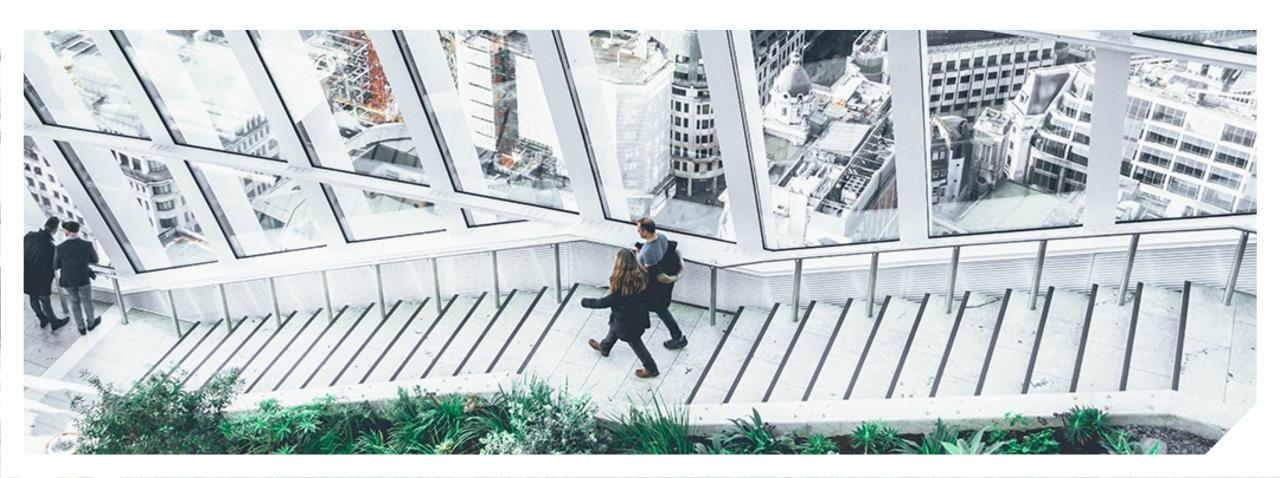


Value of care categories (VCCs)

The VCCs assess the validity and efficacy of treatments in relation to associated conditions to inform where groups of patients may benefit from alternative pathways



The VCCs have evolved from the U.S. Oregon Prioritised List¹ (OPL) and have been adapted for the English NHS

The VCCs prioritise services that keep a population healthy. Preventative services and chronic disease management rank higher than other services.



The VCC's logic provides a concluding comment for each admission to identify areas for further investigation:

VCC comment	VCC comment description
Мар	The procedure falls within the list of evidence-based interventions for the given condition.
No map	The diagnosis and/or procedure code do not map to the VCC line, or, the diagnosis and/or procedure code do not fall within the list of evidence-based interventions for the given condition. Admissions classified as 'no map' should be reviewed to test whether the treatment is appropriate for the diagnosis.
Diagnostic	Diagnostic admissions are grouped to this category.
Data invalid for grouping - not a valid primary diagnosis	There are issues with the diagnosis coding, meaning that the admission cannot be allocated to a VCC line.
Condition/Intervention review required	The diagnosis / procedure pairing requires further review.



The VCCs provide a means to review local practice against an external-evidence base. Using coded data, VCCs assess the validity and efficacy of treatments in relation to associated conditions and can inform where groups of patients may benefit from alternative pathways.

¹ https://www.oregon.gov/oha/HPA/DSI-HERC/Pages/Prioritized-List.aspx



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Key Contacts



Joanne Buckle
Principal, Consulting Actuary
London
joanne.buckle@milliman.com



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Tanya Hayward Consulting Actuary London tanya.hayward@milliman.com



Natasha Singhal
Associate Actuary
London
natasha.singhal@milliman.com

