

Health or Satisfaction? Investigating the Link Between Patient Satisfaction Scores and Provider Prescribing Patterns



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Identification Strategy

We use a multilevel linear probability with hospital and time fixed effects. Our identification comes from two main interaction terms:

- Model 1: Interaction Between Hospital Owner and Score
- Model 2: Interaction Between Grey Cases and Score

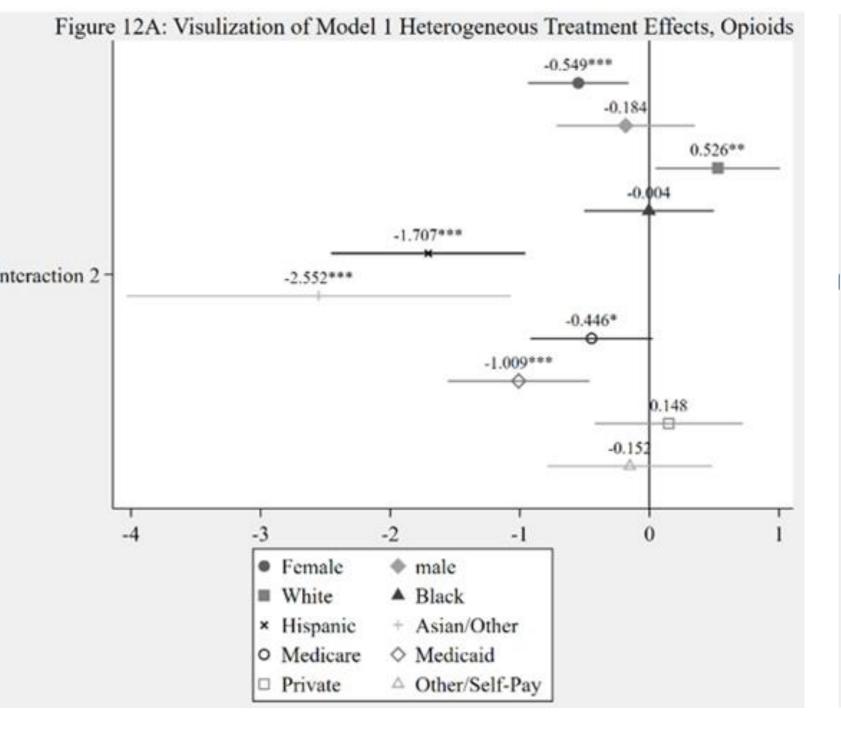
We interact different iterations of the score:

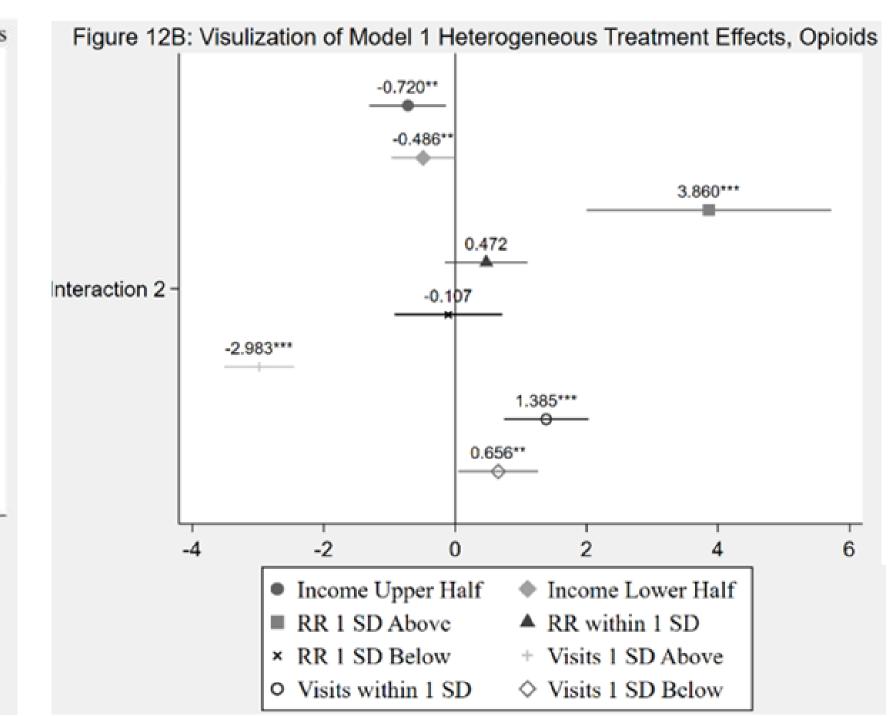
• present year's score; prior year's score; difference in score between last year and this year (or two years ago and last year); and difference between this year's score (prior year) and the average score across all hospitals

We also explore heterogeneity across four subgroups of the patient population and two markers of hospital demand:

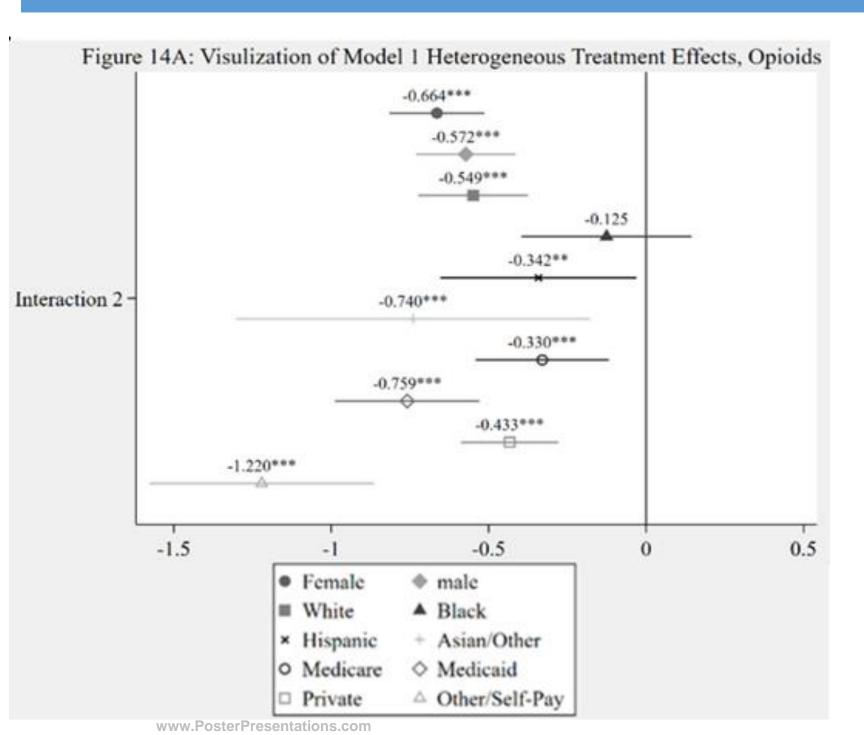
- The patient's gender, race, insurance, and income background
- Markers of hospital demand: survey response rate and log number of monthly patients visits

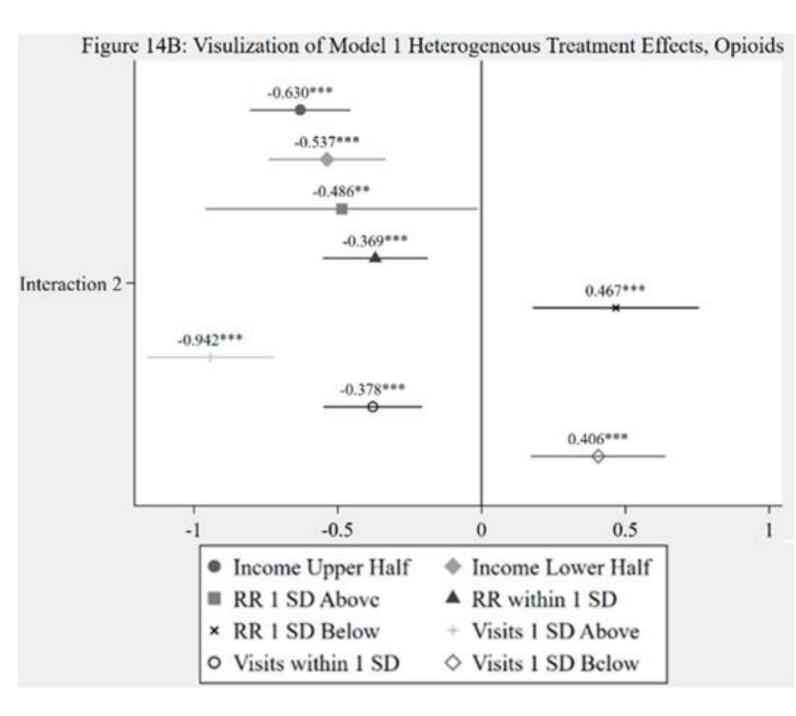
Heterogenous Treatment Effects - Model 1 (only Opioids shown)





Heterogenous Treatment Effects - Model 2 (only Opioids shown)





Motivation

Healthcare systems have begun to focus their institutional model on catering to patient happiness and satisfaction – particularly in general medicine – drifting towards a concierge-style environment. One way this directly shows up is with patient satisfaction surveys – which potentially adds a friction in the provider's health-related formulation of care that is not

Research Question

Does the presence of satisfaction scores distort prescribing behavior (opioids and antibiotics) in general medicine?

Conclusions

Our findings show that patient satisfaction scores do impact prescribing patterns. Particularly:

- When hospital systems have higher satisfaction scores their incentive to prescribe is depressed \rightarrow Preferences to raise scores are not monotonic
- What is important to hospital systems is establishing a public perception that is better than their peers
- Generally, public hospitals are less influenced by scores than private hospitals.
- Women, minority racial and ethnic groups, and selfpaying (uninsured) patients face the most consistent differential treatment across both of our models and clinical settings \rightarrow These subgroups tend on average to be less likely to receive a prescription

Contact

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Data

Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) Reporting from the Center for Medicare and Medicaid Services (CMS) from 2008-2022:

- 9 score categories, with scores ranging from 0-100 (100 being the best)
- Identify hospital ownership (public, private, church, other non-profit)
- Observe survey response rates
- Use American Medical Association (AMA) survey to merge with SASD hospitals

State Ambulatory Surgery and Services Databases (SASD) for NYS - 2003-2017

- Observe individual provider-patient interactions
- Detailed information on patient demographics (including income and insurance)
- Detailed information on diagnoses, procedures, charges, visits to the facility, admission rates, discharge locations, and capable of tracking patients through time
- Limited to observing in-clinic administration of drugs

We focus on 2009-2014

*** p<0.01, ** p<0.05, * p<0.1

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Main Results – Model 1: Hospital Owner and Score

Table 6: Hospital Type and Score Interaction Conditional on Opioids						Table 7: Hospital Type and Score Interaction Conditional on Antibiotics						
	(1)	(2)	(3)	(4)	(5)		(1)	(2)	(3)	(4)	(5)	
	OLS	Present Year's Score	Last Year's Score	Self- Updating	Relative to Competition		OLS	Present Year's Score	Last Year's Score	Self- Updating	Relative to Competition	
Iteration of Score	0.029	0.490***	0.016	0.537***	0.410***	Iteration of Score	-0.580***	0.225***	-0.010	0.244***	0.206***	
	(0.1277)	(0.1218)	(0.0943)	(0.0756)	(0.1257)		(0.0580)	(0.0600)	(0.0641)	(0.0557)	(0.0608)	
1(Public Hospital)	-0.809***	0.237*	1.558***	-0.036*	0.008	1(Public Hospital)	-1.215***	-0.131*	1.028***	-0.062***	0.007	
	(0.1462)	(0.1299)	(0.1630)	(0.0193)	(0.0119)		(0.0849)	(0.0749)	(0.0976)	(0.0099)	(0.0063)	
1(Public Hospital) x Iteration of Score	1.091***	-0.400**	-2.640***	0.992***	0.752***	1(Public Hospital) x Iteration of Score	1.848***	0.195*	-1.802***	0.864***	0.328***	
	(0.2256)	(0.1993)	(0.2700)	(0.1884)	(0.2355)		(0.1297)	(0.1156)	(0.1662)	(0.1391)	(0.1076)	
Observations	781,152	781,151	637,735	637,735	781,151	Observations	781,152	781,151	637,735	637,735	781,151	
Adjusted R-Squared	0.150	0.352	0.366	0.366	0.352	Adjusted R-Squared	0.140	0.253	0.255	0.255	0.253	
Hospital FE		YES	YES	YES	YES	Hospital FE		YES	YES	YES	YES	
Year FE		YES	YES	YES	YES	Year FE		YES	YES	YES	YES	
Month FE		YES	YES	YES	YES	Month FE		YES	YES	YES	YES	
Robust standard errors in parentheses						Robust standard errors in parentheses						

Main Results – Model 2: Grey Cases and Score

Table 8:	: Expected Ca	se and Score Inte	raction Conditi	nditional on Opioids Table 9: Expected Case and Score Interaction Conditional on Antibio						tics			
	(1)	(2)	(3)	(4)	(5)		(1)	(2)	(3)	(4)	(5)		
	OLS	Present Year's Score	Last Year's Score	Self- Updating	Relative to Competition		OLS	Present Year's Score	Last Year's Score	Self- Updating	Relative to Competition		
ration of Score	1.695***	0.944***	0.356***	1.752***	0.759***	Iteration of Score	-0.563***	0.403***	0.082	0.283***	0.387***		
	(0.1318)	(0.1300)	(0.1126)	(0.1322)	(0.1328)		(0.0598)	(0.0646)	(0.0645)	(0.0563)	(0.0646)		
Grey Case)	1.182***	0.321***	0.301***	-0.085***	-0.100***	1(Grey Case)	-0.268***	0.300***	0.326***	-0.100***	-0.097***		
	(0.0623)	(0.0457)	(0.0520)	(0.0033)	(0.0032)		(0.0503)	(0.0466)	(0.0529)	(0.0043)	(0.0041)		
Grey Case) x ration of Score	-1.897***	-0.612***	-0.581***	-1.473***	-0.365***	1(Grey Case) x Iteration of Score	0.285***	-0.574***	-0.624***	0.146	-0.531***		
	(0.0920)	(0.0680)	(0.0775)	(0.1419)	(0.0806)		(0.0739)	(0.0700)	(0.0796)	(0.1125)	(0.0816)		
servations						Observations	781,152	781,151	637,735	637,735	781,151		
justed R-Squared	781,152	781,151	637,735	637,735	781,151	Adjusted R-Squared	0.138	0.253	0.255	0.254	0.253		
spital FE	0.151	0.353	0.366	0.367	0.352	Hospital FE		YES	YES	YES	YES		
ar FE		YES	YES	YES	YES	Year FE		YES	YES	YES	YES		
onth FE		YES	YES	YES	YES	Month FE		YES	YES	YES	YES		
	Robu	st standard errors	in parentheses				Robust standard errors in parentheses						

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