

# Report on Bachelor / Master Thesis

Institute of Economic Studies, Faculty of Social Sciences, Charles University in Prague

<b>Student:</b>	Pavlina Jandova
<b>Advisor:</b>	Henrieta Tulejová
<b>Title of the thesis:</b>	Cost Analysis of Health Care of Outpatient Providers Employing Risk-adjustment

## **OVERALL ASSESSMENT** (provided in English, Czech, or Slovak):

Health care systems around the world are striving with scarcity of resources to cope with burden of chronic diseases and ageing population. Due to this we must look for the measures to increase efficiency of health systems both on the side of health care providers as patients. Although the ambulatory care accounts only for 10-15% of total health care expenditures, it influences probably more than 50% of total health care expenditures and thus the efficiency of health care through the quality of its care (unnecessary hospitalizations due to poor quality of ambulatory care) and amount of induced care (prescribed drugs, laboratory tests and other diagnostics). Economic profiling of providers is commonly used tool in number of countries, especially United States to motivate providers towards more rational treatment of patients and inducement of health care.

Thus, the topic chosen by the student is very up to date inspite of the fact that she was not very successful in selection of specialty for her analysis.

The student starts with an introduction into Czech health system and specificities of health care market. However, it would be desirable to focus more on the literature review of providers profiling and efficiency analysis. The thesis lacks this part very much.

Further, the thesis continues with methodological considerations, data description and selection of modeling approach. Especially last part is performed very thoroughly and is the major contribution of the work. However, there are some interesting questions that were not answered:

1. Why did you use only the data for one year? Using the data from several years could improve the quality of analysis due to the fact that you had data only from one health insurance company?
2. How were data selected? There is a lot of experience with imprecise coding in claims data. It would be very usefull to analyze any induced care related to otorinolaryngology not only the care referred by selected providers, because sometimes they do not report it correctly.
3. What share of providers was truncated by the selection criteria (only single specialty provider)? Do you think it could significantly improve the model?
4. Did you consider performing the profiling only on the selected, most common diagnosis within this specialty? Why not?
5. Which other specialty would you recommend for analysis and why?

In the discussion part the student concluded that there is lack of data in claims data of health insurance companies for this specialization to perform proper risk adjustment and providers profiling. This is the part that would deserve more elaboration, including the comparison of risk-adjusted and non-adjusted results of profiling, proposal of other models for providers profiling, cooperation with physician on elaboration of simplified epidose-based profiling methods, etc.

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The thesis is written in very good academic English. Thesis is well structured and easy to read. Tables and graphs are used to support the ideas in the thesis.

Overall, I consider this diploma thesis of good quality.

## **SUMMARY OF POINTS AWARDED** (for details, see below):

<b>CATEGORY</b>	<b>POINTS</b>
<i>Literature</i> (max. 20 points)	15
<i>Methods</i> (max. 30 points)	25
<i>Contribution</i> (max. 30 points)	20
<i>Manuscript Form</i> (max. 20 points)	19
<b>TOTAL POINTS</b> (max. 100 points)	<b>79</b>
<b>GRADE</b> (1 – 2 – 3 – 4)	<b>2</b>

**NAME OF THE REFEREE:**

**DATE OF EVALUATION: 4.9.2015**



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**Referee Signature**