

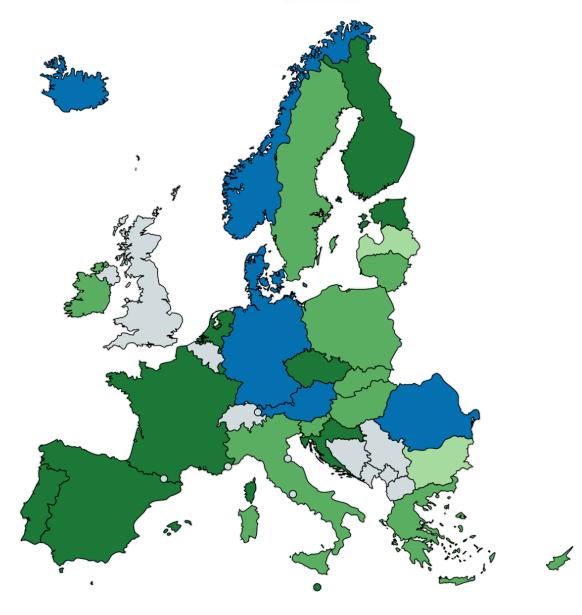
Semantic interoperability is a must for cross-border care

Konstantin Hyppönen
Policy Officer (SNE)
DG Health and Food Safety (SANTE)
Unit B3 Digital Health, European Reference Networks
European Commission

MyHealth@EU

Live now: CZ EE ES FI FR H
LU MT NL PT
Go-live planned 2022: CY G
HU IE IT LT PL SE SI SK
Go-live planned 2023: BG IX
Application under review: AT
DE DK IS NO RO

 MyHealth@EU is the existing infrastructure that connects healthcare providers in 10 Member States. It allows them to exchange health data such as Patient Summaries and ePrescription. These services will be expanded to include lab results and other types of health data.



Some common goals of MyHealth@EU



To support continuity of care when people exercise their right of freedom of movement



To provide appropriate and usable tools to health professionals and to patients



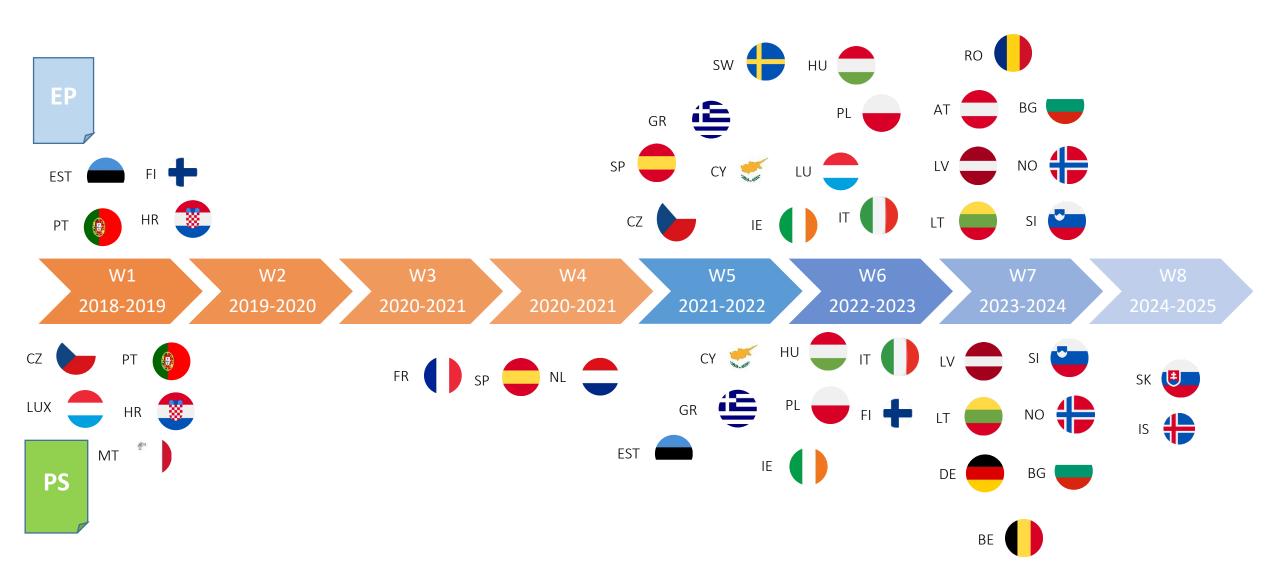
To ensure data protection and security



To ensure stability and further development of services, and make people aware of them Example: ePrescription in action – a Finnish patient purchasing medication in a pharmacy abroad ★







Key Performance Indicators:

- Number of eP transactions since 2019: 26.098
- Number of PS transactions since 2019: 426
- Number of Hospitals connected (PS-B): 3.207
- Number of Pharmacies connected (eP-B): 24.981
- Citizens able to benefit from MyHealth@EU: 5.749.635

^{*} Data are from the KPI's Q4 2021

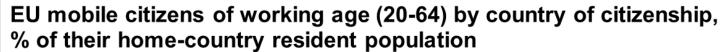


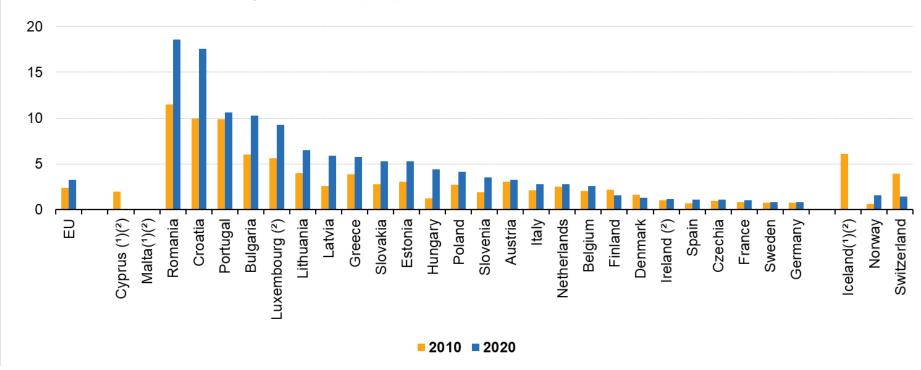
Coverage of HCPs in the MS

| MS | Hospitals | Pharmacies | Other POC |
|----|-----------|------------|-----------|
| CZ | 15% | | |
| EE | | 100% | |
| ES | 3.4% | | |
| FI | | 100% | |
| FR | 100% | 100% | 100% |
| HR | 100% | 100% | 100% |
| LU | 100% | | |
| MT | 94% | | |
| PT | 2% | 0.03% | |



What is the scale?





EUROPEAN HEALTH DATA SPACE

Use of data for healthcare (primary use of data)

Give citizens better access to their health data, everywhere in EU







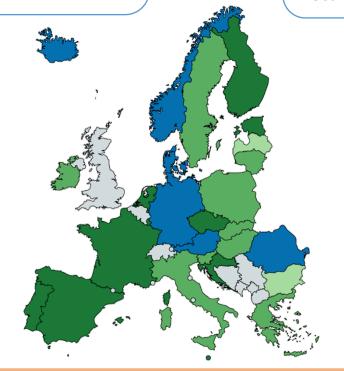


From 2019 exchange of:

ePrescriptions

Patient Summaries

Access by health professionals in their native language



From 2022 exchange of:

Original Clinical Documents

From 2024 exchange of: Laboratory results and reports Medical images and reports

Hospital discharge reports

in health professional's language

As in Recommendation on an Electronic Health Record exchange format in cooperation with DG CNECT

From 2022: pilot on Patients' access to their translated health data



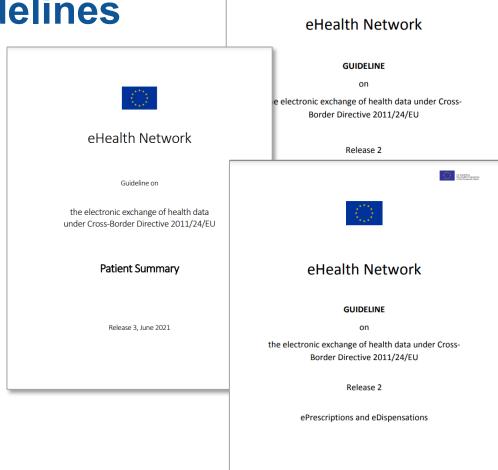
How does a country go live in MyHealth@EU?

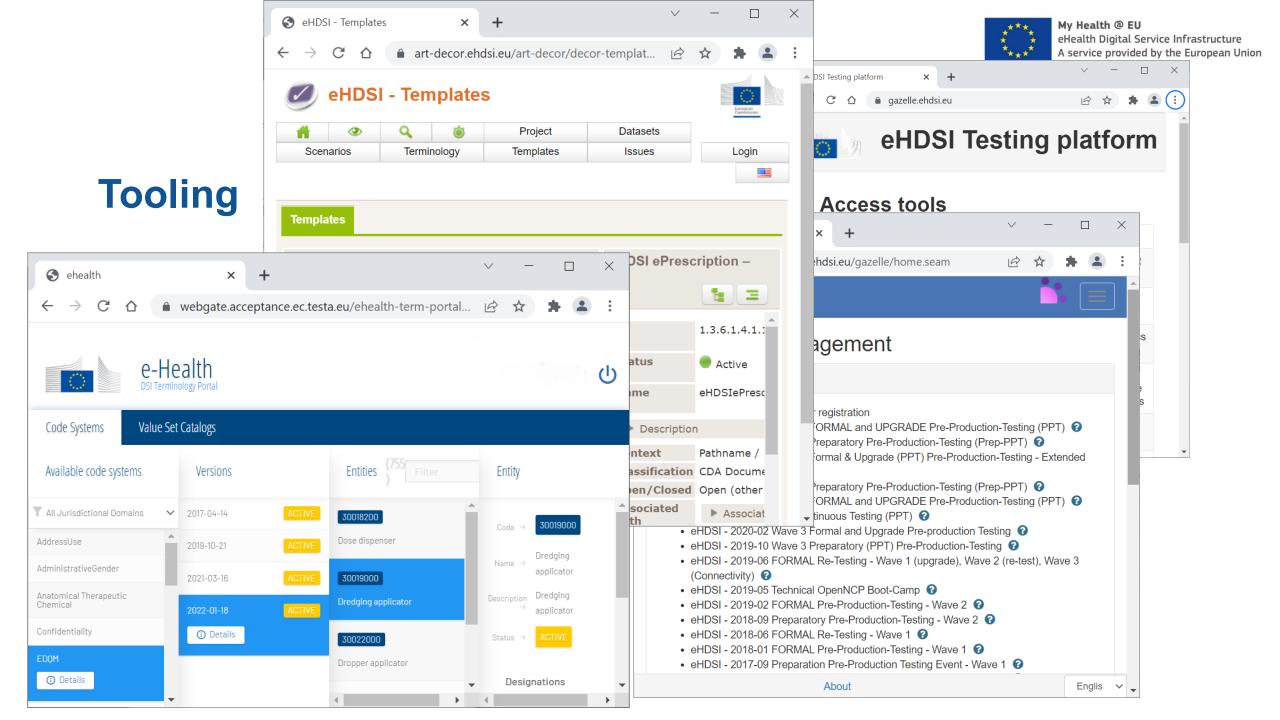
- Preparation phase
 - Implement + fix bugs
 - Test Preparatory, Formal, Re-Testing if needed
 - Compliance Check + Follow-Up Compliance Check and any fixes
- Decision phase
 - eHealth Member States Expert Group issues a recommendation
 - eHealth Network makes the final decision
 - Go live



Groundwork: eHealth Network guidelines

- Guideline on the electronic exchange of health data under Cross-Border Directive 2011/24/EU – undergoing revision
- Guidelines on Patient Summary updated in June 2021
- Guidelines on ePrescription undergoing revision
- Guidelines on laboratory results and reports – in preparation

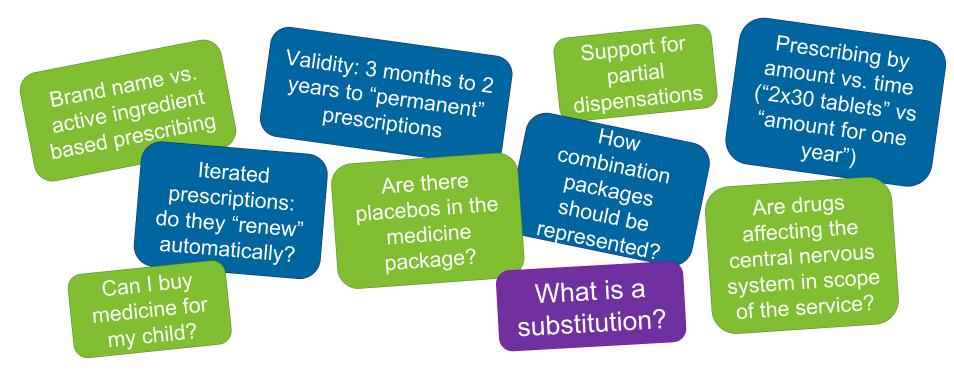




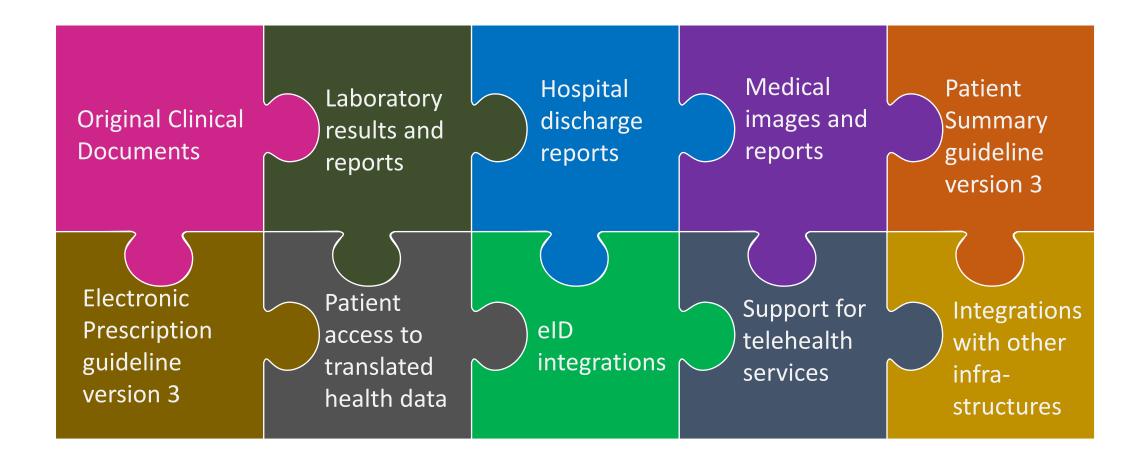


Semantics and business rules

- Semantic specifications may be flexible but there is significant complexity in business rules sometimes leading to a "least common denominator" principle.
- Examples from ePrescription:



Next possible steps for MyHealth@EU





Additional elements that could or should be considered







Primary use of health data

Sharing of health data for healthcare

Problems

- Limited control of patients over their health data
- Limited interoperability between health care providers

Areas of work

- •Control of patients over their data
- Interoperability
- •Role of e-health agencies
- Reinforced EU governance (eHealth Network)
- •Reinforced MyHealth@EU

Single market for digital health products and services

Problems

- Uneven national legislative frameworks
- Uneven quality framework
- Uneven procedures for prescriptions, reimbursement, liability

Areas of work

- Eliminate barriers to free movement
- Labelling
- Interoperability
- Reimbursement
- Liability

Secondary use of health data

Access to health data for research, innovation, public health policy making

Problems

- Low re-use of health data
- Cumbersome cross-border access to health data
- Fragmented digital infrastructures

Areas of work

- Governance and rules for access to health data
- Data FAIR-ification
- Digital infrastructure (EHDS2)

Artificial Intelligence

Problems

- Limited provision of data for training of AI
- Difficulties for regulators to evaluate AI algorithms
- Uncertainty on AI liability in health

Areas of work

- Support for development and rollout of Al
- Data for Al
- Support for regulators