

# eHealth

priorities and strategies  
in European countries



**Fact sheet**

# Germany

March 2007

Towards the Establishment  
of a European eHealth  
Research Area





# Germany

## Strategic perspective

German eHealth activities are embedded in the context of overall healthcare reform. Specific elements are codified as follows in the Law for the Modernisation of Statutory Health Insurance (2003) which calls for the introduction of an Electronic Health Card (“Gesundheitskarte”) and the establishment of institutions deemed necessary for its successful implementation:

- The Electronic Health Card: the law details mandatory and voluntary applications, patient and other rights and obligations, and the implementation of the necessary nationwide information, communications and security infrastructure
- Patient identifier: the law establishes a Trust Centre for the Health Insured Number (Vertrauensstelle Krankenversicherungsnummer) whose role is to develop a safe system to determine and assign a unique number for each German citizen
- (Health) Telematics Corporation (gematik - “Gesellschaft für Telematik”): the law establishes this corporation and details its obligations to plan, implement and manage the necessary eHealth infrastructure services.

In July 2005, the Federal Ministry of Health and Social Security summarised its overall position concerning strategic eHealth developments in a paper entitled “The German eHealth Strategy”. That strategy document formulated the policy intentions and perspectives of the statutory legal provisions in non-judicial language. This strategy for achieving the modernisation targets builds on two pillars:

- The first pillar is an ICT infrastructure financed by one or more high-volume, ubiquitous applications so that other applications can build on the infrastructure without also having to bear those basic costs. The following applications are specified: online verification of insurance status (mandatory for citizens) including availability of all data for an electronic European

Health Insurance Card (eEHIC), electronic transmission of drug prescriptions (mandatory), and drug interaction and contraindication checks (voluntary for the insured).

- The second pillar of the German eHealth strategy is the later implementation of a private electronic patient record (ePR) and other, step by step, voluntary applications that use the already-established infrastructure.

Each citizen will own its own ePR. He will control who can access the record; he will be able to add their own data and also delete information. The ePR cannot substitute for records that a health care provider must maintain itself. It is also not available for research or public health uses.

## Implementation perspective

The detailed specification of a medium term technical and organisational framework for ICT, including aspects of information, communication, security and privacy in health care provides the basis of this vast national project.

gematik was established in January 2005. Early in 2006, a laboratory for testing the Electronic Health Card, the Health Professional Card, and corresponding components was established at gematik. This laboratory conducts functional and performance tests of basic off-line and on-line applications using components of a pre-defined highly secure (VPN-based) infrastructure, such as the card terminal/connector, the prescription data server and the emergency dataset. gematik has already issued its first certificates to vendors, a process which will enable field tests to start in Spring 2007. The purpose of the so-called connector is to allow any health care provider secure, direct access to the national system and to allow the applications exchange data in a fully interoperable manner. Where a one-to-one transfer of electronic data or interoperability between application-to-application is desired, adjustments to their own software will probably be required.

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Each function will first be tested in the laboratory, and then under real- life conditions. The first medical application to be tested is electronic prescription. Emergency data of patients (or rather a “basic medical data set”) is expected to follow soon afterwards.

The second stage will undertake field trials in eight regions selected in 2005 from all across Germany. The field trials will start in 2007 with up to 10,000 citizens in each region. Doctors, hospitals and pharmacies involved will receive specific funding for participation. The German Federal Minister for Health, Ulla Schmidt, has also announced that presuming a successful outcome of the initial trials, each of field tests will be extended to cover up to 100,000 users during the second half of 2007.

Concerning multi-national eHealth cooperation, about 5 years ago public health insurance funds in Germany, the Netherlands and Belgium together with hospitals in tourist regions along the North Sea coast introduced a service, facilitated by the German AOK Rheinland GesundheitsCard Europa integrating the European Health Insurance Card (EHIC), that supports the immediate access of travelling citizens to healthcare by using a secure web-based application, which instantaneously assures participating hospitals of the insurance status of clients and guarantees reimbursement within weeks via electronic transfer of administrative data. Hundreds of thousands of citizens have already benefited from no longer requiring the E111 paper form or a separate EHIC when travelling abroad. The TEN4Health project which involves health insurance companies and hospitals in Austria, Belgium, the Czech Republic, Germany, Italy and the Netherlands will further expand such services. Another project with German participation is NETC@RDS which is piloting a pan-European infrastructure for health insurance validation involving by now actors in 15 Member States.



## Future activities

A final date for the nationwide introduction of the card has not yet been fixed, but it is expected that roll-out could start in 2008. As required by law, more ambitious applications will be implemented in the coming years: these will include specification of standards for testing and the voluntary implementation of further functions like eMessaging; full documentation of all prescribed or otherwise bought or taken drugs; electronic patient record (integrated documentation of data on test results, diagnoses, therapies, treatments and immunisations covering all interventions across all service providers); and the integration of data supplied by the patient or third parties.

## Core resources

**Bundesministerium für Gesundheit und Soziale Sicherung (2005): The German eHealth Strategy.** Berlin/Bonn, July.

**Bundesministerium für Gesundheit (Federal Ministry for Health)**

<http://www.bmg.bund.de>

**Gesellschaft für Telematik**

<http://www.gematik.de>

**Electronic Health Card**

<http://www.dimdi.de/static/de/ehealth/karte/index.htm>;

<http://www.die-gesundheitskarte.de/>

## About eHealth ERA

This fact sheet is the outcome of research in the context of the *eHealth ERA* project (Towards the Establishment of a European Research Area). The project is implemented by empirica GmbH (coordinating partner, Germany), STAKES (Finland), CITTRU (Poland), ISC III (Spain), CNR (Italy) and EPSRC (United Kingdom), based on a Coordination Action contract with the European Commission.

The European Commission, Directorate General Information Society and Media, supports this project to contribute towards greater transparency across Member States and other participating countries on eHealth strategies as well as innovation-oriented research and technology development (RTD) initiatives, including the coordination of Member States' eHealth strategy formulation and implementation.

The fact sheet is an excerpt from the report "eHealth priorities and strategies in European countries", published by the European Commission in April 2007. The complete report is available for download at [http://ec.europa.eu/information\\_society/newsroom/cf/itemlongdetail.cfm?item\\_id=3346](http://ec.europa.eu/information_society/newsroom/cf/itemlongdetail.cfm?item_id=3346).

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