Actions to Improve Quality: Results From A National Hospital Survey

This study aimed to develop national (USA) estimates of quality improvement (QI) actions undertaken by hospitals and to explore their relationship to performance on Centers for Medicare & Medicaid Services (CMS) quality measures. Hospitals reported widespread adoption of QI changes to improve on CMS quality measures. Higher QI adoption rates were associated with modestly higher process, patient experience, and overall performance composite scores.


A Systematic Review on Economic Evaluation Studies of Diagnostic and Therapeutic Interventions

Due to the increase in healthcare budget constraint, economic evaluation (EE) evidence is increasingly required to inform resource allocation decisions. This study aimed to systematically review quantity, characteristics, and quality of full EE studies on diagnostic and therapeutic interventions conducted in 26 Middle East and North Africa (MENA) countries. The quantity of EE studies in the MENA region remains low; however, overall quality is high to excellent.


Strategies for Avoiding Neglect of Opportunity Costs by Decision-Makers

Cost-effectiveness thresholds represent decision-makers’ maximum monetary valuation of a unit of outcome (typically a quality-adjusted life-year; QALY) in the context of decisions regarding the public funding of health technologies. Authors noted that the policy threshold used by the National Institute of Health and Care Excellence (NICE) is discrepant from the empirically estimated opportunity costs of the decisions made by NICE.