Containing Health Care Costs

- I. Cost Containment
 - A. Governmental Regulation
 - 1. Supply side controls
 - a. Limits on hospital inputs
 - (1) Hill-Burton Act
 - b. Restriction of physician supply
 - c. Health planning
 - (1) Health Planning and Resource Development Act of 1974
 - 2. Price controls
 - a. Economic Stabilization Program, 1971
 - b. Omnibus Budget Reconciliation Act of 1989
 - c. Balanced Budget Act of 1997
 - 3. Utilization regulation
 - a. Professional Standards Review Organizations
 - b. Peer Review Organizations
 - B. Market-based competition
 - 1. Demand side incentives
 - 2. Supply side regulation
 - 3. Payer-driven competition
 - 4. Utilization management

II. Framework

- A. Fee-For-Service Systems
- B. Capitated Systems
- III. Analysis of Cost-containment Strategies
 - A. Fee-For-Service Options
 - 1. Price Options
 - a. Hospital side
 - b. Physician side
 - c. Advantages
 - d. Disadvantages
 - e. DRG System
 - 2. Quantity Options
 - a. Examples
 - b. Advantage
 - c. Disadvantages
 - 3. Expenditure Options
 - a. Advantage
 - b. Disadvantage
 - B. Capitation Options
 - 1. Items necessary for controlling expenditures
 - a. control of costs per person
 - b. number of persons

- c. shifting costs
- 2. Strategies
 - a. HMO's
 - b. Managed competition
- C. Additional Methods for Controlling Costs
 - 1. Regulating utilization
 - 2. Rate setting
 - 3. Role of private payers
- IV. Policies to Contain Costs
 - A. Strategies
 - 1. Mandated fee schedules
 - 2. Global Budgets
 - 3. Resource rationing