

- **The patient Journey in  
CrossBorder Healthcare**

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“ A STRONG PATIENTS’ VOICE TO  
DRIVE BETTER HEALTH IN EUROPE ”

## When deciding:

- What treatment options are there in other EU countries and would I benefit from them (cost and waiting time)?
- What is reimbursed by my home healthcare system and do I need prior authorization?
- What is the reputation of the healthcare provider and the experiences of other patients of this treatment especially about quality and safety issues?

## Before leaving:

- Who will help or support me during the treatment abroad, especially if there are complications?
- How are the doctors at home and abroad linked? What medical records would be needed, who owns this data and how is it shared (data protection)?
- What will be the total cost of the trip and what amount would I have to pay?

## During stay:

- Timeline and steps of procedure and treatment. Who is my contact person, who can I turn to for help?
- What happens if something goes wrong or negative side effects or it does not go as planned (complaints)?
- What about continuity of care (e.g prescription drugs not available in the home country) and ensuring free flow of information between host/home country systems.

## After returning home:

- Is all of the information completely transferred and paperwork completed (including translation of reports)?
- What is the follow up and after care, who manages the side effects?
- What are the reimbursement procedures?

## When deciding:

- Patients need support to guide decision-making including information on full costs of care abroad and reimbursement, translation needs, management of medical records, safety issues etc.
- NCPs could create lists of medical services where they feel that there is special expertise or high quality (and share this with other NCP). NCP to indicate what is reimbursed by the home system and comparable data about healthcare in home / host country.
- PO can gather information about treatment options available in other countries (not imply endorsement). PO can help to bridge language issues.

## Before leaving:

- Indication of real cost in home country (transparency) and real opportunities to make an informed choice of specialist in another country.
- NCP to clarify the uses of the Regulation vs the Directive and give clear answers on what is reimbursed by home healthcare system.
- PO to provide practical support on what to expect in another health system and checklists of how to plan / what to take

## During stay:

- Need an identified person within host HCP as a patient contact or advocate (existing patient ombudsman may only deal with domestic patients).
- HCP to have responsibility to share information (within limits of data protection regulations) between home-host country to ensure continuity of care, for example replacement medication if it is not available in the home country.
- NCPs to provide harmonised forms for invoicing, reimbursement claims and documentation on healthcare provided.
- PO could provide local support and advice for patients.



# Recommendations

## After returning home:

- All stakeholders (NCP, HCP and POs) have a mutual responsibility to share their experiences and contribute to better knowledge about cross border healthcare.
- Patients need to know what follow up care / rehabilitation is needed. Clarity on the procedures for reimbursement and complaints mechanisms (process, deadlines, responsibilities, appeals).
- POs can offer opportunities for feedback to NCP and health system on experience of care abroad, publication of case studies and real 'patient stories'. POs can provide awareness-raising, training and dissemination of information.
- NCPs could provide check lists for reimbursement and publish statistics on outcomes of healthcare abroad.

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