

Chapter 1

Clinical Costing Standards

Ronald Ma
Austin Health, Australia

ABSTRACT

Standards are part of our lives. Clinical costing is no exception in this regard. Clinical costing standards are published documents comprising specifications and procedures to build consistent datasets for statutory purposes. The Independent Hospital Pricing Authority publishes and updates Australian Hospital Patient Costing Standards. The standards ensure compatibility and credibility. The standards formulate a consistent and transparent way to process costing. Compliance represents the production of reliable information which could be compared locally, nationally, and internationally. Health professionals could utilize these standards-compliant datasets for testing clinical guidelines for patient safety, developing patient classification systems for counting clinical services, and setting national efficient price for public hospital funding. The ultimate goal is to improve healthcare delivery in an equitable way and reduce human suffering.

DOI: 10.4018/978-1-5225-5082-2.ch001

INTRODUCTION

We use standards every day in our lives such as in computing, healthcare, transport and measurements. The main purpose is to ensure quality, safety, reliability and consistency in performing an intended purpose.

Definition

Standards are published documents forming specifications and procedures to follow. They address a range of issues and institute protocols that help ensure compatibility and credibility.

Why It Is Important?

Clinical costing standards (CCS) are no exception. They are developed to provide a common language and set of expectations enabling interoperability, comparability and consistency between different systems and health services. They are best-practice principles to costing hospital services. They provide a safety net and remove anxiety for users by assuring the fitness for purpose.

The application of CCS usually generates reliable and comparable datasets. Health professionals could utilise the standards-compliant datasets for testing clinical guidelines for safety, developing classification systems for counting services, and setting the National Efficient Price (NEP) for funding. The ultimate goal is to improve healthcare delivery and reduce human sufferings. CCS are similar to other healthcare informatics standards such as data exchange and system standards, and pharmacy and terminology standards, and medical device standards and public health reporting standards.

Who Develops Them?

Clinical costing community members and clinical costers (practitioners) are the driving force behind the development of standards providing their expertise and innovation, and promoting new concepts of ‘clinico-financial’ data interface and research.

28 more pages are available in the full version of this document, which may be purchased using the "Add to Cart" button on the publisher's webpage: www.igi-global.com/chapter/clinical-costing-standards/208276

Related Content

Diabetes Mellitus - Evaluating the Diagnostic Probabilities

Adi Armoni (2000). *Healthcare Information Systems: Challenges of the New Millennium* (pp. 169-177).

www.irma-international.org/chapter/diabetes-mellitus-evaluating-diagnostic-probabilities/22143

Simulation Applications in a Healthcare Setting

Roque Perez-Velez (2012). *Management Engineering for Effective Healthcare Delivery: Principles and Applications* (pp. 90-112).

www.irma-international.org/chapter/simulation-applications-healthcare-setting/56249

Issues, Claims and Concerns of Different Stakeholders of Healthcare Systems

Herwig Ostermann, Bettina Staudinger, Magdalena Thöniand Roland Staudinger (2008). *Encyclopedia of Healthcare Information Systems* (pp. 792-802).

www.irma-international.org/chapter/issues-claims-concerns-different-stakeholders/13014

Biosensor Based on Giant Magnetoresistance Material

Mitra Djamal (2010). *International Journal of E-Health and Medical Communications* (pp. 1-15).

www.irma-international.org/article/biosensor-based-giant-magnetoresistance-material/46056

Integrating Medical Education with Medical Practice: Role of Web 2.0 Tools

Arindam Basu, Billy O' Steenand Mary Allan (2011). *User-Driven Healthcare and Narrative Medicine: Utilizing Collaborative Social Networks and Technologies* (pp. 433-445).

www.irma-international.org/chapter/integrating-medical-education-medical-practice/49268