

DECIPHER PCP – project

Second Major EAFIP Event on Innovation Procurement
Athens, 18th – 19th October 2016
Anna Sachinopoulou, VTT Ltd.

<http://www.decipherpcp.eu/>



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DECIPHER PCP 

Partners

Public Procurer Organizations



Project Support Organisations



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Need to be addressed

- **ISSUE:** worldwide Chronic Diseases (as CVD, stroke, cancer, respiratory diseases and diabetes) represent 63% of all deaths. Comorbidity is very common in case of chronic conditions.
- **GOAL:** bring tangible benefits to patients by means of a step forward towards high-quality, safe, equitable, patient-centred healthcare throughout the EU
- **TARGET:**
 - Diabetes Type 2 – progressively to be applied to rest of chronic conditions
 - Citizens with active life requiring mobility within EU

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- Diabetes TOT DIRECT costs in 2010:
 - Spain*: 5,4 billion Euros
(36% non-diabetes drugs; 36% Inpatients)
 - UK**: 20,2 billion Euros
(15,2% non-diabetes drugs; 65,8% Inpatients)
 - Italy***: 7,9 billion Euros
(23% non-diabetes drugs; 57% Inpatients)

(*Extrapolation from Oliva J., Lobo F., Molina B. And Monereo S., Direct Health Care Costs of Diabetic Patients in Spain. Diabetes Care, 2004; **, *** P. Kanavos, S. van den Aardweg and W. Schurer, LSE Health: A new research report on diabetes in 5 European Union Member States)

Highest expenditures:
70-80% due to non-diabetes
drugs & inpatients

Business Case

- Diabetes prevalence:
 - Spain: 3M;
 - UK: 3,2M;
 - Italy: 3,1M;(OECD, 2011)

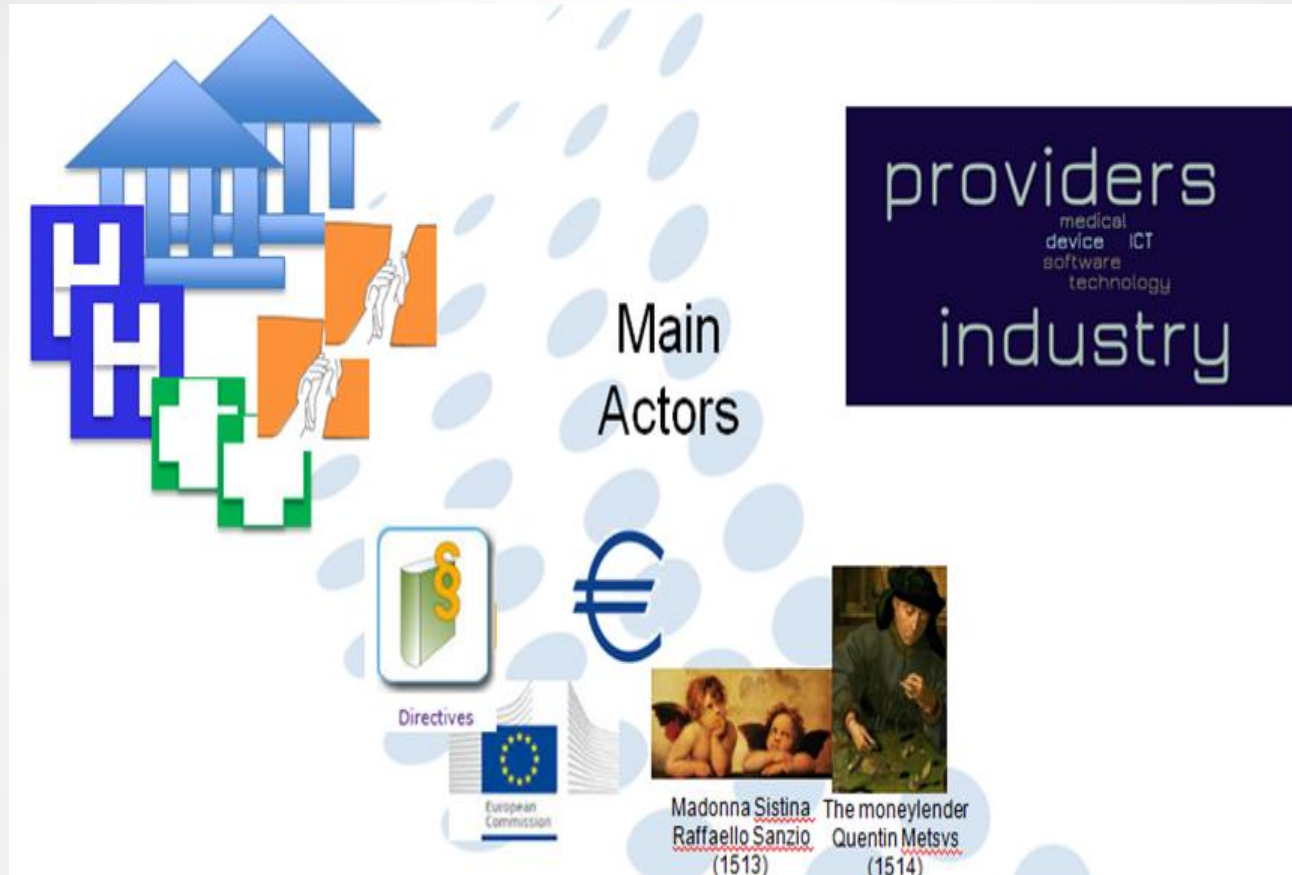
DECIPHER consortium estimates that the developed technologies could allow the procuring regions to save up to 24% of actual incurred direct costs, more than € 8 million



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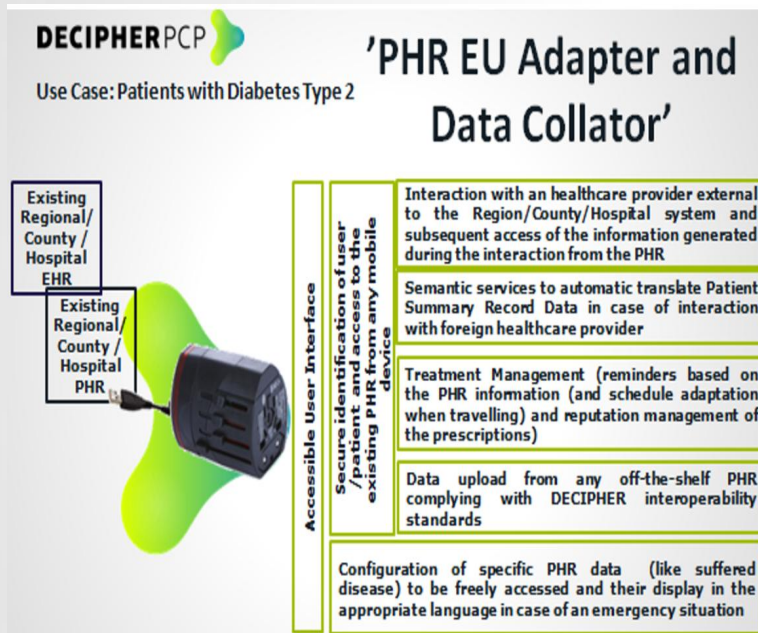
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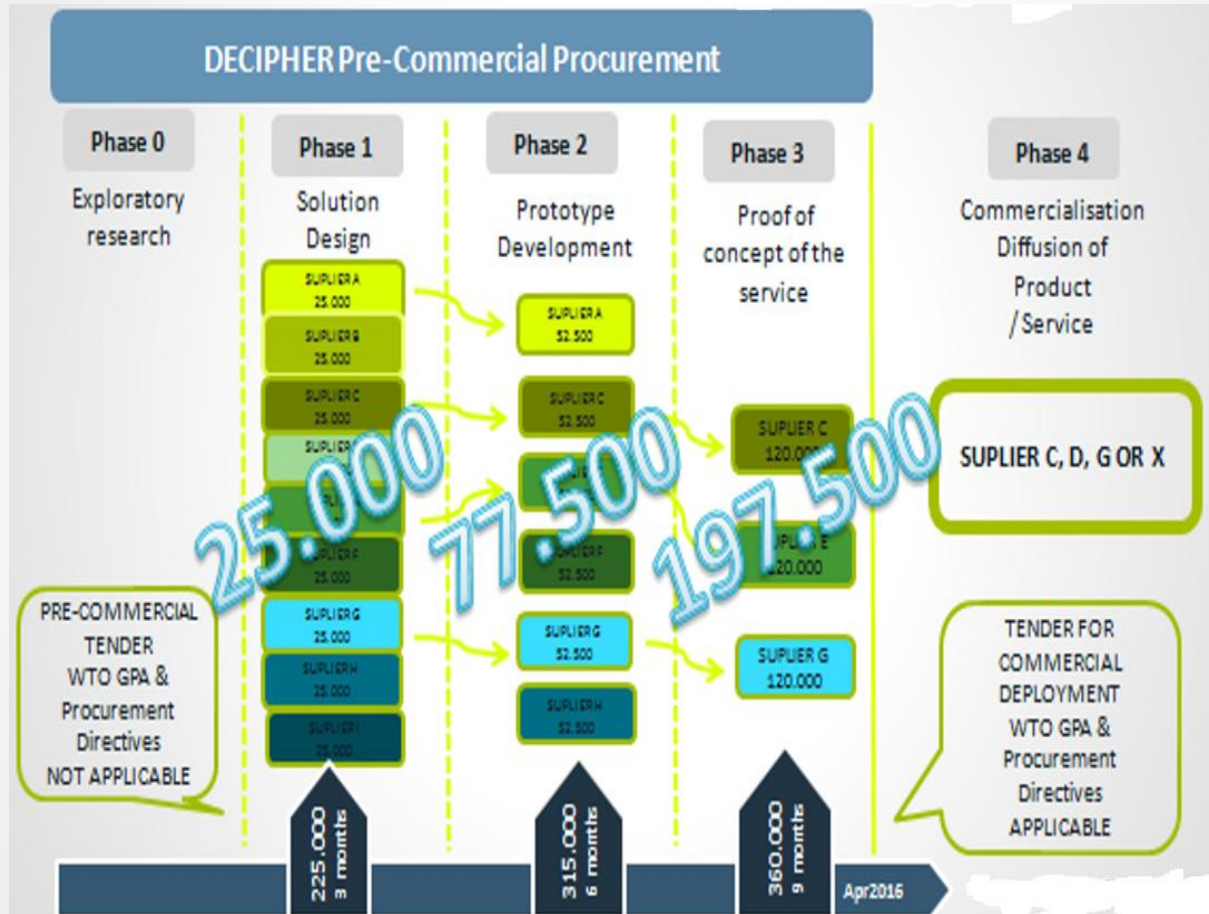
Functional Specifications

- To provide patients with:
 - The best instrument to **increase treatment secondary adherence without discontinuity even when travelling, prevent complications and being prescribed with non-diabetes drugs, reduce avoidable hospitalizations and A&E visits***
 - A complete **summary of their health record that can be made available anytime and anywhere to the healthcare professionals in case of unplanned care**

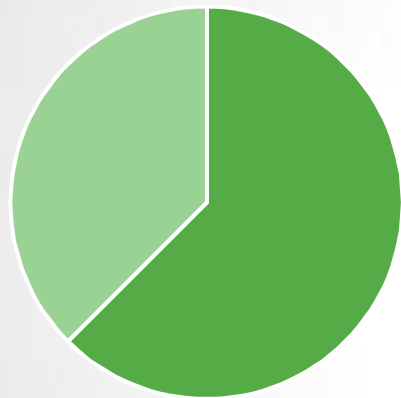


(* Hovstadius and Petersson: Non-adherence to drug therapy and drug acquisition costs in a national population - a patient based register study. BMC Health Services Research 2011 11:326 ; 'Evidence for action' (World Health Organization 2003); Ashish K. Jha, Ronald E. Aubert, Jianying Yao, J. Russell Teagarden and Robert S. Epstein: Greater Adherence To Diabetes Drugs Is Linked To Less Hospital Use And Could Save Nearly \$5 Billion Annually. Health Affairs, 31, no.8 (2012):1836-1846)

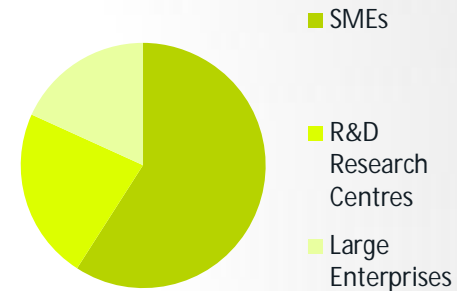
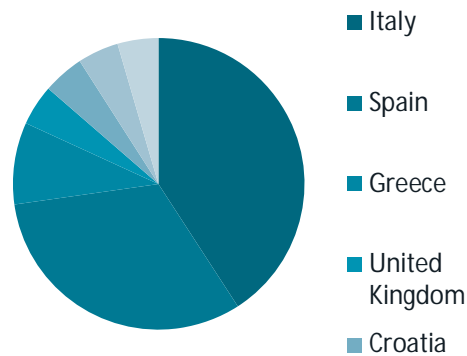
Procurement Procedure



Submitted bids



■ Individual Bidders ■ Consortia



In total 16 bids submitted by 22 organizations from 7 countries

Phase 1: Solution Design



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DECIPHER PCP Phase 2: Prototype Development



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Results for Phase 3: Proof of Concept



NEXTAGE
INNOVATION MADE EASY

Camelot
biomedical systems

erestult
Specific needs, advanced software solutions

gnomon
INFORMATICS S.A.



Lessons Learnt I: Procurers & Experts

- **NEED** : Defined in advance, taking into account the existing service system
- Procuring organizations' **DRIVERS AND BENEFITS** also relate to a learning experience about PCP and mHealth.
- The **BUSINESS CASE** is a necessary tool.
- A **COMMON UNDERSTANDING** of the existing healthcare ICT infrastructure is important.
- PCP as an **INSTRUMENT** for flexible, simplified and smooth adoption of novel services.



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- **BENEFITS:**
 - Better understanding of the procurers needs
 - SMEs more **CONFIDENT** to handle competition on an EU scale.
 - Concrete information on the service strategies and existing ICT infrastructure of the public procurers -> services in shorter time.
- **CHALLENGE:** Integration of different systems of different healthcare backgrounds.
- Participation of private healthcare providers and insurance companies to the PCP process is welcome.



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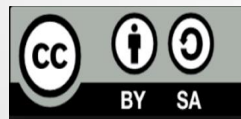


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Decipher PCP Project: Experience from Gnomon Informatics SA, Greece Dr. Alexander Berler



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To become a European leader in healthcare interoperability and cross border healthcare.

To be the preferred partner that provides reliable and competitive e-health IT solutions and services to increase data accuracy, efficiency and reduce operation expenses.

To partner with international industry leaders as an expert in e-health IT and related e-services.

Gnomon Informatics was established in 1994, The Company is headquartered in Northern Greece, Thessaloniki with offices in Athens and Cyprus.

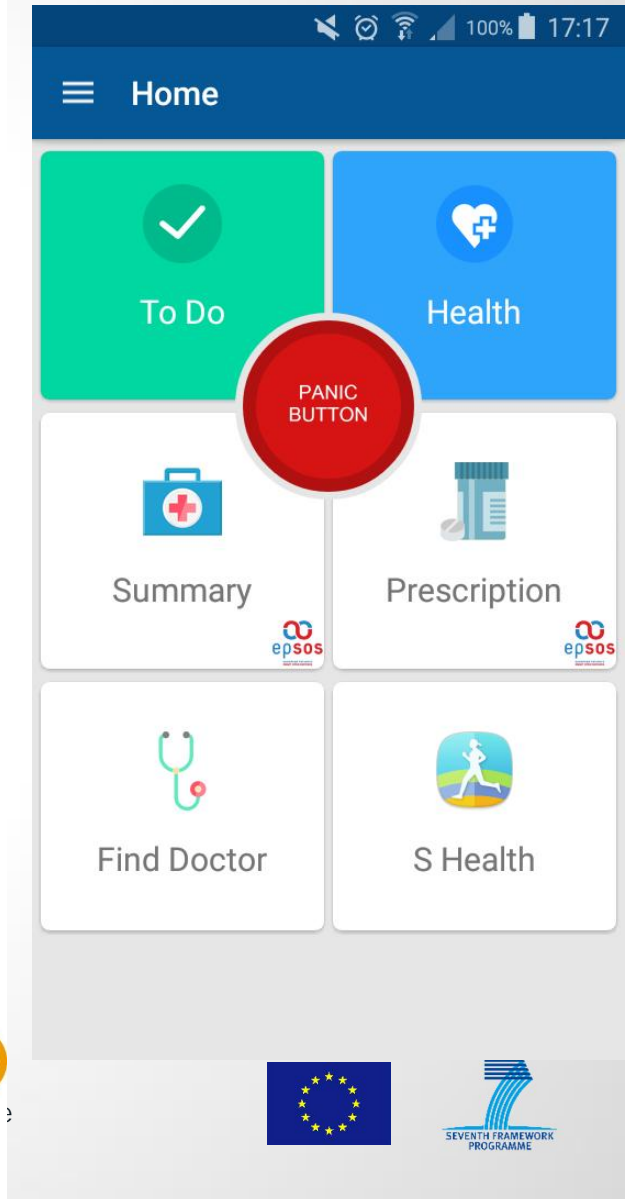
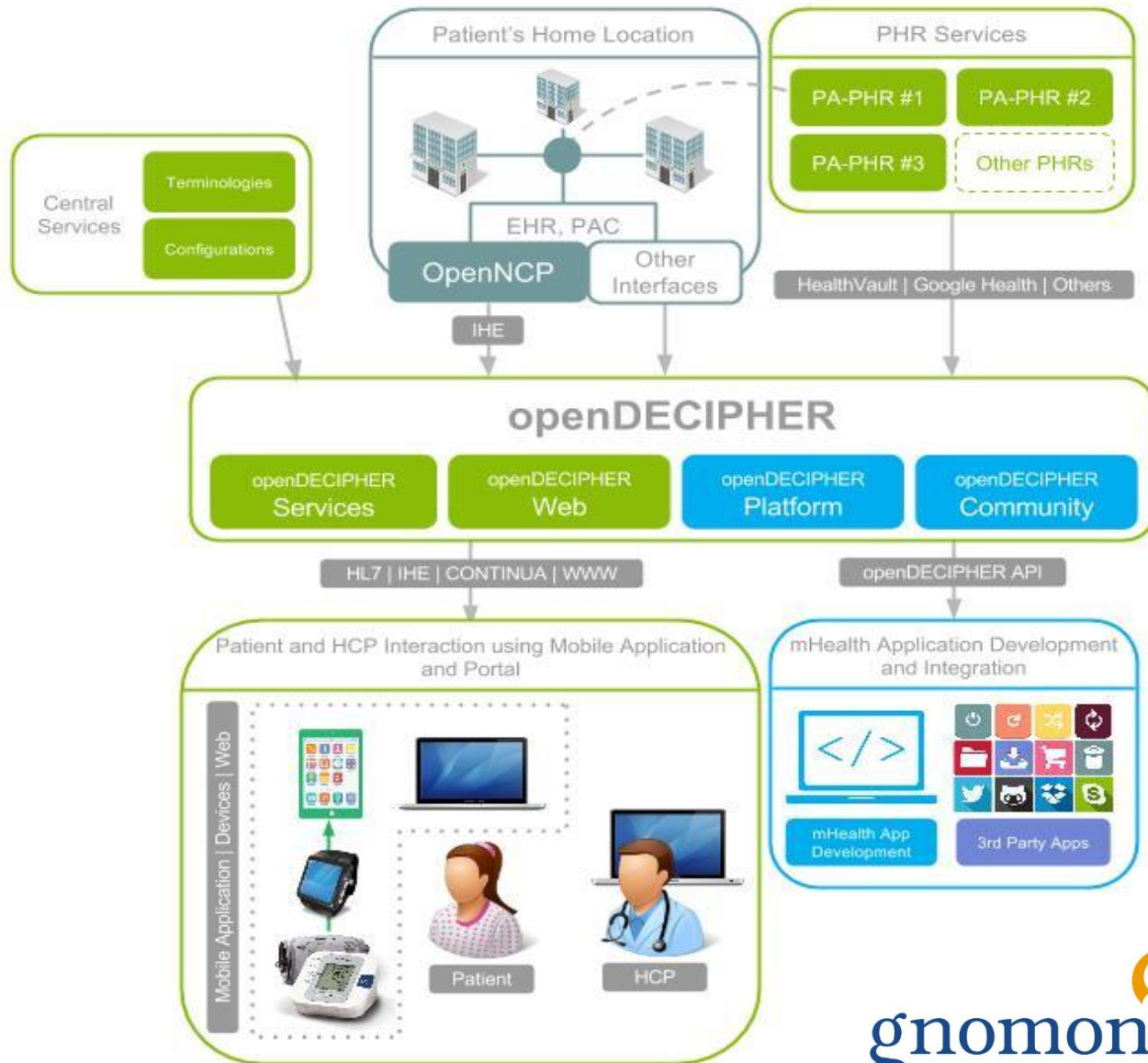
Gnomon Informatics is a proud member of




DECIPHER PCP




The OpenDecipher Approach





 PCP procedure provide adequate support for prototype creation in domains where feasibility and future prospects are not clearly defined


- Acceleration process
- Increases financial viability
- Reduces implementation risks


 Contracting authority ensured equity amongst participants

- Transparency
- Trust

 PCP Process dramatically increases prototype maturity level.


 Reference implementations from VTT were highly supportive to understand the minimum implementation requirements


 PCP procedure timeline could be improved

 Having access to the end users / reference sites would be an asset in defining clearer end user needs

 eHealth is highly dependent on interoperability

- Use case definition would improve the process
- Consensus building is essential
- End user assessment is critical

 Some PCP processes were inherited from public procurement rules thus creating a "china wall" between prototype developers and real needs

 Testing services need to be included to increase acceptance

DECIPHER PCP Future developments



- OpenDecipher has a strong focus on standards adoption (HL7, IHE, etc)
 - Increase geographical expansion
 - Provide product/service sustainability
 - Adhere to testing/certification processes
 - Patient safety
 - Health technology assessment
- OpenDecipher has a business model based on open source
 - Provide end value added services instead of packaged software products
 - New revenue and funding models are made possible
 - Collaboration of public and private sector in harmony and best interest for all
- Compatibility with ehealthDSI (epSOS) and eID DSI (STORK) from CEF implementation
 - New cross border healthcare processes made possible
 - Semantic interoperability remains an issue
 - New uses cases for the reuse of common IT infrastructures across Europe
 - The “Healthcare Roaming” Era has started



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"The best way to predict the future is to invent it."
Alan Kay



Thank You!

For More Information



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