

# Population Grouping Methodology



The Canadian Institute for Health Information (CIHI) has developed a population grouping methodology using Canadian data, designed specifically to meet the needs of Canada’s health care systems.

## Overview of the methodology

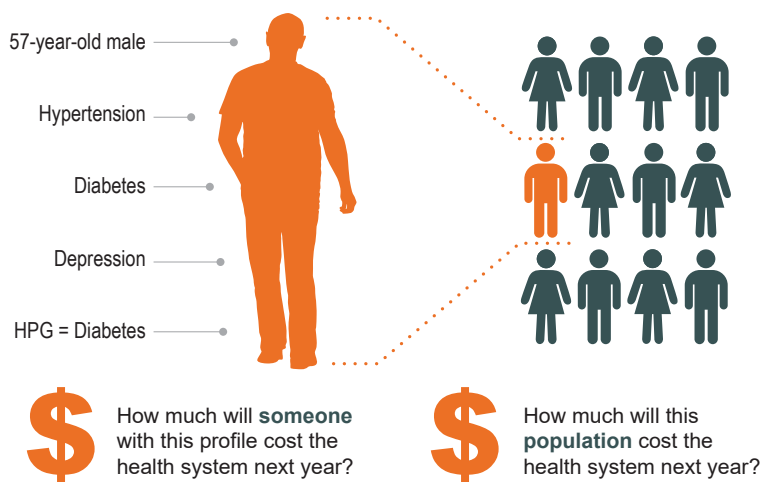
The population grouping methodology builds clinical and demographic profiles for each person in a population, including health system non-users.

- **Clinical profile:** Summarizes all health conditions — including longitudinal chronic diseases — identified from inpatient, day surgery, emergency department, hospital clinic, continuing care, home care, physician claims and primary care administrative data.
  - **Health profile group (HPG):** Using the full clinical profile, an individual’s most complex and clinically relevant health condition is identified.
- **Demographic profile:** Comprises age and recorded sex/gender information captured in the insured person’s data. This data includes information maintained by the provinces/territories on all persons eligible to receive publicly funded health services.

These profiles predict person-level health care needs. “Health care need” is measured using a set of indicators, such as the following:

- **Predicted health care costs:** Includes both current and expected future costs to the health system.
- **Predicted use of selected health system resources:** Includes number of primary care visits, number of emergency department visits, the probability of entering long-term care and the probability of inpatient hospitalization for pneumonia or acute infectious/parasitic respiratory disease.

## Clinical classification and predictive indicators



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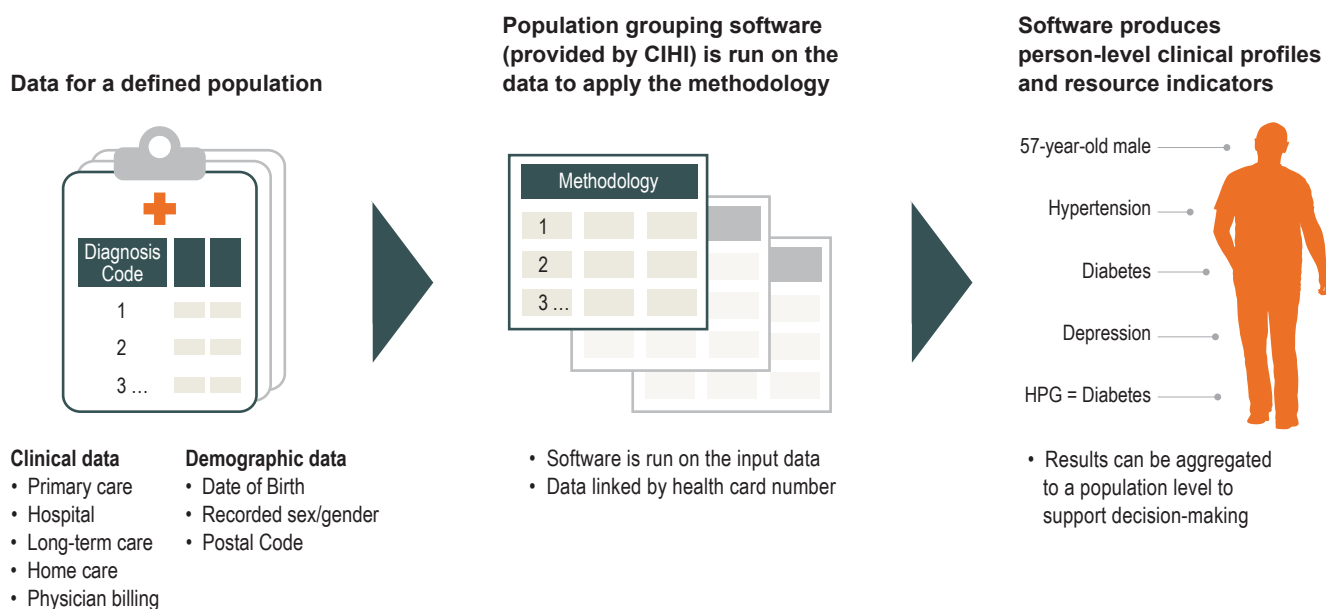
Canadian Institute for Health Information. *Population Grouping Methodology* [information sheet]. Ottawa, ON: CIHI; 2023.

## Software and data requirements

Clients who have access to the following data can apply the methodology using CIHI-developed software:

- Clinical data — person-level linkable diagnosis and functional status data over a consecutive 2-year period; data from patient-level physician billings and on primary care visits, inpatient stays, day surgeries, emergency department visits, hospital clinic visits, home care and continuing care services
- Demographic data — person-level linkable; data about insured persons (i.e., individuals who have a valid health card number)

## Software inputs and outputs



## Relevance for health care in Canada

CIHI's population grouping methodology will

- Enable health system planners and policy-makers to receive real-time evidence to support decision-making;
- Help CIHI and its clients monitor population health and diseases;
- Predict health care utilization patterns and explain variations in health care resource use;
- Provide a foundation for funding models; and
- Facilitate standardization of populations for interjurisdictional analysis.

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