26th Annual PCSI Working Conference
Munich, Germany

September 15th – 18th, 2010

Abstracts are now being accepted!

Have you started preparing for PCSI’s annual conference in Munich?

This year’s conference, “Case Mix: What do we get for our money?”, is sure to attract a large gathering from governments, insurers, funding agencies and researchers from across the globe.

Drawing heavily from new pay-for-performance, quality, safety and case mix funding initiatives occurring in many countries, the conference’s content will appeal to many attendees trying to tackle these initiatives in their health care system.

This year’s annual conference is being held earlier than usual, so make sure that abstract submission deadlines are noted. We continue our improved abstract submission process and additional details can be found at:


Held at Universität der Bundeswehr München campus, there are several important dates:

- June 25th abstract submission*
- July 15th early bird registration deadline

Oktoberfest starts on September 18th, drawing visitors from around the world to Munich. Hotel rooms may be hard to find as the conference approaches.

Conference attendees are encouraged to book their hotel rooms as soon as possible. The conference website includes information regarding lodging options.

More detailed information, the preliminary program, plus conference registration can be found online at the conference website: www.pcsi2010.org/.

*Note: Abstract submission has been extended.
Octoberfest

The number of students will be limited, so don’t miss out!

2011 PCSI Winter School

Dublin, Ireland
January 24th – 28th

Considering extending your professional development during the next year? If so, you may be interested in the inaugural PCSI Winter School being held in January 2011. The school curriculum will cover aspects of casemix-based funding, including quantitative methods for the analysis of casemix and financial data. Class time will allow for hands-on analysis of casemix data by the students using standard statistical software. Faculty will be drawn from experts across the globe and practical details will be available on the PCSI Website soon.

Dublin offers a multitude of social opportunities for everyone. The dates of the winter school coincide with Tradfest, a lively Irish music and cultural festival (www.templebartrad.com).

Casemix Innovation Prize

PCSI is pleased to announce a €1,000 prize is to be awarded at the Annual PCSI Working Conference to the best contributions to casemix operations. A €500 prize is to be awarded to the runner up. The prizes are donated by CASEMIX, a Dutch-based consultancy.

The prize is intended to stimulate the development of tools supporting the implementation of case mix systems for clinicians and managers.

Evaluation of manuscripts will be based on originality, contribution to the field of innovation of casemix tools and support systems, and have implications to the field of casemix implementation.

Manuscripts are to be evaluated by a subcommittee of the PCSI members and the prizes is to be awarded on behalf of the PCSI organization. Manuscripts can represent collaborative efforts between authors. To be eligible, manuscripts must meet the following criteria:

- An abstract must be successfully accepted by the Scientific Committee of PCSI.
- Those preselected by the committee will be assessed by their presentation at the PCSI conference.
- The lead author must attend and present the research and the innovation at the PCSI conference in Munich, Germany.

The prizes will be presented to the lead authors at the closing session of the PCSI Working Conference.

Oktoberfest
Feature Paper and General Interest

**Feature Paper:** The evolution of diagnosis-related groups (DRGs): from its beginnings in case-mix and resource use theory, to its implementation for payment and now for its current utilization for quality within and outside the hospital.


**Review:** In Norbert Goldfield’s recent paper, the historical development of diagnosis related groups (DRGs) is traced from its inception at Yale through to current day.

Rationalizing the development of DRGs relative to escalating hospital cost-based reimbursements, a strong case for clinically meaningful management tools is carefully constructed. The trials of early development are noteworthy in that other jurisdictions can minimize the risk of similar missteps. Initial application in New Jersey was followed by legislation and implementation by Medicare, setting the standard for the episode-based reimbursement we know today.

An important point of the paper is to recognize that DRG’s, and the variants thereof, are changing with time. With ongoing quality-based projects in Florida, Maryland and the Prometheus project, a new dimension is being added: one that incorporates quality, in the form of process measures and outcome measures, into payment amounts.

It is likely that many experiments regarding hospital quality and public reporting are ongoing. The author cites important examples that will be relevant to the broader casemix community as they explore extending DRGs beyond hospital payment. We encourage readers to describe their work and share it with the casemix community.

Medicare Update

Changes to the hospital inpatient prospective payment system for acute care hospitals and fiscal year 2010 rates have now been released. This publication includes rate years 2010 and 2009. Centers for Medicare and Medicaid Services (CMS), HHS. Fed Regist. 2009 Aug 27;74(165):43753-4236.

DRG and Quality Improvement


Contact Us

If you have regional conference dates, case mix developments, or publications you wish to share with the case mix community in the next version of this newsletter, please contact Jason M. Sutherland at: pcsinewsletter@gmail.com