## KOREAN MEDICAL ASSOCIATION



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### Controversies Over Korean DRG System

The Korean government has implemented a compulsory DRG system over 7 diagnosis groups in July 1st 2012 primarily for clinics and hospitals and the application will be expanded to general hospitals effective from July 1st 2013.

Under the system, the total expenses are fixed according to categorization of diagnosis (diseases) in advance. The 7 diagnosis groups are: Surgeries related with Cataract, Tonsil/Adenoids, Appendix, Hernia, Anus/Perianal area, Cesarean section and Uterus/Adnexa.

Based on the experiences from pilot programs of DRG system in Korea, KMA expressed concerns over the issues such as possibility of deterioration in quality of medical services, small choices for patients, and uncertainty of effects of a cap on medical spending, etc. KMA had also requested measures like separation of hospital fee and physician fee, improvement in patient categorization system, and enhancement of fee level and establishment of fee adjustment mechanism before DRG system implementation.

KMA regrets the government's implementation of such an important issue on the change in payment system against the KMA's opposition. As a long-term measure to minimize the negative effects of the rushed implementation of DRG, KMA will closely monitor the operation of the system and lead research on DRG impact on the quality of medical services. KMA will also request the government to adjust the structure of the National Health Insurance Policy Review Committee, the main body of health policymaking in the direction that the opinions of medical professionals will be respected.

### **Good-Hands Campaign**

In an effort to fulfill its social responsibilities, KMA launched the "Good-hands Campaign" in October. This is a nationwide campaign initiated by KMA to extend helping hands to underprivileged groups, to lead by example in doing away with undesirable social customs and behaviors and to build good patient-physician relationships. Detailed programs include:

# Caring for vulnerable groups by KMA's good-hands

- Medical aids for the elderly
- Support for multicultural families (families formed by international marriages)
- Making a provision of professional counseling to primary school children and juveniles on bullying and violence in a way to prevent suicide

# Breaking undesirable social customs and behaviors by KMA's good-hands

- · Campaign on anti-smoking and anti-alcoholism
- Prevention against school violence and domestic violence
- Dispensing with undesirable social formalities

### Making a good patient-physician relationship

• Smile, kindness, ample explanation in consultation, etc.

KMA believes this initiative will bring hope to those in need of helping hands and contribute to a better society free from negative customs and behaviors by setting examples.

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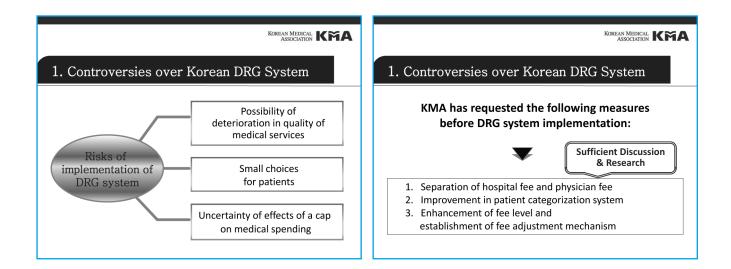
This article is based on a presentation made as the Report of Activities by each NMA at the 48th CMAAO Mid-term Council, Macau, China, on November 9, 2012.



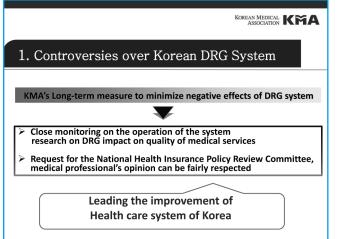
Compulsory implementation of DRG system over 7 diagnosis groups by the Korean government

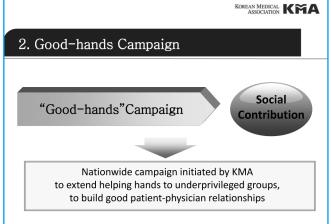
Clinics and hospitals → From July 1<sup>st</sup> 2012 General hospitals → From July 1<sup>st</sup> 2013













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### 2. Good-hands Campaign

#### 1) Caring for vulnerable groups of society

- Medical aids for the elderly
- Support for multicultural families
- Provision of professional counseling to primary school children and juveniles on bullying and violence in a way to prevent suicide

#### 2) Breaking the bad social customs

- > Campaign on anti-smoking and anti-alcoholism
- Prevention against school violence and domestic violence
- Dispensing with undesirable social formalities

3) Making a good patient-physician relationship

> Smile, kindness, ample explanation in consultation

