

TITLE: Mapping the Future of Patient Level Costing in Canada

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[Include your abstract according to the headings below. Abstract body in Arial, font 12. Limit to 500 words, including text in tables and figures.]

Introduction

With increased adoption of value-based funding, it is crucial to understand the costs associated with specific types of patients. Patient level costing (PLC) is powerful in determining these individual costs and building CMGs, and Canada is at the forefront of developing methodology and promoting PLC adoption in facilities across the country. The Patient Costing Roadmap was developed by a core group of national and jurisdictional representatives and aims to map and prioritize key milestones. These milestones will seek to increase the adoption and use of PLC across the country, highlight how PLC and case-mix can be used to drive and improve quality of care in conjunction with and beyond funding, and promote the investment into artificial intelligence and other innovations that can ease the burden of PLC data collection and use.

Methods

A survey was developed and sent to individuals who were deemed to be collectors, developers, users, or experts in patient level costing. Responses were received from 43 individuals from 14 organizations across Canada and follow-up interviews were conducted with 16 of these individuals. Results were brought to a national meeting where items were discussed in terms of responsibility and prioritization of short- medium- and long-term goals.

Results

Results were categorized into four thematic priorities. It was agreed that to increase the funding and investment in PLC, the profile and value of PLC needs to be highlighted in various parts of the healthcare system across the country. Secondly, the breadth, depth, and quality of data must be enhanced to extend beyond acute care (which is where the majority of PLC data currently is collected). Thirdly, with increased focus on interoperability and updating of information systems, this is an opportune time to lean into innovations that will eventually ease the burden of data collection, reporting and analysis. Finally, the national meeting highlighted the need to share training tools, case studies, and education tools between jurisdictions to mutually support the case for PLC.

Discussion/Conclusions

PLC integrates clinical, financial and statistical data and allows for precise and comprehensive cost and value analysis. It allows for in-depth analysis of patient groups and case mixes as well as more accurate modelling of patient journeys across the healthcare system. However, with the limited number of PLC experts in the country, there is a need to strategically move to bring PLC to the forefront of the conversation through the aforementioned strategies.