

How Can Demographic Market Data Influence Health Care Business Decisions(3)

Louis G. Pol, Richard K. Thomas

The Future of the Public's Health in the 21st Century Institute of Medicine, Board on Health Promotion and Disease Prevention, Committee on Assuring the Health of the Public in the 21st Century, 2003-02-01 The anthrax incidents following the 9/11 terrorist attacks put the spotlight on the nation's public health agencies, placing it under an unprecedented scrutiny that added new dimensions to the complex issues considered in this report. The Future of the Public's Health in the 21st Century reaffirms the vision of Healthy People 2010, and outlines a systems approach to assuring the nation's health in practice, research, and policy. This approach focuses on joining the unique resources and perspectives of diverse sectors and entities and challenges these groups to work in a concerted, strategic way to promote and protect the public's health. Focusing on diverse partnerships as the framework for public health, the book discusses: The need for a shift from an individual to a population-based approach in practice, research, policy, and community engagement. The status of the governmental public health infrastructure and what needs to be improved, including its interface with the health care delivery system. The roles nongovernment actors, such as academia, business, local communities and the media can play in creating a healthy nation. Providing an accessible analysis, this book will be important to public health policy-makers and practitioners, business and community leaders, health advocates, educators and journalists.

The Demography of Health and Health Care (second edition) Louis G. Pol, Richard K. Thomas, 2001 Annotation As the increasing power of computers allows for the processing of ever-larger collections of data, new cross-disciplinary studies are developing; one of these bridges the gap between health care and demographic studies. In this volume, the authors use data from a variety of sources, models, theories and case studies to demonstrate the uses of the health care-demography fusion from both theoretical and applied perspectives. Written for health care practitioners, academic and private sector demographers, and students in demography or health care, Pol (U. of Nebraska) and Thomas (Medical Research Group) discuss the emerging field of study, and aim to further refine its scope, demonstrate its relevance and illustrate its application. After an overview of the US medical system, they converse on what they feel are relevant topics to health care demographics including population size, fertility, and the process of mortality. Annotation c. Book News, Inc., Portland, OR

(booknews.com).

The Demography of Health and Healthcare Louis G. Pol, Richard K. Thomas, 2012-08-13 In this 3rd edition of the definitive work on health demography, Pol and Thomas offer an updated view of the field and a current perspective on the applications of health demography to contemporary issues. The significance of health demography within the field of population studies has continued to increase and this work provides background on the healthcare arena and systematically presents the various aspects of demography as they relate to healthcare. This addition has been streamlined to focus on the important aspects of health demography and enhanced through the addition of charts, maps and other graphics. All statistics and tables have been updated and the most current references are included. A separate chapter on morbidity has been included and the final chapter focuses on the public policy interface with health demography. Case studies and sidebars are included throughout the book to illustrate the applications of demography within the healthcare arena. Recent developments in U.S. healthcare are highlighted to give the text a very contemporary presence.

Race, Ethnicity, and Language Data Institute of Medicine, Board on Health Care Services, Subcommittee on Standardized Collection of Race/Ethnicity Data for Healthcare Quality Improvement, 2009-12-30 The goal of eliminating disparities in health care in the United States remains elusive. Even as quality improves on specific measures, disparities often persist. Addressing these disparities must begin with the fundamental step of bringing the nature of the disparities and the groups at risk for those disparities to light by collecting health care quality information stratified by race, ethnicity and language data. Then attention can be focused on where interventions might be best applied, and on planning and evaluating those efforts to inform the development of policy and the application of resources. A lack of standardization of categories for race, ethnicity, and language data has been suggested as one obstacle to achieving more widespread collection and utilization of these data. Race, Ethnicity, and Language Data identifies current models for collecting and coding race, ethnicity, and language data; reviews challenges involved in obtaining these data, and makes recommendations for a nationally standardized approach for use in health care quality improvement.

Communities in Action National Academies of Sciences, Engineering, and Medicine, Health and Medicine Division, Board on Population Health and Public Health Practice, Committee on Community-Based Solutions to Promote Health Equity in the United States, 2017-04-27 In the United States, some populations suffer from far greater disparities in health than others. Those disparities are caused not only by fundamental differences in health status across segments of the population, but also because of inequities in factors that impact health status, so-called determinants of health. Only part of an individual's health status depends on his or her behavior and choice; community-wide problems like poverty, unemployment, poor education, inadequate housing, poor public transportation, interpersonal violence, and decaying neighborhoods also contribute to health inequities, as well as the historic and ongoing interplay of structures, policies, and

norms that shape lives. When these factors are not optimal in a community, it does not mean they are intractable: such inequities can be mitigated by social policies that can shape health in powerful ways. *Communities in Action: Pathways to Health Equity* seeks to delineate the causes of and the solutions to health inequities in the United States. This report focuses on what communities can do to promote health equity, what actions are needed by the many and varied stakeholders that are part of communities or support them, as well as the root causes and structural barriers that need to be overcome.

Health-Care Utilization as a Proxy in Disability Determination National Academies of Sciences, Engineering, and Medicine, Health and Medicine Division, Board on Health Care Services, Committee on Health Care Utilization and Adults with Disabilities, 2018-04-02 The Social Security Administration (SSA) administers two programs that provide benefits based on disability: the Social Security Disability Insurance (SSDI) program and the Supplemental Security Income (SSI) program. This report analyzes health care utilizations as they relate to impairment severity and SSA's definition of disability. *Health Care Utilization as a Proxy in Disability Determination* identifies types of utilizations that might be good proxies for listing-level severity; that is, what represents an impairment, or combination of impairments, that are severe enough to prevent a person from doing any gainful activity, regardless of age, education, or work experience.

Care Without Coverage Institute of Medicine, Board on Health Care Services, Committee on the Consequences of Uninsurance, 2002-06-20 Many Americans believe that people who lack health insurance somehow get the care they really need. *Care Without Coverage* examines the real consequences for adults who lack health insurance. The study presents findings in the areas of prevention and screening, cancer, chronic illness, hospital-based care, and general health status. The committee looked at the consequences of being uninsured for people suffering from cancer, diabetes, HIV infection and AIDS, heart and kidney disease, mental illness, traumatic injuries, and heart attacks. It focused on the roughly 30 million-one in seven-working-age Americans without health insurance. This group does not include the population over 65 that is covered by Medicare or the nearly 10 million children who are uninsured in this country. The main findings of the report are that working-age Americans without health insurance are more likely to receive too little medical care and receive it too late; be sicker and die sooner; and receive poorer care when they are in the hospital, even for acute situations like a motor vehicle crash.

Artificial Intelligence in Healthcare Adam Bohr, Kaveh Memarzadeh, 2020-06-21 Artificial Intelligence (AI) in Healthcare is more than a comprehensive introduction to artificial intelligence as a tool in the generation and analysis of healthcare data. The book is split into two sections where the first section describes the current healthcare challenges and the rise of AI in this arena. The ten following chapters are written by specialists in each area, covering the whole healthcare ecosystem. First, the AI applications in drug design and drug development are presented followed by its applications in the field of cancer diagnostics, treatment and medical imaging. Subsequently, the application of AI in medical devices and surgery are

covered as well as remote patient monitoring. Finally, the book dives into the topics of security, privacy, information sharing, health insurances and legal aspects of AI in healthcare. Highlights different data techniques in healthcare data analysis, including machine learning and data mining Illustrates different applications and challenges across the design, implementation and management of intelligent systems and healthcare data networks Includes applications and case studies across all areas of AI in healthcare data

Demography for Business Decision Making Louis Pol,Richard K. Thomas,1997-07-23 Demography as a discipline is now at the point where its relevance to business decision making is indisputable—and top business management knows this. People who lack an understanding of state-of-the-art demographic techniques, and who cannot adapt to new ways of thinking prompted by demography and demographers, will find themselves significantly disadvantaged in today's competitive business environment. Pol and Thomas thus provide practitioners and students alike with a concise but intensive introduction to the concepts and methods of business demography. They chronicle current demographic trends and explain their meaning for business. With numerous examples drawn from business and industry, they make clear that business demography is truly a decision-making science. Pol and Thomas introduce basic concepts, then present an overview of recent and future demographic trends. They elaborate on the application of current demographic methods to planning and marketing in the contemporary business environment, and illustrate their points with numerous charts, maps, and sidebars. Pol and Thomas provide many examples of real world situations in which demographic methods, data, perspective, and theory are actively applied. With sections on sources of health care data, the calculation of demographic rates, the demographic resources available and up-to-date statistics on current demographic trends, their book becomes not only a unique resource for professionals, but also a useful text and reference for their colleagues in the academic community.

Demographics Hallie J. Kintner,1997 This is a collection of 20 case studies prepared by a group of demographers; professors of economics, sociology, population studies, business, and marketing; and research analysts interested in understanding a world of changing demographics. Because the study of demography is becoming increasingly important to a growing number of professionals and decisionmakers in business and government, these case studies were written to address how the science of demography is being applied to real-world problems. Written in nontechnical language and presented in a classroom-tested format, this easy-to-use guidebook covers applications of applied demography in government planning, long-term corporate strategy, forecasting, human resource management, and marketing. The authors show how to tie financial, political, and legal analysis into a consideration of demographic data and trends.

Orchestrating Value Pam Arlotto,Susan Irby,2020-02-05 Orchestrating Value: Population Health in the Digital Age focuses on the leadership thinking and mindset changes needed to transition from brick and mortar healthcare to digital health and connected care. The fourth industrial revolution, with convergent disruptions in biology, business models,

computer science, and culture, has the potential to transform the healthcare system like never before. Digital health startups, Big Tech and progressive health systems will change the way health and healthcare are delivered to increasingly digitally savvy consumers. This book challenges readers to rethink the role of data and technology in creating and designing the future. Rather than hooking value-based care and population health management onto traditional healthcare business models, it focuses on the emergence of digital ecosystems. Using the analogy of an orchestra, the book introduces the importance of platforms in the formation of communities and markets with network effects to allow participants to collaborate, create, and innovate. With quotes from healthcare industry leaders and change agents, it helps the strategist understand the three stages of the transition from volume to value. As conductor of the orchestra, the CEO must navigate important leadership pivots to move beyond silo-based thinking. Finally, the Care Management Platform is described as a new operating model for population health in the digital age. As the next generation beyond foundational EHRs, capabilities such as interoperability, analytics, care management and patient/consumer engagement will fundamentally change the way healthcare enterprises operate and deliver value to customers.

Registries for Evaluating Patient Outcomes Agency for Healthcare Research and Quality/AHRQ,2014-04-01 This User's Guide is intended to support the design, implementation, analysis, interpretation, and quality evaluation of registries created to increase understanding of patient outcomes. For the purposes of this guide, a patient registry is an organized system that uses observational study methods to collect uniform data (clinical and other) to evaluate specified outcomes for a population defined by a particular disease, condition, or exposure, and that serves one or more predetermined scientific, clinical, or policy purposes. A registry database is a file (or files) derived from the registry. Although registries can serve many purposes, this guide focuses on registries created for one or more of the following purposes: to describe the natural history of disease, to determine clinical effectiveness or cost-effectiveness of health care products and services, to measure or monitor safety and harm, and/or to measure quality of care. Registries are classified according to how their populations are defined. For example, product registries include patients who have been exposed to biopharmaceutical products or medical devices. Health services registries consist of patients who have had a common procedure, clinical encounter, or hospitalization. Disease or condition registries are defined by patients having the same diagnosis, such as cystic fibrosis or heart failure. The User's Guide was created by researchers affiliated with AHRQ's Effective Health Care Program, particularly those who participated in AHRQ's DEcIDE (Developing Evidence to Inform Decisions About Effectiveness) program. Chapters were subject to multiple internal and external independent reviews.

Beyond the HIPAA Privacy Rule Institute of Medicine,Board on Health Care Services,Board on Health Sciences Policy,Committee on Health Research and the Privacy of Health Information: The HIPAA Privacy Rule,2009-03-24 In the realm of health care, privacy protections are needed to preserve patients' dignity and prevent possible harms. Ten years ago,

to address these concerns as well as set guidelines for ethical health research, Congress called for a set of federal standards now known as the HIPAA Privacy Rule. In its 2009 report, *Beyond the HIPAA Privacy Rule: Enhancing Privacy, Improving Health Through Research*, the Institute of Medicine's Committee on Health Research and the Privacy of Health Information concludes that the HIPAA Privacy Rule does not protect privacy as well as it should, and that it impedes important health research.

Occupational Outlook Handbook United States. Bureau of Labor Statistics,1957

Big Data Analytics in Healthcare Anand J. Kulkarni,Patrick Siarry,Pramod Kumar Singh,Ajith Abraham,Mengjie Zhang,Albert Zomaya,Fazle Baki,2019-10-01 This book includes state-of-the-art discussions on various issues and aspects of the implementation, testing, validation, and application of big data in the context of healthcare. The concept of big data is revolutionary, both from a technological and societal well-being standpoint. This book provides a comprehensive reference guide for engineers, scientists, and students studying/involved in the development of big data tools in the areas of healthcare and medicine. It also features a multifaceted and state-of-the-art literature review on healthcare data, its modalities, complexities, and methodologies, along with mathematical formulations. The book is divided into two main sections, the first of which discusses the challenges and opportunities associated with the implementation of big data in the healthcare sector. In turn, the second addresses the mathematical modeling of healthcare problems, as well as current and potential future big data applications and platforms.

Retooling for an Aging America Institute of Medicine,Board on Health Care Services,Committee on the Future Health Care Workforce for Older Americans,2008-09-27 As the first of the nation's 78 million baby boomers begin reaching age 65 in 2011, they will face a health care workforce that is too small and woefully unprepared to meet their specific health needs. *Retooling for an Aging America* calls for bold initiatives starting immediately to train all health care providers in the basics of geriatric care and to prepare family members and other informal caregivers, who currently receive little or no training in how to tend to their aging loved ones. The book also recommends that Medicare, Medicaid, and other health plans pay higher rates to boost recruitment and retention of geriatric specialists and care aides. Educators and health professional groups can use *Retooling for an Aging America* to institute or increase formal education and training in geriatrics. Consumer groups can use the book to advocate for improving the care for older adults. Health care professional and occupational groups can use it to improve the quality of health care jobs.

Provider-Led Population Health Management MD Mph Hodach, PhD Richard,2014-11-05 *Provider-Led Population Health Management* draws connections among the new care-delivery models, the components of population health management, and the types of health IT that are required to support those components. The key concept that ties all of this together is that PHM requires a high degree of automation to reach everyone in a population, engage those patients in self-care, and

maximize the chance that they will receive the proper preventive, chronic, and acute care. In the course of explaining how to do this, we describe how health-care organizations are transforming themselves to manage population health and prepare for value-based reimbursement. The ACO, PCMH, and CIN models are discussed, and the advent of bundled payments will also have a major impact on hospital and post-acute care. But at its core, the transition to accountable care centers on care teams that take responsibility for managing and coordinating the services provided to individual patients. These care teams must also engage patients in caring for themselves and improving their health behavior. As care teams become more sophisticated, many of them will use Lean thinking to continuously improve their own work processes. The book is laid out in three sections that progress from the general to the particular aspects of population health management. Section 1, entitled New Delivery Models, first explains what PHM is and why it's important. Ensuing chapters cover ACOs and patient-centered medical homes, which are the favored vehicles for PHM. Section 2, How to Get There, discusses some fundamentals of the new delivery models, starting with the impact of Meaningful Use on the IT infrastructure that provider organizations must build to operationalize PHM. Other chapters in this section address clinical integration, predictive-modeling applications, and the return on investment in IT solutions that help organizations take advantage of value-based payments. Section 3, Implementing Change, describes how organizations can use health IT to manage population health. This begins with the basics of care coordination and moves on to advanced methods of care management that utilize Lean thinking. Following a chapter on overall methods of patient engagement, we finish up with a discussion of post-discharge automation, which is another way to involve patients in their own care. Finally, in a brief concluding chapter, we suggest some next steps for organizations heading down the road to population health management. While this book is intended for health-care executives and policy experts, anyone who is interested in health care can learn something from its exploration of the major issues that are stirring health care today. In the end, the momentous changes going on in health care will affect all of us.

The Effect of Business Cycles on Population Health in the Emerging Economies, Volume II Wen-Yi Chen, Lucian-Liviu Albu, Chi Wei Su, Tsangyao Chang, Aviral Kumar Tiwari, Peng Hongfeng, 2022-02-03

Big Shifts Ahead John Burns, Chris Porter, 2016-10-11 Demographics determine the direction of your business. Demographic trends can be overwhelming, misleading, confusing, conflicting, and difficult to predict. Not anymore. John Burns and Chris Porter wrote this book to help make demographic trends easier to understand, quantify, and anticipate. Readers of this book will have a huge competitive advantage because they will be making decisions with facts, and they will be better able to adjust their strategies when unanticipated events shift prevailing trends.--book jacket

Accounting for Health and Health Care National Research Council, Division of Behavioral and Social Sciences and Education, Committee on National Statistics, Panel to Advance a Research Program on the Design of National Health Accounts, 2011-01-05 It has become trite to observe that increases in health care costs have become unsustainable. How best

for policy to address these increases, however, depends in part on the degree to which they represent increases in the real quantity of medical services as opposed to increased unit prices of existing services. And an even more fundamental question is the degree to which the increased spending actually has purchased improved health. Accounting for Health and Health Care addresses both these issues. The government agencies responsible for measuring unit prices for medical services have taken steps in recent years that have greatly improved the accuracy of those measures. Nonetheless, this book has several recommendations aimed at further improving the price indices.

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