

CAMHS Data Event

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Part 1: What is PbR?

- A system in which PCTs (commissioners of care) pay providers for the number and complexity of patients treated, using a price list – the national tariff – for all activity within the scope of PbR
- Covers admitted patient care, outpatients and A&E, and is moving into new areas in 2012/13
- Introduced in 2003-04
- Replaced block contracts based on historic costs
- Part of a group of payment systems known internationally as ‘casemix’ funding

In essence.....

Price x Activity = Income

Why was PbR introduced?



- Increase efficiency e.g. reduce length of stay in hospital
- Focus on quality by removing price competition
- Create an open and transparent system for funding health care
- Support Patient Choice
- Following international best practice

PbR is not unique to England.....

France, Germany, Ireland, Switzerland, Holland,
Poland, Portugal, Slovenia, Norway



Different types of currencies



- Acute Inpatients – Healthcare Resource Groups (HRGs)
- Outpatients & A&E - attendances
- Maternity – care pathways
- Paediatric diabetes– year of care
- Intensive care – bed days

Developing PbR for CAMHS was a Coalition commitment



‘Expand the scope of PbR to include CAMHS’

So what is happening?

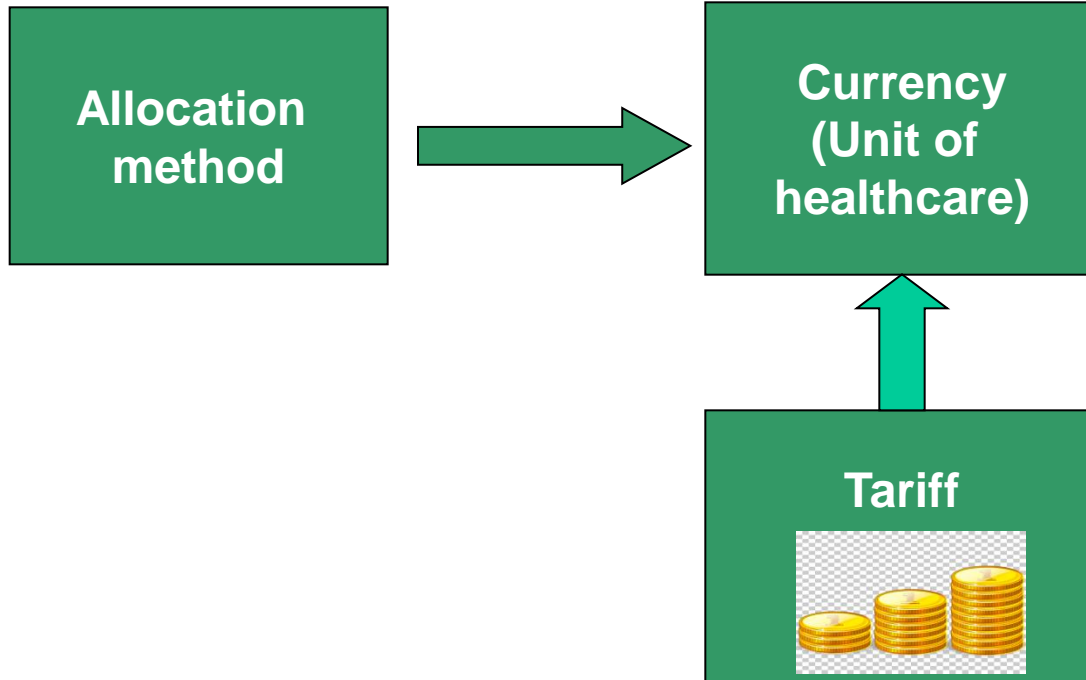
In Oct 2011, DH appointed team from the NHS (after a competitive process)

Team based in London

To:-

- Evaluate and build on previous work
- Develop clusters
- Develop allocation tool
- Link to outcomes measures
- Develop care packages – though these may be local
- Liaise with information centre over changes to the CAMHS minimum data set.

Building blocks for PbR



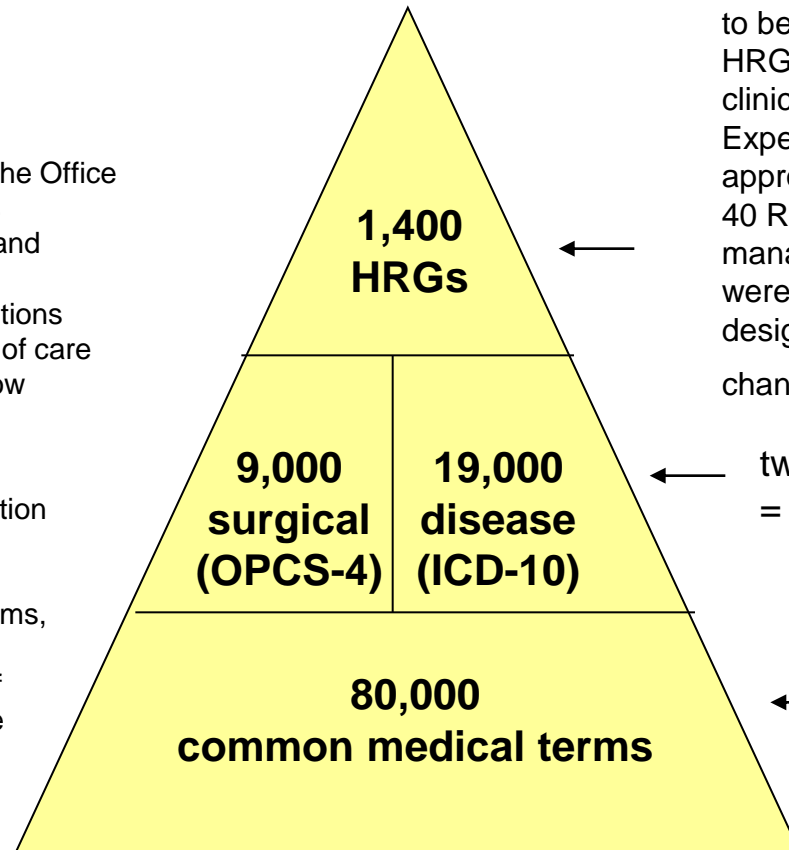
Usually based on average of current provider costs (BPTs – bottom up costs)



How HRGs are pivotal

OPCS-4, which is an abbreviation of the Office of Population, Censuses and Surveys Classification of Surgical Operations and Interventions (4th revision), translates operations, interventions and interventions carried out on a patient during a spell of care into alphanumeric code. These are now classified by Connecting for Health.

The International Statistical Classification of Diseases and Related Health Problems 10th Revision (ICD-10) is a coding of diseases and signs, symptoms, abnormal findings, complaints, social circumstances and external causes of injury or diseases, as classified by the World Health Organization (WHO).



Grouping these codes into HRGs allows tariffs to be set at a sensible and workable level. HRG4 has been developed with significant clinical input. 33 Expert Working Groups and 4 Expert Reference Panels, involving approximately 280 clinicians representing over 40 Royal Colleges or societies, in addition to managers and other healthcare professionals, were involved in developing HRG4. HRG design remains under constant review for changes in clinical practice.

two classification systems
= 28,000 codes in total

far too many to be of
use

What are the team doing

At a glance!

