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 List\(^1\) (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.

VCCs are based on ranked clinical and cost effectiveness and help us to:

- Compare local cost and activity to an index of conditions, weighted towards preventative and upstream interventions
- Quantify the volume and cost of ‘diagnostic only’ interventions
- Compare utilisation and cost profiles against an external-evidence base for condition-intervention pairings
- Identify preventative and chronic disease management activity occurring in an acute setting

<table>
<thead>
<tr>
<th>VCC comment</th>
<th>VCC comment description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Map</td>
<td>The procedure falls within the list of evidence-based interventions for the given condition.</td>
</tr>
<tr>
<td>No map</td>
<td>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.</td>
</tr>
<tr>
<td>Diagnostic</td>
<td>Diagnostic admissions are grouped to this category.</td>
</tr>
<tr>
<td>Data invalid for grouping - not a valid primary diagnosis</td>
<td>There are issues with the diagnosis coding, meaning that the admission cannot be allocated to a VCC line.</td>
</tr>
<tr>
<td>Condition/Intervention review required</td>
<td>The diagnosis / procedure pairing requires further review.</td>
</tr>
</tbody>
</table>

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/Prioritzed-List.aspx](https://www.oregon.gov/oha/HPA/DSI-HERC/Pages/Prioritzed-List.aspx)
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- We offer an active research program to supplement and support our consulting activities.

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