

# Data Driven Use of Health Data:

**detecting indicators on quality issues and all kinds of waste** (*EHFCN waste typology Matrix*) **facing the need for cyber protection**

Webinar EHFCN  
Audit Hospitals Unit

2024-12-12

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# Agenda


- **Briefly**
  - How are our **data** flows in Belgium
  - **Data Security measures at NIHDI**
  - **Cloud initiatives: Modernization**
- **Detecting indicators of all kind of waste, as cases within audit hospital analyses**
  - Bariatric surgery
  - Deleverly by caeserian sectio
  - Hip fracture
  - Hip replacement
  - COVID - Intensive care

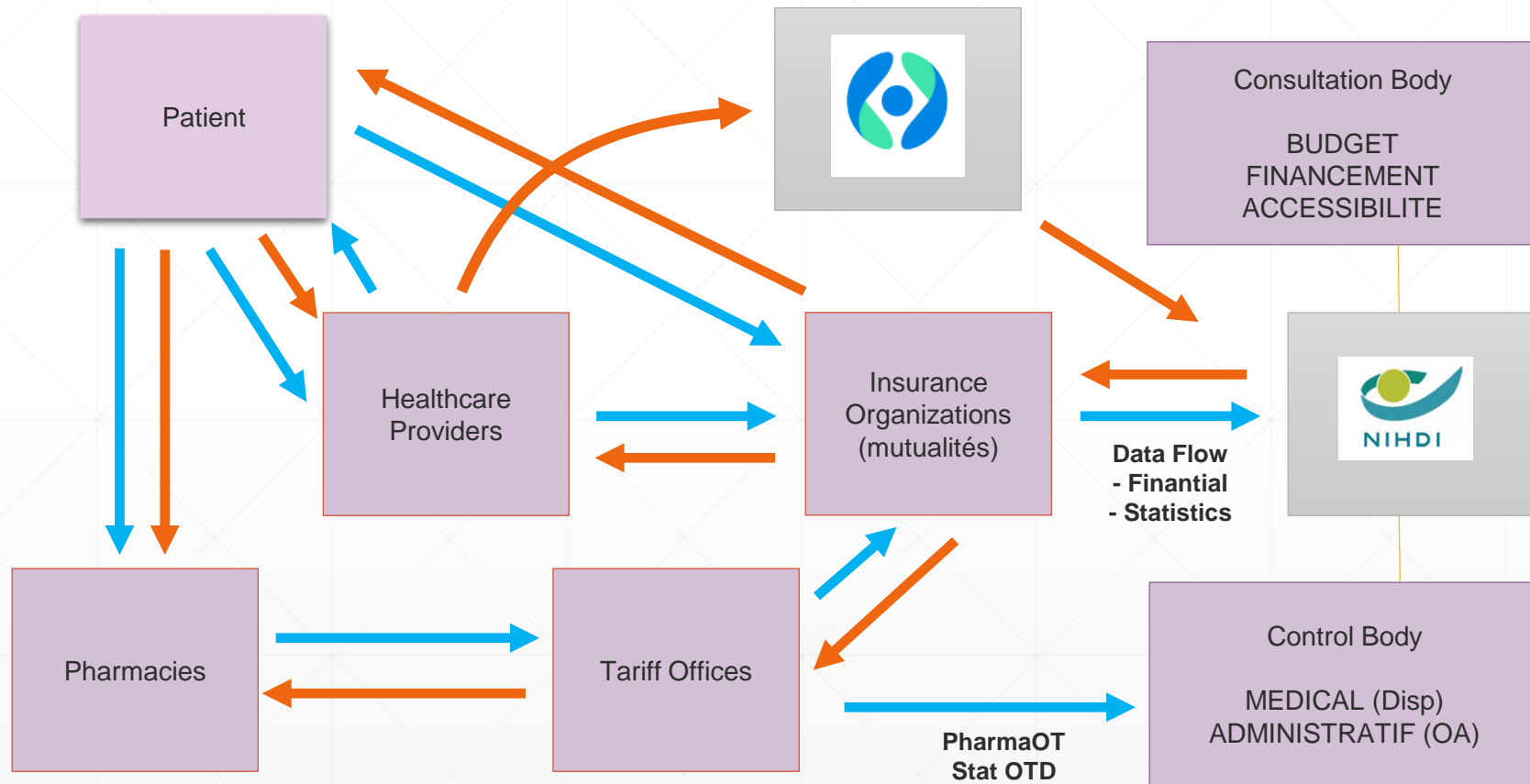
# How data flows in Belgium and data availability at NIHDI and Health Federal service

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# How data flows in Belgium ?

 Information flow (prescription, attestation, facturation, comptable, statistiques)

 Financial flow (paiements et remboursements)



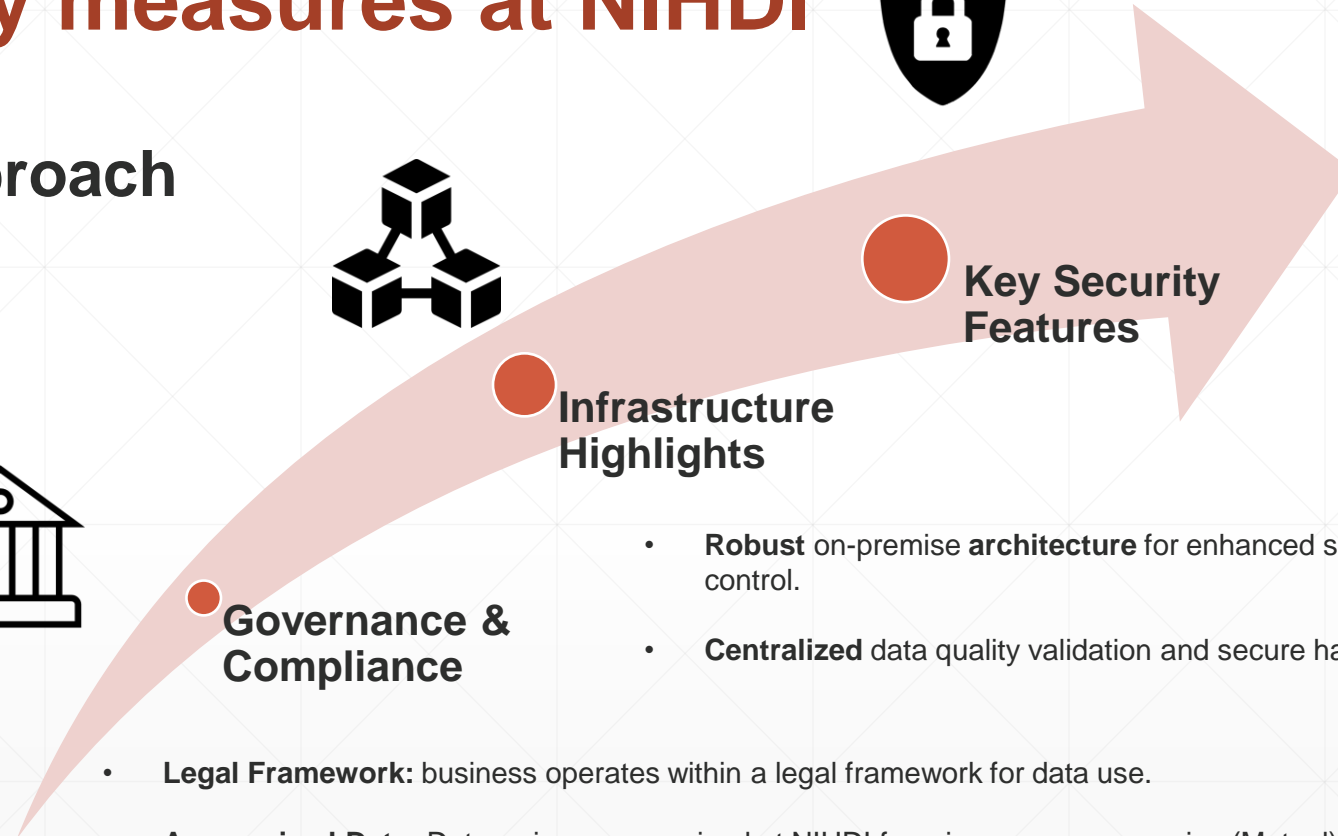
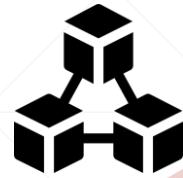
# **Data Security measures at NIHDI**

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# Security measures at NIHDI



## Multi-Layer Approach



### Governance & Compliance

- **Legal Framework:** business operates within a legal framework for data use.
- **Anonymized Data:** Data arrives anonymized at NIHDI from insurance companies (Mutual)
- **Adheres to GDPR** and other regulatory standards.
- **Continuous security** assessments to identify and mitigate risks

### Infrastructure Highlights

- **Robust** on-premise **architecture** for enhanced security and data control.
- **Centralized** data quality validation and secure handling (**Data Office**)

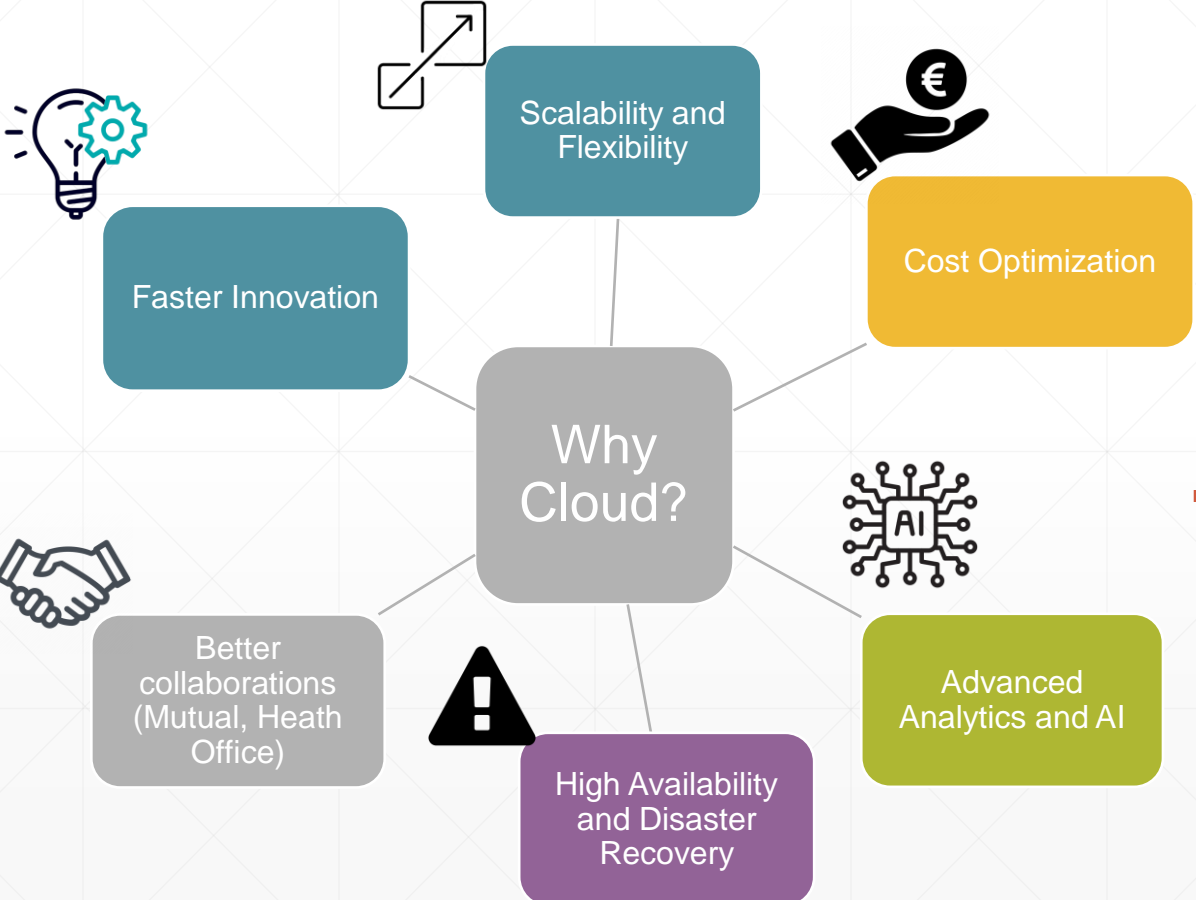
### Key Security Features

- **Role-Based Access Control (RBAC)**
- **Two-Factor Authentication (2FA):** Secure access via Itsme or identity card.
- **On-Premise Data Storage:** All data securely hosted within controlled infrastructure.

# Cloud initiatives: Modernization

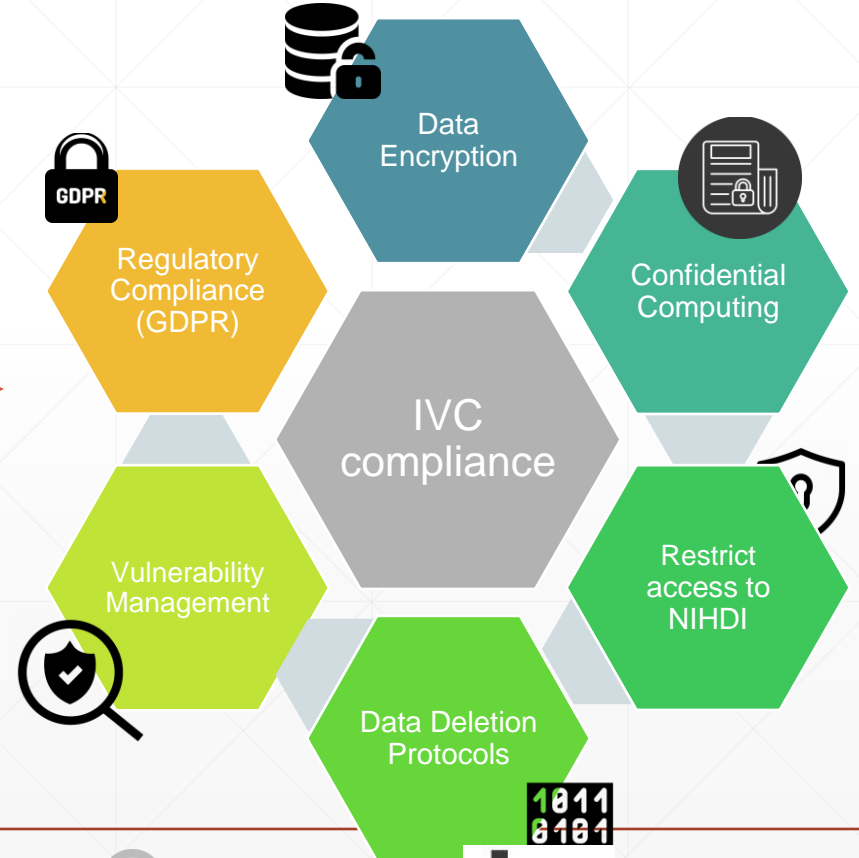
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# Cloud initiatives: Modernization



We Need →

Compliance with IVC (InformatieVeiligheidsComité)  
– Decision 5 March 2024

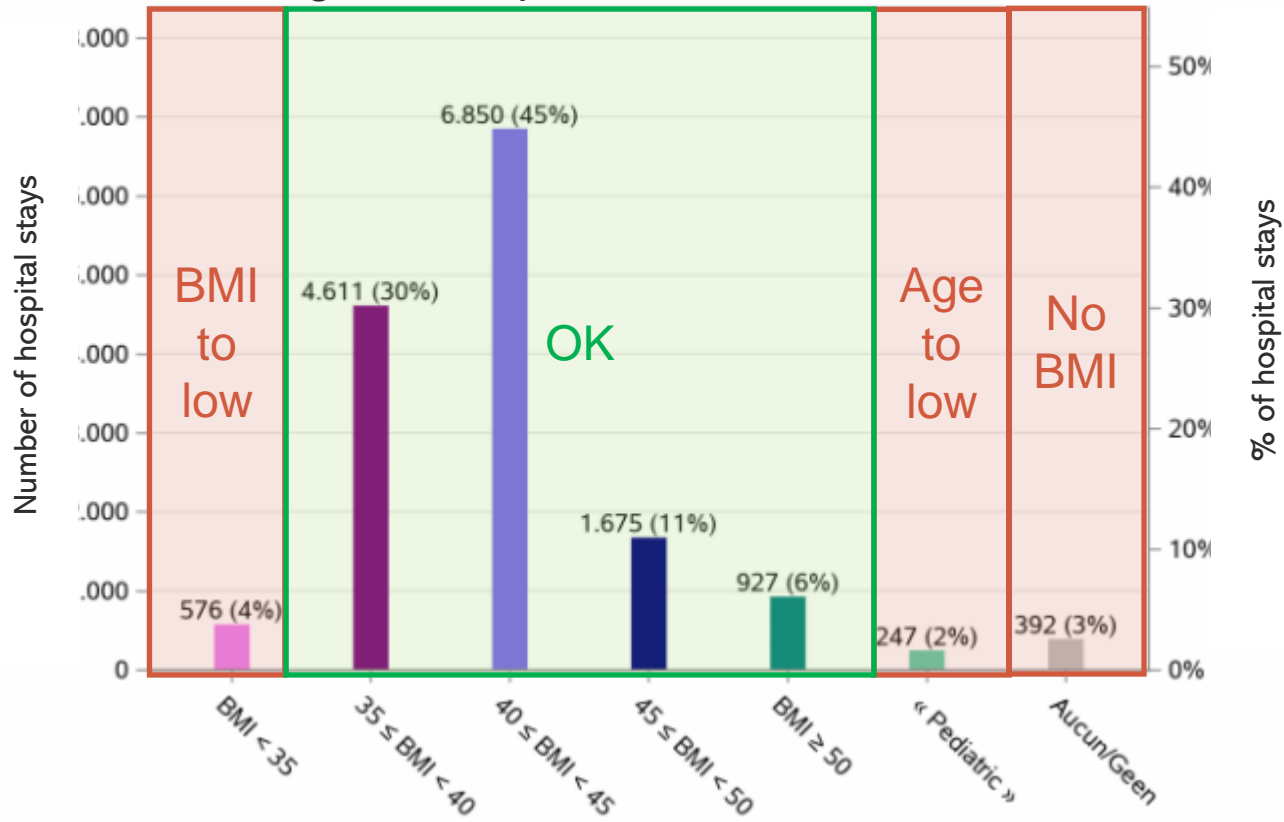




**Indicators of all kind of waste within  
audit hospital analyses**

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## Possible values of a mandatory secondary diagnosis required for reimbursement

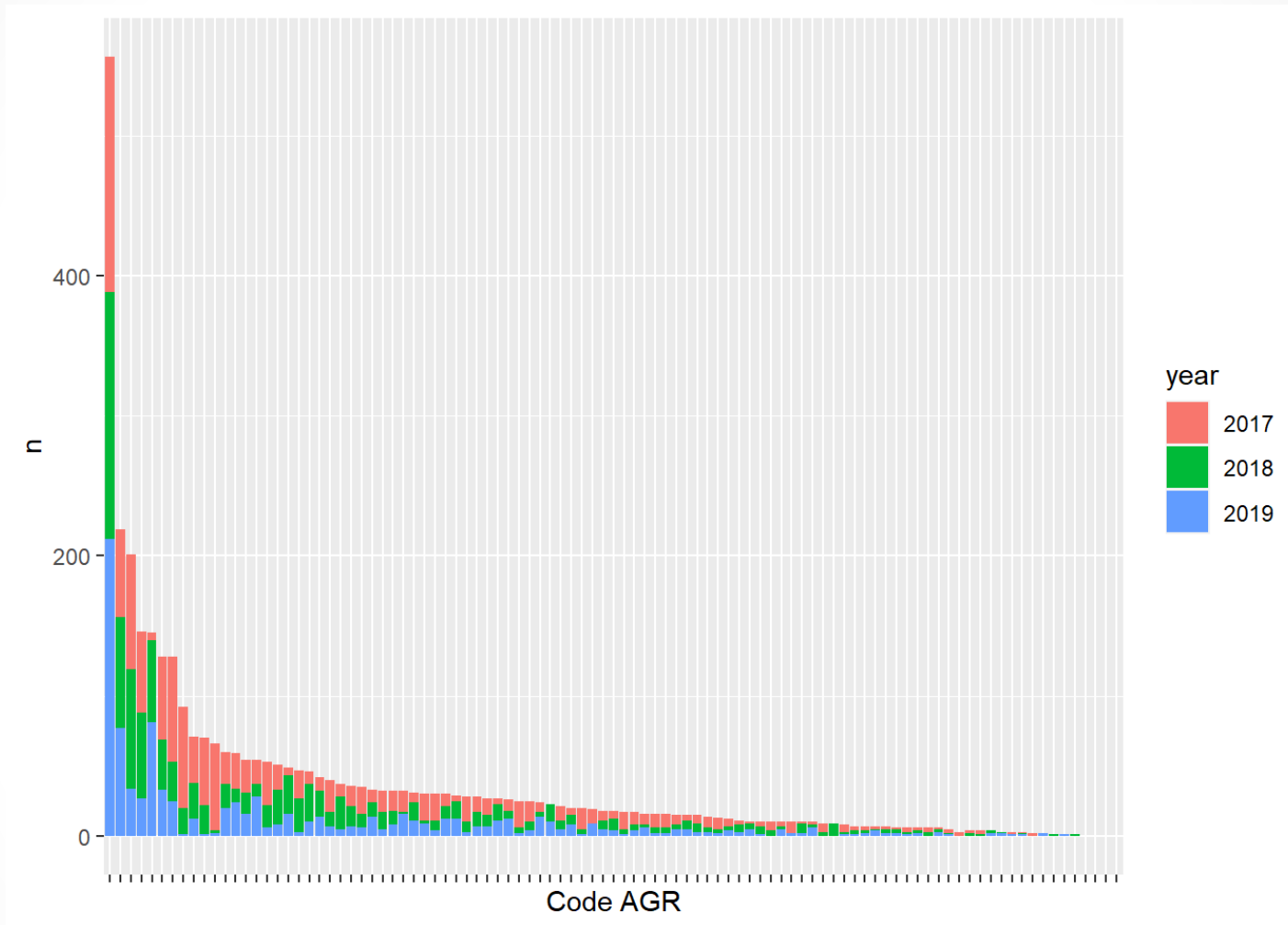


**Bariatric surgery, USE OF:**

**Billing data and  
Secondary ICD10-CM codes**

**INDICATOR FOR FRAUD,  
BARIATRIC SURGERY IS NOT  
REIMBOURED WHEN:**

- **BMI IS UNDER 35**
- **AGE IS UNDER 18**
- **NO BMI REGISTERED**



## Delivery by Caesarian Sectio, USE OF:

primary and secondary ICD10-CM and ICD10-PCS codes

### ERROR ANALYSIS ON STRAIGHT FORWARD CODING RULES:

- ALL CAESERIAN SECTIONS IN BELGIUM
- 3 YEARS
- 22 CODING ALGORITHMS



## Treatment Hip fracture, USE OF:

metadata from billing  
and coding

**NON COMPLIANCE WITH EBM  
GUIDELINES: HIP FRACTURES TO  
BE TREATED WITHIN FIRST 48 H  
OF HOSPITALISATION :**

- **ALL HIP FRACTURES IN  
BELGIUM**
- **2 YEARS**
- **TIME (METADATA FROM  
BILLING AND CODING)  
BETWEEN ADMISSION AND  
INTERVENTION**

## Effect of hospital policy on blood consumption

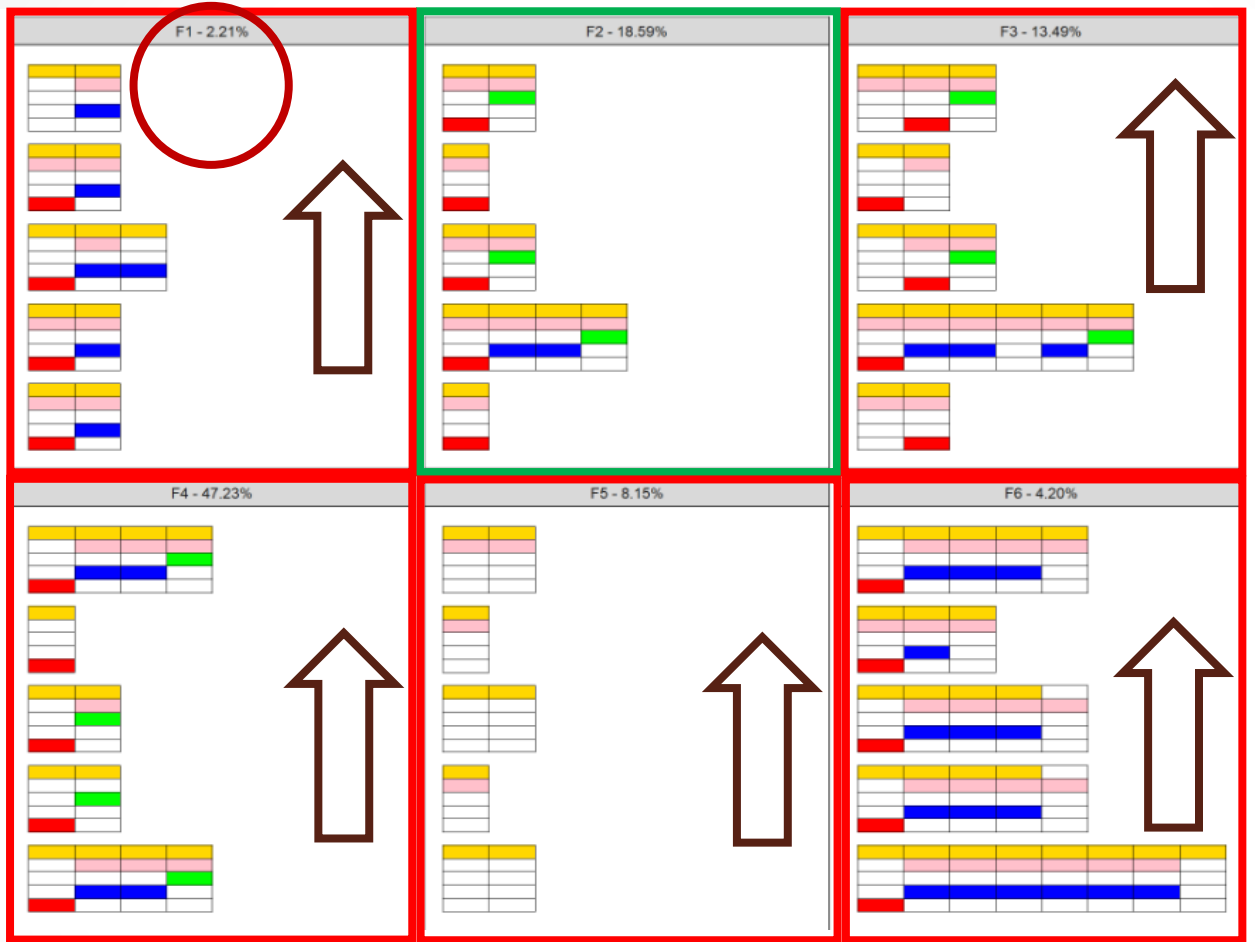
	Probabilty / quantity					Contrast		
	answer	probability	quantity	#patients	#HCl	contrast	Sign prob?	Sign quantity?
Tranexamic acid	yes	0,0359	1,98	38.812	63	Yes / no	**	
Tranexamic acid	no	0,0569	1,94	14.880	35			

Hip replacement, USE OF:

Data from online / onsite audit, bloodproducts and medication

WASTE OF BLOOD PRODUCTS CAN BE SIGNIFICANTLY REDUCED BY:

- USING A PROTOCOL TO ADMINISTER TRANSEXAMIC ACID



**Intensive care, USE OF:**

**Data from billing codes, stay place and nurcing day costs**

**POSSIBLE ERRORS, ABUSE AND FRAUD AS CONFOUNDERS FOR UNDERSTANDING LENGTH OF STAY:**

- **6 YEARS**
- **ALL INTENSIVE CARE STAYS**
- **CLUSTERING: 1 CORRECT, 5 INCORRECT CLUSTERS**



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