

ISSUE DEFINITIONS

Access - The timely use and availability of personal health services to achieve the best possible health outcomes. This definition addresses the need to identify those areas of medical care in which services can be shown to influence health status and then to determine whether the relatively poorer outcomes of some population groups can be explained by problems related to access. The definition also emphasizes the need to move beyond standard approaches that rely mainly on addressing health care providers, the uninsured, or encounters with providers to detect access problems. Barriers to access may be financial, geographic, organizational, sociological, or time-based.

Accountability – The health care system responds to multiple requests for quality assurance data from purchasers, employers, patients, community groups, governmental agencies, and others. Measures and indicators refer to numerical information that quantifies input, output, and the performance dimensions of processes, services, and the overall organization.

At-Risk Populations – Certain groups of people are at greater risk of negative health outcomes or in greater need of health care services because of their lifestyle, age, gender, residence, income status, or other factors. Examples of at-risk groups include women, children, minorities, aged or disabled, poor, or the mentally ill.

Coordinated Health-Related Information Networks (Systems) – These systems involve the collection and dissemination of data aimed at improving the decision-making capabilities of consumers, providers, payors, and policymakers.

Financing/Cost – Financing/cost involves reviewing the fiscal viability of health care organizations, including reimbursement mechanisms, cost containment, sources of funding, and uncompensated care.

Promotion of Coordinated Health Care System (Coordination) – A coordinated health care system provides health care services that address disease prevention, health promotion, primary care, acute care management, rehabilitative care management, chronic care management, and supportive care resources. Health services should be coordinated across providers and settings to improve health status and delivery of health services. Critical ingredients of a successful coordinated health system should include the efficient and effective information exchange and coordination of the care process.

Public Health – Public health efforts involve chronic and communicable disease prevention and control, community health promotion, and environmental health protection. Communicable disease prevention and control efforts relate to the prevention and control of communicable and infectious disease, including such activities as outbreak investigation/case follow-up, vaccination, responses to epidemics, and surveillance of rabies, sexually transmitted diseases, HIV/AIDS, and tuberculosis. Chronic disease prevention and control efforts include the monitoring and analysis of chronic illness and the behavioral risk factors that contribute to such illness. Community health promotion efforts relate to the assessment and reporting of community health needs to improve health status, as well as the facilitation of community partnerships, including identification of priority health needs of the county, mobilization of the community around identified priorities, monitoring progress of the community in improving health status, and community health education services. Environmental health protection efforts relate to protection of the public from environmental health risks including food and milk sanitation, housing/institutional sanitation, recreation sanitation, sewage/water sanitation, drinking water sanitation, and responses to disasters/disease outbreak.

Quality of Care – Quality of care is a measure of the degree to which the delivery of health care services meets established professional standards and value judgments of consumers. It may also be seen as the degree to which actions taken or not taken maximize the probability of beneficial health outcomes and minimized risks.

Rural Health – Rural health involves the organizational mechanisms for the delivery of basic primary care services and selected secondary services to citizens in nonurban areas. Rural residents

do not have the same access to basic health care services that is available to urban West Virginians. Poverty, inadequate transportation over large geographic distances, and an aging population base complicate the delivery of health care in rural communities.

ADDITIONAL DEFINITIONS

Managed Care — Managed care principles incorporate the integration of both the financing and delivery of health care within a system that seeks to manage the accessibility, cost, and quality of that care.

Median — Middle; central. In statistics, a number obtained by arranging the given series in order of size and taking the middle number. For example, in the series 5,7,8,9,10, the median is 8.

Methodology — A set or system of methods, principles, and rules, as in the sciences.

Provisional — Up-to-date but nonfinal statistics supplied for use in grant writing, policy making, or preliminary studies until final data are available.