

4:30pm VALUE-BASED POLICY FOR DIGITAL HEALTH (Room Louis Armand)



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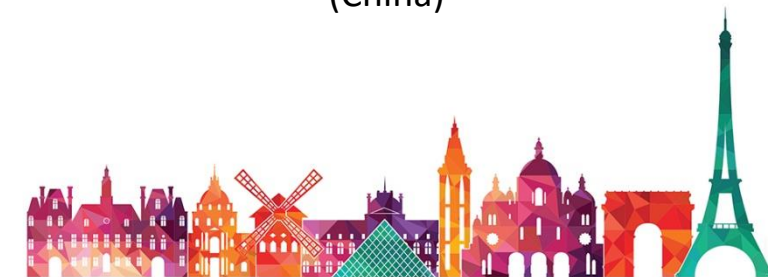


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Organised by



Value based policy & *[Digital]* Health

Michèle Thonnet

European eHealth Network member
Chair 'global positioning & cooperation' TF
e-Santé Europe et International



Digital : innovation & changes

- *Disruption* in daily life & business
 - Transformation of status (prof & personal), relations, decisions, **services**, **VALUES**, **organisations**
- Change of scope, governance, sovereignty
 - Borders are no more physical advantages or barriers
 - Multisector, multidisciplinary, pluri-objectives
- Paradox
 - Huge expectations, versatility, immediacy
 - Discrepancies of visions (individual, collective)
 - Multiplicity of solutions and usage

New way of delivering HC

- Challenges

- Versatility of expectations of 'a' person (H status, role)
- Ageing society, chronic diseases explosion, polypathologies
- Legacy systems, Data silos, privacy, security, TRUST
- Education & skills
- Lack of IOP, objective driven set of combined incentives
- Lack of common standards :Med &tech for measuring outcomes

- Info driven modern societies :

- People relying on digital tools personal/prof life
- New techniques/ opportunities (Big data, data analytics...) to manage own health + chronic diseases
personalised, mobile, user friendly, 24/24

Value based Policy for [Digital] health

- Approach : «value» driven /Person centric
 - Value Definition ?
 - Based on which objectives, priorities and scope ?
 - For the benefit of whom ?
 - Decided & Done by whom ?
 - individual, team, orga, region, country
 - How to (design, implement, deploy, evaluate, evolve) ?
 - Upon which time period ?
 - Impact, prerequisites & consequences (replicability) :
- Transparent set of stabilised incentives
 - legal, orga, financial, benchmark, digital(IT, IOP)

[Digital] Health in Europe

- Art 168 TFUE
 - Union should complement national policies
 - Considering innovative approach & model for HC
- 2009 *EU H Council* : safe & efficient HC through eHealth
- 2011 cross border patients rights
- 2012-2020 EU eHealth action plan
- 2014 effective, accessible & resilient H system
- 2017 *EU H Council*: free flow of patients, HP & data

e-Health services : a new EU competence

Towards an interior market for the healthcare :

- DSM & new legal complex horizontal FW:
 - Enlargement of European scope
 - No [(t) yet] global impact analysis
 - very close implementation/compliance deadline
- Process & governance to be renewed
 - STH Co-construction with horizontal constraints

Recent legal EU FW

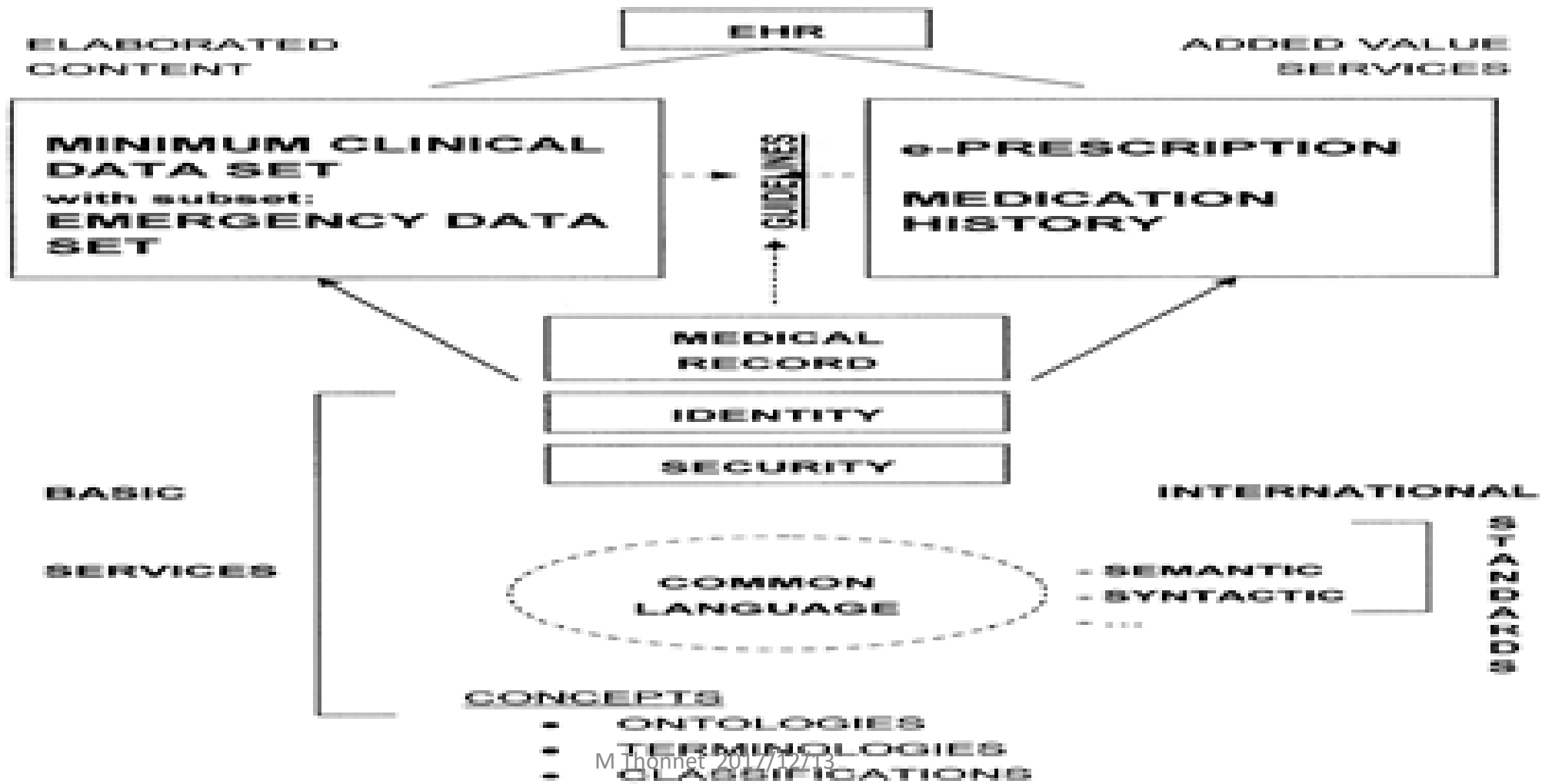
- Increase of transversal FW which impacts Health

- DIR 2000/31/CE 'e-Commerce' [info Society] (08/06/2000)
- DIR 2013/55/UE 'professional Qualifications' (20/11/2013)
- REG 2014/910/UE 'eIDAS' (23/07/2014)
- REG 2016/679 'GRDP' (27/04/2016)
- DIR 2016/1148 'NIS' (06/07/2016)
- REG proposal 'FW free flow of non-personal data in the EU' (13/09/2017)

- On top of Health focused one

- DIR 'cross border patients rights ' + eHAP 2014-2020
- REG 'MD' 2017/05
- COM 2008/689 'TLM...' (04/11/2008)

eHR Modelling: an input for collaboration (2007)



From large scale initiatives to sustainable ones: a potential pathway to integrated care ?

- **Healthcare:**

Health services given by HPs to the patients to **evaluate, maintain ou establish their health status**, including prescription, dispensation (drugs & MD)

- **Common challenges**

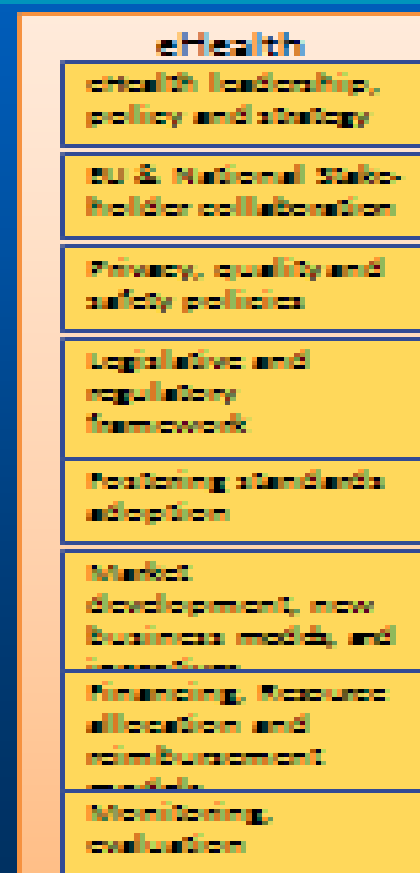
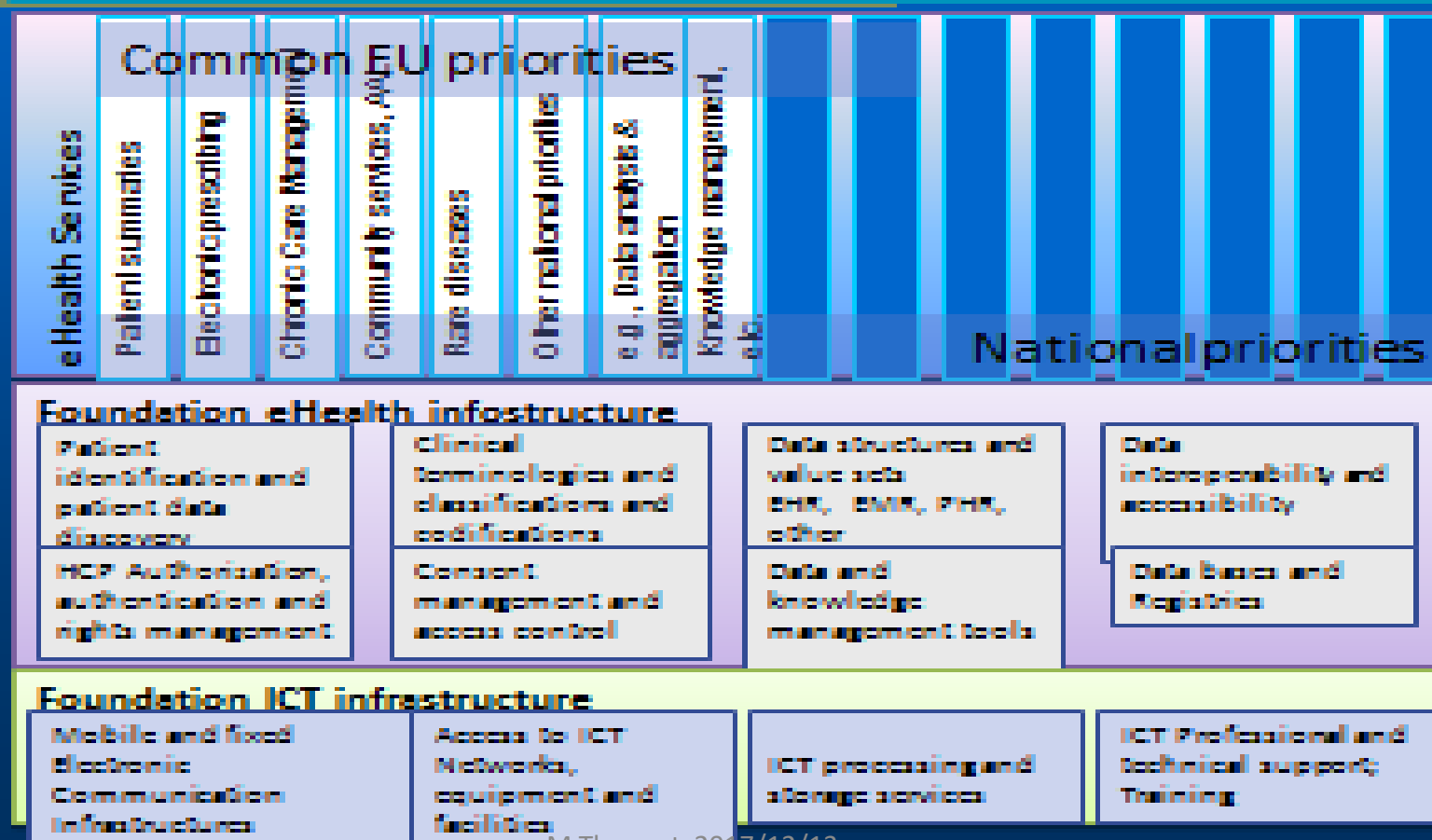
Design, implement new **sustainable patient oriented up-to-date (ex: *mHealth*)** health services & processes with warranty of Q, security, accuracy, at EU level facilitating the coordination & continuity of care

Without DATA, could we :

- Enhance quality & efficiency (KPI, evaluation)
- Reduce inequality in patient outcomes
- Simplify trusted (e)H. up-to-date, adapted services
- Facilitate access to validated understandable info
- Give visibility & incentivise sustainability through
 - Secured data management, exchange & sharing
 - Innovative BM based on agreed use cases & processes
 - Adoption of reusable components & open standards

Adoption of a common working model

Sustainable Healthcare Sharing Information and Knowledge for Better Health



H system transfo through digital

- HC coordination
 - diverse projects & pilots but very slow uptake
- A coherent global (H & eH) strategy, a prerequisite for gaining from the added value of efficiency and Q.
- Develop trusted digital (public) services
 - the engine of the « in depth's » HC system transformation & organisations' modernisation
- Incentivise the usage of the services by patients & HP

The Union shall support and facilitate cooperation and the exchange of information

eHealth Network Objectives

delivering sustainable economic and social benefits of European eHealth systems and services and inter operable applications, with a view to **achieving a high level of trust and security, enhancing continuity of care and ensuring access to safe and high-quality healthcare;**

draw up **guidelines** on:

a non-exhaustive list of data that are to be included in **patients' summaries (+ e-prescription)** and that can be shared between health professionals to enable continuity of care and patient safety across borders; and
effective methods for enabling the use of medical information for public health and research;

[medical patient registries, ERN, safe prescribing, diabetes,...]

developing common identification and authentication measures to facilitate transfer ability of data in cross-border healthcare.

Use case selection criteria

- **Impact on patient care**
 - Potential positive impact on individual patients
 - Potential positive impact on number of individuals (patients, family, carers)
 - Potential impact on health professionals
- **Impact on health systems and services**
 - Improved health outcomes
 - Improved health system productivity
 - Reduced healthcare costs
 - Improved access (to services)
- **Policy alignment**
 - Applicability across all 28 countries
 - Legal achievability
 - Political acceptance
- **Informatics and health ICT alignment**
 - Technical & semantic feasibility
 - Capital costs avoided/contained
 - Market stimulation
 - Existing experience

Reference (Business Use) Case



"Safe Prescribing"

(illustrating the need and value of interoperability for optimising the safe prescribing of the appropriate medication to the right patient, at the right dose, at the right time, including in complex cases of co-morbidity and polypharmacy)



"Integrated Care"

(illustrating the need and value of interoperability for optimising local care coordination, home monitoring, cross-border unplanned care, cross-border specialty referral for interventions)



"Integrated Specialty Care" (ERN)

(illustrating the need and value of interoperability for optimising cross-border specialty referral for complex diagnosis and treatment)

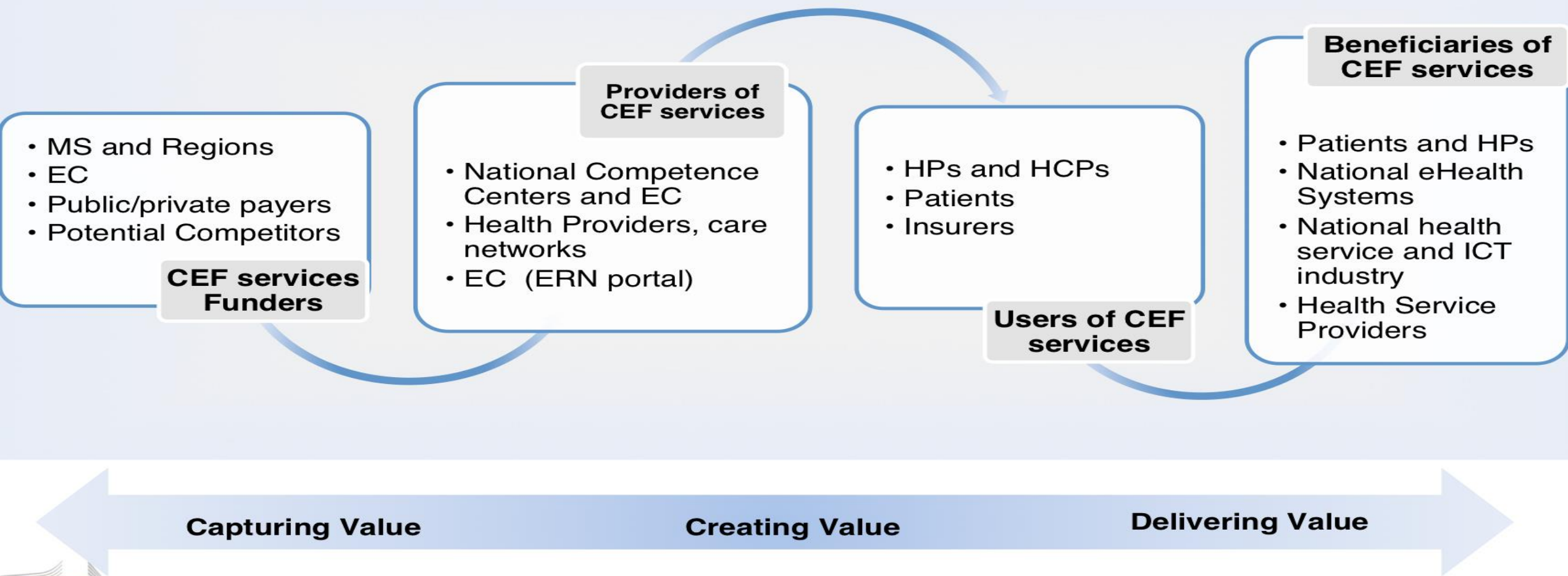
Optimal and Efficient Management of DIABETES with Interoperable Solutions



VALUE PROPOSITIONS (drivers for interoperability)

- Incentivise care services for
 - timely diagnosis, safe prescribing, and seamless care
 - improving patients' health outcomes, patient safety and population health
 - increasing the efficiency of health systems (resource optimisation)
- Accelerate the development and use of interoperable digital eHealth and mHealth solutions
- Scale up population level research (e.g. big health data, biomarkers, rare diseases)
- Facilitate MS co-operation on the eHealth agenda and support the provision of cross-border healthcare (unplanned care, planned care)

Optimising multi-stakeholder value chains



New MWP 2018-2021

Empowering people

Patient access to data

Security & confidentiality

Integrated care

Continuity of care

Reuse of data

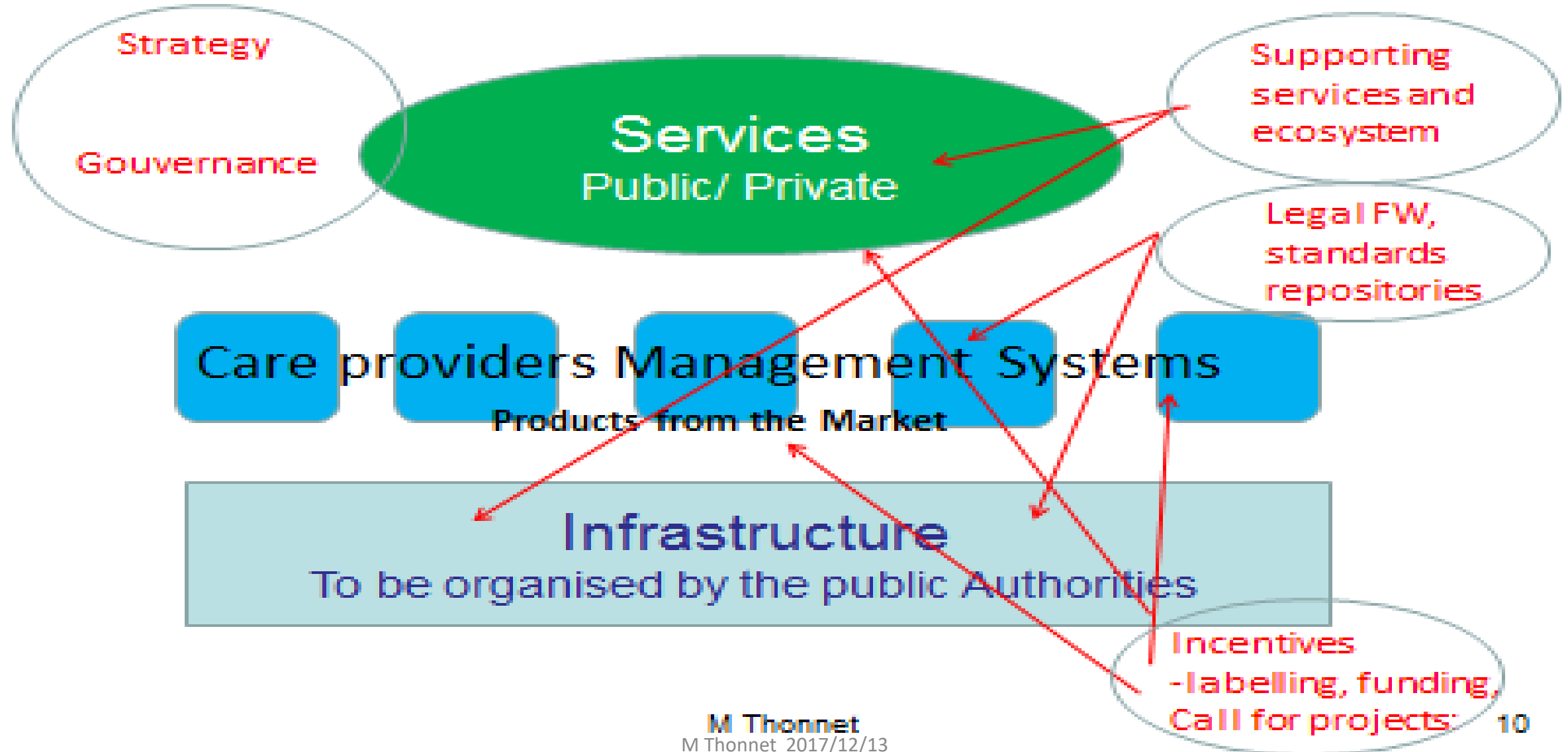
Reforming Health Systems

reimbursement & investment models

IOP & Standards

mHealth & IoT

Where and how to act



Thank you for your time

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