DANISH HEALTH DATA AUTHORITY

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Data Warehouse, Documentation and Casemix

Virtual activity in DRG – New way of handling Telemedicine in the Danish Grouping Logic

In recent year, an increasing and more widespread use of telemedicine has been introduced into the Danish health care system. Therefore, the Danish Health Data Authority and the regions of Denmark has developed a model, which allows physical contacts and virtual contacts, i.e. telemedicine to be grouped in the same way within the Danish casemix logic. This change will be implemented in 2023.

Method

The general idea of the change is the virtual contacts should group to casemix groups in the same way as physical contacts. However, virtual contacts should not in all cases be considered the same as physical contacts.

Within the Danish casemix logic there are multiple types of contacts[1] such as procedure without physical attendance and virtual contacts, which often constitute what we consider telemedicine.

For procedures without physical attendance a limited number of casemix groups is created to contain only this type of activity. In addition, there are a few other groups that can also contain this type of activity. Therefore, only selected procedures will be grouped into a tariff-bearing group.

Virtual contacts should group as physical contacts within the casemix logic, but only to certain casemix groups. In order to ensure this, a predetermined list of approximately 80 casemix groups has been agreed upon in which virtual and physical are interchangeable.

[1] Type 1: Diagnosis reporting
Type 2: Procedure without physical attendance
Type 3: Virtual contactsirtual contacts
Type 6: Own courses
Type 8: In-home contact
Type 9: Other

The list of groups will be revised annually.

Results
This method poses a fundamental change in the hierarchy of the casemix logic. Hence, the contact types; diagnosis reporting, procedures without physical attendance, and virtual contacts are gathered at the top of the casemix logic.

Conclusion
The implementation of the changes in the casemix logic, as outlined above, will move the casemix system towards a more appropriate grouping of the reported activity in the National Patient Register. At the same time, the list of predetermined casemix groups, in which virtual activity is allowed to group, will help ensure transparency regarding which casemix groups can contain virtual contacts.