

# The Cross-Border Health-Care Directive

# Presentation of key findings from a recent evaluative study

DG SANTE, Unit D2 Healthcare Systems





Context of the evaluative study

Study Design

Study Results: Main Highlights

Current joint challenges

Next steps

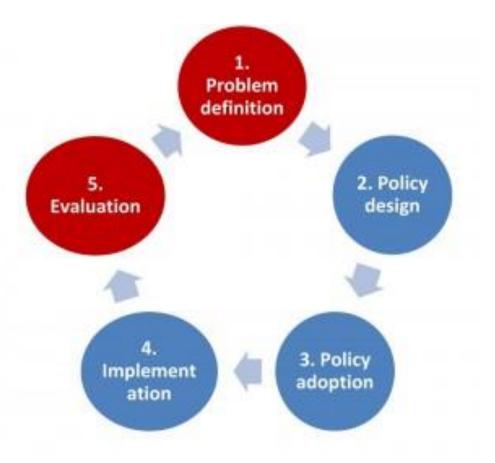


#### **Context - Why evaluate policies ?**

A check on how far EU policies and initiatives reach the set objectives, and to assess what can be improved in the future.

Many different operators involved

A variety of methods





#### Context

Why commission a study **so early** after the deadline for transposition?

- Need to establish a monitoring mechanism
- Prepare the ground for the upcoming evaluation of the Directive in 2017
- Need to gather further data for a baseline

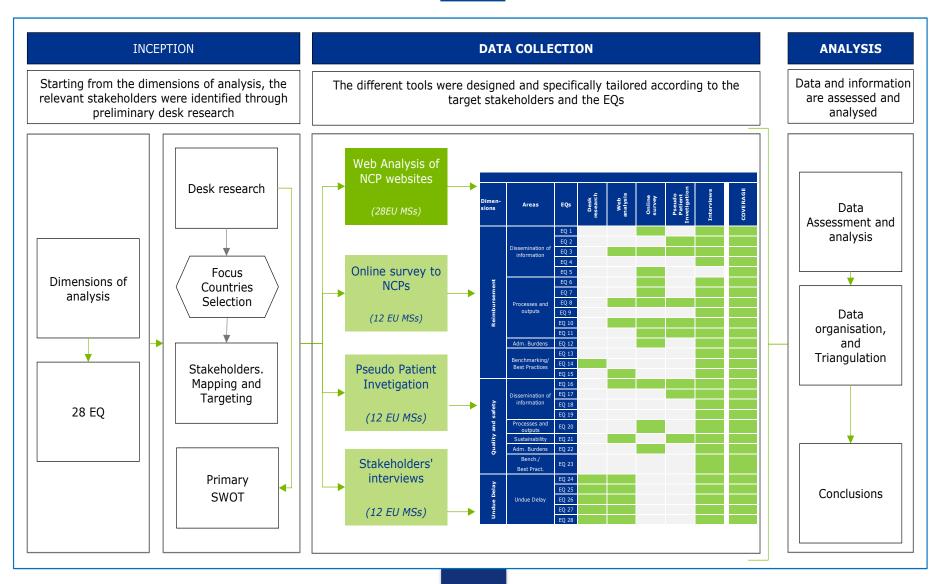


#### **Study Design**

Analytical tools used in data gathering:

- + Desk research and literature review
- + Website analysis of NCP websites
- + Online survey to NCPs
- + Pseudo patient investigation method
- + Stakeholder interviews (59 in total)







#### **Reimbursement practices/ processes**

#### 3 main aspects:

- Availability & accessibility of information (NCPs)
- **Correct/ incorrect reimbursement** following use of cross-border care and **efficiency** of reimbursement (national benchmarks)

#### • Who bears the responsibility for:

- a) finding relevant intelligence on potential treatments/ outpatient care investigations,
- b) bearing the burden of proof in demonstrating to insurers that the treatment/ investigation has been carried out, and documentation has been correctly submitted;



### **Quality and safety of cross-border care**

- What determines patients' first choice of a provider "across the border"?
  - Waiting time or safety or recommendations?
- Is the general information useful or is it leading patients to refrain from CBHC?
  - Anecdotal evidence?
- Follow-up treatment?
  - E.g. seamless recognition of cross-border prescriptions?



#### Potential detriment to patients – non-disclosure, tariffs and pricing, refusal to grant prior-authorisations and undue delays

- Overall dissemination of info on the Directive
- Are patients informed?
  - a) Compensation, remedies regarding undue delay individual assessment vs. Standardised waiting time?
  - b) Best practices/ benchmarks?



### **Study Results Highlights**

Website Analysis

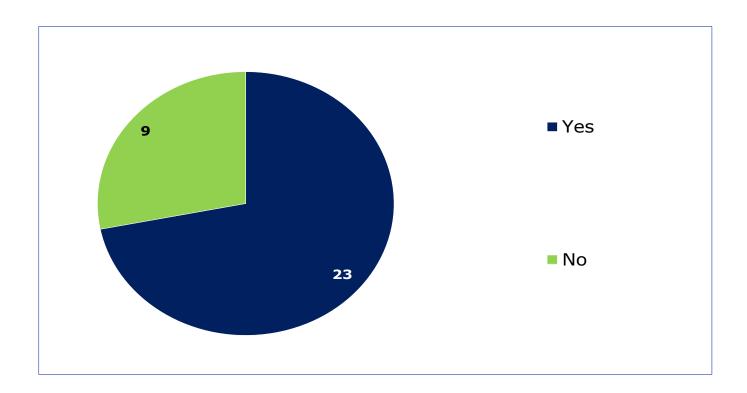


#### Web analysis – NCP channels

Countries/ Channel	Austria	Belgium	Bulgaria	Croatia	Cyprus	Czech Republic	Denmark	England	Estonia	Finland	France	Germany	Gibraltar	Greece	Hungary	Ireland	Italy	Latvia	Lithuania	Luxembou rg	Maita	Northern Ireland	Netherland s	Poland	Portugal	Romania	Scotland	Slovakia	Slovenia	Spain	Sweden	Wales
Email/ contact																																
Phone Nr.																																
Office address for visits																																

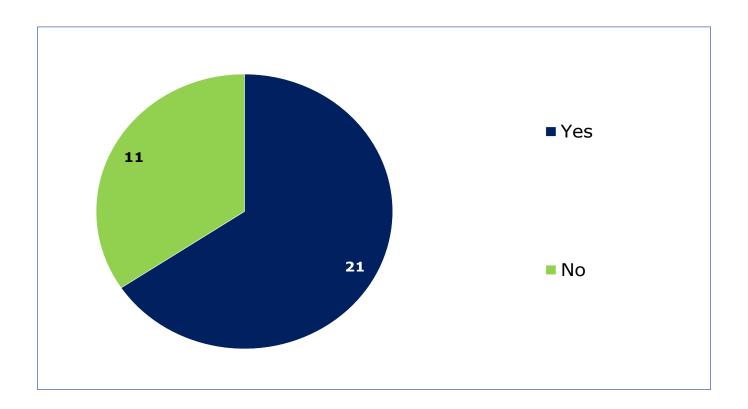


# Pie-chart 1: NCP websites providing information on contact details of other NCPs



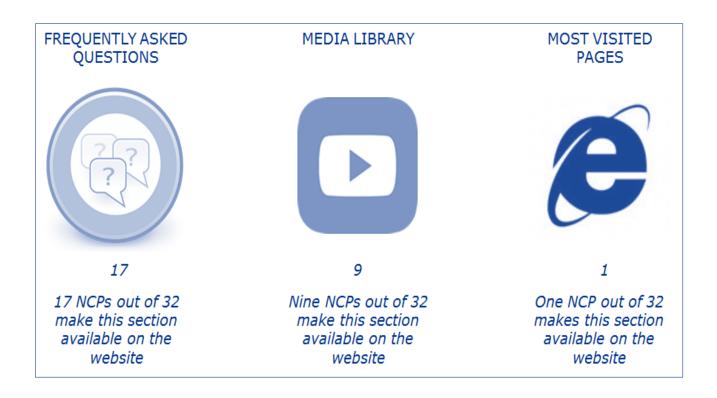


## Pie-chart 2 - NCP websites which distinguish the EU Regulation 883/2004 and the EU Directive 24/2011



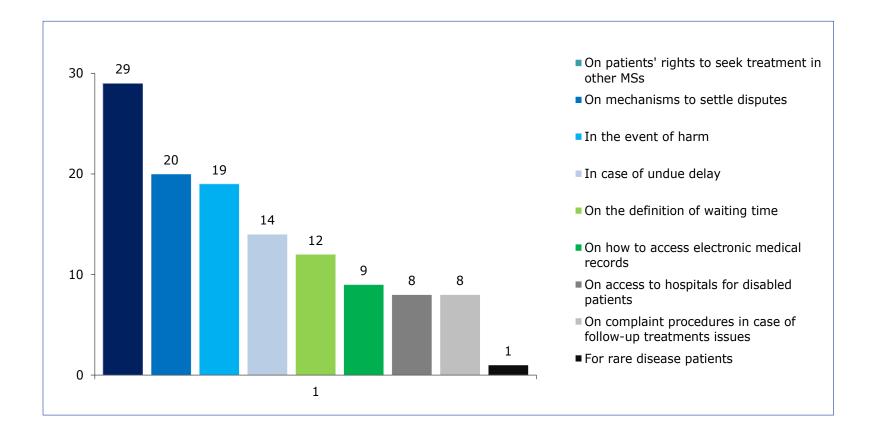


## Presence of sections helping users to find information on the 32 websites analysed





#### Bar chart - NCP websites which contain information on patients' rights





### **Study Results Highlights**

### **Mystery Shopping**

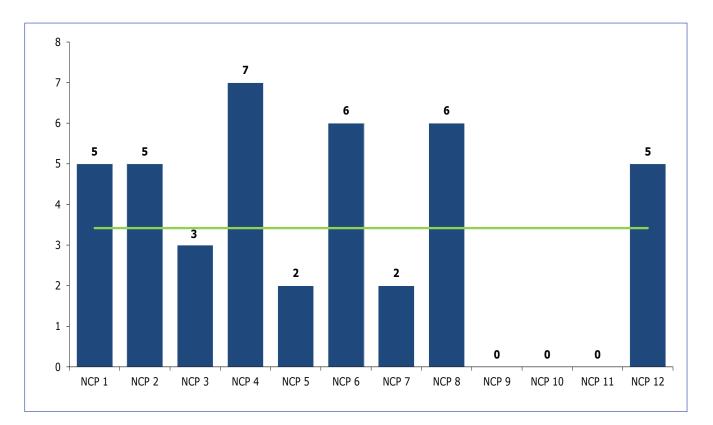


#### Status of the NCPs contacted – Scenario 1

Contacts and answers									
	Subn	nitted	Answered						
NCP	E-mail	Phone call	E-mail	Phone call					
NCP 1		Not available		Not available					
NCP 2			No						
NCP 3		Not available		Not available					
NCP 4									
NCP 5									
NCP 6									
NCP 7									
NCP 8		Not available <sup>1</sup>							
NCP 9				No					
NCP 10									
NCP 11		Not available		Not available					
NCP 12									
Total	12	9	11	8					
%	100%	100%	92%	89%					



#### NCPs answers in Scenario 1



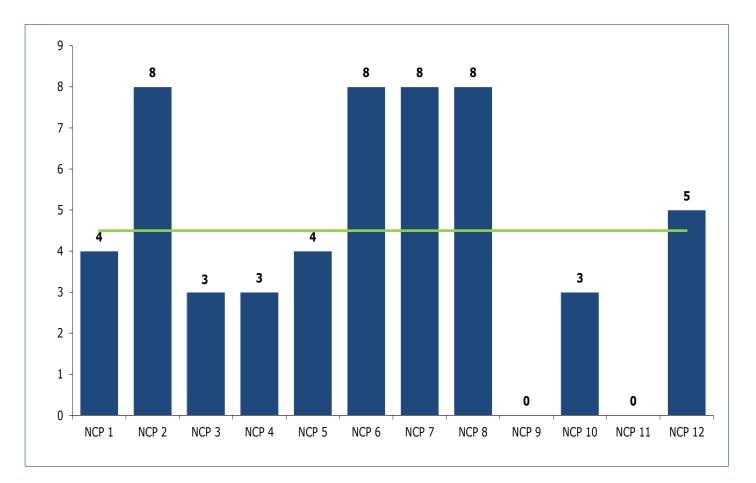


#### Status of the NCPs contacted – Scenario 2

Contacts and answers									
NCP	Subr	nitted	Answered						
NCP	E-mail	Phone call	E-mail	Phone call					
NCP 1		Not available		Not available					
NCP 2									
NCP 3		Not available		Not available					
NCP 4		No		No					
NCP 5									
NCP 6									
NCP 7									
NCP 8		Not available							
NCP 9				No					
NCP 10									
NCP 11		Not available		Not available					
NCP 12									
Total	12	7	12	6					
%	100%	88%	100%	75%					



#### NCPs answers in Scenario 2



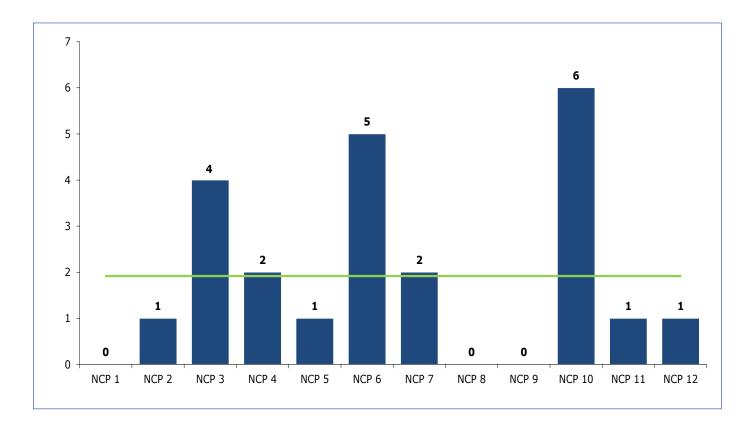


#### Status of the NCPs contacted – Scenario 3

Contacts and answers									
NCP	Subr	nitted	Answered						
	E-mail	Phone call	E-mail	Phone call					
NCP 1		Not available	No	Not available					
NCP 2									
NCP 3		Not available		Not available					
NCP 4									
NCP 5									
NCP 6									
NCP 7									
NCP 8		Not available	No	Not available					
NCP 9			No	No					
NCP 10									
NCP 11		Not available		Not available					
NCP 12			No						
Total	11	8	7	7					
%	92%	100%	64%	88%					



#### NCPs answers in Scenario 3





### **Study Results Highlights**

**NCP Survey** 



Figure 1 - means of contacting the NCP, on the basis of online surveys to 9 NCPs



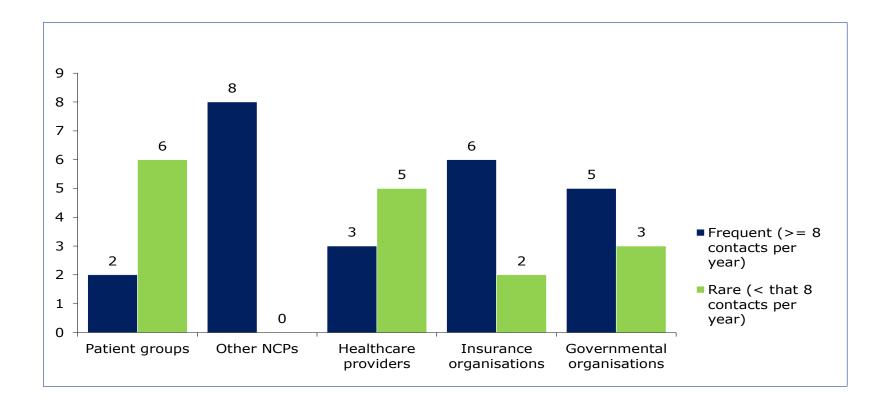


# Figure 2 - Additional channels for contacting the NCP under consideration (N=9)





Figure 3 - NCPs' level of cooperation with stakeholders (N=8)





Further Findings on the basis of the NCP survey:

- 5/8 NCPs provide information about Reg. (EC) No 883/2004 and Directive 2011/24/EU;

- Difficulties in explaining the differences between the function and features of prior-authorisation in the two legal frameworks;

- Disparities between and within MS regarding the info provided by NCPs and health insurance providers about procedures to access crossborder care.





## Are we happy with:

- -The Present level of work done and left to do on the end-user perspective?
- -The Choice Architecture of Users (websites/calls)?
- -The Choice Literacy of Patients (understanding the deeper consequences of their choice both financial and administrative and in clinical terms)?

#### facebook Some



**PINNED POST** 

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# **Current joint challenges**

- Outreach to patients: A more Patient-centric view in the design of info systems
- A more user-centric call centre experience:
  - Reducing waiting times for giving tailored answers to specific patient situations (frontier workers, pensioners, etc)
  - Flexibility in how info is provided quid channels
- Improving customer satisfaction: "secret shoppers" to track performance



#### **Next steps**

- Exchanges on the basis of the discussion paper
- Reflections on basis of the published evaluative study
- Next evaluative exercise (as of 2017): 360° feedback exercise for NCPs?



### Thank you for your attention!

