

## ***A Milestone towards the eEHIC***

# **The role and experience of the pilot sites**

- ❑ **NETC@RDS Movie (*GIE-SV*)**
- ❑ **Overview of NETC@RDS pilots (*Marjan Suselj*)**
- ❑ **Experience from FIFA 2006 (*Rainer Baudermann*)**
- ❑ **Evaluation results (*Reli Mechtler*)**

## Pilots – The Essence of the Market Validation Phase

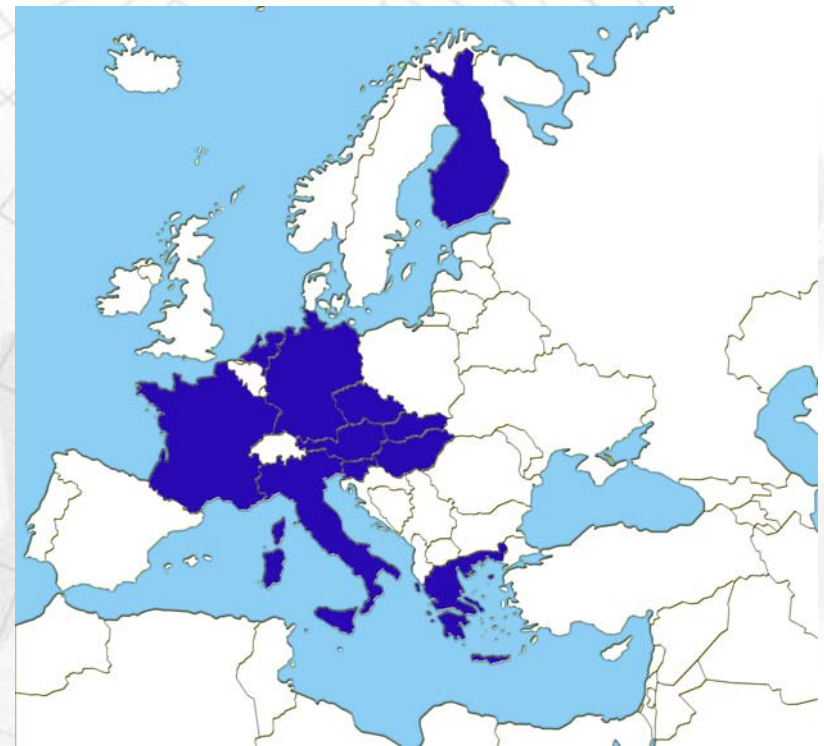
- ❑ Goal: to incorporate different existing national solutions in one application and test it in the real environment
  
- ❑ Different national solutions → Various scenarios tested:
  - *Dataset captured from card*
  - *Dataset captured from card & server*
  - *Dataset captured from server*
  - *Dataset captured from eye-readable medium*

# Pilot set-up and realisation

- ❑ Selection of pilot locations: *Regions and Health care service providers with the highest number of foreign patients*
- ❑ Signing of the General Agreement
- ❑ Work stations set-up: *NETC@RDS application, card-readers...*
- ❑ User training – Health care service providers
- ❑ Promotion: *press conferences, local media, internet, conferences*
- ❑ Time frame: *Olympic games 2004 – August 2006*

# NETC@RDS pilots

Number of Netc@rds pilots	Planned	Active
Austria	6	6
Czech Republic	5	4
Finland	7	7
France	2	1
Germany	31	31
Greece	8	8
Hungary	6	4
Italy	11	11
Slovakia	2	2
Slovenia	16	10
<b>Total</b>	<b>94</b>	<b>84</b>



# Slovene experience

- ❑ Time frame: *March – August 2006*
- ❑ Off-line application
- ❑ Not all planned pilot locations were activated due to operating system incompatibility.
- ❑ Slovene speciality: *Pharmacies and private practitioners were also equipped with the NETC@RDS application.*

Pilot location		EHIC	Austria	Germany	France	Total
Health Centre	Zdravstveni dom Lendava	0	2	0	0	2
Health Centre	Zdravstveni dom Gornja Radgona	13	5	3	0	21
Health Centre	Zdravstveni dom Ljutomer	1	1	0	0	2
Health Centre	Zdravstveni dom Murska Sobota	6	7	9	0	22
Hospital	Splošna bolnišnica Murska Sobota	35	11	5	1	52
Pharmacy	Pomurske lekarne Murska Sobota	47	44	28	1	120
Private practitioner	SALVUS D.O.O. TRIMLINI	0	0	0	0	0
Private practitioner	PUHAN BOJAN, dr. dent. med.	0	2	0	0	2
Private pharmacy	TOMŠIČ DOBRILA, mag. farm.	0	0	0	0	0
Private practitioner	LEON LANG, dr. med., spec. spl. med.	0	1	1	0	2
<b>Total</b>		<b>102</b>	<b>73</b>	<b>46</b>	<b>2</b>	<b>223</b>

# Slovene experience

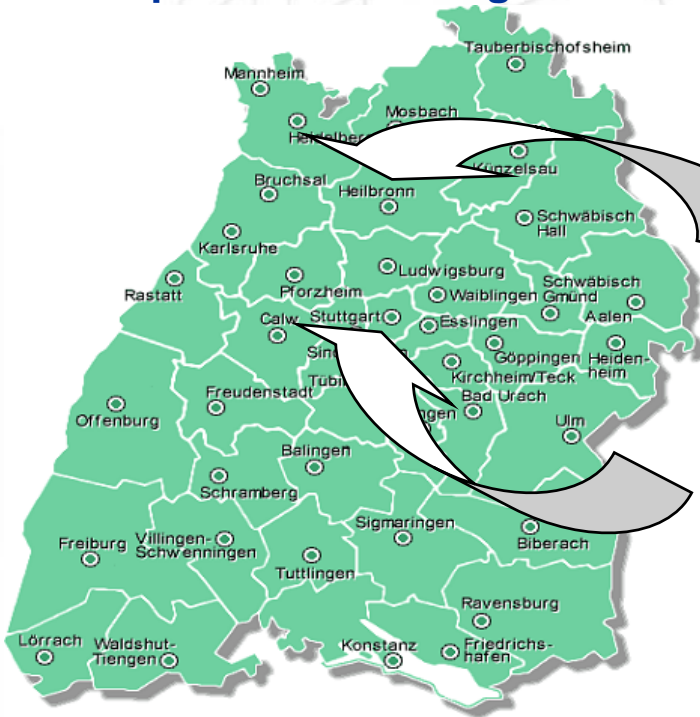
## □ User remarks:

- *NETC@RDS application is user-friendly and easy to use.*
- *It has a positive effect on administrative work.*
- *But does not cover all administrative needs.*
- *Errors occurred rarely.*
- *National modules within the NETC@RDS application should be more uniform.*
- *NETC@RDS application should be integrated into the existing SW.*
- *The same card-readers should be used as in Slovene national card system.*

# ★☆☆★ NETC@RDS NETC@RDS - pilots in Germany (World Cup 2006)

- Universitätsklinikum Freiburg
- Heliosklinik Herbolzheim
- Kreiskrankenhaus Ettenheim
- Kreiskrankenhaus Kehl
- Diakonieklinikum Schwäbisch Hall
- Arztpraxis in Freiburg

- München
- Nürnberg
- Leipzig
- Hannover
- Frankfurt
- Berlin



*Heilbronn (since 11.04.2006)*



*Stuttgart (since 13.06.2006)*

# NETC@RDS-Pilotregion Stuttgart

- Soccer World Cup 2006
- 6 matches in Stuttgart
- lot of tourists from abroad



**Robert-Bosch-Krankenhaus**



**Gottlieb-Daimler-Stadion  
Stuttgart**

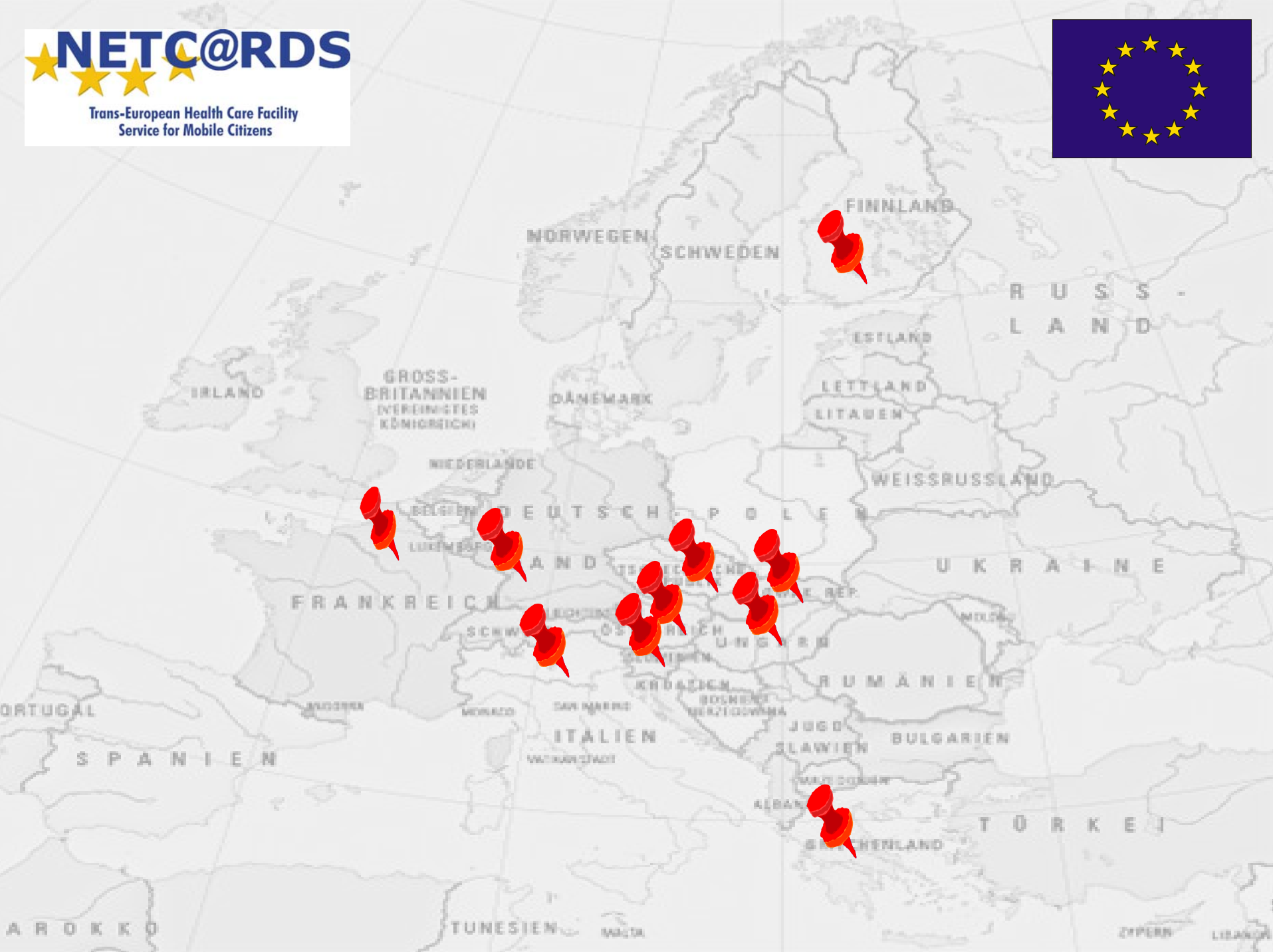


**Klinikum  
Stuttgart**



**Marienhospital**

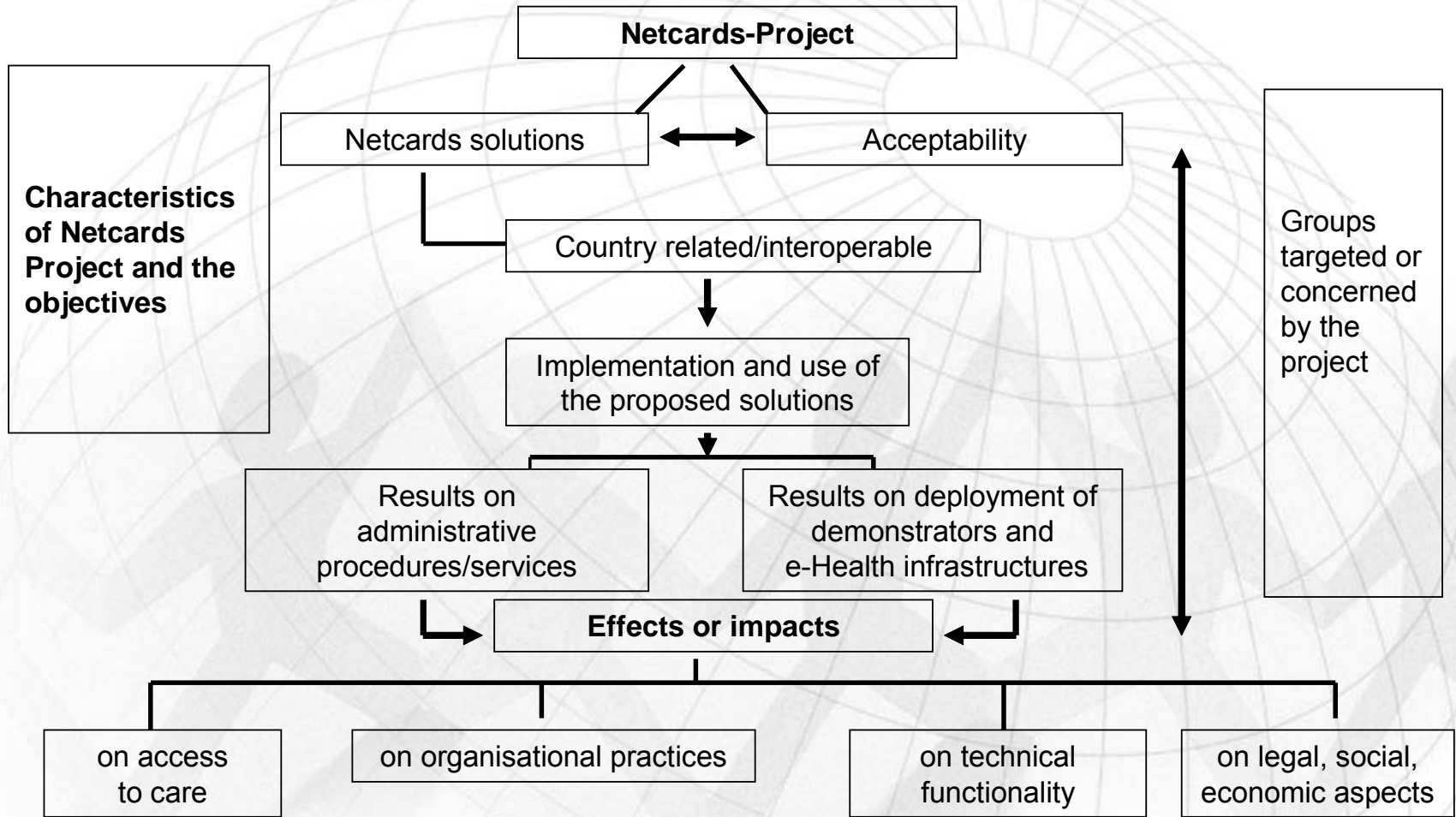




# Start in Stuttgart, 13th June (France-Swiss)



# Evaluation Scheme



# Research Design for Evaluation

Impacts on	Evaluation Tool	Activities	Documentation/ Responsibility
Technical functionality	<b>Off-line NETC@RDS Solution</b> <ul style="list-style-type: none"> <li>• Documentation sheet</li> <li>• Error report</li> </ul>	Regular monitoring	User/pilot coordinator
	<b>On-line NETC@RDS Solution</b> <ul style="list-style-type: none"> <li>• Automatically by log files</li> <li>• Error report</li> </ul>		Pilot coordinator
Administration	<ul style="list-style-type: none"> <li>• User questionnaire</li> <li>• Interviews</li> </ul>	End of the pilot	Each user/pilot coordinator
Acceptance (User, patient)	<ul style="list-style-type: none"> <li>• User questionnaire</li> <li>• Interviews</li> <li>• Patient questionnaire</li> </ul>	End of the pilot	Each user/pilot coordinator
		current	Foreign patient/pilot coordinator

# Evaluation results

## Regular monitoring/contacts

- *country of foreign patient*
- *kind of health care entitlement*
- *technical error*

## Assessment by users

- *Access*
- *Administration*
- *Technical Functionality*
- *Acceptance*

## Assessment by patients

- *Access*
- *Administration*
- *Acceptance*
- *Time saving*

Evaluation results influenced by:

- time period a pilot is active (evaluation stage)
- number of patients processed through the system
- environment

	Evaluation stage in month <sup>+</sup>											
	18	16	12	11	10	9	7	6	3	2	1	Not yet
Number of pilots	4	6	2	2	2	4	4	11	31	3	9	6

+ Time period a pilot is active and NETC@RDS cases are documented.

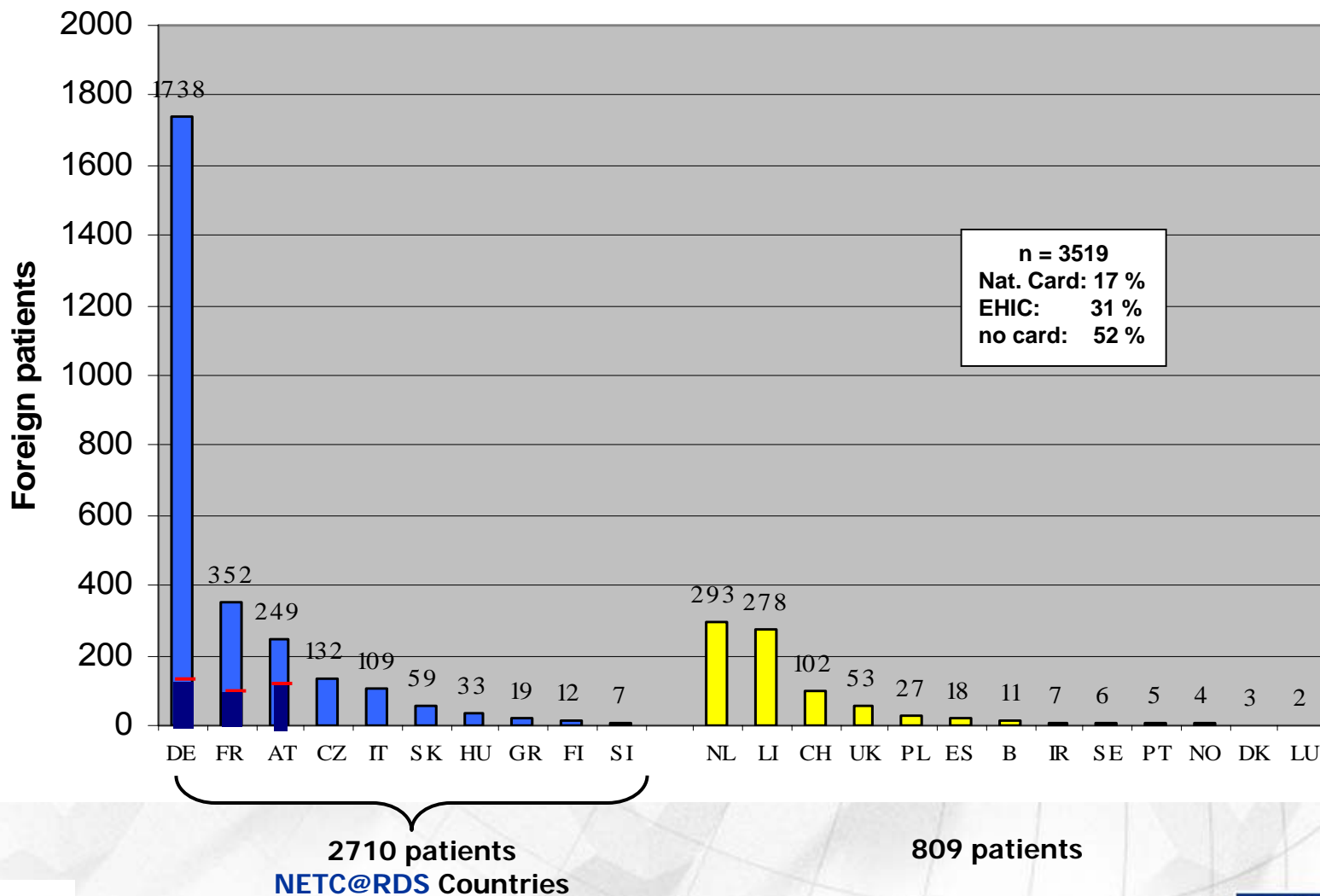
## Patient contacts

No NETC@RDS Pilots <sup>+</sup>	Foreign patients registered/total	Foreign patients processed through NETC@RDS system <sup>++</sup>
62	5360	2710

+ Pilots were detailed documentation is available

++ Patients from NETC@RDS countries

Documented foreign patients in the NETC@RDS pilots total (n = 62) / patient country related

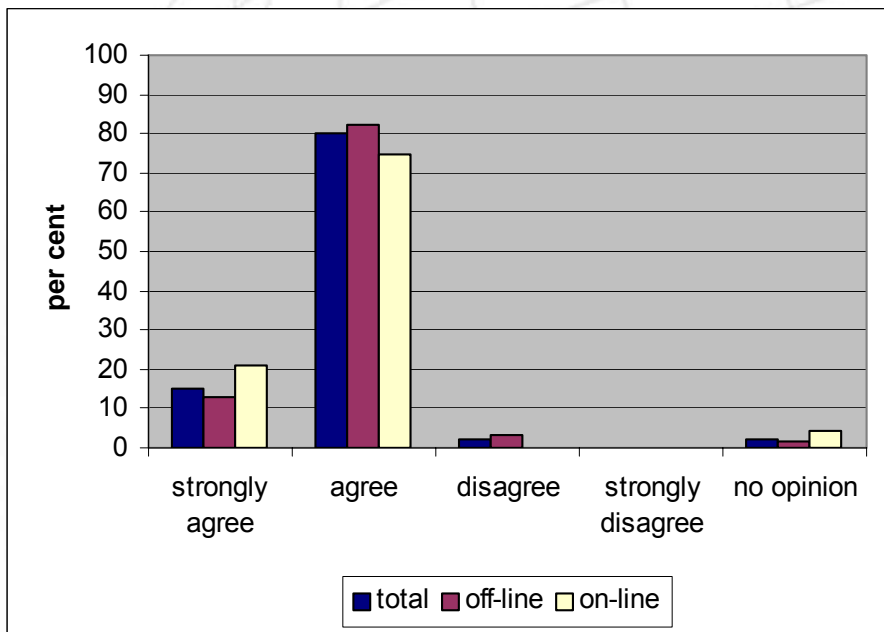


# User acceptance

(n = 86)

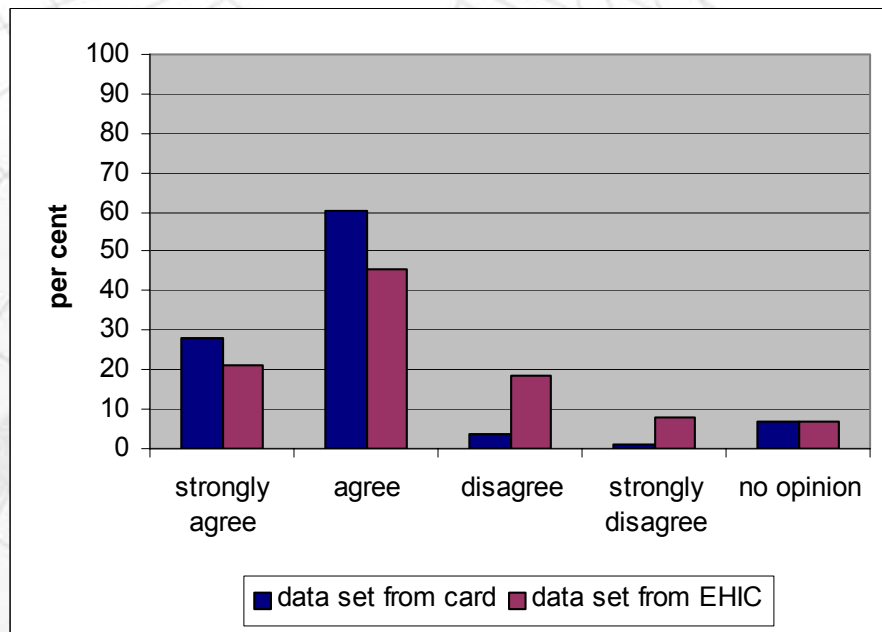
## Use of the demonstrator

The NETC@RDS system is user friendly and easy to use (n total = 86; off-line n = 62; on-line n = 24)



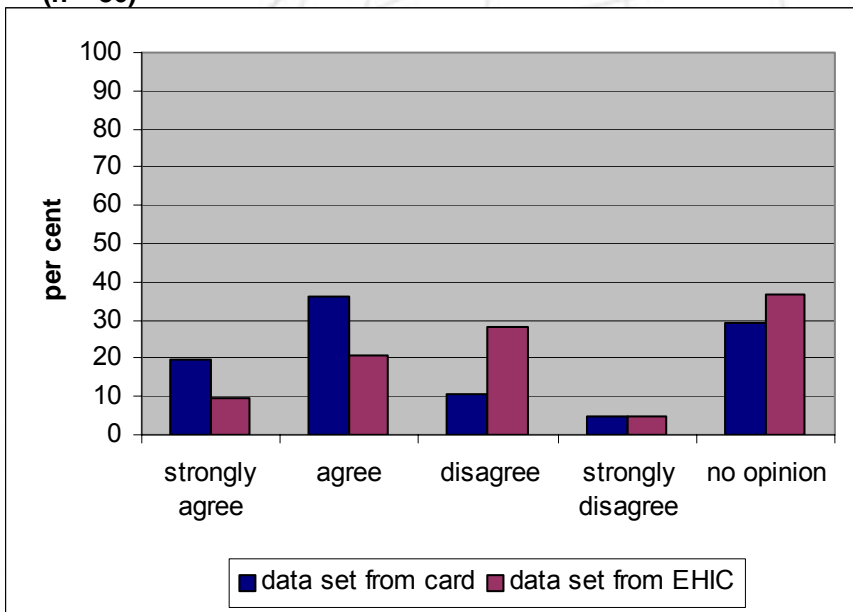
## Access

It is easy to capture the data set from card vs. EHIC (n = 86)

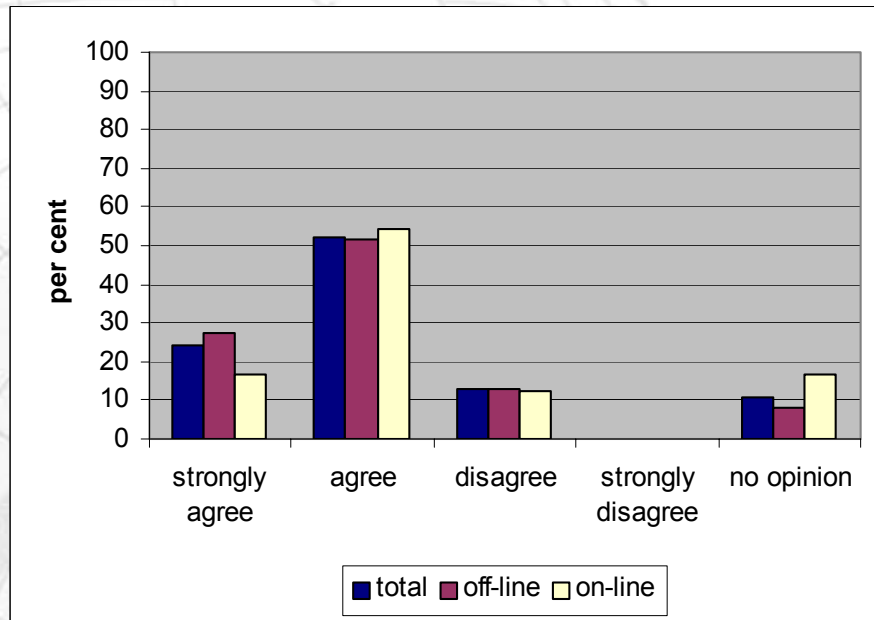


## Effects on Administration

Capturing data set from card/EHIC decreases the duration ...  
(n = 86)



The use of the NETC@RDS system has a positive effect on the administration (n = 86)



## Technical Functionality

Half of the users never experienced problems (n = 86)

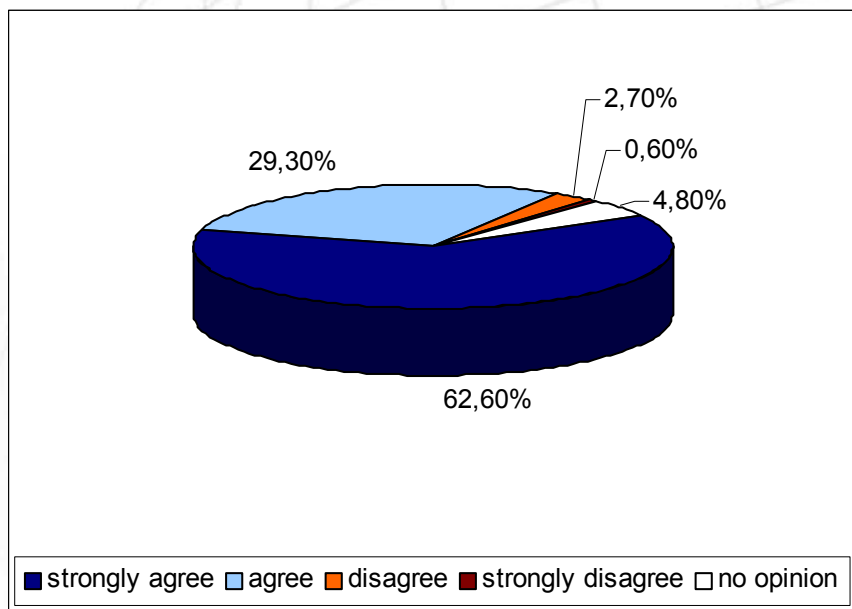
	Never		Seldom		Often	
	Off-line	On-line	Off-line	On-line	Off-line	On-line
Card reading error	26,5 %	5,5 %	58,8 %	66,7 %	14,7 %	27,8 %
Printing error	61,7 %	100,0 %	29,4 %	-	5,9 %	-
General software error	58,8 %	50,0 %	31,3 %	38,9 %	2,9 %	11,1 %

# Patient acceptance

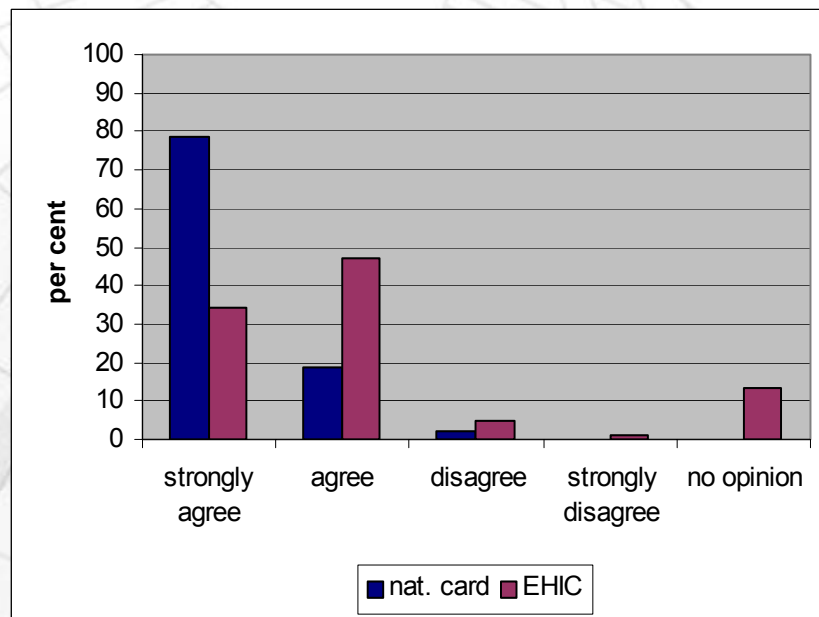
(n = 478)

## Access to care

It is easy to get access to health care in a foreign EU-country by national and/or European health insurance card (n = 478)



Easy Access/Patients with nat. card vs. EHIC (national card n = 149; EHIC n = 106)



## Impacts on administrative procedures

(n = 30)

	My health care entitlement was not accepted	Problems by reading my national card	Problems by reading my EHIC	I had to pay for my treatment	Other problems
National health insurance card	41,7 %	33,3 %		25,0 %	0
EHIC	16,7 %	8,3 %	33,3 %	25,0 %	16,7 %

# Conclusion

Effects/impacts on:

Access to care

Administration

Technical functionality

- Patients prefer the easy access;
- See the usefulness; although not all nat. cards were accepted by the system.
- Do not have to manage health care entitlement for abroad at home – Saving of time

- Operators see positive effects on administration; in particular the nat. card will simplify administrative procedures;
- Additional functions will increase the benefit of the NETC@RDS services;

- NETC@RDS application is user-friendly and easy to use (nat. card)
- Technical problems seldom occur (card reading errors, general software errors)

Acceptance very high  
> 80 % will use the NETC@RDS system in the daily routine

# Interventions

- *All national cards of participating countries should be defined in the NETC@RDS system*
- *NETC@RDS applications should be integrated into existing hospital systems*
- *The same card reader should be used as for national patients*
- *An optical scanner for the management of the eye-readable EHIC will increase the benefit and the acceptance of the NETC@RDS services*
- *Information about health entitlement abroad by national card and/or EHIC should be improved in the home country as well as in the health care institutions.*