

Towards better outcome management in healthcare service planning

Estonian Health Insurance Fund



Estonian
Health Insurance
Fund

Strategic objectives

- Estonia has been internationally recognized as country which has achieved good health outcomes at low costs
- Changes in demand for health care due to population ageing and technological advances increasingly threaten the financial sustainability of the EHIF and Estonia's health system

Strategic objectives for EHIF

- Improve financial sustainability of system
- Enhance system efficiency by strengthening primary care and integrating service delivery across care settings
- Enhance care management programs of patients with chronic illnesses
- Shift from solo to primary care group practices

Patient centered primary care

Developments in recent years:

- Broader service package and diagnostics
- E-consultation
- Additional nurse to family doctors practice and funding of out-of-hours reception
- Ongoing pilot in care coordination

Issues:

- Lack of incentives to promote collaborative, team-based approaches to patient management and learning within group practices
- Payment methods do not provide strong incentives for coordination of care across health care settings and enhanced care management activities
- Insufficient service package and lack of flexibility to provide holistic primary care services
- QBS does not fully encourage to have better outcomes

Developing purchasing models to support primary care

I phase (2016-2017)

- Introducing purchasing model for primary care centers
- Midwifery to primary care
- Continuing developing e-consultation

II phase (2018)

- Motivating primary care physicians to join primary care centers through adequate funding
- Developing purchasing models for home nursing in primary care
- Developing care coordination function to better monitor patients with multiple chronic illnesses
- Strengthening QBS in collaboration with family doctors
- Differentiating capitation payment (rural, patients with chronic diseases etc)

III phase (2019)

- Implementing care coordination among patients with chronic illnesses as well as long term care patients
- Implementing clinical decision support system
- Implementing integrated care models in primary and specialist care

Outcome based specialist or secondary care

Developments in recent years:

- Improving pricing system for health care services (more dynamic pricing, more representative sample)
- Analyzing DRG pricing
- Health Services List has been renewed annually, new services added
- Collaboration with specialists' associations to renew pricing lists for certain specialities

Issues:

- FFS encourages provision of unnecessary services
- Lack of financial disincentives to prevent gaming of patients to reduce waiting times for specialist visits (e.g. multiple bookings with no shows)
- DRG payment system in isolation encourages admissions and readmissions, contributing to the high share of avoidable acute inpatient care episodes

Developing purchasing models for specialist care

Phase I (2018)

- Expanding case based payment models, developing episode-based payment models,
- Expanding the DRG-based payment system (by integrating acute and post acute care, bundling pre-admission diagnostic tests to DRG-s)

Phase II (2019)

- Considering quality/outcome in purchasing models
- Integrated nursing care – collaboration between the social sector and health care system
- Integrated purchasing models for primary care and specialist care (also social care)

Building blocks to support patient centered purchasing models and service provision

Integrated care initiatives would benefit from improved IT, costing and coding systems

Issues:

- Lack of using clinical guidelines
- Production of average costs per product without capturing variations across patients and settings, using:
 - Claims data to establish levels of activity
 - Use of average prices to estimate costs of inputs

Goals for development:

- Developing clinical decision support system
- Uniforming coding system to enhance quality and potential use of reported data
- Developing abilities to measure costs on hospital and patient level to support bundled payment models (pricing, monitoring)



Thank you!

Katrin Romanenkov

Katrin.Romanenkov@haigekassa.ee