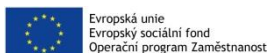


IFHIMA, DVMD, Clinical Documentation and Coding in Germany

Haendel Angelika, M.A.

KlasifiKon 2018



FRIEDRICH-ALEXANDER
UNIVERSITÄT
ERLANGEN-NÜRNBERG
MEDIZINISCHE FAKULTÄT



IFHIMA
International Federation of
Health Information Management Associations

Introduction

Universitätsklinikum Erlangen



- **Academic Hospital**
- **Founded 1815, situated in Bavaria**
- **Part of the European Metropolitan Region Nuremberg**
- **42 departments, 7 institutes, 25 multidisciplinary**
- **1.368 beds**
- **Approx. 63.000 inpatients & 475.000 outpatients per year**
- **Quality Management Certification according DIN EN ISO 9001:2015**



IFHIMA, DVMD, clinical documentation and coding in Germany

Outline

- I. German Health Care System – Basic principles**
- II. Clinical Documentation and Coding in Germany using the University Hospital of Erlangen-Nuremberg as example
- III. DVMD
- IV. IFHIMA – International Federation of Health Information Management Associations

The German Health Care System

Basic principles

- **Ministry of Health sets general rules, details regulated by self-governing bodies (they define prices, standards, benefits etc.)**
- **Decentralized system with private practice physicians providing ambulatory care**
- **Independent, mostly non-profit hospitals providing the majority of inpatient care**
- **Strict separation of the sectors**



Bundesministerium
für Gesundheit

The German Health Care System

Basic principles

- Health insurance is mandatory for the whole population in Germany
- Approx. 90% of the population are covered by one of currently around 130 public non-profit “sickness funds” at common rates for all members
- 10% are privately insured



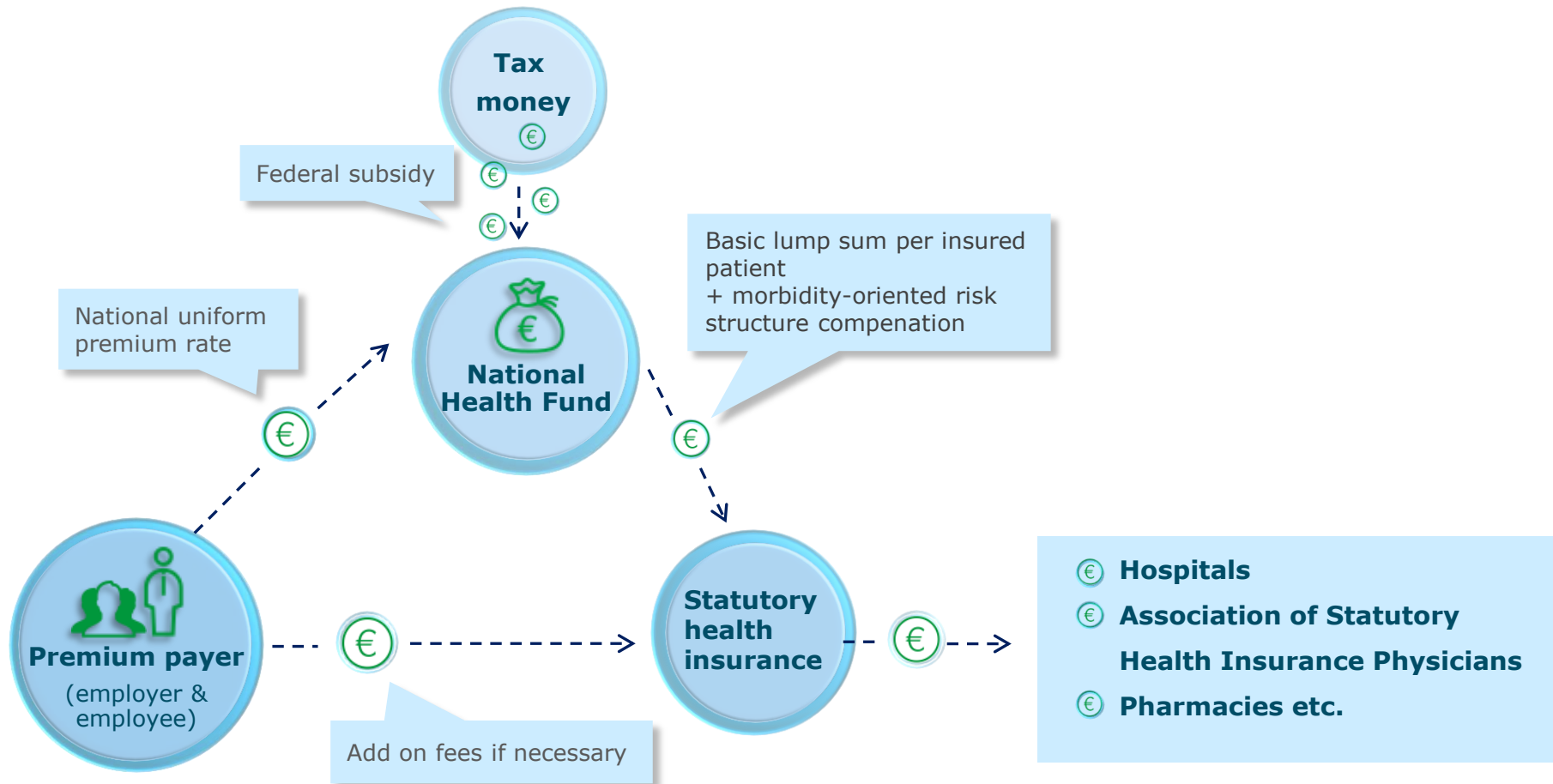
Statutory Health Insurance Funds



88 Company health insurance funds
Employees > 1.000



Financing of the Statutory Health Insurance



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Documentation obligation

Federal Medical Association



Regulations of the federal medical association (Bundesärztekammer)

§10

(1) Medical records keeping: memory aid and as proof of the measures taken

(2) Patients have the right to inspect and copy the documents

(3) Legal obligation to preserve medical records: 10 years

(4) The documents/records must be stored secure; transmitted only with written consent of the patient

(5) Special data protection and privacy measures for patient records

EU-Regulation: DSGVO –
GDPR (General Data
Protection Regulation)



BEKANNTMACHEN DER HERAUSGEBER

BUNDESÄRZTEKAMMER
Bekanntmachungen

**(Muster-)Berufsordnung für die in Deutschland
tätigen Ärztinnen und Ärzte**
– MBO-Ä 1997 –¹⁾
in der Fassung der Beschlüsse des 121. Deutschen Ärztetages 2018 in Erfurt

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| § 2 Allgemeine ärztliche Berufspflichten | | § 18a Anündigung von Berufsausübungsgemeinschaften und sonstigen Kooperationen |
| § 3 Unvereinbarkeiten | | § 19 Beschäftigung angestellter Praxisärztinnen und -ärzte |
| § 4 Fortbildung | | § 20 Vertretung |
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| | | § 23 Ärztinnen und Ärzte im Beschäftigungsverhältnis |
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| | | § 23c Beteiligung von Ärztinnen und Ärzten an sonstigen Partnerschaften |
| | | § 23d Praxisverbund |
| II. Pflichten gegenüber Patientinnen und Patienten | | § 24 Verträge über ärztliche Tätigkeit |
| § 7 Behandlungsgrundsätze und Verhaltensregeln | | § 25 Ärztliche Gutachten und Zeugnisse |
| § 8 Aufklärungspflicht | | § 26 Ärztlicher Notfalldienst |
| § 9 Schweigepflicht | | |
| § 10 Dokumentationspflichten | | |
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| § 12 Honorar und Vergütungsabreden | | § 27 Erlaubte Information und berufswidrige Werbung |
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| § 13 Besondere medizinische Verfahren | | § 29 Kollegiale Zusammenarbeit |
| § 14 Erhaltung des ungeborenen Lebens und Schwangerschaftsabbruch | | § 29a Zusammenarbeit mit Dritten |
| § 15 Forschung | | |
| § 16 Bestand für Sterbende | | 4. Wahrung der ärztlichen Unabhängigkeit bei der Zusammenarbeit mit Dritten |
| IV. Berufliches Verhalten | | § 30 Ärztliche Unabhängigkeit |
| 1. Berufsausübung | | § 31 Unerlaubte Zuweisung |
| § 17 Niederlassung und Ausübung der Praxis | | § 32 Unerlaubte Zuwendungen |
| | | § 33 Zuwendungen bei vertraglicher Zusammenarbeit |

¹⁾ Bei der hier abgedruckten „Berufsordnung“ handelt es sich um die (Muster-) Berufsordnung, wie sie von dem 100. Deutschen Ärztetag beschlossen und vom 103. Deutschen Ärztetag, 105. Deutschen Ärztetag, 108. Deutschen Ärztetag, 107. Deutschen Ärztetag, 114. Deutschen Ärztetag, 118. Deutschen Ärztetag sowie 121. Deutschen Ärztetag novelliert wurde. Rechtsanwendung entfaltet die Berufsordnung, wenn sie durch die Kammerversammlungen der Ärztekammern als Geltung beschlossen und von den Aufsichtsbehörden genehmigt wurde.

A 1 Deutsches Ärzteblatt | 15. Juni 2018 | DOI: 10.3238/arztebl.2015.mbo_gdpr2018

- **Is a subordinate authority of the Federal Ministry of Health**
- **Core tasks of DIMDI:**
 - **Publication of official classifications for the German speaking countries:**
 - ICD-10-WHO for encoding of causes of death
 - ICD-10-GM (German Modification)
 - ICD-O-3
 - ICF
 - OPS for surgical and other procedures
 - **Maintenance of medical terminologies**
 - **Drug Information System**
 - **Medical Devices Information System**
 - **Information System for Health Care Data (data transparency)**
 - **Information System on Health Technology Assessment (HTA)**
 - **Supplementary databases for public research**

Coding in Germany

- 2000: Health Care Reform
- 2003: Health Care Modernization Act:
 - Methodical Coding of medical documentation
 - Basis for reimbursement of inpatients
 - Introduction of the G-DRG-System
German Diagnosis Related Groups
 - „Institut für Entgeltsysteme (InEK)“
Institute for the Hospital Remuneration System GmbH
 - Shareholders of InEK:
self-governing partners of the German health care
 - German Hospital Federation
 - National Association of Statutory Health Insurance Funds
 - Private Health Insurance Association



Brief History of DRG Implementation in Germany

- **Until 2003:**
Reimbursement of hospital treatment was based on fixed daily rates
- **Since 2004:**
Reimbursement for hospital treatment has been based on fee per case based according to Diagnosis-Related Groups (DRG).

German DRG-System

- German-DRG (G-DRG); adapted from the Australian DRG-System (AR-DRG)
- DRG catalogue:
2017: 1.255 DRG and 191 additional charges
(2016: 1.220 DRG and 179 additional charges)
- DRG cost calculation
Currently 242 calculation hospitals including 10 university hospitals

From medical documentation to DRG

- University Hospital Erlangen-Nuremberg

Patient's admission

1

Registration of patient's master data



On the ward

2

Recording of admission diagnosis by the ward physician



In the operation theatre

3

The operation diagnosis is confirmed and recorded by the surgeon



On the ward

4

Recording of discharge diagnosis, main- and secondary diagnoses by the physician



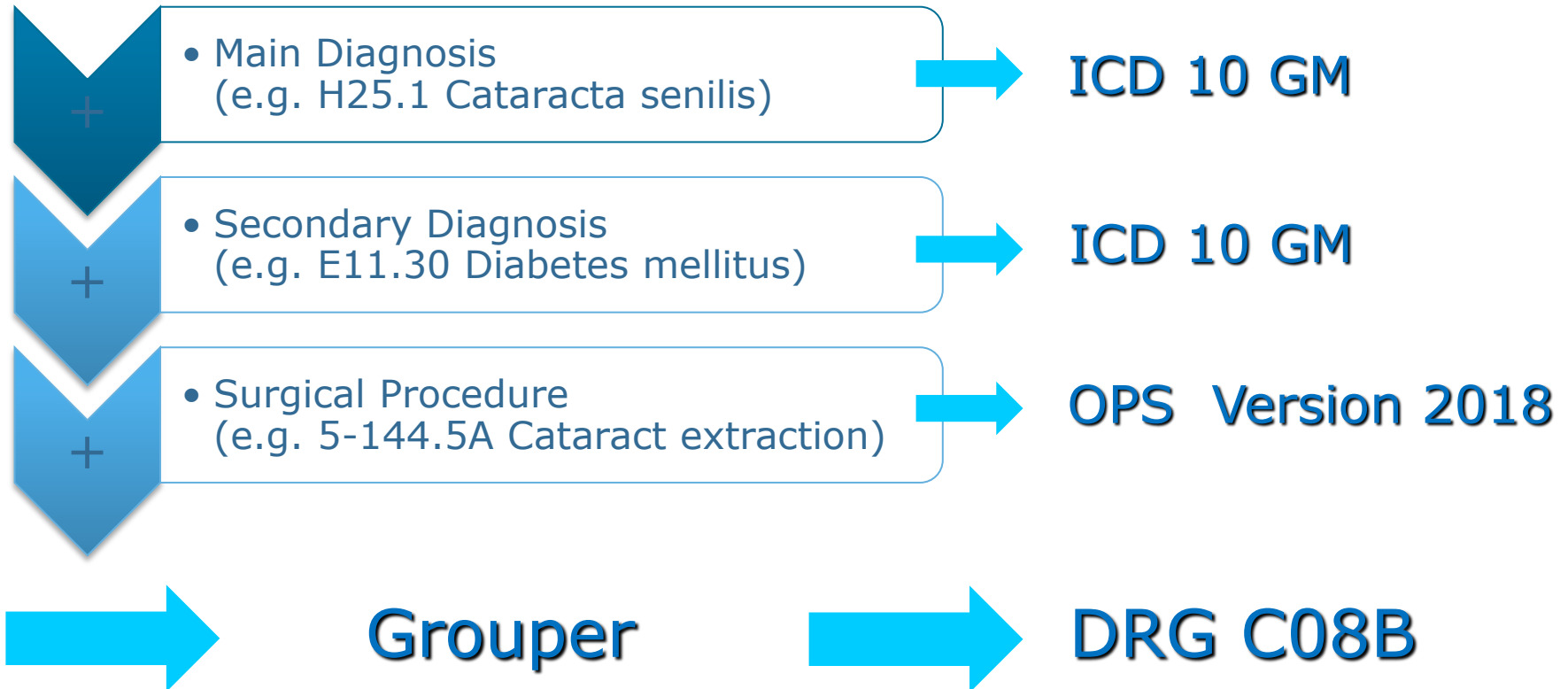
DRG Controlling & Grouping

5

Check of completeness, consistency, plausibility and correctness generation of DRG



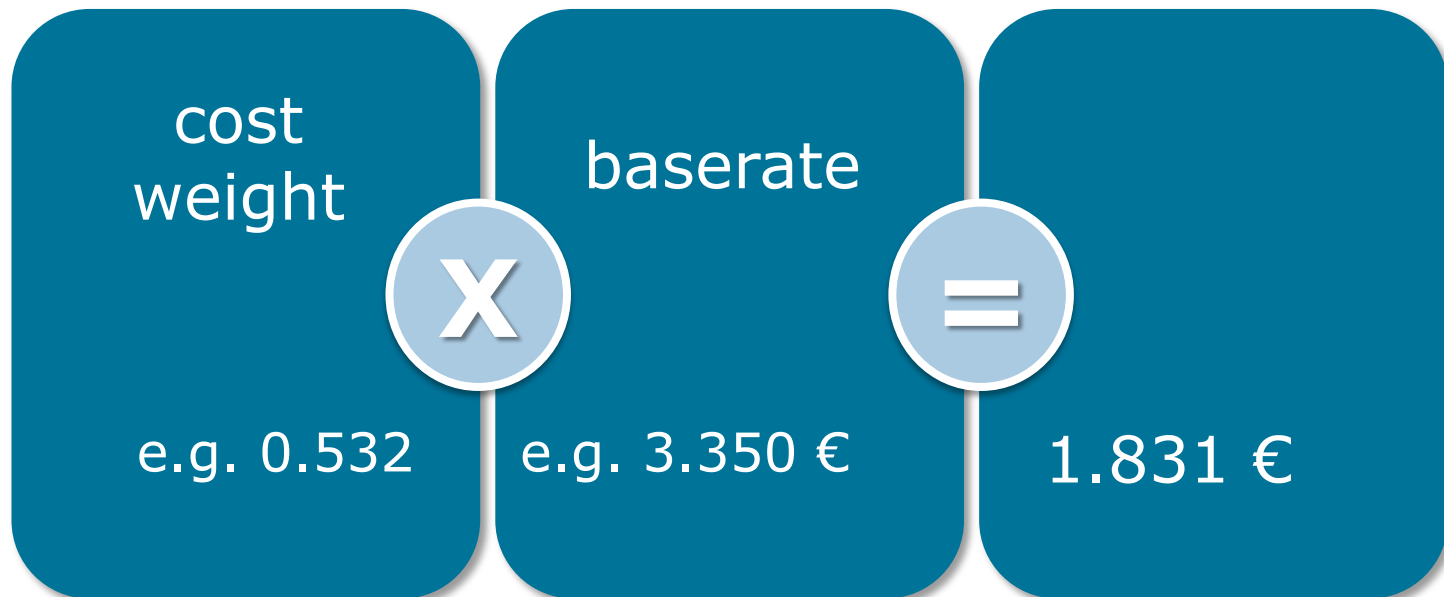
DRG workflow Germany



DRG workflow Germany

Baserate 2018:
~3.350 €
~ 82.425 CZK

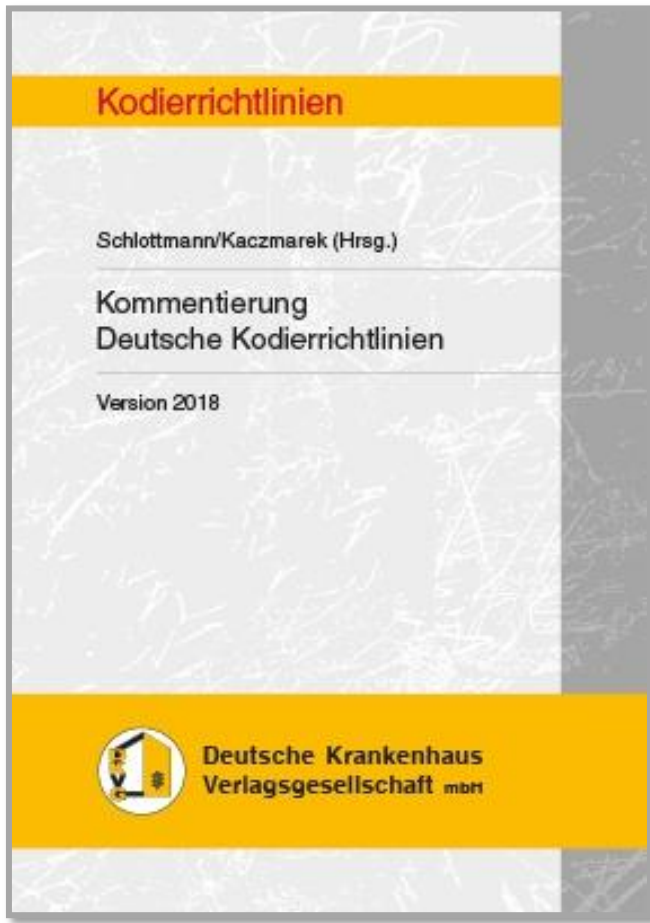
DRG C08B



1 DRG per inpatient stay

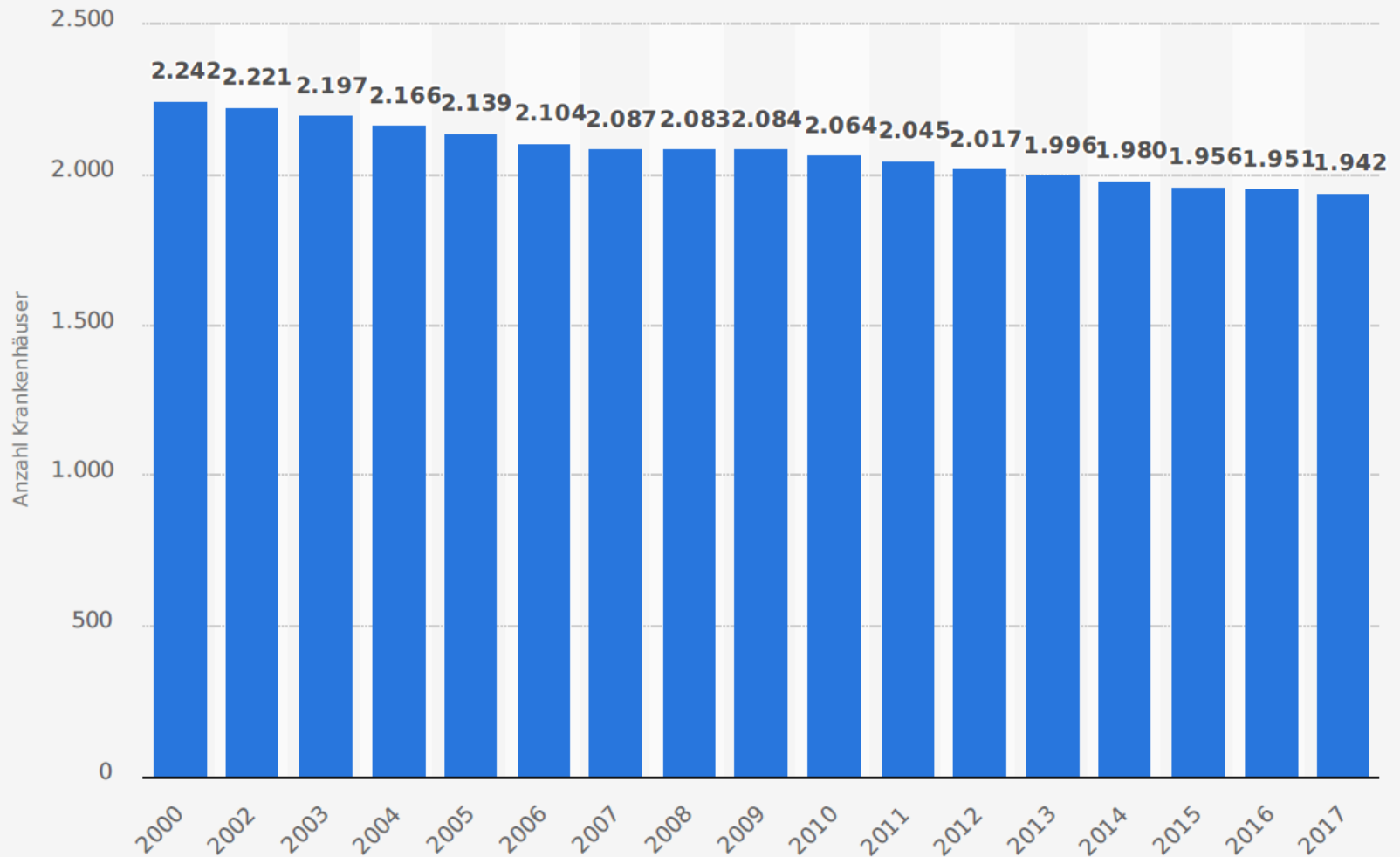


General and special coding guidelines

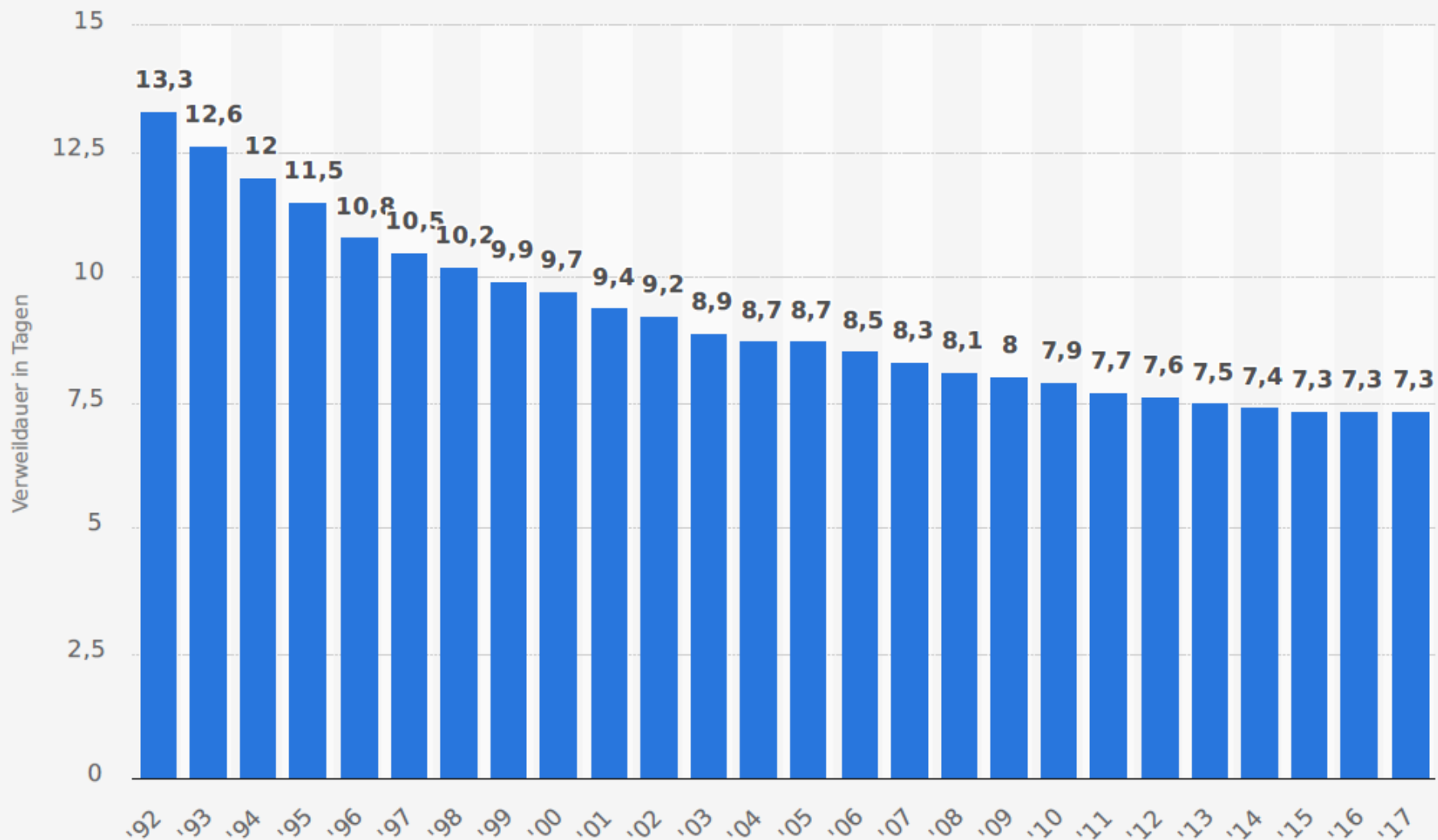


- **Main-Diagnosis**
= reason for the hospital admission
- You must flag one diagnosis as the main diagnosis
- The main diagnosis must never be a „Z“-Diagnosis (condition after)
- **Secondary diagnosis**
a disease that either occurs at the same time at the primary diagnosis or develops during hospitalization. Any of the following factors are required:
 - therapeutic actions
 - diagnostic measures
 - increases care / nursing

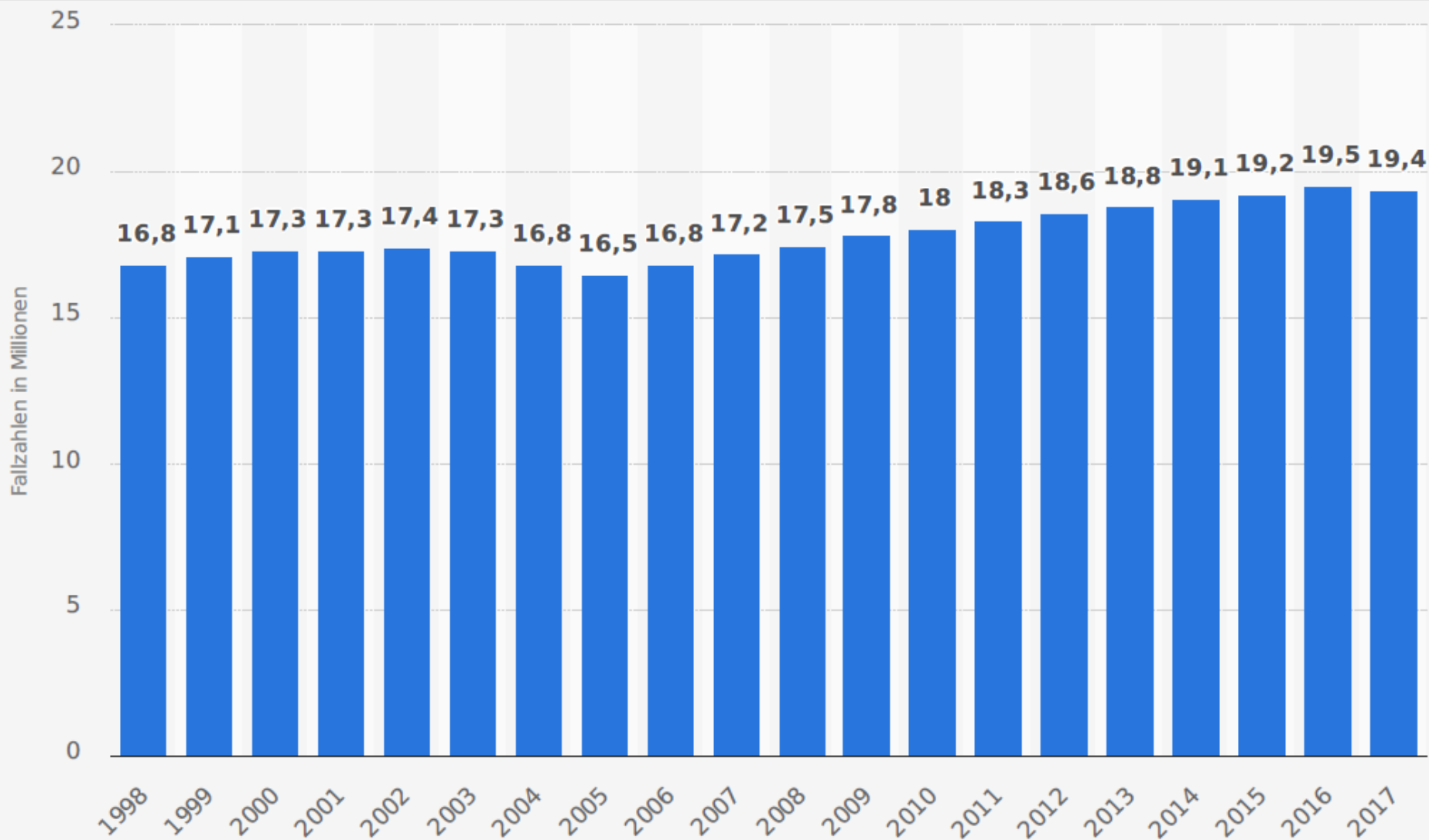
Number of hospitals in Germany (2000-2017)



Average length of stay in German hospitals (1992-2017)



Number of cases treated in German hospitals (1998-2017)



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DVMD

www.dvmd.de

Der Fachverband für Dokumentation und Informationsmanagement in der Medizin

- German HIM association
- Founded 1972, about 1,000 members
- Common Association Journal “mdi” together with Medical Informatics Association (BvMI)





Health Information Management in Germany

2-year full time education

3-year full time education

Bachelor-Degree

Master-Degree

Certificate "Medical
Documentation"



**Certificate from GMDS & DVMD
Equivalent knowledge
(e.g. for career changers)**



Health Information Management in Germany

- **40% are employed in hospitals or university research institutes**
- **40% are employed in pharmaceutical companies**
- **10% in cancer registries or comprehensive cancer centers**
- **5% work in the public health sector**
- **5% are self employed (free lancer)**

Position paper of the German HIM association DVMD:



DVMD Deutscher Verband
Medizinischer Dokumentare e.V.



Empfehlungen für den Einsatz von Dokumentaren im DRG-Umfeld

Durch die Einführung eines weitgehend pauschalisierten Abrechnungssystems für die stationäre Akutversorgung auf Basis von Diagnosegruppen wird der klinischen Dokumentation eine erhöhte Bedeutung als bisher zukommen. Eine möglichst vollständige Erhebung von Krankheits- und Leistungsdaten der behandelten Patienten stellt an die an Behandlung und Pflege beteiligten Berufsgruppen die Forderung einer lückenlosen und detaillierteren Dokumentation.

Recommendations in the use of Health Information Manager/Medical Documentalists in the field of DRG coding





Classifications and Health statistics

DVMD Spring Symposium
March, 2nd 2018,
Duisburg, Germany



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IFHIMA

International Federation of Health Information Management Associations

- IFHIMA is the global organization for Health Information Management - established in 1968
- It is a forum for exchange of Information on Health Information among the member nations
- As an umbrella organization IFHIMA acts as “the global voice” of national HIM associations and individual members worldwide

IFHIMA RELATIONSHIP



World Health Organization

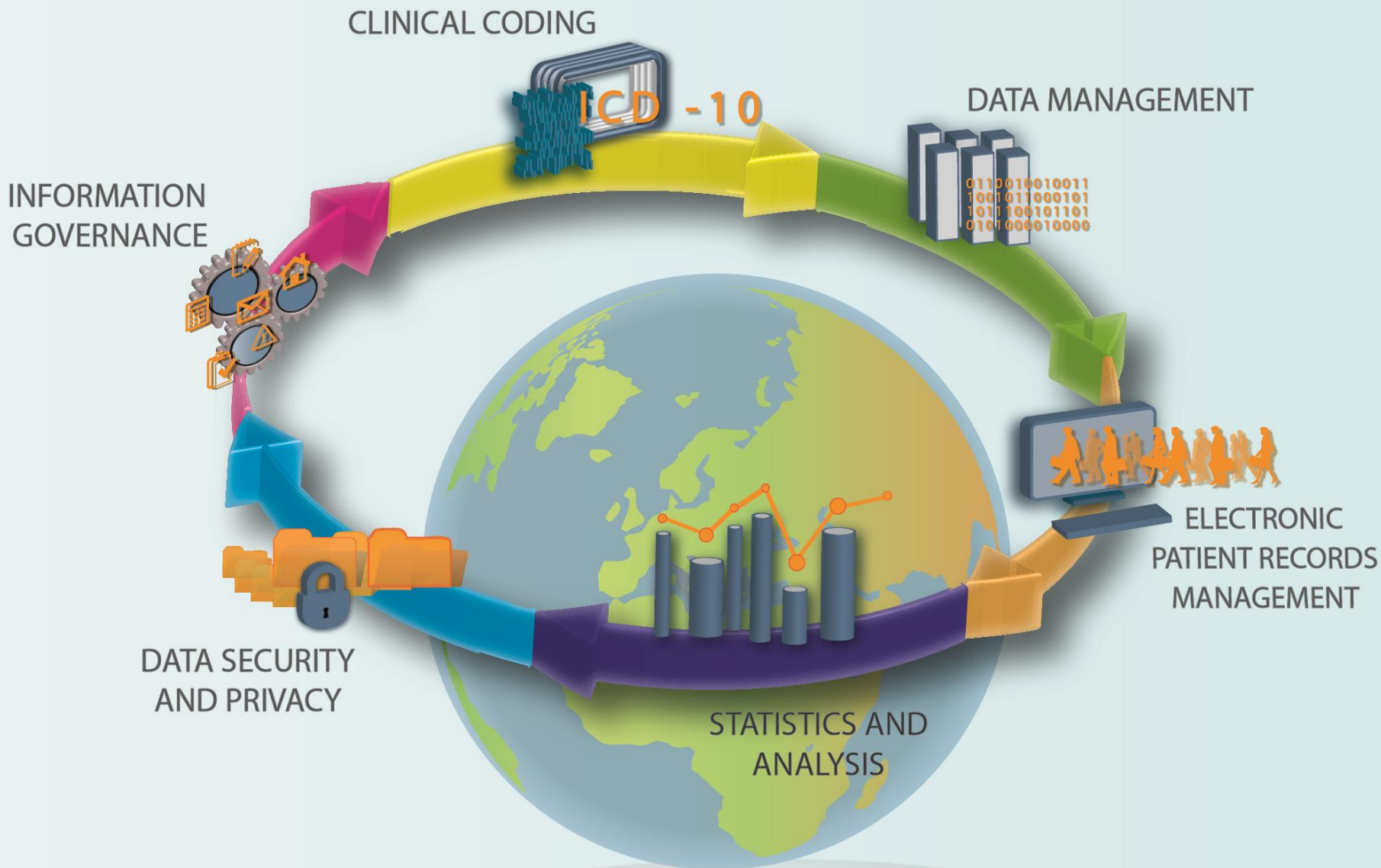


International Medical
Informatics Association



European Federation for
Medical Informatics

HEALTH INFORMATION MANAGEMENT



IFHIMA MISSION & OBJECTIVES



www.ifhima.org

- To support the development, use and dissemination of WHO classifications such as ICD, ICF etc. around the world
- To provide best practices in Health Information Management
- To elaborate international standards in Health Information Management
- To support developing countries building up formalized training and education programs
- To raise the profile of Health Information Management Professionals globally

23 Member Nations:

Americas

- Barbados
- Canada
- USA
- Jamaica

Europe

- Germany
- Israel
- Italy
- Spain
- The Netherlands
- United Kingdom

Eastern Mediterranean

- Saudi Arabia

Africa

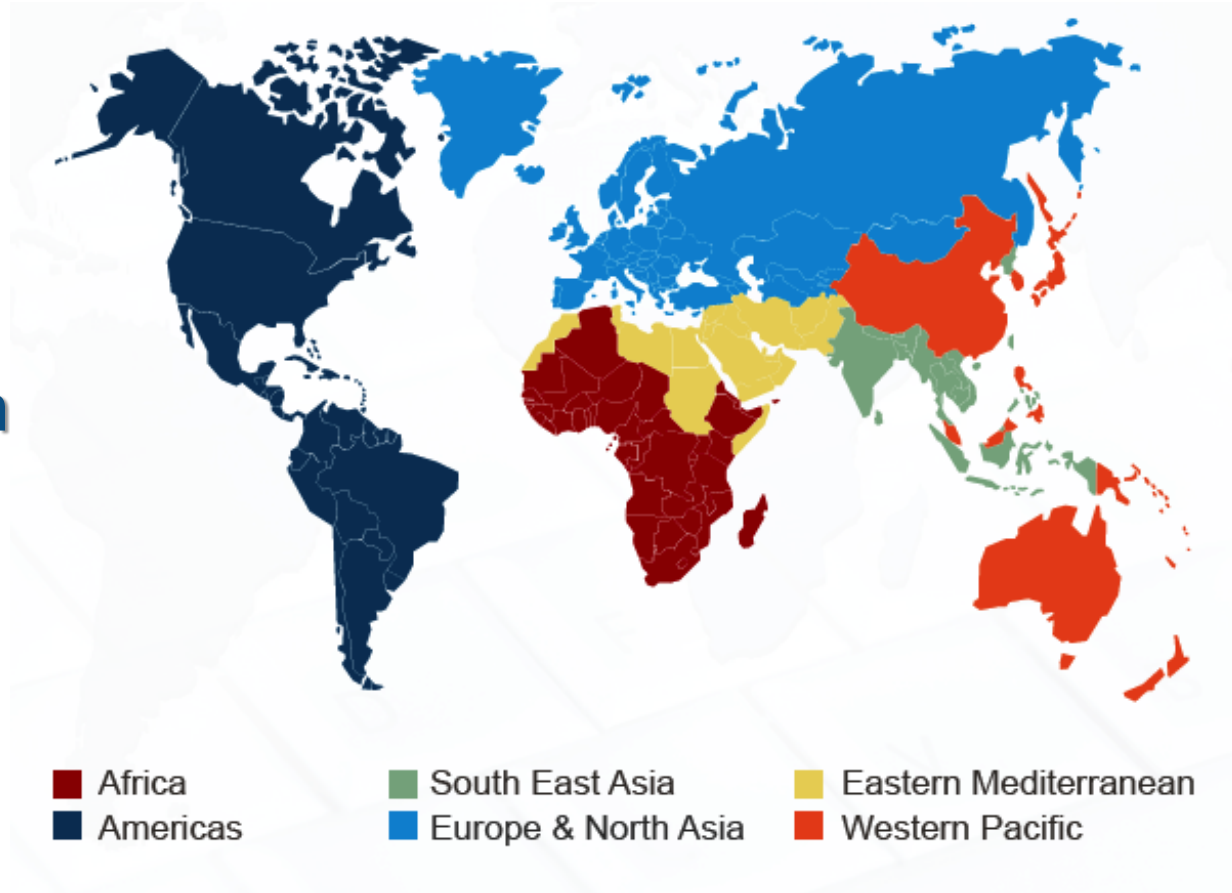
- Kenya
- Nigeria
- Ghana
- Tanzania
- Botswana

South East Asia

- Indonesia
- India

Western Pacific

- Australia
- China
- Japan
- Korea
- The Philippines

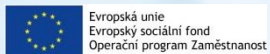


www.ifhima.org

IFHIMA Board 2016-2019



International Federation of Health Information Management Associations



IFHIMA
International Federation of
Health Information Management Associations

GHWC

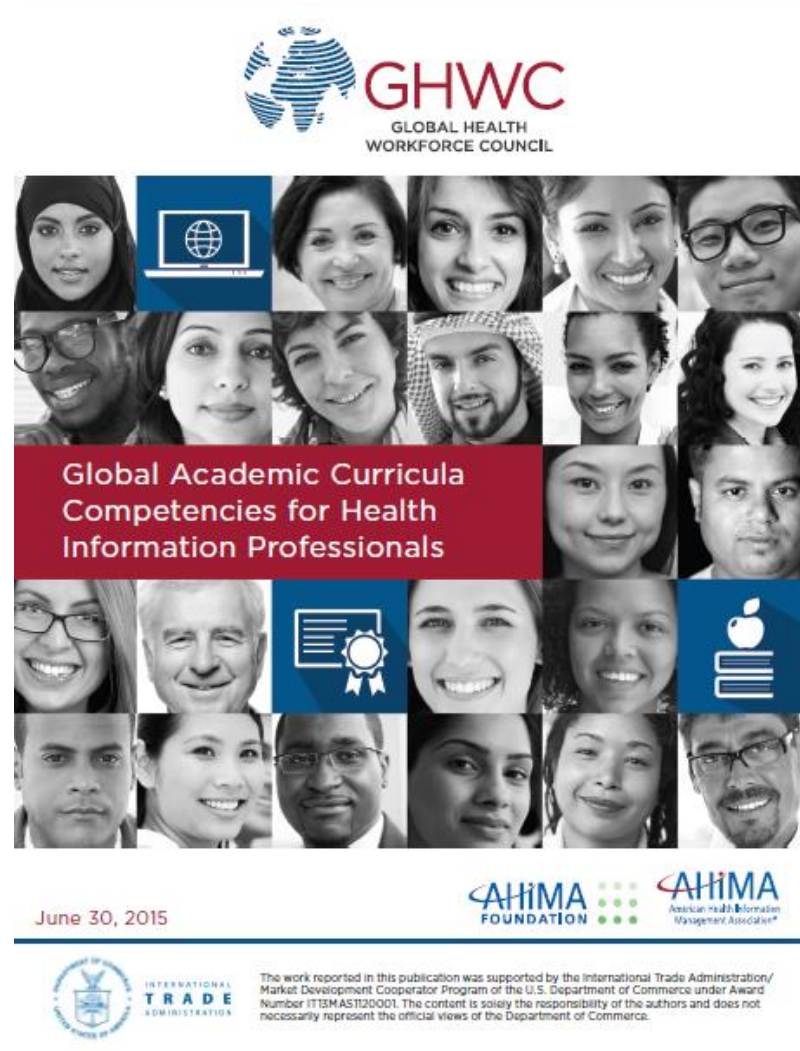
Global Health Workforce Council (GHWC)

13 appointed members from 11 different nations

Global academic curricula standard to guide educational programming and workforce training

www.ahima.org
(Global)

www.ifhima.org
(Resources and education)



GHWC

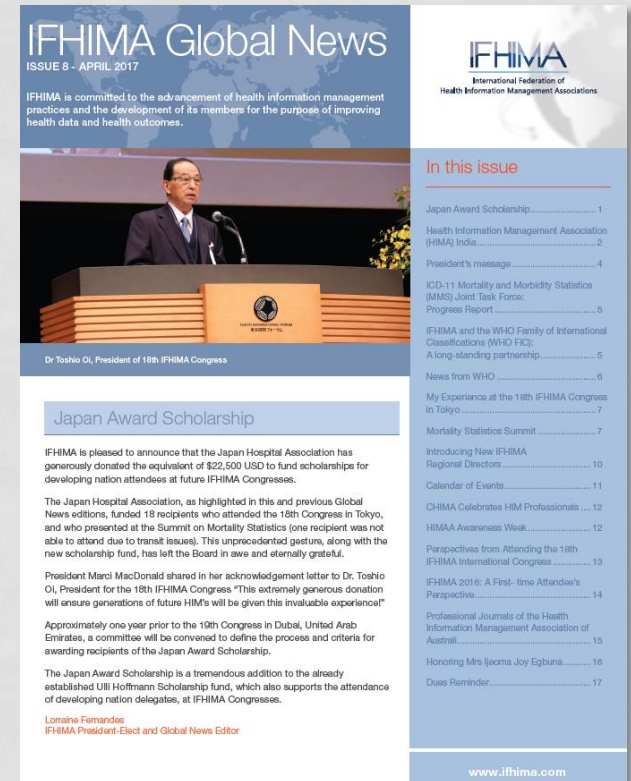
Open-source resource to facilitate the development of academic programs and workforce training for

- Health Information Manager (HIM)
- Health informatics (HI)
- Health Information and Communication Technologies (HIT)

The image shows the cover of a report titled "Global Academic Curricula Competencies for Health Information Professionals". At the top, the logo for the Global Health Workforce Council (GHWC) is displayed, featuring a globe icon and the text "GHWC GLOBAL HEALTH WORKFORCE COUNCIL". Below the logo is a collage of diverse individuals' faces, interspersed with icons representing a laptop with a globe, a certificate, and an Apple logo. A red banner across the middle of the collage contains the title "Global Academic Curricula Competencies for Health Information Professionals". At the bottom of the cover, the date "June 30, 2015" is listed on the left. On the right, the logos for the AHIMA Foundation and the American Health Information Management Association (AHIMA) are shown. At the very bottom, the International Trade Administration logo is on the left, and a disclaimer on the right states: "The work reported in this publication was supported by the International Trade Administration/Market Development Cooperator Program of the U.S. Department of Commerce under Award Number IT13MAST20001. The content is solely the responsibility of the authors and does not necessarily represent the official views of the Department of Commerce."

Key activities 2017 - 2017

- New website www.ifhima.org
- Learning Modules
- Whitepapers
- Global News





Coding-Training in Health Information Management Education - A Status Report of IFHIMA member nations

11-17 October 2014
Barcelona, Spain

Haendel, Angelika¹, Skurka, Margaret A¹, Yokobori, Yukiko¹, MacDonald, Marci¹,
Wissmann, Sallyanne¹, Ajayi, Wole¹, Fernandes, Lorraine¹, Dr. Conejo Gómez, Carolina¹,
Boo, Yookyung¹, Nicholson, Lorraine¹, Dr. Jakob, Robert²

¹IFHIMA, ²WHO

Poster-presentation

Poster Number
WHOICTS to insert





19TH IFHIMA INTERNATIONAL CONGRESS

18-21 NOVEMBER 2019 | DUBAI

EMPOWERING HIM PROFESSIONALS THROUGH A GLOBAL VOICE



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