Getting Organized to Save Lives: Evaluation of a Reform in Cardiovascular Treatment in Mexico

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We evaluate a program implemented in the hospital network in Mexico City that improved the logistics in the treatment of heart attack patients. We exploit a unique feature whereby social security hospitals in Mexico City are divided into two networks, North and South, and that this program was only implemented in the South prior to the North. We utilize case-level data from the emergency rooms in Mexico City's hospitals. Using difference-in-difference (DID) estimation, we find that the survival rate improved by 25% in the South relative to the North for low-speciality hospitals. We also find that the transfer rate from low- to high-speciality hospitals increased by 100% in the South, when compared to the North. We analyze the extent to which the increase in transfer accounts for the improvement in the survival rate.