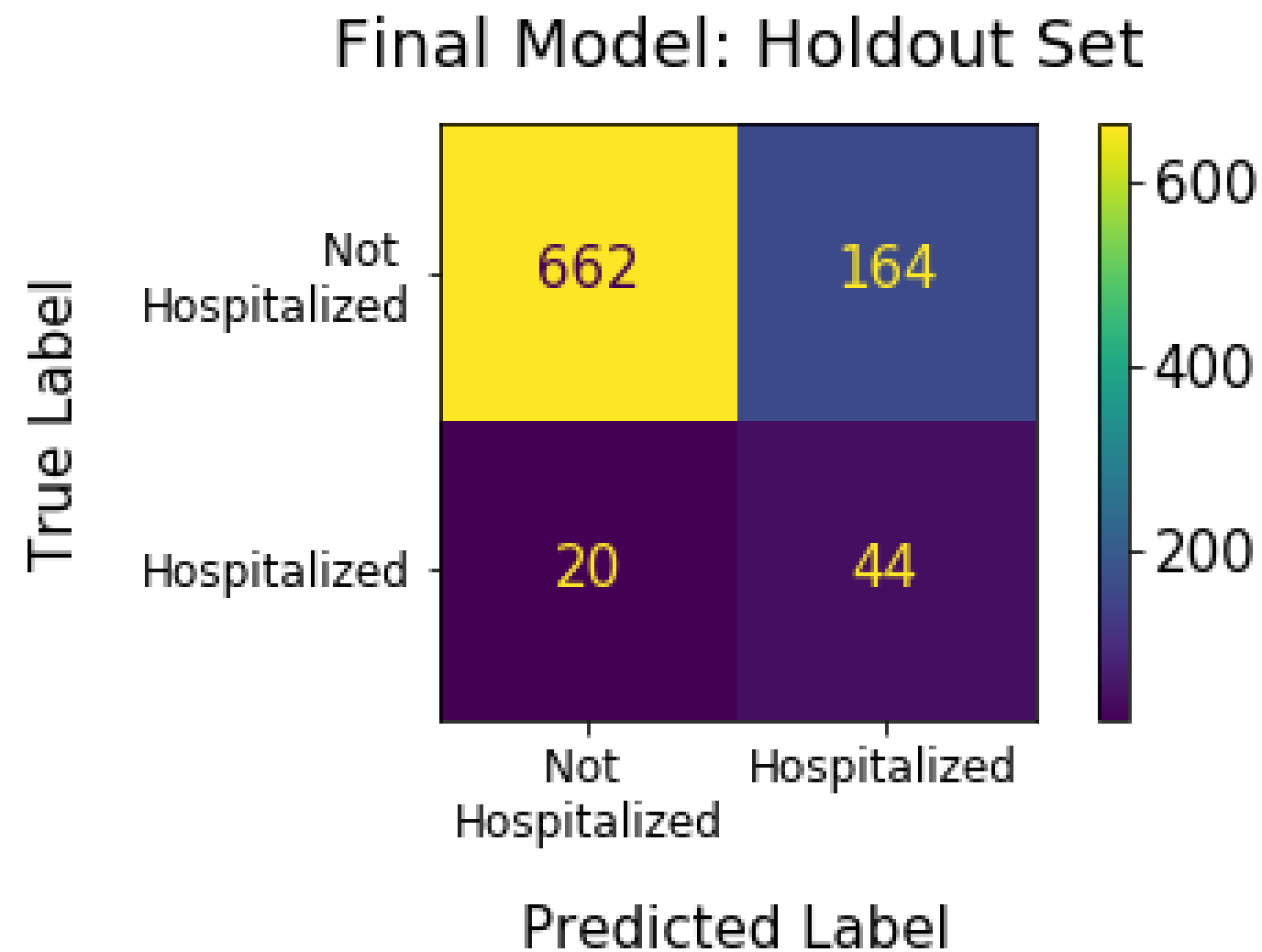
FINAL MODEL

RECALL / SENSITIVITY: 0.69

PRECISION / SPECIFICITY: 0.21

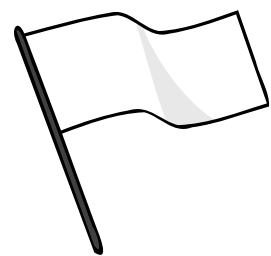
- LOGISTIC REGRESSION
- BALANCED CLASS WEIGHTS

- FEATURES:
 - HEART CONDITIONS
 - CIRCULATORY CONDITIONS
 - RESPIRATORY CONDITIONS
 - NUMBER OF RX DRUGS
 - ARTHRITIS
 - CANCER
 - LIVER CONDITIONS
 - AGE
 - RACE



CONCLUSIONS AND FUTURE WORK

Model effectively
flags patients at
high risk for
hospitalization



By closely
managing these
patients, ACOs
can prevent
hospitalizations
and other adverse
events



Decision tree-
based models
may perform
better with more
data, and merit
further study



More data points
(health
information)
about each
participant may
improve the
model





THANK YOU QUESTIONS?

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