

TITLE: Comparative Analysis of Casemix-based Efficiency Measures and Use among three countries: South Korea, France and US.

Introduction

Improving the allocation of healthcare resources and the efficiency of hospital management is one of the common policy goals of countries implementing Casemix based Funding Systems. Differences in each country's healthcare environment including the relationship among stakeholders and the problem of the existing reimbursement systems can be factors that influence efficiency changes at both the macro and micro levels. Casemix based Funding Systems are intended to increase efficiencies in the allocation and utilization of healthcare resources. This ultimately leads hand in hand with the issue of determining payment levels differences between institutions based on the types of cases they treat. We compare how countries with different healthcare backgrounds deal with efficiency issues that are closely linked to actual hospital reimbursement levels and draw country-specific policy implications. The study is based on two focused comparative research questions

1. Has efficiency improved since Casemix based Funding Systems was introduced?
2. How was efficiency defined in the evaluation? And, how did you define the Inputs and Outputs for that definition?

Methods

we conduct our research in two ways. The first is a comparative analysis of changes and trends in efficiency before and after the introduction of Casemix based Funding Systems, based on reports and data on countries' measurement and evaluation in practical areas such as pricing and payment within DRG systems and hospital level management. The second part of the study examines how countries have defined efficiency targets in their Casemix based Funding Systems, including the definition of inputs and outputs.

Results

The results of the primary and secondary content analysis are as follows The purpose of introducing payment schemes and the definition of efficiency in each country that have introduced Casemix based Funding Systems, have been subject to hasty generalizations during the introduction of the system and are restricted to increase the efficiency of hospital resource utilisation and budget allocation or to a hospital technical efficiency . The definition and measurement of the health care system economic or allocative efficiency based on a comparative study of efficiency and its actual measurement across countries, taking into account the healthcare environment (existing payment and reimbursement systems, public-private ratio, hospital vs ambulatory care, people socio economic factors et.), will provide key insights and policy evidence for the development of payment methods in the future.

Discussion

The discussion of efficiencies under the Casemix Funding system is closely related to reimbursement, payment compensation, and performance evaluation of the whole healthcare systems. It is hoped that this will be revisited through comparative research across countries.