

Health Tourism and Europe / the EU

... a 10 minute *Executive Briefing*



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about...

healthCare cybernētics
ANALYSIS AND STRATEGIC THOUGHT

(private sector international *think and do tank*)



...addressing the developing and high-impacting Healthcare Domains

One of which is:

Health Tourism

- Analysis and Strategic Thought
 - Advisory Service
- Domain Integration
 - National-level Projects
- Education
 - Health Tourism Course
 - The Textbook of Contemporary Health Tourism
 - Continuing Executive Education

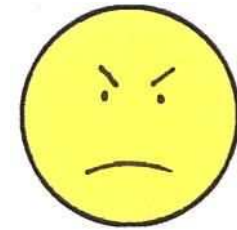
What the EU / Europe is striving for



The Serious Side (for the Politicians)

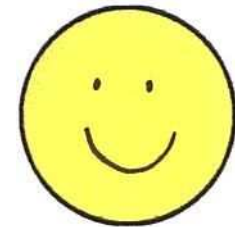
- Formulate Health Tourism-related Strategies and Policies
- Resolve the issue of Patient Mobility – Health Insurance Portability

...Provide Certainty!



The Lighter Side (for the Private Sector – Healthcare Providers)

- Promote intra-EU Health Tourism
- Attract Health Tourists from outside the EU

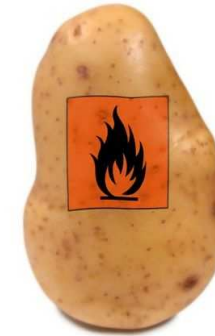


The Issues of Major Concern

...the bottom line

Discouragement

- Movement of Health Consumers within a (nominally) *single market* (...the hot potato)
 - Medical



Encouragement

Promotion of Health Tourism within the “*internal*” market

- Non-Medical





Roundtable discussion on "Health Tourism in Europe"

Tuesday, 10th October 2006 from 9.30-13.00

Programme

- 9.30 **Welcome**
Paul Adamson
Chairman, The Centre
- Opening remarks by the Chair**
Dr Jorgo Chatzimarkakis
Member of the European Parliament
- Community action on health services – The Commission
Communication and steps forward**
Nick Fahy
Deputy Head of Unit
DG SANCO, Unit C.5: Health Strategy
- A perspective from the DG Internal Market & Services**
Géraldine Fages
Legal officer
DG Internal Market & Services, Unit E.1 : Services
- 11.00 *Debate*
Coffee break
- 11.30 **Preview on the health services question
within the German Presidency of the Council**
Frank Niggemeier
Health Counsellor
Permanent Representation of the Federal Republic of
Germany to the EU
- The wider notion of health tourism and a global
perspective**
Constantine Constantinides
CEO
Healthcare Cybernetics
- A view from the European patients**
Donald Marquis
European Development Director
European Patients Forum
- 12.30 *Debate*



The Center (Brussels)

...the other *think and do tank*

October 2006

Round Table Discussion

Health Tourism in Europe

hCc – one of 5 invited Speakers

EU Commission Consultation ...2006 - 2007



How to ensure legal certainty regarding:

“cross-border health services under Community law”

hCc Participation and Contribution:

http://ec.europa.eu/health/ph_overview/co_operation/mobility/docs/health_services_co52.pdf

...what we said and what happened

The Areas of Concern ...and recommended action

The Issues of Major Concern

...the bottom line (what happened)

- Movement of Health Consumers within a (nominally) *single market* – Discouragement (...*the hot potato*)

- Medical

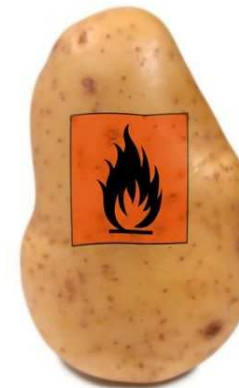
An announcement to Announce a delay in Announcement

(December 2007)

- Promotion of Health Tourism within the “*internal*” market – Encouragement

- Non-Medical

No signs of life (yet)



Separating and Analyzing the Issues

...what “services” are we talking about – and provided by whom?



- Provided by the Public Sector
- Provided by the Private Sector
- Provided by the Public and Private Sectors

Participation of the Private Sector in “essential services” Medical Tourism

Separating and Analyzing the Issues

...what “services” are we talking about?



Essential

- *Medically Necessary*

Discretionary (elective) – Not *Medically Necessary*

- Lifestyle
- Wellness
- Cosmetic

Grey Zones

- Holiday Support (renal dialysis)
- Spa (“curative”)
- Bariatric Surgery (obesity management)
- Lasik – Vision Correction

Health Tourism Services Necessity-based Classification



Essential
(Medically Necessary)

Discretionary

Essential
(Medically Necessary)

Discretionary

Paid for by "NHS, Health Funds, Insurance"

Paid for "out of pocket"

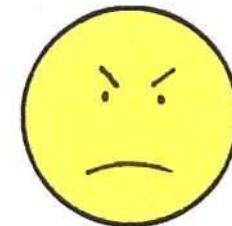
What the EU / Europe is striving for



The Serious Side (for the Politicians)

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...Provide Certainty!



Resolving the issue of Patient Mobility Health Insurance Portability



“Have Insurance – Will Travel”

Medical Tourism – Essential Services



The Political Stumbling Blocks

...basically *one*



Balance of Trade – Profit and Loss

Are the politicians providing stepping stones – or stumbling blocks?



The Technical Stumbling Blocks

...Hospitals do not have “spare capacity”



The issue of Acceptance and Admittance

You don't just show up at the door...



The Areas of *Concern* *...and recommended action*



Direction of Patient Flow

- Study to pre-emptively instigate and consider implementation of suitable measures aimed at averting disruptive challenges to the health systems of EU-member states likely to be net recipients of patients

Stumbling Blocks and Stepping Stones

The Areas of *Concern* *...and recommended action*



Adoption of Coding – ICT in Health

...eHealth-related technologies (ICT in Health)

- International Classification of Disease – ICD
- Diagnosis Related Groups - DRGs
- Communication Protocols (e.g., HL7)
- Nomenclature (e.g., SNOMED)
- Electronic Medical Record

Stumbling Blocks and Stepping Stones

The Areas of *Concern* *...and recommended action*



Financial Responsibility / Reimbursement

- EU-wide survey - to determine which healthcare facilities are DRG and eBilling compliant, and can thus participate in the scheme
- “laggards” should be encouraged or helped to conform

Stumbling Blocks and Stepping Stones

The Areas of *Concern* *...and recommended action*



Responsibility for ensuring patient safety

- Collaboration to compile a (dynamic) database of Assessed and Approved Healthcare Facilities / Providers (? European Version of JCI)

Stumbling Blocks and Stepping Stones

Standards

Joint Commission International - Accredited Facilities in Europe



...as at beginning March, 2008

Austria - 4
Czech Republic – 3
Denmark – 7
Germany - 6
Ireland - 7
Italy - 8
Spain - 13
Turkey - 18

...as yet no EU System of Accreditation



The EU Health Card



...basically, only for Emergencies (and maybe for Renal Dialysis)

See also – Electronic Health / Patient / Medical Record

The special “case” of the United Kingdom (Britain)

...health tourism is a *dirty word*



...the British understanding of Health Tourism

- System abuse
- A System shamed

...undesirable inbound and outbound



Spa / Thermalism / Thalassotherapy

...Proof of Efficacy and Credibility



... in Europe, Spas operating in *crisis mode*

Mineral Spas / Thermalism Facilities – *cures and treatments*

- Traditionally relied on the state to prescribe and pay
- Now state will only pay for “evidence-based treatment”
- Where is the evidence?

Medical Spas – their credibility also in question



SPA Medicine

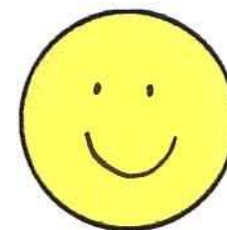
...bring in the molecular-level scientists

What the EU / Europe is striving for



The Lighter Side (for the Private Sector – Healthcare Providers)

- Promote intra-EU Health Tourism
- Attract Health Tourists from outside the EU



Promoting intra-EU Health Tourism



To avoid “cannibalism”- and promote growth – countries to focus on competencies – what they do – or can do - best

Attracting Health Tourists from outside the EU

What EU Countries have to compete against



Thailand: - “we are the best - period”

Singapore: “faster, better, cheaper and safer”

India: “first-class healthcare at third-world prices”

...what more can one ask for?

How can Europe compete?

Qualifying for the “League”

What the EU countries need in order to *just compete*



- Deal with Fragmentation
 - Integration Projects (Health Tourism Domain Integration)
 - Stakeholder Management
 - Concerted Actions
 - Cluster Initiatives
 - PPPs
- Sustainability
 - Education / Training and Research (Health Tourism Certificate™)
- Adoption of Standards and Facility Accreditation
 - From an art to a science
 - Health Tourism Best Practices
 - Evidence-based Healthcare Services



Acquiring / Showcasing Competitive Advantages

...differential advantage / differentiation



- Innovation – develop new Health Tourism Products – Boutique Health Tourism Services
- Sports Tourism
- Culinary Tourism
- Health Tourism for Children
- Introduce a Health Tourism element into Workplace Wellness Programs
- Draw in and get the Insurance Industry involved / engaged
- Provide Health Tourism Insurance – Risk Management
- Draw in and get the Tour Operators involved / engaged
- Branding (see Cluster Initiatives)

Acquiring / Showcasing Competitive Advantages ...differential advantage / differentiation



- Innovation – develop new Health Tourism Products
- Adopt the Broader – Inclusionary view of Health Tourism
- Draw in and get the Insurance Industry involved / engaged – in “inventive ways”
- Draw in and get the Tour Operators involved / engaged
- Branding (see Cluster Initiatives)

Enhancing Europe's Competitiveness

Entry into the EU is a *matter of Time* ..the “bottom line” Message for Turkey



There will be competition

...start Thinking and Doing - Now

- Think in terms of Essential and Discretionary Services
- Adopt and Implement ICT in Health
- Implement Domain Integration Projects
- Education and Continuing Education in Health Tourism