

癌症市場競爭程度與癌症病人住院照護結果之相關性分析

Relationship Analysis on Cancer Care Market Competition and Cancer Inpatients Healthcare Outcomes

中文摘要

研究目的：本研究主要目的為探討癌症市場競爭程度與癌症病人住院照護結果的相關性。

研究方法：本研究採次級資料分析，以民國 92 年結腸直腸癌、肝癌、肺癌新發個案之病患為研究對象，分析健保資料庫中的住院清單明細檔、醫事機構資料檔。癌症市場競爭程度利用賀芬達指數衡量，癌症住院照護結果則以住院醫療費用、住院天數、14 日再入院與住院死亡衡量，以轉碼後身分證字號串連各資料檔，從中探討癌症市場競爭程度與癌症住院照護結果之相關性。

研究結果：在 17 個癌症市場中，有 7 個區域屬於中度競爭，10 個區域為低度競爭。三種癌症病患集中於中度競爭市場，佔 65.81%。經雙變項分析後，癌症市場競爭程度不同，結腸直腸癌之醫療費用、住院日數與 14 日再入院情形皆達顯著，肝癌之醫療費用、住院日數、14 日再入院與住院死亡情形達顯著，肺癌之住院日數、14 日再入院與住院死亡情形達顯著。經由複迴歸與複邏輯斯迴歸分析，在控制其他變項後，不同癌症市場競爭程度，僅結腸直腸癌的住院醫療費用、住院日數、14 日再入院與住院死亡情形有顯著。

結論：癌症競爭程度與結腸直腸癌的住院照護結果有相關。競爭程度較高的癌症市場，結腸直腸癌病人的住院醫療費用顯著較低，住院日數顯著較短，14 日再入院機會相對較高，住院死亡機會相對較低。

英文摘要

Objective: The purpose of this study was to investigate the associations among cancer care market competition and cancer inpatients healthcare outcomes.

Methods: Secondary discharge data from the National Health Insurance Research Database of Taiwan for the period 2003-2004 were used in this study. Statistical regression techniques were used to identify the associations between cancer care market competition and the outcome of care, controlling for other patient characteristics, hospital characteristics and medical resources. The Herfindahl-Hirschman index (HHI) was used to represent degree of the cancer care market competition. Outcome variables are costs, the lengths of stay, readmission with 14 days and in-hospital deaths for the incident of colorectal, lung, liver cancer cases diagnosed in 2003.

Results: There were 17 cancer care market areas. 7 areas were medium degree of the cancer care market competition areas, and others were low degree of them. 65.81% of cancer inpatients fall into higher competition market areas. For colorectal cancer, patients in higher competition areas had lower costs, lower lengths of stay, higher readmission with 14 days and lower in-hospital deaths. For lung cancer, patients in higher competition areas had lower in-hospital deaths. For liver cancer, there were no association between cancer care market competition and outcomes.

Conclusion: Cancer care market competition is associated with healthcare outcomes of colorectal cancer inpatients.