

eHealth-units

14TH EHEALTH NETWORK 13 NOVEMBER 2018, BRUSSELS, BELGIUM COVER NOTE BY EHEALTH NETWORK SECRETARIAT

Agenda topic 5a: Market study on Telemedicine

Issue at stake

DG SANTE has commissioned Price Waterhouse Coopers (PWC) in February 2018 to do a study examining the telemedicine market in Europe and to understand the factors that determine its further development and deployment.

PWC has recently finalised this study giving a comprehensive overview of the telemedicine market in Europe. This study is put on the agenda of the eHealth Network for your information. It will give you the opportunity to ask questions concerning the results and the methodology used in this study.

Summary

The study consists of five areas. These five areas are mentioned below, together with the main findings from the analysis:

1. Classification and mapping of current telemedicine solutions in the EU and globally:

Telemonitoring and prevention are the predominant types of intervention for telemedicine solutions, together with teleconsultations. The majority of the solutions analysed have been in use for over 5 years suggesting a stable demand, potential and commitment to invest in this area. The analysis also shows a concentration of solutions in the primary care sector with cardiovascular disease, COPD and diabetes being the most common conditions targeted.

2. Mapping currently available telemedicine standards and guidelines:

Telemedicine standards and guidelines address mainly technical requirements. Most Member States tailor standards to their own specific needs. This raises the problem of interoperability for deployment of telemedicine services on a large scale.

3. Analysing the market for telemedicine solutions, globally (EU, USA, Canada, Japan):

The uptake of information technologies in Europe is the main accelerator for telemedicine. The market potential of telemedicine is demonstrated to be strong and expected to grow at a compound annual growth rate of 14% in the coming years. Also, the well-being market is growing rapidly mainly through wearables and mobile applications. An interesting observation is that the demand for telemedicine solutions outpace the supply. Point of consideration here is that this is due to the fact that hospitals and clinics do not always have the financial resources to adopt the state-of-the-art technology to deploy telemedicine.

4. Mapping the barriers to telemedicine implementation:

The barriers to the uptake of telemedicine are identified in one of 7 categories: cultural,

regulatory and policy, social security, industrial and technical, knowledge, financial, and market-related. In the analysis, barriers are found in all European countries but do not affect them to the same degree. Points to pursue actions to overcome these barriers overcome them, in particular: conservatism or resistance to adopting new medical processes, limited integration between technology and medical practitioner's procedures, (data protection) regulations, limited funding/financial incentives and interoperability.

5. Carrying out a cost-effectiveness analysis of existing solutions and potential large-scale deployment.

The study offers an economic assessment to evaluate the potential benefit of future deployment of telemedicine across the EU. It is important to note that for this economic analysis, certain assumptions were made in order to develop the calculative model. The main conclusion of the analysis is that the higher the share of telemedicine – the more cost-effective wide-scale deployment becomes. An increasing share of telemedicine decreases the total cost of the patient journey, the total consultation time, the total distance travelled and the rates of mortality, while it increases QALYs (quality of adjusted life years) gained.

Format of procedure in the eHealth Network meeting

The Member State co-chair introduces the topic shortly will give the floor to Ms. Antonia Auman of PWC Luxembourg to present the study and the results in the report.

After the presentation of Ms. Auman, the eHealth Network will be given the floor to ask questions.

After the discussion, the Member State co-chair will thank PWC for conducting this study and closes this agenda topic.