A comparative study of the California book effect and the services relative value on inpatient costs of the common actions in the selected hospitals of ILAM city in September and October 2014

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Abstract: (3564 Views)

Introduction: The Iran medical tariff rate system that for the first time was carried out enjoying the California book in 1983, after 30 years had been evolved due to numerous reasons and with compilation and prophecy of relative value book of health services entered to the new stage. The implementation of a new book will affect on the hospitalization expenses of insured persons.

Materials & methods: The population of the study, records of hospitalized insured health insurance organization in the hospitals of the city of Ilam in September and October 2014 and were the most common examples of actions that census methods, their data in accordance with the objectives of the studying the Czech records, coded and entered into the computer using SPSS 21 software analysis was performed.

Findings: Totally, the average cost of common surgical procedures 95/61 percent. In August 7% and in October 5% of the insured paid their costs; hence, average share of total 74/76% increased. Share of 9 percent to 87 percent in October. Respectively, 11% and 5% were covered by subsidy in September and October. 9% of patients in September and October was a commitment paid by the patient. Additional insurance contribution is minimal at (0%) of the costs coverage.

Discussion & conclusions: By implementing the relative value book and prophecy the relevant provisions to it, the final payment share of medical expenses of those insurance pockets by increasing the Organization share and subsidies help reduce to 5%.

Keywords: California book, Relative value, Costs, Hospital, Ilam

Full-Text [PDF 388 kb] (1090 Downloads)

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The big differences in the estimates of experts reflect the challenge of forecasting a change of this magnitude; it would be the largest domestic policy change in a generation. The proposals themselves are vague on crucial points. More broadly, any Medicare for all system would be influenced by the decisions and actions of parties concerned — patients, health care providers and political actors — in complex, hard-to-predict ways. But seeing the range of responses, and the things that all the experts agree on, can give us some ideas about what Medicare for all could mean for the country’s budget.

Perform all the actions noted above in the overall section. Investigate why all the precincts were reported complete on election night and why the election was not called for Trump. Determine who made the call to keep a few select precincts open and why and the number of ballots received after this call was made. Advertisement - story continues below. OUTRAGEOUS! “One of the tragedies of American medicine is that the money doesn’t really align with value,” Meltzer told me one afternoon in August 2016. I’d been trailing his doctors for two days by then. Much of what I’d seen, and would continue to see, was as remarkable as it was tedious: The tedium itself seemed noteworthy. During clinic appointments, which typically lasted 30 minutes, and hospital rounds, the doctors appeared to be fascinated by trivial-sounding details and tangents: a patient’s description of the shortcomings of the spaghetti at her physical-therapy center; the stops on another’s bus.