Momentum 2008: Kicking off collaboration for interoperable eHealth services across Europe

In summer 2008, the European Commission launched not only two new important policy papers but also two new projects relating to interoperability and cross-border eHealth services. Announced at the end of last year, the now proposed directive on patients’ rights in cross-border healthcare is foreseen to facilitate the application of European patients’ rights in relation to cross-border healthcare. While rulings of the European Court of Justice have repeatedly confirmed the rights of individual patients to seek healthcare in other Member States and then be reimbursed at home, some legal uncertainty still remains.

The new directive states that:

- Patients have the right to seek healthcare abroad and be reimbursed up to what they would have received at home.
- Member States are responsible for monitoring healthcare quality, safety standards and medical practices.
- European cooperation on healthcare should be facilitated, e.g., through reference networks and joint approaches to health technology assessment.
- E-health services for cross-border healthcare should be strengthened. Emphasis is placed on shared formats and standards that can be used between different systems and countries.

Also the recommendation on cross-border interoperability of electronic health record (EHR) systems aims to improve the safety and quality of care for people who require medical assistance abroad. It hopes to provide basic principles and guidelines to help doctors access vital patient information, wherever such information may be located in Europe. Important support for this recommendation is expected to come from the epSOS (“Smart Open Services for European Patients”) project and the CALLIOPE (“CALL for InterOperability”) Thematic Network.

EC Recommendation on cross-border EHR interoperability

Quick Guide to the Key Messages

To better understand the Commission Recommendation on cross-border interoperability of electronic health record (EHR) systems, also the Commission’s proposal for a directive on the application of patient’s right in cross-border healthcare must be taken into account:

In Article 16 the Commission’s proposes to be mandated for specifying “the necessary standards and terminologies for interoperability [...] to ensure safe, high-quality and efficient provision of cross-border health services”. If adopted by the Council and the European Parliament, this Article would become the natural extension of the Commission Recommendation.

The Recommendation addresses interoperability in a comprehensive manner, i.e. “the steps that Member States should take now to establish an EHR system compatible with those in other Member States”. This policy paper aims to provide guidance to national health care authorities of the European Union and their relevant bodies.

It is the intention to have these recommendations being implemented by the epSOS project and being further reviewed and matured by the CALLIOPE Thematic Network (see left box). National health care authorities within the EU are invited to report on a yearly basis on their progress towards EHR interoperability.

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Looking ahead: Upcoming EHTEL Task Force “Innovation & Society”

Forum activities of EHTEL are structured along two lines: the permanent stakeholder working groups – focusing on the perspective and interest of that group – and the multi-disciplinary task forces, focusing on particular eHealth themes. The upcoming EHTEL Task Force “Innovation & Society” aims to look ahead of the current eHealth deployments with a view to explore societal challenges raised by groundbreaking biomedical research and services to emerge, such as the paradigm of the Virtual Physiological Human (VPH) and, more broadly, the issue of personalised health care.

The prospects for a Task Force “Innovation and Society” within EHTEL are:

- EHTEL is deeply involved in supporting all stakeholders not only in deploying eHealth services, but also to look ahead to prepare innovations.
- As a multi-disciplinary cross-stakeholder forum EHTEL is the platform to address the societal perspective on eHealth, which deserves much more emphasis than given today.

While the first activities of this task force will be focused on VPH, interesting links exist with eHealth interoperability and Electronic Health Records, while looking ahead. The large-scale integration of clinical and genetic data as well as imaging in distributed databases is essential for the technologies and processes within the VPH framework. The extensive and broad use of personal data in this framework gives cause for reconsidering existing solutions for the secure access to medical data and the comprehensive protection of privacy and choices. The Task Force operations will get the support of two EU funded projects:

- RADICAL, for “Road mapping technology for Enhancing Security to Protect Medical & Human Data”
- ETHICAL, for “Promoting International Debate on Ethical Implications of Data Collection, Use and Retention for Biometric and Medical Applications” (currently under negotiation).

The first activity of the Task Force has been the presence of EHTEL at ICT-BIO 2008 to better understand the R&D agenda and to initiate the dialog on Innovation and Society.

Building block for Interoperability: European Health professional’s card

[by Mariane Cimino, GIP-CPS] The HPRO project is based on the European Directive 2005/36/EC on the recognition of professional qualifications which concerns at least the professions of doctors, pharmacists, midwives, nurses and dentists. This directive mentions the need for a European professional card.

The main objectives of the European health professional card will be to facilitate the free movement of health professionals in Europe while protecting patients from the professionals that could be subject to severe disciplinary sanctions. In the future, the card could have other possible applications such as validation of continuing education, access to medical records for instance.

The European health professional card has two sides: one side is national, solely designed by competent authorities in line with local law, the other harmonised side is European and clearly states the contact details of the competent authorities of the country of origin, thus enabling a future employer in the host country, for example, to contact easily with this authority. In turn, the card will hold some information (on a microchip) which could be used to contact the database of the competent authority of the health professional originating country and to check immediately whether or not the professional is entitled to practice (see proposed architecture below). The European card will hold all national functions and follow the national legislation of the various member states.

In order to continue its work on the European card, a working group has been created in early 2007. This group is composed by representatives of European wide health professional associations and competent authorities from the five professions listed in the directive originating from different Member states, Candidate countries or from European Economic Area (EEA). [...] In late February 2008 the European Commission has decided to give a grant of almost 300 000 euro to the group. The funded study has these objectives:

- To identify competent authorities of the health professional listed in the directive in each of the 27 Member states;
- To study the current state of the art of health professional cards through all European Union;
- To study the implementation conditions of health professional’s strong authentication;
- To study the interoperability of the different health professional’s strong authentication systems.

Using the results of this work, which will be communicated to the European commission, a political decision ought to be taken to improve the implementation of the European health professional card (cf. www.hprocard.eu).

EHTEL eHealth Diary 2008/2009

November 3-6, Copenhagen, Denmark

November 7, Copenhagen, Denmark
SDO M403, cf. www.ehealth-interop.net.nl

November 19-22, Düsseldorf, Germany,

2009

February 19 - 20, Prague, Czech Republic

March 5 – 6, Hannover Fair, Germany
TeleHealth 2009 within CeBIT (March 3 – 8)
cf. www.telehealth.de and www.cebit.de

April 1 – 3, Luxembourg
“Med-e-Tel 2009”
cf. www.medetel.lu/index.php

April 21 – 23, Berlin, Germany
“conHIT – Connecting Health IT”
cf. www.conhit.de

April 28 – 30, Harrogate, UK
“HIC 2009 — “Shaping the Future”
cf. www.bcs.org

May 13-14, Brussels, Belgium

May 26-28, Paris, France
Hit 2009 – Health Information Technologies
cf. www.health-it.fr

May 31 - June 3, Québec City, Canada
cf. www.e-healthconferece.com

June 15-16, Tromsø, Norway
TTeC09 - Tromsø Telemedicine and eHealth Conference: “Innovation in EHealth”,

June 29 - July 1, Berlin, Germany
Healthgrid 2009, cf. berlin2009.healthgrid.org

August 29 – September 02, Sarajevo,
Bosnia & Herzegovina

Autumn 2009:
European eHealth Event on the occasion of the 10th Anniversary of EHTEL, the European Health Telematics Association cf. www.ehtel.org (tba)