Ng Zhi Yuan Juliana (A0084107L)

Title: Difference in Quality of Care Across Ward Classes

Supervisors: A/P Alex Richard Cook, A/P Joanne Su-Yin Yoong and

A/P Tilak Abeysinghe

Abstract

One of Singapore's healthcare objectives is to ensure that everyone has

access to uniformly good quality basic medical services, regardless of

income. There are four types of ward class in public hospitals – Ward Class

C, B2, B1 and A - in decreasing level of subsidy and increasing level of

comfort. Given that the system is designed with the intention that the same

quality of medical care will be availed to patients regardless of ward class, this

thesis investigates the difference in quality of medical care across ward

classes, if any, in terms of the cost of actual medical treatment (drugs and

procedure costs only, net of all other incidental expenditures) incurred by

patients who otherwise have similar observable characteristics (for instance,

race, gender and age). Also, given the hospital's incentives to minimise costs,

this thesis investigates if there is a difference in the cost of actual medical

treatment incurred by the hospital across ward classes.

Propensity score methodology is used to determine unbiased estimates of the

effects of ward class on cost of actual medical treatment to both patients and

the hospital. Since ward class is an ordinal variable, conventional propensity

score methodology for binary treatment groups cannot be used. Instead,

ordinal multinomial logit and probit models are used to estimate the propensity

score and matching methods - subclassification and optimal nonbipartite

matching – that are tailored for ordinal treatment groups are used to create groups balanced in observed confounders but with patients in different ward classes.

This thesis focuses specifically on breast cancer as a case study, and uses data extracted from electronic medical records of breast cancer patients admitted to the National University Hospital (NUH) during the period of 2004 to 2013. There is substantial evidence that there is indeed a difference in the actual medical treatment costs across ward classes incurred by both the patients and the hospital.