

Agenda for Pre-Conference

Lessons Learned from The EuroDRG Project:

Wednesday, July 18, 2012, 14:00- 17:00

A session for **early career and experienced researchers** to gain insights into data, methodological approaches and results of the EuroDRG project

14.00-14.15: Introduction to the EuroDRG project: main research objectives

Reinhard Busse

The EuroDRG (www.eurodrg.eu) project was a large EU funded research project, analysing and comparing the DRG-systems of twelve countries (Austria, England, Estonia, Finland, France, Germany, Ireland, the Netherlands, Poland, Portugal, Spain and Sweden). This introduction will briefly outline the main objectives of the project.

14.15-14.45: Actual patient classification and hospital payments for selected episodes of care

Wilm Quentin & Jacqueline O'Reilly

DRG systems classify patients into different numbers of DRGs, using a diverse set of classification variables, and leading to wide variation of hospital payment levels across countries. This presentation describes a methodology that was developed by the EuroDRG project to compare the classification variables of different DRG systems for specific episodes of care (e.g. patients with acute myocardial infarction or hernia repair).

14.45-15.20: The ability of DRG systems to explain variation in resource consumption

Andy Street & Conrad Kobel

One indicator of DRG system performance is the systems' ability to explain variation in resource consumption. In this presentation, Stree & Kobel introduce the quantitative methods of the EuroDRG project. Three models were developed to explain patient-level variation in resource consumption (log of cost or length of stay), taking into account DRGs, patient characteristics and episode-specific explanatory variables.

15.20-15.40: Coffee Break

15.40-16.25: DRGs for appendectomy and knee replacement: how good are different systems?

Anne Mason & Pietro Chiarello

Using the examples of appendectomy and knee replacement, this presentation illustrates the methodological approach introduced in the previous presentation by Stree & Kobel. The results indicate that all DRG systems can make better use of routinely collected data such as the patient's age, diagnoses and procedures, and that all countries have outlying hospitals with potential to improve their management of resources for patients.

16.25-17.00: Relationship of hospital costs and quality of care

Unto Häkkinen & Zeynep Or

Policy-makers are often concerned that efforts to control costs or to enforce competition, e.g. through the introduction of DRG-based hospital payment systems, may lead to lower quality of care. This presentation introduces the methodological approach of the EuroDRG project at exploring the relationship between the quality of care and costs in hospitals.