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Sommario/riassunto	The burden of mental illness among Veterans is substantial, and medical illnesses such as diabetes and cardiovascular disease affect a disproportionate number of people with mental illness.^For example, more than 90% of people with serious mental illness (SMI) (eg, schizophrenia, bipolar disorder) have co-occurring chronic medical conditions such as hypertension, cardiovascular disease, hyperlipidemia, or diabetes.^These chronic medical conditions, when co-occurring with mental illness, are more detrimental to overall health than in the general population, and people with comorbid mental illness and chronic medical conditions have higher hospitalization rates and healthcare costs than those with comparable chronic medical conditions alone.^Disparities in health between people with and without mental illness are likely due to a combination of factors such as the effect of mental illness on an individual's capacity to maintain health, the adverse effects of medications used to treat mental illness, individual-level modifiable risk factors (eg, smoking, physical inactivity), and lower quality of healthcare.^Healthcare systems are complex organizations, and assessing quality within these organizations is challenging. One approach to evaluating quality of care

within healthcare systems is the use of tracer conditions as quality indicators.[^]This approach focuses on targeted prevalent conditions for which strong evidence and agreement concerning appropriate processes of care (eg, annual foot exams for patients with diabetes) and goals of therapy (eg, blood pressure <140/90) exist; making it possible to uncover deficits in complex healthcare systems.[^]Chronic medical illnesses such as diabetes, heart disease, and hypertension are highly prevalent among VA patients: an estimated 72% have one or more chronic medical illnesses (compared to 40% to 50% of other U.S. adults), and over half have at least 2 such conditions. Thus, diabetes, hypertension, and ischemic heart disease may serve as ideal tracer conditions to assess quality in the Veterans Affairs (VA) healthcare system as a whole.[^]In similar fashion, receipt of selected recommended preventive screenings and services provides an opportunity to examine system-level quality of care among certain subpopulations.[^]In order to guide future research and policy decisions for the VA, the VA Office of Health Equity partnered with the Evidence-based Synthesis Program (ESP) to conduct a systematic review of health disparities in quality indicators of healthcare among adults with mental illness.[^]We evaluated comparative studies that assessed a broad range of preventive care and chronic disease management quality indicators to assess if, and to what extent, disparities in healthcare exist for individuals with mental illness.
