

## Evaluation of the Anthroposophical Complex Number in the DRG System Evaluation of the additional fee ZE26

### Summary:

Pilot study at the community Hospital Havelhöhe with the option of expansion as a multicenter study with the Herdecke Hospital and the Öschelbronn Clinic.

Since 2005, complex anthroposophical treatments are listed in the DRG with their own surgical and procedural code (OPS, 8-975.3). If a total of 30 therapy hours are coded under this OPS, an additional fee "ZE-26" can be charged. The additional payment is negotiated individually by the hospitals and varies between the facilities.

Heinz et al (2013) conducted a cost analysis of the ZE26 supplement across three German hospitals and found that between 2.6 % and 19.8 % of patients received complex anthroposophic therapies (AT) covered by ZE26.

Cases receiving anthroposophic therapies had an average DRG cost weight (CMI) of 2.16 compared to cases without AT with a CMI of 0.83 (Heinz, 2013; p.3]. Cases with AT generated 2.6 times higher income. The main difference was identified as the duration of the stay and the resulting costs. The difference in costs was not due to the consumption of more resources per day, but exclusively to a longer stay. Patients with anthroposophical therapies had an average stay of 19.5 days, patients without AT stayed on average 14.7 days and the reference group had a stay of 10.9 days.

Current data show that the average length of stay of patients in hospitals continues to decline. Since 1991, the average length of stay has almost halved, averaging 7.5 days in 2015.

In view of the further decreasing length of stay of patients and the 30 therapy units coded in the DRG (30-45 min each), there is great interest, not only from an organisational and economic point of view, how effective and effective the therapeutic application of AT is for patients.

In the pilot phase of the project, qualitative interviews and focus groups with physicians, therapists and other actors of Havelhöhe Hospital are planned in addition to the development and testing of a standardized questionnaire for evaluating the ZE26 from the patient's point of view.

In a second phase, the analysis will be transferred to other hospitals using ZE26 encoded anthroposophical therapies and will be continued in a multicenter study.

### Reference:

Heinz, J, W Fiori, P Heusser, and T Ostermann. Cost Analysis of Integrative Inpatient Treatment Based on Drg Data: The Example of Anthroposophic Medicine. Evid Based Complement Alternat Med 2013 (2013): 748932.

---

#### *Principal investigator:*

Matthes, MD

#### *Project coordinator:*

Hinse

#### *Cooperation:*

Hospital Havelhöhe:

- Clinic for Anthroposophical Medicine

- Academic teaching hospital Charité

#### *Project status:*

pilot phase

#### *Funding:*

Software AG Foundation

---