
Recommendation report

A best practice based approach to National Contact Point websites: feasibility study

Final
17 October 2012
2012 – 1694/OV/sh/mp

CONTRACT NUMBER: SI2.601247
SANCO/2011/D2/004

DISCLAIMER

This document does not represent the position of the European Commission and does not represent European Commission's Recommendations. The interpretations and opinions contained in it are solely those of the authors.

Table of contents

1.	Introduction	6
1.1.	Objective of this study	6
1.2.	Overview of our approach for this study	6
2.	Web Search and Stakeholder Consultation	8
2.1.	Web Search methodology	8
2.2.	Web Search main conclusions	11
2.3.	Web Search limitations	13
2.4.	Stakeholder Consultation methodology	14
2.5.	Stakeholder Consultation main conclusions	15
2.6.	Stakeholder Consultation limitations	15
3.	Pilot website contents	17
3.1.	Lessons learned (content) from the Web Search and Stakeholder Consultation	17
3.2.	Design principles (functionality) from the Web Search and Stakeholder Consultation	17
3.3.	Types of information/sitemap	19
3.4.	Languages that should be used	27
3.5.	Difficulty of information (understandability)	27
3.6.	Functional and technical specifications	28
3.7.	Mock-up pages	37
4.	Cost analysis	42
4.1.	Overall approach	42
4.2.	Overall summary	46
4.3.	Detailed results	48
5.	Recommendations	51
5.1.	Financial and technical feasibility	51
5.2.	Organisational setup	52
A.	Web Search details	55
A.1.	Results for identified official NCPs	55
A.2.	Analyses of information properties	72
A.3.	Quick Scan template	81
A.4.	Detailed Web Search template	82
A.5.	Results detailed Web Search per Member State	84
B.	Details of Stakeholder Consultation	167

B.1.	Results of the Stakeholder Consultation	167
B.2.	Stakeholder questionnaire	177
<hr/>		
C.	Details of cost analysis	179
<hr/>		
C.1.	Overall approach	179
C.2.	Methodologies used	179
C.3.	Website development	180
C.4.	Website hosting	187
C.5.	Content development	191
C.6.	Categorisation of the website items	192
C.7.	Implement phase	200
C.8.	2011 labour cost per hour in euros (for enterprises with 10 or more employees)	201
C.9.	List of VAT rates applied in the Member States in 2012	202
C.10.	Estimation of daily consultant rate for each profile by Member State (including VAT)	203
C.11.	Estimation of annual salaries for each profile by Member State	204
C.12.	Detailed costs for the 'Basic' Scenario by Member State	205
C.13.	Detailed costs for the 'Extended' scenario by Member State	210
C.14.	Background information on patient volumes	215

Index of figures

Figure 1: Research steps per project phase	7
Figure 2: Average presence of types of information	11
Figure 3: Areas analysed for the set-up and the operation of an NCP website	42
Figure 4: Available information - A. Patients' safety and quality of healthcare	72
Figure 5: Level of detail of available information - A. Patients' safety and quality of healthcare	72
Figure 6: Easiness to understand available information - A. Patients' safety and quality of healthcare	73
Figure 7: Available information - B. Healthcare providers	73
Figure 8: Level of detail of available information – B. Healthcare providers	74
Figure 9: Easiness to understand available information - B. Healthcare providers	74
Figure 10: Available information - C. Patients' rights	75
Figure 11: Level of detail of available information - C. Patients' rights	75
Figure 12: Easiness to understand available information - C. Patients' rights	75
Figure 13: Available information – D. Procedures	76
Figure 14: Level of detail of available information - D. Procedures	76
Figure 15: Easiness to understand available information - D. Procedures	77
Figure 16: Available information - E. Contact details of NCPs in other Member States	77
Figure 17: Available information - F. Accessibility	78
Figure 18: Level of detail of available information - F. Accessibility	78
Figure 19: Easiness to understand available information - F. Accessibility	78
Figure 20: Available information - G. Interaction with users	79
Figure 21: Available information - H. Indications on financial aspects	79
Figure 22: Level of detail of available information - H. Indications on financial aspects	80
Figure 23: Easiness to understand available information - H. Indications on financial aspects	80
Figure 24: Visual overview of Member States who responded to the survey	167
Figure 25: Availability of information on cross-border healthcare	168
Figure 26: Estimation of information demand by information providers	168
Figure 27: Benefits of information to patients estimated by information providers	169
Figure 28: Awareness of the location of information estimated by patients' organisations	169
Figure 29: Estimation of usefulness of information by patients' organisations	170
Figure 30: Opinion on the positive effects of national contact points	170
Figure 31: 63% of information providers is willing to disclose the necessary information	171
Figure 32: Difficulties of providing different types of information	172
Figure 33: Topics that patients' organisations have searched for	172
Figure 34: Administrative impact of National Contact Points	173
Figure 35: Relative administrative impact of providing information with respect to the benefits	174

Index of tables

Table 1: Number of websites analysed per Member State	9
Table 2: Index table of answer for detailed Web Search questions	13
Table 3: Response rates for categories of representatives	14
Table 4: Survey responses per Member State	15
Table 5: Set-up and recurrent costs of an NCP website (in €) for the 'Basic' scenario	48
Table 6: Set-up and recurrent costs of an NCP website (in €) for the 'Extended' scenario	49
Table 7: Time needed for NCP website implementation and operation	50
Table 8: Advantages and disadvantages for the insourcing and the outsourcing strategies	51
Table 9: Results for five websites identified as official NCPs	56
Table 10: Information properties of HU1 (Hungary)	59
Table 11: Information properties of IE1 (Ireland)	62
Table 12: Information properties of PL2 (Poland)	65
Table 13: Information properties of RO2 (Romania)	68
Table 14: Information properties of SE4 (Sweden)	71
Table 15: Resources needed for the NCP website development	180
Table 16: Comparison of mandays needed for the website development phase according to the technical features, by type of IT staff	181
Table 17: NCP hosting total costs by sourcing strategy (in €)	187
Table 18: NCP website hosting hardware and support costs (outsourcing strategy)	188
Table 19: NCP website hosting hardware and support costs (insourcing)	189
Table 20: Resources needed for the content development	191

1. Introduction

- 01 This report contains the results of our activities for the study ‘A best practice based approach to National Contact Point websites: feasibility study’.

1.1. Objective of this study

Scope of the study

- 02 The scope of this study is to develop recommendations for Member States in order to set up National Contact Points (hereafter: NCPs) to provide the appropriate information on all essential aspects of cross-border healthcare in order to enable patients to exercise their rights on cross-border healthcare in practice. As stated in the Directive, Member States have the responsibility to provide such information to patients by establishing NCPs within each Member State.
- 03 As described in the Directive¹, EU citizens should be able to access the following relevant information on cross-border healthcare:
- Information about standards and guidelines on quality and safety, measures for supervision and assessment of healthcare providers.
 - Information on availability, quality and safety of healthcare provided by care providers. This also includes transparent invoices and prices and information on authorisation/registration status and insurance coverage for care that is provided.
 - Clear information on rights and entitlements and existing procedures to assess entitlements, conditions of reimbursement of costs, appeal and redress in case of cross-border healthcare.
- 04 Individual Member States are responsible to decide on the form and the number of NCPs needed in order to provide the proper information about cross-border healthcare. Such a function could for instance be incorporated in existing information centres.

Main goal of the study

- 05 The main goal of this study is to develop recommendations that can be used by the European Commission and the Member States to work together to implement the NCPs and make information on cross-border healthcare broadly available.
- 06 The results of this study may also be used to prepare the roll-out of a network of NCPs on cross-border healthcare to be structured and connected on an EU level, through the set up of a platform webpage run by the European Commission. The creation of such an EU platform website is however not in scope of this study.

1.2. Overview of our approach for this study

- 07 This study consists of the following phases:
- Inception - Analysing the status of information provided on cross-border healthcare by public bodies in all Member States by performing a Quick Scan and a Stakeholder Analysis.
 - Mapping Analysis - Performing a Systematic Web Search to identify the types of cross-border healthcare information currently present on NCP (and other relevant) websites. Consultation of 30 relevant stakeholders in at least 10 different Member States using a survey in order to determine the general information needs regarding cross-border healthcare given the differences between the health systems in the Member States.
 - Pilot project of some web pages of an NCP website - Developing a few sample web pages for an NCP website in order to gather best practices and lessons learned for the implementation of such a website.

¹ DIRECTIVE 2011/24/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 9 March 2011 on the application of patients' rights in cross-border healthcare

- Recommendation reporting - Providing recommendations for the implementation of NCP websites. This includes the financial and technical feasibility, cost estimations and the organisation of such implementations.
- 08 This report includes the final results of all activities performed within phases 2, 3 and 4.
- 09 Phase 1 ‘Inception’ was used to affirm a common understanding of the research framework, approach and planning. The results of this phase are documented in ‘Inception report - A best practice based approach to national contact websites: feasibility study’ of 13 December 2011 and have resulted in the work programme used for the activities in phases 2, 3 and 4.
- 10 The figure below shows how the four phases are broken down into research steps.

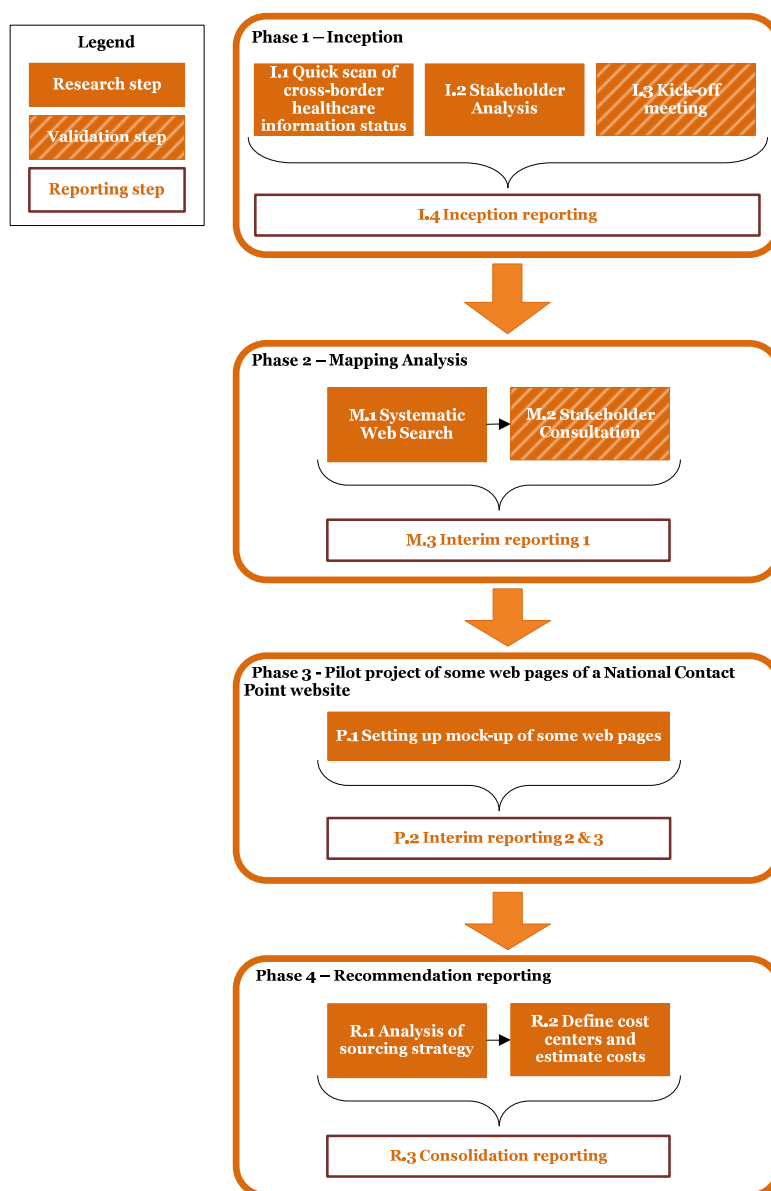


Figure 1: Research steps per project phase

Contractual references and disclaimer

- 11 This study has been executed under DG SANCO Contract Number SI2.601247 and Tender Specifications SANCO/2011/D2/004 - A best practice based approach to national contact point websites: feasibility study and PwC reference 2012 – 1694/OV/sh/mp between the period of 3 November 2011 and 17 October 2012.

2. *Web Search and Stakeholder Consultation*

¹² This chapter describes the methodology, main conclusions and limitations for both the Web Search and the Stakeholder Consultation performed in Phase 2 ‘Mapping Analysis’.

2.1. Web Search methodology

¹³ **Goal:** Determine the current status of national (Contact Point) websites containing cross-border healthcare information in all 27 Member States.

¹⁴ **Web Search approach:** A two-step approach was agreed for executing the Systematic Web Search:

- During step 1 of the two-step approach, the results of the initial Quick Scan for 4 Member States (Spain, Estonia, France and Germany) were used to perform the Quick Scan (refer to Appendix A.3 for the Quick Scan template that was used) for all 27 Member States. The result of this Quick Scan was a first overview of the available websites per Member State and a high level overview of the information provided through these websites.
 - In step 2a detailed Web Search template was created (see Appendix A.4) and the following types of websites per Member State were selected as target for the detailed Web Search:
 1. One website of a representative of the stakeholder type 'Member State': The website of the Ministry of Health was selected.
 2. One website of a representative of the stakeholder type 'Payer': For Beveridge systems this is the website of a central government organisation (such as the NHS or the Ministry of Social Security). For Bismarck systems this is the website of the main health insurance body (public or private insurance providers).
 3. One website of a representative of the stakeholder type 'Provider': This is a relevant regional website. In case of a regionally organised health system this is the website of one of such regional bodies. If the health system is organised nationally, we have looked if an example of a website of an Euregion organisation is present in the Member State, such as a region around the French/German border. If such a regional body did not exist a good practice website of a provider organisation (such as a healthcare provider / practitioner stakeholder organisation) was used.
 4. One website of a representative of the stakeholder type 'Patient': This is an example website of patients' organisations or some other informational website on the topic of cross-border healthcare. Therefore, the best of such sites we have seen during the Quick Scan (for some Member States we have walked through 5 or 6 of 'other' websites during the Quick Scan) was selected.
- ¹⁵ If, for a certain Member State, one or more of the abovementioned websites were not found, the contact lists of Patients' Organisations and Provider Organizations were used to find representative websites for these types. In some Member States no websites were found for a certain type of website.
- ¹⁶ In total 98 (=N) websites were analysed using the detailed Web Search template. The number of websites analysed per Member State is presented in table 1 below.

Member State	MS	# websites analysed	Member State	MS	# websites analysed
1. Austria	AT	3	15. Latvia	LV	4
2. Belgium	BE	3	16. Lithuania	LT	3
3. Bulgaria	BG	4	17. Luxembourg	LU	4
4. Cyprus	CY	4	18. Malta	MT	4
5. Czech	CZ	4	19. Netherlands	NL	3
6. Denmark	DK	4	20. Poland	PL	4
7. Estonia	EE	4	21. Portugal	PT	4
8. Finland	FI	4	22. Romania	RO	4
9. France	FR	4	23. Slovakia	SK	4
10. Germany	DE	4	24. Slovenia	SI	3
11. Greece	EL	2	25. Spain	SP	3
12. Hungary	HU	4	26. Sweden	SE	4
13. Ireland	IE	3	27. UK	UK	4
14. Italy	IT	3	Total websites analysed		98

Table 1: Number of websites analysed per Member State

17 **Web Search execution:** Using the detailed Web Search template (included in appendix A.4) we have analysed the following information properties:

- Available information.
- Level of detail of available information.
- Easiness to understand the available information.

18 These information properties were analysed for the different types of information (a to g) using the following operators:

- **A. Patients' safety and quality of healthcare**
 - A1. Recommendations for diagnosis or treatment.
 - A2. Quality statistics.
 - A3. Applicable laws, regulations and supervision regarding quality / patients' safety.
 - A4. Quality and safety standards / guidelines / certifications / qualifications.
- **B. Healthcare providers**
 - B1. Description of the health system.
 - B2. Statistics of providers.
 - B3. Directory of providers.
 - B4. Way of working / quality standards and conditions used by the providers.
 - B5. Compliance with quality standards by healthcare providers.
 - B6. Liability insurance of health professionals or similar arrangements.
- **C. Patients' rights**
 - C1. Patients' rights regarding medical records, treatment, privacy and security.
 - C2. Rights of own citizens to receive healthcare abroad.
 - C3. Rights of citizens of other Member States to receive healthcare in the Member State.

- **D. Procedures**
 - D1. Procedures for foreigners to receive healthcare in the Member State.
 - D2. Procedures for own citizens to receive healthcare abroad in other Member States.
 - D3. Complaint / redress procedures.
 - D4. Existing inter-country agreements / the EU cross-border healthcare Directive.
 - D5. Recognition of foreign prescriptions.
- **E. Contact details of contact points in other Member States**
 - E1. Links to contact points in other countries.
 - E2. Links to patients'organisation websites / other websites.
- **F. Accessibility**
 - F1. Access to health providers for persons with disabilities.
 - F2. Access to health services for citizens with limited financial resources.
- **G. Interaction with users**
 - G1. Frequently Asked Questions / digital assistant.
 - G2. Contact forms.
 - G3. Forum for patients.
 - G4. Sitemap.
 - G5. Other interactive features.
- **H. Indications on financial aspects**
 - H1. Price information.
 - H2. Reimbursement of healthcare received in the Member State.
 - H3. Entitlements to healthcare ("basket of healthcare subject to reimbursement").
 - H4. Different routes to get reimbursement in Beveridge systems and Bismarck systems.

19 For each of these operators it was verified whether this information was present on the 98 scanned websites. For the information property 'Available information', the following scores were possible:

- No.
- Yes - available online.
- Yes - if patient contacts organisation by phone.
- Yes - if patient contacts organisation by e-mail.
- Yes - on request if a (online) form is filled in and returned by the patient.
- Yes - but only in hard copy.

20 Furthermore, when information was available online, the level of detail of this information and the easiness to understand of this information was assessed on a high level. This was done for all information types except 'E. Contact details of contact points in other Member States' and 'G. Interaction with users' because such information properties are not applicable or are not a good indicator for the benefit patients would have.

21 For the information property 'Level of detail of available information', the following scores were possible:

- High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph).
- Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph).
- Low - Less than 10 sentences of information / No more than 1 level of information (paragraph).

22 For the information property ‘Easiness to understand the available information’, the following scores were possible:

- Difficult - Understandable after reading multiple times / searching for information on the page / looking back and forth / difficult language used.
- Moderate - Understandable after reading once or twice / some examples given / normal language used.
- Easy - Understandable after reading once / explained using clear examples / simple language used.

23 The execution of the detailed Web Search resulted in filled in templates for 98 scanned websites in 27 Member States. These structured templates were converted and loaded into a database for further analysis. The main conclusions of the analysis of the data obtained via the detailed Web Search are described in this chapter. Details with regard to the results of the Web Search are included in appendix A - Web Search details.

2.2. Web Search main conclusions

24 The figure below summarises the average presence of the information types² that are included in the Directive on these 98 websites.

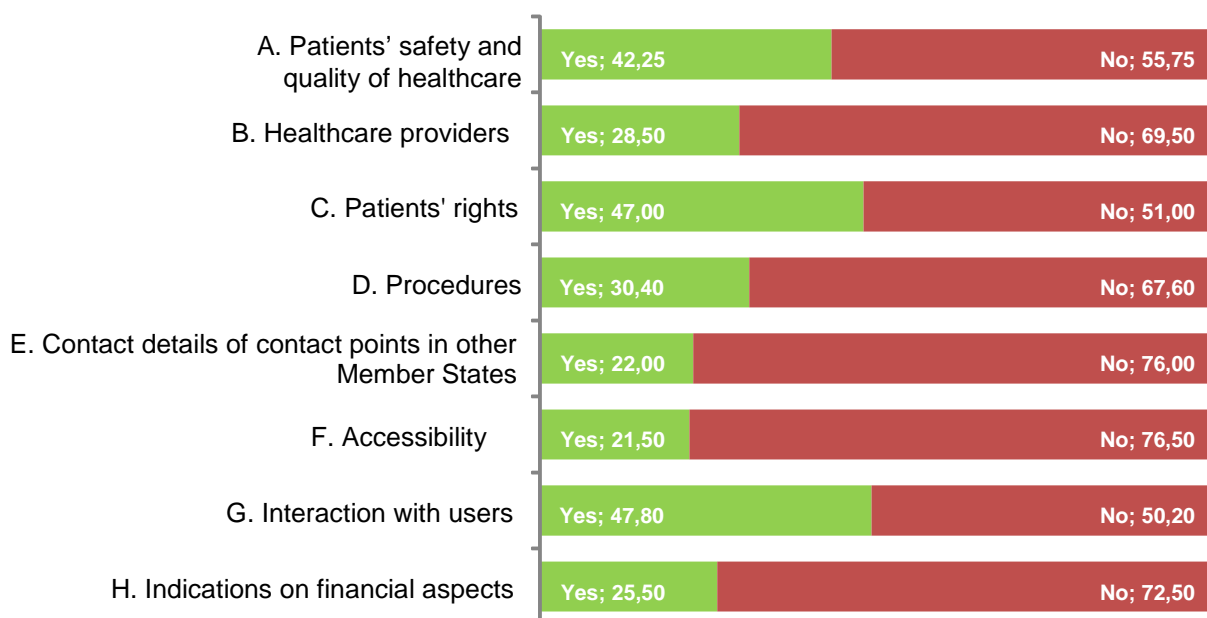


Figure 2: Average presence of types of information

25 Categorised by information type, the results³ of the detailed Web Search can be summarised as follows:

- *A. Patients' safety and quality of healthcare*: The most detailed information exists for applicable laws and regulations for cross-border healthcare and recommendations for diagnosis and treatment.

² Each information type (A to H) is operationalised using several operators (A: A1 to A4, B: B1 to B6, C: C1 to C3, D: D1 to D5, E: E1 and E2, F: F1 to F2, G: G1 to G5, H: H1 to H4 - see paragraph 18 for a full listing). During the detailed Web Search we have assessed if the information operators were available on the 98 scanned websites. This resulted in 'Yes' and 'No' answers for all 98 websites for each operator. The average number of the 98 websites that included each information type was calculated by dividing the sum of the total number of websites that did ('Yes') or did not ('No') include the underlying information operators by the number of operators for that information type.

For example: for information type 'A. Patient safety and quality of health care' there were 4 operators: 'A1. Recommendations for diagnosis or treatment', 'A2. Quality statistics', 'A3. Applicable laws, regulations and supervision regarding quality / patient safety' and 'A4. Quality and safety standards / guidelines / certifications / qualifications'. The sum of websites including the information operators ('Yes') was: 44 (A1) + 29 (A2) + 58 (A3) + 38 (A4) = 169. The average availability of the information type A therefore was: 169 / 4 = 42,25. These averages were calculated for all information types for both the 'Yes' and 'No' answers.

³ The results of the detailed Web Search have been delivered on 24 April 2012 to DG SANCO and were presented on the workshop meeting of 30 May 2012 with all Member States present. Based on feedback received no important omissions have been noted.

Recommendations for diagnosis and treatment would be a good information category to take as an example on how to provide information on cross-border healthcare in an understandable way.

- *B. Healthcare providers:* In line with information regarding quality, not much information is present regarding the way of working, compliance to quality standards and liability for healthcare providers. When such information is available, it has a fairly high level of detail but would be not easy to understand for patients. General health system information and directories of providers are available but not always on a detailed level and also not always easy to understand.
- *C. Patients' rights:* Information regarding patients' rights is available most of the time for own citizens but in fewer cases also for citizens from other Member States. Information that is present has a high level of detail in about half of the cases. Information for citizens from other Member States looks like to be less detailed but more easy to understand than information for own citizens.
- *D. Procedures:* The availability and the level of detail of the information regarding procedures seems to be in line with information about applicable laws and regulations (A) and patients' rights (C) for cross-border healthcare. However, information regarding the recognition of prescriptions from providers in other Member States is practically unavailable. When such information is available, it is not detailed. In contrast to the unavailability of liability information from providers, information regarding complaint and redress procedures for patients is fairly present. The information regarding procedures is less detailed for foreigners than for the own citizens of the Member States but is not easier to understand (in contrast to the information about patients' rights). Information regarding inter-country agreements is not easy to understand.
- *E. Contact details of contact points in other Member States:* Only in a small amount of cases the scanned websites are linked to other websites containing information about cross-border healthcare. The websites are mostly stand-alone websites, instead of being part of a network of linked websites regarding cross-border healthcare.
- *F. Accessibility:* Information regarding access to healthcare facilities for disabled people and citizens with limited financial resources is only present in about 1 out of 5 cases. When information regarding accessibility is available, in more than half of the cases, it is of medium or low level of detail. However, information for citizens with limited financial resources is easy to understand in most of the cases. This could be caused by tailoring the information provided to the patient group for which it is meant.
- *G. Interaction with users:* Frequently asked questions pages, contact forms and site maps are used in most cases to guide patients to the information they are looking for. Two-way interactive features, such as digital assistants, forums and chat boxes are not present in most of the cases. However, the most prevailing other interactive feature is social media integration. Patients can post the information they have found on their own social media pages so other friends/relatives/patients can benefit from it.
- *H. Indications on financial aspects:* Reimbursement and entitlement information is only present in about 1 out of 3 cases. This available information is categorised for different types of health systems for only a couple of websites. If present it is not of a high level of detail and not easy to understand in more or less half of the cases. An exception is the information on different routes for reimbursement for different types of health systems that is detailed and understandable in most of the cases.

²⁶ Please refer to appendix A for the full description of the results from the detailed Web Search.

2.2.1. Questions to be answered with the detailed Web Search

²⁷ The detailed Web Search aimed to answer the following questions:

- a. Whether such a contact point exists in each of the 27 Member States.
- b. Whether this contact point is easily reachable online and through the public webpage of the Ministry of Health of the respective Member State or, where relevant, of the regional authorities; whether the necessary information is fully accessible (part of the information only available physically?) and whether the information is accessible to disabled users.
- c. Who is the authority in charge of this contact point and of dispensing the information?
- d. Whether these online contact points are available only at a national level or also at regional level.
- e. Whether organisations of users are consulted for the provision of the information online and whether there is information on and contact details of patients' and or consumers' organisations on each of the online contact points.
- f. The general description of the structure of the contact point.
- g. Whether the following type of information is delivered to patients:

- *Patients' safety and quality of healthcare* (Standards and guidelines on safety and quality to be applied in the Member State of treatment, provisions on supervision and assessment of healthcare providers, healthcare providers that are subject to quality and safety standards, etc.).
 - *Procedures* (Complaints procedures nationally applicable and mechanism for seeking compensation, redress and/or remedies, legal and administrative options to settle disputes – also in the event of harm, etc).
 - *Healthcare providers* (general information, providers' right to provide services and any restrictions on its practice, existence of centres of expertise, reference to emergency centres, etc.);
 - *Patients' rights* (informed consent, data protection, medical records, charter of patients' rights, privacy and confidentiality, etc).
 - *Contact details* of contact points in other Member States.
 - *Interaction with users* (forum, 'frequently asked questions' section, etc.).
 - *Indications on financial aspects* (tariffs, fees, conditions and level of reimbursements, etc).
- h. Salient features of how this information from g. is presented.
- i. Whether any important information appears to be clearly missing on the website of each of the contact points.
- j. Any extra activities of the contact point (advice to patients, etc.). This includes information on whether and – if so – how contact point effectiveness is measured, particularly in terms of satisfaction, consistency in choice and understanding of choice from the patient perspective.

28 The index table below shows where the answers to the above mentioned questions can be found:

Question	Answer can be found in:
a.	Table 9 - appendix A.1
b.	Table 9 - appendix A.1: rows 'Easiness to reach', 'Search path Item', 'Accessibility Features'
c.	Table 9 - appendix A.1: row 'Name of the organisation'
d.	Table 9 - appendix A.1: row 'Scope'
e.	Table 9 - appendix A.1: row 'Data source sponsors' Tables in appendix A.1.1: rows 'E.1' and 'E.2'
f.	Tables in appendix A.2: row 'Information about the organisation'
g.	Tables in appendix A.1.1
h.	Table 9 - appendix A.1: row 'Remarkable features'
i.	Table 9 - appendix A.1: row 'Important information that appears to be clearly missing'
j.	Table 9 - appendix A.1: row 'Information on how contact point effectiveness is measured'

Table 2: Index table of answer for detailed Web Search questions

2.3. Web Search limitations

29 With regard to the results of the Web Search, please note that although we have made extensive efforts to be complete, we cannot guarantee completeness of all 27 Member State websites. This due to the following reasons:

- We have performed the Web Search in the period 12 December 2011 to 23 January 2012. Website changes may have occurred during or after the collection of our data.
- The total time available for the Web Search for 1 Member State was limited to 4 hours due to research constraints. A longer time period might have resulted in more results, however an average EU citizen would probably spend less time in searching the internet before concluding about the availability of cross-border healthcare information.
- We are not able to state with certainty that websites for NCPs are not available, instead we can only state that we have not been able to find them.
- The Web Search was limited to online research. We have not spoken or actively engaged contact with organisations to ask whether an NCP website does exist. The results of our data gathering have not been verified with the website owners.
- Due to the fact that the Web Search has been performed from the perspective of 'an informed patient', i.e. already informed about cross-border healthcare and therefore able to search more targeted than a 'not informed patient', results might not be fully representative for 'regular' citizens of the EU.

2.4. Stakeholder Consultation methodology

- 30 **Goal:** The objective of this survey is to support a feasibility study for a best practice based approach to NCPs.
- 31 **Target audience:** Representatives of patients, healthcare providers and payers were given the opportunity to make recommendations on implementing NCPs over Europe. A separation between ‘information providers’ (healthcare providers and healthcare payers) and ‘patients’ organisations’ was made. These stakeholder categories received different surveys (included in appendix B.2).
- 32 **Survey construction:** The survey was constructed by subject matter experts of PwC and reviewed by DG SANCO. 568 contacts received an invitation by e-mail with attached to it a letter of recommendation from DG SANCO with a link to the survey. Results were not linked to a specific address and cannot be traced to individual respondents in order to obtain frank and unbiased answers.
- 33 **Target approach:** The minimum acceptable number of responses for the survey was 30 respondents in 10 different Member States. In order to reach this target two mailing batches were sent to respondents. The first batch of 144 invites was sent on 14 December 2011, with reminders sent on 9 January 2012 and 20 January 2012. The first batch contained hand-picked contacts that were taken from a larger list. The selection was intended to maximize the response rate. As the target was not reached with this initial mailing, a second batch of invites was sent. This included all available contacts that fit one of the categories ‘healthcare provider’, ‘healthcare payers’ (together defined as ‘information providers’) or ‘patients’ organisations’. The second batch was sent on 18 January 2012. A reminder was sent on 24 January 2012.
- 34 **Survey approach:** The survey was constructed using mainly closed questions to provide consistency and the possibility to do comparative analyses. Additionally, open questions were added to give respondents sufficient room to describe their specific situation and to provide context. The survey was designed to prevent socially acceptable answers and to be completely anonymous (although some respondents provided identifying information in the open questions).
- 35 **Response rate:** The total response rate for the survey was 7% (40 respondents out of a total of 568). The response rates for the categories differed substantially and the variation in response rate is not easily explained.

Category	Response rate %	(respondents / total)
Patients’ organisations	6,6 %	(13/197)
Healthcare providers	10,4 %	(26/259)
Healthcare payers	0,9 %	(1/112)
Total	7 %	(40/568)

Table 3: Response rates for categories of representatives

- 36 Included below are the survey responses per Member State. The total amounts to 40 responses across 12 Member States.

Member State	# patients’ organisations	# provider / payer organisations
1 Austria	•	2
2 Belgium	•	3
3 Bulgaria		
4 Cyprus		
5 Czech Republic		
6 Denmark		
7 Estonia	•	1
8 Finland	•	1
9 France	•	2
10 Germany	•	1
11 Greece		
12 Hungary		
13 Ireland	•	3

Member State	# patients' organisations	# provider / payer organisations
14 Italy		
15 Latvia		
16 Lithuania		
17 Luxembourg		
18 Malta	• 3	7
19 Netherlands		
20 Poland		
21 Portugal		
22 Romania	• 1	
23 Slovakia		
24 Slovenia	•	2
25 Spain	• 1	
26 Sweden		
27 United Kingdom	• 1	5
Total	13	27

Table 4: Survey responses per Member State

2.5. Stakeholder Consultation main conclusions

- 37 Representatives of patients, healthcare providers and payers were given the opportunity to make recommendations on implementing NCPs over Europe.
- 38 The results from the Stakeholder Consultation can be summarised as follows:
- Information providers estimate information availability higher than patients' organisations.
 - Information providers estimate the current demand for information to be low, but beneficial.
 - Patients' organisations consider information to be beneficial, but are not aware of where to obtain it.
 - Patients' organisations' and information providers' opinions only differ slightly on the positive effects of information usage.
 - 63% of information providers is willing to disclose the necessary information.
 - Information providers see the benefits of NCPs, but experience barriers in providing information.
 - Some issues are mentioned on the reliability of data – and the liability for information providers.
 - Patients' organisations prefer 'conventional' means of obtaining information from NCPs.
- 39 In addition to these conclusions, patients' organisations and information providers have some ideas for providing additional information (other information than already included in the Directive) that will benefit cross-border healthcare. For instance, information on language capabilities / facilities at healthcare providers would definitely benefit patients looking for cross-border healthcare. Also, comparative information about the difficulty of the procedures for receiving cross-border healthcare in the different Member States would be very beneficial for patients when choosing in which Member State they would like to receive needed medical care. Furthermore, information providers indicate that the success of NCPs for cross-border healthcare would depend on the interconnection between different websites of information providers.
- 40 Please refer to appendix B for the detailed description of the results from the Stakeholder Consultation.

2.6. Stakeholder Consultation limitations

- 41 With regard to the results of the Stakeholder Consultation, please note that although we have made extensive efforts to obtain a representative set of survey responses, the following limitations are applicable:
- Contact lists provided by DG SANCO and PwC network contacts were used to create a contact list.
 - The final contact list included contact details for 18 of the 27 Member States⁴.

⁴ Austria, Belgium, Bulgaria, Denmark, Estonia, Finland, France, Germany, Hungary, Ireland, Italy, Luxembourg, Malta, Netherlands, Poland, Portugal, Romania, Spain, Sweden, United Kingdom.

-
- Due to the explorative nature of our research, the survey results were only assessed and analysed in a qualitative manner, no statistical analysis is performed. Furthermore, no statistical sampling has been used during the selection of contacts that were invited to fill in the survey. We did try to prevent overresponse for individual Member States compared to the average response by selecting the most appropriate contacts from the available contact lists. However, for some countries only a few contact persons were identified so underresponse for individual Member States compared to the average response was possible.
 - Although the usage of closed questions resulted in standardised responses, we were not able to track the respondents if the answers to open questions were of insufficient quality due to the anonymous character of the survey.

3. Pilot website contents

42 This chapter describes the results for Phase 3 ‘Pilot project of some web pages of a National Contact Point website’.

3.1. Lessons learned (content) from the Web Search and Stakeholder Consultation

43 From the Web Search and Stakeholder Consultation results, we have identified the following lessons learned regarding the content of an NCP website:

Nr	Lesson learned	Comments
3.1.1	Information on the way of working, compliance to quality standards, recognition of prescriptions, inter-country agreements, liability, general health system information, directories of providers and accessibility of provider locations should be available in more detail and clarity.	All information described has been included in the Types of information/sitemap. NCPs should make sure that they provide this information in good detail and clarity
3.1.2	A good example can be found in the way currently recommendations for diagnosis and treatment are given via the scanned websites.	Information about diagnosis and treatment is mostly present in a medium or high level of detail while it is still understandable. For examples, refer to the following websites included in appendix A - Web Search details: DK2, SE2, SE4 and UK3.
3.1.3	Information regarding patients’ rights and procedures should be available in same detail and clarity for own and foreign EU citizens.	Information regarding patients’ rights and procedures is included in the sitemap for both EU citizens and non-EU citizens. For examples, refer to the following websites included in appendix A - Web Search details: BG1, FR2 and PL2.
3.1.4	For liability information a proper level of detail should be found to address concerns of both patients and providers.	Liability insurance of health professionals is included in the sitemap and also complaint procedures are included. For examples, refer to the following websites included in appendix A - Web Search details: FR1, RO2, RO5 and UK10.
3.1.5	Next to the information types stated in the Directive also comparative information on procedures and language capabilities in different Member States should be provided.	Comparative information on procedures and language capabilities would require an overview across all NCPs and usage of standardized data-items in order to make a good comparison.

3.2. Design principles (functionality) from the Web Search and Stakeholder Consultation

44 The lessons learned regarding the design principles for an NCP website from the Web Search and Stakeholder Consultation results can be summarized as follows:

Nr	Lesson learned	Comments
3.2.1	Information should be tailored to specific user groups (for example disabled and citizens with limited financial resources).	Section 3 of the sitemap (‘Healthcare in [Member State]’) can take up information for specific user groups such as citizens with limited financial resources (3.2.3.4) and information on access to healthcare for disabled patients (3.4.1.2). For examples, refer to the following websites included in appendix A - Web Search details: DE5 and

		UK3.
3.2.2	Citizens should be able to follow a provided set of actions in order to get their cross-border healthcare reimbursed / approved).	Reimbursement information is included in the sitemap for both citizens of and visitors to a Member State.
3.2.3	Information should be easy to find on the public internet using common sense search terms.	This requires Search Engine Optimisation for the website and is taken up as a recommendation in the Functional and technical specifications.
3.2.4	There should be links to the NCP websites on the websites of the Ministries of Health of the Member States. Interconnection between NCP websites is essential.	Links to other NCP websites are included in Section 4.4 of the sitemap (Links to NCP websites on cross-border healthcare in other Member States).
3.2.5	Citizens should be able to get online answers to their questions about cross-border healthcare.	Section 8 of the sitemap (Contact) provides the possibility of setting out questions to the NCP. In addition, section 7 (FAQ) should provide answers for the most frequently asked questions. For an example, refer to the following website included in appendix A - Web Search details: PL7.
3.2.6	Information should be provided using multi-channel approaches (online, information desk, call centre, e-mail, and physical leaflets).	Although the results from the structured web search showed that websites are good information sources, the stakeholder consultation results show that patients are still appreciating direct contact with employees of an NCP. Within the scope of this report, we have included the following channels in the sitemap of the pilot website: online (website), helpline and contact through the website (forms).

3.3. Types of information/sitemap

45 Based on the Directive, we have developed an example sitemap for a website on cross-border healthcare. This website is intended to inform a large audience (potentially all EU citizens) on any topic regarding cross-border healthcare. The sitemap provides for a general top-down view of the overall site contents. Specifically, it contains an overview of:

- Possible topics to include.
- A suggestion for the hierarchical classification.

46 Please note that the following principles have been used for this example sitemap for a website on cross-border healthcare:

- The example sitemap has been developed aiming at two types of visitors:
 1. Patients seeking information on cross-border healthcare in the Member State where they are living (section 4. 'Going abroad').
 2. Patients seeking information on cross-border healthcare in a Member State different from their home Member State (section 3. 'Healthcare in [Member State]' and section 5. 'Healthcare for visitors to [Member State]').

The benefit of this approach is that both types of visitors are clearly targeted by the different sections. As a result of this approach, it should be noted that there will be some overlap of information provided in the different sections.

- Included in the sitemap are level 2 (e.g. 3.1) necessity ratings with a value of either 'mandated' or 'recommended'. These necessity ratings have been determined by analysing the 'mandated' items as stated in the Directive and rating these accordingly as 'mandated'. A cross-link reference to the corresponding Directive article is included in the column 'reference'. All other items (that are not explicitly mentioned in the Directive but would be beneficial for EU citizens) have been rated 'recommended'.
- Since the 'mandated' items are often on a high level, we have proposed (level 3) sub-items to make the high level items more operational.
- When an (level 2) item has been rated mandated, our (level 3) sub-items have been rated mandated as well. It is up to each NCP to assess to what extent they can/want to use the proposed operational (level 3) sub-items.

47 Since the goal of the website is to inform a large audience (all EU citizens) on any topic regarding cross-border healthcare, the site can get rather large.

No	Section	Subsection	Description	Necessity rating	Reference	
Home page						
h	4-column based, colourful layout with a large graphical slider with featured content links	h1	Home button	Redirects to homepage.	-	-
		h2	Slider with featured content links	Interactive slider containing links to content pages of this NCP.	-	-
		h3	News column	News column section in which news items regarding cross-border healthcare and the NCP are presented.	-	-
		h4	Frequently Asked Questions and Most Visited pages column	A Frequently Asked Questions and Most Visited Pages area in which most frequent asked questions are presented including answers and an overview of most visited pages of the NCP.	-	-
		h5	About this website	Background information about the website such as the organisation responsible for the website, the origin of information presented on the website, etc.	-	-
		h6	Quick Links	Quick links area containing links to content pages (see Content pages).	-	-
Content pages						
1	Home	1	Home	Redirects to home page.	-	-
2	About	2.1	About this National Contact Point	General information about the NCP such as responsible organisation, cooperation with other contact points, etc.	Recommended	-
		2.2	History	Background information about the NCP such as the development, need and evolution of the NCP, etc.	Recommended	-
		2.3	Mission and organisation	NCP mission and organisation.	Recommended	-
		2.4	Legal framework	Legal framework in which NCP operates.	Recommended	-
		2.5	Figures	Reports on number of visits, rating of pages, availability, number of user accounts, number of comments, etc.	Recommended	-
		2.5.1	Site statistics			
2.6	Activity report		This includes information on recent activities of the NCP such as stakeholder consultation on the information provided and how the NCP	Recommended	-	

No	Section	Subsection	Description	Necessity rating	Reference	
			effectiveness is measured.			
		2.7	Contact us	Redirects to section 8 - Contact.	Recommended	-
		2.8	Media library	Media Library containing video's regarding cross-border healthcare. This could be implemented used means like an YouTube channel.	Recommended	-
		2.8.1	Video			
		2.8.2	Links to videos			
		2.9	Terms and conditions	Information about the terms and conditions that apply to the NCP such as intellectual property rights, disclaimers, third party websites, liability, remedies, policy regarding posting comments on website, data storage, cookies, etc.	Recommended	-
		2.9.1	Terms of use			
		2.9.2	Comments policy			
		2.9.3	Privacy policy			
3	Healthcare in [Member State]	3.1	Health system description	Description of the health system in [Member State].	Recommended	-
		3.1.1	Healthcare and healthcare-related providers	Overview of healthcare providers and services provided such as (if applicable in [Member State] and not limited to) General physician, Specialists, Emergencies, Hospital services, Dental services, Pharmacies, Eye care services, Mental health services, Sexual health services, Social care services. For each type of provider / services type a subpage could be set-up containing information such as contact information, address, services provided by healthcare provider / organisation, information on how to make an appointment, etc.		
		3.1.2	Directory of healthcare services	Includes search functionality for finding specific (types of) healthcare providers in [Member State].		
		3.1.3	Statistics on healthcare services	Includes overviews of healthcare service statistics by type of healthcare provider (could be made available via automatic links to other information sources / websites). Statistics could be provided on topics as treatment,		

No	Section	Subsection	Description	Necessity rating	Reference
			accidents/deaths and emergency, number of available beds / treatment slots, amount of no-show / cancelled treatment, waiting times and lists / delays in treatment, amount of primary care, number of complaints, etc.		
		3.1.4	Healthcare funding		
		3.1.4.1	Public health insurance (including third party payment system)		
		3.1.4.2	Private health insurances		
		3.1.4.3	Public and private practise		
		3.2	Reimbursement	Mandated	CHAPTER II, Article 6.4
		3.2.1	Basket of benefits		
		3.2.2	Entitlements for medical acts		
		3.2.3	Reimbursement and administrative formalities		
		3.2.3.1	What is reimbursed and how much		
		3.2.3.2	What is not to be reimbursed		
		3.2.3.3	How to be reimbursed		
		3.2.3.4	Special schemes for reimbursement		
		3.3	Quality and safety of healthcare	Mandated	CHAPTER II, Article 4.2(a)
		3.3.1	National laws, regulations and policies regarding patient safety		
		3.3.2	Reports on patients safety		
		3.3.3	Medical certifications and qualifications		
		3.3.4	Description of national quality plans		
		3.3.5	Links to other institutions in relation with patient safety		
		3.4	Right to practice and restrictions to provide healthcare services	Mandated	CHAPTER II, Article 6.3
			Information regarding providers restricted to practice		

No	Section	Subsection	Description	Necessity rating	Reference	
		3.5	Liability insurance of health professionals	Information regarding insurance that providers have in case of medical errors.	Recommended	-
		3.6	Patients rights	Information regarding patients' rights in [Member State], an overview of patients' rights in [Member State] including patients' right to choose his / her physician, receive information on treatment and quality and safety of healthcare in [Member State] (mortality, etc.), refuse treatment, privacy, access to (electronic) medical record, consent and sharing information, complaint procedures (in case of harm or reimbursement issues) etc.	Mandated	CHAPTER II, Article 6.3
		3.6.1	Patients' rights			
		3.6.1.1	Access to healthcare			
		3.6.1.2	Access to hospitals for disabled patients			
		3.6.1.3	Complaint and redress procedures			
		3.6.2	Access to your data			
		3.6.2.1	Access to (electronic) medical records			
		3.6.2.2	Patient consent for sharing and exchanging medical information			
		3.6.3	Access to information regarding safety and quality of healthcare			
		3.6.4	Complaint procedures			
		3.6.4.1	Complaint procedures in case of harm to patients while providing healthcare			
		3.6.4.2	Complaint procedures in case of reimbursement issue			
		3.6.4.3	Redress procedures			
		3.7	Links to patients organisations	Links to patient Organisations in [Member State].	Recommended	-
		3.8	Links to national and European law	Links to National [Member State] and European law.	Recommended	-
4	Going abroad	4.1	Emergency care in the European Union	Information for [Member State] citizens regarding healthcare abroad and their rights in case of emergency care. Also information regarding EHIC (scope and coverage) could be described in this section.	Mandated	CHAPTER II, Article 6.4
		4.1.1	Your rights: Directive 2011/24/EU			
		4.1.2	Your rights: European Health Insurance Card (EHIC) and European / national legislation ⁵			
		4.1.3	Scope of coverage of EHIC			
		4.1.4	Procedure to obtain EHIC			
		4.1.5	Reimbursement of healthcare services			

⁵ Such as the Regulation (EC) No 883/2004 of the European Parliament and of the Council of 29 April 2004 on the coordination of social security systems .

No	Section	Subsection	Description	Necessity rating	Reference	
		4.2	Planned care in the European Union	Information for [Member State] citizens regarding planned care in other Member States such as a high level description of the Directive, forms and certificates that are necessary, information on care that is subject to prior authorisation etc.	Mandated	CHAPTER II, Article 6.4
		4.2.1	Your rights (Directive 2011/24/EU)			
		4.2.2	Your rights: European / national legislation ⁵			
		4.2.3	Procedure (forms and certificates to have/download) and care subject to prior authorisation			
		4.2.4	Reimbursement of healthcare services			
		4.3	Receiving care outside the European Union	Information on receiving care in countries outside the EU and the description of the bilateral agreements that have been made between the [Member State] and other countries outside the EU.	Recommended	-
		4.3.1	Your rights			
		4.3.2	Bilateral agreements: countries, conditions			
		4.3.3	Procedures			
		4.3.4	Reimbursement of healthcare services			
		4.4	Links to NCP websites on cross-border healthcare in other Member States	Information on NCP websites on cross-border healthcare in other Member States.	Mandated	CHAPTER II, Article 6.2
5	Healthcare for visitors to [Member State]	5.1	You are an EU citizen	Information for EU citizens regarding receiving care in [Member State] in case of emergency or planned care.	Mandated	CHAPTER II, Article 6.4
		5.1.1	Receive emergency care			
		5.1.1.1	Your rights: Directive 2011/24/EU			
		5.1.1.2	Your rights: European Health Insurance Card (EHIC) and European / national legislation			
		5.1.1.3	Scope of coverage of EHIC			
		5.1.1.4	Procedure to obtain EHIC			
		5.1.1.5	Reimbursement of healthcare services			
		5.1.2	Receive planned care			
		5.1.2.1	Your rights: Directive 2011/24/EU			
		5.1.2.2	Your rights: European / national legislation			
		5.1.2.3	Procedure (forms and certificates to have / download)			
		5.1.2.4	Reimbursement of healthcare services			
		5.2	Your are not an EU citizen	Information for Non EU citizens on receiving care in [Member State] such	Recommended	-
		5.2.1	Your rights			

No	Section	Subsection	Description	Necessity rating	Reference
		5.2.2	Bilateral agreements: countries, conditions		
		5.2.3	Procedures		
		5.2.4	Reimbursement of healthcare services		
6	News	6.1	News in Public Health / Major findings	Recommended	-
		6.2	Access to publications	Recommended	-
		6.2.1	Reports		
		6.2.2	Guides		
		6.2.3	Statistics		
		6.3	Registration to receive e-newsletters	Recommended	-
		6.4	Press contact	Recommended	-
7	FAQ	7.1	Top 5 FAQ	Recommended	-
		7.2	FAQ arranged per topic	Recommended	-
8	Contact	8.1	Contact (contact form)	Recommended	-
		8.1.1	Contact information: address, phone, fax, e-mail, text field for message		
		8.1.2	Question on healthcare in [NCP country]		
		8.1.3	Question on reimbursement policy and eligible care		
		8.1.4	Question on the European Health Insurance Card and healthcare abroad		
		8.1.5	Comments on services provided by healthcare professionals		
		8.1.6	Comments on reimbursement issues		
		8.1.7	Complaint form		
		8.1.8	Feedback on inaccuracy or technical issue of websites		
		8.1.9	Other question / request		
		8.1.10	Suggestions		
		8.1.11	Job / Voluntary job career website		

No	Section	Subsection	Description	Necessity rating	Reference	
9	Helpline	9.1	National Contact Point Helpline	NCP Hotline contact information for the purpose of supporting NCP website visitors.	Recommended	-
		9.2	Services feedback	Contact information for visitors of NCP Website for service feedback.	Recommended	-
		9.3	Technical problems / dead link	Contact form to report a dead link on website / Technical problems.	Recommended	-
10	Sitemap	10.1	Sitemap	Sitemap of website.	Recommended	-
11	External links	11.1	Links to other national websites	Links to special interest groups, patient organisations, healthcare authorities / Inspectorate, and other relevant national websites.	Recommended	-
		11.1.1	National associations / federations /EU federations			
		11.1.2	National health policy			
		11.1.4	Links to best-in / specialist healthcare establishments			
		11.2	Links to European websites and other country websites	Links to other EU websites regarding cross-border healthcare and EU websites of interest.	Recommended	-
		11.2.1	EU associations / federations			
		11.2.2	EU health policies			
		11.2.3	EU Patient organisations			
		11.2.4	World-class healthcare establishments			
11.3	Links to social media of NCP	Links to social media channels of the NCP.	Recommended	-		
11.4	Share (Link to Twitter, Facebook, Digg, Reddit, etc.)	Social media that visitors can use to share information on / regarding the NCP.	Recommended	-		

3.4. Languages that should be used

- 48 A website on cross-border healthcare within the EU should provide the information in several languages. In order to make the information on cross-border healthcare accessible for both own citizens and visitors from other Member States we recommend to use other relevant (frequently used by groups of citizens or visitors) languages next to the native one.
- 49 The Recital 48 of the Directive mentions that any of the official languages of the Member State in which the Contact Points are situated could be used as the primary language to provide cross-border healthcare information.
- 50 As additional languages for citizens from other EU Member States, any of the 23 official languages of the EU could be used to provide the cross-border healthcare information. These languages are: Bulgarian, Czech, Danish, Dutch, English, Estonian, Finnish, French, German, Greek, Hungarian, Irish, Italian, Latvian, Lithuanian, Maltese, Polish, Portuguese, Romanian, Slovak, Slovene, Spanish, Swedish. In practice only three are used most often: English, French and German.
- 51 Moreover, the use of additional languages to provide cross-border healthcare in a certain Member State should be assessed based on specific (regional) needs. For example within Spain, aside Spanish, other languages as Catalan, Galician and Basque are used as well.
- 52 Additionally, non-EU languages could be used for visitors from outside of the EU. For instance, again based on specific (regional) needs, Arabic languages could also be considered. Some websites that were scanned during the structured Web Search included furthermore information in languages such as Russian, Turkish, and Vietnamese.

3.5. Difficulty of information (understandability)

- 53 In the execution of the structured Web Search, the difficulty of information was assessed using the following classes:
- Difficult - Understandable after reading multiple times / searching for information on the page / looking back and forth / difficult language used.
 - Moderate - Understandable after reading once or twice / some examples given / normal language used.
 - Easy - Understandable after reading once / explained using clear examples / simple language used.
- 54 It should be noted that the structured Web Search was executed by staff having received higher education. Therefore, we recommend assessing the difficulty of the information provided by the NCP website by testing it with EU citizens and patients. In many cases governments are familiar with testing the information provided by them to the public by using short surveys, often executed by dedicated communication marketing consulting companies.
- 55 We additionally recommend involving at least patient organizations in testing the difficulty of the cross-border healthcare information that will be provided via the NCP website. During the performance of the structured Web Search, in about only 1 out of 5 cases, EU citizens / patients / patient organizations were involved in gathering and testing the information provided online. In some more cases, the website provides means for visitors to submit comments and suggestions on the availability and quality of information present on the website.

3.6. Functional and technical specifications


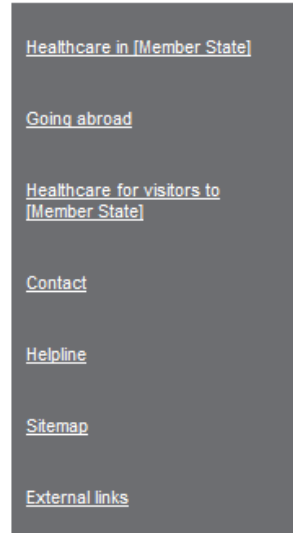
- 56 This chapter contains basic guidance for the functional and technical specifications consisting of usability and accessibility features and high level technical specifications of the (pilot) website. These items can be used as a first reference when setting up an NCP website.
- 57 Note that the usability and accessibility features are closely related; their goals, approaches, and guidelines overlap significantly. It is most effective to address them together in many situations, especially when developing websites.
- 58 There are many factors to consider when designing a website which go beyond the scope of this research. This section aims to address the most important recommendations for usability and accessibility.
- 59 Please note that the following principles have been used for the functional and technical specifications:
- As with the example sitemap, we have also included necessity ratings for the functional and technical specifications. Since the Directive does not prescribe these specifications, the values ‘Must-have’ and ‘Nice-to-have’ are used to indicate which items are ‘Must-have’ features (essential items for the website) and ‘Nice-to-have’ features (less essential items) in our opinion.
 - It is up to each NCP to assess to what extent they can/want to use the proposed functional and technical specifications.






3.6.1. Usability features

- 60 Listed below are our most important recommendations for usability, including visual examples based upon the pilot website where applicable.

Item	Description	Necessity rating	Visual example
Home page with different design, showing content parts from the website.	The home page is the first page that user will see when they go to the main URL. It should present in an immediate view the most important information that is relevant to the visitor. The home page should have a different design then other pages: - The pilot website has a 4-column based, colourful layout with a large graphical slider with featured content links. - Other pages use a 3-column based layout with navigation on the left and ‘related info’ on the right. There are less colours used on the homepage, mainly black text on a white background, in order to optimise reading.	Must-have	See a mock-up from the pilot website in 3.7.1 - Home page


Website description	The start page should immediately make clear what the website is about.	Must-have	<p>About this website</p> <p>This website provides information about cross-border healthcare for all citizens in [Member State] and for all visitors to [member state]</p> <p>Read more</p>
Frequently Asked Question (FAQ)	<p>Frequently asked questions are listed questions and answers, all supposed to be commonly asked in some context, and pertaining to a particular topic. Depending on usage, the term may refer specifically to a single frequently asked question, or to an assembled list of many questions and their answers.</p> <p>On the pilot website, the FAQ are directly accessible from the home page.</p>	Must-have	<p>FAQ and Most Visited</p> <p>Top 5 of Frequently Asked Questions</p> <ol style="list-style-type: none"> How can I tell if my surgery is reimbursed? Where can I see my rights as a patient? Who can I contact for questions? Is there information of the quality of healthcare? Where can I find an overview of National Contact Points for cross-border healthcare?
Most Visited pages	<p>Overview of Most Visited pages indicates what other visitors are searching for. Most Visited pages can automatically be determined based upon page statistics.</p> <p>On the pilot website, the Most Visited pages are directly accessible from the home page.</p>	Nice-to-have	<p>Top 5 of pages Most Visited</p> <ol style="list-style-type: none"> Receiving planned care in the European Union Healthcare for visitors to [Member State] About this National Contact Point Patient rights Links to NCP websites on cross-border healthcare in other Member States

News items	News items can provide for the latest website updates and can be used to address specific 'hot topic' items.	Must-have	 <p>News</p> <p>25 May 2012 - Links to other NCP's updated Lees..</p> <p>25 May 2012 Lees..</p> <p>24 May 2012 - Statistics on healthcare services updated Lees..</p>
Sitemap	A site map is one page which lists all, or most of the pages on a web site, typically organized in hierarchical fashion. It helps in providing a clear index of the information present on the website which then also enables visitors and search engine bots to find pages on the site.	Must-have	See Sitemap
Quick links (on the home page)	Quick links provide direct access to the main topic pages. Within the main topic pages, different subpages are used to make a clear distinction in the information offered.	Nice-to-have	 <p>Quick Links</p> <p>Healthcare in [Member State]</p> <p>Going abroad</p> <p>Healthcare for visitors to [Member State]</p> <p>Contact</p> <p>Helpline</p> <p>Sitemap</p> <p>External links</p>


Short, logical paths + 'you are here' indication	The content of the site should be accessible from short, logical paths. On the pilot website, paths have a maximum depth of 4 levels and the current level ('you are here') is always shown in the navigational pane on the left.	Must-have	 <p>Home</p> <p>About</p> <p>Healthcare in [Member State] Level 1</p> <p>Health system description Level 2</p> <p>Healthcare and healthcare-related providers</p> <p>Directory of healthcare services</p> <p>Statistics on healthcare services</p> <p>Healthcare funding Level 3</p> <p>Public health insurance (including third party payment system) Level 4</p>
Logo and website title	The website should have a clear logo and a website title stating what the website is about. The logo should link to the homepage (as in the pilot website).	Must-have	 <p>[Member State] National Contact Point on cross-border healthcare</p>
Home link	The link Home should exist on all pages except the homepage (as in the pilot website).	Must-have	 <p>Home</p> <p>About</p>
Search box (visible on every page)	A large search box should always be visible as it supports visitors in finding the information they need.	Must-have	
Contact hyperlink clearly visible	It should be clear to visitors where and how they can get into contact with the NCP. On the pilot website, contact is directly accessible from the 'Quick Links' on the home page and on a 1 st level from the navigational pane on the left on the content pages.	Must-have	 <p>Contact</p>

3.6.2. Accessibility features

- ⁶¹ Accessibility is about ensuring an equivalent user experience for people with disabilities, including people with age-related impairments. For the Web, accessibility means that people with disabilities can perceive, understand, navigate, and interact with websites and tools, and that they can contribute equally without barriers⁶.
- ⁶² Listed below are our most important recommendations for accessibility, including visual examples based upon the pilot website where applicable.

Item	Description	Necessity rating	Visual example
Language translation and usage	<p>A website on cross-border healthcare within the EU should provide the information in several languages. In order to make the information on cross-border healthcare accessible for both own citizens and visitors from other Member States we recommend to use other relevant (frequently used by groups of citizens or visitors) languages next to the native one (see also paragraph 3.4 ‘Languages that should be used’).</p> <p>On the pilot website, several indicative Member State flags are shown at the top of each web page which, when clicked upon, are intended to show the page in the associated language.</p> <p>Note: It should be reminded that the nature of a website on cross-border healthcare demands for a very accurate translation.</p> <p>The websites should be understandable by anyone, including people with cognitive disabilities, poor readers and younger web users. Jargon and technical terms should be avoided, unless necessary for the target visitors. When they cannot be avoided they should be defined if the meaning is not clear from context.</p>	Must-have	

⁶ From The World Wide Web Consortium (W3C). W3C is an international community where Member organizations, a full-time staff, and the public work together to develop Web standards.

Item	Description	Necessity rating	Visual example
Website localization ⁷	On top of language translation the website might even be localized: adapting the website to a specific region.	Nice-to-have	
Adjustable font size	Visitors should be able to select different font-sizes, supporting those visually impaired.	Must-have	
Compatibility with screen readers (NVDA, JAWS, Browse aloud)	<p>Websites can be read out aloud by a humanoid voice, enabling visitors with low literacy and reading skills, dyslexia and mild visual impairments.</p> <p>This often works by speaking website content aloud, while highlighting the word as it is read and visitors can magnify text as required. Usually you can move the cursor over words which are then spoken aloud.</p> <p>As an example: alternatives for images should be used (in the form of ALT) by means of a textual description. The ALT attribute is used in documents to specify alternative text that is to be rendered when the element to which it is applied cannot be rendered. It is also used by 'screen reader' software so that a person who is listening to the content of a webpage (for instance, a person who is blind) can interact with this element.</p>	Nice-to-have	
Responsive design	A responsive design should be used enabling users across a broad range of devices and browsers to have access to a single source of content (laid out to	Must-have	

⁷ Although it is sometimes difficult to draw the limits between translation and localization, in general localization addresses significant, non-textual components of products or services. In addition to translation (and, therefore, grammar and spelling issues that vary from place to place where the same language is spoken), the localization process might include adapting graphics; adopting local currencies; using proper forms for dates, addresses and phone numbers; the choices of colours; and many other details. All these changes aim to recognize local sensitivities, avoid conflict with local culture and habits, and enter the local market by merging into its needs and desires (source: Wikipedia).

Item	Description	Necessity rating	Visual example
	be easy to read and navigate with a minimum of resizing, panning, and scrolling). The website design should therefore accommodate mobile versions given the increasing use of mobile internet devices such as smart phones, tablet computers and laptops / nettops. Refer to the technical papers section of the W3C website for examples.		
Information on accesskey attribute /shortcuts	The accesskey attribute simplifies keyboard navigation and provides for keyboard shortcuts, enabling visitors with e.g. severe arthritis, carpal tunnel syndrome, multiple sclerosis who often have trouble using a mouse.	Nice-to-have	
Social media integration	Enables website visitors to 'like' and share information they found via Twitter, Facebook, and other social media websites.	Nice-to-have	

63 Especially for accessibility, there are several official guidelines. We recommend for NCPs to evaluate the following accessibility items when developing their website:

Accessibility item	Necessity rating	URL
Compliance with national government website accessibility regulation. In most Member States specific regulations and guidelines are applied to all government online communication.	Must-have	Member State specific.
Compliance with W3C's Web Content Accessibility Guidelines - Level AA (Recommendation from the W3C, which explains to developers and authors how to make Web content accessible to people with disabilities).	Must-have	http://www.w3.org/TR/WCAG/

3.6.3. High-level technical specifications

64 For setting up a website, there are numerous possibilities. Listed below are our most important recommendations:

Item	Description	Necessity rating
------	-------------	------------------

Item	Description	Necessity rating
Documented technical design	The website should be well documented with at a minimum the following elements: <ul style="list-style-type: none"> • Purpose of the document. • Description of the project. • Front-end functionality. <ul style="list-style-type: none"> – Sitemap and website structure. – Description of every website page. – Wireframes (home page and at least 2 other important pages). – Miscellaneous functionality. • Back-end functionality. • Use cases. 	Must-have
Content Management System	The site should have a Content Management System which works well within the specific NCP organisation.	Must-have
Use guidance documents on technical factors when developing a website	There is lot of guidance available, e.g. ' Technical Factors in Developing a Web Accessibility Business Case for Your Organization ' from W3C provides guidance on addressing technical factors in a business case for Web accessibility. This also includes logging and monitoring of online traffic to and from the NCP website and ensuring Web Application Security. For example refer to the website of the Open Web Application Security Project (OWASP) .	Must-have
Search Engine Optimisation (SEO)	Search engine optimization (SEO) is the process of improving the visibility of a website or a web page in a search engine's by including meta-information and reporting website information to major search engines (Google, Yahoo, Bing). Monitoring website statistics and characteristics of website usage by visitors can provide useful information in further improving the easiness to find the NCP website. See for instance the website of Google Analytics on this topic.	Must-have

3.6.4. Pilot website specifications

65 The pilot website was developed with the following technical components:

Item	Type	Version
Content Management System	django-cms	2.2
Add-ons	django-photologue django-tinymce	2.3 1.5.1b2
Webserver	Apache 2	


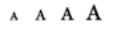
Item	Type	Version
Add-on	Python WSGI adapter module for Apache	
Database	MySQL	5

- 66 This setup was chosen since it was immediately available at our technical infrastructure and provided the means necessary in setting up this pilot website. After initial design of the layout of the pages (home page and content pages) with our technical resource, the CMS enabled us to set-up and manage the site contents ourselves.
- 67 The building of the pilot website took about two weeks, including defining the contents of the website (sitemap).

3.7. *Mock-up pages*

- 68 Bases with the specifications above, a pilot website was built. Screenshots of the pilot website are included below and the website is also available for local usage (flat .html files).
- 69 In addition to the features presented in the previous chapter, included below are screen shots of the most important pages. This provides for a good view of what the pilot website looks like. The following pages are included:
- Home page.
 - Sitemap.
 - Vertical menu (maximum collapsed for item 3.1.5.1).

3.7.1. Home page (screenshot 1 with featured content links for visitors to [Member State])

  **[Member State] National Contact Point on cross-border healthcare** 

Healthcare in [Member State]

Easy access to all information with regard to healthcare in [Member State] for visitors abroad

About this website

This website provides information about cross-border healthcare for all citizens in [Member State] and for all visitors to [member state]

[Read more](#)

FAQ and Most Visited

Top 5 of Frequently Asked Questions

- [How can I tell if my surgery is reimbursed?](#)
- [Where can I see my rights as a patient?](#)
- [Who can I contact for questions?](#)
- [Is there information of the quality of healthcare?](#)
- [Where can I find an overview of National Contact Points for cross-border healthcare?](#)

Top 5 of pages Most Visited

- [Receiving planned care in the European Union](#)
- [Healthcare for visitors to \[Member State\]](#)
- [About this National Contact Point](#)
- [Patient rights](#)
- [Links to NCP websites on cross-border healthcare in other Member States](#)

[Read more FAQ](#)




Quick Links

- [Healthcare in \[Member State\]](#)
- [Going abroad](#)
- [Healthcare for visitors to \[Member State\]](#)
- [Contact](#)
- [Helpline](#)
- [Sitemap](#)
- [External links](#)

News

- 25 May 2012 - Links to other NCP's updated [Less..](#)
- 25 May 2012 [Less..](#)
- 24 May 2012 - Statistics on healthcare services updated [Less..](#)
- 1 May 2012 - New website live [Less..](#)

3.7.2. Home page (screenshot 2 with featured content links for members of [Member State])

[Member State] National Contact Point on cross-border healthcare

Seeking healthcare abroad?
Find a complete overview on how to receive care in the European Union

About this website

This website provides information about cross-border healthcare for all citizens in [Member State] and for all visitors to [member state]

[Read more](#)

FAQ and Most Visited

Top 5 of Frequently Asked Questions

- [How can I tell if my surgery is reimbursed?](#)
- [Where can I see my rights as a patient?](#)
- [Who can I contact for questions?](#)
- [Is there information of the quality of healthcare?](#)
- [Where can I find an overview of National Contact Points for cross-border healthcare?](#)

Top 5 of pages Most Visited

- [Receiving planned care in the European Union](#)
- [Healthcare for visitors to \[Member State\]](#)
- [About this National Contact Point](#)
- [Patient rights](#)
- [Links to NCP websites on cross-border healthcare in other Member States](#)

[Read more FAQ](#)

Quick Links

- [Healthcare in \[Member State\]](#)
- [Going abroad](#)
- [Healthcare for visitors to \[Member State\]](#)
- [Contact](#)
- [Helpline](#)
- [Sitemap](#)
- [External links](#)

News

- 25 May 2012 - Links to other NCP's updated
[Less..](#)
- 25 May 2012
[Less..](#)
- 24 May 2012 - Statistics on healthcare services updated
[Less..](#)
- 1 May 2012 - New website live
[Less..](#)

3.7.3. Sitemap



A A A A

[Member State] National Contact Point on cross-border healthcare



- Home
- About
- Healthcare in [Member State]
- Going abroad
- Healthcare for visitors to [Member State]
- News
- FAQ
- Contact
- Helpline
- Sitemap** ▶
- External links

Sitemap

- Home
- About
 - About this National Contact Point
 - History
 - Mission and organisation
 - Legal framework
 - Figures
 - Site statistics
 - Activity report
 - Contact us
 - Media library
 - Video
 - Link to video's
 - Terms and conditions
 - Terms of use
 - Comments policy
 - Privacy policy
- Healthcare in [Member State]
 - Health system description
 - Healthcare and healthcare-related providers
 - Directory of healthcare services
 - Statistics on healthcare services
 - Healthcare funding
 - Public health insurance (including third party payment system)
 - Private health insurances
 - Public and private practise
 - Reimbursement
 - Basket of benefits
 - Entitlement for medical acts
 - Reimbursement and administrative formalities
 - What is reimbursed and how much
 - What is not be reimbursed
 - How to be reimbursed
 - Special schemes for reimbursement

3.7.4. Vertical menu (maximum collapsed for item 3.1.5.1)

The screenshot shows a website header with a logo on the left, a search bar on the right, and a row of language flags below the search bar. Below the header is a vertical menu with the following items:

- Home
- About
- Healthcare in [Member State]
- Health system description
- Reimbursement
 - Basket of benefits
 - Entitlement for medical acts
 - Reimbursement and administrative formalities
 - What is reimbursed and how much**
 - What is not be reimbursed
 - How to be reimbursed
 - Special schemes for reimbursement
- Quality and safety of healthcare
- Right to practice and restrictions to provide healthcare services
- Liability insurance of health professionals
- Patient rights
- Links to patients organisations

4. Cost analysis

70 This chapter describes the results of activities ‘R.1 Analysis of sourcing strategy’ and ‘R.2 Define cost centres and estimate costs’ as part of Phase 4 ‘Recommendation reporting’.

71 Phase R.1 aims at analysing the possible sourcing strategies for setting up an NCP website in order to have an overview of the types of costs and benefits for the different sourcing strategies, whereas the phase R.2 aims at defining the cost drivers and estimates the costs for the implementation of an NCP website.

4.1. Overall approach

72 Our approach for the estimation of the set-up and operating costs of an NCP website is based on the following areas:

1. **Website development**, in line with the functional and technical specifications for the NCP website. This area includes the phases of: analysis, design, development and testing of the website.
2. **Website hosting**, which consists in providing the required infrastructure to host an NCP website.
3. **Content development**, which is the process of writing, translating and updating the content made available on an NCP website.

73 Important: please note that the cost analysis strongly depends on the number of mandays that we have estimated based on our own experience for each area described above. This is the main limitation of the cost estimations available in this analysis⁸.

74 For each area depicted above, we estimated:

- **The set-up costs** corresponding to the design, construction and implementation activities.
- **The recurring costs** for the operating activities for the years two to five.

75 The following figure presents the areas that are analysed in the cost estimation.

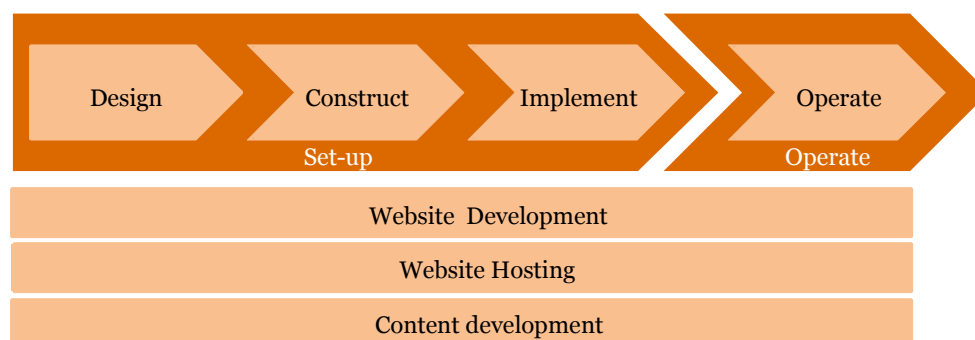


Figure 3: Areas analysed for the set-up and the operation of an NCP website

⁸ In order to simplify the overview, all amounts presented in text and in tables have been rounded to the closest thousand. Totals were recalculated based on these rounded lineitems. The recalculated totals have been used as reference values for our analysis and are quoted in the text. Minimal variations might appear with detailed figures presented in the appendices.

76 Due to the high variety of types of architecture, country specificities and needs, we based our estimations on:

- **Sourcing strategy:** Three sourcing strategies have been defined (outsourcing, insourcing and co-sourcing) to determine if the work on an area is delivered internally, jointly or externally.

<i>Development areas</i>	Website Development	Website Hosting	Website content
<i>Sourcing strategy</i>			
Outsourcing	The website development is outsourced.	The website hosting is outsourced.	The content writing is insourced. The translation is outsourced.
Insourcing	The website development is outsourced except for the system administration part that is insourced.	The website hosting is insourced.	The content writing is insourced. The translation is outsourced.
Co-sourcing	The website development is outsourced except for the system administration part that is insourced.	The website hosting is outsourced except for the system administration.	The content writing is insourced. The translation is outsourced.

The website development is always outsourced as we assumed that the NCP does not to have the required skills and knowledge to develop web applications. However, in some cases an NCP may have the required skills and knowledge to perform the system administration internally. Therefore, in both the Insourcing and Co-sourcing strategies, the system administration is done by the NCP while in the Outsourcing strategie both the website development and the system administration is done externally.

For the website hosting we have made a division of tasks in which all tasks are done externally, internally of shared. In the last case the insourcing strategy is based on the assumption that the system administration is done internally.

Content writing and updates are always performed internally as we consider this responsibility cannot be outsourced. If the content is translated into other languages, we assumed that translation activities are outsourced. Therefore, no differences in the division of work are made between the three sourcing strategies.

- **Scenarios for the necessity ratings for the content and the functional and technical specifications for the NCP website:** For the content of the NCP website each item included in the sitemap is either 'Mandated' (if explicitly described in the Directive) or 'Recommended' (if not explicitly mentioned in the Directive but beneficial for EU citizens). For the functional and technical specifications for the NCP website, items are eather 'Must-have' (essential item for the website) or 'Nice-to-have' (less essential item). We have used the distinction in necessity ratings for calculating costs using the following scenarios:
 - Basic = all 'Mandated' content + 'Must-have' items of the functional and technical specifications for the website.
 - Extended = Basic scenario + all 'Recommended' content + 'Nice-to-have' items of the functional and technical specifications for the website.
- **The depth of information:** For each webpage (independent of the scenarios), we estimated a minimum and a maximum of mandays to write and translate the website content depending on the depth of information the NCP is willing to provide.

- 77 Due to the high variety of available architectures, equipments, systems and organisations of staff, we built our analysis on assumptions. All assumptions are detailed in the following paragraphs.
- 78 Using the above described assumptions and scenarios, estimations have been made in mandays and in Euros. Estimations in mandays will provide Member States with an idea on the workload for both the implementation and the operation of the website. Estimations in Euros are provided as an average of the EU27, but as the human capital costs may vary significantly from one Member State to another, we also provide both the minimal and the maximum costs per area and an overview of the total costs for every Member State in the appendix C.12 for the ‘Basic’ scenario and C.13 for the ‘Extended’ scenario.
- 79 In order to determine the total human capital costs from an employer perspective, two different methodologies were used depending on the origin of the staff:

Calculation used for internal staff:

Annual labour cost for internal staff for a specific profile for a target Member State

Annual salary for this profile in the reference Member State

* (labour cost per hour of the target Member State / labour cost per hour of the reference Member State)

* (1 + employer’s contribution rate of the target Member State)

* (1 + overhead rate)

Brief explanation:

- The annual salaries for specific IT staff and content developers profiles in the reference Member State⁹ were defined as a baseline.
- Then, to calculate the labour cost level for a specific profile in the target Member State, we apply the labour cost factor¹⁰. The labour cost factor is calculated by dividing the labour cost per hour of the target Member State by the labour cost per hour of the reference Member State. The labour cost per hour of 2011 that were used are included in appendix C.8 . When 2011 costs were not available we have used 2010 costs.
- Next, the Employer’s contribution¹¹ was added to the annual cost level for a specific profile in the target Member State. When Eurostat does not provide a rate, the default rate of 20% was applied.
- Furthermore, a rate of 25%¹² was applied on all salaries to cover the overhead costs. As stated in the Standard Cost Model Manual (SCM)¹³, overhead costs are costs in connection with fixed administration costs, such as expenses for premises (rent or building depreciation), telephone, heating, electricity, IT equipment¹⁴, etc. The overhead costs also include absence due to illness. This overhead estimation value was chosen because this rate is most frequently used in practice for Member States SCM studies.
- Finally the estimation of annual salaries was calculated for each specific profile for all the Member States as included in appendix C.11.

⁹ <http://www.robertwalters.co.uk/career-advice/salary-survey.html> and PwC Database, Survey 2012. France was selected as a baseline because salaries are available for a wide range of IT profiles: Project Manager, Web developer, IT Architect, IT Security specialist, System Administrator, Graphist. This approach better reflects the specific salary costs for this kind of resources than the generic labor rates provided by Eurostat for IT sector.

¹⁰ http://epp.eurostat.ec.europa.eu/statistics_explained/index.php/Labour_cost_index_-_recent_trends - accessed on 19/07/2012 .

¹¹ http://appsso.eurostat.ec.europa.eu/nui/show.do?dataset=lc_an_struc_r2&lang=en 2010. The following options were selected: 10 employees or more, Business economy.

¹² http://ec.europa.eu/taxation_customs/resources/documents/common/consultations/tax/4209_study_en.pdf

¹³ http://www.dei.gov.ba/bih_i_eu/RIA_u_BiH/?id=6585

¹⁴ IT equipment: refers to individual IT equipment and to a small fraction of the central infrastructure required to support the activities of a single individual. The costs of the data centre and the associated infrastructure (e.g. telecom, security...) required to run the NCP web site are not included in these overhead costs.

Calculation used for external staff :

Daily rate for external staff for a specific profile for a target Member State

Daily rate for this profile in the reference Member State

* (labour cost per hour of the target Member State / labour cost per hour of the reference Member State)

* (1 + VAT rate of the target Member State)

Brief explanation:

- We defined the daily rates of external providers for specific staff profiles in the reference Member State¹⁵ as a baseline. Those daily rates are supposed to include the overhead cost and the employer's contribution.
- Then, to calculate the cost level for a specific profile in the target Member State, we applied the labour cost factor. The labour cost factor is calculated by dividing the labour cost per hour of the target Member State through the labour cost per hour of the reference Member State. The labour cost per hour of 2011 that were used are included in appendix C.8. When 2011 costs were not available we have used 2010 costs.
- Next, we applied the standard VAT rate of each Member State¹⁶ as displayed in appendix C.9. As the costs of the NCP will ultimately be paid for by the Member State's government, we assume that they are not allowed to recover VAT.
- The resulting estimations of the daily consulting rate for each IT profile across each Member State are included in appendix C.10.

For both cases, it was assumed that all staff works 216¹⁷ days per year.

- 80 To determine IT infrastructure cost, the prices from several providers were averaged. Those average prices (detailed in Section C.4) were assumed to be similar across Member States. Since the costs of the NCP will ultimately be paid for by the Member State's governments, the standard VAT rate of each Member State was applied to each IT infrastructure cost and to each IT Support service cost.
- 81 Based on Hermesse et. Al. ¹⁸ an estimated 25 million patient-provider healthcare provision contacts for planned cross-border healthcare take place annually in the EU (for more information we refer to appendix C.14). Please note that it is likely that even more patients may consider seeking cross-border healthcare and do make enquiries on cross-border healthcare but have not (yet) received it. The estimate, however, should be taken as a broad indication of the overall expected order of magnitude at play. We assume that a single NCP website has to manage a maximum load of 2.5 million users for a whole year meaning an average of about 7,000 users per day. An NCP website that is able to cope with a load of 1,000 concurrent users should then be sufficient. The proposed architecture will be able to cope with such traffic. As this architecture is scalable, possible traffic increase can be managed by adding extra processing capacity.
- 82 Our proposed configuration is indicative. As the actual load may significantly differ from one country to another each Member State should assess the required capacity on a case by case basis depending on the actual number of concurrent users, nature of content and architecture.
- 83 Content to translate in 3 languages for the 'Extended' Scenario is described in appendix C.6.
- 84 Full details with regard to the estimated costs, the overall approach and methodologies used for the cost analysis are included in appendix C.

¹⁵ Internal PwC benchmark, 2011. (France was selected as a baseline because reference hourly rates are available for a wide range of IT profiles in the internal PwC benchmark: Project Manager, Web developer, IT Architect, IT Security specialist, System Administrator, Graphist.). This approach better reflects the specific market costs for this kind of resources than the generic labor rates provided by Eurostat for IT sector.

¹⁶ http://ec.europa.eu/taxation_customs/resources/documents/taxation/vat/how_vat_works/rates/vat_rates_en.pdf

¹⁷ Internal PwC benchmark, 2011, There are on average 18 working-days per month.

¹⁸ Estimation found by Hermesse et al 1997: "A breakdown into the different types of access to health care abroad revealed the financial importance of preauthorized care (E12), as it was responsible for nearly 60% of the total cost of cross-border care".

4.2. Overall summary

- 85 The creation and the operation of an NCP website will be an important source of expenditure for the Member States as we estimate that the cost of setting up of the website as an average of the EU27 range from €179 to €430k and the annual cost of operating the website from €83k to €167k, depending on the sourcing strategy, the features and the depth of information.
- 86 For the 'Basic' scenario, the cumulated costs on 5 years as an average of the EU27 range from 511 k to 686k. For the 'Extended' scenario, the range for the cumulated costs on 5 years as an average of the EU27 extends from €818k to €1098k.
- 87 The initial costs may widely vary from one country to another. For the 'Basic' Scenario, Bulgaria has the lowest initial costs and they represent 35% compared to the average cost of EU27. Sweden has the higher initial costs and they represent an overcost of 87% compared to the average cost of EU27. For the 'Recommended' Scenario, the results are similar, Bulgaria has the lowest initial costs and they represent 27% compared to the average cost of EU27. Sweden has the higher initial costs and they represent an overcost of 98% compared the average cost of EU27. The wide range among the countries is mainly explained by the labor cost index.
- 88 The recurrent costs vary also from one country to another but to a lesser extent. For the 'Basic' Scenario, Bulgaria has the lowest recurrent costs and they represent 59% compared to the average cost of EU27. Sweden has the higher recurrent costs and they represent an overcost of 56% compared to the average cost of EU27. For the 'Extended' Scenario, the results are similar, Bulgaria has the lowest initial costs and they represent 43% compared to the average cost of EU27. Sweden has the highest initial costs and they represent an overcost of 77% compared the average cost of EU27. Full details with regard to the costs for the 'Basic' scenario by country are described in appendix C.12 and in appendix C.13 for the 'Extended' scenario.
- 89 These estimations do not take into account either infrastructure or facilities costs, as most of the Member States already have their own security and networking devices (such as firewalls, intrusion detection mechanism, web caching and load balancing) and storage systems, as well as data centres with sufficient available space, power, cooling systems and fire systems. In this case, the actual additional costs to support the NCP website will depend on the scalability of the storage systems and more importantly the networking devices. Member States that wish to create an NCP website from scratch should assess these possible additional costs.
- 90 Member States that do not already have online databases on health professionals and the basket of benefits, should assess these possible additional costs.
- 91 Also, this estimate does not take into account the workforce that is needed to answer to patient's questions and e-mails. Big countries and countries with a high number of cross-border patients (who are willing to receive care or to go abroad to receive care) should evaluate the additional mandays that would be needed.
- 92 The mentioned costs were determined from EU27 average wage costs. As 67% of costs in the 'Basic' scenario with a minimum of content and 89% of the costs in the 'Extended' scenario with a maximum of content are due to staff remuneration, countries with a higher labour cost index would expect higher NCP website costs. These figures relate to the initial costs, whereas regarding the recurring costs, it ranges from 33% in the 'Basic' scenario and 68% in the 'Extended' scenario with a maximum of content.
- 93 Given the various assumptions, we can observe slight variations from one sourcing strategy to the other but they are not significant enough to clearly recommend either one of them. For the 'Basic scenario with a minimum of content, there is an increase of 25% between the cheapest scenario and the most expensive one for the total cost of the project. For the 'Extended' scenario with a minimum of content, there is an increase of 16% between the cheapest scenario and the most expensive one for the total cost of the project. The only significant variation relates to website hosting where in the insourcing option is in average about 83% more expensive than the alternatives.
- 94 In terms of workload, a minimum of 537 mandays are needed to set up the NCP website with 'Must-have' features and a minimum content whereas the maximum is 1533 mandays for the 'Nice-to-have' features when there is in-depth content to write.

-
- 95 A minimum of 147 mandays are required to operate the NCP website for the ‘Must-have’ features and a minimum of content whereas the maximum is 457 mandays for the ‘Nice-to-have’ features when there is in-depth content to write.
- 96 As patients may be foreigners, we recommend to translate some sections of a NCP (Healthcare in [Member State] Healthcare for visitors to [Member State], News...). In the ‘Extended’ scenario, we estimate that between 66 and 148 mandays are necessary to translate these sections the first year in 3 languages, and between 32 and 69 mandays to verify it twice a year and update it.
- 97 Full details with regard to the content to translate in 3 languages are described in appendix C.6. We finally estimate that about one year is necessary to set up the website (developing the website and writing of the content).

4.3. Detailed results

98 The following table presents our findings in more detail for the ‘Basic’ Scenario.

	‘Basic’ scenario					
	Outsourced		Insourced		Co-sourced	
	Initial set-up costs	Annual recurrent costs	Initial set-up costs	Annual recurrent costs	Initial set-up costs	Annual recurrent costs
Additional Infrastructure ¹⁹	N/A	N/A	N/A	N/A	N/A	N/A
Architecture						
- Website development	102k	26k	92k	23k	92k	23k
- Website hosting	55k	55k	94k	73k	51k	51k
Additional Facilities ²⁰	N/A	N/A	N/A	N/A	N/A	N/A
Content development						
- Content writing (min) ²¹	18k	4k	18k	4k	18k	4k
- Content writing (max)	37k	9k	37k	9k	37k	9k
- Translation (min)	-	-	-	-	-	-
- Translation (max)	-	-	-	-	-	-
Project management						
- (min)	17k	4k	17k	4k	17k	4k
- (max)	23k	6k	23k	6k	23k	6k
Total cost: minimum content (in €, EU average)	192k	89k	221k	104k	178k	82k
Total cost: maximum content (in €, EU average)	217k	96k	246k	111k	203k	89k

Table 5: Set-up and recurrent costs of an NCP website (in €) for the ‘Basic’ scenario

¹⁹ See paragraph 89 for an explanation why additional Infrastructure is N/A

²⁰ See paragraph 89 for an explanation why additional Facilities is N/A

²¹ We assumed that in all cases, content writing is always performed in-house and translation is always outsourced. Translations fees are assessed from a [study](#) performed by the “Syndicat national des traducteurs professionnels” in France. Next we applied the ‘[2011 labour cost index](#)’ provided to us by DG SANCO (2011 labour cost per hour in euros (for enterprises with 10 or more employees) to determine the annual fees for the other EU countries. We have included this index in appendix C.8. Please note that since this index consists of average labour cost per hour for the entire population of a Member State, the costs for IT specialists with higher education might be significantly higher as well as the costs for the healthcare experts required to provide the content.

99 The following table presents our findings in more detail for the ‘Extended’ Scenario.

	‘Extended’ scenario					
	Outsourced		Insourced		Co-sourced	
	Initial set-up costs	Annual recurrent costs	Initial set-up costs	Annual recurrent costs	Initial set-up costs	Annual recurrent costs
Additional Infrastructure ²²	N/A	N/A	N/A	N/A	N/A	N/A
Architecture						
- Website development	201k	50k	190k	47k	190k	47k
- Website hosting	55k	55k	94k	73k	51k	51k
Additional Facilities ²³	N/A	N/A	N/A	N/A	N/A	N/A
Content development						
- Content writing (min) ²⁴	30k	8k	30k	8k	30k	8k
- Content writing (max)	65k	18k	65k	18k	65k	18k
- Translation (min)	14k	7k	14k	7k	14k	7k
- Translation (max)	31k	14k	31k	14k	31k	14k
Project management						
- (min)	37k	10k	37k	10k	37k	10k
- (max)	50k	15k	50k	15k	50k	15k
Total cost: minimum content (in €, EU average)	337k	130k	365k	145k	322k	124k
Total cost: maximum content (in €, EU average)	402k	152k	430k	167k	387k	146k

Table 6: Set-up and recurrent costs of an NCP website (in €) for the ‘Extended’ scenario

100 Content cost (writing, updating and translating) ranges from approximately 8% (with minimum content) to about 18% (with maximum content) of the total cost.

²² See paragraph 89 for an explanation why additional Infrastructure is N/A

²³ See paragraph 89 for an explanation why additional Facilities is N/A

²⁴ We assumed that in all cases, content writing is always performed in-house and translation is always outsourced. Translations fees are assessed from a [study](#) performed by the “Syndicat national des traducteurs professionnels” in France. Next we applied the ‘[2011 labour cost index](#)’ provided to us by DG SANCO (2011 labour cost per hour in euros (for enterprises with 10 or more employees) to determine the annual fees for the other EU countries. We have included this index in appendix C.8. Please note that since this index consists of average labour cost per hour for the entire population of a Member State, the costs for IT-specialists with higher education might be significantly higher as well as the costs for the healthcare experts required to provide the content.

101 Workforce is the most important source of cost as it represents between 59% and 88% of the total cost. 537 to 1533 mandays are needed for the implementation of the website, and 147 to 457 mandays are necessary for the annual updates and maintenance, depending on the feature scenario and the depth of information. The sourcing strategy has no impact on the mandays.

	'Basic' Scenario		'Extended' Scenario	
	Mandays for initial set-up	Mandays for operations	Mandays for initial set-up	Mandays for operations
Additional Infrastructure ²⁵	N/A	N/A	N/A	N/A
Architecture				
- Website development	292	73	628	157
- Website hosting	20	20	20	20
Additional Facilities ²⁶	N/A	N/A	N/A	N/A
Content development				
- Content writing (min)	139	33	225	63
- Content writing (max)	280	68	485	138
- Translation (min)	-	-	66	32
- Translation (max)	-	-	148	69
Project management				
- (min)	86	21	184	50
- (max)	114	28	252	73
Total minimum (mandays)	537	147	1123	322
Total maximum (mandays)	706	189	1533	457

Table 7: Time needed for NCP website implementation and operation

²⁵ See paragraph 89 for an explanation why additional Infrastructure is N/A

²⁶ See paragraph 89 for an explanation why additional Facilities is N/A

5. Recommendations

102 This chapter provides recommendations on the financial and technical feasibility and organisational setup of an NCP.

5.1. Financial and technical feasibility

5.1.1. Carefully evaluate required sourcing strategy

103 Member States should carefully evaluate the advantages and disadvantages of each sourcing strategy before deciding on this. Table 8 presents some advantages and disadvantages for website development and website hosting for each website hosting strategy.

104 In case of outsourcing the website hosting, it is essential to have a solution that allows an easy integration with external components such as an appointment booking system and an Information System that provides data regarding availabilities of hospitals and healthcare providers.

	Advantages	Disadvantages
Website hosting		
Insourced	<ul style="list-style-type: none"> - Tight integration with other insourced systems. - Perceived requirement for unique content management. - Dynamic computing environment. - Computing infrastructure exists. - Current staff has skills to operate. 	<ul style="list-style-type: none"> - More expensive (acquisition of equipments). - Additional costs for staff training - May have limited knowledge or tools to resolve issues.
Outsourced	<ul style="list-style-type: none"> - Implements best of breed solution with limited financial resources and expertise. - Enables rapid implementation. - Provides scalability of Web operations. - Offers significant savings in upfront investment and maintenance costs. 	<ul style="list-style-type: none"> - Confidentiality issues. - Decreased liberty to implement changes. - Difficulty to re-internalise the website.
Website development		
Insourced	<ul style="list-style-type: none"> - NCP would have real-time control of changes to the website. - Faster turnaround. - Easier to control costs. - Enhancement can be implemented in a shorter timeframe. - Easier to get consistency for design / usability. 	<ul style="list-style-type: none"> - Longer turnaround for larger changes / enhancements. - Limited enhancements availability (depending on knowledge and skill of internal team). - Internal team may have limited knowledge of building and integrating 3rd party plug-ins and database systems.
Outsourced	<ul style="list-style-type: none"> - Large knowledge base (e.g. Internet technologies). - More enhancement availability. - Larger creative base. 	<ul style="list-style-type: none"> - Cost control. - Troubleshooting and debugging after deployment. - Possible financial / legal issues (e.g. bankruptcy, out of business, etc.). - Enhancements in future changes can be expensive or impossible.

Table 8. Advantages and disadvantages for the insourcing and the outsourcing strategies

5.1.2. Depth of information to be provided

- 105 The depth of information to be provided is an impactful variable on content writing and updating costs. Depending on the depth of information content writing in the initial set-up costs range from €18k to €65k while update costs range from €4k to €18k.
- 106 Depending on the depth of information to translate, the initial setup costs range from €14k to €31k in the 'Recommended' scenario, while update costs range from to €7k to €14k.

5.1.3. Choice of the type of website hosting

- 107 If the Member States decide to outsource the website hosting to an external provider, we recommend seeking a solution that is open and allows an easy integration with external components such as an appointment booking system and an Information System that provides some data regarding availabilities of hospitals and health care providers.
- 108 We also recommend to base the architecture on Operating system-level virtualisation both for the insourced and outsourced hosting to ensure that system resources allocated in terms of CPU, memory are dedicated to the NCP website and that another system hosted on the same physical server cannot have any side-effects on the NCP website. Moreover, Operating system-level virtualisation facilitates back-ups and provides a scalable architecture.
- 109 Each Member State should perform an information security risk assessment analysis regarding the availability, integrity and confidentiality of their NCP website to determine the security protection level that should be reached and the security measures that should be implemented accordingly. In addition, although no personal (health) records are planned to be processed using NCP websites, Member States should perform a Privacy Impact Assessment to ensure compliance to EU and national level privacy rules and regulations.

5.2. Organisational setup

5.2.1. Assign clear responsibilities and steer on an agreed planning

- 110 Since Member States have until 25 October 2013 to make their own arrangements in implementing the Directive, it should currently be clear what entity has been entrusted with the task of setting up the NCP.
- 111 As part of this task and due their ultimate responsibility, Member States need to take up a supervisory role. Within this role, they need to have an agreed planning of the NCP development activities from the responsible entity and steer on progress made. This plan should also include a planning to account for our estimation that it will take approximately one year to set up the website (developing the website and writing of the content).

5.2.2. Choose an appropriate form in line with the national system characteristics and assure central coordination

- 112 The Directive states that the individual Member States are responsible in deciding on the form and possibly the number of NCPs. In setting up the NCP, Member States should choose for an appropriate form in line with the national system characteristics. Taking into consideration multi-regional health systems in Member States such as Spain and Germany, the institutional set up of NCPs will differ between Member States, varying from a single NCP to multiple NCPs spread across regions.
- 113 When more than one NCP is foreseen, there is an obvious additional effort in harmonizing and coordinating the regional NCPs. It should be made clear how a set-up of regional NCPs will function from a national perspective.

5.2.3. Leverage results of the Stakeholder Consultation and involve stakeholders at early stages of development

- 114 Due to the broad importance of cross-border healthcare, Member States are advised to contact and involve local stakeholders at early stages of development of the NCP. NCPs should decide, based upon the national context,

(system characteristics and regional responsibilities) which stakeholders to approach, for example representatives of patients, healthcare providers, insurers and national and regional governments.

- 115 A benefit of involving stakeholders at early stages of development is gaining commitment and feedback on the national approach of setting up the NCP. Using the results of the Stakeholder Consultation (see chapter 2 - Web Search and Stakeholder Consultation) and the pilot website contents (see chapter 3 - Pilot website contents) as a basis, more insight in the stakeholders' views can be gained and used in setting up the structure of the NCP.
- 116 As an example, it became clear from the Stakeholder Survey (see Chapter 2 - Web Search and Stakeholder Consultation) that patients' organisations and information providers have ideas for providing additional information (other information than already included in the Directive) that will benefit cross-border healthcare e.g:
- Information on language capabilities / facilities at healthcare providers would definitely benefit patients looking for cross-border healthcare.
 - Comparative information about the difficulty of the procedures for receiving cross-border healthcare in the different Member States would be very beneficial for patients when choosing in which Member State they would like to receive needed medical care.
- 117 Another benefit of involving stakeholders at early stages of development is that they possibly can confirm and add-on useful existing information resources. With the collective knowledge acquired, the NCP in the making can avoid overlapping activities and possibly maximise the use of national research networks and organisations.

5.2.4. Timely assess what information is already available

- 118 Given the required types of information of the Directive, NCPs should, when not done already, timely assess what types of information are already available within the national context. An approach might consist of using an inventarisation of their own (possibly using the detailed Web Search results as a starting point) in combination with feedback from stakeholders (as indicated above) on existing knowledge sources. As an example, there could be quick wins gained from national Healthcare Inspections on transparency of healthcare quality.
- 119 Identified blind spots should of course be assessed on how these can be overcome. Considering the need for long-term sustainable provision of cross-border healthcare information via an NCP website, the NCP should take into account how to set-up structural information input from information sources used.

5.2.5. Inventarise and possibly leverage on existing entities

- 120 Since individual Member States are responsible for deciding on the form and possibly the number of NCPs, the possibility of using existing entities seems viable. Member States should make an inventory of which national and possibly regional entities are already involved in collecting (parts of) required types of information.
- 121 Aside focusing on informational aspects, other needed NCP characteristics should be considered as well, such as the ability to successfully communicate the content and to be able to properly interact with patients, enabling them to make the desired informed choice. This requires specific communication skills. Some entities might already have good experience in facilitating communication with specific target audiences and be able to leverage their skills onto the topic of cross-border healthcare.

5.2.6. Continue knowledge sharing between Member States

- 122 Considering the unifying element between the NCPs that from 25 October 2013 onward patients can use their rights under the Directive, it is highly recommended to optimise knowledge sharing between Member States until this date. Lessons learned regarding choices of NCP structure, responsible entities and content gathering will strongly contribute to the successful implementation of NCPs across the Member States.
- 123 After the implementation of the Directive no later than 25 October 2013, the context of knowledge sharing will change from a development perspective to a structural perspective. Since the success of making informed

choices on cross-border healthcare is a joint effort of all Member States, structured consultation between Member States on cross-border healthcare is a necessity.

- 124 In order to facilitate this, there are already meetings taking place by the Committee on cross-border healthcare where all 27 Member States regularly meet and vote on implementing acts and discuss general issues linked with the transposition of the Directive. Going forward, it is recommended to enable the persons practically involved in setting up the NCP with their counterparts across the different Member States as well.

5.2.7. Facilitate an overview of NCPs on EU level

- 125 The Directive states that NCPs in the different Member States should cooperate with each other. They also could provide for contact details of the NCPs in other Member States. Considering this requirement, central coordination on an EU level would be useful.
- 126 From a patient's perspective it is logical to assume a central EU overview of NCPs when looking for information about healthcare in other Member States. Since multiple, direct links from one NCP to another would also take more effort to maintain, it is recommended to set-up a central NCP 'portal'. This includes a central overview of all NCPs across the different Member States and therefore can be used as a landing page for EU citizens seeking for information on cross-border healthcare.

A. Web Search details

A.1. Results for identified official NCPs

127 The following five websites were found that officially indicate that they are the NCP for information regarding cross-border healthcare:

	HU1	IE1	PL2	RO2	SE4
Member State	Hungary	Ireland	Poland	Romania	Sweden
URL	www.oep.hu/ IN HUNGARY: www.oep.hu/portal/page?_pageid=34,35161&_dad=portal&_schema=PORTAL	www.dohc.ie	www.nfz.gov.pl	www.cnas.ro	www.varldguiden.se
Search path Item	(public) health insurance organisation	Government - Ministry of Health	(public) health insurance Organization	Government - Ministry of Social Security	Government - Regional health authorities
Name of the organisation	National Social Security/ Országos Egészségbiztosítási Pénztár	Department of Health	Narodowy Fundusz Zdrowia - National Health Fund	Casa Nationala de Asigurari de Sanatate - National Health Insurance House (CNAS)	Stockholm county (Stockholms läns landsting)
Scope	National	European	European	National	National
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Active search - 1 to 3 minutes
Data source sponsors	Source of information is the National Government	Data sources are from the Government of Ireland, with reference to national legislation and EU legislation	Source of information is the National Government	Subordinated to the Ministry of Health	Source of information are Swedish counties and regions.
Remarkable features	Only shows how many visitors the website has	None	None	No - still, there is a "Feedback" section accessible on site	None
Important information that appears to be clearly missing	There is no specific information for cross-border healthcare, safety standards, general description of access to healthcare or under what conditions. There are links to other websites which handle this information comprehensively.	None	Information on providers in other countries	None	Incompletely described information types are patients' safety and quality of healthcare
Information on how contact point effectiveness is measured	None	None	None	None information present but there is a "Feedback" section accessible on site	Only information about how many visitors the website has

	HU1	IE1	PL2	RO2	SE4
Accessibility Features	None	All pages on the site comply with WAI (Web Accessibility Initiative) Web Content Accessibility Guidelines, level 2	Font resize	None	None
Information about the organisation	Last version: 2005. március 4. 15.00 Domain owner: Országos Egészségbiztosítási Pénztár E-mail address: webmester@oep.hu The names of the responsible staff	Full information. There is a detailed 'About us' section which describes the role and function of the Department of Health	Most information that can be provided via public information office section on the page (BIP)	"About Us" section available	Task of organisation, description of operations, contact information

Table 9: Results for five websites identified as official NCPs

A.1.1. Information properties of identified official NCPs

128 Below are presented per website the information properties of the five identified official NCPs:

Information properties of HU1 (Hungary)

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	No		
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	No		
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Difficult - Understandable after reading multiple times / searching for information on the page / looking back and forth / difficult language used
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	No		
B1	Is a description of the health system present?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Difficult - Understandable after reading multiple times / searching for information on the page / looking back and forth / difficult language used
B2	Are statistics of providers (number by type) available?	No		
B3	Is a directory of providers (per type) available?	No		
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	No		
B5	Is information about compliance with quality standards by healthcare providers available?	No		
B6	Is there information about the liability insurance of health professionals or similar arrangements?	No		
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	No		
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	Yes - available online	Low - Less than 10 sentences of information / No more than 1 level of information (paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
D5	Is there information on the recognition of foreign prescriptions in the Member State?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
E1	Are there links to contact points in other countries?	Yes - available online	Not applicable	Not applicable
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	Yes - available online	Not applicable	Not applicable
F1	Is there information on access to health providers for persons with disabilities?	No		

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
F2	Is there information on access to health services for citizens with limited financial resources?	Yes - available online	Low - Less than 10 sentences of information / No more than 1 level of information (paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
G1	Is a Frequently Asked Questions section or a digital assistant present?	No		
G2	Are contact forms present?	Yes - available online	Not applicable	Not applicable
G3	Is a forum for patients present?	No		
G4	Is there a sitemap included on the website?	Yes - available online	Not applicable	Not applicable
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	No		
H1	Is there any price information present?	No		
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	No		

Table 10: Information properties of HU1 (Hungary)

Information properties of IE1 (Ireland)

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	No		
B1	Is a description of the health system present?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
B2	Are statistics of providers (number by type) available?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
B3	Is a directory of providers (per type) available?	No		
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
B5	Is information about compliance with quality standards by healthcare providers available?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
B6	Is there information about the liability insurance of health professionals or similar arrangements?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	No		
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	No		
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	No		
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	No		
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	No		
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	No		
D5	Is there information on the recognition of foreign prescriptions in the Member State?	No		
E1	Are there links to contact points in other countries?	No		
E2	Are there links to patients' organisation websites or other websites with useful information on cross border healthcare?	No		

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
F1	Is there information on access to health providers for persons with disabilities?	No		
F2	Is there information on access to health services for citizens with limited financial resources?	No		
G1	Is a Frequently Asked Questions section or a digital assistant present?	No		
G2	Are contact forms present?	Yes - available online	Not applicable	Not applicable
G3	Is a forum for patients present?	No		
G4	Is there a sitemap included on the website?	Yes - available online	Not applicable	Not applicable
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	No		
H1	Is there any price information present?	No		
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	No		
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	No		
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	No		

Table 11: Information properties of IE1 (Ireland)

Information properties of PL2 (Poland)

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	No		
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	No		
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	No		
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	No		
B1	Is a description of the health system present?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Difficult - Understandable after reading multiple times / searching for information on the page / looking back and forth / difficult language used
B2	Are statistics of providers (number by type) available?	No		
B3	Is a directory of providers (per type) available?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	No		
B5	Is information about compliance with quality standards by healthcare providers available?	No		
B6	Is there information about the liability insurance of health professionals or similar arrangements?	No		
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
D5	Is there information on the recognition of foreign prescriptions in the Member State?	No		
E1	Are there links to contact points in other countries?	Yes - available online	Not applicable	Not applicable
E2	Are there links to patients' organisation websites or other websites with useful information on cross border healthcare?	No		
F1	Is there information on access to health providers for persons with disabilities?	No		

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
F2	Is there information on access to health services for citizens with limited financial resources?	No		
G1	Is a Frequently Asked Questions section or a digital assistant present?	No		
G2	Are contact forms present?	Yes - available online	Not applicable	Not applicable
G3	Is a forum for patients present?	No		
G4	Is there a sitemap included on the website?	No		
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	No		
H1	Is there any price information present?	Yes - available online	Low - Less than 10 sentences of information / No more than 1 level of information (paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	No		
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems where healthcare is publicly provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	No		

Table 12: Information properties of PL2 (Poland)

Information properties of RO2 (Romania)

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	No		
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	No		
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
B1	Is a description of the health system present?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
B2	Are statistics of providers (number by type) available?	No		
B3	Is a directory of providers (per type) available?	No		
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
B5	Is information about compliance with quality standards by healthcare providers available?	No		
B6	Is there information about the liability insurance of health professionals or similar arrangements?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	Yes - available online	Low - Less than 10 sentences of information / No more than 1 level of information (paragraph)	Difficult - Understandable after reading multiple times / searching for information on the page / looking back and forth / difficult language used
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	Yes - available online	Low - Less than 10 sentences of information / No more than 1 level of information (paragraph)	Difficult - Understandable after reading multiple times / searching for information on the page / looking back and forth / difficult language used
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Difficult - Understandable after reading multiple times / searching for information on the page / looking back and forth / difficult language used
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
D5	Is there information on the recognition of foreign prescriptions in the Member State?	No		

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
E1	Are there links to contact points in other countries?	Yes - available online	Not applicable	Not applicable
E2	Are there links to patients'organisation websites or other websites with usefull information on cross border healthcare?	Yes - available online	Not applicable	Not applicable
F1	Is there information on access to health providers for persons with disabilities?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
F2	Is there information on access to health services for citizens with limited financial resources?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
G1	Is a Frequently Asked Questions section or a digital assistant present?	Yes - available online	Not applicable	Not applicable
G2	Are contact forms present?	Yes - available online	Not applicable	Not applicable
G3	Is a forum for patients present?	Yes - available online	Not applicable	Not applicable
G4	Is there a sitemap included on the website?	No		
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	Yes - available online	Not applicable	Not applicable
H1	Is there any price information present?	No		
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	No		
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	No		
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	No		

Table 13: Information properties of RO2 (Romania)

Information properties of SE4 (Sweden)

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	No		
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	No		
B1	Is a description of the health system present?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
B2	Are statistics of providers (number by type) available?	Yes - available online	Low - Less than 10 sentences of information / No more than 1 level of information (paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
B3	Is a directory of providers (per type) available?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	No		
B5	Is information about compliance with quality standards by healthcare providers available?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
B6	Is there information about the liability insurance of health professionals or similar arrangements?	No		

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	Yes - available online	High - more than a half of an A4 page of information / three or more levels of information (chapter, paragraph, sub-paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	Yes - available online	Low - Less than 10 sentences of information / No more than 1 level of information (paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	No		
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	No		
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	Yes - available online	Low - Less than 10 sentences of information / No more than 1 level of information (paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Easy - Understandable after reading once / explained using clear examples / simple language used
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	No		
D5	Is there information on the recognition of foreign prescriptions in the Member State?	No		
E1	Are there links to contact points in other countries?	No		
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	No		
F1	Is there information on access to health providers for persons with disabilities?	No		
F2	Is there information on access to health services for citizens with limited financial resources?	No		

Ref	Definition	Information present / means of provision	Level of detail	Easiness to understand
G1	Is a Frequently Asked Questions section or a digital assistant present?	Yes - available online	Not applicable	Not applicable
G2	Are contact forms present?	Yes - available online	Not applicable	Not applicable
G3	Is a forum for patients present?	No		
G4	Is there a sitemap included on the website?	No		
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	Yes - available online	Not applicable	Not applicable
H1	Is there any price information present?	No		
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	Yes - available online	Medium - Between 10 and 20 sentences of information / No more than 2 levels of information (chapter, paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	Yes - available online	Low - Less than 10 sentences of information / No more than 1 level of information (paragraph)	Moderate - Understandable after reading once or twice / some examples given / normal language used
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems where healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	No		

Table 14: Information properties of SE4 (Sweden)

A.2. Analyses of information properties

129 The next paragraphs contain the results of the detailed Web Search for the 98 websites in 27 Member States per information type for the 3 information properties (available information, level of detail of available information, easiness to understand the available information).

A. Patients' safety and quality of healthcare

130 The extent to which the information about Patients' safety and quality of healthcare is present on the 98 scanned websites is shown in the figure below.

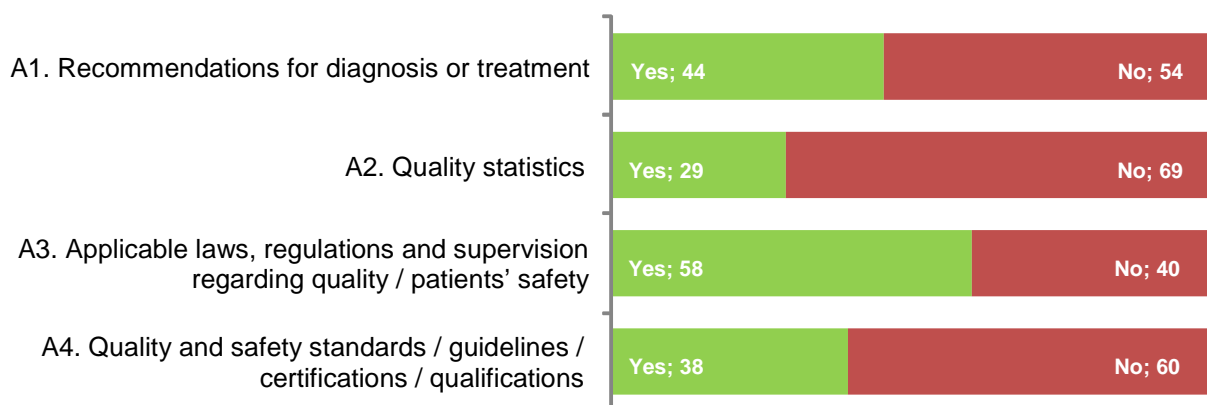


Figure 4: Available information - A. Patients' safety and quality of healthcare

131 Interesting findings here are that laws and information about regulations regarding quality of healthcare and patients' safety (A3) is most often present on the scanned websites. However, next to the formal obligations and rights that exist regarding getting healthcare in the Member States, less than half of the websites provide more practical aid information (A1) about the treatment patients can get for specific diseases. However, not much information was available regarding the quality standards (A4) that are used by healthcare providers and how they are performing with regard to quality (A2). A reason for this could be that most websites that provide information regarding cross-border healthcare are set-up and maintained by government institutions and patients' organisations.

132 For the websites that provide the abovementioned information the level of detail of this information is displayed in the figure below.

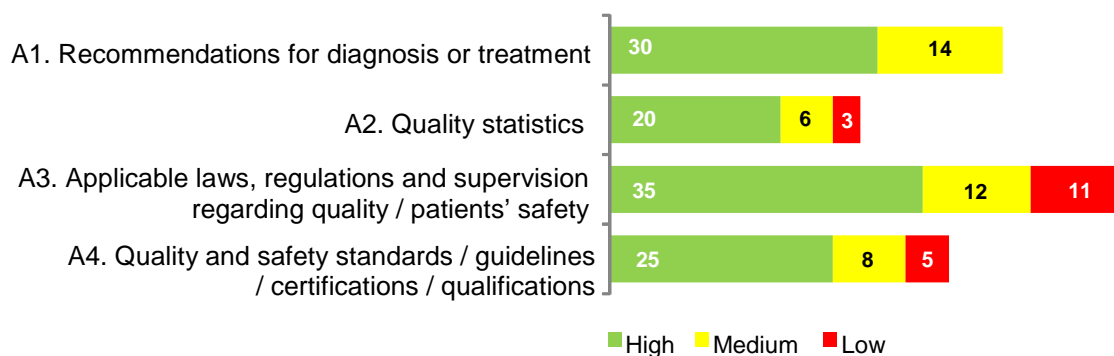


Figure 5: Level of detail of available information - A. Patients' safety and quality of healthcare

133 As can be seen in the above figure, most of the information available has a high level of detail. This is especially the case for the rules and regulations and recommendations for diagnosis and treatment. Interesting to see however is that when information regarding quality standards and statistics for healthcare providers is available, it also has a high level of detail.

134 The easiness to understand the information provided is shown in the figure below.

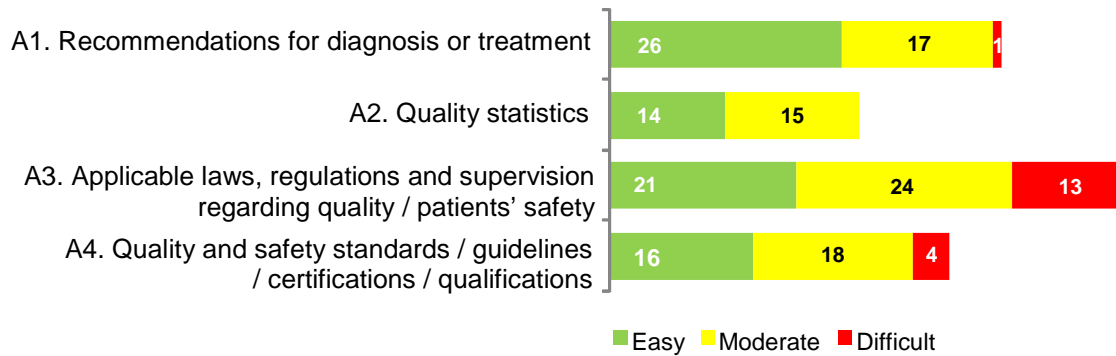


Figure 6: Easiness to understand available information - A. Patients' safety and quality of healthcare

135 The figure above shows that most of the information provided regarding patients' safety and quality of care is not easy to understand. This could be caused by the complexity of the information, for instance in the case of the applicable laws and regulations and related quality and safety standards for healthcare professionals. Also, it could be argued that the available information regarding recommendations for diagnosis and treatment is mostly patient centered, so tested for understandability by the providers of this information.

B. Healthcare providers

136 The extent to which the information about Healthcare providers is present on the 98 scanned websites is shown in the figure below.

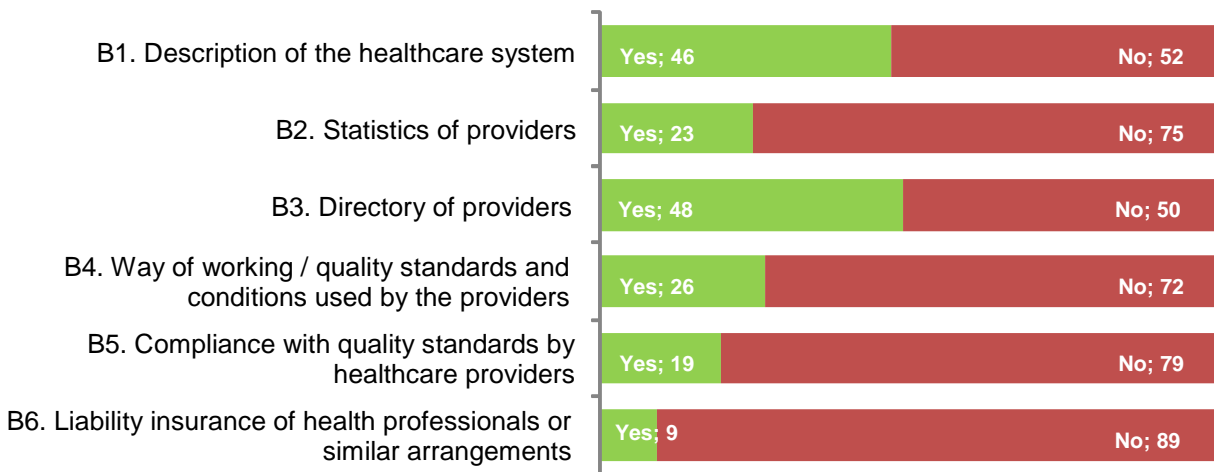


Figure 7: Available information - B. Healthcare providers

137 As can be seen in the figure above, the most available information categories are descriptions of the health system (B1) and which providers are present in the Member States (B3). In contrast to the lack of information regarding quality statistics (A2) this could be caused by governments and patients' organisations that are willing to redirect patients to the most suitable healthcare providers. This also links to the available information regarding recommendations for diagnosis and treatment (A1). In line with quality statistics (A2) also provider statistics (B2) are poorly available. This also counts for the availability of information about the way of working for providers (B4) and the compliance to quality standards (B5) that is in line with information regarding quality standards (A4). Furthermore, the less available category of information is about the topic of liability of healthcare providers in case of disputes. This would not be surprising given the low number of provider organisation websites that provide cross-border healthcare together with the sensitivity of this kind of information.

138 For the websites that provide the abovementioned information the level of detail of this information is displayed in the figure below.

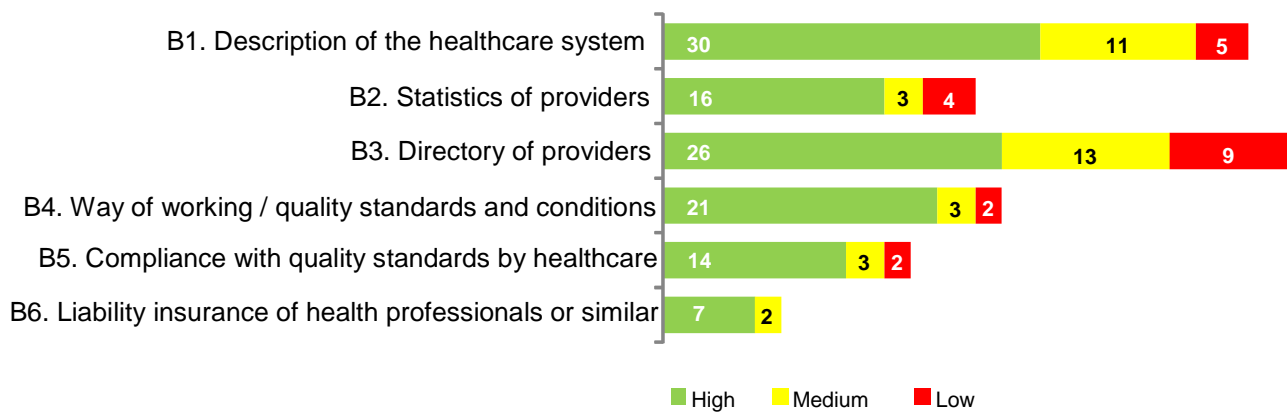


Figure 8: Level of detail of available information – B. Healthcare providers

139 The above figure does show that although information regarding statistics (B3), the way of working (B4), compliance (B5) and liability (B6) is not often available, it has a high level of detail. Interesting is to see that the level of detail of information regarding the working of health systems (B1) is less than for the other information categories. The fact that the directory of providers (B3) is not very detailed is not surprising given that such information is meant to direct patients to the right type of provider.

140 The easiness to understand the information provided is shown in the figure below.

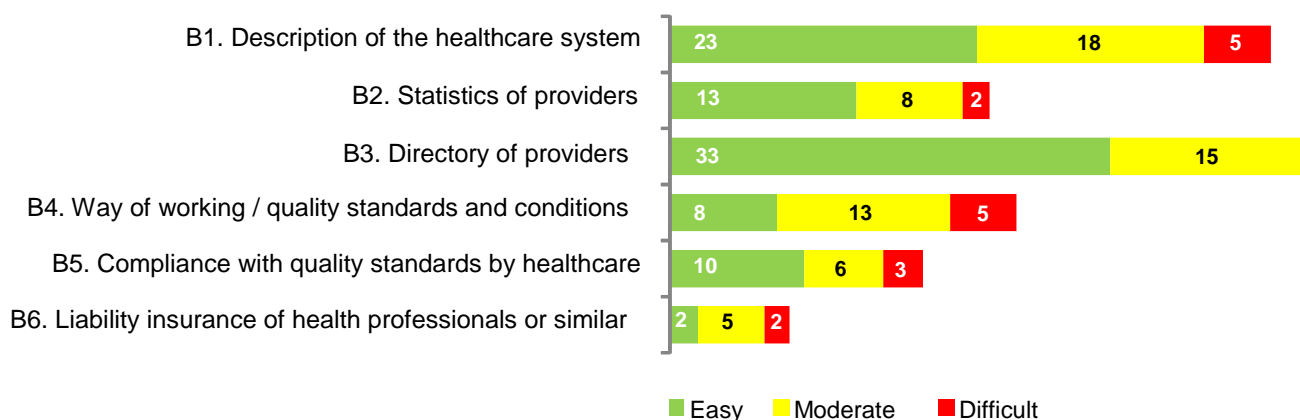


Figure 9: Easiness to understand available information - B. Healthcare providers

141 The above figure indicates that liability information is not only unavailable most of the time but also not easy to understand. This also holds more or less for the information regarding the way of working and compliance to quality standards, which is in line with the findings for information type A. Also, information about the health system is not always clear, which is not really surprising given the complexity of such social mechanisms in most Member States.

C. Patients' rights

142 The extent to which the information about Patients' rights is present on the 98 scanned websites is shown in the figure below.

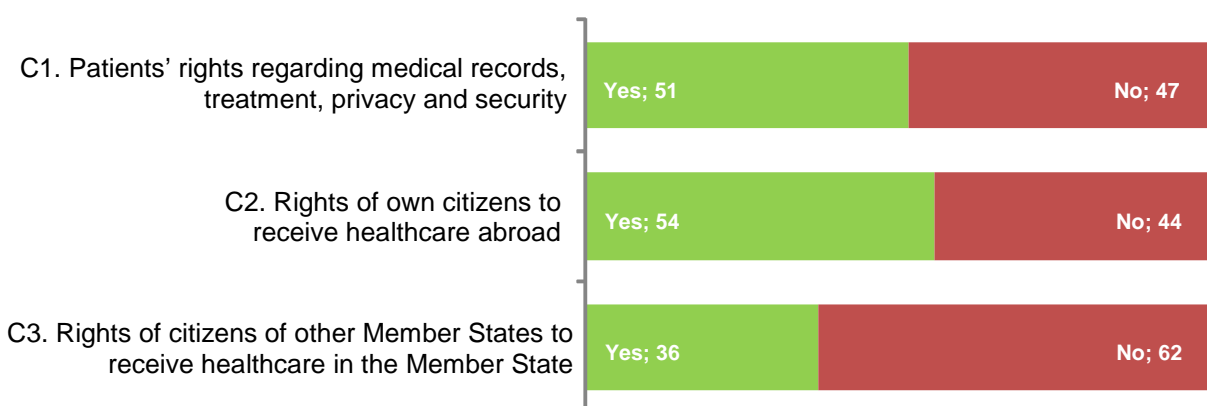


Figure 10: Available information - C. Patients' rights

143 Information regarding patients' rights is available most of the times for own citizens (C1 and C2) but in less cases also for citizens from other Member States (C3).

144 For the websites that provide the abovementioned information the level of detail of this information is displayed in the figure below.

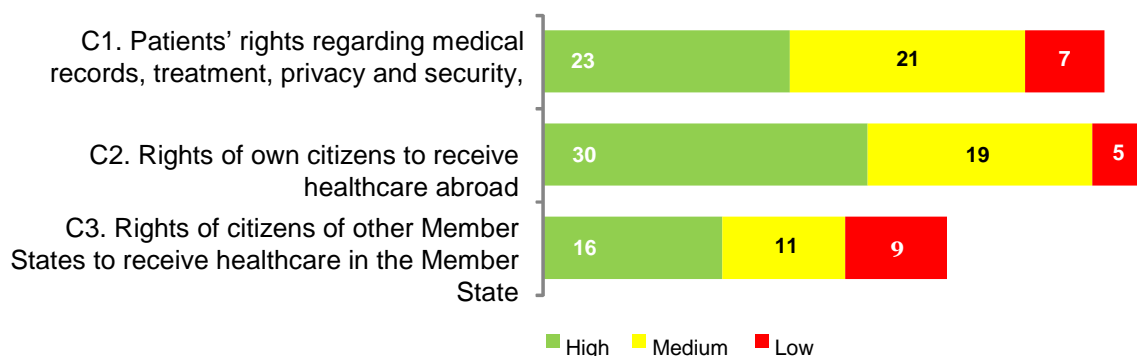


Figure 11: Level of detail of available information - C. Patients' rights

145 When information is present regarding patients' rights, only in about half the cases it has a high level of detail.

146 The easiness to understand the information provided is shown in the figure below.

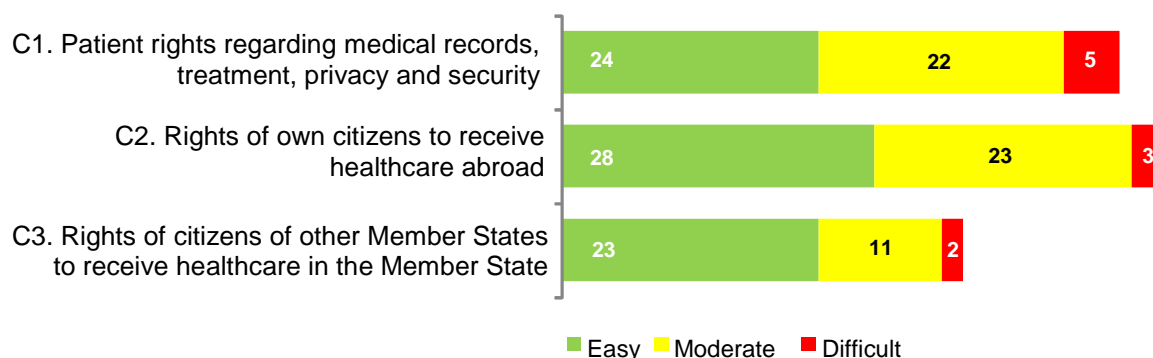


Figure 12: Easiness to understand available information - C. Patients' rights

147 As can be seen in the above figure, similar to the level of detail, only in about half of the cases the information provided regarding patients' rights is easy to understand. Interesting here is that the information for citizens from other Member States seems to be less detailed than for own citizens and may therefore also be more easy to understand.

D. Procedures

148 The extent to which the information about Procedures is present on the 98 scanned websites is shown in the figure below.

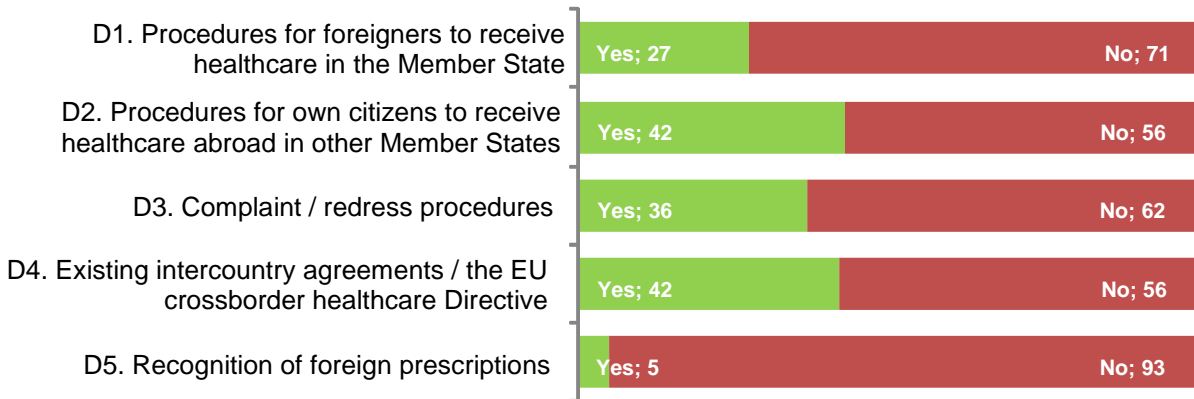


Figure 13: Available information – D. Procedures

149 The figure above displays a view of the availability of information regarding procedures that is in line with information about applicable laws and regulations and patients' rights for cross-border healthcare. However, information regarding the recognition of prescriptions from providers in other Member States is practically unavailable. In contrast to the unavailability of liability information from providers, information regarding compliant and redress procedures for patients is fairly present.

150 For the websites that provide the abovementioned information the level of detail of this information is displayed in the figure below.

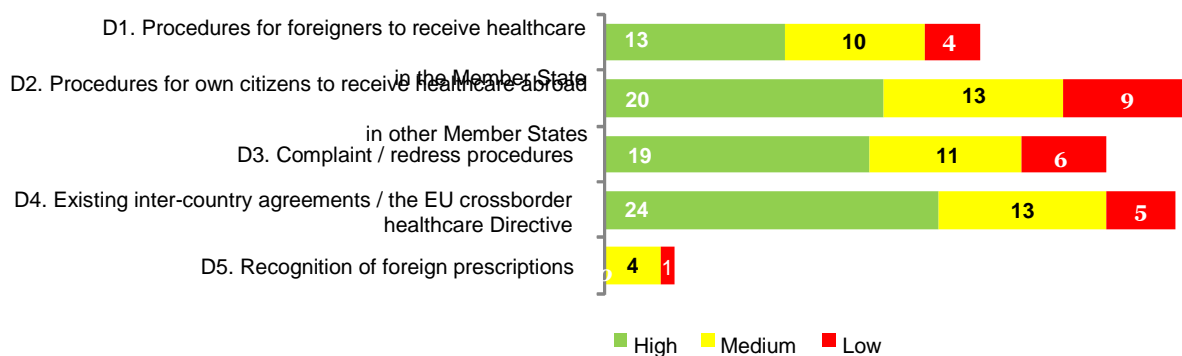


Figure 14: Level of detail of available information - D. Procedures

151 As can be seen in the figure above, the level of detail for the available information regarding procedures differs but is only of a high level of detail in about half of the cases. Interesting to see here is that the available information regarding the recognition of foreign prescriptions is not detailed. The information regarding procedures is of a lesser level of detail for foreigners than for the own citizens of the Member States but is not easier to understand (in contrast to the information about patients' rights).

152 The easiness to understand the information provided is shown in the figure below.

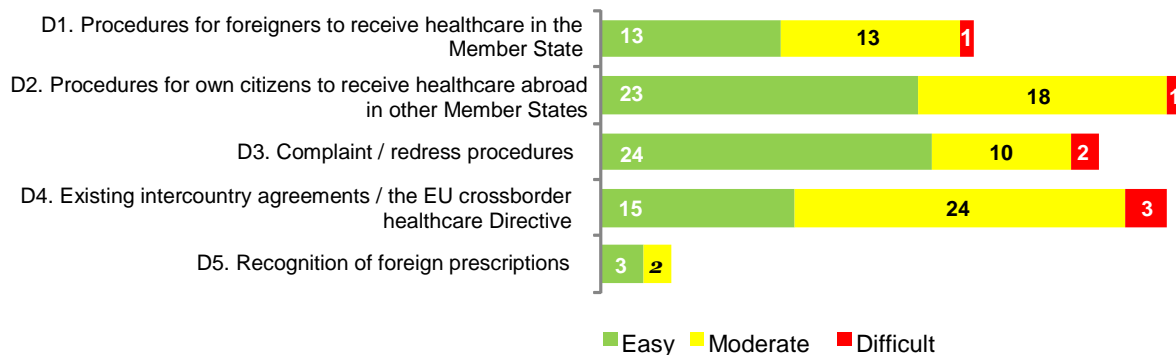


Figure 15: Easiness to understand available information - D. Procedures

153 Information regarding inter-country agreements is not easy to understand.

E. Contact details of NCPs in other Member States

154 The extent to which Contact details of NCPs in other Member States are present on the 98 scanned websites is shown in the figure below.

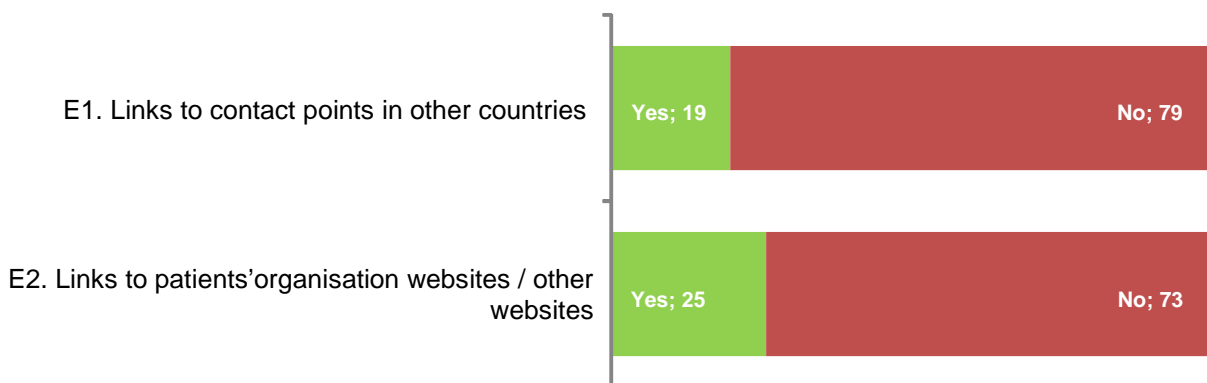


Figure 16: Available information - E. Contact details of NCPs in other Member States

155 The figure above indicates that only in a small amount of cases the scanned websites are linked to other websites containing information about cross-border healthcare.

156 Regarding the presence of links to other contact points and/or websites regarding cross-border healthcare, the information properties 'level of detail' and 'easiness to understand' are not applicable.

F. Accessibility

157 The extent to which the information about Accessibility is present on the 98 scanned websites is shown in the figure below.

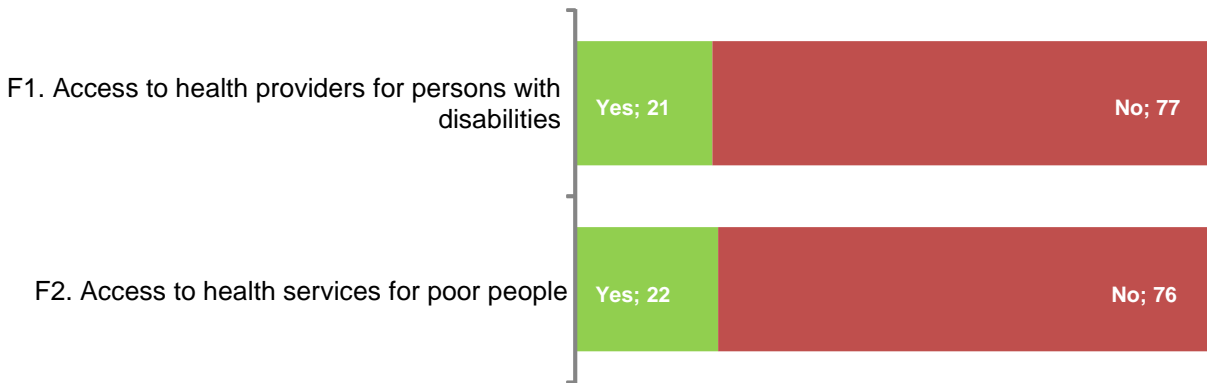


Figure 17: Available information - F. Accessibility

158 As shown in the above figure, information regarding access to healthcare facilities for disabled people and citizens with limited financial resources is only present in about 1 in 5 cases.

159 For the websites that provide the abovementioned information the level of detail of this information is displayed in the figure below.



Figure 18: Level of detail of available information - F. Accessibility

160 When information regarding accessibility is available, in more than half of the cases it is of medium or low level of detail.

161 The easiness to understand the information provided is shown in the figure below.

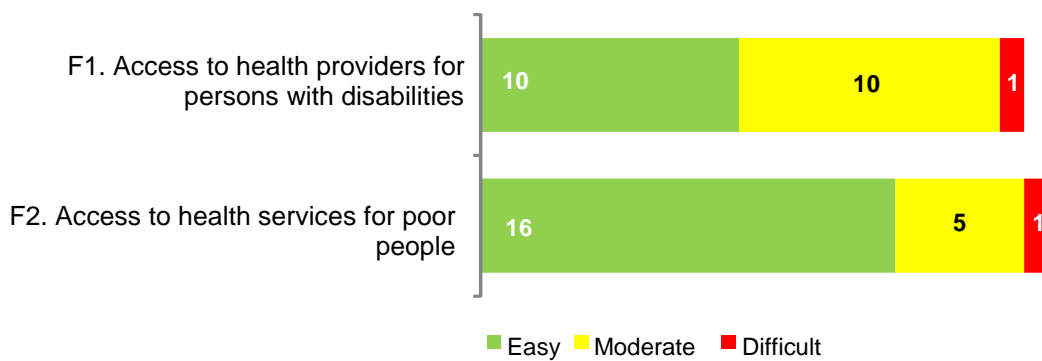


Figure 19: Easiness to understand available information - F. Accessibility

162 Although the available information regarding accessibility is only of a high level of detail in about half of the cases, the information for citizens with limited financial resources seems to be easy to understand in most cases. This could be caused by tailoring the information provided to the patients' group for which it is meant.

G. Interaction with users

163 The extent to which features for Interaction with users are present on the 98 scanned websites is shown in the figure below.

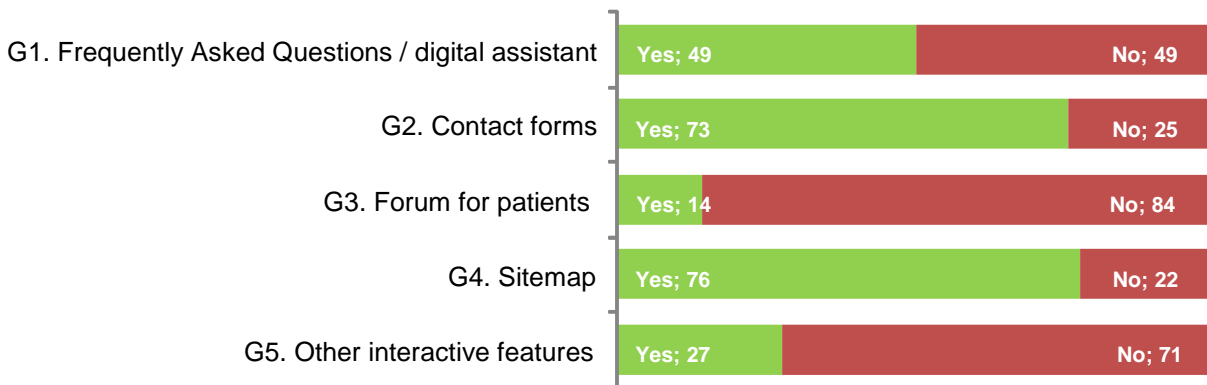


Figure 20: Available information - G. Interaction with users

164 As can be seen in the above figure, frequently asked questions pages, contact forms and site maps are used in most cases to guide patients to the information they are looking for. Two-way interactive features, such as digital assistants, forums and chat boxes are not present in most of the cases. However, the most prevailing other interactive feature is social media integration. Patients can post the information they have found on their own social media pages so other friends/relatives/patients can benefit from it.

165 Regarding the presence of interactive features on the scanned websites, the information properties' level of detail' and the 'easiness to understand' are no good indicators for the possible benefit a patient would have from this functionality. Therefore, this information property was only assessed qualitatively.

H. Indications on financial aspects

166 The extent to which the information about Indications on financial aspects is present on the 98 scanned websites is shown in the figure below.

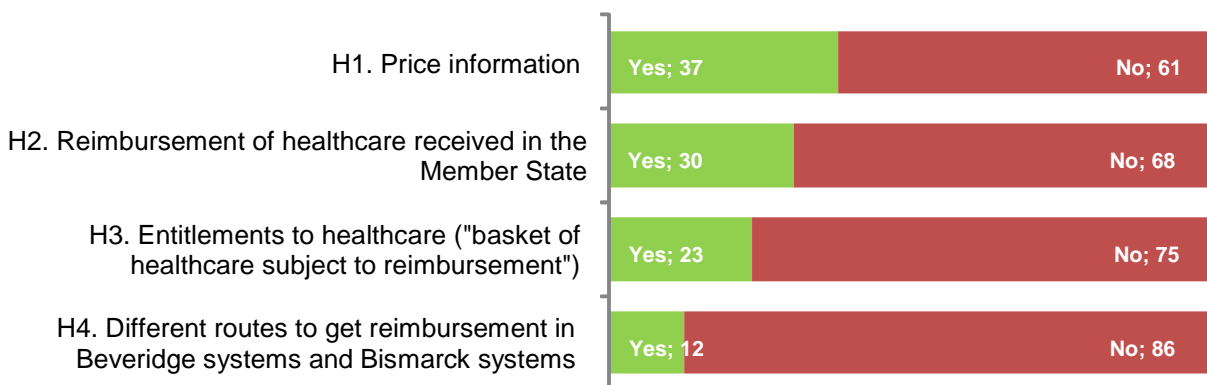


Figure 21: Available information - H. Indications on financial aspects

167 As can be seen in the above figure, price, reimbursement and entitlement information is only present in about 1 out of 3 cases. This available information is categorised for different types of health systems for only a couple of websites.

168 For the websites that provide the abovementioned information the level of detail of this information is displayed in the figure below²⁷.

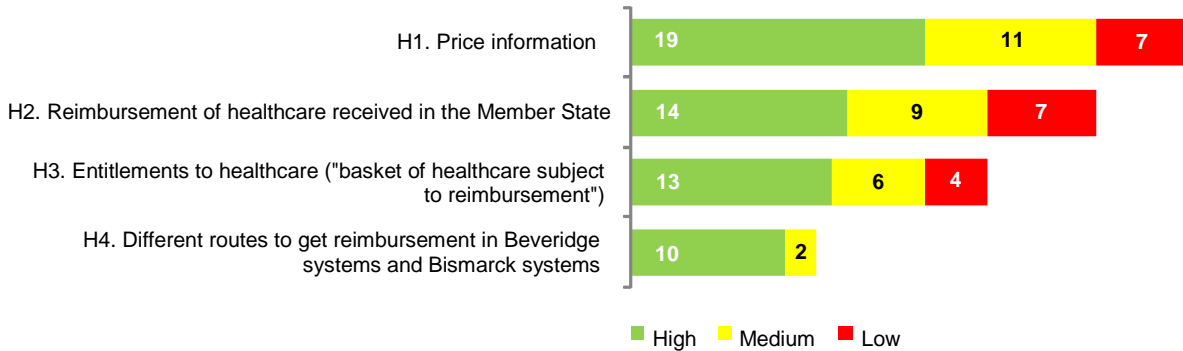


Figure 22: Level of detail of available information - H. Indications on financial aspects

169 When financial information is present, in more than half of the cases it is not easy to understand. An exception is the information on different routes for reimbursement for different types of health systems that is detailed in most of the cases.

170 The easiness to understand the information provided is shown in the figure below².

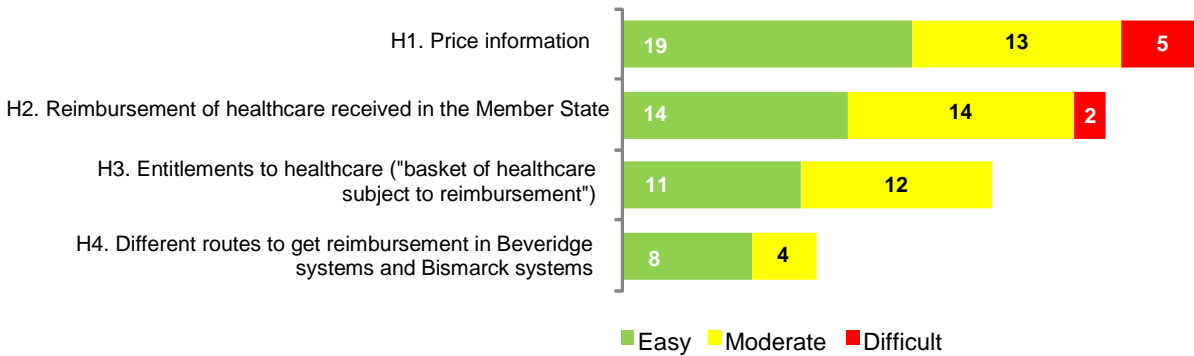


Figure 23: Easiness to understand available information - H. Indications on financial aspects

171 Financial information that is available on the scanned websites is not easy to understand in more or less half of the cases while information on different routes for reimbursement in different health system types is clear for patients in most of the cases.

²⁷ For H.1 in one case a website only provided contact information for a patient to call a contact person to get information regarding the costs of getting specific care in that Member State. Therefore the information properties 'Level of detail' and 'Easiness to understand' are not applicable. The bars for H.1 for both accompanying information properties therefore contain 36 instead of 37 values.

A.3. Quick Scan template

Ref	General information		
o.1	Website number:		
o.2	Search path item:		
o.3	Name of organisation responsible for website:		
o.4	URL:		
o.5	Scope of website:		
o.6	Official contact point?		
o.7	Easiness to reach:		
o.8	Search path followed:		
o.9	Data source/sponsors and reference to objectivity/quality of information:		
o.10	Remarkable features / information:		
o.11	Is this a NCP candidate?		
Ref	Type of information	Information present?	Remarks on types or quality of information present
A.1	Are recommendations given for diagnosis or treatment (for specific diseases)?		
A.2	Are statistics about quality (such as deaths, incidents, complaints) given?		
A.3	Are descriptions of applicable laws, regulations and supervision regarding patient safety present?		
A.4	Is there information about quality standards / standards / certifications / qualifications for providers?		
A.5	Are statistics about quality (such as deaths, incidents, complaints) given?		
B.1	Is a description of the health care system present?		
B.2	Are statistics of providers (number by type) available?		
B.3	Is a directory of providers (per type) available?		
B.4	Are there references to the way of working / quality standards used by the (different type of) providers?		
C.1	Is there a description of the patient rights regarding medical records (also electronic), treatment, privacy and security applicable in the member state?		
C.2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other member states)?		
C.3	Are there specific references on the rights of citizens of other member states to receive healthcare in the member state (information for foreigners)?		
D.1	Is there information on the procedures (incl. prior approval, forms to fill in etc.) that should be followed by foreigners to receive healthcare in the member state?		
D.2	Is there information on the procedures (incl. prior approval, forms to fill in etc.) for own citizens to receive healthcare abroad (in other member states)?		
D.3	Is there information on the complaint / redress procedures regarding healthcare received in the member state?		
D.4	Is there information on existing inter-country agreements / the EU crossborder healthcare directive?		
E.1	Are there links to contact points in other countries?		
F.1	Is there information on access to health providers for persons with disabilities?		
F.2	Is there information on access to health services for poor people?		
G.1	Is a Frequently Asked Questions section or a digital assistant present?		
G.2	Are contact forms present?		
G.3	Is a forum for patients present?		
H.1	Is there any price information present?		
H.2	Is there any information on reimbursement of healthcare received in the member state?		

A.4. Detailed Web Search template

SP.1 (0.1 before)	Website ID:	
SP.2	Date of examination of the website:	
SP.3	Name(s) of PwC staff (member) that has performed the detailed scan:	
SP.4	Please save all pages viewed as a .mht file using internet explorer --> save as function. Do you have included .mht files for each page examined?	
SP.5 (0.8 before)	Search path followed:	

WP.1 (0.2 before)	Search path item:	
WP.2 (0.3 before)	Name of organisation responsible for website:	
WP.3 (0.4 before)	URL:	
WP.4 (0.5 before)	Scope of website:	
WP.5 (0.6 before)	Official contact point?	
WP.6 (0.7 before)	Easiness to reach:	
WP.7 (0.9 before)	Data source/sponsors and reference to objectivity/quality of information:	
WP.8 (0.10 before)	Remarkable features / information:	
WP.9 (0.11 before)	Is this a NCP candidate?	
WP.10	In which languages is the information available on the website?	
WP.11	Please provide the URLs of the webpages available in other languages than the language of the Member State of Treatment:	
WP.12	Please indicate whether any important information appears to be clearly missing on the website of each of the contact points:	
WP.13	Is there information on how contact point effectiveness is measured, particularly in terms of satisfaction, consistency in choice and understanding of choice from the patient perspective?	
WP.14	If there any evidence on the website that the organisation responsible for the website has consulted users/patients on the provision of the information online?	
WP.15	Which accessibility features are present?	
WP.16	What information is present about the organisation responsible for the content on the website?	

Ref	Information type	Information present / means of provision	URL	Updated last	Level of detail	Easiness to understand	Qualitative assessment of information
A.1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?						
A.2	Are statistics about quality (such as deaths, incidents, complaints) given?						
A.3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patient safety present?						
A.4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?						
B.1	Is a description of the health care system present?						
B.2	Are statistics of providers (number by type) available?						
B.3	Is a directory of providers (per type) available?						
B.4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?						
B.5	Is information about compliance with quality standards by healthcare providers available?						
B.6	Is there information about the liability insurance of health professionals or similar arrangements?						
C.1	Is there a description of the patient rights regarding medical records (also electronic), treatment, privacy and security applicable in the member state?						
C.2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other member states)?						
C.3	Are there specific references on the rights of citizens of other member states to receive healthcare in the member state (information for foreigners)?						
D.1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the member state?						
D.2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other member states)?						
D.3	Is there information on the complaint / redress procedures regarding healthcare received in the member state?						
D.4	Is there information on existing inter-country agreements / the EU crossborder healthcare directive?						
D.5	Is there information on the recognition of foreign prescriptions in the member state?						
E.1	Are there links to contact points in other countries?						
E.2	Are there links to patient organisation websites or other websites with usefull information on cross border healthcare?						
F.1	Is there information on access to health providers for persons with disabilities?						
F.2	Is there information on access to health services for poor people?						
G.1	Is a Frequently Asked Questions section or a digital assistant present?						
G.2	Are contact forms present?						
G.3	Is a forum for patients present?						
G.4	Is there a sitemap included on the website?						
G.5	Are there other interactive features such as social media integration and/or customised pages after user login?						
H.1	Is there any price information present?						
H.2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the member state?						
H.3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?						
H.4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?						

A.5. Results detailed Web Search per Member State

172 In the following paragraphs the results of the detailed Web Search are presented for each Member State. First a brief overview, of the websites analysed, is given. Secondly, the key findings of the websites analysed are summarised. Finally, the information that is delivered to patients via the websites is described.

A.5.1. Austria (AT)

Health system characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
8.3	11	29.7	46	8.2	16.4	Bismarck	National

Overview of the websites analysed

173 With respect to Austria, the following three websites were analysed:

Website ID	AT1	AT4	AT6
Name of organisation responsible for website	Bundesministerium für Gesundheit - Ministry of Health	Gesundheit österreich GmbH National research and competence centre for health promotion	Sozial Versicherung - Austrian social security
URL	www.bmg.gv.at	www.goeg.at	www.sozialversicherung.at
Scope of website	National	National	National
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	German, English	German, English	German, English
Which accessibility features are present?	Adjustable font, contrast feature (black background), shortcuts using keyboard, read-out-loud option for textblocks	adjustable font	None

Type of information delivered to patients

Ref	Definition	Information available?	AT1	AT4	AT6
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	2/3	Yes - available online	No	Yes - available online
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	1/3	Yes - available online	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/3	Yes - available online	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	2/3	Yes - available online	Yes - available online	No
B1	Is a description of the health system present?	2/3	Yes - available online	Yes - available online	No
B2	Are statistics of providers (number by type) available?	0/3	No	No	No
B3	Is a directory of providers (per type) available?	2/3	Yes - available online	Yes - available online	No

Ref	Definition	Information available?	AT1	AT4	AT6
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	2/3	Yes - available online	Yes - available online	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/3	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/3	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	0/3	No	No	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	1/3	No	No	Yes - available online
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/3	No	No	Yes - available online
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/3	No	No	Yes - available online
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	0/3	No	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	0/3	No	No	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/3	No	No	Yes - available online
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/3	No	No	No
E1	Are there links to contact points in other countries?	0/3	No	No	No
E2	Are there links to patients' organisation websites or other websites with useful information on cross border healthcare?	1/3	Yes - available online	No	No
F1	Is there information on access to health providers for persons with disabilities?	0/3	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/3	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	3/3	Yes - available online	Yes - available online	Yes - available online
G2	Are contact forms present?	1/3	No	No	Yes - available online
G3	Is a forum for patients present?	1/3	No	No	Yes - available online
G4	Is there a sitemap included on the website?	3/3	Yes - available online	Yes - available online	Yes - available online

Ref	Definition	Information available?	AT1	AT4	AT6
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/3	No	No	No
H1	Is there any price information present?	1/3	No	No	Yes - available online
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/3	No	No	Yes - available online
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/3	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems where healthcare is publicly provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/3	No	No	No

A.5.2. Belgium (BE)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
10.7	11.8	6.4	64.5	3.5	24.2	Bismarck	National

Overview of the websites analysed

174 With respect to Belgium the following three websites were analysed:

Website ID	BE2	BE4	BE8
Name of organisation responsible for website	Institut National d'Assurance-Maladie-Invalidité INAMI/Rijksinstituut voor Ziekte- en Invaliditeitsverzekering RIZIV-National Institute for Health Insurance and Disability	Service public fédéral, Santé Publique, Sécurité de la chaîne alimentaire et Environnement/Federale overheidsdienst, Volksgezondheid, Veiligheid van de voedselketen en Leefmilieu - Public federal service, Public health, Food chain safety and Environment	Guide de la santé transfrontalière Nord-Pas-de-Calais Belgique - Guide for cross-border healthcare in Nord-Pas-de-Calais Belgium
URL	http://www.inami.be	http://www.health.belgium.be/eportal	http://www.guidesantefrancobelge.eu/FR/systemesanteebelgique/index.html
Scope of website	National	National	Regional
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Active search - 1 to 3 minutes
In which languages is the information available on the website?	French, Dutch	Dutch, French, German, English	French, Dutch
Which accessibility features are present?	None	None	None

Type of information delivered to patients

Ref	Definition	Information available?	BE2	BE4	BE8
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	2/3	Yes - available online	Yes - available online	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	1/3	No	Yes - available online	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	1/3	No	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	2/3	Yes - available online	Yes - available online	No
B1	Is a description of the health system present?	1/3	No	No	Yes - available online
B2	Are statistics of providers (number by type) available?	1/3	No	Yes - available online	No
B3	Is a directory of providers (per type) available?	2/3	No	Yes - available online	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	2/3	Yes - available online	Yes - available online	No

Ref	Definition	Information available?	BE2	BE4	BE8
B5	Is information about compliance with quality standards by healthcare providers available?	1/3	No	Yes - available online	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/3	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	3/3	Yes - available online	Yes - available online	Yes - available online
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/3	Yes - available online	No	Yes - available online
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/3	No	No	Yes - available online
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/3	No	No	Yes - available online
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/3	Yes - available online	No	Yes - available online
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	2/3	No	Yes - available online	Yes - available online
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/3	No	No	Yes - available online
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/3	No	No	No
E1	Are there links to contact points in other countries?	1/3	No	No	Yes - available online
E2	Are there links to patients' organisation websites or other websites with useful information on cross border healthcare?	1/3	No	No	Yes - available online
F1	Is there information on access to health providers for persons with disabilities?	1/3	Yes - available online	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	1/3	Yes - available online	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	3/3	Yes - available online	Yes - available online	Yes - available online
G2	Are contact forms present?	2/3	No	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/3	No	No	No
G4	Is there a sitemap included on the website?	2/3	Yes - available online	Yes - available online	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/3	No	No	No
H1	Is there any price information present?	2/3	Yes - available online	No	Yes - available online

Ref	Definition	Information available?	BE2	BE4	BE8
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/3	Yes - available online	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/3	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems where healthcare is publicly provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	1/3	Yes - available online	No	No

A.5.3. Bulgaria (BG)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
7.6	7.4	26.8	30.7	0.1	41.6	Bismarck	National

Overview of the websites analysed

175 With respect to Bulgaria the following four websites were analysed:

	BG1	BG2	BG3	BG8
Search path item	(public) health insurance organisation	Government - Ministry of Health	Government - Ministry of Health	Non-profit - Patient stakeholder organisation
Name of organisation responsible for website	Национална здравно-осигурителна каса (National Health Insurance Fund)	National Center of Health Informatics	Министерство на здравеопазването (Ministry of Health)	National Patients Organization
URL	www.nhif.bg	http://www.nchi.government.bg/	www.mh.government.bg/	http://www.npo.bg/
Scope of website	National	National	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	Patients information available in English, French and German language with direct access from Home page	Bulgarian and English	only in Bulgarian language	Bulgarian
Which accessibility features are present?	Only a Site map available. Content is well structured by target groups.	None	There is a Site map, Text version, Adjustable fonts	None

Type of information delivered to patients

Ref	Definition	Information available?	BG1	BG2	BG3	BG8
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/4	No	No	Yes - available online	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	1/4	No	Yes - available online	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/4	Yes - available online	No	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	2/4	No	Yes - available online	Yes - available online	No
B1	Is a description of the health system present?	2/4	Yes - available online	Yes - but only in hard copy	No	No

Ref	Definition	Information available?	BG1	BG2	BG3	BG8
B2	Are statistics of providers (number by type) available?	2/4	No	Yes - available online	Yes - available online	No
B3	Is a directory of providers (per type) available?	2/4	No	No	Yes - available online	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/4	No	No	Yes - available online	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/4	No	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	1/4	No	No	Yes - available online	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	1/4	No	No	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/4	Yes - available online	No	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/4	Yes - available online	No	Yes - available online	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	2/4	Yes - available online	No	Yes - available online	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/4	Yes - available online	No	Yes - available online	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	1/4	No	No	Yes - available online	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/4	Yes - available online	No	Yes - available online	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	1/4	Yes - available online	No	No	No

Ref	Definition	Information available?	BG1	BG2	BG3	BG8
E1	Are there links to contact points in other countries?	0/4	No	No	No	No
E2	Are there links to patients'organisation websites or other websites with usefull information on cross border healthcare?	3/4	No	Yes - available online	Yes - available online	Yes - available online
F1	Is there information on access to health providers for persons with disabilities?	1/4	No	No	Yes - available online	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/4	No	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistent present?	1/4	Yes - available online	No	No	No
G2	Are contact forms present?	3/4	Yes - available online	No	Yes - available online	Yes - available online
G3	Is a forum for patients present?	1/4	No	No	No	Yes - available online
G4	Is there a sitemap included on the website?	2/4	Yes - available online	No	Yes - available online	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/4	No	No	No	No
H1	Is there any price information present?	2/4	Yes - available online	No	Yes - available online	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	2/4	Yes - available online	No	No	Yes - available online
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	2/4	Yes - available online	No	No	Yes - available online
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	2/4	Yes - available online	No	No	Yes - available online

A.5.4. Cyprus (CY)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
0.8	6	43.5	0	4.3	51.6	Beveridge	National

Overview of the websites analysed

176 With respect to Cyprus the following four websites were analysed:

	CY1	CY2	CY3	CY4
Search path item	Government - Ministry of Health	Government - Ministry of Social Security	(public) health insurance organisation	Government - public health information websites
Name of organisation responsible for website	Υπουργείο Υγείας της Κυπριακής Δημοκρατίας - Ministry of Health of the Republic of Cyprus	Υπουργείο Εργασίας και Κοινωνικών Ασφαλίσεων - Ministry of Labour and Social Insurance	Οργανισμός Ασφάλισης Υγείας - Health Insurance organisation	Government
URL	http://www.moh.gov.cy	http://www.mlsi.gov.cy	http://www.hio.org.cy	http://www.cyprus.gov.cy/portal/portal.nsf/0/D1F326575BA958F3C2256EBD004F3C70?OpenDocument
Scope of website	National	National	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Active search - 1 to 3 minutes
In which languages is the information available on the website?	1. Greek 2. English 3. Turkish (not available for all information stated)	1. Greek 2. English	1. Greek 2. English	1. Greek 2. English
Which accessibility features are present?	None	None	None	None

Type of information delivered to patients

Ref	Definition	Information available?	CY1	CY2	CY3	CY4
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/4	Yes - available online	No	No	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	3/4	Yes - available online	Yes - available online	No	Yes - available online
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	3/4	Yes - available online	Yes - available online	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	1/4	No	No	No	Yes - available online
B1	Is a description of the health system present?	3/4	Yes - available online	No	Yes - available online	Yes - available online

Ref	Definition	Information available?	CY1	CY2	CY3	CY4
B2	Are statistics of providers (number by type) available?	0/4	No	No	No	No
B3	Is a directory of providers (per type) available?	1/4	Yes - available online	No	No	No
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/4	No	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/4	No	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	1/4	Yes - available online	No	No	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	1/4	Yes - available online	No	No	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/4	Yes - available online	No	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/4	Yes - available online	No	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	1/4	Yes - available online	No	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	0/4	No	No	No	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	0/4	No	No	No	No

Ref	Definition	Information available?	CY1	CY2	CY3	CY4
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	0/4	No	No	No	No
E2	Are there links to patients'organisation websites or other websites with usefull information on cross border healthcare?	1/4	Yes - available online	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	1/4	No	Yes - available online	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	1/4	Yes - available online	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	2/4	Yes - available online	Yes - available online	No	No
G2	Are contact forms present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/4	No	No	No	No
G4	Is there a sitemap included on the website?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	1/4	No	No	No	Yes - available online
H1	Is there any price information present?	1/4	Yes - available online	No	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	0/4	No	No	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.5. Czech Republic (CZ)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %			Out-of-Pocket expenses	System type	Organization
		Tax	Social Insurance	Public Insurance			
10.5	7.6	8.3	80.8	0.2	10.4	Bismarck	National

Overview of the websites analysed

177 With respect to the Czech Republic the following four websites were analysed:

	C22	C24	C27	C28
Search path item	Government - Ministry of Health	Government - Regional health authorities	(public) health insurance organisation	Non-profit - Patient stakeholder organisation
Name of organisation responsible for website	Ministerstvo zdravotnictví České republiky (Ministry of Health of the Czech Republic)	Magistrát hl. m. Prahy (City hall of the capital city of Prague)	Všeobecná zdravotní pojišťovna	Svaz pacientů ČR (Czech association of patients)
URL	http://www.mzcr.cz/ http://www.rijksoverheid.nl/onderwerpen/zorgverzekering/vragen-antwoord/ben-ik-verzekerd-voor-de-zorgverzekering-als-ik-in-het-buitenland-woon.html	http://www.praha.eu/jnp/en/city_hall/index.html	http://www.vzp.cz/	http://www.pacienti.cz/
Scope of website	National	Regional	National	National
Official contact point?	No	No	No	No
Easiness to reach	Active search - 1 to 3 minutes	Active search - 1 to 3 minutes	Active search - 1 to 3 minutes	Active search - 1 to 3 minutes
In which languages is the information available on the website?	Czech, some parts in English; short presentation of information for foreigners is also available in English, Russian, Vietnamese and Ukrainian	Czech, English	Czech, limited information in English	Czech only
Which accessibility features are present?	Adjustable font	None	None	None

Type of information delivered to patients

Ref	Definition	Information available?	C22	C24	C27	C28
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/4	Yes	No	No	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/4	No	No	No	No

Ref	Definition	Information available?	CZ2	CZ4	CZ7	CZ8
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/4	Yes	Yes - available online	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	0/4	No	No	No	No
B1	Is a description of the health system present?	0/4	No	No	No	No
B2	Are statistics of providers (number by type) available?	0/4	No	No	No	No
B3	Is a directory of providers (per type) available?	2/4	Yes	Yes - available online	Yes - available online	No
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/4	No	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/4	No	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	2/4	Yes	No	Yes - available online	Yes - available online
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	1/4	Yes	No	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/4	No	No	Yes - available online	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	0/3	Yes	No	Yes - but only in hard copy	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	1/4	Yes	No	Yes - available online	No

Ref	Definition	Information available?	CZ2	CZ4	CZ7	CZ8
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	0/4	Yes	No	No	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	0/4	Yes	No	No	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	0/4	No	No	No	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/4	No	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	0/4	No	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/4	No	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	2/4	Yes - available online	No	Yes - available online	No
G2	Are contact forms present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/4	No	No	No	No
G4	Is there a sitemap included on the website?	2/4	Yes - available online	Yes - available online	No	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/4	No	No	No	No
H1	Is there any price information present?	1/4	Yes - available online	No	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/4	No	No	Yes - available online	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No

<i>Ref</i>	<i>Definition</i>	<i>Information available?</i>	<i>CZ2</i>	<i>CZ4</i>	<i>CZ7</i>	<i>CZ8</i>
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems where healthcare is publicly provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.6. Denmark (DK)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
5.5	11.2	82.3	0	1.6	14.4	Beveridge	Regional

Overview of the websites analysed

178 With respect to Denmark the following four websites were analysed:

	DK1	DK2	DK3	DK4
Search path item	Government - Ministry of Health	Government - Regional health authorities	Government - Ministry of Health	Government - Regional health authorities
Name of organisation responsible for website	Ministeriet for Sundhed og Forebyggelse, Ministry of Health and Prevention	Region Hovedstaden / Capital Region of Denmark	Sundhedsstyrelsen, National Board of Health	Region Midtjylland / Central Region of Denmark
URL	www.im.dk	http://www.regionh.dk/menu/	www.sst.dk	www.rm.dk
Scope of website	National	National	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	Mainly danish. The front page is translated into english, but when you click further down all information is in danish	Danish, English and German	Danish and english	Danish and English
Which accessibility features are present?	Read out loud, Sitemap	Read aloud, Adjustable font	None on the front/home page, but when you click down in the menus, there is read aloud and adjustable font	Read aloud and Adjustable font

Type of information delivered to patients

Ref	Definition	Information available?	DK1	DK2	DK3	DK4
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	3/4	Yes - available online	Yes - available online	Yes - available online	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	2/4	Yes - available online	No	No	Yes - available online
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	1/4	Yes - available online	No	No	No

Ref	Definition	Information available?	DK1	DK2	DK3	DK4
B1	Is a description of the health system present?	1/4	Yes - available online	No	No	No
B2	Are statistics of providers (number by type) available?	0/4	No	No	No	No
B3	Is a directory of providers (per type) available?	3/4	Yes - available online	Yes - available online	No	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/4	No	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/4	No	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	0/4	No	No	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	0/4	No	No	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	2/4	Yes - available online	Yes - available online	No	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online

Ref	Definition	Information available?	DK1	DK2	DK3	DK4
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	0/4	No	No	No	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	1/4	No	No	Yes - available online	No
F1	Is there information on access to health providers for persons with disabilities?	1/4	No	Yes - available online	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/4	No	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	0/4	No	No	No	No
G2	Are contact forms present?	3/4	Yes - available online	Yes - available online	No	Yes - available online
G3	Is a forum for patients present?	2/4	No	Yes - available online	No	Yes - available online
G4	Is there a sitemap included on the website?	3/4	Yes - available online	Yes - available online	No	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	1/4	No	Yes - available online	No	No
H1	Is there any price information present?	0/4	No	No	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	0/4	No	No	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.7. Estonia (EE)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
1.3	7	6	70.9	0.1	20.7	Bismarck ²⁸	National

Overview of the websites analysed

179 With respect to Estonia the following four websites were analysed:

	EE1	EE2	EE5	EE6
Search path item	Government - Ministry of Social Security	Government - Ministry of Social Security	Non-profit - Patient stakeholder organisation	Provider stakeholder organisation
Name of organisation responsible for website	Sotsiaalministeerium / Estonian Ministry of Social Affairs	Eesti Haigekassa / Estonian Health Insurance Fund	Eesti Patsentide Esindusühing /Estonian Patient Advocacy Association	Eesti Arstide Liit /Estonian Doctors Union
URL	www.sm.ee	www.haigekassa.ee	http://www.epey.ee/	http://www.arstideliit.ee/
Scope of website	National	National	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Active search - 1 to 3 minutes	Some clicks - 1 minute
In which languages is the information available on the website?	Estonian, English, Russian	Estonian, English, Russian	Estonian, English (limited information), Russian (limited information)	Estonian (English, Russian and French not available but options presented)
Which accessibility features are present?	None	None	None	None

Type of information delivered to patients

Ref	Definition	Information available?	EE1	EE2	EE5	EE6
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	2/4	Yes - available online	Yes - available online	No	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	1/4	Yes - available online	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/4	Yes - available online	Yes - available online	Yes	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	2/4	Yes - available online	Yes - available online	No	No
B1	Is a description of the health system present?	2/4	Yes - available online	Yes - available online	Yes	No

²⁸ The part of healthcare costs paid via social insurance fees indicates that this system is a Bismarck system, it could be argued that the Estonian healthcare system has Beveridge characteristics such as a single government regulated insurance fund that is contracting/paying healthcare providers.

Ref	Definition	Information available?	EE1	EE2	EE5	EE6
B2	Are statistics of providers (number by type) available?	2/4	Yes - available online	Yes - available online	No	No
B3	Is a directory of providers (per type) available?	2/4	Yes - available online	Yes - available online	No	No
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/4	No	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	2/4	Yes - available online	Yes - available online	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	1/4	No	No	No	Yes - available online
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	2/4	No	Yes - available online	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/4	Yes - available online	Yes - available online	No	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/4	No	Yes - available online	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/3	Yes - available online	Yes - if patient contacts organisation by phone	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	1/4	No	Yes - available online	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	3/4	Yes - available online	Yes - available online	Yes - available online	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/4	No	Yes - available online	Yes - available online	No

Ref	Definition	Information available?	EE1	EE2	EE5	EE6
D5	Is there information on the recognition of foreign prescriptions in the Member State?	1/4	No	Yes - available online	No	No
E1	Are there links to contact points in other countries?	1/4	No	Yes - available online	No	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	1/4	Yes - available online	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	1/4	Yes - available online	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	1/4	No	Yes - available online	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	1/4	No	Yes - available online	No	No
G2	Are contact forms present?	2/4	No	Yes - available online	Yes - available online	No
G3	Is a forum for patients present?	2/4	No	Yes - available online	Yes - available online	No
G4	Is there a sitemap included on the website?	2/4	Yes - available online	Yes - available online	No	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	1/4	No	No	No	Yes - available online
H1	Is there any price information present?	1/4	No	Yes - available online	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/4	No	Yes - available online	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	1/4	No	Yes - available online	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.8. Finland (FI)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
5.3	9.7	61.1	16.8	2.3	18	Beveridge	Regional/Local

Overview of the websites analysed

180 With respect to Finland the following four websites were analysed:

	FI1	FI3	FI5	FI6
Search path item	Government - Ministry of Health	Provider stakeholder organisation	(public) health insurance organisation	Non-profit - Patient stakeholder organisation
Name of organisation responsible for website	Sosiaali- ja terveysministeriö (Ministry of Social Affairs and Health)	Hospital District of Southwest Finland	Kela	Suomen syöpäjärjestö (The Cancer Society of Finland)
URL	http://www.stm.fi/etu_sivu	http://www.vsshp.fi	http://www.kela.fi/in/INTERNET/suomi.nsf	http://www.cancer.fi/
Scope of website	National	Regional	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	Finnish, Swedish, English	Finnish, Swedish, English	Finnish, Swedish, English, Saami, Sign language (finnish), German, Russian, Estonian, French	Finnish, Swedish, English
Which accessibility features are present?	None	None	Ajustable fonts, sign language videos (finnish only)	Adjustable fonts

Type of information delivered to patients

Ref	Definition	Information available?	FI1	FI3	FI5	FI6
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	3/4	Yes - available online	Yes - available online	No	Yes - available online
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/4	No	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/4	Yes - available online	Yes - available online	No	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	0/4	No	No	No	No
B1	Is a description of the health system present?	1/4	Yes - available online	No	No	No
B2	Are statistics of providers (number by type) available?	0/4	No	No	No	No
B3	Is a directory of providers (per type) available?	1/4	No	Yes - available online	No	No

Ref	Definition	Information available?	F11	F13	F15	F16
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/4	No	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/4	No	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	1/4	Yes - available online	No	No	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	1/4	No	No	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/4	No	Yes - available online	Yes - available online	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	0/4	No	No	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	0/4	No	No	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	0/4	No	No	No	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/4	No	Yes - available online	Yes - available online	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	0/4	No	No	No	No

Ref	Definition	Information available?	F11	F13	F15	F16
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/4	No	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	1/4	Yes - available online	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/4	No	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	1/4	No	No	Yes - available online	No
G2	Are contact forms present?	1/4	No	No	Yes - available online	No
G3	Is a forum for patients present?	1/4	No	No	No	Yes - available online
G4	Is there a sitemap included on the website?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	1/4	No	No	Yes - available online	No
H1	Is there any price information present?	1/4	No	Yes - available online	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	0/4	No	No	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.9. France (FR)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
64.3	11.7	3.4	75.7	12.8	7.4	Bismarck	National

Overview of the websites analysed

	FR1	FR2	FR3	FR5
Search path item	Government - Ministry of Health	Government - public health information websites	(public) health insurance organisation	Government - Regional health authorities
Name of organisation responsible for website	Ministère du Travail, de l'Emploi et de la Santé - Ministry of Work, Employment and Health	Centre des Liaisons Européennes et Internationales de Sécurité Sociale - Center of European and International Liaisons for Social Security	Ameli.fr Assurance-Maladie online - online social security	Agence Régionale de Santé d'Alsace - Alsace Regional Health Agency
URL	http://www.sante.gouv.fr/	http://www.cleiss.fr/	http://www.ameli.fr/	http://www.ars.alsace.sante.fr/Internet.alsace.0.html
Scope of website	National	National	National	Regional
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	French	mostly in French CLEISS as well as the description of the French social security system, access to Healthcare in France, access to healthcare in France for a EU visitor and glossary of terms are in EN, SP, DE, IT and PT	French	French
Which accessibility features are present?	None	All the webpages of the website follow the Directives on web accessibility (Level A) elaborated by W3C (WAI-A, WCAG 1.0) Some shortcut keys are available. The font size can be changed	There is an article on accessibility features for the website, in which is detailed how to change the font size, how to use keyboard shortcuts, and how to navigate the website using only the keyboard	adjustable font size

Type of information delivered to patients

Ref	Definition	Information available?	FR1	FR2	FR3	FR5

Ref	Definition	Information available?	FR1	FR2	FR3	FR5
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/4	Yes - available online	No	No	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/4	No	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/4	Yes - available online	No	No	Yes - available online
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	1/4	Yes - available online	No	No	No
B1	Is a description of the health system present?	3/4	No	Yes - available online	Yes - available online	Yes - available online
B2	Are statistics of providers (number by type) available?	3/4	Yes - available online	No	Yes - available online	Yes - available online
B3	Is a directory of providers (per type) available?	2/4	No	No	Yes - available online	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/4	No	No	No	Yes - available online
B5	Is information about compliance with quality standards by healthcare providers available?	2/4	Yes - available online	No	No	Yes - available online
B6	Is there information about the liability insurance of health professionals or similar arrangements?	1/4	Yes - available online	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	3/4	Yes - available online	Yes - available online	No	Yes - available online
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/4	No	Yes - available online	No	Yes - available online
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	3/4	Yes - available online	Yes - available online	No	Yes - available online

Ref	Definition	Information available?	FR1	FR2	FR3	FR5
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	3/4	No	Yes - available online	Yes - available online	Yes - available online
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	3/4	Yes - available online	Yes - available online	Yes - available online	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/4	No	Yes - available online	No	Yes - available online
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	2/4	No	Yes - available online	No	Yes - available online
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	3/4	Yes - available online	Yes - available online	Yes - available online	No
F1	Is there information on access to health providers for persons with disabilities?	1/4	Yes - available online	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	2/4	Yes - available online	No	Yes - available online	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	2/4	No	Yes - available online	Yes - available online	No
G2	Are contact forms present?	3/4	Yes - available online	Yes - available online	Yes - available online	No
G3	Is a forum for patients present?	1/4	Yes - available online	No	No	No
G4	Is there a sitemap included on the website?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/4	No	No	No	No
H1	Is there any price information present?	3/4	Yes - available online	Yes - available online	Yes - available online	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	2/4	No	Yes - available online	Yes - available online	No

Ref	Definition	Information available?	FR1	FR2	FR3	FR5
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	2/4	Yes - available online	No	Yes - available online	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems where healthcare is publicly provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	1/4	No	No	Yes - available online	No

A.5.10. Germany (DE)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
82	11.3	10.5	66.7	9.1	13.8	Bismarck	Regional

Overview of the websites analysed

181 With respect to Germany the following four websites were analysed:

	DE1	DE5	DE9	DE10
Search path item	Government - Ministry of Health	Government - Regional health authorities	(public) health insurance organisation	Provider stakeholder organisation
Name of organisation responsible for website	Bundesministerium für Gesundheit	Ministerium für Arbeit und Sozialordnung, Familie, Frauen und Senioren Baden-Württemberg - Ministry of Work, Social affairs, Family, Women and Health of Baden-Württemberg	AOK	Weisse Liste
URL	www.bmg.bund.de	www.sm.baden-wuerttemberg.de	www.aok.de	http://www.weisse-liste.de/
Scope of website	National	Regional	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Active search - 1 to 3 minutes	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	German, English	German	German	German
Which accessibility features are present?	Information on how to change the font size, how to download files, how to navigate the website quickly, how to access audio and video material, and how to perform a search.	None	Adjustable font size	Adjustable font

Type of information delivered to patients

Ref	Definition	Information available?	DE1	DE5	DE9	DE10
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	3/4	Yes - available online	Yes - available online	Yes - available online	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	1/4	Yes - available online	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online

Ref	Definition	Information available?	DE1	DE5	DE9	DE10
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	3/4	Yes - available online	Yes - available online	Yes - available online	No
B1	Is a description of the health system present?	1/4	Yes - available online	No	No	No
B2	Are statistics of providers (number by type) available?	2/4	Yes - available online	No	No	Yes - available online
B3	Is a directory of providers (per type) available?	2/4	No	No	Yes - available online	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/4	No	No	Yes - available online	No
B5	Is information about compliance with quality standards by healthcare providers available?	1/4	No	No	No	Yes - available online
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	2/4	Yes - available online	No	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	3/4	Yes - available online	Yes - available online	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/4	No	Yes - available online	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	0/4	No	No	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	1/4	No	No	Yes - available online	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	2/4	Yes - available online	No	Yes - available online	No

Ref	Definition	Information available?	DE1	DE5	DE9	DE10
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/4	Yes - available online	Yes - available online	No	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	0/4	No	No	No	No
E2	Are there links to patients'organisation websites or other websites with usefull information on cross border healthcare?	1/4	No	No	Yes - available online	No
F1	Is there information on access to health providers for persons with disabilities?	2/4	Yes - available online	Yes - available online	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	2/4	Yes - available online	Yes - available online	No	No
G1	Is a Frequently Asked Questions section or a digital assistent present?	2/4	Yes - available online	No	Yes - available online	No
G2	Are contact forms present?	3/4	Yes - available online	No	Yes - available online	Yes - available online
G3	Is a forum for patients present?	1/4	No	No	Yes - available online	No
G4	Is there a sitemap included on the website?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	1/4	No	No	Yes - available online	No
H1	Is there any price information present?	2/4	Yes - available online	No	Yes - available online	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	2/4	Yes - available online	No	Yes - available online	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.11. Greece (EL)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
11.2	10.6	22.6	28.7	2.1	46.5	Beveridge	National

Overview of the websites analysed

182 With respect to Greece the following two websites were analysed:

	EL1	EL2
Search path item	Government - Ministry of Health	Government - Ministry of social security
Name of organisation responsible for website	Government	Government - Ministry of social security and the Regional health authorities are included in this ministry (i.e. IKA, OGA etc)
URL	http://www.yyka.gov.gr/	http://www.ypakp.gr/
Scope of website	National	National
Official contact point?	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	1. Greek 2. English English language is not activated yet.	Greek
Which accessibility features are present?	None	None

Type of information delivered to patients

Ref	Definition	Information available?	EL1	EL2
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/2	Yes - available online	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/2	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/2	Yes - available online	Yes - available online
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	1/2	Yes - available online	No
B1	Is a description of the health system present?	2/2	Yes - available online	Yes - available online
B2	Are statistics of providers (number by type) available?	0/2	No	No
B3	Is a directory of providers (per type) available?	2/2	Yes - available online	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/2	Yes - available online	No
B5	Is information about compliance with quality standards by healthcare providers available?	1/2	Yes - available online	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/2	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	1/2	Yes - available online	No

Ref	Definition	Information available?	EL1	EL2
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	0/2	No	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	0/2	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	0/2	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	0/2	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	1/2	No	Yes - available online
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	0/2	No	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/2	No	No
E1	Are there links to contact points in other countries?	1/2	No	Yes - available online
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/2	No	No
F1	Is there information on access to health providers for persons with disabilities?	2/2	Yes - available online	Yes - available online
F2	Is there information on access to health services for citizens with limited financial resources?	2/2	Yes - available online	Yes - available online
G1	Is a Frequently Asked Questions section or a digital assistant present?	2/2	Yes - available online	Yes - available online
G2	Are contact forms present?	2/2	Yes - available online	Yes - available online
G3	Is a forum for patients present?	1/2	Yes - available online	No
G4	Is there a sitemap included on the website?	1/2	Yes - available online	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/2	No	No
H1	Is there any price information present?	0/2	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	0/2	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/2	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/2	No	No

A.5.12. Hungary (HU)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
10	7.3	10.3	62.4	0.9	25.4	Beveridge	National

Overview of the websites analysed

183 With respect to Hungary the following four websites were analysed:

	HU1	HU2	HU3	HU4
Search path item	(public) health insurance organisation	Government - Ministry of Health	Provider stakeholder organisation	Provider stakeholder organisation
Name of organisation responsible for website	National Social Security/ Országos Egészségbiztosítási Pénztár	Közigazgatási és Elektronikus Közszolgáltatások Központi Hivatala - Website of the Hungarian government	Hungarian Medical Chamber	Hungarian League against cancer
URL	http://www.oep.hu/ IN HUNGARY: http://www.oep.hu/portal/page?_pageid=34,35161&_dad=portal&_schema=PORTAL And many different portals	http://www.kormany.hu/hu/nemzeti-eroforras-miniszterium http://www.eum.hu	http://www.mok.hu/info.aspx?sp=200	www.rakliga.hu
Scope of website	National	National	National	National
Official contact point?	Yes	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	mainly Hungarian, few documents are in English, French and German	Hungarian and english	Hungarian	Hungarian
Which accessibility features are present?	None	Read it out loud	None	None

Type of information delivered to patients

Ref	Definition	Information available?	HU1	HU2	HU3	HU4
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	2/4	No	No	Yes - available online	Yes - available online
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	1/4	No	Yes - available online	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	3/4	Yes - available online	Yes - available online	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	1/4	No	Yes - available online	No	No

Ref	Definition	Information available?	HU1	HU2	HU3	HU4
B1	Is a description of the health system present?	2/4	Yes - available online	Yes - available online	No	No
B2	Are statistics of providers (number by type) available?	0/4	No	No	No	No
B3	Is a directory of providers (per type) available?	2/4	No	Yes - available online	No	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/4	No	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	1/4	No	Yes - available online	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	1/4	No	Yes - available online	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	1/4	Yes - available online	No	No	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/4	Yes - available online	Yes - available online	No	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/4	Yes - available online	Yes - available online	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	2/4	Yes - available online	Yes - available online	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/4	Yes - available online	Yes - available online	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	0/4	No	No	No	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/4	Yes - available online	Yes - available online	No	No

Ref	Definition	Information available?	HU1	HU2	HU3	HU4
D5	Is there information on the recognition of foreign prescriptions in the Member State?	2/4	Yes - available online	Yes - available online	No	No
E1	Are there links to contact points in other countries?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	2/4	Yes - available online	Yes - available online	No	No
F1	Is there information on access to health providers for persons with disabilities?	0/4	No	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	1/4	Yes - available online	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	2/4	No	Yes - available online	Yes - available online	No
G2	Are contact forms present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	1/4	No	Yes - available online	No	No
G4	Is there a sitemap included on the website?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	2/4	No	Yes - available online	Yes - available online	No
H1	Is there any price information present?	0/4	No	No	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/4	Yes - available online	No	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	1/4	Yes - available online	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.13.Ireland (IE)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
4.5	9.7	79.9	0.6	6.4	13	Beveridge	National

Overview of the websites analysed

184 With respect to Ireland the following three websites were analysed:

	IE1	IE3	IE9
Search path item	Government - Ministry of Health	Government - Regional health authorities	Non-profit - Patient stakeholder organisation
Name of organisation responsible for website	Department of Health	Health Service Executive	Irish patient's association
URL	www.dohc.ie	www.hse.ie	www.irishpatients.ie
Scope of website	European	Regional	National
Official contact point?	Yes	No	No
Easiness to reach	Some clicks - 1 minute	Active search - 1 to 3 minutes	Some clicks - 1 minute
In which languages is the information available on the website?	Entire site is in English and Irish (Gaeilge).	English only	English only
Which accessibility features are present?	All pages on the site comply with WAI (Web Accessibility Initiative) Web Content Accessibility Guidelines, level 2	Browsealoud, text resize and W3c html and CSS	None

Type of information delivered to patients

Ref	Definition	Information available?	IE1	IE3	IE9
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	2/3	Yes - available online	Yes - available online	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	3/3	Yes - available online	Yes - available online	Yes - available online
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	3/3	Yes - available online	Yes - available online	Yes - available online
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	2/3	No	Yes - available online	Yes - available online
B1	Is a description of the health system present?	2/3	Yes - available online	Yes - available online	No
B2	Are statistics of providers (number by type) available?	2/3	Yes - available online	Yes - available online	No
B3	Is a directory of providers (per type) available?	1/3	No	Yes - available online	No

Ref	Definition	Information available?	IE1	IE3	IE9
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	3/3	Yes - available online	Yes - available online	Yes - available online
B5	Is information about compliance with quality standards by healthcare providers available?	1/3	Yes - available online	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	1/3	Yes - available online	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	1/3	No	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/3	Yes - available online	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/3	No	Yes - available online	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/3	No	Yes - available online	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	1/3	No	Yes - available online	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	1/3	No	Yes - available online	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/3	No	Yes - available online	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/3	No	No	No
E1	Are there links to contact points in other countries?	1/3	No	Yes - available online	No

Ref	Definition	Information available?	IE1	IE3	IE9
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/3	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	1/3	No	Yes - available online	No
F2	Is there information on access to health services for citizens with limited financial resources?	1/3	No	Yes - available online	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	0/3	No	No	No
G2	Are contact forms present?	2/3	Yes - available online	No	Yes - available online
G3	Is a forum for patients present?	0/3	No	No	No
G4	Is there a sitemap included on the website?	2/3	Yes - available online	Yes - available online	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/3	No	No	No
H1	Is there any price information present?	1/3	No	Yes - available online	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/3	No	Yes - available online	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	1/3	No	Yes - available online	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	1/3	No	Yes - available online	No

A.5.14. Italy (IT)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
60	9.5	75.7	0.1	0.9	20.3	Beveridge	Regional

Overview of the websites analysed

185 With respect to Italy the following three websites were analysed:

	IT1	IT3	IT9
Search path item	Government - Ministry of Health	Non-profit - Patient stakeholder organisation	Provider stakeholder organisation
Name of organisation responsible for website	Ministero della Salute (Ministry of Health)	Cittadinanza Attiva (consumer association)	Policlinico S.Matteo Fondazione IRCCS (S. Matteo Hospital)
URL	http://www.salute.gov.it/	http://www.cittadinanzattiva.it/corporate/salute/1852-pit-salute.html	http://www.sanmatteo.org/site/home.html
Scope of website	National	National	Local
Official contact point?	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	Italian. Just for few items are available the english informations, but not for the abroad Healthcare assistance pages.	Italian	Italian
Which accessibility features are present?	In the website are indicated all the main informations about the healthcare assistance in Italy.	Just the main informations about the abroad healthcare assistance, especially for citizens.	On the website there is just an overview of the main informations regarding the healthcare assistance both for citizens and foreigners.

Type of information delivered to patients

Ref	Definition	Information available?	IT1	IT3	IT9
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	3/3	Yes - available online	Yes - available online	Yes - available online
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	1/3	Yes - available online	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/3	Yes - available online	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	0/3	No	No	No
B1	Is a description of the health system present?	1/3	Yes - available online	No	No
B2	Are statistics of providers (number by type) available?	1/3	Yes - available online	No	No

Ref	Definition	Information available?	IT1	IT3	IT9
B3	Is a directory of providers (per type) available?	1/3	Yes - available online	No	No
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/3	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/3	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/3	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	0/3	No	No	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/3	Yes - available online	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/3	Yes - available online	No	Yes - available online
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	2/3	Yes - available online	No	Yes - available online
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/3	Yes - available online	Yes - available online	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	0/3	No	No	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/3	Yes - available online	No	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	1/3	Yes - available online	No	No

Ref	Definition	Information available?	IT1	IT3	IT9
E1	Are there links to contact points in other countries?	0/3	No	No	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	2/3	Yes - available online	Yes - available online	No
F1	Is there information on access to health providers for persons with disabilities?	0/3	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	3/3	Yes - available online	Yes - available online	Yes - available online
G1	Is a Frequently Asked Questions section or a digital assistent present?	2/3	Yes - available online	Yes - available online	No
G2	Are contact forms present?	1/3	No	Yes - available online	No
G3	Is a forum for patients present?	0/3	No	No	No
G4	Is there a sitemap included on the website?	2/3	Yes - available online	No	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	1/3	No	Yes - available online	No
H1	Is there any price information present?	0/3	No	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	2/3	Yes - available online	Yes - available online	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	1/3	Yes - available online	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/3	No	No	No

A.5.15. Latvia (LV)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
2.3	6.5	9.2	43.4	0.8	46.6	Beveridge	National

Overview of the websites analysed

186 With respect to Latvia the following four websites were analysed:

	LV1	LV2	LV3	LV4
Search path item	Government - Ministry of Health	Government - Ministry of Social Security	Government - public health information websites	Government - Regional health authorities
Name of organisation responsible for website	LR Veselības ministrija; Ministry of Health of the Republic of Latvia	Nacionālais veselības dienests; National Health Service	Veselības inspekcija; Health inspectorate of Latvia	Nacionālais veselības dienests; National Health Service
URL	www.vm.gov.lv	http://www.vsaa.lv	www.vi.gov.lv	http://vec.gov.lv/
Scope of website	National	National	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Active search - 1 to 3 minutes	Persistent search - more than 3 minutes	Persistent search - more than 3 minutes
In which languages is the information available on the website?	Only Latvian	Latvian, English, Russian	Latvian, English, Russian.	Only Latvian.
Which accessibility features are present?	Just change the font size.	Change the font size	Possibility to change the size, font.	Just the possibility to change the font size.

Type of information delivered to patients

Ref	Definition	Information available?	LV1	LV2	LV3	LV4
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	3/4	Yes - available online	No	Yes - available online	Yes - available online
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	3/4	Yes - available online	Yes - available online	No	Yes - available online
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/4	Yes - available online	No	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
B1	Is a description of the health system present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
B2	Are statistics of providers (number by type) available?	0/4	No	No	No	No
B3	Is a directory of providers (per type) available?	3/4	Yes - available online	No	Yes - available online	Yes - available online

Ref	Definition	Information available?	LV1	LV2	LV3	LV4
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/4	No	Yes - available online	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	1/4	Yes - available online	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	3/4	Yes - available online	Yes - available online	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/4	No	Yes - available online	No	Yes - available online
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/4	No	No	Yes - available online	Yes - available online
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/4	No	Yes - available online	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/4	No	Yes - available online	No	Yes - available online
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	2/4	Yes - available online	No	Yes - available online	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	1/4	Yes - available online	No	No	No

Ref	Definition	Information available?	LV1	LV2	LV3	LV4
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	2/4	Yes - available online	Yes - available online	No	No
F1	Is there information on access to health providers for persons with disabilities?	2/4	Yes - available online	Yes - available online	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	3/4	Yes - available online	No	Yes - available online	Yes - available online
G1	Is a Frequently Asked Questions section or a digital assistant present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G2	Are contact forms present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/4	No	No	No	No
G4	Is there a sitemap included on the website?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	2/4	Yes - available online	No	No	Yes - available online
H1	Is there any price information present?	3/4	Yes - available online	Yes - available online	Yes - available online	Yes - if patient contacts organisation by phone
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	3/4	Yes - available online	Yes - available online	No	Yes - available online
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	2/4	No	Yes - available online	No	Yes - available online
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	2/4	No	Yes - available online	No	Yes - available online

A.5.16.Lithuania (LT)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
3.3	6.6	9.2	56.1	0.4	32.2	Beveridge	Regional

Overview of the websites analysed

187 With respect to Lithuania the following three websites were analysed:

	LT1	LT2	LT3
Search path item	Government - Ministry of Health	Government - Ministry of Health	Provider stakeholder organisation
Name of organisation responsible for website	Valstybinė ligonių kasa prie Sveikatos apsaugos ministerijos (The National Health Insurance Fund under the Ministry of Health (NHIF))	Lietuvos Respublikos sveikatos apsaugos ministerija (Ministry of Health of the Republic of Lithuania)	Vilniaus Universiteto ligoninės Santariškių klinikos (Vilnius University Hospital Santariškių Klinikos (VUH SK))
URL	http://www.vlk.lt/vlk/lt/	http://www.sam.lt/	http://www.santa.lt/
Scope of website	National	National	National
Official contact point?	No	No	No
Easiness to reach	Some clicks - 1 minute	Active search - 1 to 3 minutes	Some clicks - 1 minute
In which languages is the information available on the website?	English	English	English
Which accessibility features are present?	Other features for visually impaired users	Adjustable fonts, other features for visually impaired users	No accessibility features

Type of information delivered to patients

Ref	Definition	Information available?	LT1	LT2	LT3
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/3	No	Yes - available online	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/3	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/3	Yes - available online	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	1/3	No	Yes - available online	No
B1	Is a description of the health system present?	1/3	No	Yes - available online	No
B2	Are statistics of providers (number by type) available?	0/3	No	No	No
B3	Is a directory of providers (per type) available?	1/3	No	Yes - available online	No

Ref	Definition	Information available?	LT1	LT2	LT3
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/3	No	Yes - available online	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/3	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/3	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	1/3	No	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/3	Yes - available online	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/3	Yes - available online	Yes - available online	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/3	Yes - available online	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	1/3	Yes - available online	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	1/3	No	Yes - available online	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/3	Yes - available online	Yes - available online	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/3	No	No	No
E1	Are there links to contact points in other countries?	1/3	Yes - available online	No	No

Ref	Definition	Information available?	LT1	LT2	LT3
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	1/3	Yes - available online	No	No
F1	Is there information on access to health providers for persons with disabilities?	0/3	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/3	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	3/3	Yes - available online	Yes - available online	Yes - available online
G2	Are contact forms present?	3/3	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	1/3	No	Yes - available online	No
G4	Is there a sitemap included on the website?	3/3	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	2/3	Yes - available online	No	Yes - available online
H1	Is there any price information present?	2/3	Yes - available online	Yes - available online	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	2/3	Yes - available online	Yes - available online	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	2/3	Yes - available online	Yes - available online	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/3	No	No	No

A.5.17. Luxembourg (LU)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
0.5	7.8	17.6	73.3	1.6	6.4	Bismarck	National

Overview of the websites analysed

188 With respect to Luxembourg the following four websites were analysed:

	LU1	LU4	LU6	LU7
Search path item	(public) health insurance organisation	Government - Ministry of Health	Non-profit - Patient stakeholder organisation	Provider stakeholder organisation
Name of organisation responsible for website	d'Gesondheetskess - National health insurance	Ministère de la Santé - Ministry of Health	Patiente Verriedung -	Association des Médecins et des Médecins Dentistes - Association of General Practitioners and Dentists
URL	http://www.cns.lu/	http://www.ms.public.lu/fr/index.html	http://www.patienteverriedung.lu/	http://www.ammd.lu/
Scope of website	National	National	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Active search - 1 to 3 minutes	Some clicks - 1 minute
In which languages is the information available on the website?	French, German and English	French	French, German	French
Which accessibility features are present?	Adjustable font, but no disclaimer about compliance with accessibility standards	The font size is not adjustable and there is no read-out-loud function. However, there is a statement detailing to what extent the website is compliant with the 2nd level priority of the WCAG 1.0	No accessibility features are present.	Adjustable font

Type of information delivered to patients

Ref	Definition	Information available?	LU1	LU4	LU6	LU7
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	0/4	No	No	No	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/4	No	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	0/4	No	No	No	No

Ref	Definition	Information available?	LU1	LU4	LU6	LU7
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	2/4	No	Yes - available online	No	Yes - available online
B1	Is a description of the health system present?	0/4	No	No	No	No
B2	Are statistics of providers (number by type) available?	1/4	No	Yes - available online	No	No
B3	Is a directory of providers (per type) available?	0/4	No	No	No	No
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/4	No	Yes - available online	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	1/4	No	Yes - available online	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	3/4	Yes - available online	Yes - available online	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	1/4	Yes - available online	No	No	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	0/4	No	No	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	0/4	No	No	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/4	Yes - available online	No	Yes - available online	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	1/4	No	No	Yes - available online	No

Ref	Definition	Information available?	LU1	LU4	LU6	LU7
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/4	Yes - available online	No	No	Yes - available online
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	0/4	No	No	No	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/4	No	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	0/4	No	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	1/4	No	No	Yes - available online	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	2/4	Yes - available online	No	Yes - available online	No
G2	Are contact forms present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/4	No	No	No	No
G4	Is there a sitemap included on the website?	3/4	Yes - available online	Yes - available online	Yes - available online	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	1/4	No	Yes - available online	No	No
H1	Is there any price information present?	3/4	Yes - available online	No	Yes - available online	Yes - available online
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/4	Yes - available online	No	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	1/4	No	No	Yes - available online	No

A.5.18. Malta (MT)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
0.4	7.5	78.1	0	2.1	19.2	Beveridge	National

Overview of the websites analysed

189 With respect to Malta the following four websites were analysed:

	MT1	MT2	MT7	MT9
Search path item	Government - Ministry of Health, Elderly and Community Care, Elderly and Community Care	Government - Ministry of Social Security	Non-profit - Patient stakeholder organisation	Provider stakeholder organisation
Name of organisation responsible for website	MITC	MITA	MSA system	Malta Association of Physiotherapists
URL	https://ehealth.gov.mt/HealthPortal/default.aspx	https://secure2.gov.mt/SOCIALPOLICY/SocPro/Default.aspx	http://www.richmond.org.mt/home	http://www.physiomalta.com
Scope of website	National	National	European	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Persistent search - more than 3 minutes	Persistent search - more than 3 minutes
In which languages is the information available on the website?	English	English	English	English
Which accessibility features are present?	There is an accessibility statement compliance to World Wide Web Consortium markup and accessibility specification. It also states that every this website provides equal access for everyone, including people with physical disabilities.	access keys, it is usable with specifications lower than the SVGA resolution monitor (800 x 600) using 256 colours. high browser compatibility effective search function. https://www.meef.gov.mt/contentpage.aspx?ref=accessibility&depid=13	Accessibility features present include adjustable fonts	There are no accessibility features

Type of information delivered to patients

Ref	Definition	Information available?	MT1	MT2	MT7	MT9
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/4	No	No	Yes - available online	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	2/4	Yes - available online	No	Yes - available online	No

Ref	Definition	Information available?	MT1	MT2	MT7	MT9
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	2/4	Yes - available online	Yes - available online	No	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	1/4	No	No	No	Yes - available online
B1	Is a description of the health system present?	0/4	No	No	No	No
B2	Are statistics of providers (number by type) available?	1/4	No	No	Yes - available online	No
B3	Is a directory of providers (per type) available?	1/4	Yes - available online	No	No	No
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/4	No	No	No	Yes - available online
B5	Is information about compliance with quality standards by healthcare providers available?	2/4	No	No	Yes - available online	Yes - available online
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	1/4	Yes - available online	No	No	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	1/4	Yes - available online	No	No	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/4	Yes - available online	No	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/4	Yes - available online	No	No	No

Ref	Definition	Information available?	MT1	MT2	MT7	MT9
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	1/4	Yes - available online	No	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	0/4	No	No	No	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/4	Yes - available online	No	No	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	2/4	No	No	Yes - available online	Yes - available online
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/4	No	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	1/4	No	No	Yes - available online	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/4	No	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	1/4	No	Yes - available online	No	No
G2	Are contact forms present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/4	No	No	No	No
G4	Is there a sitemap included on the website?	3/4	Yes - available online	Yes - available online	Yes - available online	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/4	No	No	No	No
H1	Is there any price information present?	0/4	No	No	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	0/4	No	No	No	No

Ref	Definition	Information available?	MT1	MT2	MT7	MT9
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems where healthcare is publicly provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.19. Netherlands (NL)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
16.4	10.8	2.8	62.8	20.1	8	Bismarck	National

Overview of the websites analysed

190 With respect to the Netherlands the following three websites were analysed:

	NL1	NL2	NL3
Search path item	Government - public health information websites	(public) health insurance organisation	Government - Ministry of Health
Name of organisation responsible for website	RIVM	College voor Zorgverzekeringen (CVZ)	Ministerie van Volksgezondheid Welzijn en Sport (Ministry of Health, Welfare and Sport)
URL	http://www.kiesbeter.nl/algemeen/dossiers/grensoverschrijdende_zorg/hoofdartikel/default.aspx	http://www.cvz.nl/verzekering/buitenland/buitenland.html and http://www.cvz.nl/en/home	http://www.rijksoverheid.nl/onderwerpen/zorgverzekering/vraag-en-antwoord/ben-ik-verzekerd-voor-de-zorgverzekering-als-ik-in-het-buitenland-woon.html
Scope of website	National	National	National
Official contact point?	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Active search - 1 to 3 minutes
In which languages is the information available on the website?	Only Dutch. There are links to German websites and UK websites.	Dutch and English	There is a low detailed English version of the website available
Which accessibility features are present?	There is a High Contrast functionality on the site.	Read out loud, adjustable fonts, searchbox, sitemap, search on subject	There is a searchbox available that can help a user with the navigation through the website. Other than this, there are no other accessibility features.

Type of information delivered to patients

Ref	Definition	Information available?	NL1	NL2	NL3
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/3	Yes - available online	no	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	2/3	Yes - available online	Yes - available online	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	3/3	Yes - available online	Yes - available online	Yes - available online
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	2/3	Yes - available online	No	Yes - available online
B1	Is a description of the health system present?	2/3	no	Yes - available online	Yes - available online

Ref	Definition	Information available?	NL1	NL2	NL3
B2	Are statistics of providers (number by type) available?	1/3	Yes - available online	No	No
B3	Is a directory of providers (per type) available?	2/3	Yes - available online	No	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/3	No	No	Yes - available online
B5	Is information about compliance with quality standards by healthcare providers available?	0/3	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/3	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	2/3	Yes - available online	No	Yes - available online
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/3	Yes - available online	No	Yes - available online
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/3	No	Yes - available online	Yes - available online
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/3	No	Yes - available online	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	3/3	Yes - available online	Yes - available online	Yes - available online
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	0/3	No	No	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/3	No	Yes - available online	No

Ref	Definition	Information available?	NL1	NL2	NL3
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/3	No	No	No
E1	Are there links to contact points in other countries?	0/3	No	No	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	2/3	Yes - available online	No	Yes - available online
F1	Is there information on access to health providers for persons with disabilities?	1/3	No	Yes - available online	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/3	No	no	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	2/3	Yes - available online	No	Yes - available online
G2	Are contact forms present?	3/3	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/3	No	No	No
G4	Is there a sitemap included on the website?	3/3	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	2/3	Yes - available online	No	Yes - available online
H1	Is there any price information present?	1/3	Yes - available online	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/3	No	Yes - available online	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	1/3	No	Yes - available online	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	2/3	Yes - available online	No	Yes - available online

A.5.20. Poland (PL)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
38.1	7.1	12.9	56.9	0.6	29.5	Bismarck	National

Overview of the websites analysed

191 With respect to Poland the following four websites were analysed:

	PL1	PL2	PL7	PL8
Search path item	Government - Ministry of Health	(public) health insurance organisation	Non-profit - Patient stakeholder organisation	Provider stakeholder organisation
Name of organisation responsible for website	Ministerstwo Zdrowia - Ministry of Health	Narodowy Fundusz Zdrowia - National Health Fund	Institute of patients' rights and health education	LUX MED.
URL	http://www.mz.gov.pl/	http://www.nfz.gov.pl	http://www.prawapacjenta.eu/	http://www.luxmed.pl/dla-pacjentow.html/
Scope of website	National	European	National	National
Official contact point?	No	Yes	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	Polish, English	Polish, English, French, German, Spanish	Polish	Polish, English
Which accessibility features are present?	Only site map	Font resize	Adjusting font size	None

Type of information delivered to patients

Ref	Definition	Information available?	PL1	PL2	PL7	PL8
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/4	No	No	No	Yes - available online
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	1/4	Yes - available online	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	0/4	No	No	No	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	1/4	Yes - available online	No	No	No
B1	Is a description of the health system present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
B2	Are statistics of providers (number by type) available?	1/4	Yes - available online	No	No	No
B3	Is a directory of providers (per type) available?	3/4	Yes - available online	Yes - available online	No	Yes - available online

Ref	Definition	Information available?	PL1	PL2	PL7	PL8
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/4	No	No	Yes - available online	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/4	No	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	3/4	Yes - available online	Yes - available online	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	3/4	Yes - available online	Yes - available online	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	3/4	Yes - available online	Yes - available online	Yes - available online	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	2/4	Yes - available online	Yes - available online	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/4	No	Yes - available online	No	Yes - available online
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	2/3	Yes - if patient contacts organisation by phone	Yes - available online	Yes - available online	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/4	Yes - available online	Yes - available online	No	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	1/4	No	Yes - available online	No	No

Ref	Definition	Information available?	PL1	PL2	PL7	PL8
E2	Are there links to patients'organisation websites or other websites with usefull information on cross border healthcare?	2/4	Yes - available online	No	Yes - available online	No
F1	Is there information on access to health providers for persons with disabilities?	0/4	No	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	1/4	No	No	Yes - available online	No
G1	Is a Frequently Asked Questions section or a digital assistent present?	2/4	No	No	Yes - available online	Yes - available online
G2	Are contact forms present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/4	No	No	No	No
G4	Is there a sitemap included on the website?	3/4	Yes - available online	No	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	2/4	No	No	Yes - available online	Yes - available online
H1	Is there any price information present?	2/4	No	Yes - available online	No	Yes - available online
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/4	No	Yes - available online	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.21. Portugal (PT)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
10.6	11.3	71.9	0.8	3.8	22.3	Beveridge	National

Overview of the websites analysed

193 With respect to Portugal the following four websites were analysed:

	PT1	PT4	PT5	PT7
Search path item	Government - Ministry of Health	Government - Regional health authorities	Government - Ministry of Health	Non-profit - Patient stakeholder organisation
Name of organisation responsible for website	Ministério da Saúde (Ministry of Health)	ARS Norte (Regional Health Authority - North Region)	Administração Central do Sistema de Saúde-ACSS (Central Administration of the Health System)	APIR - Associação Portuguesa de Insuficientes Renais (Association of Patients with Renal Insufficiency)
URL	http://www.portaldasauade.pt/portal	http://www.arsnorte.min-saude.pt/portal/page/portal/ARSNorte	http://www.acss.min-saude.pt/	http://www.apir.org.pt/
Scope of website	National	Regional	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Active search - 1 to 3 minutes	Active search - 1 to 3 minutes	Active search - 1 to 3 minutes
In which languages is the information available on the website?	Portuguese. Some contents are also available in english.	Portuguese	Portuguese	Portuguese
Which accessibility features are present?	The website has a compliance statement to W3C, however, many contents were found as non compliant with these guidelines	None	The website bares the symbol of accessibility, however, no evidence of this accessibility was found.	None

Type of information delivered to patients

Ref	Definition	Information available?	PT1	PT4	PT5	PT7
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	3/4	Yes - available online	Yes - available online	No	Yes - available online
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/4	No	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	0/4	No	No	No	No

Ref	Definition	Information available?	PT1	PT4	PT5	PT7
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	0/4	No	No	No	No
B1	Is a description of the health system present?	1/4	Yes - available online	No	No	No
B2	Are statistics of providers (number by type) available?	0/4	No	No	No	No
B3	Is a directory of providers (per type) available?	3/4	Yes - available online	Yes - available online	No	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/4	No	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/4	No	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	0/4	No	No	No	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/4	Yes - available online	Yes - available online	No	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/4	Yes - available online	Yes - available online	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	0/4	No	No	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	0/4	No	No	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	0/4	No	No	No	No

Ref	Definition	Information available?	PT1	PT4	PT5	PT7
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/4	Yes - available online	No	No	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	0/4	No	No	No	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/4	No	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	0/4	No	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/4	No	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistent present?	1/4	Yes - available online	No	No	No
G2	Are contact forms present?	0/4	No	No	No	No
G3	Is a forum for patients present?	0/4	No	No	No	No
G4	Is there a sitemap included on the website?	2/4	Yes - available online	Yes - available online	No	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/4	No	No	No	No
H1	Is there any price information present?	3/4	Yes - available online	Yes - available online	Yes - available online	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/4	Yes - available online	No	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	1/4	Yes - available online	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.22. Romania (RO)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %			Out-of-Pocket expenses	System type	Organization
		Tax	Social Insurance	Public Insurance			
21.5	5.4	13.3	62	4.5	19.9	Bismarck	National

Overview of the websites analysed

194 With respect to Romania the following four websites were analysed:

	RO1	RO2	RO5	RO10
Search path item	Government - Ministry of Health	Government - Ministry of Social Security	Provider stakeholder organisation	Non-profit - Patient stakeholder organisation
Name of organisation responsible for website	Ministerul Sanatatii - Ministry of Health	Casa Nationala de Asigurari de Sanatate - National Health Insurance House (CNAS)	Colegiul Medicilor din Romania - Medical Association	Salveaza Vieti - Save Lives
URL	http://www.ms.ro/	http://www.cnas.ro	http://www.cmr.ro/	http://www.salveazaviet.ro/
Scope of website	National	National	National	National
Official contact point?	No	Yes	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	Romanian	Romanian	Romanian	Romanian
Which accessibility features are present?	Adjustable fonts option is available	None	None	None

Type of information delivered to patients

Ref	Definition	Information available?	RO1	RO10	RO2	RO5
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	0/4	No	No	No	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/4	No	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	1/4	No	No	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	1/4	No	No	Yes - available online	No
B1	Is a description of the health system present?	1/4	No	No	Yes - available online	No
B2	Are statistics of providers (number by type) available?	0/4	No	No	No	No
B3	Is a directory of providers (per type) available?	0/4	No	No	No	No

Ref	Definition	Information available?	RO1	RO10	RO2	RO5
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	2/4	No	No	Yes - available online	Yes - available online
B5	Is information about compliance with quality standards by healthcare providers available?	0/4	No	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	2/4	No	No	Yes - available online	Yes - available online
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	1/4	No	No	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/4	No	Yes - available online	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/4	No	No	Yes - available online	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/4	No	No	Yes - available online	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/4	No	Yes - available online	Yes - available online	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	1/4	No	No	Yes - available online	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/4	No	No	Yes - available online	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	1/4	No	No	Yes - available online	No

Ref	Definition	Information available?	RO1	RO10	RO2	RO5
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	2/4	Yes - available online	No	Yes - available online	No
F1	Is there information on access to health providers for persons with disabilities?	1/4	No	No	Yes - available online	No
F2	Is there information on access to health services for citizens with limited financial resources?	1/4	No	No	Yes - available online	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	1/4	No	No	Yes - available online	No
G2	Are contact forms present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	1/4	No	No	Yes - available online	No
G4	Is there a sitemap included on the website?	2/4	Yes - available online	No	No	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	2/4	No	Yes - available online	Yes - available online	No
H1	Is there any price information present?	0/4	No	No	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	0/4	No	No	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.23. Slovakia (SK)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
5.4	8.5	7.4	65	0	20.2	Bismarck	National

Overview of the websites analysed

196 With respect to Slovakia the following four websites were analysed:

	SK1	SK3	SK5	SK8
Search path item	Government - Ministry of Health	Government - Regional health authorities	(public) health insurance organisation	Non-profit - Patient stakeholder organisation
Name of organisation responsible for website	Ministerstvo zdravotníctva Slovenskej republiky (Ministry of Health of the Slovak Republic)	Bratislavský samosprávny kraj (Bratislava self-governing region)	Úrad pre dohľad nad zdravotnou starostlivosťou (The Healthcare Surveillance Authority)	Asociácia na ochranu práv pacientov SR ("Patients protection association)
URL	http://www.health.gov.sk/	http://www.region-bsk.sk/obcan.aspx	http://www.udzs.sk/	http://www.informovanypacient.sk/
Scope of website	National	Regional	National	National
Official contact point?	No	No	No	No
Easiness to reach	Active search - 1 to 3 minutes	Active search - 1 to 3 minutes	Persistent search - more than 3 minutes	Persistent search - more than 3 minutes
In which languages is the information available on the website?	Slovak only	Slovak, English - only the key information, detailed information only in Slovak	Czech, basic information in English	Slovak only
Which accessibility features are present?	none	Blindfriendly version link (yet I do not know how it works)	None	None

Type of information delivered to patients

Ref	Definition	Information available?	SK1	SK3	SK5	SK8
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	0/4	No	No	No	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/4	No	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	3/4	No	Yes - available online	Yes - available online	Yes - available online
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	0/4	No	No	No	No
B1	Is a description of the health system present?	0/4	No	No	No	No
B2	Are statistics of providers (number by type) available?	0/4	No	No	No	No

Ref	Definition	Information available?	SK1	SK3	SK5	SK8
B3	Is a directory of providers (per type) available?	1/4	Yes - available online	No	No	No
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/4	No	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	0/4	No	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	1/4	No	No	Yes - available online	No
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	1/4	No	No	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/4	No	No	Yes - available online	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/4	No	No	Yes - available online	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	0/4	No	No	No	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	1/4	No	No	Yes - available online	No
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/4	No	No	Yes - available online	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No

Ref	Definition	Information available?	SK1	SK3	SK5	SK8
E1	Are there links to contact points in other countries?	0/4	No	No	No	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/4	No	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	1/4	No	No	No	Yes - available online
F2	Is there information on access to health services for citizens with limited financial resources?	0/4	No	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistent present?	1/4	No	No	Yes - available online	No
G2	Are contact forms present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/4	No	No	No	No
G4	Is there a sitemap included on the website?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/4	No	No	No	No
H1	Is there any price information present?	2/4	Yes - available online	No	Yes - available online	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/4	No	No	Yes - available online	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	0/4	No	No	No	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.24. Slovenia (SI)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
2	9.1	6.5	68.8	12.7	9.7	Bismarck	National

Overview of the websites analysed

197 With respect to Slovenia the following three websites were analysed:

	SI1	SI3	SI5
Search path item	Government - Ministry of Health	(public) health insurance organisation	Provider stakeholder organisation
Name of organisation responsible for website	Ministrstvo za zdravje, Ministry of Health	ZZZS (Zavod za zdravstveno zavarovanje Slovenije), eng. Health insurance institute of Slovenia.	Medical Chamber of Slovenia
URL	http://www.mz.gov.si/	http://www.zzzs.si	http://www.zdravniskazbornica.si/
Scope of website	European	National	National
Official contact point?	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	Slovene, English	Slovene, English	Slovene, English
Which accessibility features are present?	None	None	Content overview/site map

Type of information delivered to patients

Ref	Definition	Information available?	SI1	SI3	SI5
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	1/3	Yes - available online	No	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	1/3	Yes - available online	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	3/3	Yes - available online	Yes - available online	Yes - available online
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	2/3	Yes - available online	No	Yes - available online
B1	Is a description of the health system present?	1/3	Yes - available online	No	No
B2	Are statistics of providers (number by type) available?	1/3	Yes - available online	No	No
B3	Is a directory of providers (per type) available?	3/3	Yes - available online	Yes - available online	Yes - available online

Ref	Definition	Information available?	SI1	SI3	SI5
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	1/3	No	No	Yes - available online
B5	Is information about compliance with quality standards by healthcare providers available?	0/3	No	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/3	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	3/3	Yes - available online	Yes - available online	Yes - available online
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/3	Yes - available online	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	1/3	Yes - available online	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	0/3	No	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	1/3	No	Yes - available online	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	2/3	Yes - available online	No	Yes - available online
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	2/3	Yes - available online	Yes - available online	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/3	No	No	No
E1	Are there links to contact points in other countries?	1/3	No	Yes - available online	No

Ref	Definition	Information available?	SI1	SI3	SI5
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/3	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	1/3	No	No	Yes - available online
F2	Is there information on access to health services for citizens with limited financial resources?	0/3	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	2/3	Yes - available online	No	Yes - available online
G2	Are contact forms present?	0/3	No	No	No
G3	Is a forum for patients present?	0/3	No	no	No
G4	Is there a sitemap included on the website?	3/3	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	0/3	No	No	No
H1	Is there any price information present?	1/3	No	Yes - available online	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	1/3	No	Yes - available online	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	1/3	No	Yes - available online	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/3	No	No	No

A.5.25. Spain (ES)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
45.8	9.7	65.2	5	4.7	23.7	Beveridge	Regional

Overview of the websites analysed

199 With respect to Spain the following three websites were analysed:

	ES1	ES2	ES3
Search path item	Government - Ministry of Health	Government - Ministry of Social Security	Government - Regional health authorities
Name of organisation responsible for website	Ministerio de Sanidad, Política Social e Igualdad - Ministry of Health, Social policy and Equity	Ministerio de Trabajo e Inmigración-Seguridad Social - Ministry of Work and Immigration-Social Security	Generalitat de Catalunya/catsalut - Catalonian Regional Health Agency
URL	http://www.msps.es/	http://www.seg-social.es/Internet_1/index.htm	http://www.gencat.cat/temes/cas/salut.htm http://www10.gencat.net/catsalut/cat/index.htm
Scope of website	National	National	Regional
Official contact point?	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Some clicks - 1 minute
In which languages is the information available on the website?	Spanish, Catalan, Galician, Basque, Valencian, English, French. However, part of the information is provided in Spanish only.	All the pages are in Spanish, but most of them are also in Spanish, Catalan, Basque, Galician, French or English	Spanish, Catalan and English. However, most of the pages are in Catalan
Which accessibility features are present?	Accessibility WAI 1.0, level AAA Use of TAW accessibility test visual design: CSS 2 Possibility to modify font size in explorer settings	Accessibility level Double-A (WAI). Testing of the web pages was done using the TAW (Web Accessibility Test) programme. The portal was developed using HTML 4.01 and CSS 2.0 style sheets. Shortcuts are available	satisfying at minimum, the Priority 1+2 checkpoints of the WCAG rules, and also to meet the AA-level of conformance, as European and Spanish legislation requires of public administrations. Where possible, Priority 3, size and colour

Type of information delivered to patients

Ref	Definition	Information available?	ES1	ES2	ES3
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	2/3	Yes - available online	No	Yes - available online
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	2/3	Yes - available online	No	Yes - available online

Ref	Definition	Information available?	ES1	ES2	ES3
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	1/3	Yes - available online	No	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	2/3	Yes - available online	No	Yes - available online
B1	Is a description of the health system present?	2/3	Yes - available online	No	Yes - available online
B2	Are statistics of providers (number by type) available?	2/3	Yes - available online	No	Yes - available online
B3	Is a directory of providers (per type) available?	2/3	Yes - available online	No	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	2/3	Yes - available online	No	Yes - available online
B5	Is information about compliance with quality standards by healthcare providers available?	1/3	Yes - available online	No	No
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/3	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	3/3	Yes - available online	Yes - available online	Yes - available online
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/3	No	Yes - available online	Yes - available online
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/3	No	Yes - available online	Yes - available online
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/3	No	No	Yes - available online
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/3	No	Yes - available online	Yes - available online

Ref	Definition	Information available?	ES1	ES2	ES3
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	2/3	No	Yes - available online	Yes - available online
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/3	No	Yes - available online	No
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/3	No	No	No
E1	Are there links to contact points in other countries?	1/3	Yes - available online	No	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/3	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	0/3	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/3	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	1/3	No	No	Yes - available online
G2	Are contact forms present?	2/3	Yes - available online	No	Yes - available online
G3	Is a forum for patients present?	0/3	No	No	No
G4	Is there a sitemap included on the website?	3/3	Yes - available online	Yes - available online	Yes - available online
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	3/3	Yes - available online	Yes - available online	Yes - available online
H1	Is there any price information present?	2/3	Yes - available online	No	Yes - available online
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	0/3	No	No	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	2/3	Yes - available online	No	Yes - available online

Ref	Definition	Information available?	ES1	ES2	ES3
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/3	No	No	No

A.5.26. Sweden (SE)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
9.2	9.9	84	0	0.3	13.3	Beveridge	Regional/Local

Overview of the websites analysed

200 With respect to Sweden the following four websites were analysed:

	SE1	SE2	SE3	SE4
Search path item	(public) health insurance organisation	(public) health insurance organisation	Government - Ministry of Health	Government - Regional health authorities
Name of organisation responsible for website	Försäkringskassan (Government agency for social security - there is no Ministry of Social security in Sweden)	Swedish counties and regions	Socialdepartementet (Ministry of Health and Social Affairs)	Stockholm county (Stockholms läns landsting)
URL	http://www.forsakring.skassan.se/	www.1177.se	http://www.regeringen.se/sb/d/1474	http://www.varguide.n.se/
Scope of website	National	National	National	National
Official contact point?	No	No	No	Yes
Easiness to reach	Active search - 1 to 3 minutes	Active search - 1 to 3 minutes	Active search - 1 to 3 minutes	Active search - 1 to 3 minutes
In which languages is the information available on the website?	Swedish	Swedish	Swedish	Swedish
Which accessibility features are present?	None	Read it out loud function	"Easy read" text	None

Type of information delivered to patients

Ref	Definition	Information available?	SE1	SE2	SE3	SE4
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	2/4	No	Yes - available online	No	Yes - available online
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	0/4	No	No	No	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	3/4	No	Yes - available online	Yes - available online	Yes - available online

Ref	Definition	Information available?	SE1	SE2	SE3	SE4
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	0/4	No	No	No	No
B1	Is a description of the health system present?	3/4	No	Yes - available online	Yes - available online	Yes - available online
B2	Are statistics of providers (number by type) available?	2/4	No	Yes - available online	No	Yes - available online
B3	Is a directory of providers (per type) available?	2/4	No	Yes - available online	No	Yes - available online
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	0/4	No	No	No	No
B5	Is information about compliance with quality standards by healthcare providers available?	2/4	No	Yes - available online	No	Yes - available online
B6	Is there information about the liability insurance of health professionals or similar arrangements?	0/4	No	No	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronic), treatment, privacy and security applicable in the Member State?	2/4	No	No	Yes - available online	Yes - available online
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	0/4	No	No	No	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	0/4	No	No	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	3/4	Yes - available online	Yes - available online	No	Yes - available online
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	2/4	No	Yes - available online	No	Yes - available online

Ref	Definition	Information available?	SE1	SE2	SE3	SE4
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/4	No	Yes - available online	No	no
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	0/4	No	No	No	No
E2	Are there links to patients'organisation websites or other websites with usefull information on cross border healthcare?	0/4	No	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	0/4	No	No	No	No
F2	Is there information on access to health services for citizens with limited financial resources?	0/4	No	No	No	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	2/4	No	Yes - available online	No	Yes - available online
G2	Are contact forms present?	3/4	Yes - if patient contacts organisation by phone	Yes - available online	Yes - available online	Yes - available online
G3	Is a forum for patients present?	0/4	No	No	No	No
G4	Is there a sitemap included on the website?	1/4	Yes - available online	No	No	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	3/4	Yes - available online	Yes - available online	no	Yes - available online
H1	Is there any price information present?	0/4	No	No	No	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	3/4	Yes - available online	Yes - available online	No	Yes - available online
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	0/4	No	No	No	No

A.5.27. The United Kingdom (UK)

System characteristics

Population (million)	GDP % healthcare costs	Expenditure breakdown %				System type	Organization
		Tax	Social Insurance	Public Insurance	Out-of-Pocket expenses		
61.7	9.3	87.1	0	1	11.9	Beveridge	National

Overview of the websites analysed

201 With respect to the United Kingdom the following four websites were analysed:

	UK1	UK3	UK8	UK10
Search path item	Government - Ministry of Health	Government - Regional health authorities	Non-profit - Patient stakeholder organisation	Provider stakeholder organisation
Name of organisation responsible for website	Department of Health	National Health Service	The Patient's Association	British Medical Association
URL	www.dh.gov.uk	www.nhs.uk	www.patients-association.com	www.bma.org.uk
Scope of website	National	National	National	National
Official contact point?	No	No	No	No
Easiness to reach	Some clicks - 1 minute	Some clicks - 1 minute	Persistent search - more than 3 minutes	Some clicks - 1 minute
In which languages is the information available on the website?	English	English, the site recommends the use of Google translate for other languages	English	English
Which accessibility features are present?	Website complies with the World Wide Web Consortium's (W3C's) Level AA guidelines for accessibility and we are committed to maintaining and improving the accessibility of our site. browsealoud.	http://www.nhs.uk/aboutNHSChoices/aboutnhschoices/accessibility/Pages/Accessibilitystatement.aspx comprehensive policy, meeting/surpassing the W3C's Guidelines 1.0, level AA. partnership with Abilitynet	None	The website allows for navigation without a mouse, but it does not appear to be compliant with recognised accessibility standards

Type of information delivered to patients

Ref	Definition	Information available?	UK1	UK10	UK3	UK8
A1	Are recommendations (information on the treatment/how to do it/how not to do it) given for diagnosis or treatment (for specific diseases)?	2/4	Yes - available online	No	Yes - available online	No
A2	Are statistics about quality (such as deaths, incidents, complaints) given?	2/4	Yes - available online	No	Yes - available online	No
A3	Are descriptions of applicable laws, regulations and supervision regarding quality and/or patients' safety present?	3/4	Yes - available online	Yes - available online	Yes - available online	No
A4	Is there information about quality and safety standards / guidelines / certifications / qualifications for providers?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online

Ref	Definition	Information available?	UK1	UK10	UK3	UK8
B1	Is a description of the health system present?	3/4	Yes - available online	Yes - available online	Yes - available online	No
B2	Are statistics of providers (number by type) available?	2/4	Yes - available online	No	Yes - available online	No
B3	Is a directory of providers (per type) available?	1/4	No	No	Yes - available online	No
B4	Are there references to the way of working / quality standards and conditions (providers' right to practice / restrictions of this right for specific providers) used by the (different types of) providers?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
B5	Is information about compliance with quality standards by healthcare providers available?	3/4	Yes - available online	Yes - available online	No	Yes - available online
B6	Is there information about the liability insurance of health professionals or similar arrangements?	2/4	Yes - available online	Yes - available online	No	No
C1	Is there a description of the patients' rights regarding medical records (also electronical), treatment, privacy and security applicable in the Member State?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
C2	Are there specific references on the rights of own citizens to receive healthcare abroad (in other Member States)?	2/4	Yes - available online	No	Yes - available online	No
C3	Are there specific references on the rights of citizens of other Member States to receive healthcare in the Member State (information for foreigners)?	2/4	Yes - available online	No	Yes - available online	No
D1	Is there information on the procedures (incl. prior approval, forms to fill in, delay in authorisation, cases in which authorisation can be refused) that should be followed by foreigners to receive healthcare in the Member State?	1/4	Yes - available online	No	No	No
D2	Is there information on the procedures (incl. prior approval, forms to fill, delay of authorisation, cases in which authorisation can be refused) for own citizens to receive healthcare abroad (in other Member States)?	2/4	Yes - available online	No	Yes - available online	No
D3	Is there information on the complaint / redress procedures regarding healthcare received in the Member State?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
D4	Is there information on existing inter-country agreements / the EU cross-border healthcare Directive?	1/4	Yes - available online	No	No	No

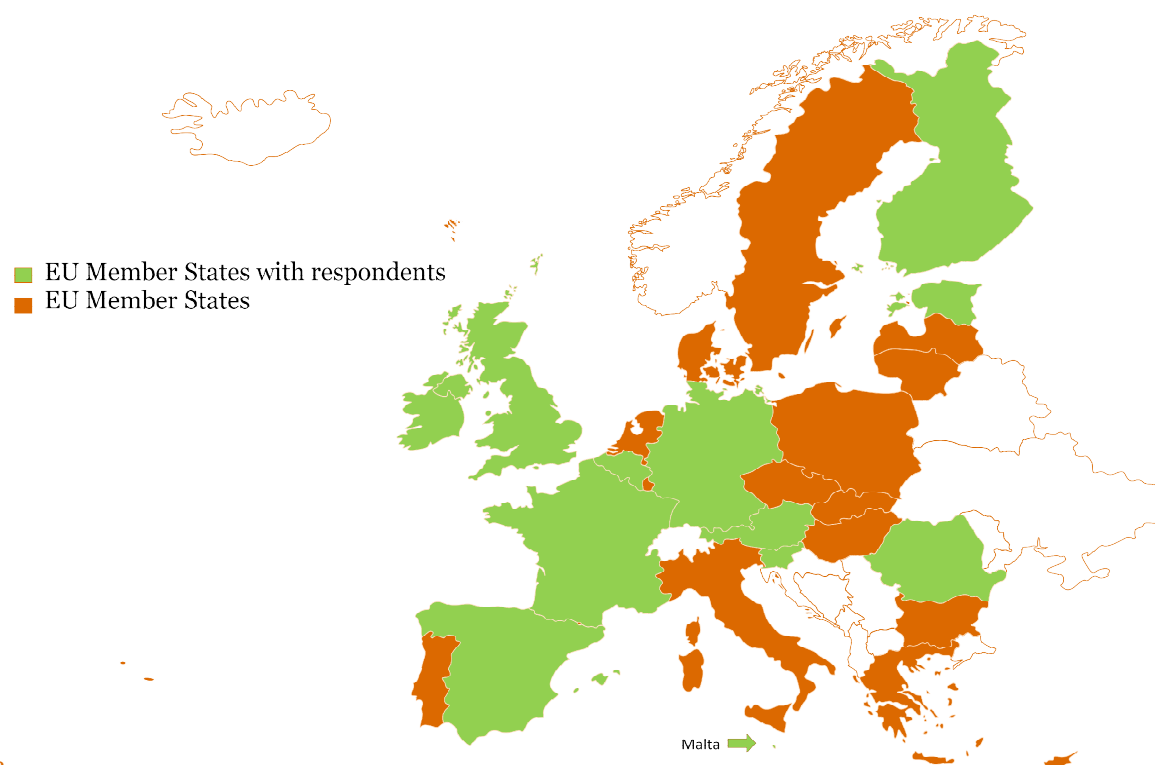
Ref	Definition	Information available?	UK1	UK10	UK3	UK8
D5	Is there information on the recognition of foreign prescriptions in the Member State?	0/4	No	No	No	No
E1	Are there links to contact points in other countries?	1/4	No	No	Yes - available online	No
E2	Are there links to patients' organisation websites or other websites with usefull information on cross border healthcare?	0/4	No	No	No	No
F1	Is there information on access to health providers for persons with disabilities?	2/4	Yes - available online	No	Yes - available online	No
F2	Is there information on access to health services for citizens with limited financial resources?	2/4	Yes - available online	No	Yes - available online	No
G1	Is a Frequently Asked Questions section or a digital assistant present?	4/4	Yes - available online	Yes - available online	Yes - available online	Yes - available online
G2	Are contact forms present?	3/4	Yes - available online	Yes - available online	Yes - available online	No
G3	Is a forum for patients present?	1/4	No	No	No	Yes - available online
G4	Is there a sitemap included on the website?	3/4	Yes - available online	Yes - available online	Yes - available online	No
G5	Are there other interactive features such as social media integration and/or customised pages after user login?	1/3	No	No	Yes - available online	
H1	Is there any price information present?	2/4	Yes - available online	No	Yes - available online	No
H2	Is there any information (including levels of reimbursement, conditions to comply too in order to receive reimbursement, the amount of delay, forms and procedures to follow) on reimbursement of healthcare received in the Member State?	2/4	Yes - available online	No	Yes - available online	No
H3	Is there information on entitlements to healthcare ("basket of healthcare subject to reimbursement")?	2/4	Yes - available online	No	Yes - available online	No
H4	Is there any mentioning of the possibilities of different routes to get reimbursement for systems were healthcare is publically provided by the government (Beveridge system) or by privately owned healthcare providers (Bismarck system)?	2/4	Yes - available online	No	Yes - available online	No

B. Details of Stakeholder Consultation

B.1. Results of the Stakeholder Consultation

B.1.1. Survey responses

01 The following Member States responded to the survey. A table of responding Member States has been added in paragraph 2.4 . There were 40 responses from 12 different Member States.



202 **Figure 24: Visual overview of Member States who responded to the survey**

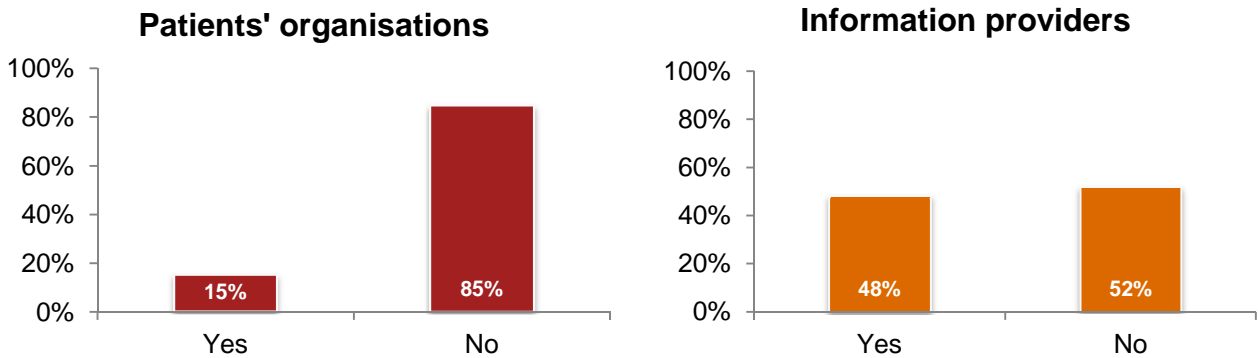
203 The survey contained questions with multiple choice as well as open text answers. This design was intended to get answers that are relatively easy to compare, while giving respondents the ability to provide context for their answers. In practice, open text answers were fairly limited. They did provide some background to the multiple choice answers, and have been included in this report where relevant.

B.1.2. Survey results

Information providers estimate information availability higher than patients' organisations

204 There is a difference in the perception of availability of information between patients' organisations and information providers. This difference is not immediately apparent, but may arise from a knowledge inequality: information providers may have more insight in where to get the information needed due to their daily involvement.

Question: Do you know whether there are specific and official sources of information regarding cross-border healthcare in your country (aside from private sources)?

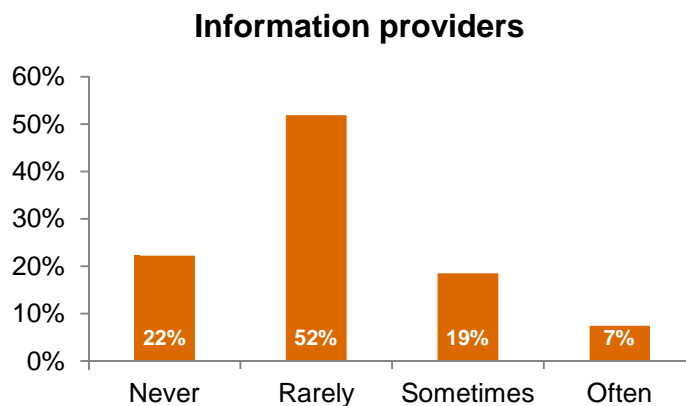


²⁰⁵ **Figure 25: Availability of information on cross-border healthcare**

Information providers estimate the current demand for information to be low, but beneficial

²⁰⁶ Most information providers are rarely contacted for information on cross-border healthcare. It is not clear if this is a result from patients not showing interest in the subject, or patients not knowing where or how to obtain the information.

Question: As a professional, how often do you have individual requests to provide information regarding cross-border healthcare in your country?



²⁰⁷ **Figure 26: Estimation of information demand by information providers**

²⁰⁸ Information providers do estimate that there is a benefit for patients. 52% strongly agrees that establishing NCPs would be beneficial to patients.

Question: Establishing National Contact Points to deliver information on cross-border healthcare would be beneficial to patients.

Information providers

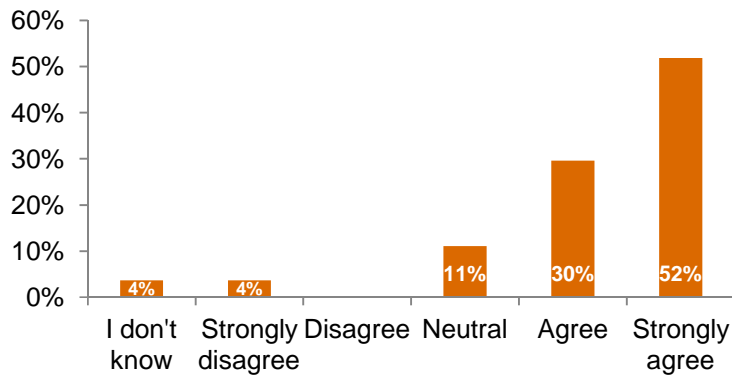
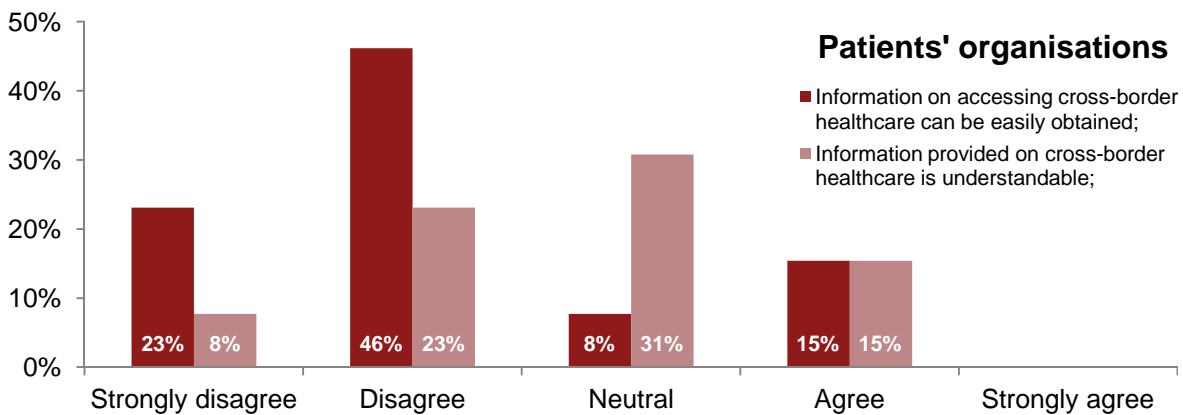


Figure 27: Benefits of information to patients estimated by information providers

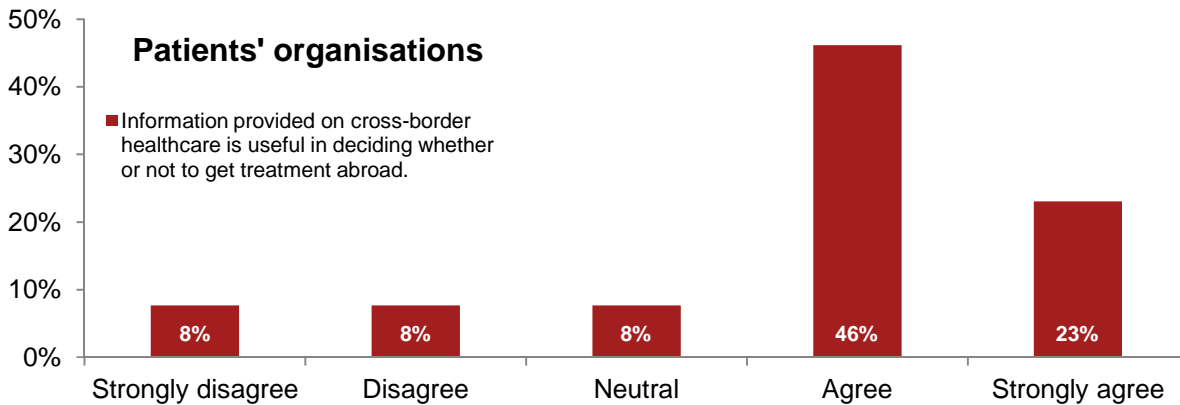
Patients' organisations consider information to be beneficial, but are not aware of where to obtain it

- 209 Most patients' organisations see the benefit of obtaining information on cross-border healthcare in order to obtain care abroad. However, they do not always know where to obtain this information. When information is available, it is not in all cases understandable.
- 210 None of the respondents provided extra context on this statement. The patients' organisations seem to be somewhat less negative about how understandable the information is, compared to the availability; it seems that the availability of information is the main issue.

Question: please indicate if you agree with the following statements:



211 Figure 28: Awareness of the location of information estimated by patients' organisations

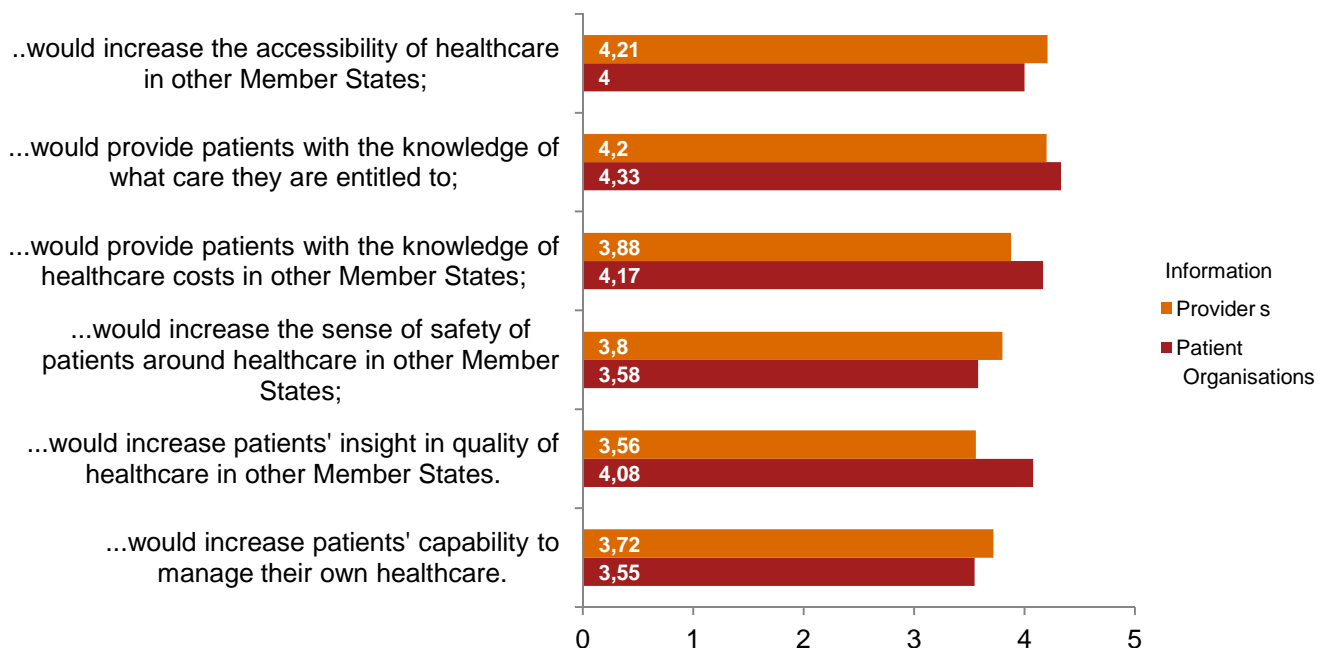


212 **Figure 29: Estimation of usefulness of information by patients' organisations**

Patients' organisations' and information providers' opinions only differ slightly on the positive effects of information usage

- 213 Patients organisations, more than information providers, consider that insight in quality of healthcare would increase. However, as is clear from the average agreement with several statements on this topic, both groups seem to assess the usage similarly, i.e. positively.
- 214 The consensus between patients' organisations on these topics is large; there is some disagreement on the question if the sense of safety would increase, but in general patients' organisations consider the development of NCPs to have the stated effects. The information providers also show a large amount of consensus. There are only a few dissenting opinions in both groups.

Question: National Contact Points...

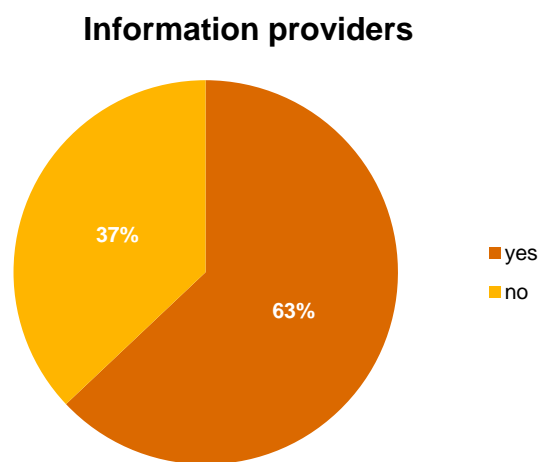


215 **Figure 30: Opinion on the positive effects of national contact points**

63% of information providers is willing to disclose the necessary information

- 216 63% of the information providers say that they are ready to disclose the required information mentioned in the Directive. However, (administrative) difficulties are to be expected. The information providers gave several explanations, mainly dealing with the information not currently being available, thus needing resources to gather it and make it available.
- 217 Several information providers mention that keeping the information up-to-date will require a large amount of resources, sometimes mentioned as detracting from the primary function of providing care. Translation is also mentioned as a difficulty. If information should be made available internationally translation services are needed to provide consistency.

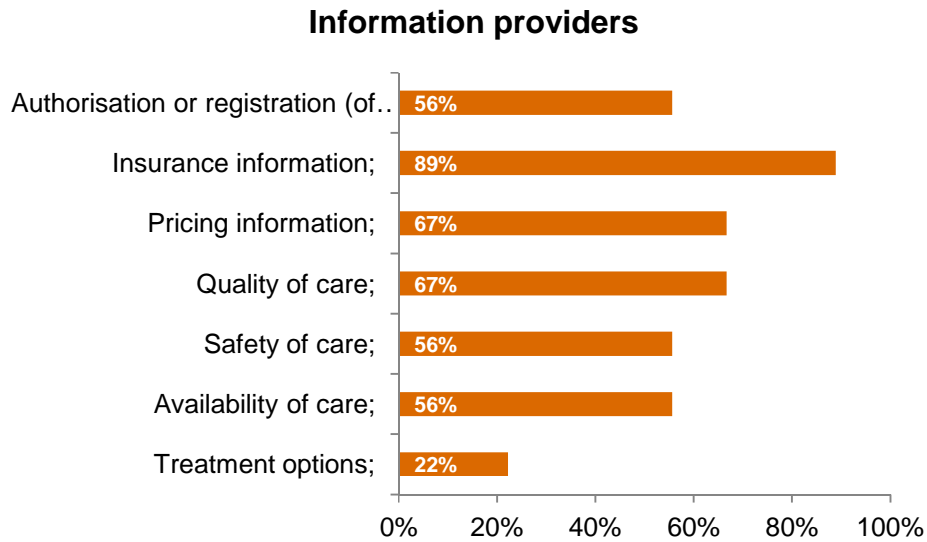
Question: Would you be ready to provide the required information through NCPs, when being asked?



218
Figure 31: 63% of information providers is willing to disclose the necessary information

- 219 Providing insurance information is considered to be most difficult. This may be a consequence of the fact that only one payer responded to the survey. One respondent mentions the absence of a payment system that can be easily explained to patients. Several information providers add that this information is to be gathered for this specific purpose, which may mean that it is not currently available.

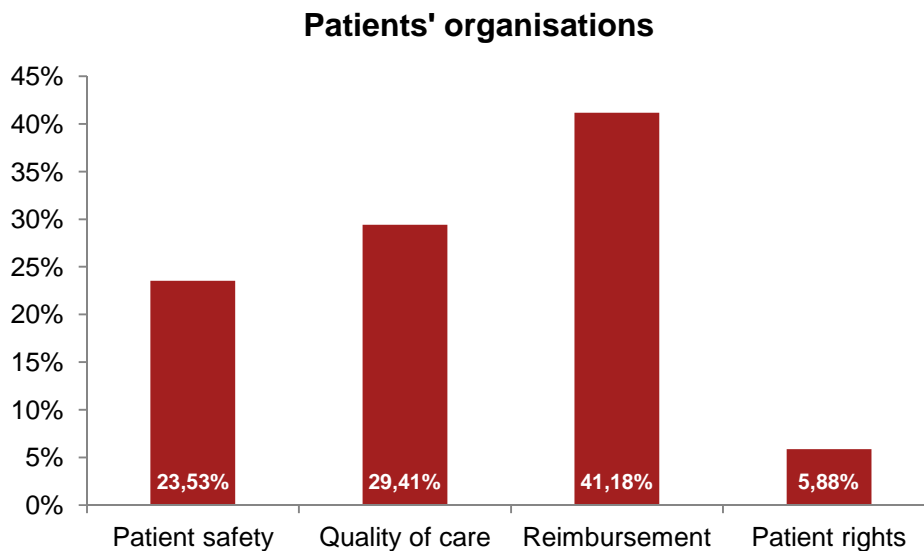
Question: Which of the abovementioned elements of information would you find difficult to provide?



²²⁰
Figure 32: Difficulties of providing different types of information

²²¹ It is important to know what patients’ organisations are expecting in terms of information provided. When asked what information they search for it becomes clear that mainly reimbursement information is desired. In the open text field, several information providers mentioned the desire for information about coverage abroad. Additionally, it was mentioned that information about treatments would be welcome.

Question: Which topics related to cross-border healthcare did you search for?



²²²
Figure 33: Topics that patients’ organisations have searched for

Information providers see the benefits of NCPs, but experience barriers in providing information

- 223 The administrative impact of providing information is considered to be significant by most information providers. Even so, most information providers think that the benefits for patients will outweigh this impact. The benefit for organisations is not immediately clear.
- 224 As mentioned in the previous conclusion, some information may be difficult to provide to patients. This will create administrative complications. An important question would be if the extra effort is worth it.

Question: The administrative impact of providing the information mentioned above for the NCP is...

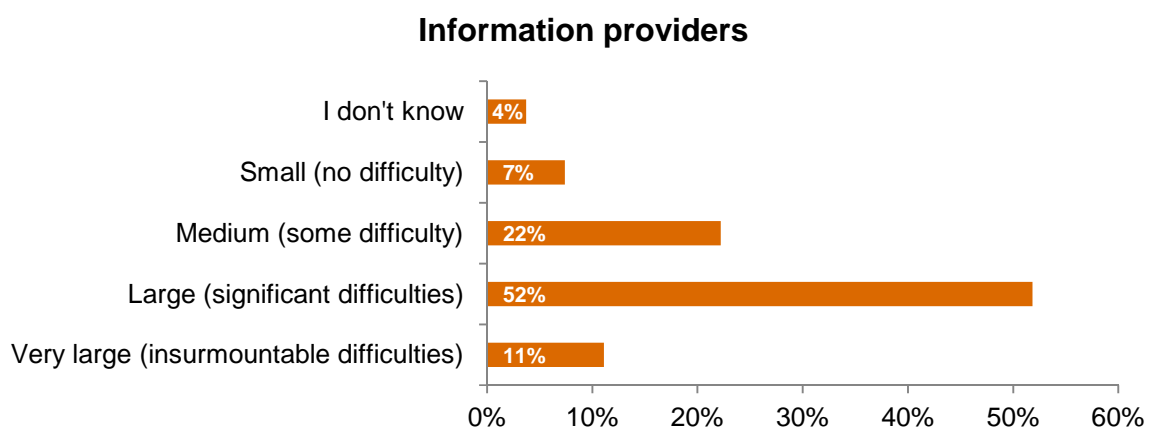


Figure 34: Administrative impact of National Contact Points

- 225 Information providers' responses mostly indicate that patient benefits outweigh the administrative impact. This is much less the case for the organisations themselves. From the open text responses it can be derived that there are a number of factors that worry the information providers: in the first place there is a lot of information that needs to be provided in terms of volume. Secondly, the type of information may prove difficult to obtain. One respondent mentioned that in order to be able to provide useful information, very skilled advisors would be needed.

Question: The benefits for ... of providing this information will outweigh the administrative impact.

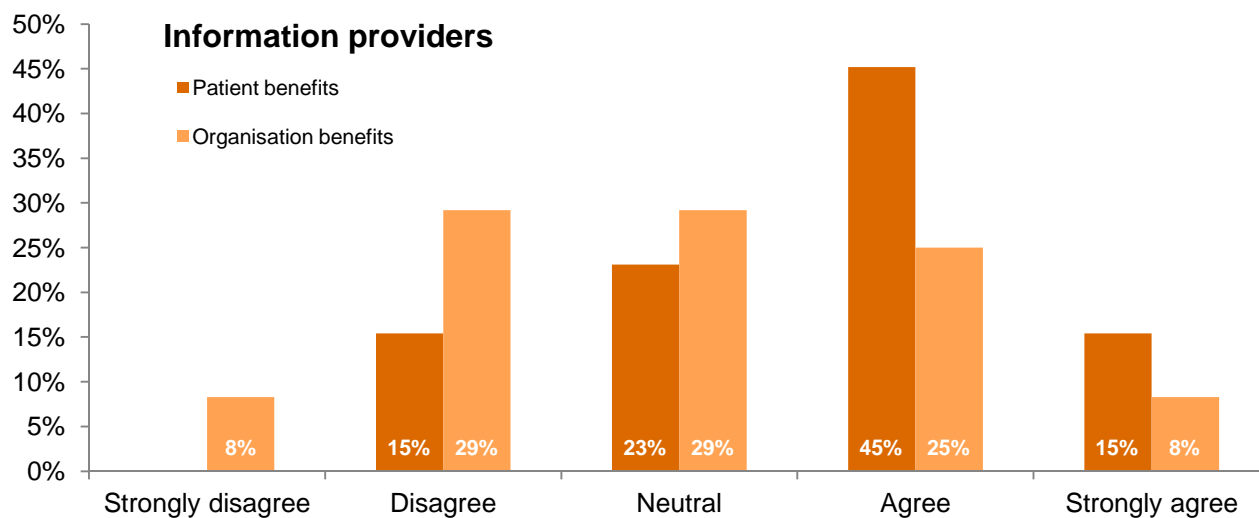


Figure 35: Relative administrative impact of providing information with respect to the benefits

Some issues are mentioned on the reliability of data – and the liability for information providers

226 Several information providers mention the liability that arises from disclosing information, which may prove to be barriers for providing the information to patients. The main issue seems to be reliability of information:

“Question of consequences for the issuer if information provided is not correct”

“If a patient dies or gets irreversible damage while waiting for an answer”

227 In addition, differences in interpretation and consistency of information between Member States is considered:

“Medication licensing can be different in different states and information in one state may not readily transfer to another”

“It is a huge task to keep updated information on health services in all the EU countries on a regular basis”

Patients’ organisations and information providers have some ideas for additional information

228 Patients’ organisations would like to see more information on the NCPs, in addition to the required information:

“Apart from all of the above, what coverage is given - acute treatment, rehabilitative etc.; language capabilities of professionals in order to have accurate understanding of my needs”

“Transplantation of organs in other countries and cost related to this”

“The NCP should in any case provide information on communication opportunities in hospitals abroad; do the doctors speak a language which the patient at least understands?”

“How easy is the process to obtain healthcare in Member States and making this process commonly known to the public”

229 Perhaps understandable, several information providers consider the information in the Directive to be sufficient:

“In our view the list is rather comprehensive and provides all necessary information to enable patient’s choice”

230 However, some information providers do have additional suggestions that could be used to their own benefit or to help providing service to patients:

“Training for healthcare professionals regarding implementation and after effects”

“Liability issues”

“The NCP must have easy access to information from NCPs in other MS to be able to guide patients seeking treatment abroad”

Patients’ organisations prefer ‘conventional’ means of obtaining information from NCPs

231 Contact by telephone, information desk or (e-)mail is most alluring for patients’ organisations. It seems that personal contact is a preference.

232 More patients’ organisations don’t see the benefits of fora, videoconferencing and chat than that do see the benefits of these media. As is clear from the figures, not all patients’ organisations answered all options.

Means of obtaining information from an NCP	Benefit	No benefit
By telephone	8	3
Personally (information desk)	10	1
Through an unmoderated forum	3	6
By e-mail	10	1
By conventional mail	8	1
Through videoconferencing / electronic chat	4	5

Table 1: Benefits seen from different means of obtaining information from an NCP

233 Some patients' organisations mention the drawbacks of various media:

“If information is available on websites only it will may disadvantage older patients, those with disabilities, those in areas with limited/no access internet services”

“Please, no spam... (emails, forums, phone, etc.)”

234 It is mentioned that providing information may need personal attention:

“Personal contact is best but that could be through videoconferencing. Some cases are complex and 2-way conversation is necessary in giving advice on this subject”.

B.2. Stakeholder questionnaire

B.2.1. Information providers

Questions
1: Please indicate your Member State of residence:
2: Do you know whether there are specific and official sources of information regarding cross-border healthcare in your country (aside from private sources)? By "Cross-border healthcare" we mean healthcare provided or prescribed in another country of the
3: If yes, please describe how and by whom this information is provided. (e.g. physical office; web-based; telephone number, etc.)
4: Please indicate if you agree with the following statements:
4a Information on accessing cross-border healthcare can be easily obtained;
4b Information provided on cross-border healthcare is understandable;
4c Information provided on cross-border healthcare is useful in deciding whether or not to get treatment abroad.
5: Which topics related to cross-border healthcare did you search for?
5a Patients' safety;
5b Quality of care;
5c Reimbursement;
5d Patients' rights;
5e NA
5f Other:
6: What additional information would you like to see provided through a National Contact Point in order to be able to make informed decisions about getting cross-border healthcare (e.g. information about your rights at home, conditions of reimbursement, t
7: Establishing National Contact Points to deliver information on cross-border healthcare.
7a .. would be beneficial to patients;
7b .. would be beneficial for healthcare providers;
7c .. would be beneficial for healthcare payers.
8: Do you have any comments on the previous question?
9: National Contact Points.
9a ..would increase the sense of safety of patients around healthcare in other Member States;
9b ..would increase the accessibility of healthcare in other Member States;
9c ..would provide patients with the knowledge of what care they are entitled to;
9d ..would provide patients with the knowledge of healthcare costs in other Member States;
9e ..would increase patients' insight in quality of healthcare in other Member States.
9f ..would increase patients' capability to manage their own healthcare.
10: Do you have any comments or additions to the previous question?
11: This research focuses on websites as National Contact Points. In addition to this, would you see the benefit of obtaining information.
11a .. by telephone;
11b .. personally (information desk);
11c .. through an unmoderated forum;
11d .. by e-mail;
11e .. by conventional mail;
11f .. through videoconferencing / electronic chat.
12: Do you have any comments on the previous question?
13: The European Commission shall make information on NCPs publicly available and ensure that they cooperate closely with each other. In your opinion, how should the Commission fulfil this role?
14: Do you have any additional comments on National Contact Points?

B.2.2. Patients' organisations

Questions

1: Please indicate your Member State of residence:

2: Do you know whether there are specific and official sources of information regarding cross-border healthcare in your country (aside from private sources)? By "Cross-border healthcare" we mean healthcare provided or prescribed in another country of the

3: If yes, please describe how and by whom this information is provided. (e.g. physical office; web-based; telephone number, etc.)

4: Please indicate if you agree with the following statements:

4a *Information on accessing cross-border healthcare can be easily obtained;*

4b *Information provided on cross-border healthcare is understandable;*

4c *Information provided on cross-border healthcare is useful in deciding whether or not to get treatment abroad.*

5: Which topics related to cross-border healthcare did you search for?

5a *Patients' safety;*

5b *Quality of care;*

5c *Reimbursement;*

5d *Patients' rights;*

5e *NA*

5f *Other:*

6: What additional information would you like to see provided through a National Contact Point in order to be able to make informed decisions about getting cross-border healthcare (e.g. information about your rights at home, conditions of reimbursement, t

7: Establishing National Contact Points to deliver information on cross-border healthcare.

7a *.. would be beneficial to patients;*

7b *.. would be beneficial for healthcare providers;*

7c *.. would be beneficial for healthcare payers.*

8: Do you have any comments on the previous question?

9: National Contact Points..

9a *..would increase the sense of safety of patients around healthcare in other Member States;*

9b *..would increase the accessibility of healthcare in other Member States;*

9c *..would provide patients with the knowledge of what care they are entitled to;*

9d *..would provide patients with the knowledge of healthcare costs in other Member States;*

9e *..would increase patients' insight in quality of healthcare in other Member States.*

9f *..would increase patients' capability to manage their own healthcare.*

10: Do you have any comments or additions to the previous question?

11: This research focuses on websites as National Contact Points. In addition to this, would you see the benefit of obtaining information.

11a *.. by telephone;*

11b *.. personally (information desk);*

11c *.. through an unmoderated forum;*

11d *.. by e-mail;*

11e *.. by conventional mail;*

11f *.. through videoconferencing / electronic chat.*

12: Do you have any comments on the previous question?

13: The European Commission shall make information on NCPs publicly available and ensure that they cooperate closely with each other. In your opinion, how should the Commission fulfil this role?

14: Do you have any additional comments on National Contact Points?

C. Details of cost analysis

C.1. Overall approach

235 The approach is described in Section 4.1

C.2. Methodologies used

C.2.1. Website Development

236 Based upon the sitemap we estimated the workload necessary for the development of the NCP website for both its set-up and operate phases based on the experience of PwC web team and contact with some web agencies. We completed this estimation with good practice standard tasks of website development.

237 The development of the website corresponds to the design, the construction and the implementation of the website:

- The design of the website requires analysis by a project manager, a web design performed by a graphist and a platform design done by an IT architect.
- The construction of the website is mostly performed by a web developer. The web developer is responsible for making the website functional, i.e. creating the pages, incorporating content in the page according to the graphic guidelines and creating the links between the web pages. However, a system administrator may be required for specific developments such as a search engine or the creation of a forum.
- The implementation of the website includes further steps: functional testing and troubleshooting are generally performed by a web developer, deployment in production and in staging are usually done by a system administrator, whereas an IT security specialist is in charge of web vulnerability security testing. A project manager will also be needed during this phase.

Importance of features

238 As previously outlined, we labelled each website feature ('Must-have' or 'Nice-to-have') and its respective content ('Mandated' or 'Recommended') by their importance. A table summarising the categorisation of all website features is presented in Appendix C.3. Time and cost estimations have been determined for the 'Mandated' option and for the 'Recommended' options.

C.2.2. Website hosting

Sourcing strategy

239 Three sourcing strategies for website hosting have been assessed:

- An outsourcing strategy.
- An insourcing strategy.
- A co-sourcing strategy.

240 These different strategies have a particular important impact on equipment and human resource costs.

241 The proposed configuration should be able to meet these requirements even during peak periods if properly designed and configured.

C.2.3. Content development

Depth of information

242 Each Member State is responsible for writing the content of the website. Some Member States may wish to provide a minimum of information on cross-border healthcare while some others may wish to give exhaustive

information. As a result, for each webpage, we estimated a minimum and a maximum of mandays for writing the content of the website.

243 Also, we determined the frequency of updates necessary to provide adequate information to patients and showed it in Appendix C.5 Depending on the time needed to write content during the set-up phase and the frequency of updates, we determined the annual minimum and maximum times needed to update the website content.

Translation activities

244 As presented in Appendix C.5, some information should be provided in other language(s) than the official language(s) of the Member State. We assume that Member States will hence be in charge to translate parts of the information into several other EU languages. The time needed for the translation is estimated to one sixth of the time ²⁹needed to write the content.

As the time needed for translation depends on the time needed for writing and updating the content, we estimated a minimum and maximum range for the translation time.

C.3. Website development

245 Website development consists in the coding of the website, i.e. the integration of the content in the website according to the graphic design and the functional and technical specifications that have been defined.

246 We estimate that between 292 and 628 mandays are necessary to set up the website and between 73 and 157 mandays to operate it. This variation depends on the implementation of the 'Basic' only or 'Extended' scenario.

247 The following table presents these results.

	'Basic' Scenario				'Extended' Scenario			
	Number of mandays	Costs (in €, EU average)			Number of mandays	Costs (in €, EU average)		
		Out-sourced	In-sourced	Co-sourced		Out-sourced	In-sourced	Co-sourced
Design	90	34k	34k	34k	150	49k	49k	49k
Construct	79	23k	20k	20k	259	74k	70k	70k
Implement	123	44k	37k	37k	219	78k	71k	71k
Total initial set-up	292	101k	91k	91k	628	201k	190k	190k
Annual operations & maintenance	73	25k	23k	23k	157	50k	47k	47k

Table 15: Resources needed for the NCP website development

248 Naturally, the set-up phase requires more effort in terms of mandays than the annual operations and maintenance. As a result, the budgeting for the NCP should be more important the first year. During the set-up of the website, the construct phase demands most mandays (between 79 and 259) whereas the design phase involves least mandays (between 90 and 150). However, even if the construct phase requires more days than the implement phase, the cost of the two phases are similar. This is due to the fact that more specialised and more expensive staff is required during the implementation phase (such as the system administrators, the project manager and the IT architect) whereas most of the work is performed by web developers during the construct phase.

249 Between 99 % and 108% of additional costs are needed to include 'Nice-to-have' features to the 'Must-have' features.

²⁹ This assumption is based on the feedback we received from translation companies we contacted

250 The following table summarises the impact of adding technical features on workload, by type of IT staff.

	Must-have	Nice-to-have
Project Manager	64	112
Web Developer	103	329
IT Architect	30	30
IT Security Specialist	10	10
System Administrator	55	57
Graphist	30	90
Total	292	628

Table 16: Comparison of mandays needed for the website development phase according to the technical features, by type of IT staff

C.3.1. Assumptions

251 The assumptions that have been taken into consideration are:

- The website manages multi-linguism.
- The development is based on an OpenSource CMS integrating basic features like Search, Login, News, share on social networks, etc.
- An external Information System has been defined to make available a directory of existing hospitals and healthcare providers. (The integration costs on this external Information System are part of our cost estimations but the setup and maintenance costs of this external Information System are not included, they should be assessed separately).
- Hospitals and healthcare providers have defined an external Information System to make available some data regarding their availabilities (The integration costs on this external Information System are part of our cost estimations but the setup and maintenance costs of this external Information System are not included, they should be assessed separately).The website does not host videos. These are hosted on external websites that have streaming features (such as YouTube, akamai, etc.).
- The number of mandays for the functional Testing equals 20%³⁰ of the Design and Construct phases.
- The number of mandays for the project management equals 20%³¹ of the Design and Construct phases.
- Annual recurrent costs for the website development are estimated as equal to 25%³² of the initial set-up costs for outsourcing and co-sourcing strategies.
- Taxonomies are not supported in the initial version of the NCP, so data are not classified and standardised in the multiple systems (availability and directory of hospitals and healthcare providers).

³⁰ This assumption is based on the feedback we received from several web agencies we contacted

³¹ This assumption is based on the feedback we received from several web agencies we contacted

³² This assumption is based on the feedback we received from several web agencies we contacted

C.3.2. Estimated workload

C.3.2.1. Design phase

Activities	Description	Necessity rating	Mandays	Profile
Analysis		Must-have	30	Project Manager
Web design	Website	Must-have	30	Graphist
	Mobile	Nice-to-have	60	Graphist
Platform design	Main design	Must-have	20	IT Architect
	Multi-linguism	Must-have	10	IT Architect

C.3.2.2. Construct phase

No	Section	Subsection	Necessity rating	Mandays	Profile
<i>Content pages</i>					
1	Home	1 Home	-		
2	About	2.1 About this National Contact Point	Recommended	1	Web developer
		2.2 History	Recommended	1	Web developer
		2.3 Mission and organisation	Recommended	2	Web developer
		2.4 Legal framework	Recommended	2	Web developer
		2.5 Figures	Recommended	2	Web developer
		2.5.1 Site statistics		5	Web developer
		2.6 Activity report	Recommended	1	Web developer
		2.7 Contact us	Recommended	1	Web developer
		2.8 Media library	Recommended	1	Web developer
		2.8.1 Video		1	Web developer
		2.8.2 Links to videos		1	Web developer
		2.9 Terms and conditions	Recommended	1	Web developer
		2.9.1 Terms of use		1	Web developer
		2.9.2 Comments policy		1	Web developer
2.9.3 Privacy policy		1	Web developer		
3	Healthcare in	3.1 Health system description	Recommended	3	Web developer

[Member State]	3.1.1	Healthcare and healthcare-related providers		3	Web developer
	3.1.2	Directory of healthcare services		20	Web developer
	3.1.3	Statistics on healthcare services		30	Web developer
	3.1.4	Healthcare funding		1	Web developer
	3.1.4.1	Public health insurance (including third party payment system)		1	Web developer
	3.1.4.2	Private health insurances		1	Web developer
	3.1.4	Public and private practise		1	Web developer
	3.2	Reimbursement	Mandated	1	Web developer
	3.2.1	Basket of benefits		1	Web developer
	3.2.2	Entitlement for medical acts		1	Web developer
	3.2.3	Reimbursement and administrative formalities		1	Web developer
	3.2.3.1	What is reimbursed and how much		1	Web developer
	3.2.3.2	What is not to be reimbursed		1	Web developer
	3.2.3.3	How to be reimbursed		1	Web developer
	3.2.3.4	Special schemes for reimbursement		1	Web developer
	3.3	Quality and safety of healthcare	Mandated	1	Web developer
	3.3.1	National laws, regulations and policies regarding patient safety		1	Web developer
	3.3.2	Reports on patients safety		1	Web developer
	3.3.3	Medical certifications and qualifications		1	Web developer
	3.3.4	Description of national quality plans		1	Web developer
	3.3.5	Links to other institutions in relation with patient safety		1	Web developer
3.4	Right to practice and restrictions to provide healthcare services	Mandated	1	Web developer	
3.5	Liaibility insurance of health professionals	Recommended	1	Web developer	
3.6	Patients rights	Mandated	1	Web developer	
3.6.1	Patients' rights		1	Web developer	
3.6.1.1	Access to healthcare		1	Web developer	
3.6.1.2	Access to hospitals for disabled patients		1	Web developer	
3.6.1.3	Complaint and redress procedures		1	Web developer	
3.6.2	Access to your data		1	Web developer	
3.6.2.1	Access to (electronic) medical records		1	Web developer	
3.6.2.2	Patient consent for sharing and exchanging medical information		1	Web developer	
3.6.3	Access to information regarding safety and quality of healthcare		1	Web developer	

	3.6.4	Complaint procedures		1	Web developer
	3.6.4.1	Complaint procedures in case of harm to patients while providing healthcare		1	Web developer
	3.6.4.2	Complaint procedures in case of reimbursement issue		1	Web developer
	3.6.4.3	Redress procedures		1	Web developer
	3.7	Links to patients organisations	Recommended	1	Web developer
	3.8	Links to national and European law	Recommended	1	Web developer
4	Going abroad	4.1 Emergency care in the European Union	Mandated	1	Web developer
		Your rights: Directive 2011/24/EU			
	4.1.1			1	Web developer
	4.1.2	Your rights: European Health Insurance Card (EHIC) and European / national legislation		1	Web developer
	4.1.3	Scope of coverage of EHIC		1	Web developer
	4.1.4	Procedure to obtain EHIC		1	Web developer
	4.1.5	Reimbursement of healthcare services		1	Web developer
	4.2	Planned care in the European Union	Mandated	1	Web developer
	4.2.1	Your rights: (Directive 2011/24/EU)		1	Web developer
	4.2.2	Your rights: European / national legislation		1	
	4.2.3	Procedure (forms and certificates to have/download) and care subject to prior authorisation		1	Web developer
	4.2.4	Reimbursement of healthcare services		1	Web developer
	4.3	Receiving care outside the European Union	Recommended	1	Web developer
	4.3.1	Your rights		1	Web developer
	4.3.2	Bilateral agreements: countries, conditions		1	Web developer
	4.3.3	Procedures		1	Web developer
	4.3.4	Reimbursement of healthcare services		1	Web developer
	4.4	Links to NCP websites on cross-border healthcare in other Member States	Mandated	3	Web developer
5	Healthcare for visitors to [Member State]	5.1 You are an EU citizen	Mandated	1	Web developer
	5.1.1	Receive emergency care		1	Web developer
	5.1.1.1	Your rights: Directive 2011/24/EU		1	Web developer
	5.1.1.2	Your rights: European Health Insurance Card (EHIC) and European / national legislation		1	Web developer
	5.1.1.3	Scope of coverage of EHIC		1	Web developer
	5.1.1.4	Procedure to obtain EHIC		1	Web developer
	5.1.1.5	Reimbursement of healthcare services		1	Web developer

	5.1.2	Receive planned care		1	Web developer
	5.1.2.1	Your rights: Directive 2011/24/EU		1	Web developer
	5.1.2.2	Your rights: European / national legislation		1	Web developer
	5.1.2.3	Procedure (forms and certificates to have / download)		1	Web developer
	5.1.2.4	Reimbursement of healthcare services		1	Web developer
	5.2	You are not an EU citizen	Recommended	1	Web developer
	5.2.1	Your rights		1	Web developer
	5.2.2	Bilateral agreements: countries, conditions		1	Web developer
	5.2.3	Procedures		1	Web developer
	5.2.4	Reimbursement of healthcare services		1	Web developer
6	6.1	News in Public Health / Major findings	Recommended	1	Web developer
	6.2	Access to publications	Mandated	1	Web developer
	6.2.1	Reports		1	Web developer
	6.2.2	Guides		1	Web developer
	6.2.3	Statistics		1	Web developer
	6.3	Registration to receive e-newsletters	Recommended	10	Web developer
	6.4	Press contact	Recommended	1	Web developer
7	7.1	Top 5 FAQ	Recommended	5	Web developer
	7.2	FAQ arranged per topic	Recommended	5	Web developer
8	8.1	Contact (contact form)	Mandated	10	Web developer
	8.1.1	Contact information: address, phone, fax, e-mail, text field for message		1	Web developer
	8.1.2	Question on healthcare in [NCP country]		1	Web developer
	8.1.3	Question on reimbursement policy and eligible care		1	Web developer
	8.1.4	Question on the European Health Insurance Card and healthcare abroad		1	Web developer
	8.1.5	Comments on services provided by healthcare professionals		1	Web developer
	8.1.6	Comments on reimbursement issues		1	Web developer
	8.1.7	Complaint form		1	Web developer
	8.1.8	Feedback on inaccuracy or technical issue of websites		1	Web developer
	8.1.9	Other question / request		1	Web developer
	8.1.10	Suggestions		1	Web developer
	8.1.10	Job / Voluntary job career website		1	Web developer
9	9.1	National Contact Point Helpline	Recommended	1	Web developer
	9.2	Services feedback	Recommended	1	Web developer

	9.3	Technical problems / dead link	Recommended	1	Web developer
10 Sitemap	10.1	Sitemap	Recommended	3	Web developer
11 External links	11.1	Links to other national websites	Recommended	1	Web developer
	11.1.1	National associations / federations /EU federations		1	Web developer
	11.1.2	National health policy		1	Web developer
	11.1.3	Links to best-in / specialist healthcare establishments		1	Web developer
	11.2	Links to European websites and other country websites	Recommended	1	Web developer
	11.2.1	EU associations / federations		1	Web developer
	11.2.2	EU health policies		1	Web developer
	11.2.3	EU Patient organisations		1	Web developer
	11.2.4	World-class healthcare establishments		1	Web developer
	11.3	Links to social media of NCP	Recommended	1	Web developer
	11.4	Share (Link to Twitter, Facebook, Digg, Reddit, etc.)	Recommended	10	Web developer
IT Administration					
		Installation/Configuration	Must-have	20	System Administrator
		Add-on configuration	Nice-to-have	2	System Administrator
		Web integration	Must-have	5	Web developer
		Mobile integration	Nice-to-have	10	Web developer

C.3.2.3. Implement (‘Must-have)

Activities	Necessity rating	Mandays	Profile
Functional Testing	Must-have	34	Web developer
Deployment in production	Must-have	10	System administrator
Project Management	Must-have	34	Project Manager
Deployment in Staging (5 deliveries)	Must-have	25	System administrator
Security Testing	Must-have	10	IT Security Specialist
Troubleshooting	Must-have	10	Web Developer

C.3.2.4. Implement (Nice-to-have)

Activities	Necessity rating	Man days	Profile
Functional Testing	Nice-to-have	82	Web developer
Deployment in production	Nice-to-have	10	System administrator
Project Management	Nice-to-have	82	Project Manager
Deployment in Staging (5 deliveries)	Nice-to-have	25	System administrator
Security Testing	Nice-to-have	10	IT Security Specialist
Troubleshooting	Nice-to-have	10	Web Developer

C.4. Website hosting

252 The hosting of the website consists in making the website accessible via the World Wide Web. In order to do so, secured servers are installed to host the website and spread the information over the Internet.

253 The NCP website hosting costs depend on the sourcing strategy but not on the breath of the features. An annual cost of €55k is foreseen in case of outsourcing, for both initial set-up and the annual operation and maintenance. Initial set-up hosting costs amount to €94k in the insourcing strategy, while operations and maintenance cost €72k annually. Regarding the co-sourcing strategy, both the initial set-up hosting costs and operations and maintenance cost amount to €52k.

254 The following table presents the costs for hosting the NCP website on a scalable platform ensuring a high availability even outside working hours.

	Initial set-up	Annual operations & maintenance
Outsourced	55k	55k
Insourced	94k	72k
Co-sourced	52k	52k

Table 17: NCP hosting total costs by sourcing strategy (in €)

Outsourcing strategy

255 External hosting of websites consists in buying server space and bandwidth capabilities from an external company. Hosting companies provide a variety of plans with different monthly fees. This enables businesses and institutions of all sizes to have a website without the need for their own equipment and resources.

256 The web hoster should offer at least the following services:

- Multiple POP3 and IMAP email accounts with web-mail support.
- Multiple sub domains and parked/add-on domains.
- FTP access with multiple FTP accounts.
- Website stats, virus & spam protection.
- Professional 24x7 technical support via email and/or by phone.
- At least 99.9% network uptime guarantee.

257 We estimate that 10 Virtual Private Servers (VPS) are necessary to run the NCP website and support the anticipated number of concurrent users (c.f.paragraph 81 and paragraph 82). Each of this VPS has a yearly rent price of €1.56k³³. The table below represents the costs to rent 10 Virtual Private Servers and the license fees to have support on CMS and databases hosted in the Production environment.

Item	Description	Quantity	Price (€)	Operating expense (per year)
Server ³⁴	A virtual server is rent in a datacentre (8Go and 4 cores per VPS)	10	1.56k	15.6k
Database support ³⁵	Support for a OpenSource Database	2	4.2k	8.4k
CMS Support ³⁶	Support for a OpenSource CMS	4	4k	16k
Human resources	Internal system administrator	20 man- days	0.35 ³⁷ k	7k
Total (excl. VAT)				47k
Total (incl. VAT)				55k

Table 18: NCP website hosting hardware and support costs (outsourcing strategy)

258 Additionally, an external system administrator requiring 20 mandays (€7k) per year is needed to run the website on a scalable platform ensuring a high availability even outside the working hours for both the set-up phase and the operation phase.

Insourcing strategy

259 Internal hosting consists in hosting all required infrastructure (network, servers, database) for an NCP website in-house. The support is also directly provided by the organisation itself. In this case, the NCP would buy the servers and maintain the website internally. The table below represents the costs for the hardware and the license fees to have support on the Operating Systems, CMS and databases hosted in the Production environment.

³³ Serveur XL 8, The price is available on 1and1.fr's official website on the 5th July 2012 (http://commander.1and1.fr/ServerPremiumXL?__lf=Static&linkOrigin=ServerPremium&linkId=ct.btn.continue.package.xl)

³⁵ MySQL Enterprise Edition. The price is available on the MySQL's official website on 5th July 2012 (<http://www.mysql.com/products/>)

³⁶ Jahia Standard Edition. The price is available on the Jahia's official website on 5th July 2012 (<http://www.jahia.com/cms/home/product/buy-it.html#annual-subscription-std>)

³⁷ Estimation of daily consultant rate for each profile by country is depicted in Appendix C.10

Item	Description	Quantity	Price (€)	Initial set-up costs (year 1)	Annual recurrent costs (years 2-5)
Server ³⁸	A high-range server	4	6k	4.8k	4.8k
Server support		4	0.4k	1.6k	1.6k
Hypervisor ³⁹	Middle-ware software needed to implement a virtual server platform	4	4.5k	18k	
Hypervisor support		4	1.4k	5.6k	5.6k
Operating System support ⁴⁰	Support for An OpenSource Operating System such as Linux.	6	3.4k	20.4k	20.4k
Database support ⁴¹	Support for a OpenSource Database	2	4.3k	8.6k	8.6k
CMS Support ⁴²	Support for a OpenSource CMS	4	4.1k	16.4k	16.4k
Human resources	Internal system administrator	20 mandays	0.155k ⁴³	3.1k	3.1k
Total (excl. VAT)				78.5k	60.5k
Total (incl. VAT)				94.3k	72.5k

Table 19: NCP website hosting hardware and support costs (insourcing)

Co sourcing strategy

²⁶⁰ In the co-sourcing scenario, hosting activities are outsourced, the chosen configuration is identical to the Insourcing strategy. However IT administration tasks are performed by internal staff. We estimate that 20 man days are required to administrate an NCP website.

³⁹ VMWare VCenter Server Standard. The price is available on the VMWARE's official website on the 5th July 2012 (<http://www.vmware.com/fr/products/datacenter-virtualization/vsphere/pricing.html>)

⁴⁰ RedHat Enterprise Server 4-sockets with unlimited number of guests. The price is available on the RedHat's official website on 5th July 2012 (<https://www.redhat.com/apps/store/server/>)

⁴¹ MySQL Enterprise Edition. The price is available on the MySQL's official website on 5th July 2012 (<http://www.mysql.com/products/>)

⁴² Jahia Standard Edition. The price is available on the Jahia's official website on 5th July 2012 (<http://www.jahia.com/cms/home/product/buy-it.html#annual-subscription-std>)

⁴³ Estimation of annual salaries rate for each profile by country is depicted in Appendix C.11

Item	Description	Quantity	Price (€)	Operating expense (per year)
Server ⁴⁴	A virtual server is rent in a datacentre (8Go and 4 cores per VPS)	10	1.56k	15.6k
Database support ⁴⁵	Support for a OpenSource Database	2	4.2k	8.4k
CMS Support ⁴⁶	Support for a OpenSource CMS	4	4k	16k
Human resources	Internal system administrator	20 man-days	0.155k ⁴⁷	3.1k
Total (excl. VAT)				43.1k
Total (incl. VAT)				51k

Table 19: NCP website hosting hardware and support costs (co-sourcing strategy)

C.4.1. Assumptions

²⁶¹ The assumptions used for the website hosting strategy are:

- For the insourcing strategies:
 - There is no cost estimation for security devices such as firewalls, network components (such as routers, load balancers, etc.) and storage which are already up and running.
 - The operating systems, databases, CMS are OpenSource software.
 - The hardware price is similar in the 27 EU countries.
 - Disaster Recovery Platform is not included.
 - There are four IT environments: sandbox, development, staging and production.
 - There are four high-range servers.
 - A hypervisor such as ESX VMware is used for the virtualisation.
 - There are four virtual web servers for the staging and the production environments.
 - There are two virtual web servers for the development environment.
 - There is one virtual database for the sandbox environment.
 - There are two virtual database servers for the staging and production environments.
 - There is one virtual database server for the development environment.
 - There are several system administrators on the project and they can be contacted outside the working hours.
 - There is a database and content management system support for the production environment only.
 - The servers are amortised on a linear basis over 5 years.
- For the outsourcing and co-sourcing strategy:
 - The operating systems, databases and the Content Management System are OpenSource software.
 - There are four IT environments: sandbox, development, staging and production.
 - 10 virtual private servers are rent.
 - The hypervisor and the Operating system support are included in the rental cost.
 - There is no cost estimation for security devices (such as firewalls), network components (such as routers, caching, load balancers, etc.), and storage which are already up and running.

⁴⁵ MySQL Enterprise Edition. The price is available on the MySQL's official website on 5th July 2012 (<http://www.mysql.com/products/>)

⁴⁶ Jahia Standard Edition. The price is available on the Jahia's official website on 5th July 2012 (<http://www.jahia.com/cms/home/product/buy-it.html#annual-subscription-std>)

⁴⁷ Estimation of annual salaries rate for each profile by country is depicted in Appendix C.11

C.5. Content development

- 262 Content development includes the writing of the web pages, the updates of the web pages, and the translation of the webpage where and when necessary. The frequency of the updates and the web pages to be translated in other EU languages are presented in Section C.6.
- 263 The resources needed for the first year to write the first content and to translate it range between 139 mandays (€18k) and 633 mandays (€96k). Each year, update of the content and its translation range between 33 mandays (€4k) and 207 mandays (€32k).
- 264 The initial writing of the content is the most demanding task that requires twice more time than the updates. Moreover, we can notice that respectively adding 'Recommended' functionalities has little impact on the mandays and on the costs. The table below summarises our findings.

	Mandated				Recommended			
	Minimum content		Maximum content		Minimum content		Maximum content	
	Mandays	Cost (in €, EU average)	Mandays	Cost (in €, EU average)	Mandays	Cost (in €, EU average)	Mandays	Cost (in €, EU average)
Initial writing	139	18k	280	37k	225	30k	485	65k
Translation of initial writing	-	-	-	-	66	14k	148	31k
Total set-up phase	139	18k	280	37k	291	44k	633	96k
Updates	33	4k	68	9k	63	8k	138	18k
Translation of updates	-	-	-	-	32	7k	69	14k
Total operation phase	33	4k	68	9k	95	15k	207	32k

Table 20: Resources needed for the content development

- 265 Three aspects have an impact on the workload and the content development costs:
- Most of the content is elaborated in the set-up phase. In the operation phase, the content is updated when necessary, generating operating costs.
 - The Member States have the responsibility to write the content of the website. For each page, we estimated a minimum and a maximum number of mandays that are required for the Member States to write (or to update) the content according to their needs.
 - Additional content could be written for the "Recommended" functionalities, if the Member States decides to implement these.
- 266 As we estimate that one sixth of the time⁴⁸ needed for content writing is required to translate the content, the three aspects mentioned above have a direct impact on the time for translation and the associated costs. As a consequence, the number of mandays that are necessary to translate into one more language ranges between 22 and 49, depending on the amount of the information (minimum versus maximum content).
- 267 However, additional translation costs should be foreseen for the countries that have multiple official languages like Belgium or Luxembourg or for countries with official regional languages like Spain.

⁴⁸ This assumption is based on the feedback we received from translation companies we contacted

C.5.1. Assumptions

268 The assumptions that have been taken into consideration for the content development are:

- The time required to translate the content (for the first writing and for the updates) takes one sixth of the time required to write it.
- Every Member State undertakes its own research and publishes the related content individually.
- Validation of content is included in the estimations.
- The website is not available in a foreign language for the 'Mandated' scenario.
- The website is available in 3 foreign languages for the 'Extended' scenario.
- There is no regional official language (all the pages are not translated into other languages).
- The content writing of the website is insourced.
- Translation of the content is outsourced.

C.6. Categorisation of the website items

C.6.1. Design phase

Activities	Description	Necessity rating
Analysis		Must-have
Web design	Website	Must-have
	Mobile	Nice-to-have
Platform design	Main design	Must-have
	Multi-linguism	Must-have

C.6.2. Construct phase and content writing

No	Section	Subsection	Necessity rating	Frequency of updates	Time needed to write content (min days)	Time needed to write content (max days)	Translation into other languages	
Content pages								
1	Home	Home	-					
2	About	2.1	Recommended	In case of content change	1	2	X	
		2.2	History	Recommended	In case of content change	1	2	X
		2.3	Mission and organisation	Recommended	In case of content change	1	2	X
		2.4	Legal framework	Recommended	In case of content change	1	3	X
		2.5	Figures	Recommended	Every 6 months	2	4	
		2.5.1	Site statistics		Every month	1	2	
		2.6	Activity report	Recommended	Every year	1	1	X
		2.7	Contact us	Recommended	In case of content change	1	1	X
		2.8	Media library	Recommended	In case of content change	1	2	
		2.8.1	Video		In case of content change	10	30	
		2.8.2	Links to videos		In case of content change	10	30	
		2.9	Terms and conditions	Recommended	In case of content change	3	6	X
		2.9.1	Terms of use		In case of content change	3	6	X
		2.9.2	Comments policy		In case of content change	2	3	X
	2.9.3	Privacy policy		In case of content change	2	3	X	
3	Healthcare in [Member State]	3.1	Recommended	In case of content change	1	2	X	
		3.1.1	Healthcare and healthcare-related providers		In case of content change	14	30	X
		3.1.2	Directory of healthcare		Automatically	1	3	X

3.1.3	services Statistics on healthcare services		Automatically	5	8	X
3.1.4	Healthcare funding		In case of content change	1	2	X
3.1.4.1	Public health insurance (including third party payment system)		In case of content change	3	5	X
3.1.4.2	Private health insurances		In case of content change	3	5	X
3.1.4	Public and private practise		In case of content change	3	5	X
3.2	Reimbursement	Mandated	In case of content change	1	2	X
3.2.1	Basket of benefits		Yearly	1	3	X
3.2.2	Entitlement for medical acts		Yearly	1	4	X
3.2.3	Reimbursement and administrative formalities		Yearly	1	2	X
3.2.3.1	What is reimbursed and how much		Yearly	2	5	X
3.2.3.2	What is not to be reimbursed		Yearly	2	5	X
3.2.3.3	How to be reimbursed		Yearly	2	6	X
3.2.3.4	Special schemes for reimbursement		Yearly	2	6	X
3.3	Quality and safety of healthcare	Mandated	In case of content change	1	2	X
3.3.1	National laws, regulations and policies regarding patient safety		Every 6 months	2	8	X
3.3.2	Reports on patients safety		Every 6 months	2	8	X
3.3.3	Medical certifications and qualifications		Every 6 months	2	5	X
3.3.4	Description of national quality plans		Every 6 months	2	8	X
3.3.5	Links to other institutions in relation with patient safety		Every 6 months	1	2	X
3.4	Right to practice and	Mandated	Every 6 months	2	5	X

		restrictions to provide healthcare services					
	3.5	Liability insurance of health professionals	Recommended	Every 6 months	2	5	X
	3.6	Patients rights	Mandated	In case of content change	1	2	X
	3.6.1	Patients' rights		In case of content change	1	5	X
	3.6.1.1	Access to healthcare		In case of content change	1	3	X
	3.6.1.2	Access to hospitals for disabled patients		In case of content change	1	3	X
	3.6.1.3	Complaint and redress procedures		In case of content change	3	8	X
	3.6.2	Access to your data		In case of content change	1	2	X
	3.6.2.1	Access to (electronic) medical records		In case of content change	1	3	X
	3.6.2.2	Patient consent for sharing and exchanging medical information		In case of content change	1	3	X
	3.6.3	Access to information regarding safety and quality of healthcare		In case of content change	1	3	X
	3.6.4	Complaint procedures		In case of content change	1	1	X
	3.6.4.1	Complaint procedures in case of harm to patients while providing healthcare		In case of content change	3	8	X
	3.6.4.2	Complaint procedures in case of reimbursement issue		In case of content change	3	8	X
	3.6.4.3	Redress procedures		In case of content change	3	8	X
	3.7	Links to patients organisations	Recommended	In case of content change	1	2	X
	3.8	Links to national and European law	Recommended	In case of content change	2	3	X
4	Going abroad	4.1	Emergency care in the European Union	Mandated	Every 6 months + in case of content change	1	2
		4.1.1	Your rights: Directive 2011/24/EU		Every 6 months + in case of content change	2	4
		4.1.2	Your rights: European		Every 6 months + in case of	2	4

		Health Insurance Card (EHIC) and European / national legislation		content change				
	4.1.3	Scope of coverage of EHIC		Every 6 months + in case of content change	1	2		
	4.1.4	Procedure to obtain EHIC		Every 6 months + in case of content change	2	3		
	4.1.5	Reimbursement of healthcare services		Every 6 months + in case of content change	2	4		
	4.2	Planned care in the European Union	Mandated	Every 6 months + in case of content	1	2		
	4.2.1	Your rights: Directive 2011/24/EU		Every 6 months + in case of content change	2	4		
	4.2.2	Your rights: European / national legislation		Every 6 months + in case of content change	2	4		
	4.2.3	Procedure (forms and certificates to have/download) and care subject to prior authorisation		Every 6 months + in case of content change	3	4		
	4.2.4	Reimbursement of healthcare services		Every 6 months + in case of content change	2	4		
	4.3	Receiving care outside the European Union	Recommended	Every 6 months + in case of content	1	2		
	4.3.1	Your rights		Every 6 months + in case of content change	2	5		
	4.3.2	Bilateral agreements: countries, conditions		Every 6 months + in case of content change	2	5		
	4.3.3	Procedures		Every 6 months + in case of content change	3	4		
	4.3.4	Reimbursement of healthcare services		Every 6 months + in case of content change	2	4		
	4.4	Links to NCP website on cross-border healthcare in other countries	Mandated	Every 6 months	1	1		
5	Healthc are for	5.1	You are an EU citizen	Mandated	In case of content change	1	2	X

visitors to [Member State]	5.1.1	Receive emergency care		Every 6 months + in case of content change	1	2	X
	5.1.1.1	Your rights: Directive 2011/24/EU		Every 6 months + in case of content change	2	4	X
	5.1.1.2	Your rights: European Health Insurance Card (EHIC) and European / national legislation		Every 6 months + in case of content change	2	4	X
	5.1.1.3	Scope of coverage of EHIC		Every 6 months + in case of content change	1	2	X
	5.1.1.4	Procedure to obtain EHIC		Every 6 months + in case of content change	1	3	X
	5.1.1.5	Reimbursement of healthcare services		Every 6 months + in case of content change	2	4	X
	5.1.2	Receive planned care		Every 6 months + in case of content change	1	2	X
	5.1.2.1	Your rights Directive 2011/24/EU		Every 6 months + in case of content change	2	4	X
	5.1.2.2	Your rights: European / national legislation		Every 6 months + in case of content change	2	4	X
	5.1.2.3	Procedure (forms and certificates to have / download)		Every 6 months + in case of content change	2	4	X
	5.1.2.4	Reimbursement of healthcare services		Every 6 months + in case of content change	2	4	X
	5.2	Your are not an EU citizen	Recommended	Every 6 months + in case of content change	1	2	X
	5.2.1	Your rights		Every 6 months + in case of content change	2	5	X
	5.2.2	Bilateral agreements: countries, conditions		Every 6 months + in case of content change	2	5	X
5.2.3	Procedures		Every 6 months + in case of content change	3	4	X	
5.2.4	Reimbursement of healthcare services		Every 6 months + in case of content change	2	4	X	
6 News	6.1	News in Public Health / Major findings	Recommended	Every month / every 2 months	6	20	
	6.2	Access to publications	Recommended	Every 6 months	1	1	

	6.2.1	Reports		Every 6 months	1	2	X
	6.2.2	Guides		Every 6 months	1	2	X
	6.2.3	Statistics		Every 6 months	2	3	X
	6.3	Registration to receive e-newsletters	Recommended	In case of content change	1	2	
	6.4	Press contact	Recommended	In case of content change	1	1	
7	FAQ	Top 5 FAQ	Recommended	Automatically	1	1	
	7.2	FAQ arranged per topic	Recommended	Automatically	1	1	
8	Contact	Contact (contact form)	Mandated	In case of content change	1	1	
	8.1.1	Contact information: address, phone, fax, e-mail, text field for message		In case of content change	1	1	
	8.1.2	Question on healthcare in [NCP country]		In case of content change	1	1	
	8.1.3	Question on reimbursement policy and eligible care		In case of content change	1	1	
	8.1.4	Question on the European Health Insurance Card and healthcare abroad		In case of content change	1	1	
	8.1.5	Comments on services provided by healthcare professional		In case of content change	1	1	
	8.1.6	Comments on reimbursement issues		In case of content change	1	1	
	8.1.7	Complaint form		In case of content change	1	1	
	8.1.8	Feedback on inaccuracy or technical issue of websites		In case of content change	1	1	
	8.1.9	Other question / request		In case of content change	1	1	
	8.1.10	Suggestions		In case of content change	1	1	
	8.1.10	Job / Voluntary job career website		In case of content change	1	3	
9	Helpline	National Contact	Recommended	In case of content change	1	1	

Point Helpline						
	9.2	Services feedback	Recommended	In case of content change	1	1
	9.3	Technical problems / dead link	Recommended	In case of content change	1	1
10	Sitemap	10.1 Sitemap	Recommended	In case of content change	1	2
11	External links	11.1 Links to other national websites	Recommended	In case of content change	1	1
	11.1.1	National associations / federations /EU federations		In case of content change	1	2
	11.1.2	National health policy		In case of content change	1	2
	11.1.3	Links to best-in / specialist healthcare establishments		In case of content change	1	2
	11.2	Links to European websites and other country websites	Recommended	In case of content change	1	1
	11.2.1	EU associations / federations		In case of content change	1	2
	11.2.2	EU health policies		In case of content change	1	2
	11.2.3	EU Patient organisations		In case of content change	1	2
	11.2.4	World-class healthcare establishments		In case of content change	1	2
	11.3	Links to social media of NCP	Recommended	In case of content change	1	1
	11.4	Share (Link to Twitter, Facebook, Digg, Reddit, etc.)	Recommended	In case of content change	1	1
Accessibility features						
	Language translation and usage		Must-have			
	Website localization		Nice-to-have			
	Adjustable font size		Must-have			
	Compatibility with screen readers (NVDA, JAWS, Browse aloud)		Nice-to-have			
	Responsive design		Must-have			
	Information on acceskey attribute /shortcuts		Recommended			
	Social media integration		Nice-to-have			
	Compliance with national government website		Must-have			

accessibility regulation. In most Member States specific regulations and guidelines are applied to all government online communication.

Compliance with W3C's Web Content Accessibility Guidelines - Level AA (Recommendation from the W3C, which explains to developers and authors how to make Web content accessible to people with disabilities). Must-have

The cost associated with the accessibility features has been factored into the workload estimation for the set up of the web site and the creation of the content.

C.7. Implement phase

Activities	Necessity rating
Functional Testing	Must-have
Deployment in production	Must-have
Project Management	Must-have
Deployment in Staging (5 deliveries)	Must-have
Security testing	Must-have
Troubleshooting	Must-have

C.8. 2011 labour cost per hour in euros (for enterprises with 10 or more employees)⁴⁹

	2008	2009	2010	2011
EU-27	21.6	22.1	22.5	23.1
EA-17	25.8	26.5	26.9	27.6
Belgium	35.6	37	38.2	39.3
Bulgaria	2.5	2.9	3.1	3.5
Czech Republic	9.3	9.3	9.9	10.5
Denmark	35.4	36.5	37.6	38.6
Germany	28.4	29	29.1	30.1
Estonia	8	7.9	7.7	8.1
Ireland	27.2	28	27.9	27.4
Greece	16.5	17.6	17.5	:
Spain	18.9	20.0*	20.2*	20.6
France	31.8	32.1	33.1	34.2
Italy	24.5	25.6	26.1	26.8
Cyprus	15.3	15.9	16.2	16.5
Latvia	5.9	5.9	5.7	5.9
Lithuania	6	5.6	5.3	5.5
Luxembourg	30.8	32	32.7	33.7
Hungary	7.9	7.3	7.3	7.6
Malta	11.2	11.3	11.5	11.9
Netherlands	29.2	29.8	30.5	31.1
Austria	26.5	27.7	28	29.2
Poland	7.5	6.4	7	7.1
Portugal	11.5	11.9	12	12.1
Romania	4.1	4.0*	4.2*	:
Slovenia	13.4	13.8	14.1	14.4
Slovakia	7.6	7.9	8	8.4
Finland	27.6	28.7	28.9	29.7
Sweden	33.8	31.7	36	39.1
United Kingdom	21.1	18.9	20	20.1
Norway	37.8	36.9	41.4	44.2

⁴⁹ Source: European Commission, Eurostat - http://epp.eurostat.ec.europa.eu/statistics_explained/index.php?title=File:Labour_cost_per_hour_in_euros_%28for_enterprises_with_10_or_more_employees%29,_2008-2011.png&filetimestamp=20120424085138

C.9. List of VAT rates applied in the Member States in 2012⁵⁰

Member States	Standard Rate	Member States	Standard Rate
Austria	20	Latvia	21
Belgium	21	Lithuania	21
Bulgaria	20	Luxembourg	15
Cyprus	17	Malta	18
Czech Republic	20	Netherlands	19
Denmark	25	Poland	23
Estonia	20	Portugal	23
Finland	23	Romania	24
France	19.6	Spain	18
Germany	19	Slovakia	20
Greece	23	Slovenia	20
Hungary	27	Sweden	25
Italy	21	United Kingdom	20
Ireland	23		

⁵⁰ Source: http://ec.europa.eu/taxation_customs/resources/documents/taxation/vat/how_vat_works/rates/vat_rates_en.pdf

C.10. Estimation of daily consultant rate for each profile by Member State (including VAT)

Country	Austria	Belgium	Bulgaria	Cyprus	Czech Republic	Denmark	Estonia	Finland	France	Germany	Greece	Hungary	Italy	Ireland
Web Developer	409,82	556,18	49,12	225,79	147,37	564,33	113,68	427,26	478,40	418,94	251,75	112,89	379,27	394,18
Project Manager	614,74	834,26	73,68	338,68	221,05	846,49	170,53	640,89	717,60	628,40	377,63	169,33	568,91	591,26
IT Architect	717,19	973,31	85,96	395,13	257,89	987,57	198,95	747,71	837,20	733,14	440,57	197,56	663,73	689,81
IT Security Specialist	819,65	1.112,35	98,25	451,58	294,74	1.128,65	227,37	854,53	956,80	837,87	503,51	225,78	758,55	788,35
System Administrator	512,28	695,22	61,40	282,24	184,21	705,41	142,11	534,08	598,00	523,67	314,69	141,11	474,09	492,72
Graphist	358,60	486,65	42,98	197,57	128,95	493,79	99,47	373,86	418,60	366,57	220,29	98,78	331,87	344,90
Translator	307,37	417,13	36,84	169,34	110,53	423,25	85,26	320,45	358,80	314,20	188,82	84,67	284,46	295,63

Country	Latvia	Lithuania	Luxembourg	Malta	Netherlands	Poland	Portugal	Romania	Spain	Slovakia	Slovenia	Sweden	United Kingdom	Total average
Web Developer	83,50	77,84	453,27	164,23	432,85	102,14	174,07	60,91	284,30	117,89	202,11	571,64	282,11	279
Project Manager	125,25	116,75	679,91	246,35	649,28	153,21	261,11	91,37	426,46	176,84	303,16	857,46	423,16	419
IT Architect	146,12	136,21	793,23	287,41	757,49	178,75	304,62	106,60	497,53	206,32	353,68	1.000,37	493,68	488
IT Security Specialist	166,99	155,67	906,55	328,47	865,71	204,28	348,14	121,82	568,61	235,79	404,21	1.143,27	564,21	558
System Administrator	104,37	97,30	566,59	205,29	541,07	127,68	217,59	76,14	355,38	147,37	252,63	714,55	352,63	349
Graphist	73,06	68,11	396,62	143,70	378,75	89,37	152,31	53,30	248,77	103,16	176,84	500,18	246,84	244
Translator	62,62	58,38	339,96	123,18	324,64	76,61	130,55	45,68	213,23	88,42	151,58	428,73	211,58	209

C.11. Estimation of annual salaries for each profile by Member State⁵¹

Country	Austria	Belgium	Bulgaria	Cyprus	Czech Republic	Denmark	Estonia	Finland	France	Germany	Greece	Hungary	Italy	Ireland
Web Developer	50.891	74.702	5.318	26.384	18.400	56.562	12.952	48.461	65.201	49.114	29.417	13.120	46.267	47.303
Project Manager	65.431	96.045	6.837	33.923	23.657	72.723	16.653	62.307	83.830	63.146	37.822	16.869	59.486	60.818
IT Architect	65.431	96.045	6.837	33.923	23.657	72.723	16.653	62.307	83.830	63.146	37.822	16.869	59.486	60.818
IT Security Specialist	58.161	85.373	6.077	30.154	21.029	64.642	14.803	55.384	74.516	56.130	33.620	14.995	52.876	54.060
System Administrator	50.891	74.702	5.318	26.384	18.400	56.562	12.952	48.461	65.201	49.114	29.417	13.120	46.267	47.303
Graphist	42.167	61.896	4.406	21.861	15.246	46.866	10.732	40.153	54.024	40.694	24.374	10.871	38.335	39.194
Web contributor	43.621	64.030	4.558	22.615	15.771	48.482	11.102	41.538	55.887	42.097	25.215	11.246	39.657	40.545

Country	Latvia	Lithuania	Luxembourg	Malta	Netherlands	Poland	Portugal	Romania	Spain	Slovakia	Slovenia	Sweden	United Kingdom	Total average
WebDeveloper	9.590	9.910	50.187	16.529	51.401	11.689	19.397	7.005	36.099	14.424	21.495	74.878	38.492	33.525
ProjectManager	12.330	12.741	64.526	21.251	66.087	15.029	24.939	9.006	46.413	18.545	27.636	96.271	49.490	43.104
ITArchitect	12.330	12.741	64.526	21.251	66.087	15.029	24.939	9.006	46.413	18.545	27.636	96.271	49.490	43.104
ITSecuritySpecialist	10.960	11.325	57.356	18.890	58.744	13.359	22.168	8.006	41.256	16.484	24.565	85.574	43.991	38.315
SystemAdministrator	9.590	9.910	50.187	16.529	51.401	11.689	19.397	7.005	36.099	14.424	21.495	74.878	38.492	33.525
Graphist	7.946	8.211	41.583	13.695	42.589	9.685	16.072	5.804	29.911	11.951	17.810	62.041	31.893	27.778
Webcontributor	8.220	8.494	43.017	14.167	44.058	10.019	16.626	6.004	30.942	12.363	18.424	64.181	32.993	28.736

⁵¹ Including annual wages, overhead's cost and employer's contributions (gross revenues)

C.12. Detailed costs for the 'Basic' Scenario by Member State

	Austria	Belgium	Bulgaria	Cyprus	Czech Republic	Denmark
Basic scenario						
In-sourced						
Initial set-up costs (min content)	284.128,99	361.993,01	112.587,03	192.573,50	160.255,58	341.829,61
Human capital costs	193.648,99	270.759,01	22.107,03	104.355,50	69.775,58	247.579,61
Other	90.480,00	91.234,00	90.480,00	88.218,00	90.480,00	94.250,00
Recurrent cost (min content)	120.393	141.696	74.731	94.855	87.445	137.091
Human capital costs	51.513	72.242	5.851	27.697	18.565	65.341
Other	68.880	69.454	68.880	67.158	68.880	71.750
Initial set-up costs (max content)	321.146	416.329	116.455	211.765	173.639	382.972
Human capital costs	230.666	325.095	25.975	123.547	83.159	288.722
Other	90.480	91.234	90.480	88.218	90.480	94.250
Recurrent cost (max content)	129.504	155.069	75.683	99.578	90.739	147.217
Human capital costs	60.624	85.615	6.803	32.420	21.859	75.467
Other	68.880	69.454	68.880	67.158	68.880	71.750
<i>Total costs over 5 years (min content)</i>	<i>765.702</i>	<i>928.775</i>	<i>411.510</i>	<i>571.992</i>	<i>510.036</i>	<i>890.195</i>
<i>Total costs over 5 years (max content)</i>	<i>839.160</i>	<i>1.036.604</i>	<i>419.186</i>	<i>610.076</i>	<i>536.596</i>	<i>971.840</i>
Outsourced						
Initial set-up costs (min content)	262.400	345.362	72.866	163.162	125.202	330.846
Human capital costs	214.400	296.962	24.866	116.362	77.202	280.846
Other	48.000	48.400	48.000	46.800	48.000	50.000
Recurrent cost (min content)	108.851	132.433	55.092	79.899	69.907	130.311
Human capital costs	60.851	84.033	7.092	33.099	21.907	80.311
Other	48.000	48.400	48.000	46.800	48.000	50.000
Initial set-up costs (max content)	299.417	399.699	76.734	182.353	138.586	371.988
Human capital costs	251.417	351.299	28.734	135.553	90.586	321.988
Other	48.000	48.400	48.000	46.800	48.000	50.000
Recurrent cost (max content)	117.961	145.806	56.044	84.623	73.201	140.437
Human capital costs	69.961	97.406	8.044	37.823	25.201	90.437
Other	48.000	48.400	48.000	46.800	48.000	50.000
<i>Total costs over 5 years (min content)</i>	<i>697.803</i>	<i>875.095</i>	<i>293.235</i>	<i>482.760</i>	<i>404.831</i>	<i>852.090</i>
<i>Total costs over 5 years (max content)</i>	<i>771.262</i>	<i>982.923</i>	<i>300.911</i>	<i>520.845</i>	<i>431.391</i>	<i>933.735</i>
Co-sourced						
Initial set-up costs (min content)	241.649	319.159	70.107	151.156	117.776	297.580
Human capital costs	193.649	270.759	22.107	104.356	69.776	247.580
Other	48.000	48.400	48.000	46.800	48.000	50.000
Recurrent cost (min content)	99.513	120.642	53.851	74.497	66.565	115.341
Human capital costs	51.513	72.242	5.851	27.697	18.565	65.341
Other	48.000	48.400	48.000	46.800	48.000	50.000
Initial set-up costs (max content)	278.666	373.495	73.975	170.347	131.159	338.722
Human capital costs	230.666	325.095	25.975	123.547	83.159	288.722
Other	48.000	48.400	48.000	46.800	48.000	50.000
Recurrent cost (max content)	108.624	134.015	54.803	79.220	69.859	125.467
Human capital costs	60.624	85.615	6.803	32.420	21.859	75.467
Other	48.000	48.400	48.000	46.800	48.000	50.000
<i>Total costs over 5 years (min content)</i>	<i>639.702</i>	<i>801.725</i>	<i>285.510</i>	<i>449.142</i>	<i>384.036</i>	<i>758.945</i>
<i>Total costs over 5 years (max content)</i>	<i>713.160</i>	<i>909.554</i>	<i>293.186</i>	<i>487.226</i>	<i>410.596</i>	<i>840.590</i>

	Estonia	Finland	France	Germany	Greece	Hungary
Basic scenario						
In-sourced						
Initial set-up costs (min content)	142.553,88	288.145,21	324.409,63	283.575,07	209.096,65	147.832,74
Human capital costs	52.073,88	195.403,21	234.231,23	193.849,07	116.354,65	52.074,74
Other	90.480,00	92.742,00	90.178,40	89.726,00	92.742,00	95.758,00
Recurrent cost (min content)	82.688	122.406	131.181	119.761	101.483	86.716
Human capital costs	13.808	51.804	62.531	51.455	30.881	13.818
Other	68.880	70.602	68.650	68.306	70.602	72.898
Initial set-up costs (max content)	151.975	323.395	371.836	319.299	230.494	157.376
Human capital costs	61.495	230.653	281.657	229.573	137.752	61.618
Other	90.480	92.742	90.178	89.726	92.742	95.758
Recurrent cost (max content)	85.006	131.081	142.853	128.553	106.749	89.065
Human capital costs	16.126	60.479	74.203	60.247	36.147	16.167
Other	68.880	70.602	68.650	68.306	70.602	72.898
<i>Total costs over 5 years (min content)</i>	<i>473.305</i>	<i>777.768</i>	<i>849.134</i>	<i>762.619</i>	<i>615.029</i>	<i>494.697</i>
<i>Total costs over 5 years (max content)</i>	<i>492.001</i>	<i>847.719</i>	<i>943.249</i>	<i>833.512</i>	<i>657.492</i>	<i>513.636</i>
Outsourced						
Initial set-up costs (min content)	106.234	267.832	304.282	263.671	178.942	108.902
Human capital costs	58.234	218.632	256.442	216.071	129.742	58.102
Other	48.000	49.200	47.840	47.600	49.200	50.800
Recurrent cost (min content)	64.580	111.457	120.365	109.055	86.106	67.331
Human capital costs	16.580	62.257	72.525	61.455	36.906	16.531
Other	48.000	49.200	47.840	47.600	49.200	50.800
Initial set-up costs (max content)	115.656	303.082	351.708	299.395	200.340	118.446
Human capital costs	67.656	253.882	303.868	251.795	151.140	67.646
Other	48.000	49.200	47.840	47.600	49.200	50.800
Recurrent cost (max content)	66.899	120.132	132.038	117.847	91.372	69.679
Human capital costs	18.899	70.932	84.198	70.247	42.172	18.879
Other	48.000	49.200	47.840	47.600	49.200	50.800
<i>Total costs over 5 years (min content)</i>	<i>364.554</i>	<i>713.660</i>	<i>785.744</i>	<i>699.890</i>	<i>523.364</i>	<i>378.225</i>
<i>Total costs over 5 years (max content)</i>	<i>383.250</i>	<i>783.611</i>	<i>879.859</i>	<i>770.784</i>	<i>565.827</i>	<i>397.164</i>
Co-sourced						
Initial set-up costs (min content)	100.074	244.603	282.071	241.449	165.555	102.875
Human capital costs	52.074	195.403	234.231	193.849	116.355	52.075
Other	48.000	49.200	47.840	47.600	49.200	50.800
Recurrent cost (min content)	61.808	101.004	110.371	99.055	80.081	64.618
Human capital costs	13.808	51.804	62.531	51.455	30.881	13.818
Other	48.000	49.200	47.840	47.600	49.200	50.800
Initial set-up costs (max content)	109.495	279.853	329.497	277.173	186.952	112.418
Human capital costs	61.495	230.653	281.657	229.573	137.752	61.618
Other	48.000	49.200	47.840	47.600	49.200	50.800
Recurrent cost (max content)	64.126	109.679	122.043	107.847	85.347	66.967
Human capital costs	16.126	60.479	74.203	60.247	36.147	16.167
Other	48.000	49.200	47.840	47.600	49.200	50.800
<i>Total costs over 5 years (min content)</i>	<i>347.305</i>	<i>648.618</i>	<i>723.554</i>	<i>637.669</i>	<i>485.879</i>	<i>361.347</i>
<i>Total costs over 5 years (max content)</i>	<i>366.001</i>	<i>718.569</i>	<i>817.669</i>	<i>708.562</i>	<i>528.342</i>	<i>380.286</i>

	Italy	Ireland	Latvia	Lithuania	Luxembourg	Malta
Basic scenario						
In-sourced						
Initial set-up costs (min content)	269.275,59	276.674,78	129.589,44	128.357,53	292.280,90	161.119,64
Human capital costs	178.041,59	183.932,78	38.355,44	37.123,53	205.570,90	72.147,64
Other	91.234,00	92.742,00	91.234,00	91.234,00	86.710,00	88.972,00
Recurrent cost (min content)	116.784	119.467	79.627	79.339	120.461	86.776
Human capital costs	47.330	48.865	10.173	9.885	54.451	19.044
Other	69.454	70.602	69.454	69.454	66.010	67.732
Initial set-up costs (max content)	302.929	311.082	136.565	135.566	328.786	173.142
Human capital costs	211.695	218.340	45.331	44.332	242.076	84.170
Other	91.234	92.742	91.234	91.234	86.710	88.972
Recurrent cost (max content)	125.066	127.936	81.344	81.113	129.445	89.735
Human capital costs	55.612	57.334	11.890	11.659	63.435	22.003
Other	69.454	70.602	69.454	69.454	66.010	67.732
<i>Total costs over 5 years (min content)</i>	<i>736.410</i>	<i>754.545</i>	<i>448.098</i>	<i>445.712</i>	<i>774.124</i>	<i>508.224</i>
<i>Total costs over 5 years (max content)</i>	<i>803.194</i>	<i>822.824</i>	<i>461.941</i>	<i>460.016</i>	<i>846.566</i>	<i>532.082</i>
Outsourced						
Initial set-up costs (min content)	245.934	253.662	91.253	89.380	276.639	129.005
Human capital costs	197.534	204.462	42.853	40.980	230.639	81.805
Other	48.400	49.200	48.400	48.400	46.000	47.200
Recurrent cost (min content)	104.501	107.304	60.597	60.020	111.732	70.590
Human capital costs	56.101	58.104	12.197	11.620	65.732	23.390
Other	48.400	49.200	48.400	48.400	46.000	47.200
Initial set-up costs (max content)	279.587	288.069	98.229	96.588	313.144	141.028
Human capital costs	231.187	238.869	49.829	48.188	267.144	93.828
Other	48.400	49.200	48.400	48.400	46.000	47.200
Recurrent cost (max content)	112.784	115.772	62.314	61.794	120.716	73.549
Human capital costs	64.384	66.572	13.914	13.394	74.716	26.349
Other	48.400	49.200	48.400	48.400	46.000	47.200
<i>Total costs over 5 years (min content)</i>	<i>663.938</i>	<i>682.877</i>	<i>333.642</i>	<i>329.460</i>	<i>723.566</i>	<i>411.366</i>
<i>Total costs over 5 years (max content)</i>	<i>730.722</i>	<i>751.156</i>	<i>347.486</i>	<i>343.764</i>	<i>796.008</i>	<i>435.224</i>
Co-sourced						
Initial set-up costs (min content)	226.442	233.133	86.755	85.524	251.571	119.348
Human capital costs	178.042	183.933	38.355	37.124	205.571	72.148
Other	48.400	49.200	48.400	48.400	46.000	47.200
Recurrent cost (min content)	95.730	98.065	58.573	58.285	100.451	66.244
Human capital costs	47.330	48.865	10.173	9.885	54.451	19.044
Other	48.400	49.200	48.400	48.400	46.000	47.200
Initial set-up costs (max content)	260.095	267.540	93.731	92.732	288.076	131.370
Human capital costs	211.695	218.340	45.331	44.332	242.076	84.170
Other	48.400	49.200	48.400	48.400	46.000	47.200
Recurrent cost (max content)	104.012	106.534	60.290	60.059	109.435	69.203
Human capital costs	55.612	57.334	11.890	11.659	63.435	22.003
Other	48.400	49.200	48.400	48.400	46.000	47.200
<i>Total costs over 5 years (min content)</i>	<i>609.360</i>	<i>625.395</i>	<i>321.048</i>	<i>318.662</i>	<i>653.374</i>	<i>384.324</i>
<i>Total costs over 5 years (max content)</i>	<i>676.144</i>	<i>693.674</i>	<i>334.891</i>	<i>332.966</i>	<i>725.816</i>	<i>408.182</i>

	Netherlands	Poland	Portugal	Romania	Spain	Slovakia
Basic scenario						
Inourced						
Initial set-up costs (min content)	290.940,60	139.601,86	171.861,83	121.489,18	224.432,69	145.882,15
Human capital costs	201.214,60	46.859,86	79.119,83	27.993,18	135.460,69	55.402,15
Other	89.726,00	92.742,00	92.742,00	93.496,00	88.972,00	90.480,00
Recurrent cost (min content)	121.742	83.029	91.564	78.601	103.797	83.609
Human capital costs	53.436	12.427	20.962	7.425	36.065	14.729
Other	68.306	70.602	70.602	71.176	67.732	68.880
Initial set-up costs (max content)	328.329	148.104	185.971	126.584	250.690	156.374
Human capital costs	238.603	55.362	93.229	33.088	161.718	65.894
Other	89.726	92.742	92.742	93.496	88.972	90.480
Recurrent cost (max content)	130.943	85.122	95.036	79.855	110.259	86.192
Human capital costs	62.637	14.520	24.434	8.679	42.527	17.312
Other	68.306	70.602	70.602	71.176	67.732	68.880
<i>Total costs over 5 years (min content)</i>	<i>777.907</i>	<i>471.719</i>	<i>538.117</i>	<i>435.894</i>	<i>639.620</i>	<i>480.320</i>
<i>Total costs over 5 years (max content)</i>	<i>852.103</i>	<i>488.592</i>	<i>566.116</i>	<i>446.005</i>	<i>691.727</i>	<i>501.140</i>
Outsourced						
Initial set-up costs (min content)	271.547	101.577	137.904	80.871	196.780	109.447
Human capital costs	223.947	52.377	88.704	31.271	149.580	61.447
Other	47.600	49.200	49.200	49.600	47.200	48.000
Recurrent cost (min content)	111.265	64.110	74.475	58.500	89.618	65.449
Human capital costs	63.665	14.910	25.275	8.900	42.418	17.449
Other	47.600	49.200	49.200	49.600	47.200	48.000
Initial set-up costs (max content)	308.935	110.079	152.013	85.967	223.038	119.938
Human capital costs	261.335	60.879	102.813	36.367	175.838	71.938
Other	47.600	49.200	49.200	49.600	47.200	48.000
Recurrent cost (max content)	120.467	66.202	77.947	59.754	96.081	68.032
Human capital costs	72.867	17.002	28.747	10.154	48.881	20.032
Other	47.600	49.200	49.200	49.600	47.200	48.000
<i>Total costs over 5 years (min content)</i>	<i>716.608</i>	<i>358.016</i>	<i>435.803</i>	<i>314.873</i>	<i>555.253</i>	<i>371.244</i>
<i>Total costs over 5 years (max content)</i>	<i>790.803</i>	<i>374.889</i>	<i>463.801</i>	<i>324.984</i>	<i>607.361</i>	<i>392.064</i>
Co-sourced						
Initial set-up costs (min content)	248.815	96.060	128.320	77.593	182.661	103.402
Human capital costs	201.215	46.860	79.120	27.993	135.461	55.402
Other	47.600	49.200	49.200	49.600	47.200	48.000
Recurrent cost (min content)	101.036	61.627	70.162	57.025	83.265	62.729
Human capital costs	53.436	12.427	20.962	7.425	36.065	14.729
Other	47.600	49.200	49.200	49.600	47.200	48.000
Initial set-up costs (max content)	286.203	104.562	142.429	82.688	208.918	113.894
Human capital costs	238.603	55.362	93.229	33.088	161.718	65.894
Other	47.600	49.200	49.200	49.600	47.200	48.000
Recurrent cost (max content)	110.237	63.720	73.634	58.279	89.727	65.312
Human capital costs	62.637	14.520	24.434	8.679	42.527	17.312
Other	47.600	49.200	49.200	49.600	47.200	48.000
<i>Total costs over 5 years (min content)</i>	<i>652.957</i>	<i>342.569</i>	<i>408.967</i>	<i>305.694</i>	<i>515.720</i>	<i>354.320</i>
<i>Total costs over 5 years (max content)</i>	<i>727.153</i>	<i>359.442</i>	<i>436.966</i>	<i>315.805</i>	<i>567.827</i>	<i>375.140</i>

	Slovenia	Sweden	United Kingdom
Basic scenario			
In-sourced			
Initial set-up costs (min content)	180.894,18	369.853,69	228.664,63
Human capital costs	90.414,18	275.603,69	138.184,63
Other	90.480,00	94.250,00	90.480,00
Recurrent cost (min content)	92.793	145.213	105.772
Human capital costs	23.913	73.463	36.892
Other	68.880	71.750	68.880
Initial set-up costs (max content)	196.529	424.318	256.663
Human capital costs	106.049	330.068	166.183
Other	90.480	94.250	90.480
Recurrent cost (max content)	96.641	158.618	112.662
Human capital costs	27.761	86.868	43.782
Other	68.880	71.750	68.880
<i>Total costs over 5 years (min content)</i>	<i>552.067</i>	<i>950.707</i>	<i>651.751</i>
<i>Total costs over 5 years (max content)</i>	<i>583.094</i>	<i>1.058.790</i>	<i>707.313</i>
Outsourced			
Initial set-up costs (min content)	149.898	353.196	199.267
Human capital costs	101.898	303.196	151.267
Other	48.000	50.000	48.000
Recurrent cost (min content)	77.081	135.880	90.779
Human capital costs	29.081	85.880	42.779
Other	48.000	50.000	48.000
Initial set-up costs (max content)	165.533	407.660	227.265
Human capital costs	117.533	357.660	179.265
Other	48.000	50.000	48.000
Recurrent cost (max content)	80.929	149.284	97.669
Human capital costs	32.929	99.284	49.669
Other	48.000	50.000	48.000
<i>Total costs over 5 years (min content)</i>	<i>458.222</i>	<i>896.714</i>	<i>562.381</i>
<i>Total costs over 5 years (max content)</i>	<i>489.249</i>	<i>1.004.797</i>	<i>617.943</i>
Co-sourced			
Initial set-up costs (min content)	138.414	325.604	186.185
Human capital costs	90.414	275.604	138.185
Other	48.000	50.000	48.000
Recurrent cost (min content)	71.913	123.463	84.892
Human capital costs	23.913	73.463	36.892
Other	48.000	50.000	48.000
Initial set-up costs (max content)	154.049	380.068	214.183
Human capital costs	106.049	330.068	166.183
Other	48.000	50.000	48.000
Recurrent cost (max content)	75.761	136.868	91.782
Human capital costs	27.761	86.868	43.782
Other	48.000	50.000	48.000
<i>Total costs over 5 years (min content)</i>	<i>426.067</i>	<i>819.457</i>	<i>525.751</i>
<i>Total costs over 5 years (max content)</i>	<i>457.094</i>	<i>927.540</i>	<i>581.313</i>

C.13. Detailed costs for the 'Extended' scenario by Member State⁵²

	Austria	Belgium	Bulgaria	Cyprus	Czech Republic	Denmark
Recommended scenario						
In-sourced						
Initial set-up costs (min content)	495.463	654.046	137.189	307.466	236.342	620.247
Human capital costs	404.983	562.812	46.709	219.248	145.862	525.997
Other	90.480	91.234	90.480	88.218	90.480	94.250
Recurrent cost (min content)	181.040	225.664	81.769	127.780	109.283	216.613
Human capital costs	112.160	156.210	12.889	60.622	40.403	144.863
Other	68.880	69.454	68.880	67.158	68.880	71.750
Initial set-up costs (max content)	593.709	795.485	147.840	359.216	271.815	736.094
Human capital costs	503.229	704.251	57.360	270.998	181.335	641.844
Other	90.480	91.234	90.480	88.218	90.480	94.250
Recurrent cost (max content)	214.306	273.227	85.421	145.398	121.288	256.627
Human capital costs	145.426	203.773	16.541	78.240	52.408	184.877
Other	68.880	69.454	68.880	67.158	68.880	71.750
<i>Total costs over 5 years (min content)</i>	<i>1.219.624</i>	<i>1.556.704</i>	<i>464.266</i>	<i>818.584</i>	<i>673.473</i>	<i>1.486.699</i>
<i>Total costs over 5 years (max content)</i>	<i>1.450.934</i>	<i>1.888.391</i>	<i>489.524</i>	<i>940.809</i>	<i>756.966</i>	<i>1.762.601</i>
Outsourced						
Initial set-up costs (min content)	474.287	638.114	97.542	278.375	201.487	610.150
Human capital costs	426.287	589.714	49.542	231.575	153.487	560.150
Other	48.000	48.400	48.000	46.800	48.000	50.000
Recurrent cost (min content)	169.637	216.577	62.149	112.904	91.794	210.054
Human capital costs	121.637	168.177	14.149	66.104	43.794	160.054
Other	48.000	48.400	48.000	46.800	48.000	50.000
Initial set-up costs (max content)	572.533	779.553	108.193	330.124	236.960	725.998
Human capital costs	524.533	731.153	60.193	283.324	188.960	675.998
Other	48.000	48.400	48.000	46.800	48.000	50.000
Recurrent cost (max content)	202.902	264.139	65.801	130.523	103.799	250.068
Human capital costs	154.902	215.739	17.801	83.723	55.799	200.068
Other	48.000	48.400	48.000	46.800	48.000	50.000
<i>Total costs over 5 years (min content)</i>	<i>1.152.833</i>	<i>1.504.421</i>	<i>346.138</i>	<i>729.993</i>	<i>568.665</i>	<i>1.450.368</i>
<i>Total costs over 5 years (max content)</i>	<i>1.384.143</i>	<i>1.836.108</i>	<i>371.397</i>	<i>852.217</i>	<i>652.157</i>	<i>1.726.270</i>
Co-sourced						
Initial set-up costs (min content)	452.983	611.212	94.709	266.048	193.862	575.997
Human capital costs	404.983	562.812	46.709	219.248	145.862	525.997
Other	48.000	48.400	48.000	46.800	48.000	50.000
Recurrent cost (min content)	160.160	204.610	60.889	107.422	88.403	194.863
Human capital costs	112.160	156.210	12.889	60.622	40.403	144.863
Other	48.000	48.400	48.000	46.800	48.000	50.000
Initial set-up costs (max content)	551.229	752.651	105.360	317.798	229.335	691.844
Human capital costs	503.229	704.251	57.360	270.998	181.335	641.844
Other	48.000	48.400	48.000	46.800	48.000	50.000
Recurrent cost (max content)	193.426	252.173	64.541	125.040	100.408	234.877
Human capital costs	145.426	203.773	16.541	78.240	52.408	184.877
Other	48.000	48.400	48.000	46.800	48.000	50.000
<i>Total costs over 5 years (min content)</i>	<i>1.093.624</i>	<i>1.429.654</i>	<i>338.266</i>	<i>695.734</i>	<i>547.473</i>	<i>1.355.449</i>
<i>Total costs over 5 years (max content)</i>	<i>1.324.934</i>	<i>1.761.341</i>	<i>363.524</i>	<i>817.959</i>	<i>630.966</i>	<i>1.631.351</i>

⁵² Translation in 3 other languages

	Estonia	Finland	France	Germany	Greece	Hungary
Recommended scenario						
Inourced						
Initial set-up costs (min content)	200.092	504.191	576.503	496.898	337.200	205.210
Human capital costs	109.612	411.449	486.325	407.172	244.458	109.452
Other	90.480	92.742	90.178	89.726	92.742	95.758
Recurrent cost (min content)	99.167	184.277	203.687	180.898	138.194	103.157
Human capital costs	30.287	113.675	135.037	112.592	67.592	30.259
Other	68.880	70.602	68.650	68.306	70.602	72.898
Initial set-up costs (max content)	225.671	600.009	699.524	593.145	394.900	230.981
Human capital costs	135.191	507.267	609.346	503.419	302.158	135.223
Other	90.480	92.742	90.178	89.726	92.742	95.758
Recurrent cost (max content)	107.896	216.988	245.004	213.656	157.839	111.935
Human capital costs	39.016	146.386	176.353	145.350	87.237	39.037
Other	68.880	70.602	68.650	68.306	70.602	72.898
<i>Total costs over 5 years (min content)</i>	<i>596.761</i>	<i>1.241.299</i>	<i>1.391.252</i>	<i>1.220.489</i>	<i>889.977</i>	<i>617.837</i>
<i>Total costs over 5 years (max content)</i>	<i>657.254</i>	<i>1.467.963</i>	<i>1.679.538</i>	<i>1.447.771</i>	<i>1.026.254</i>	<i>678.722</i>
Outsourced						
Initial set-up costs (min content)	163.937	484.498	556.968	477.586	307.403	166.440
Human capital costs	115.937	435.298	509.128	429.986	258.203	115.640
Other	48.000	49.200	47.840	47.600	49.200	50.800
Recurrent cost (min content)	81.101	173.483	193.020	170.340	122.906	83.811
Human capital costs	33.101	124.283	145.180	122.740	73.706	33.011
Other	48.000	49.200	47.840	47.600	49.200	50.800
Initial set-up costs (max content)	189.515	580.315	679.989	573.834	365.102	192.211
Human capital costs	141.515	531.115	632.149	526.234	315.902	141.411
Other	48.000	49.200	47.840	47.600	49.200	50.800
Recurrent cost (max content)	89.829	206.194	234.336	203.098	142.550	92.590
Human capital costs	41.829	156.994	186.496	155.498	93.350	41.790
Other	48.000	49.200	47.840	47.600	49.200	50.800
<i>Total costs over 5 years (min content)</i>	<i>488.340</i>	<i>1.178.430</i>	<i>1.329.046</i>	<i>1.158.945</i>	<i>799.026</i>	<i>501.686</i>
<i>Total costs over 5 years (max content)</i>	<i>548.832</i>	<i>1.405.093</i>	<i>1.617.333</i>	<i>1.386.227</i>	<i>935.303</i>	<i>562.571</i>
Co-sourced						
Initial set-up costs (min content)	157.612	460.649	534.165	454.772	293.658	160.252
Human capital costs	109.612	411.449	486.325	407.172	244.458	109.452
Other	48.000	49.200	47.840	47.600	49.200	50.800
Recurrent cost (min content)	78.287	162.875	182.877	160.192	116.792	81.059
Human capital costs	30.287	113.675	135.037	112.592	67.592	30.259
Other	48.000	49.200	47.840	47.600	49.200	50.800
Initial set-up costs (max content)	183.191	556.467	657.186	551.019	351.358	186.023
Human capital costs	135.191	507.267	609.346	503.419	302.158	135.223
Other	48.000	49.200	47.840	47.600	49.200	50.800
Recurrent cost (max content)	87.016	195.586	224.193	192.950	136.437	89.837
Human capital costs	39.016	146.386	176.353	145.350	87.237	39.037
Other	48.000	49.200	47.840	47.600	49.200	50.800
<i>Total costs over 5 years (min content)</i>	<i>470.761</i>	<i>1.112.149</i>	<i>1.265.672</i>	<i>1.095.539</i>	<i>760.827</i>	<i>484.487</i>
<i>Total costs over 5 years (max content)</i>	<i>531.254</i>	<i>1.338.813</i>	<i>1.553.958</i>	<i>1.322.821</i>	<i>897.104</i>	<i>545.372</i>

	Italy	Ireland	Latvia	Lithuania	Luxembourg	Malta
Recommended scenario						
In-sourced						
Initial set-up costs (min content)	464.082	478.406	171.921	168.723	520.339	242.209
Human capital costs	372.848	385.664	80.687	77.489	433.629	153.237
Other	91.234	92.742	91.234	91.234	86.710	88.972
Recurrent cost (min content)	172.665	177.313	91.754	90.929	185.737	109.939
Human capital costs	103.211	106.711	22.300	21.475	119.727	42.207
Other	69.454	70.602	69.454	69.454	66.010	67.732
Initial set-up costs (max content)	553.810	570.535	190.819	187.733	620.228	276.021
Human capital costs	462.576	477.793	99.585	96.499	533.518	187.049
Other	91.234	92.742	91.234	91.234	86.710	88.972
Recurrent cost (max content)	203.095	208.604	98.198	97.352	219.915	121.613
Human capital costs	133.641	138.002	28.744	27.898	153.905	53.881
Other	69.454	70.602	69.454	69.454	66.010	67.732
<i>Total costs over 5 years (min content)</i>	<i>1.154.741</i>	<i>1.187.660</i>	<i>538.936</i>	<i>532.440</i>	<i>1.263.288</i>	<i>681.965</i>
<i>Total costs over 5 years (max content)</i>	<i>1.366.190</i>	<i>1.404.950</i>	<i>583.609</i>	<i>577.141</i>	<i>1.499.890</i>	<i>762.473</i>
Outsourced						
Initial set-up costs (min content)	441.260	455.941	133.705	129.848	505.366	210.353
Human capital costs	392.860	406.741	85.305	81.448	459.366	163.153
Other	48.400	49.200	48.400	48.400	46.000	47.200
Recurrent cost (min content)	160.512	165.286	72.754	71.636	177.175	93.817
Human capital costs	112.112	116.086	24.354	23.236	131.175	46.617
Other	48.400	49.200	48.400	48.400	46.000	47.200
Initial set-up costs (max content)	530.988	548.070	152.603	148.858	605.256	244.165
Human capital costs	482.588	498.870	104.203	100.458	559.256	196.965
Other	48.400	49.200	48.400	48.400	46.000	47.200
Recurrent cost (max content)	190.942	196.577	79.198	78.059	211.353	105.491
Human capital costs	142.542	147.377	30.798	29.659	165.353	58.291
Other	48.400	49.200	48.400	48.400	46.000	47.200
<i>Total costs over 5 years (min content)</i>	<i>1.083.309</i>	<i>1.117.087</i>	<i>424.720</i>	<i>416.393</i>	<i>1.214.067</i>	<i>585.622</i>
<i>Total costs over 5 years (max content)</i>	<i>1.294.758</i>	<i>1.334.378</i>	<i>469.393</i>	<i>461.095</i>	<i>1.450.669</i>	<i>666.130</i>
Co-sourced						
Initial set-up costs (min content)	421.248	434.864	129.087	125.889	479.629	200.437
Human capital costs	372.848	385.664	80.687	77.489	433.629	153.237
Other	48.400	49.200	48.400	48.400	46.000	47.200
Recurrent cost (min content)	151.611	155.911	70.700	69.875	165.727	89.407
Human capital costs	103.211	106.711	22.300	21.475	119.727	42.207
Other	48.400	49.200	48.400	48.400	46.000	47.200
Initial set-up costs (max content)	510.976	526.993	147.985	144.899	579.518	234.249
Human capital costs	462.576	477.793	99.585	96.499	533.518	187.049
Other	48.400	49.200	48.400	48.400	46.000	47.200
Recurrent cost (max content)	182.041	187.202	77.144	76.298	199.905	101.081
Human capital costs	133.641	138.002	28.744	27.898	153.905	53.881
Other	48.400	49.200	48.400	48.400	46.000	47.200
<i>Total costs over 5 years (min content)</i>	<i>1.027.691</i>	<i>1.058.510</i>	<i>411.886</i>	<i>405.390</i>	<i>1.142.538</i>	<i>558.065</i>
<i>Total costs over 5 years (max content)</i>	<i>1.239.140</i>	<i>1.275.800</i>	<i>456.559</i>	<i>450.091</i>	<i>1.379.140</i>	<i>638.573</i>

	Netherlands	Poland	Portugal	Romania	Spain	Slovakia
Recommended scenario						
Inourced						
Initial set-up costs (min content)	511.961	191.346	259.558	152.379	371.780	206.475
Human capital costs	422.235	98.604	166.816	58.883	282.808	115.995
Other	89.726	92.742	92.742	93.496	88.972	90.480
Recurrent cost (min content)	185.103	97.851	116.668	87.450	146.104	100.992
Human capital costs	116.797	27.249	46.066	16.274	78.372	32.112
Other	68.306	70.602	70.602	71.176	67.732	68.880
Initial set-up costs (max content)	612.349	214.402	298.096	166.178	441.079	234.427
Human capital costs	522.623	121.660	205.354	72.682	352.107	143.947
Other	89.726	92.742	92.742	93.496	88.972	90.480
Recurrent cost (max content)	219.231	105.715	129.847	92.155	169.522	110.469
Human capital costs	150.925	35.113	59.245	20.979	101.790	41.589
Other	68.306	70.602	70.602	71.176	67.732	68.880
<i>Total costs over 5 years (min content)</i>	<i>1.252.374</i>	<i>582.750</i>	<i>726.232</i>	<i>502.180</i>	<i>956.195</i>	<i>610.444</i>
<i>Total costs over 5 years (max content)</i>	<i>1.489.274</i>	<i>637.264</i>	<i>817.484</i>	<i>534.797</i>	<i>1.119.167</i>	<i>676.303</i>
Outsourced						
Initial set-up costs (min content)	493.174	153.468	225.855	111.849	344.504	170.201
Human capital costs	445.574	104.268	176.655	62.249	297.304	122.201
Other	47.600	49.200	49.200	49.600	47.200	48.000
Recurrent cost (min content)	174.778	78.968	99.643	67.371	132.020	82.872
Human capital costs	127.178	29.768	50.443	17.771	84.820	34.872
Other	47.600	49.200	49.200	49.600	47.200	48.000
Initial set-up costs (max content)	593.562	176.524	264.394	125.647	413.803	198.153
Human capital costs	545.962	127.324	215.194	76.047	366.603	150.153
Other	47.600	49.200	49.200	49.600	47.200	48.000
Recurrent cost (max content)	208.906	86.833	112.822	72.076	155.438	92.349
Human capital costs	161.306	37.633	63.622	22.476	108.238	44.349
Other	47.600	49.200	49.200	49.600	47.200	48.000
<i>Total costs over 5 years (min content)</i>	<i>1.192.288</i>	<i>469.341</i>	<i>624.428</i>	<i>381.334</i>	<i>872.582</i>	<i>501.690</i>
<i>Total costs over 5 years (max content)</i>	<i>1.429.188</i>	<i>523.856</i>	<i>715.680</i>	<i>413.951</i>	<i>1.035.553</i>	<i>567.550</i>
Co-sourced						
Initial set-up costs (min content)	469.835	147.804	216.016	108.483	330.008	163.995
Human capital costs	422.235	98.604	166.816	58.883	282.808	115.995
Other	47.600	49.200	49.200	49.600	47.200	48.000
Recurrent cost (min content)	164.397	76.449	95.266	65.874	125.572	80.112
Human capital costs	116.797	27.249	46.066	16.274	78.372	32.112
Other	47.600	49.200	49.200	49.600	47.200	48.000
Initial set-up costs (max content)	570.223	170.860	254.554	122.282	399.307	191.947
Human capital costs	522.623	121.660	205.354	72.682	352.107	143.947
Other	47.600	49.200	49.200	49.600	47.200	48.000
Recurrent cost (max content)	198.525	84.313	108.445	70.579	148.990	89.589
Human capital costs	150.925	35.113	59.245	20.979	101.790	41.589
Other	47.600	49.200	49.200	49.600	47.200	48.000
<i>Total costs over 5 years (min content)</i>	<i>1.127.424</i>	<i>453.600</i>	<i>597.082</i>	<i>371.980</i>	<i>832.295</i>	<i>484.444</i>
<i>Total costs over 5 years (max content)</i>	<i>1.364.324</i>	<i>508.114</i>	<i>688.334</i>	<i>404.597</i>	<i>995.267</i>	<i>550.303</i>

	Slovenia	Sweden	United Kingdom
Recommended scenario			
In-sourced			
Initial set-up costs (min content)	281.758	668.256	377.361
Human capital costs	191.278	574.006	286.881
Other	90.480	94.250	90.480
Recurrent cost (min content)	121.638	230.956	148.540
Human capital costs	52.758	159.206	79.660
Other	68.880	71.750	68.880
Initial set-up costs (max content)	325.028	810.893	449.968
Human capital costs	234.548	716.643	359.488
Other	90.480	94.250	90.480
Recurrent cost (max content)	136.499	279.025	172.923
Human capital costs	67.619	207.275	104.043
Other	68.880	71.750	68.880
<i>Total costs over 5 years (min content)</i>	<i>768.311</i>	<i>1.592.079</i>	<i>971.522</i>
<i>Total costs over 5 years (max content)</i>	<i>871.024</i>	<i>1.926.994</i>	<i>1.141.659</i>
Outsourced			
Initial set-up costs (min content)	251.068	652.333	348.312
Human capital costs	203.068	602.333	300.312
Other	48.000	50.000	48.000
Recurrent cost (min content)	106.002	221.806	133.634
Human capital costs	58.002	171.806	85.634
Other	48.000	50.000	48.000
Initial set-up costs (max content)	294.338	794.971	420.919
Human capital costs	246.338	744.971	372.919
Other	48.000	50.000	48.000
Recurrent cost (max content)	120.863	269.875	158.017
Human capital costs	72.863	219.875	110.017
Other	48.000	50.000	48.000
<i>Total costs over 5 years (min content)</i>	<i>675.078</i>	<i>1.539.557</i>	<i>882.850</i>
<i>Total costs over 5 years (max content)</i>	<i>777.792</i>	<i>1.874.473</i>	<i>1.052.987</i>
Co-sourced			
Initial set-up costs (min content)	239.278	624.006	334.881
Human capital costs	191.278	574.006	286.881
Other	48.000	50.000	48.000
Recurrent cost (min content)	100.758	209.206	127.660
Human capital costs	52.758	159.206	79.660
Other	48.000	50.000	48.000
Initial set-up costs (max content)	282.548	766.643	407.488
Human capital costs	234.548	716.643	359.488
Other	48.000	50.000	48.000
Recurrent cost (max content)	115.619	257.275	152.043
Human capital costs	67.619	207.275	104.043
Other	48.000	50.000	48.000
<i>Total costs over 5 years (min content)</i>	<i>642.311</i>	<i>1.460.829</i>	<i>845.522</i>
<i>Total costs over 5 years (max content)</i>	<i>745.024</i>	<i>1.795.744</i>	<i>1.015.659</i>

C.14. Background information on patient volumes

269 The table below presents an estimate for the number of patient contacts with healthcare providers (hospital staff in general, doctors, dentists) in the EU. These estimates are based on OECD Health 2011 data and extrapolated -proportionally to population sizes- to present an EU-wide estimate. It is found that around 4 billion patient contacts took place in 2008.

Number of patient contacts in the EU per year: data for 2008	All contacts	Per EU resident	Source
INPATIENT CARE (number of hospital discharges)	90.000.000	0,2	OECD Health 2011, data on hospital discharges for EU MS covering 86% of EU population
OUTPATIENT CARE (number of consultations)	4.080.000.000	8,2	NA
Doctors	3.450.000.000	6,9	OECD Health 2011, data on consultations per capita for EU MS covering 66% of EU population
Dentists	630.000.000	1,3	OECD Health 2011, data on consultations per capita for EU MS covering 62% of EU population
TOTAL	4.170.000.000	8,4	

270 Applying the following assumptions implies that around 25 million (or 60% of 1% of 4,17 billion) patient-provider contacts for planned cross-border healthcare are expected annually in the EU:

- 1% of healthcare concerns cross-border healthcare (proportional to the estimate of 1% of public health budgets contained in Impact Assessment accompanying the Directive on the application of patients' rights in cross-border healthcare(SEC(2008) 2164)),
- 60% of cross-border healthcare concerns planned healthcare for which patients might require information of healthcare providers in advance (based on the estimate found by Hermesse et al 1997:" A breakdown into the different types of access to health care abroad revealed the financial importance of preauthorized care (E112), as it was responsible for nearly 60% of the total cost of cross-border care").