

Digital collaboration in Danish Health Care

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Agenda

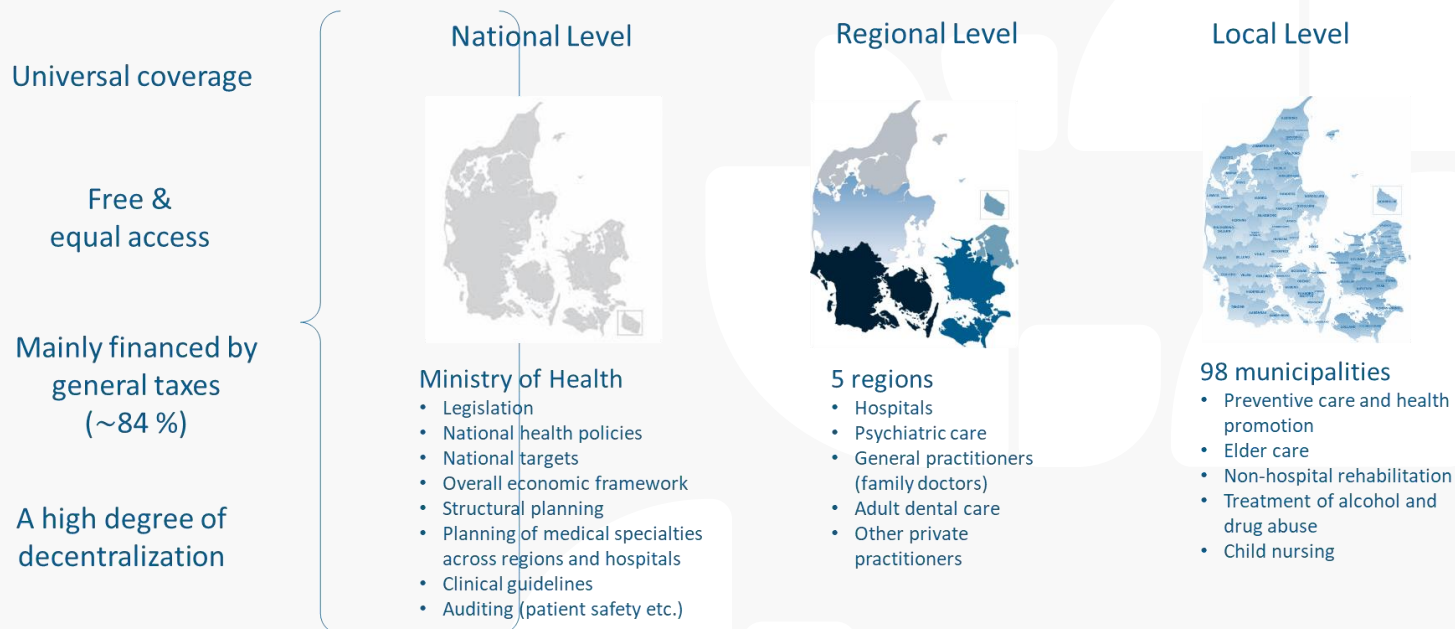
1. Danish Health Care & MedCom
2. Standards for data sharing
3. Structural Reform in Danish Health Care





Danish Health Care & MedCom

The Danish healthcare structure



- And they all exchange healthdata between their IT-systems every day, hour & minute!



What is MedCom?

MedCom is established in 1994 as a partnership of authorities, organisations and private enterprise associated with the Danish health sector. In the 1999 financial agreement between the counties and the government, it was decided to make MedCom permanent, with the following aims:

“MedCom shall contribute to the development, testing, dissemination and quality assurance of electronic communication and information in the health sector with a view to supporting good practice in patient care.”

MedCom is owned and financed by:

The Ministry of Interior and Health
Danish Regions
Local Government Denmark/Municipalities

MedCom is a part of a new national eHealth-organisation from 2027

“establish a national operations and development organisation, Digital Health Denmark, which, in collaboration with a National Center for Health Innovation, will play a central role in developing and disseminating new health solutions and infrastructure throughout the healthcare system.



Standards for data sharing

MedCom standards

- Supports the exchange of health data between IT systems (*interoperability*)
- Defines the exact data set when transferring responsibility between health care professionals (*Data Messaging*)
- Allows health care professionals to retrieve data on their own initiative (*Data Sharing*)
- Gives the health care professionals and citizens access to their own data on healthportal and APPs (*Data look-up*)



National Infrastructure

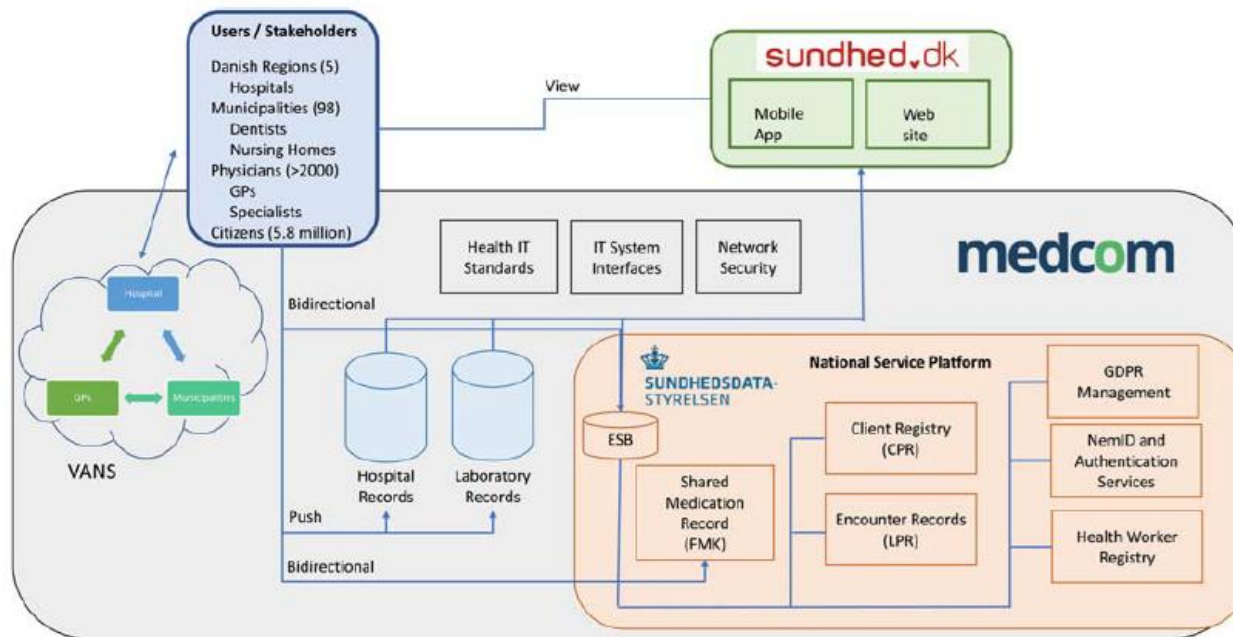


FIGURE 28.3 Denmark's enterprise architecture for major health IT systems and HIE networks. *ESB*, Enterprise service bus; *GDPR*, general data protection regulation; *GP*, general practitioner; *VANS*, Value-Added Network Service.



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Send health-data: Messaging

- 90 million digital messages a year
 - Referrals & discharge letters
 - Laboratory requisitions & results
 - Elderly care: Admission/discharge notification & plans
 - Care- and Rehabilitation plans
 - Birth Notifications
 - Clinical e-mails

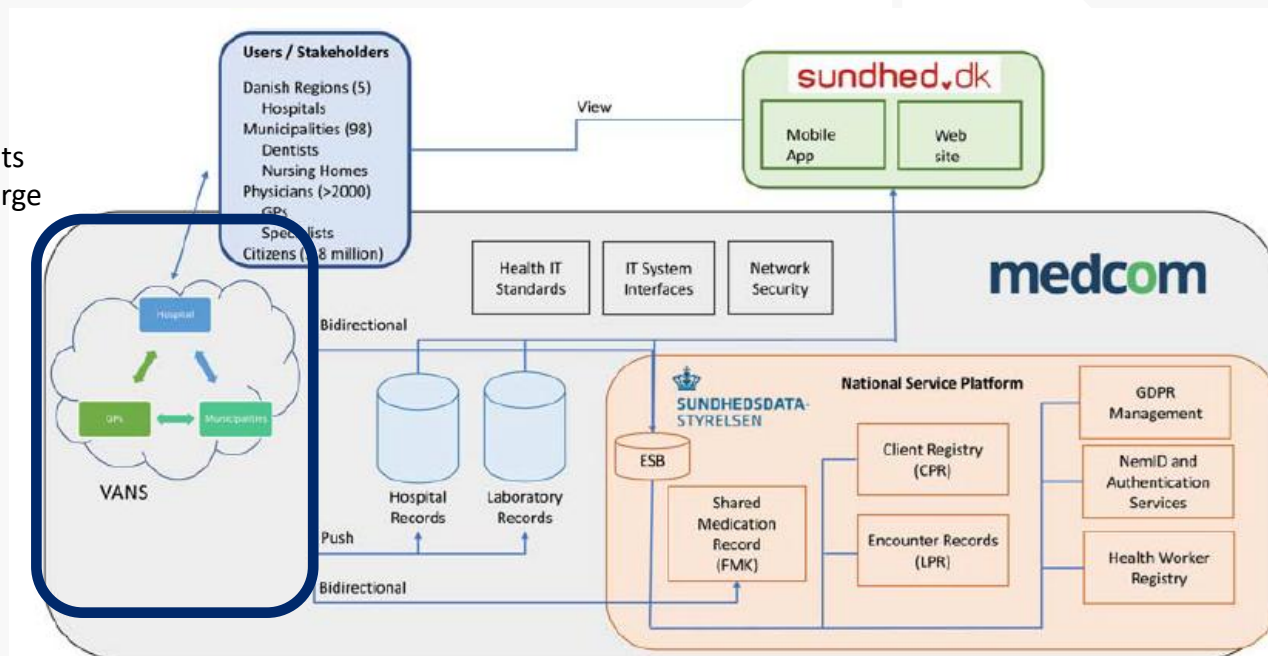
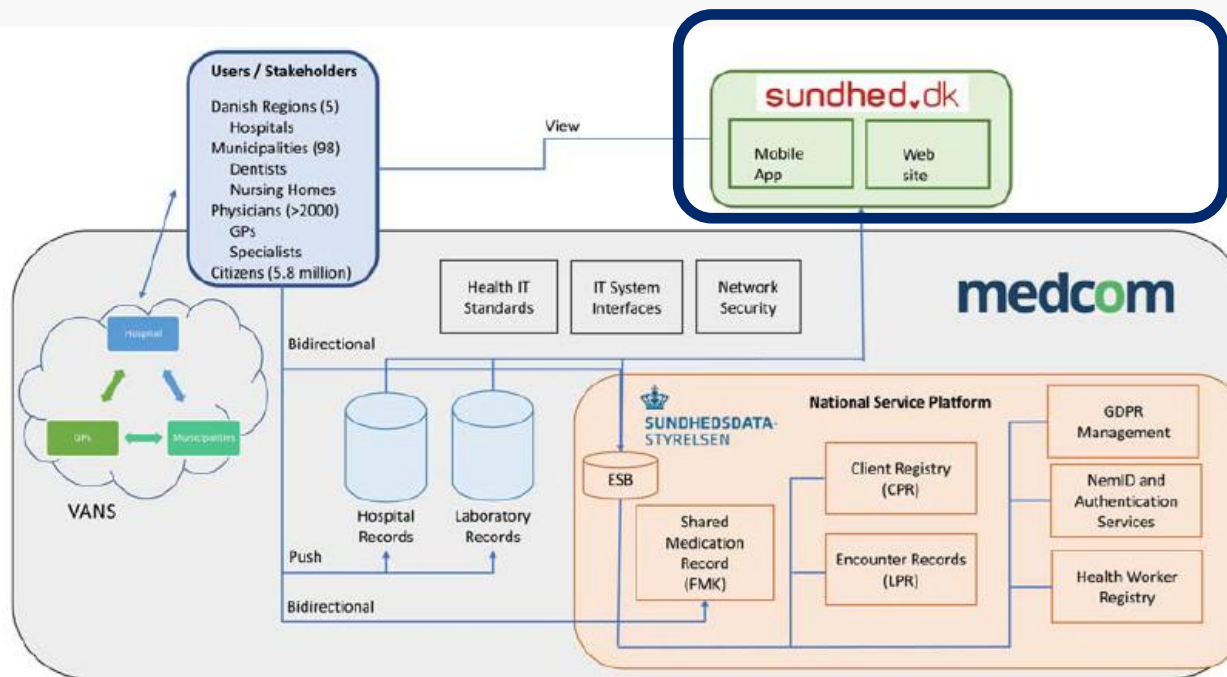


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“Look only healthdata”: Portal

3,2 mio “look ups”
from health
professionals a year



- Public hospitals records
- Private hospitals records
- Laboratory results
- Private specialists records
- Medicine prescriptions
- X-ray descriptions
- GP’s diagnosis
- PRO data
- Homemonitoring data
- Patient appointments

FIGURE 28.3 Denmark’s enterprise architecture for major health IT systems and HIE networks. *ESB*, Enterprise service bus; *GDPR*, general data protection regulation; *GP*, general practitioner; *VANS*, Value-Added Network Service.

Share healthdata: National Service Platform

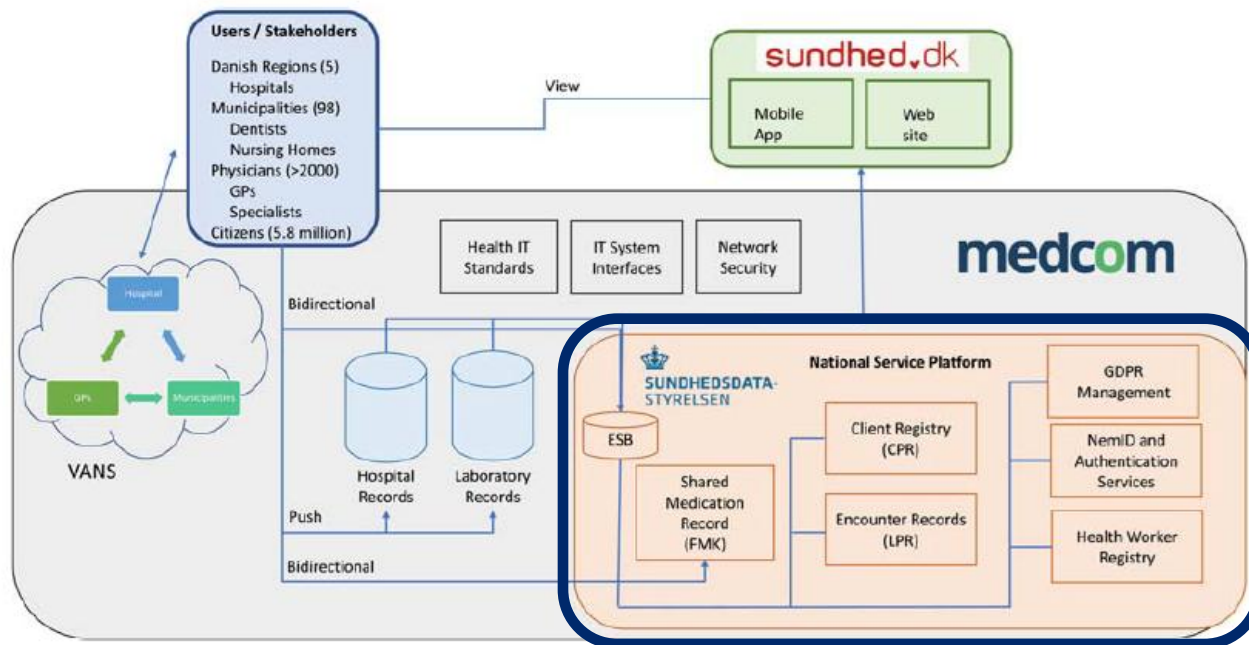


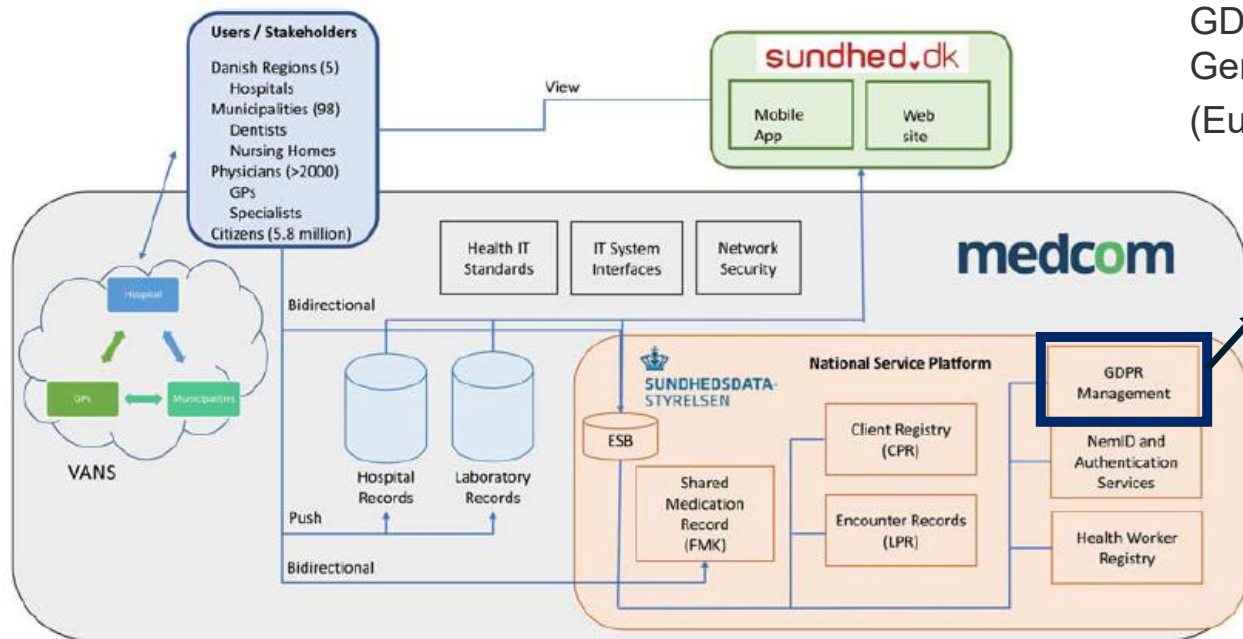
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40 mio shared
medicine
prescriptions a year,

But also

- Patient appointments
- PRO
- Homemonitoring
- Master data

Share and look up healthdata: GDPR



GDPR=
General Data Protection Regulation
(European law since 2016)

- Patient Consent Service
- Treatment Relation Service
- My Log service



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Structural Reform of Danish Health Care

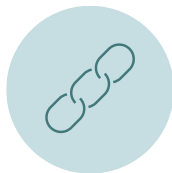


Better use of technology is an essential prerequisite for realising the ambition of an accessible and coherent healthcare system, close to the citizen, and with equal access to healthcare services nationwide.

Objectives of Digital Health Denmark



Support the transition to
community-based healthcare



Promote continuity of
patient care



Develop and implement user-
friendly digital solutions and
infrastructure



Strengthen innovation in
healthcare



Ensure world-class
health data



Strengthen preparedness for
cybersecurity threats



Digital Health Denmark (2027)

New governance of work on digitalisation and data

MedCom, Danish Health Data Authority, Danish National Genome Center, sundhed.dk, and regionally managed national IT solutions

Tasks related to shared digital solutions, health data, cyber and information security, and IT infrastructure

The full value chain of the national digital healthcare system, from development to implementation and operation of digital health solutions

Jointly owned by the state, the regions, and the municipalities



A new national data platform

- **Objective**

A national data platform should ensure easy, transparent, and centralised access to health data across sectors and stakeholders

- **Linkages**

The national data platform should be viewed in close connection with the vision for better use of health data and the European Health Data Space

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- --- **October 2025 – January 2026: Steering Committee**
The pre-analysis steering committee will be established and the analysis planned
 - --- **January – March 2026: Tender**
Tender documents are prepared, and the pre-analysis is put out to tender
 - --- **March 2026 – August 2026: Pre-analysis**
The analysis will form the basis for the decision on establishing a national data platform.
 - --- **September 2026: Decision**
The Governance Forum will decide on the establishment of a national data platform



Arenas for addressing tasks within data and digitalisation

Tasks carried out by Digital Health Denmark

- Shared infrastructure
- National registers
- National digital solutions
- Cyber monitoring

Tasks carried out across several organisations, but in a consistent manner in line with e.g. common standards

- Joint municipal, regional and practice sector projects and initiatives

Tasks carried out independently by the actors, driven by their own needs and without need for coordination

- Local specialist systems
- Innovation close to clinical practice



The structural reform and MedCom

More citizens and patients must manage in their own homes

- Collection and sharing of PRO and monitoring data
- Video consultations

Local health services throughout the country are strengthened

More patients are handled in general practice

Sector transitions are minimized

- Population overviews
- Video access to specialists from general practice
- Move data instead of patients: More data sharing and less data messaging

Standards and pragmatism

- The technologically perfect standard must work in an imperfect health-care and technological reality
- It might take so long time to implement the perfect standard, that technological development overtakes within
- There may not be enough ressources to implement the perfect standard

30 years
medcom
1994 - 2024

HL7
FHIR





Q/A & discussion

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