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Multi-Perspective Analysis of Hospital Costs in France

Case study on the French system

INTRODUCTION

Understanding healthcare costs from various perspectives (patients, healthcare providers, and health insurance) is crucial in the French context to nourish medico-economic evaluations. Each stakeholder faces unique challenges and bears different burdens.

A study based on a random sample of patients from the French National Health Data System (SNDS) was performed to assess hospitalization costs from these various perspectives.

METHODOLOGY

A retrospective observational study was conducted using the SNDS. A random sample of adult patients was included in 2015. A 6-year study period was used to collect healthcare resource use utilization (HCRU), including hospitalizations.

In this analysis, all patients with at least one hospital stay in 2019 were considered. The year 2019 was chosen to break free from the COVID year and to have the most recent and representative costs of current care.

Type of stays

For this analysis, the following stays were considered:

Overall Hospitalization
All stays, whatever the reason

Complete hospitalization (CH) for heart failure
Stay with "I50" ICD-10 code as principal or related diagnosis

CH for femoral neck fracture
Stay with "S72" ICD-10 code as principal or related diagnosis

Chemotherapy session
Sessions with "Z511" ICD-10 code as principal diagnosis

DISCUSSION

Mean invoiced costs and recalculated invoiced costs are very close suggesting the recalculation performed in PMSI analysis is close to what is actually invoicied by the hospital to the NHI.

Mean reimbursed and invoiced cost are quite close with a mean negative difference of 200 to 400€ for the reimbursed cost per stay. This is due the reimbursement calculation method done by the NHI. Indeed, a reimbursement rate related to the stay and the patient may be involved in the invoiced cost of the stay, which explains this difference in the reimbursed cost.

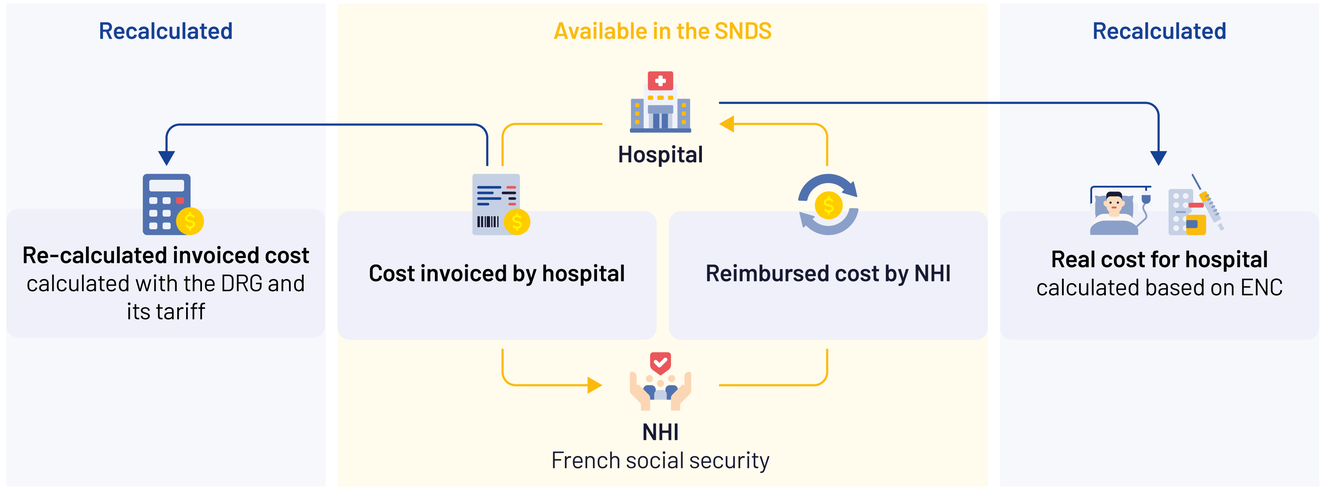
The real cost of the stay, based on ENC data, shows that the actual cost for the hospital and the invoiced cost are quite similar. This difference can be positive or negative but suggest that the calculated real cost is very close to what is invoiced and reimbursed.

CONCLUSION

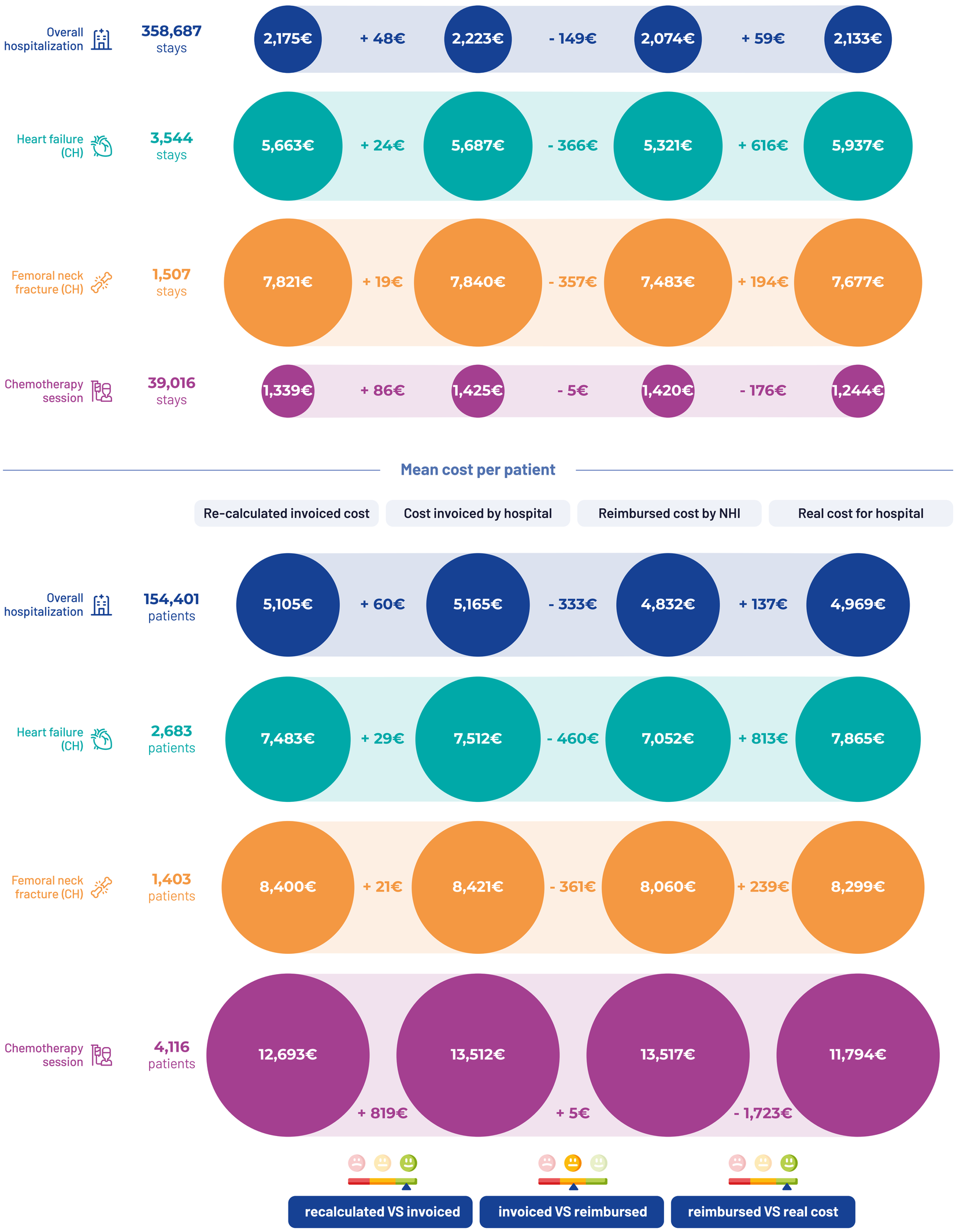
These results underscore the importance of the various perspectives considered in France for medico-economic evaluations and highlights the difference between the various methods to calculate them, which help to get a comprehensive evaluation of healthcare costs and inform policymakers to optimize resource management in the healthcare sector.

RESULTS

Identified cost perspectives in this study



Costs by type of stay with different perspectives



Abbreviations

CH: Complete Hospitalization; **DRG:** Diagnosis Related Groups; **ENC:** Échelle nationale des coûts; **HCRU:** healthcare resource use utilization; **NHI:** National health insurance; **SNDS:** French National Health Data System

Data sources

SNIIRAM study registered with the HDH on 06/30/2022 and authorised by the CNIL on 05/09/2022. (DR-2022-194(request 922190)) - CNAM agreement signed on 07/12/2023.