**FACULTY**

**Dana Burduja**  is a health economist with over 16 years of local, regional and international experience working for and with international organizations and governmental institutions. Her main areas of expertise are health financing, providers’ payment mechanisms (especially casemix for hospitals), analysis, design and implementation of health systems reforms programs - with a focus on social health insurance systems, and advisory services for public private partnerships in health. She has extended casemix experience with design and implementation of DRG-based payment systems for hospitals in Romania where she was born, Turkey, Moldova and Ukraine.

Dana is a medical doctor by training, with a Masters degree in Social and Health Services Management and a Masters degree in Political Sciences. She is currently working as a Senior Health Economist with the European Investment Bank in Luxembourg.

**Jacob Hofdijk** is a Dutch health economist. He has a wide experience on casemix issues and was one of the founders of PCSI. He worked for 30 years at HISCOM developing integrated health system, while he was active with the introduction of patient health issue oriented case mix systems in the Netherlands. After introducing the DBC system in Dutch hospitals, he became involved in the introduction of Care Standards first for Diabetes as a base for organizing person oriented care for individual patients and for funding these coordinated services across different health care settings. This approach has been based on the European Continuity of Care standard ( ContSys), and is in line with the value based approach introduced by Michael Porter. In 2004 he was the founder of Casemix, a consultancy company based on strong IT support, which is now active as Implementation Engineers across the health and social care network.

Since 2010 he is active introducing integrated care both for Mother and Child care, and for patients with chronic diseases, both based on the INtegrated CAre (INCA) approach. Both examples help to further evolve the concept of the coordination of health and social care services across the traditional settings, known as the Blue Line approach. This work is preparing the future of casemix systems, where funding is following the health issue of the patient and focused on improving the outcome by applying evidence based care.

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**Terri Jackson** is principal research fellow at the Northern Clinical Research Centre of the University of Melbourne and The Northern Hospital in Melbourne, Australia. Her research in the economics of hospital care has focused on improving technical efficiency and payment system reforms which make use of case-mix adjustment. More recently, she has focused on the economics of adverse events. She holds a PhD in Health Policy from Brandeis University USA where she was a Pew Health Policy scholar.

**Jiro Okochi**

Jiro Okochi is a Director of the Tatsumanosato Geriatric Health Services facility in Osaka, Japan,　and the Director of Research and Development at the Japanese Association of Geriatric Health Service Facilities. He received his M.D. from Tsukuba Medical School in 1990, and obtained a PhD in Medicine from the University of Occupational and Environmental Health (UOEH) in 2004.

Jiro was an associate at UOEH from 2001 to 2005, and was an associate professor at Kyushu University from 2005 to 2006. He is also a board-approved Neurologist and Internal Medicine since 1995, and has worked as a clinician at Tsukuba University Hospital, Tokyo Metropolitan General Hospital and Kyushu University Hospital.

Jiro joined the Ministry of Health to develop a casemix classification for long-term nursing care insurance in Japan.

He has been a PCSI Executive Committee member since 2006.

**Jugna Shah** is CEO of a research and consulting firm dedicated to the evaluation, development, and implementation of case mix payment systems for inpatient (DRGs) and for outpatient (APCs/APGs) both in the United States and throughout the world since 1996 . She has a Master’s in Public Health Policy and Administration. She provides education and training on coding, collecting and analyzing data, grouping, creating relative weights, simulating budgets and implementing case-mix based financing systems. She has expertise in designing country specific DRG case-mix implementation projects that taken into consideration infrastructure, politics, economics and has worked in many countries, including the Czech Republic, Hungary, Romania, Bulgaria, Turkey, Moldova, and Georgia. Jugna Shah is also the Vice-President of PCS International.

**Olafr Steinum** is a trained physician, specialist in Infectious Diseases and Internal Medicine, and has worked as a senior clinician at the Department of Infectious Diseases, Uddevalla Hospital, Sweden for 20 years till his retirement in 2009. He has been active in the development of case-mix and classifications in Scandinavia since mid-90s. He has created the curriculum and given education for Clinical Coders in Sweden and Norway since 2000, and also participated in several clinical coding auditing projects. From 2002 he is Advisor to the Swedish Board of Health and Welfare on coding and classification matters and from 2004 Nordic consultant and delegate to the WHO-FIC network. At present he is a member of the WHO Update and Revision Committee, and participates in the ICD-11 Revision process.   
He has been a member of the PCSI network since 1994, is elected a member of the PCSI Executive Committee, and was Director of the PCSI Casemix Summer School in Tallinn 2012 and 2013.

**Deniza Mazewska** is Director of Health Policy Analysis Pty in Sydney Australia. Deniza has more than 15 years experience in the health care system, specialising in health policy and strategy development and implementation, funding, casemix, performance measurement, business process analysis and redesign, project management, information systems and qualitative and quantitative analysis. She has qualifications in psychology (Bachelor of Arts), health information management (Bachelor of Applied Science) and public health (Masters). Deniza has also had an academic appointment as a lecturer for the University of Sydney.Prior to consulting work, Deniza worked in senior positions within the Australia NSW Department of Health.

**Jim Pearse** has led since 2003 the consulting company Health Policy Analysis in Sydney Australia, which has been successful in a market which includes all the large management consulting companies.He has been trained as a health economist (Master of Science, Health Economics) at the University of York in England, and also holds Bachelor level degrees in Economics (Queensland University), Arts (Sydney University) and Social Work (Sydney University). He has completed over 200 health sector consulting projects for Australia Commonwealth government, state government and non-government clients.  Projects undertaken have included program reviews, development of performance frameworks and measures, economic analysis, the development of business cases, and the analysis and interpretation of performance indicators.

**SCHOOL DIRECTOR Jean Marie Rodrigues** is Professor of Public Health and Medical Informatics in Saint Etienne University Jean Monnet Medical School,France and senior researcher in INSERM LIMICS U1142 Paris on Medical Informatics and Knowledge Engineering. He has worked extensively on the health information system in France, Europe and International organisations as ISO, WHO and IHTSDO. He was during five years (1982-1986) DRG project director and later on (1988-1994) strategic adviser of the Smart Card Department within the French department of health (DOH). Later on he was member of the board of the French national case mix agency (ATIH). He has been involved in several National (ANR, DOH, Health Insurance), European projects on Case mix , Health services research, Clinical terminology (Galen) and semantic interoperability as SHN (Semantic Health Network) .He was the editor in charge of 3 European standards which became ENISO international standards on Surgical procedures coding systems and Anatomy. He has been member of the Joint Advisory Group (JAG) monitoring the harmonisation between WHO International Classifications and SNOMED CT as well as member of the WHO Collaborative Center for International Classification in French language and of the IHTSDO Consultant Terminologist Program. He is emeritus president of PCSI (1984-2002) and past president of AIM (Association Informatique Médicale).

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