

8. Literaturverzeichnis

- Abrams C. Application of the Johns Hopkins Adjusted Clinical Group (ACG) case-mix system: a multinational comparison. Proceedings of the 17th Patient Classification Systems in Europe (PCS/E) Working Conference, 2001:1-8.
- Andersson PA, Varde E, Diderichsen F. Modelling of resource allocation to health care authorities in Stockholm county. *Health Care Manag Sci* 2000;3:141-149.
- Ash A, Byrne-Logan S. How well do models work? Predicting health care costs. Proceedings of the Section on Statistics in Epidemiology American Statistical Association, 1998:42-49.
- Ash A, Porell F, Gruenberg L, et al. Adjusting Medicare capitation payments using prior hospitalization data. *Health Care Financ Rev* 1989;10:17-29.
- Ash A, Shwartz M. R2: a useful measure of model performance when predicting a dichotomous outcome. *Stat Med* 1999;18:375-384.
- Ash AS, Zhao Y, Ellis RP, et al. Finding future high-cost cases: comparing prior cost versus diagnosis-based methods. *Health Serv Res* 2001;36:194-206.
- Asthana S, Gibson A, Moon G, et al. The pursuit of equity in NHS resource allocation: should morbidity replace utilisation as the basis for setting health care capitations? *Soc Sci Med* 2004;58:539-551.
- Backhaus K, Erichson B, Plinke W, et al. *Multivariate Analysemethoden: Eine anwendungsorientierte Einführung*. 8. Auflage. Berlin Heidelberg New York: Springer-Verlag, 1996.
- Beck K, Spycher S, Holly A, et al. Risk adjustment in Switzerland. *Health Policy* 2003;65:63-74.
- Bergmann E, Kalckklosch M, Tiemann F. [Public health care utilisation. Initial results of the Telephone Health Survey 2003]. *Bundesgesundheitsblatt Gesundheitsforschung Gesundheitsschutz* 2005;48:1365-1373.
- Bundesministerium für Gesundheit und Soziale Sicherung. *Gesetzliche Krankenversicherung - Mitglieder, mitversicherte Angehörige und Krankenstand Jahresdurchschnitte 1998 bis 2004 (Ergebnisse der GKV-Statistik KM1)*. Berlin: Bundesministerium für Gesundheit und Soziale Sicherung, 2005. (Accessed Aug. 20, 2006 at http://www.bmg.bund.de/cln_041/nn_601092/DE/Datenbanken-Statistiken/Statistiken-Gesundheit/Gesetzliche-Krankenversicherung/Mitglieder-und-Versicherte/mitglieder-und-versicherte-node,param=.html_nnn=true).
- Carlsson L, Borjesson U, Edgren L. Patient based 'burden-of-illness' in Swedish primary health care. Applying the Johns Hopkins ACG case-mix system in a retrospective study of electronic patient records. *Int J Health Plann Manage* 2002;17:269-282.
- Carlsson L, Streder LE, Fridh G, et al. Types of morbidity and categories of patients in a Swedish county. Applying the Johns Hopkins Adjusted Clinical Groups System to encounter data in primary health care. *Scand J Prim Health Care* 2004;22:174-179.

- Carlsson L, Strenger LE, Fridh G, et al. Clinical categories of patients and encounter rates in primary health care - a three-year study in defined populations. *BMC Public Health* 2006;6:35.
- Carr-Hill RA, Sheldon TA, Smith P, et al. Allocating resources to health authorities: development of method for small area analysis of use of inpatient services. *BMJ* 1994;309:1046-1049.
- Charlson ME, Pompei P, Ales KL, et al. A new method of classifying prognostic comorbidity in longitudinal studies: development and validation. *J Chronic Dis* 1987;40:373-383.
- Cohen J. A coefficient of agreement for nominal scales. *Educ Psychol Meas* 1960;20:37.
- Cooper GS, Yuan Z, Stange KC, et al. The sensitivity of Medicare claims data for case ascertainment of six common cancers. *Med Care* 1999;37:436-444.
- Cox DR. Regression models and life tables. *J Roy Stat Soc B* 1972;34:187-220.
- Cumming RB, Knutson D, Cameron BA, et al. A comparative analysis of claims-based methods of health risk assessment for commercial populations. Schaumburg, Illinois: Society of Actuaries, 2002.
- De Groot V, Beckerman H, Lankhorst GJ, et al. How to measure comorbidity. a critical review of available methods. *J Clin Epidemiol* 2003;56:221-229.
- Deutsches Institut für Dokumentation und Information (DIMDI). ICD-10-GM Version 2006 Alphabetisches und Systematisches Verzeichnis. 10. Revision Stand: 1. Oktober 2005. Neu-Isenburg: MMI Medizinische Medien Informations GmbH, 2006.
- Deyo RA, Cherkin DC, Cioł MA. Adapting a clinical comorbidity index for use with ICD-9-CM administrative databases. *J Clin Epidemiol* 1992;45:613-619.
- Diderichsen F, Varde E, Whitehead M. Resource allocation to health authorities: the quest for an equitable formula in Britain and Sweden. *BMJ* 1997;315:875-878.
- Dirschedl P, Reichle M, Rother M. [Model project on coding accuracy]. *Gesundheitswesen* 2003;65:1-7.
- Dräther H, Gerste B, Schwinger A. Empirische Untersuchungen zu morbiditätsorientierten Regelleistungsvolumina in regionaler Perspektive. *Gesundheits- und Sozialpolitik* 2006;1-2:11-19.
- Duckett SJ, Agius PA. Performance of diagnosis-based risk adjustment measures in a population of sick Australians. *Aust N Z J Public Health* 2002;26:500-507.
- Dunn DL, Rosenblatt A, Taira DA, et al. A comparative analysis of health risk assessment. Schaumburg, Illinois: Society of Actuaries, 1996. (SOA Monograph M-HB96-1.)
- Ellis RP, Pope GC, Iezzoni L, et al. Diagnosis-based risk adjustment for Medicare capitation payments. *Health Care Financ Rev* 1996;17:101-128.
- Engstrom SG, Carlsson L, Ostgren CJ, et al. The importance of comorbidity in analysing patient costs in Swedish primary care. *BMC Public Health* 2006;6:36.

- Fischer G, Junius U. Die ICD-10 in der Allgemeinmedizin (III). Z Allg Med 1995;71:1576-1578.
- Fischer G, Rossa B. Die ICD-10 in der Allgemeinmedizin (II). Z Allg Med 1995;71:1480-1488.
- Fisher ES, Whaley FS, Krushat WM, et al. The accuracy of Medicare's hospital claims data: progress has been made, but problems remain. Am J Public Health 1992;82:243-248.
- Fishman PA, Goodman MJ, Hornbrook MC, et al. Risk adjustment using automated ambulatory pharmacy data: the RxRisk model. Med Care 2003;41:84-99.
- Fowles JB, Fowler EJ, Craft C. Validation of claims diagnoses and self-reported conditions compared with medical records for selected chronic diseases. J Ambul Care Manage 1998;21:24-34.
- Fowles JB, Lawthers AG, Weiner JP, et al. Agreement between physicians' office records and Medicare Part B claims data. Health Care Financ Rev 1995;16:189-199.
- Fowles JB, Weiner JP, Knutson D, et al. Taking health status into account when setting capitation rates: a comparison of risk-adjustment methods. JAMA 1996;276:1316-1321.
- Geraci JM, Johnson ML, Gordon HS, et al. Mortality after cardiac bypass surgery: prediction from administrative versus clinical data. Med Care 2005;43:149-158.
- Gerste B, Gutschmidt S. Datenqualität von Diagnosedaten aus dem ambulanten Bereich - Kritische Anmerkungen am Beispiel Diabetes. Gesundheits- und Sozialpolitik 2006;3-4:29-43.
- Gilmer T, Kronick R, Fishman P, et al. The Medicaid Rx model: pharmacy-based risk adjustment for public programs. Med Care 2001;39:1188-1202.
- Goldfield N, Averill R, Eisenhandler J, et al. The prospective risk adjustment system. J Ambul Care Manage 1999;22:41-52.
- Gordis L. Epidemiologie. 1. Auflage. Marburg: Verlag im Kilian, 2001.
- Gordon HS, Johnson ML, Wray NP, et al. Mortality after noncardiac surgery: prediction from administrative versus clinical data. Med Care 2005;43:159-167.
- Heuer J, Kerek-Bodden H, Bertram B, et al. [Glaucoma in practices of ophthalmologists]. Gesundheitswesen 2003;65:648-652.
- Hippisley-Cox J, Pringle M, Cater R, et al. The electronic patient record in primary care-regression or progression? A cross sectional study. BMJ 2003;326:1439-1443.
- Hogan WR, Wagner MM. Accuracy of data in computer-based patient records. J Am Med Inform Assoc 1997;4:342-355.
- Hornbrook MC, Goodman MJ, Fishman PA, et al. Health-based payment and computerized patient record systems. Eff Clin Pract 1998;1:66-72.

- Horner RD, Paris JA, Purvis JR, et al. Accuracy of patient encounter and billing information in ambulatory care. *J Fam Pract* 1991;33:593-598.
- Hsia DC, Ahern CA, Ritchie BP, et al. Medicare reimbursement accuracy under the prospective payment system, 1985 to 1988. *JAMA* 1992;268:896-899.
- Hsia DC, Krushat WM, Fagan AB, et al. Accuracy of diagnostic coding for Medicare patients under the prospective-payment system. *N Engl J Med* 1988;318:352-355.
- Hughes JS, Averill RF, Eisenhandler J, et al. Clinical Risk Groups (CRGs): a classification system for risk-adjusted capitation-based payment and health care management. *Med Care* 2004;42:81-90.
- Hummers-Pradier E, Simmenroth-Nayda A, Scheidt-Nave C, et al. [Medical care research based on family doctor routine data--are interface-communicated treatment data feasible?]. *Gesundheitswesen* 2003;65:109-114.
- Humphries KH, Rankin JM, Carere RG, et al. Co-morbidity data in outcomes research: are clinical data derived from administrative databases a reliable alternative to chart review? *J Clin Epidemiol* 2000;53:343-349.
- Iezzoni LI. Assessing quality using administrative data. *Ann Intern Med* 1997;127:666-674.
- Iezzoni LI. Risk adjustment for measuring health care outcomes. 3rd ed. Chicago: Health Administration Press, 2003.
- Iezzoni LI, Foley SM, Daley J, et al. Comorbidities, complications, and coding bias. Does the number of diagnosis codes matter in predicting in-hospital mortality? *JAMA* 1992;267:2197-2203.
- Inouye SK, Bogardus ST, Jr., Vitagliano G, et al. Burden of illness score for elderly persons: risk adjustment incorporating the cumulative impact of diseases, physiologic abnormalities, and functional impairments. *Med Care* 2003;41:70-83.
- Johnson AN, Appel GL. DRGs and hospital case records: implications for Medicare case mix accuracy. *Inquiry* 1984;21:128-134.
- Jollis JG, Ancukiewicz M, DeLong ER, et al. Discordance of databases designed for claims payment versus clinical information systems. Implications for outcomes research. *Ann Intern Med* 1993;119:844-850.
- Jordan K, Porcheret M, Croft P. Quality of morbidity coding in general practice computerized medical records: a systematic review. *Fam Pract* 2004;21:396-412.
- Juncosa S, Bonaventura B, Montserrat R, et al. Performance of an ambulatory casemix measurement system in primary care in Spain. *Eur J Public Health* 1999;9:27-35.
- Junius U, Walker P, Fischer G. Die ICD-10 in der Allgemeinmedizin (IV). *Z Allg Med* 1995;71:1664-1670.
- Kapur K, Tseng CW, Rastegar A, et al. Medicare calibration of the clinically detailed risk information system for cost. *Health Care Financ Rev* 2003;25:37-54.

- Kashner TM. Agreement between administrative files and written medical records: a case of the Department of Veterans Affairs. *Med Care* 1998;36:1324-1336.
- Kassenärztliche Bundesvereinigung. Einheitlicher Bewertungsmaßstab. Stand: 1. Oktober 2001. Köln: Deutscher Ärzteverlag, 2001.
- Katz JN, Barrett J, Liang MH, et al. Sensitivity and positive predictive value of Medicare Part B physician claims for rheumatologic diagnoses and procedures. *Arthritis Rheum* 1997;40:1594-1600.
- Kerek-Bodden H, Koch H, Brenner G, et al. [Diagnostic spectrum and treatment requirements of general practice clients. Results of the ADT Panel of the Central Institute of National Health Insurance Management]. *Z Arztl Fortbild Qualitatssich* 2000;94:21-30.
- Kieszak SM, Flanders WD, Kosinski AS, et al. A comparison of the Charlson comorbidity index derived from medical record data and administrative billing data. *J Clin Epidemiol* 1999;52:137-142.
- Klabunde CN, Potosky AL, Legler JM, et al. Development of a comorbidity index using physician claims data. *J Clin Epidemiol* 2000;53:1258-1267.
- Klabunde CN, Warren JL, Legler JM. Assessing comorbidity using claims data: an overview. *Med Care* 2002;40(8):26-35.
- Klaus B, Ritter A, Grosse HH, et al. [Study of the quality of codification of diagnoses and procedures under DRG conditions]. *Gesundheitswesen* 2005;67:9-19.
- Knaus WA, Wagner DP, Draper EA, et al. The APACHE III prognostic system. Risk prediction of hospital mortality for critically ill hospitalized adults. *Chest* 1991;100:1619-1636.
- Knaus WA, Zimmerman JE, Wagner DP, et al. APACHE-acute physiology and chronic health evaluation: a physiologically based classification system. *Crit Care Med* 1981;9:591-597.
- Körner T, Beyer M, Gerlach F, et al. Die Qualität der Patientendokumentation in der Allgemeinpraxis. 38. Kongress der DEGAM, 23.-25.09.2004, Potsdam. *Z Allg Med (Kongress-Abstracts)* 2004;80:389.
- Körner T, Saad A, Laux G, et al. Die Episode als Grundlage der Dokumentation. *Dtsch Arztebl* 2005;102:A3168-A3172.
- Kreienbrock L, Schach S. Epidemiologische Methoden. 1. Auflage. Stuttgart Jena New York: Gustav Fischer Verlag, 1995.
- Kronick R, Dreyfus T, Lee L, et al. Diagnostic risk adjustment for Medicaid: the disability payment system. *Health Care Financ Rev* 1996;17:7-33.
- Lamberts H, Hofmans-Okkes I. Episode of care: a core concept in family practice. *J Fam Pract* 1996a;42:161-169.

- Lamberts H, Hofmans-Okkes I. The core of computer based patient records in family practice: episodes of care classified with ICPC. *Int J Biomed Comput* 1996b;42:35-41.
- Lamberts H, Wood M, Hofmans-Okkes I. The International Classification of Primary Care in the European Community. Oxford, England: Oxford University Press, 1993.
- Lamers LM. Pharmacy costs groups: a risk-adjuster for capitation payments based on the use of prescribed drugs. *Med Care* 1999a;37:824-830.
- Lamers LM. Risk-adjusted capitation based on the Diagnostic Cost Group Model: an empirical evaluation with health survey information. *Health Serv Res* 1999b;33:1727-1744.
- Lamers LM. Risk-adjusted capitation payments: developing a diagnostic cost groups classification for the Dutch situation. *Health Policy* 1998;45:15-32.
- Lamers LM, van Vliet RC. The Pharmacy-based Cost Group model: validating and adjusting the classification of medications for chronic conditions to the Dutch situation. *Health Policy* 2004;68:113-121.
- Landis JR, Koch GG. The measurement of observer agreement for categorical data. *Biometrics* 1977;33:159-174.
- Lauterbach KW, Lüngen M. Konzepte zu einem diagnose- und verordnungsorientierten Risikostrukturausgleich zwischen den Krankenkassen. *Gesundheits- und Sozialpolitik* 2005;1-2:20-24.
- Laux G, Koerner T, Rosemann T, et al. The CONTENT project: a problem-oriented, episode-based electronic patient record in primary care. *Inform Prim Care* 2005;13:249-255.
- Lee DS, Donovan L, Austin PC, et al. Comparison of coding of heart failure and comorbidities in administrative and clinical data for use in outcomes research. *Med Care* 2005;43:182-188.
- Linczak G, Tempka A, Haas N. Entlastung der knappen Ressource Arzt. *Dtsch Arztebl* 2003;100:A2563-A2566.
- Linczak G, Tempka A, Haas N. Plädoyer für die Beseitigung arztfremder Kodiertätigkeit. *Dtsch Arztebl* 2004;101:A2242-A2243.
- Logan JR, Gorman PN, Middleton B. Measuring the quality of medical records: a method for comparing completeness and correctness of clinical encounter data. *Proc AMIA Symp* 2001:408-412.
- Lohr KN, Brook RH, Kamberg CJ, et al. Use of medical care in the Rand Health Insurance Experiment. Diagnosis- and service-specific analyses in a randomized controlled trial. *Med Care* 1986;24:S1-87.
- Lüngen M, Lauterbach KW. Ausmaß und Ursachen von Kodierproblemen bei pauschalierender Vergütung auf der Basis von Diagnosis-Related Groups. *Dtsch Med Wochenschr* 2001;126:1449-1453.

- Majeed A, Bindman AB, Weiner JP. Use of risk adjustment in setting budgets and measuring performance in primary care I: how it works. *BMJ* 2001a;323:604-607.
- Majeed A, Bindman AB, Weiner JP. Use of risk adjustment in setting budgets and measuring performance in primary care II: advantages, disadvantages, and practicalities. *BMJ* 2001b;323:607-610.
- Malenka DJ, McLerran D, Roos N, et al. Using administrative data to describe casemix: a comparison with the medical record. *J Clin Epidemiol* 1994;47:1027-1032.
- McClure W. On the research status of risk-adjusted capitation rates. *Inquiry* 1984;21:205-213.
- Mikkelsen G, Aasly J. Concordance of information in parallel electronic and paper based patient records. *Int J Med Inform* 2001;63:123-131.
- Mohr VD, Bauer J, Döbler K, et al. Qualität sichtbar machen: BQS-Qualitätsreport 2004. Bundesgeschäftsstelle Qualitätssicherung, 2005. (Accessed Jan. 13, 2006 at <http://www.bqs-qualitaetsreport.de/2004/grundlagen/risikoadjustierung/>).
- Morgan RO, Virnig BA, DeVito CA, et al. The Medicare-HMO revolving door - the healthy go in and the sick go out. *N Engl J Med* 1997;337:169-175.
- Nashef SA, Roques F, Michel P, et al. European system for cardiac operative risk evaluation (EuroSCORE). *Eur J Cardiothorac Surg* 1999;16:9-13.
- Newcomer R, Clay T, Luxenberg JS, et al. Misclassification and selection bias when identifying Alzheimer's disease solely from Medicare claims records. *J Am Geriatr Soc* 1999;47:215-219.
- Okkes I, Jamoull M, Lamberts H, et al. ICPC-2-E: the electronic version of ICPC-2. Differences from the printed version and the consequences. *Fam Pract* 2000;17:101-107.
- Okkes IM, Becker HW, Bernstein RM, et al. The March 2002 update of the electronic version of ICPC-2. A step forward to the use of ICD-10 as a nomenclature and a terminology for ICPC-2. *Fam Pract* 2002;19:543-546.
- Orueta JF, Lopez-De-Munain J, Baez K, et al. Application of the ambulatory care groups in the primary care of a European national health care system: does it work? *Med Care* 1999;37:238-248.
- Orueta JF, Urraca J, Berraondo I, et al. Adjusted Clinical Groups (ACGs) explain the utilization of primary care in Spain based on information registered in the medical records: a cross-sectional study. *Health Policy* 2006;76:38-48.
- Petersen LA, Pietz K, Woodard LD, et al. Comparison of the predictive validity of diagnosis-based risk adjusters for clinical outcomes. *Med Care* 2005;43:61-67.
- Pfaff H. Versorgungsforschung - Begriffsbestimmung, Gegenstand und Aufgaben. Köln: Zentrum für Versorgungsforschung, 2005. (Accessed Dec. 19, 2005 at http://www.gesundheitspolitik.net/01_gesundheitssystem/krankenversicherung/versorgungsforschung/VersorgungsforschungBegriffsbestimmungGegenstandundAufgaben.pdf).

- Pope GC, Adamache KW, Walsh EG, et al. Evaluating Alternative Risk Adjusters for Medicare. *Health Care Financ Rev* 1998;20:109-129.
- Pope GC, Ellis RP, Ash AS, et al. Diagnostic Cost Group Hierarchical Condition Category models for Medicare risk adjustment. Baltimore, MD: Centers for Medicare & Medicaid Services, 2000. (Final Report No. 500-95-048.)
- Pringle M, Ward P, Chilvers C. Assessment of the completeness and accuracy of computer medical records in four practices committed to recording data on computer. *Br J Gen Pract* 1995;45:537-541.
- Quan H, Parsons GA, Ghali WA. Validity of procedure codes in International Classification of Diseases, 9th revision, clinical modification administrative data. *Med Care* 2004;42:801-809.
- Quan H, Parsons GA, Ghali WA. Validity of information on comorbidity derived from ICD-9-CCM administrative data. *Med Care* 2002;40:675-685.
- Quan H, Sundararajan V, Halfon P, et al. Coding algorithms for defining comorbidities in ICD-9-CM and ICD-10 administrative data. *Med Care* 2005;43:1130-1139.
- Rector TS, Wickstrom SL, Shah M, et al. Specificity and sensitivity of claims-based algorithms for identifying members of Medicare+Choice health plans that have chronic medical conditions. *Health Serv Res* 2004;39:1839-1857.
- Reid R, MacWilliam L, Roos N, et al. Measuring morbidity in populations: performance of the Johns Hopkins Adjusted Clinical Group (ACG) case-mix adjustment system in Manitoba. Manitoba, Canada: Manitoba Centre for Health Policy and Evaluation, Department of Community Health Services, Faculty of Medicine, University of Manitoba, 1999.
- Reid RJ, MacWilliam L, Verhulst L, et al. Performance of the ACG case-mix system in two Canadian provinces. *Med Care* 2001;39:86-99.
- Reid RJ, Roos NP, MacWilliam L, et al. Assessing population health care need using a claims-based ACG morbidity measure: a validation analysis in the Province of Manitoba. *Health Serv Res* 2002;37:1345-1364.
- Reschke P, Sehlen S, Schiffhorst G, et al. Klassifikationsmodelle für Versicherte im Risikostrukturausgleich. Untersuchung zur Auswahl geeigneter Gruppenbildungen, Gewichtungsfaktoren und Klassifikationsmerkmale für einen direkt morbiditätsorientierten Risikostrukturausgleich in der gesetzlichen Krankenversicherung. Berlin, Köln und Essen: Bundesministeriums für Gesundheit und soziale Sicherung, 2004. (Endbericht.)
- Rice N, Smith PC. Capitation and risk adjustment in health care financing: an international progress report. *Milbank Q* 2001;79:81-113, IV.
- Romano PS, Roos LL, Jollis JG. Adapting a clinical comorbidity index for use with ICD-9-CM administrative data: differing perspectives. *J Clin Epidemiol* 1993;46:1075-1079.
- Romm FJ, Putnam SM. The validity of the medical record. *Med Care* 1981;19:310-315.

- Rosen AK, Loveland S, Anderson JJ, et al. Evaluating diagnosis-based case-mix measures: how well do they apply to the VA population? 70. Med Care 2001;39:692-704.
- Rothman KJ. Epidemiology: An Introduction. 1st ed. New York, USA: Oxford University Press, 2002.
- Schneider A, Gantner L, Maag I, et al. Are ICD-10 codes appropriate for performance assessment in asthma and COPD in general practice? Results of a cross sectional observational study. BMC Health Serv Res 2005;5:11.
- Schokkaert E, Dhaene G, van de Voorde C. Risk adjustment and the trade-off between efficiency and risk selection: an application of the theory of fair compensation. Health Econ 1998;7:465-480.
- Schokkaert E, van de Voorde C. Health care reform in Belgium. Health Econ 2005;14:S25-S39.
- Schokkaert E, van de Voorde C. Belgium: risk adjustment and financial responsibility in a centralised system. Health Policy 2003;65:5-19.
- Shmueli A, Chernichovsky D, Zmora I. Risk adjustment and risk sharing: the Israeli experience. Health Policy 2003;65:37-48.
- Solon JA, Feeney JJ, Jones SH, et al. Delineating episodes of medical care. Am J Public Health Nations Health 1967;57:401-408.
- Solon JA, Rigg RD, Jones SH, et al. Episodes of medical care: nursing students' use of medical services. Am J Public Health Nations Health 1969;59:936-946.
- Sozialgesetzbuch Fünftes Buch - Gesetzliche Krankenversicherung. In der Fassung des Gesetzes zur Sicherung der nachhaltigen Finanzierungsgrundlagen der gesetzlichen Rentenversicherung (RV-Nachhaltigkeitsgesetz), 2004. (Accessed Feb. 14, 2006 at http://www.rententips.de/gesetze/05/index.php?norm_ID=0500000).
- Staffeldt T. Morbiditätsbezogene Regelleistungsvolumina in der ärztlichen Vergütung - Eine Machbarkeitsanalyse. Gesundheits- und Sozialpolitik 2004;11-12:51-59.
- Stange KC, Zyzanski SJ, Smith TF, et al. How valid are medical records and patient questionnaires for physician profiling and health services research? A comparison with direct observation of patients visits. Med Care 1998;36:851-867.
- Steinwachs DM, Stuart ME, Scholle S, et al. A comparison of ambulatory Medicaid claims to medical records: a reliability assessment. Am J Med Qual 1998;13:63-69.
- Surjan G. Questions on validity of International Classification of Diseases-coded diagnoses. Int J Med Inform 1999;54:77-95.
- Szecsenyi J, Broge B. Elektronische Dokumentation. In: Häussler B, ed. Qualitätsmanagement in der Arztpraxis. Schriftenreihe des Bundesministeriums für Gesundheit Bd. 117. Baden-Baden: Nomos Verlagsgesellschaft, 1999:185-228.

- Tang PC, LaRosa MP, Gorden SM. Use of computer-based records, completeness of documentation, and appropriateness of documented clinical decisions. *J Am Med Inform Assoc* 1999;6:245-251.
- Thamm M. [Blood pressure in Germany--current status and trends]. *Gesundheitswesen* 1999;61 Spec No:S90-S93.
- The Johns Hopkins ACG Case-Mix System Documentation and Application Manual Version 5.0. Baltimore: Health Services Research and Development Center, Johns Hopkins University, 2001.
- The Johns Hopkins ACG Case-Mix System Reference Manual Version 7.0. Baltimore: Johns Hopkins Bloomberg School of Public Health, 2005.
- Thefeld W. [Prevalence of diabetes mellitus in the adult German population]. *Gesundheitswesen* 1999;61 Spec No:S85-S89.
- Thiru K, Hassey A, Sullivan F. Systematic review of scope and quality of electronic patient record data in primary care. *BMJ* 2003;326:1070.
- Thode N, Bergmann E, Kamtsiuris P, et al. [Predictors for ambulatory medical care utilization in Germany]. *Bundesgesundheitsblatt Gesundheitsforschung Gesundheitsschutz* 2005;48:296-306.
- Trautner C, Dong Y, Ryll A, et al. Verlässlichkeit von Diagnosen niedergelassener Ärzte in Niedersachsen. *Gesundheits- und Sozialpolitik* 2005;1-2:36-43.
- van de Ven WPMM, Beck K, Buchner F, et al. Risk adjustment and risk selection on the sickness fund insurance market in five European countries. *Health Policy* 2003;65:75-98.
- van den Akker M, Metsemakers JF, Limonard CB, et al. General practice: a gold mine for research. Maastricht: Department of General Practice, Care and Public Health Research Institute, Maastricht University, 2004.
- Verbeke M. The Belgian episode. Vortrag beim 2. Workshop für das Projekt CONTENT, Heidelberg 2004
- Verhulst L, Reid R, Forrest CB. Hold it - my patients are sicker. The importance of case-mix adjustment to practitioner profiles in British Columbia. *BC Medical Journal* 2001;43:328-333.
- Virnig BA, McBean M. Administrative data for public health surveillance and planning. *Annu Rev Public Health* 2001;22:213-230.
- Vladeck BC. Medicare hospital payment by diagnosis-related groups. *Ann Intern Med* 1984;100:576-591.
- von Korff M, Wagner EH, Saunders K. A chronic disease score from automated pharmacy data. *J Clin Epidemiol* 1992;45:197-203.

- von Maydell B, Schulte C. Möglichkeiten zur Justierung von Patientenklassifikationssystemen für die ambulante Vergütung. Eine Analyse mit Hilfe der Clinical Risk Groups. *Gesundheits- und Sozialpolitik* 2005;1-2:28-35.
- von Stillfried D. Morbiditätsbezogene Regelleistungsvolumen. Perspektive einer angekündigten Revolution. *Gesundheits- und Sozialpolitik* 2003;11-12:8-23.
- von Stillfried D. Das Ende der Budgets rückt näher. *Dtsch Arztebl* 2006;103:B507-B509.
- von Stillfried D, Gramsch E. Morbiditätsorientierung der vertragsärztlichen Vergütung. Jetzt müssen die Weichen für eine Neuordnung der vertragsärztlichen Vergütung neu gestellt werden. *Gesundheits- und Sozialpolitik* 2003;1-2:44-51.
- von Stillfried D, Ryll A. Umsetzbarkeit morbiditätsbezogener Regelleistungsvolumen in der vertragsärztlichen Versorgung - Erste empirische Ergebnisse. *Gesundheits- und Sozialpolitik* 2004;11-12:36-50.
- Weed LL. Medical records that guide and teach. *N Engl J Med* 1968;278:652-657.
- Weiner JP, Starfield BH, Steinwachs DM, et al. Development and application of a population-oriented measure of ambulatory care case-mix. *Med Care* 1991;29:452-472.
- Weiner JP, Tucker AM, Collins AM, et al. The development of a risk-adjusted capitation payment system: the Maryland Medicaid model. *J Ambul Care Manage* 1998;21:29-52.
- Welch WP. Outpatient encounter data for risk adjustment: strategic issues for Medicare and Medicaid. *J Ambul Care Manage* 2002;25:1-15.
- Wilchesky M, Tamblyn RM, Huang A. Validation of diagnostic codes within medical services claims. *J Clin Epidemiol* 2004;57:131-141.
- Wittchen HU, Glaesmer H, Marz W, et al. Cardiovascular risk factors in primary care: methods and baseline prevalence rates--the DETECT program. *Curr Med Res Opin* 2005;21:619-630.
- Wolf-Maier K, Cooper RS, Banegas JR, et al. Hypertension prevalence and blood pressure levels in 6 European countries, Canada, and the United States. *JAMA* 2003;289:2363-2369.
- Zentralinstitut für die kassenärztliche Versorgung in der Bundesrepublik Deutschland. ZI-Panel zur Morbiditätsanalyse: Basisstatistik: Die 50 häufigsten Diagnosen von Patienten, Kontakthäufigkeit und angeforderter Leistungsbedarf in Punkten 1. Quartal. Köln: Zentralinstitut für die kassenärztliche Versorgung in der Bundesrepublik Deutschland, 2003a.
- Zentralinstitut für die kassenärztliche Versorgung in der Bundesrepublik Deutschland. ZI-Panel zur Morbiditätsanalyse: Basisstatistik: Die 50 häufigsten Diagnosen von Patienten, Kontakthäufigkeit und angeforderter Leistungsbedarf in Punkten 1. Quartal. Köln: Zentralinstitut für die kassenärztliche Versorgung in der Bundesrepublik Deutschland, 2006a.

Zentralinstitut für die kassenärztliche Versorgung in der Bundesrepublik Deutschland. ADT-Panel des Zentralinstituts 1.-4. Quartal 2002: Die 50 häufigsten ICD-10-Schlüsselnummern nach Fachgruppen. Köln: Zentralinstitut für die kassenärztliche Versorgung in der Bundesrepublik Deutschland, 2003b.

Zentralinstitut für die kassenärztliche Versorgung in der Bundesrepublik Deutschland. ADT-Panel des Zentralinstituts Jahr 2005: Die 50 häufigsten ICD-10-Schlüsselnummern nach Fachgruppen. Köln: Zentralinstitut für die kassenärztliche Versorgung in der Bundesrepublik Deutschland, 2006b.

Zhao Y, Ash AS, Ellis RP, et al. Predicting pharmacy costs and other medical costs using diagnoses and drug claims. *Med Care* 2005;43:34-43.

Ziegler A, Lange S, Bender R. Überlebenszeitanalyse: Die Cox-Regression. *Dtsch Med Wochenschr* 2004;129:T1-3.

Zwingmann C, Wirtz M. [Regression to the mean]. *Rehabilitation (Stuttg)* 2005;44:244-251.