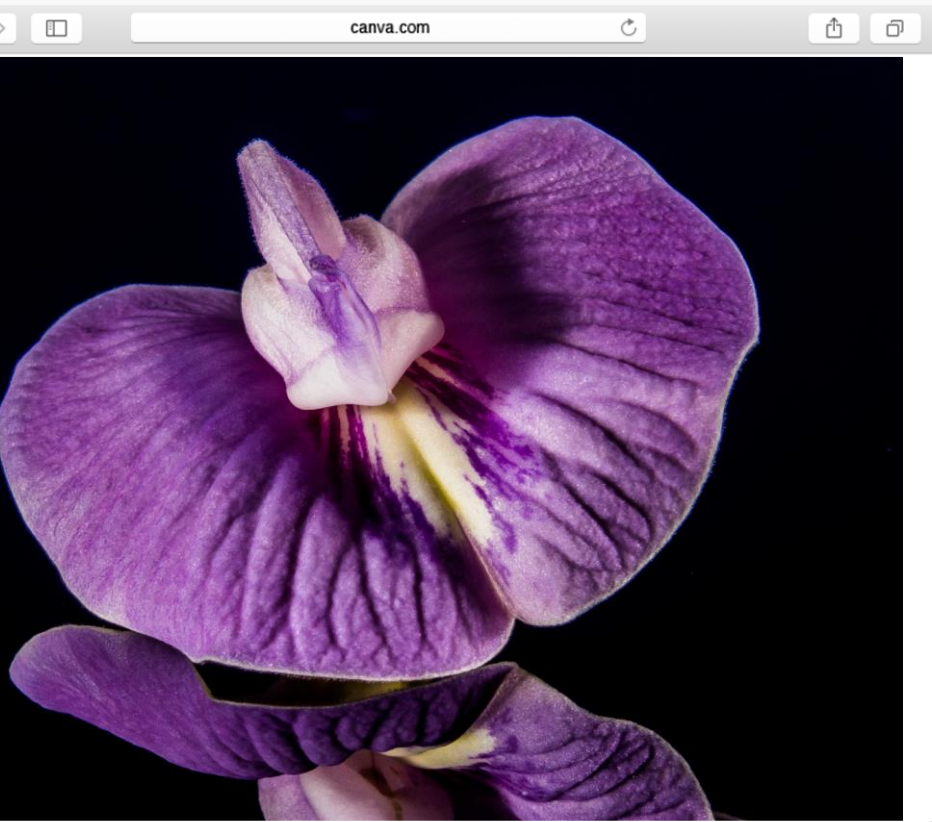


# Concordance between self-reported and national health insurance administrative data for care continuity measurements

I-Jen, Wang

<sup>1</sup>Department of Pediatrics, Taipei Hospital, Ministry of Health and Welfare





# INTRODUCTION

# Continuity of Care (COC)

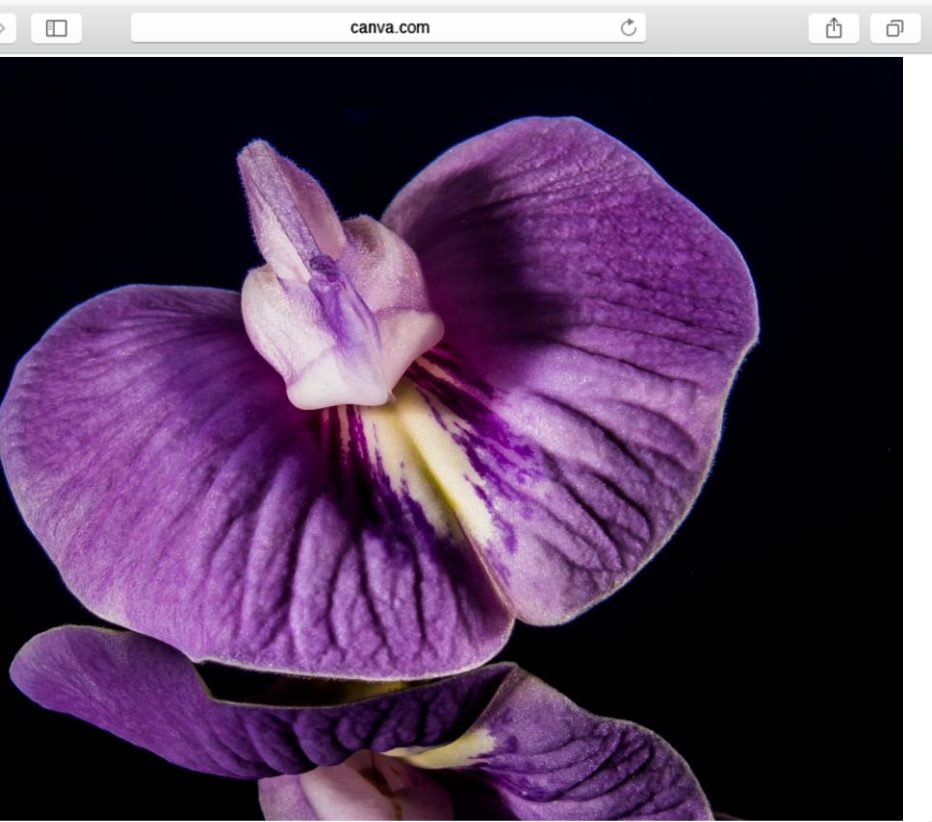


# AIM

The quantitative indexes of the administrative data and the patient-reported questionnaire were commonly used to measure the COC.

- The study to concordance between the COC of child measured by administrative data and the questionnaire reported by caregivers.
- To analyze the related factors that affect the COC of child reported by caregivers in the questionnaire.





# METHODS

Caregivers of Children  
(n=1283)

To Calculate the COC

Ordinal logistic regression

The population profile

2016 National Health  
Insurance Research Database (NHID)

The child of  
care questionnaire

UPC

HI

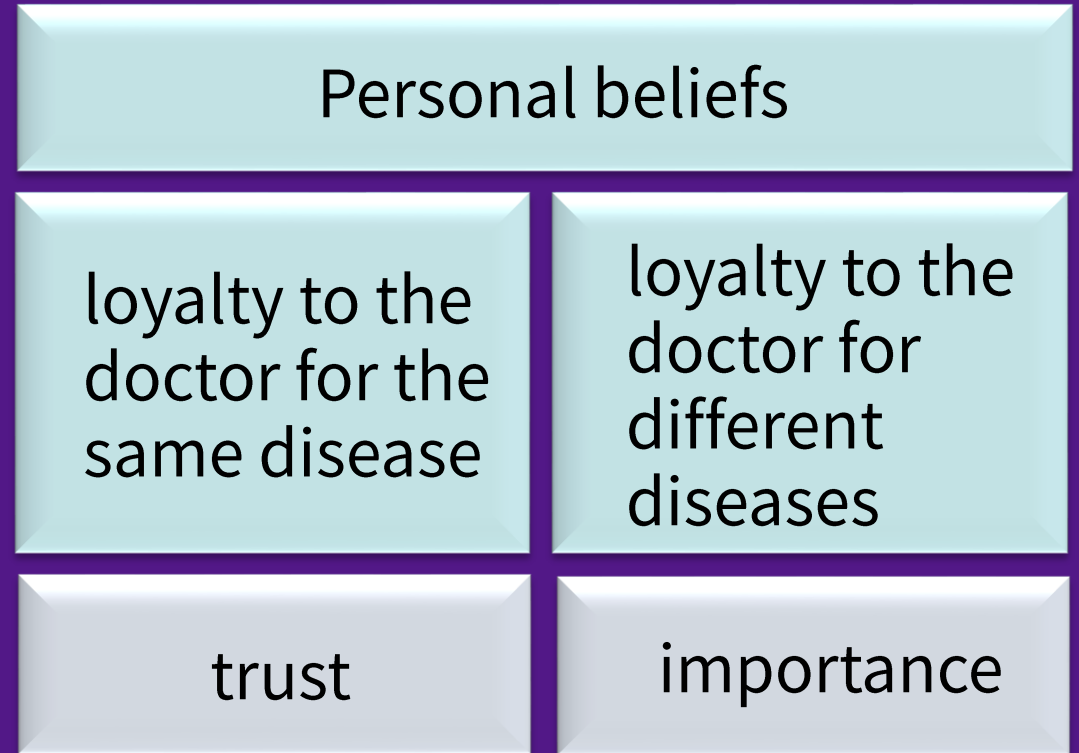
COCI

SECON

# Caregivers of Children (n=1454)

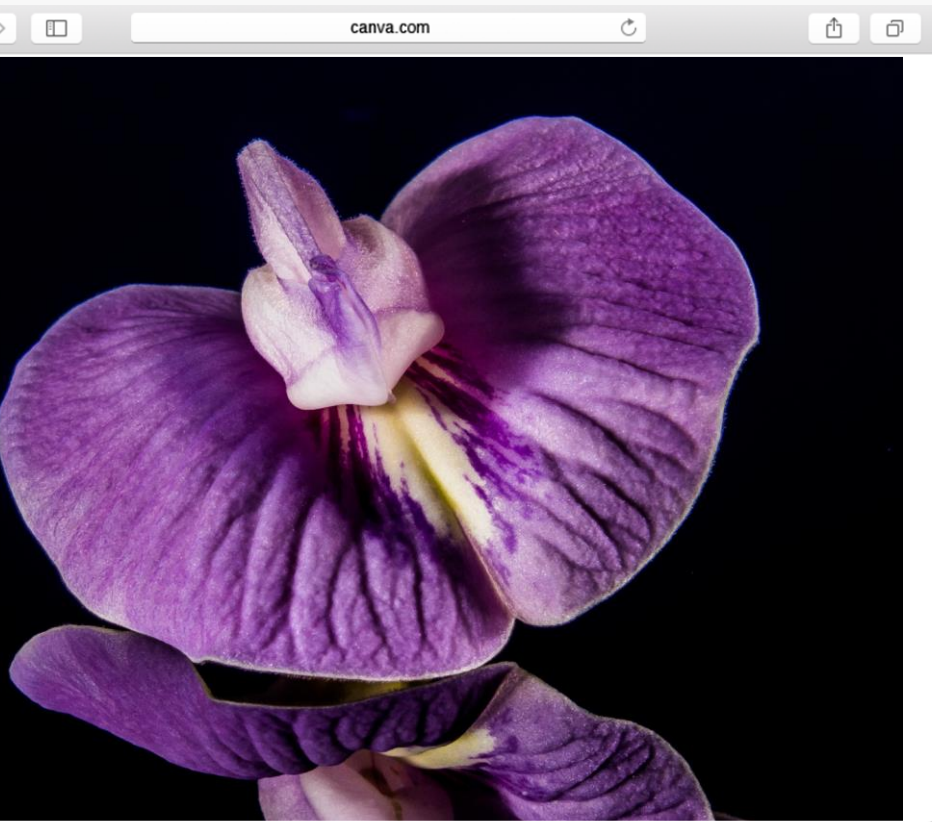


Regression models



The demographic characteristics of caregivers and children

The factors that affect the COC of child reported by the caregivers



# RESULTS

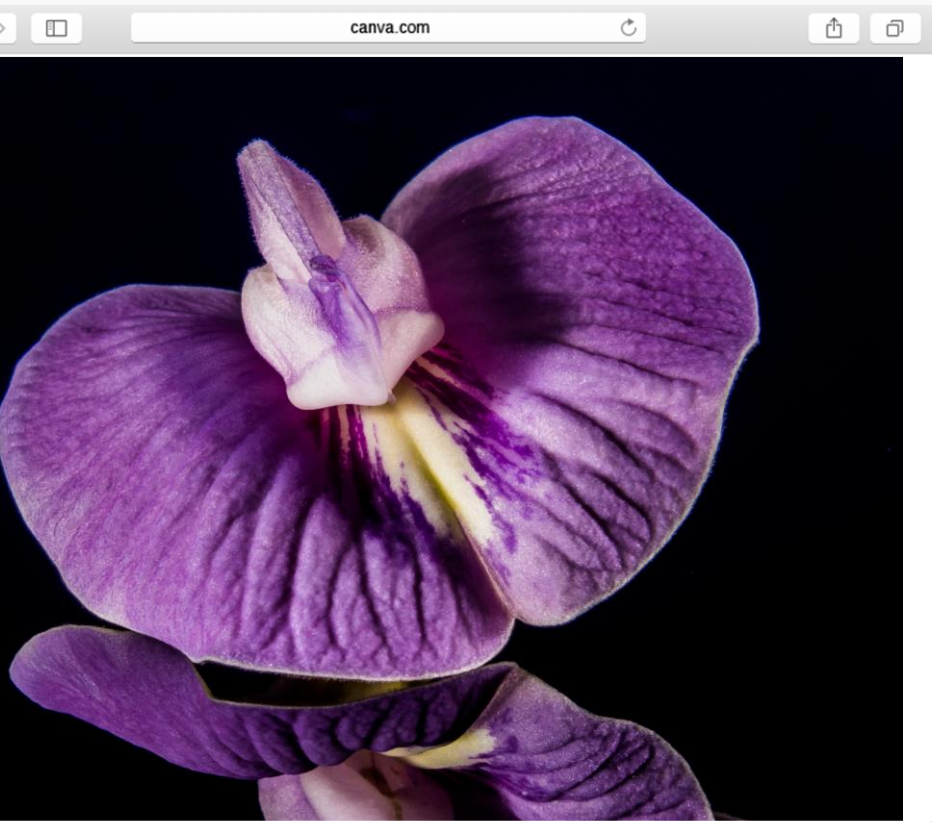


Table1. Correlation among indicators of COC

|         | UPC       |          | HI        |          | COCI      |          | SECON     |          |
|---------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|
| Mean±SD | 0.42±0.18 |          | 0.30±0.16 |          | 0.23±0.18 |          | 0.31±0.21 |          |
|         | <i>r</i>  | <i>P</i> | <i>r</i>  | <i>P</i> | <i>r</i>  | <i>P</i> | <i>r</i>  | <i>P</i> |
| UPC     | 1         |          |           |          |           |          |           |          |
| HI      | 0.95      | <0.0001  | 1         |          |           |          |           |          |
| COCI    | 0.94      | <0.0001  | 0.94      | <0.0001  | 1         |          |           |          |
| SECON   | 0.73      | <0.0001  | 0.70      | <0.0001  | 0.81      | <0.0001  | 1         |          |

# Table 2. Ordinal logistic regression between NHID and the primary caregiver's continuity of conscious child care

|                      | Actual medical and patient interaction |           |                                 |          |                      |           | Patient perception  |          |                      |          |
|----------------------|--|-----------|---------------------------------|----------|----------------------|-----------|---------------------|----------|----------------------|----------|
|                      | Loyalty<br>(the same disease)          |           | Loyalty<br>(different diseases) |          | Personal beliefs     |           | Trust               |          | Importance           |          |
|                      | OR<br>(95%CI)                          | <i>P</i>  | OR<br>(95%CI)                   | <i>P</i> | OR<br>(95%CI)        | <i>P</i>  | OR<br>(95%CI)       | <i>P</i> | OR<br>(95%CI)        | <i>P</i> |
| Standard<br>(n=1283) |  |           |                                 |          |                      |           |                     |          |                      |          |
| UPC                  | 2.42<br>(1.35,4.33)                    | 0.002**   | 1.77<br>(0.99,3.17)             | 0.053    | 2.56<br>(1.44,4.52)  | 0.001**   | 0.91<br>(0.51,1.64) | 0.76     | 1.76<br>(0.79, 4.05) | 0.17     |
| HI                   | 3.22<br>(1.69,6.14)                    | 0.0003*** | 2.10<br>(1.09,3.97)             | 0.02*    | 2.60<br>(1.38, 4.90) | 0.003**   | 0.78<br>(0.41,1.51) | 0.46     | 1.94<br>(0.78, 5.06) | 0.16     |
| COCI                 | 2.54<br>(1.40,4.62)                    | 0.002**   | 1.93<br>(1.06,3.52)             | 0.03*    | 3.16<br>(1.76, 5.69) | 0.0001*** | 0.86<br>(0.47,1.57) | 0.63     | 2.91<br>(1.21,7.36)  | 0.02*    |
| SECON                | 1.74<br>(1.04,2.90)                    | 0.03*     | 1.41<br>(0.84,2.36)             | 0.18     | 2.45<br>(1.48, 4.04) | 0.0004*** | 0.87<br>(0.52,1.46) | 0.61     | 2.76<br>(1.33,5.82)  | 0.006**  |



# DISCUSSION

## Significant impact on the COC

- Caregiver's education level
- Household income
- Conscious child health status
- Satisfaction with the child's health care system
- Child's age
- The presence or absence of private insurance

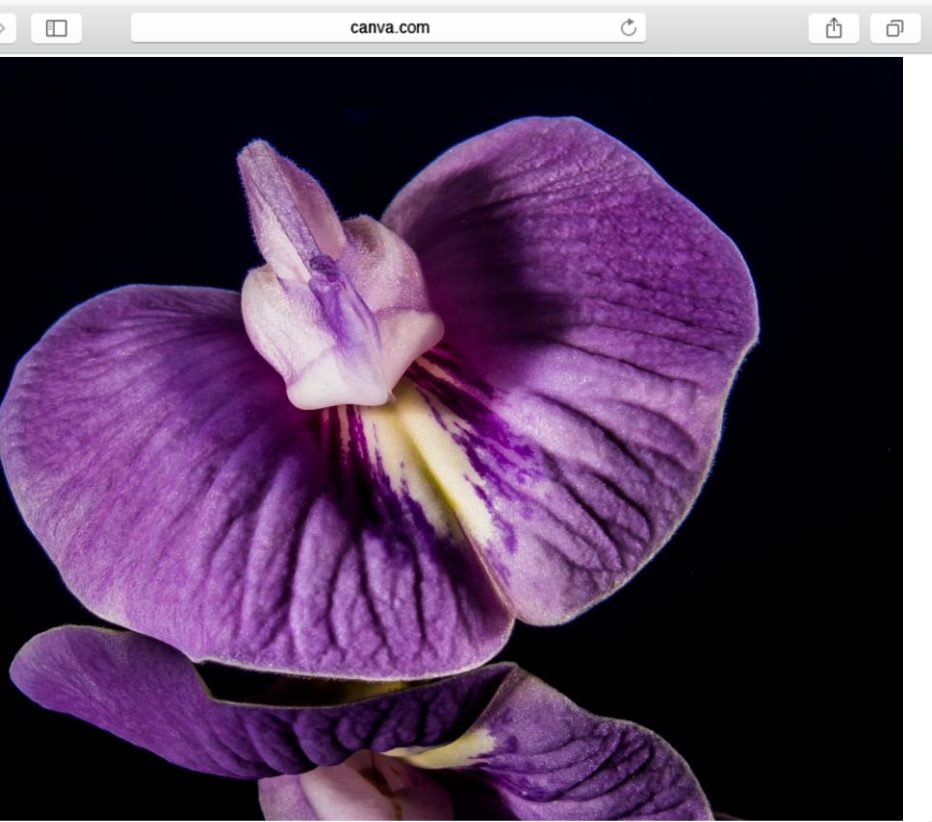
The most important factor

- Caregivers are highly satisfied with the children's health care system, they have a positive impact on the confidence of the visiting physician.
- The importance of having a regular care physician for children, the frequency of changing physicians, and the willingness to pay for healthcare.

# DISCUSSION

- In quantitative measures the perceptions of caregiver reports on the COC.
- COCI is an index that better reflects the caregivers' perspective.
- HI and SECON indexes still have their own advantages in loyalty and importance aspects that caregivers report child care continuity.

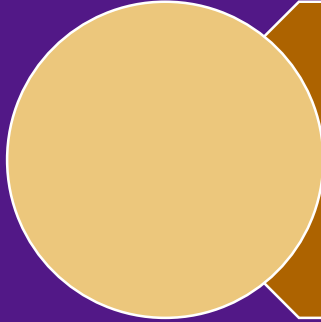




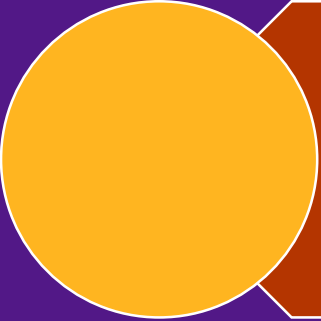
# CONCLUSION



The demographic characteristics of caregivers will affect the continuity of child care.



Increasing satisfaction with the children's health care system will help improve the continuity of care for children.



Policymakers should understand and improve the causes of dissatisfaction of caregivers to optimize the children's health care system in our country.

**THE END**  
**THANK YOU**  
**FOR**  
**LISTENING!!!**

