

THE USE OF THE UNIMETRICS PLATFORM FOR COSTS, RESULTS AND QUALITY MANAGEMENT IN HEALTH INSURANCE COMPANIES IN BRAZIL, 2019 TO 2023

M. S. M. CASTRO 1, N. O. B. CAMPOS 2, E. N. M. NASSIF 2, FABIO LEITE GASTAL 3

1 UNIMED Faculty, Oswaldo Cruz Foundation, National Accreditation Organization (ONA)

2 UNIMED Faculty

3 UNIMED Faculty, UNIMED Insurance Company , National Accreditation Organization.

INTRODUCTION

UNIMED Cooperative System, founded in São Paulo in 1967, is the biggest medical cooperative system in the world. It is composed of nearly 350 cooperatives and is the biggest player in the Brazilian health insurance private market, being responsible more than 20 million lives, nearly 40% of the market. UNIMED Faculty is the academic branch of the UNIMED System and offers undergraduate, postgraduate, consultancy and data analysis and technological services for the UNIMED System. In Brazil, in the second half of 2023, almost 89% of the health insurance companies' revenues were spent paying health care providers.

AIM

To develop and implement a health care classification model that uses administrative data from paid bills to classify the complexity of all health care episodes, hospital, outpatient, and home based, allowing the comparison of costs, results and quality among different providers, companies and geographic regions in Brazil.

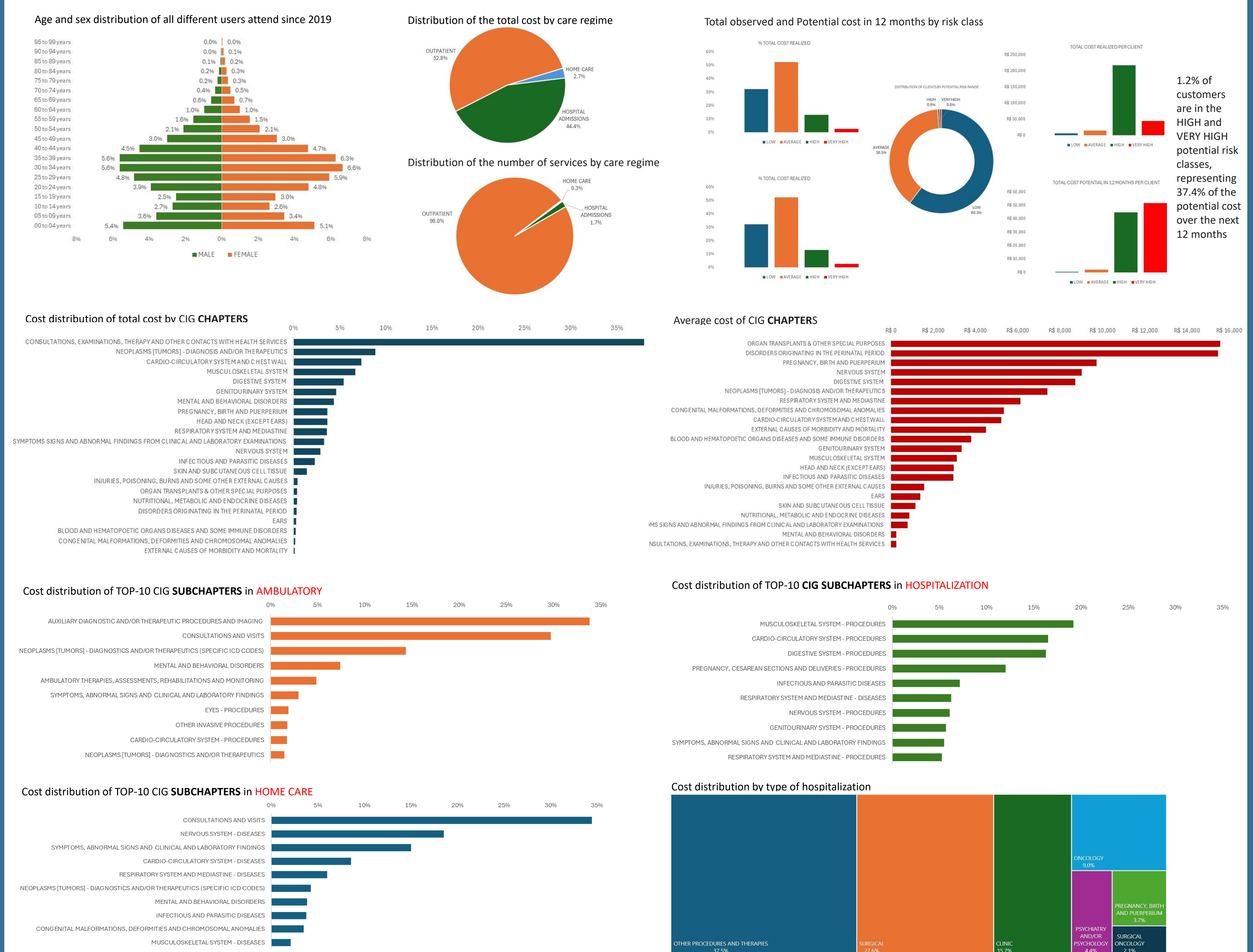
To compare healthcare services provided to clients in terms of costs, results, and quality, it is necessary to classify health care episodes in terms of complexity. There are well-established initiatives in the world, such as the Diagnostic Related Groups (DRG), which have a cost and implementation time that may not be accessible for many health services in developing countries.

METHOD

The algorithm set was developed by a multidisciplinary team in a large health insurance company in Brazil and was implemented by the development team and by UNIMED Faculty in other small, medium, and large companies of the UNIMED System, receiving the name UNIMETRICS – Management Information Classification Module

RESULTS

Until mid-2024, the algorithm system processed 1.2 billion records of paid bills since January 2019. Information from 8.5 million system customers was analyzed, totaling 86.1 billion reals in healthcare expenses (approximately 15.4 billion US dollars in September 2024), classified into 162.5 million care episodes, including 2.8 million hospitalizations, 159.2 million outpatient visits and more than 500 thousand home visits. The maximum time for returning results after receiving the database is 90 days and monthly updates occur on average within five business days after receiving the data. Analytics are presented in importable files and dynamic panels, which can be customized by the clients themselves.



CONCLUSIONS

The UNIMETRICS proved to be a viable and effective alternative, both from the time and cost point of view, for classifying health care based on administrative data, therefore contributing for better cost management and results and quality improvement in Brazilian private health care system.

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CONTACT INFORMATION

monicacastro@faculdadeunimed.edu.br

monicamonteirocastro@gmail.com