

Cost And Reimbursement Of Cataract Surgery In Europe A

This unique book will provide readers with an understanding of innovative models of delivering both primary and secondary eye care, focusing not just on providing quality care itself, but on best practices to provide and strengthen comprehensive eye care services. A wide variety of conditions will be addressed in Innovative Approaches in the Delivery of Primary and Secondary Eye Care, including childhood blindness, cataract, diabetic retinopathy, age related macular degeneration, and refractive errors. Detailed descriptions of various models are presented for each condition, which are then followed by a discussion for incorporating integrated eye care services; highlighting the importance of health system approach in comprehensive eye care. Finally, this book provides detailed strategies to address the current practical challenges related to human resources in eye care, and methods to ensure financial sustainability in the delivery of comprehensive care. Each chapter is illustrated for understanding and clarity, and provides easy-to-read tables to further enrich the text. Covering existing models of delivering care, with a look to the future, Innovative Approaches in the Delivery of Primary and Secondary Eye Care is designed for practicing ophthalmologists, residents, public health specialists and all other affiliated professionals dedicated to strengthening avenues of integrated, comprehensive eye care.

This publication covers the most current and significant trends affecting the health care industry today. In an extraordinary format of user-friendly CD-ROM and loose-leaf binder, Ernst & Young, LLP has compiled a treasury of data and analysis that will be useful to all health professionals and policy makers. The unique design of graphics and talking points makes the information ready-to-use for presentations. Issues in Global, Public, Community, and Institutional Health: 2011 Edition is a ScholarlyEditions™ eBook that delivers timely, authoritative, and comprehensive information about Global, Public, Community, and Institutional Health. The editors have built Issues in Global, Public, Community, and Institutional Health: 2011 Edition on the vast information databases of ScholarlyNews.™ You can expect the information about Global, Public, Community, and Institutional Health in this eBook to be deeper than what you can access anywhere else, as well as consistently reliable, authoritative, informed, and relevant. The content of Issues in Global, Public, Community, and Institutional Health: 2011 Edition has been produced by the world's leading scientists, engineers, analysts, research institutions, and companies. All of the content is from peer-reviewed sources, and all of it is written, assembled, and edited by the editors at ScholarlyEditions™ and available exclusively from us. You now have a source you can cite with authority, confidence, and credibility. More information is available at <http://www.ScholarlyEditions.com/>.

Cost Analysis and Reimbursement of Outpatient Cataract with Lens Implant Surgical Procedures Under Medicare's Prospective Payment System
 Medicare Reimbursement for Cataract Surgery
 Hearing Before the Subcommittee on Health of the Committee on Ways and Means, House of Representatives, Ninety-ninth Congress, First Session, August 1, 1985
 Medicare Reimbursement for Cataract Surgery
 Hearing Before the Subcommittee on Health of the Committee on Ways and Means, House of Representatives, Ninety-ninth Congress, First Session, August 1, 1985
 Cataract Surgery
 Fraud, Waste, and Abuse : a Report
 Cataract in Adults
 Management of Functional Impairment
 Fiscal Year 1988 Budget Reconciliation Issues Related to Physician Payment Under the Medicare Program
 Hearing Before the Subcommittee on Health of the Committee on Ways and Means, House of Representatives, One Hundredth Congress, First Session, June 15, 1987
 Cataract Surgery
 Fraud, Waste, and Abuse : Hearing Before the Subcommittee on Health and Long-Term Care of the Select Committee on Aging, House of Representatives, Ninety-ninth Congress, First Session, July 19, 1985
 Report to the Congress, Reimbursement Under Part B of Medicare for Certain Services Provided by Optometrists
 Clinical Practice Guideline
 Deficit Reduction Proposals Affecting Medicare
 Hearing Before the Subcommittee on Health and the Environment of the Committee on Energy and Commerce, House of Representatives, One Hundredth Congress, First Session, July 13, 1987
 Medicare
 Gao Views on the Payment System for Outpatient Cataract Surgery
 BiblioGov
 The 1998-'99 edition of The Outpatient Procedures Resource Book provides unique and useful insights into the financial and utilization performance of 56 key outpatient procedures. This new edition features two years of data as well as detail regarding ancillary procedures performed.

GAO discussed its review of the Medicare payment approach for hospital outpatient cataract surgery. GAO found that: (1) Medicare hospital payments for outpatient cataract surgery were significantly higher than for ambulatory surgical centers; (2) hospitals base beneficiary or co-insurance payments on service charges, rather than on Medicare-computed costs, and many beneficiaries pay more than the intended 20 percent; (3) hospitals generally allocate administrative and general overhead costs to their outpatient service charges to offset anticipated losses; and (4) Medicare cost-based methods do not ensure that payments are cost-efficient for services delivered to Medicare beneficiaries. GAO also found that: (1) Medicare reimbursement methods for intraocular lens (IOL) implants did not provide hospitals an incentive to negotiate for lower prices; (2) hospitals failed to adequately document the need for surgery in about 45 percent of the cases it reviewed; (3) the Department of Health and Human Services proposed limiting clinical reimbursements for IOL implants to \$200 and hospital reimbursements to acquisition costs plus a flat rate; and (4) the Health Care Financing Administration (HCFA) contracted with peer review organizations to preapprove outpatient cataract surgeries. GAO believes that HCFA needs to collect data on IOL acquisition costs and procurement practices to ensure savings to Medicare and beneficiaries.

At the very heart of modern healthcare is a critical paradox. Today, as never before, healthcare has the ability to enhance the quality and duration of life. At the same time, healthcare has become so enormously costly that it can easily bankrupt governments and impoverish individuals and families. According to federal forecasters, by the year 2015 one in every five U.S. dollars will be spent on healthcare, for total annual healthcare spending of more than \$4 trillion. While the cost of healthcare is going up, the number of individuals and families without health insurance coverage is increasing. For many, the miracles of modern medicine may be unaffordable. Health services research investigates the relationship between the factors of cost, quality, and access to healthcare and their impact upon medical outcomes (i.e., death, disease, disability, discomfort, and dissatisfaction with care). Health services research addresses such key questions as, Why is the cost of healthcare always increasing? How can healthcare costs be successfully contained without jeopardizing quality? How can medical errors be eliminated? What is the medical impact of not having health insurance coverage? The proposed encyclopedia addresses these and other important questions and issues.

With the United States and other developed nations spending as much as 14 percent of their GDP on medical care, economists and policy analysts are asking what these countries are getting in return. Yet it remains frustrating and difficult to measure the productivity of the medical care service industries. This volume takes aim at that problem, while taking stock of where we are in our attempts to solve it. Much of this analysis focuses on the capacity to measure the

value of technological change and other health care innovations. A key finding suggests that growth in health care spending has coincided with an increase in products and services that together reduce mortality rates and promote additional health gains. Concerns over the apparent increase in unit prices of medical care may thus understate positive impacts on consumer welfare. When appropriately adjusted for such quality improvements, health care prices may actually have fallen. Provocative and compelling, this volume not only clarifies one of the more nebulous issues in health care analysis, but in so doing addresses an area of pressing public policy concern.

The Second Edition of Issues in Cost Accounting for Health Care Organizations is based upon a thorough literature review of all cost accounting articles published in the last five years. It is a resource of readings on the topic of health care cost measurement and analysis, and provides the insights of leading authorities in the area of health care costs. Each article is linked with the conceptual discussion in the companion volume, Essentials of Cost Accounting for Health Care Organizations .

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