CORE CONCEPT

Value-Based Healthcare Course: PROMs, Bundled Payments and Outcome-Based Contracting

16 – 20 August 2027
Barcelona - Eixample district four-star

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Introduction:

Value-based healthcare, covering PROMs, bundled payments and outcome-based contracting, is a 1-week course for hospital executive teams, payer contracting units and value programme units, ending with a VBHC Implementation and Contracting Plan for one condition at a case hospital. Many providers still organise care by department and are paid for activity, so few can show which outcomes patients gain or what a care cycle costs. Nominees already lead clinical services, provider contracts or value programmes, and work through case studies on outcome registries, cost extracts and contract drafts. CoreConcept Training Center delivers this value-based healthcare course.

Course Objectives:

- Define the patient population and medical condition segments for which value will be measured and improved
- Select an ICHOM standard set and combine generic and condition-specific PROMs with clinical outcomes and case-mix variables
- Design an integrated practice unit and map the full cycle of care for one condition
- Calculate cost per patient for a care cycle using time-driven activity-based costing and capacity cost rates
- Structure a bundled or episode payment with defined inclusions, risk sharing, stop-loss limits and quality safeguards
- Draft outcome-based contract terms with payers and suppliers and track them on a VBHC outcome and cost dashboard

Target Audience:

- Hospital executive teams that steer clinical service redesign and value programmes
- Payer and insurer contracting units that negotiate provider payment terms and bundle prices
- Health ministry and health cluster units that run value-based care pilots across provider networks
- Clinical service line and department leads accountable for patient outcomes in one condition
- Healthcare finance and costing units that build cost models for clinical pathways

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Course Outline:

Day 1: Value Agenda Foundations and Current-State Value Diagnosis

- Value Equation of Patient Outcomes per Unit Cost
- Six-Component Value Agenda and Its Implementation Sequence
- Fee-for-Service Volume Incentives Versus Value-Based Payment Logic
- Medical Condition Segmentation and Patient Population Definition
- VBHC Readiness Assessment for a Hospital Condition Pathway

Day 2: Outcome Measurement with ICHOM Standard Sets and PROMs

- ICHOM Standard Set Selection and Outcomes Wheel Review
- Generic PROMs Such as EQ-5D Versus Condition-Specific Instruments
- PREMs and Patient Experience Measures Alongside Clinical Outcomes
- Case-Mix Variables, Timepoints and Risk-Adjusted Outcome Comparison
- PROM Collection Workflow, Data Dictionary and SNOMED Mapping

Day 3: Integrated Practice Units and TDABC Cost per Patient

- Integrated Practice Unit Design Around a Medical Condition
- Full Cycle of Care Process Maps for TDABC
- Capacity Cost Rate Calculation for Clinical Staff and Equipment
- Cost per Patient Episode Build Using Process Time Estimates
- Outcome and Cost Pairing to Find Low-Value Care Steps

Day 4: Bundled Payments, Outcome-Based Contracts and Value Risks

- Episode Definition, Inclusions, Exclusions and Bundle Price Setting
- Prospective Versus Retrospective Bundles and Reconciliation Mechanics
- Upside and Downside Risk Sharing with Stop-Loss Limits
- Outcome-Based Contract Terms with Payers and Medical Suppliers
- Patient Selection, Cherry-Picking and Gaming Safeguards in Bundles

Day 5: Case Study on a VBHC Implementation and Contracting Plan

- Case Condition Selection and ICHOM Measure Set Adaptation
- Case TDABC Cost Model for the Selected Care Cycle
- Case Bundle Price and Risk-Sharing Term Sheet Drafting
- VBHC Outcome and Cost Dashboard Build for Leadership Review
- VBHC Implementation and Contracting Plan Completion and Peer Defence

Skills You Will Gain:

- Patient Outcome Measurement
- PROM Instrument Selection
- Risk Adjustment of Outcomes
- Integrated Practice Unit Design
- Time-Driven Activity-Based Costing
- Bundle Pricing and Reconciliation
- Outcome-Based Contract Drafting
- Value Dashboard Reporting

Why Attend This Course:

- Present a VBHC Implementation and Contracting Plan for one condition to the hospital executive committee and the payer contracting lead
- Decide which condition to pilot first, which outcome set to collect and which bundle terms to offer a payer
- Avoid bundle prices set without true cost data, PROM programmes with low response rates and contracts that reward patient selection
- Equip clinical, finance and contracting colleagues with the outcome set template, TDABC cost worksheet and bundle term sheet used in class

Conclusion:

Back at work, the participant hands the hospital executive committee and the payer contracting lead a VBHC Implementation and Contracting Plan that sets the target condition, the outcome measure set, the TDABC cost baseline, the bundle price and the risk-sharing terms. Clinical leaders use it to launch outcome collection, finance uses it to price the care cycle and the contracting unit uses it to open talks with payers or suppliers. After the first reporting cycle, the unit should compare PROM response rates, outcomes and cost per patient with the baseline.

Frequently Asked Questions FAQ:

What should participants know before a value-based healthcare course on PROMs and bundled payments?

Participants should already lead a clinical service, a costing team, provider contracts or a value programme. Bringing an anonymised outcome extract, a cost report for one pathway or a current payer contract helps them apply each case study to their own organisation.

How does a value-based healthcare course on PROMs and bundled payments differ from a healthcare strategy or health financing course?

It works at the level of one medical condition: measuring patient outcomes, costing the care cycle and pricing a bundle or outcome-based contract. Strategy courses set portfolio direction, and health financing courses design pooling and payment methods across a whole system.

Why does value-based healthcare need both PROMs and cost per patient?

Value is outcomes divided by cost, so neither half works alone. PROMs show the results patients feel, such as pain or function, while cost per patient across the care cycle shows what those results consume, allowing fair bundle prices.

What do participants take back from a value-based healthcare course on PROMs and bundled payments?

Participants take back a VBHC Implementation and Contracting Plan for one condition, with an adapted outcome measure set, a TDABC cost model, a bundle term sheet and a value dashboard design ready to adapt to their own organisation.