
POSTER ABSTRACT**Moving towards a continuous health care system—payment reform for post-acute care in Changsha City Of China**23rd International Conference on Integrated Care, Antwerp, Flanders, 22-24 May 2023Bei Li¹, Linlin Hu

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Introduction: As an integral component of a healthcare system, PAC is not fully developed in China largely attributing to the lack of sound medical insurance coverage and payment for PAC. Changsha City in the middle-south of China draws on international experience to carry out the value-based payment reform for post-acute rehabilitation, in order to facilitate the development of rehabilitative system and promote the continuity and integration of current health care system.

Practice change implementation: According to the characteristics and rehabilitation intensity of inpatients, rehabilitation treatment is divided into two stages: recovery stage and chronic stage. For each stage, different patient classification systems are applied. For recovery phase Functional-Related Groups (FRGs), a case based payment system is established locally. For chronic phase, payment is made on per-diem basis, and Patient-Driven Chronic Rehabilitation Groups (PDCRG) are applied as casemix groups. The adapted version of International Classification of Functioning, Disability and Health (ICF) scale is used to collect patient data as well as measure their functional gain, which enables the implementation of value-based payment.

Aim and theory of change: The pilot reform is to support the effective and quality delivery of rehabilitation services, promote the development of PAC system, and push forward the value-based payment of the medical insurance.

Targeted population and stakeholders: ·Inpatients with intensive or chronic rehabilitation needs in Changsha City

·Rehabilitation service providers (including general hospitals, public and private rehabilitation specialist hospitals and other facilities providing medical rehabilitation services) in Changsha City

·Social Medical Insurance Department of Changsha City

Timeline: The payment policy was introduced in Jun. 2022 and the development is ongoing.

Highlights: The key outcomes, impact and innovation include:

·Continuous rehabilitation: recovery stage and chronic stage, with acute care before and long-term care after

·The refinement of ICF assessment scale to local practice and the development of PAC insurance information system based on the assessment

·Value-based payment: provide a method to measure the functional gain of rehabilitation inpatients and link hospital payment to patient outcomes

·Offer practical experience for reform of medical insurance payment mode of rehabilitation

Sustainability: ·The proposed mode stimulates the development of rehabilitation care services, meanwhile, decreases the burden on the medical and long-term care systems

·As a supplement of other payment modes, value-based payment mode fills the gap of rehabilitation medical insurance and supports integration of medical services.

Transfer-ability: Nowadays, China has been pushing ahead with the payment reform of acute hospitalization and developing long-term care insurance for disabled elderly. The Value-based payment model for PAC could reliably classify the needs of rehabilitation inpatients, promoting the development of PAC system. There is significant potential for the model to be replicated.

Conclusions (comprising key findings, discussion and lessons learned): Aimed at building a sound payment system for post-acute rehabilitation, the payment reform for PAC in Changsha put forward a value-oriented payment model based mainly on patients' functional conditions and classified rehabilitative patients into two stages. In the future, the criteria of the two stages and the referral mechanisms in the system need to be further explored and established.