

#### **ESTONIA**





Area - 45 000 km2 1.33 mlj. Inhabitants Member of EU since 2004 Euro-zone since 2011

#### **Healthcare expenditures in Estonia**

- 6.3% from GDP 2014 - 1.02 bln eur(OECD countries average – 9% from GDP)

- Per person 1,452 USD in Estonia
- Per person average 3,453 USD in OECD
- Financed: 13% earmarked health insurance tax on salaries paid by employers



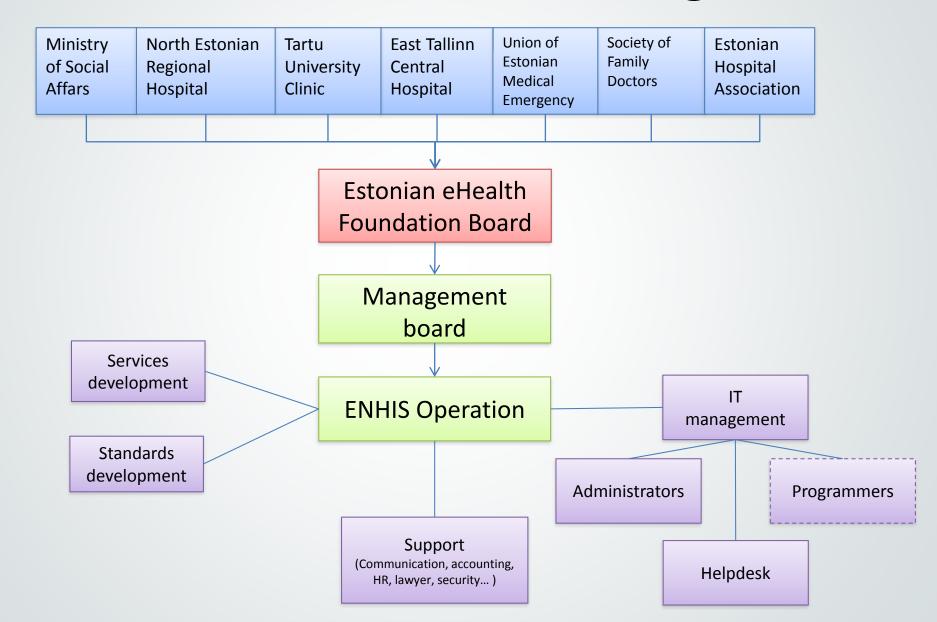


Estonian health System review 2013

### Facts about e-services in Estonia

- 100% of schools and government organizations have broadband connection
- 79% of have computer at home (2013)
- mParking in main cities
- 83% of households have broadband connection (2014)
- 99% of bank transfers are performed electronically
- 96% of income tax declarations are made via the E-Tax Board (2014)
- 31% of votes were cast over the internet on (2014)
- 62% of persons have completed the e-census (2012)

### Estonian eHealth Foundation organization

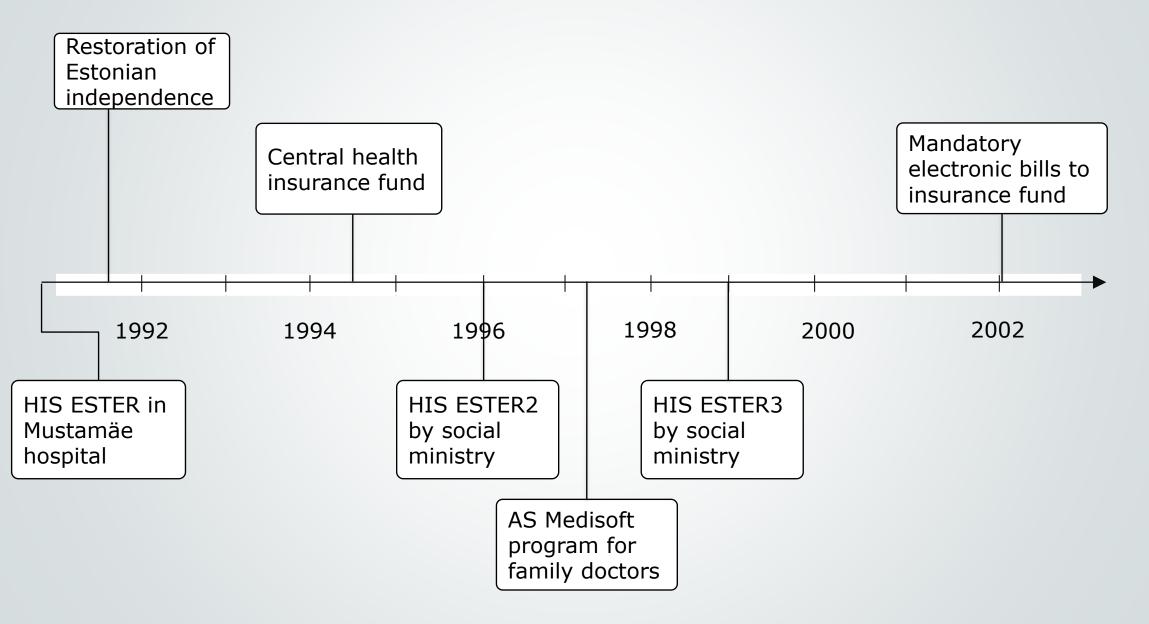


# Main tasks of Estonian eHealth Foundation

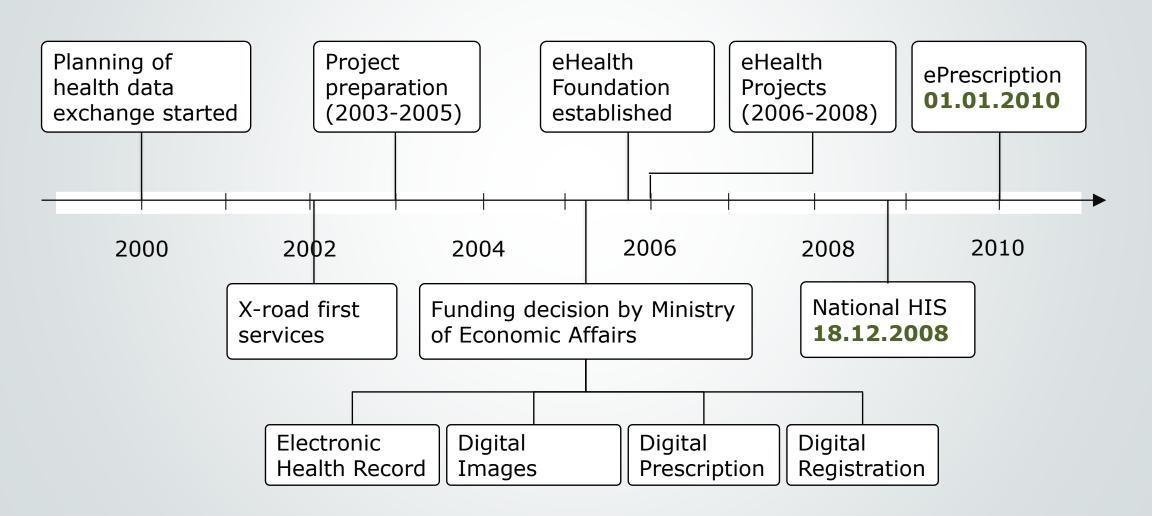
- Development of Estonian Health Information System (HIS) services
- Coordination of information systems harmonization used by medical professionals
- Management of standardization process, including classifications administration
- Housing HIS and other supportive systems
- International cooperation
- Scientific cooperation with universities

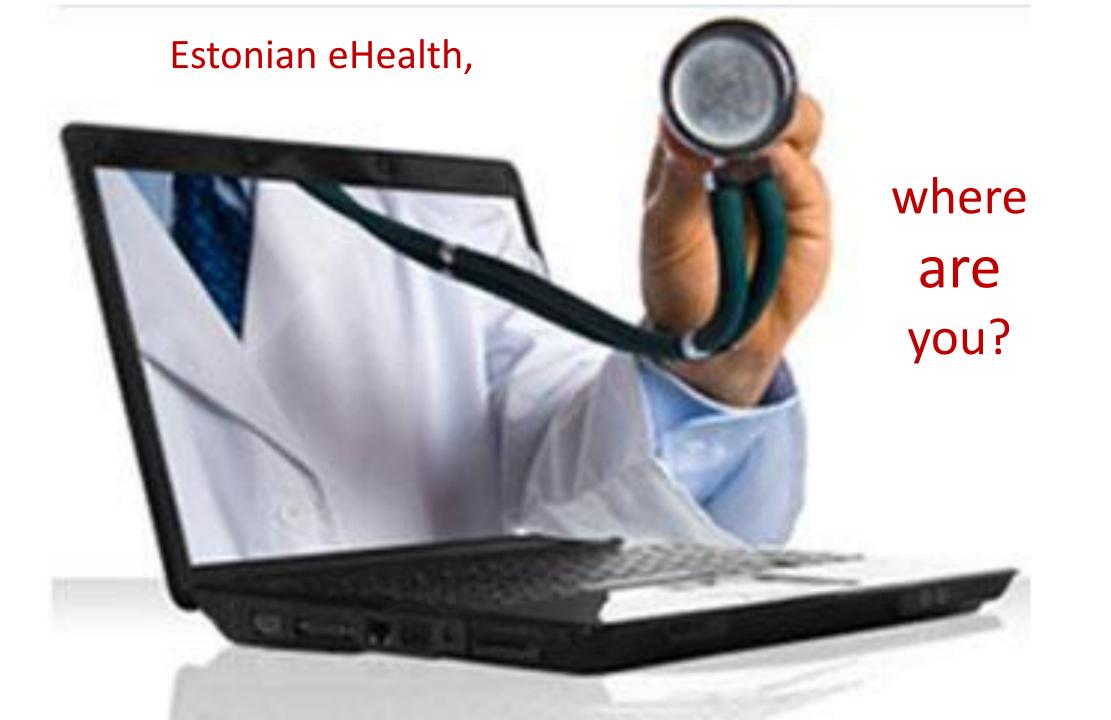


### 90-s. Local systems, focus on insurance invoices



## 2000 – 2010 health information exchange, focus on health data

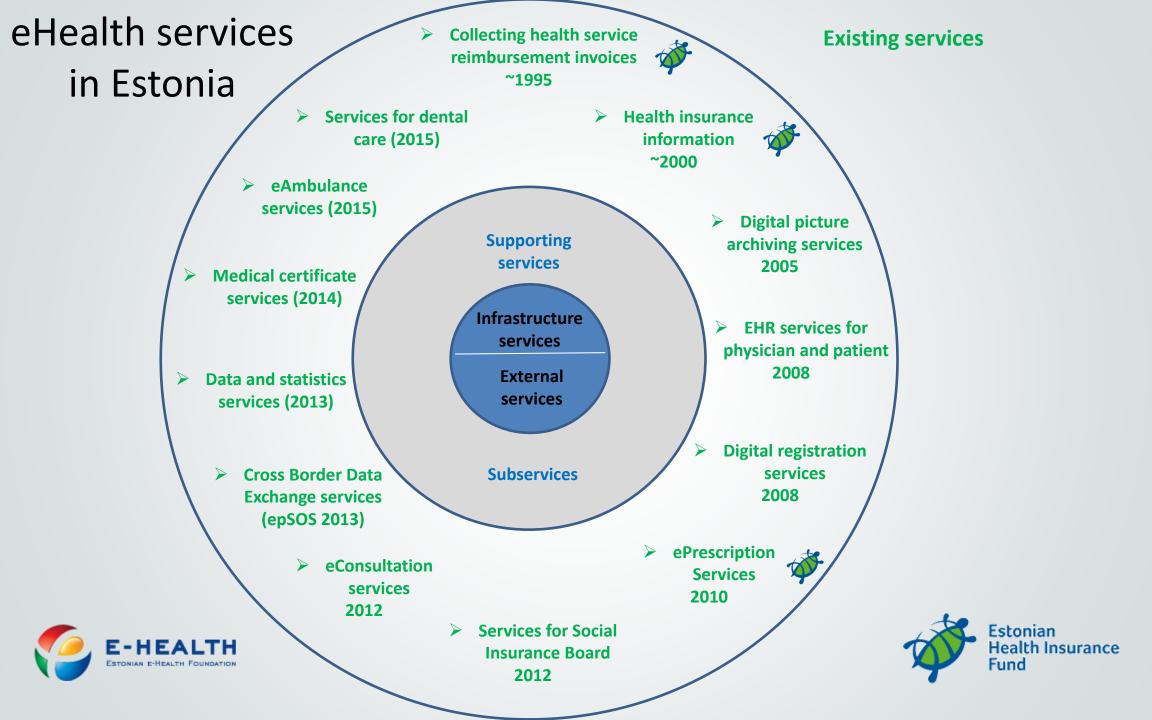




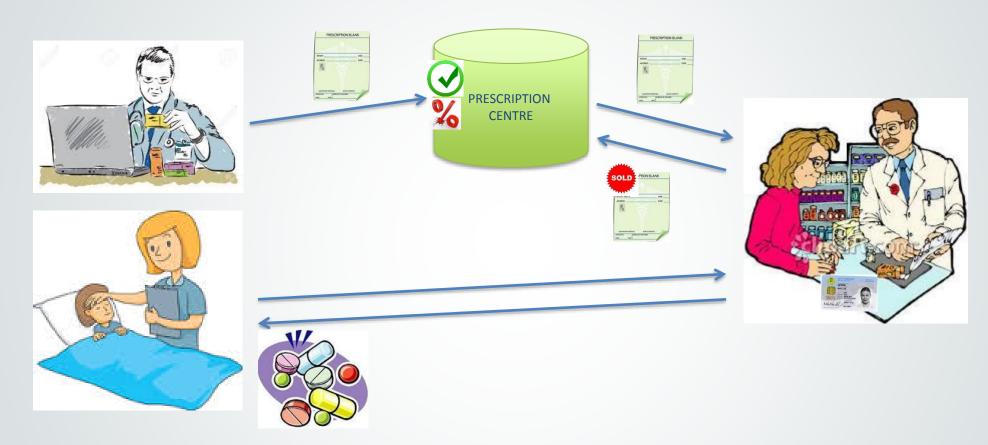
#### Laws that regulate eHealth area



- 1. Health Care Services Organisation Act;
- 2. Statute of Health Information System (governments Statute no 131 August 14<sup>th</sup> 2008);
- 3. The Statute no 53 September 17<sup>th</sup> 2008 of Ministry of Social Affairs on The Composition of Data, Conditions and Order of Maintaining of the Documents Forwarded to the Health Information System;
- 4. Data protection law;
- 5. Public Information Act.
- All healthcare providers must send data to Health Information System
- Access only to licensed medical professionals (other persons have access to personal data in the HIS if such right arises from law)
- ID card for authentication and digital signature
- Patient has the right to close his/her own data collected in the central database (optout)
- Patient can access their own data (Patient's Portal)
- Patient can declare their intentions and preferences
- Patient can monitor visits to their HIS. (All actions will leave secure trail).

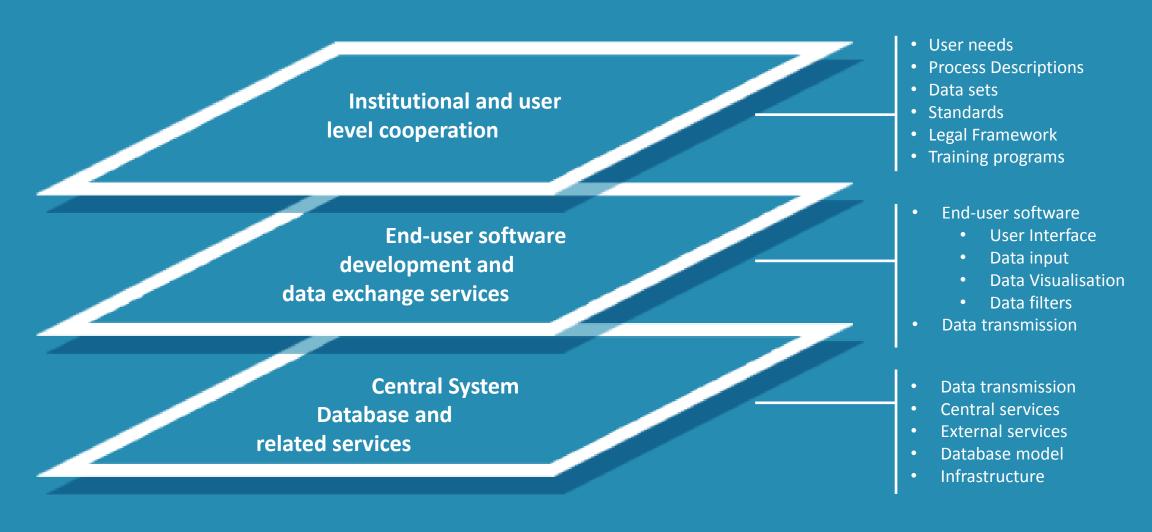


### ePrescription



https://www.youtube.com/watch?v=m9rTZM2kj78

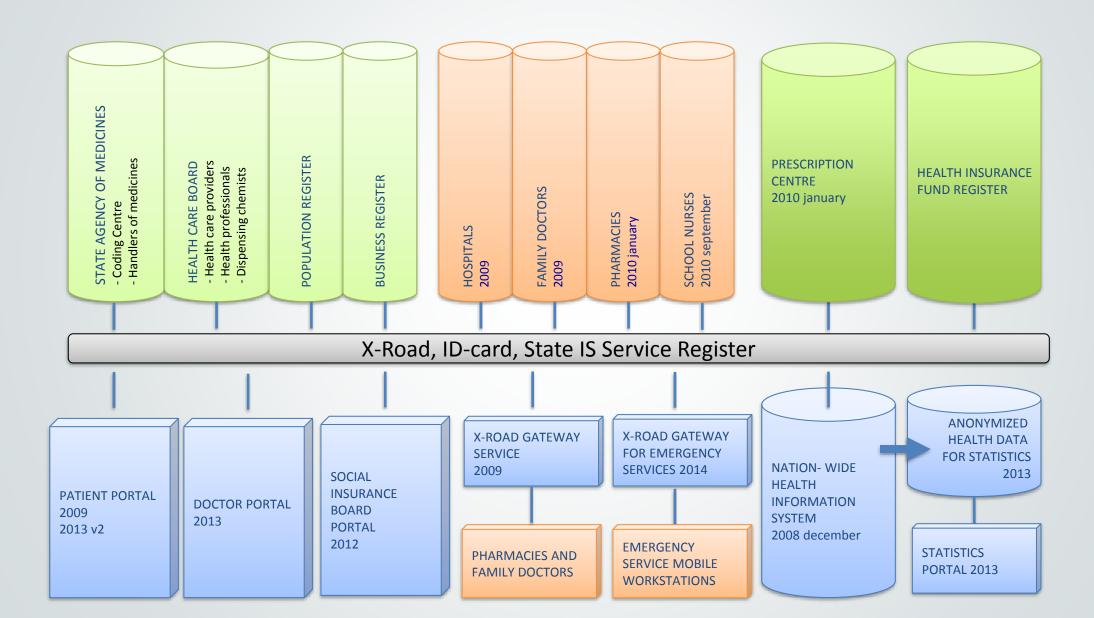
#### Three-layer development model of Estonian Health Information System



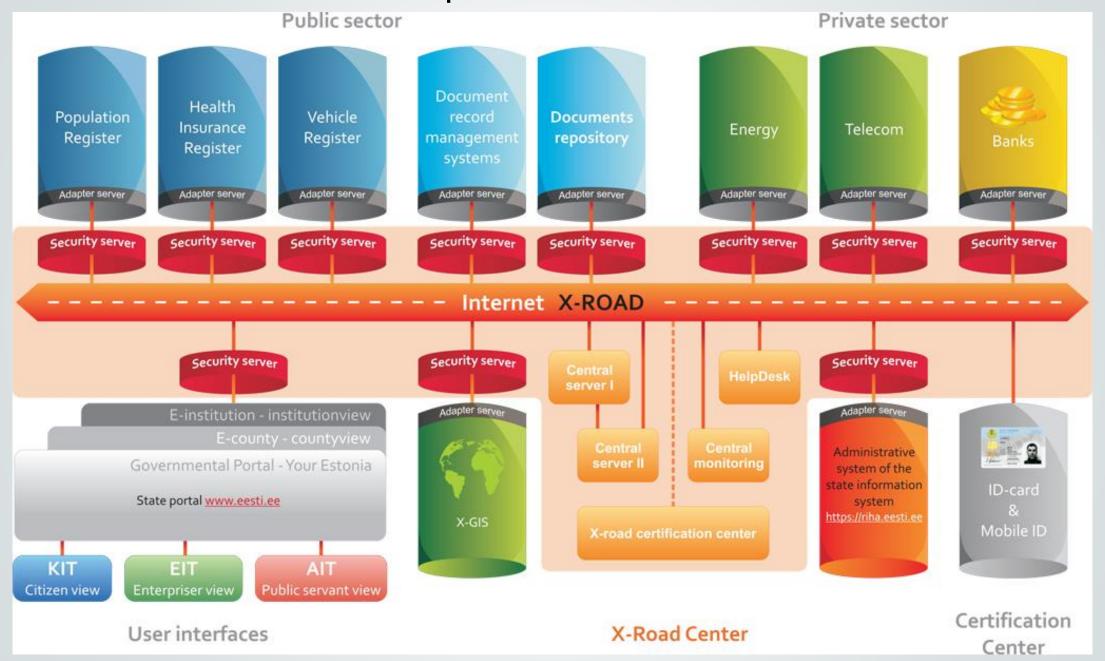
### Major architectural decisions of HIS

- Integration through Central system
  - Opt-out policy in form "patient can close data from doctors"
- XML based HL7 v3 (extended) messages
- Documents are kept in XML format (HL7 CDA R2)
- All identifiers have OID-s
- Only final versions of clinical documents are sent into central system
- Reuse of national infrastructure
  - ID card for authentication and digital signature
  - Xroad for secure communication

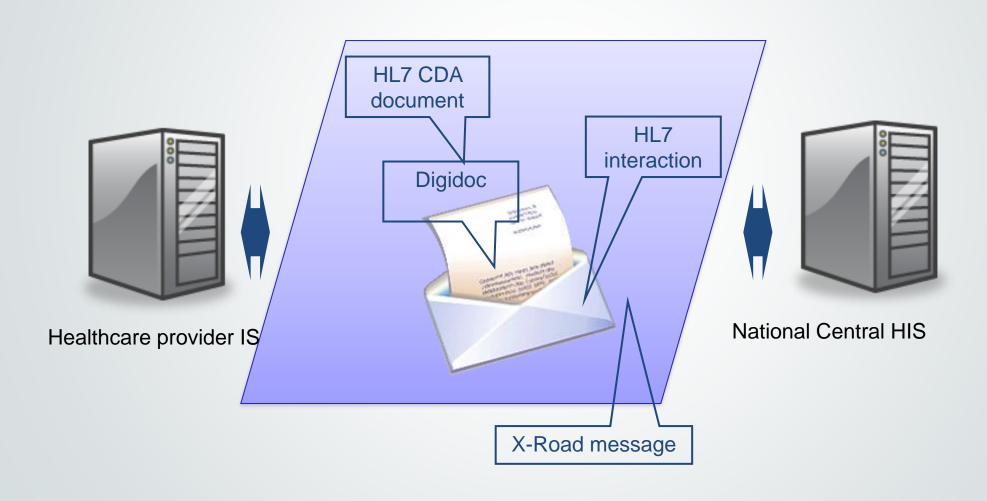
### Estonian eHealth architecture



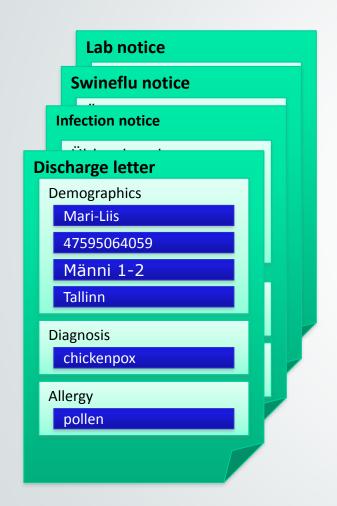
#### eHealth copies e-state architecture

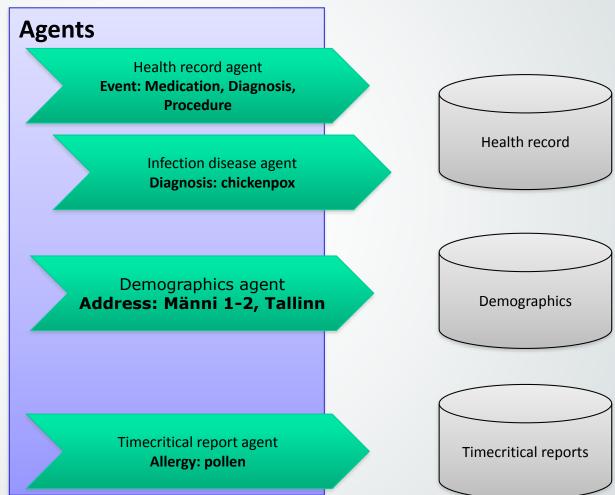


### HIS integration through X-Road

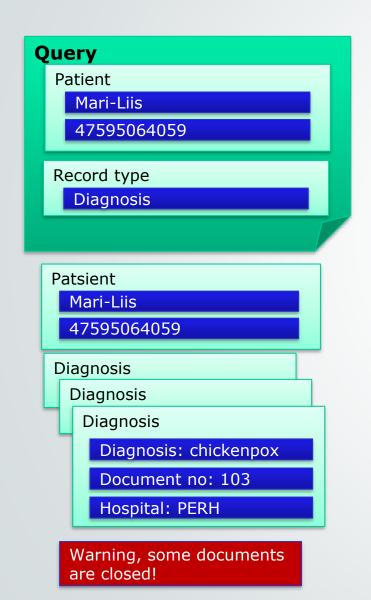


### Document processing





### Query processing







### **SECURITY & AUTHENTICATION**



# The 6 main principles "6 whales" of security of Estonian eHealth system

- 1. A secure authentication of all users with ID-card or Mobile ID
- 2. Digital signing or stamping of all medical documents
- 3. A maximum accountability (transparency): all actions will leave an unchangeable (and unremovable) secure trail
- Coding of personal data: separating of personal data from medical data
- Encrypted database that allows to remove the confidentiality risk from the technical administrators
- Monitoring of all actions together with the corresponding countermeasures (both organizational and technical)











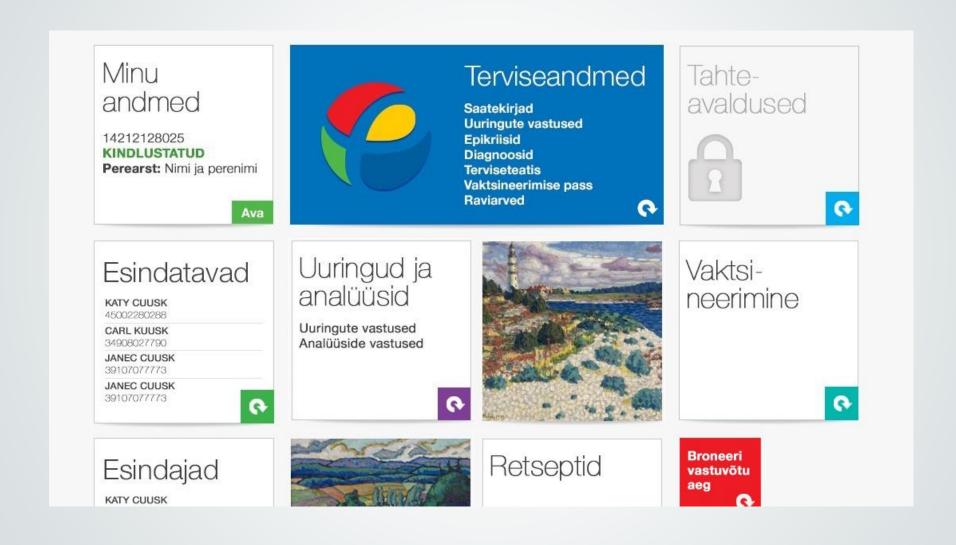
### STANDARDS



### Standards

- HL7 v3 and DICOM (Picture Archive)
- International classification: ICD-10, LOINC, NCSP, ATC
- Estonian eHealth's OID registry
- Estonian eHealth classificators
  - Published in publishing centre <a href="http://pub.e-tervis.ee">http://pub.e-tervis.ee</a>
  - Classificators are regulated by government act <a href="https://www.riigiteataja.ee/akt/12910889">https://www.riigiteataja.ee/akt/12910889</a>

#### Patient portal new design (live 2013 june)



#### Minu e-tervis 6

Portaalis "Minu e-tervis" näed Sa oma terviseandmeid, saad esitada tahteavaldusi, määrata endale esindaja(d) ning teha toiminguld isikute eest, kes on määranud Sind enda esindajaks.

Kõkide tekkivate küsimuste või tehniliste probleemide korral pöördu Eesti E-tervise 3A kasutajatoe poole telefonili +372 894 3943 (tööpäeviti keli 9-17) või elektronposti aadressii <u>abi@e-tervis.ee</u>. Samal elektronposti aadressii ootame Sinu

Samai elektronposti aadressii ootame Sinu ettepanekuid edasiste arenduste osas, mis altaks muuta portaali muoavamaks ning kasulikumaks.





#### Tervise infosüsteem

Tervise infosüsteemis palknevad terviseandmed, mis on tervisholuteenuste osutajad esitanud Sinu kohta. Sila kogutakse kõige olulisem meditsiiniline informatsioon ning see on portaali vahendusel kättesaadav ainult Sinu arstidele ning Sulle.

Loe edaal

#### Turvalisus

Andmete turvalisus on ülkähtis, igast tegevusest jääb järele jälg.

Loe edasi



#### Eesti E-tervise Sihtasutus

Olerigiised e-lahendused tervisholus. Log edani

#### Olulised teeviidad

Veebliehed, kust lelad tervisega ja tervisholukorraldusega seotud infot süstematiseerituit.

Loe edasi

#### Õigusruum

Tervise infosüsteem ja portaal "Minu e-tervis" lähtuvad tegevuses Eesti seadustest ning Euroopa Liidu õigusaktidest.

Loe edasi

#### SUSTAINS

SUSTAINS on portaall arendust toetav projekt, mida rahastab Euroopa Komisjon.

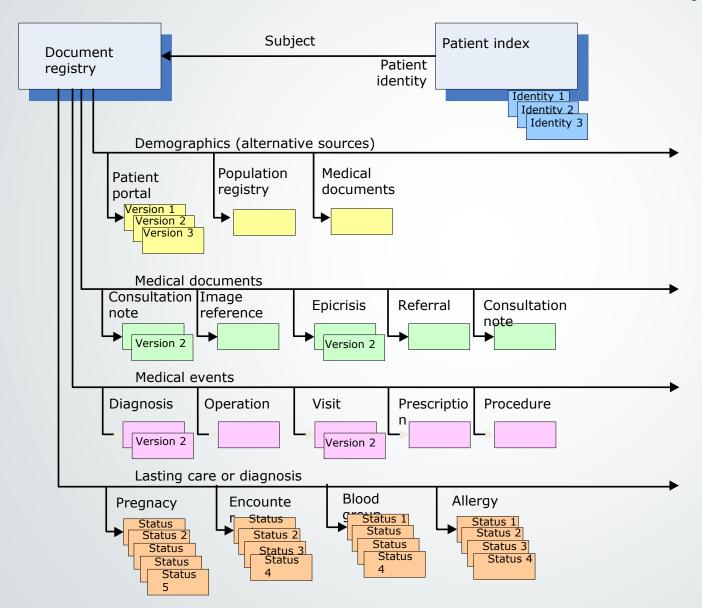
Loe edasi



### Acceptance

- ePrescription covers 100% of issued prescriptions. 98% are prescribed digitally, remaining 2% are entered in pharmacy.
- Over 95% of Hospital discharge letters are sent to the central DB.
- Ambulatory case summaries sending
  - No certain rules for sending ambulatory case summaries!
- 1 348 468 person have documents

### Data in Health Information System

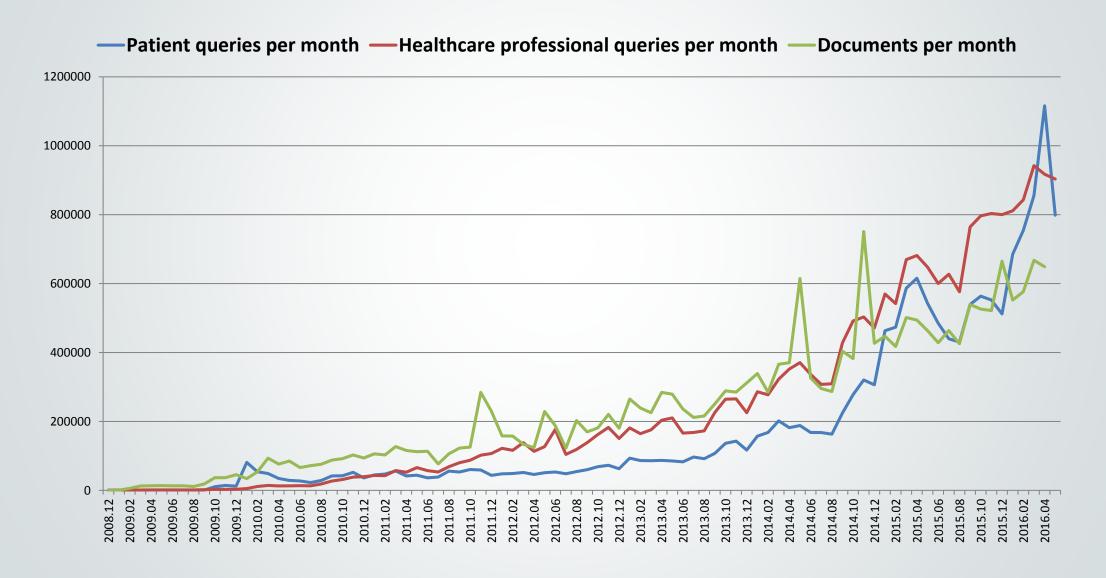


### Documents and events in HIS 30.05.2016

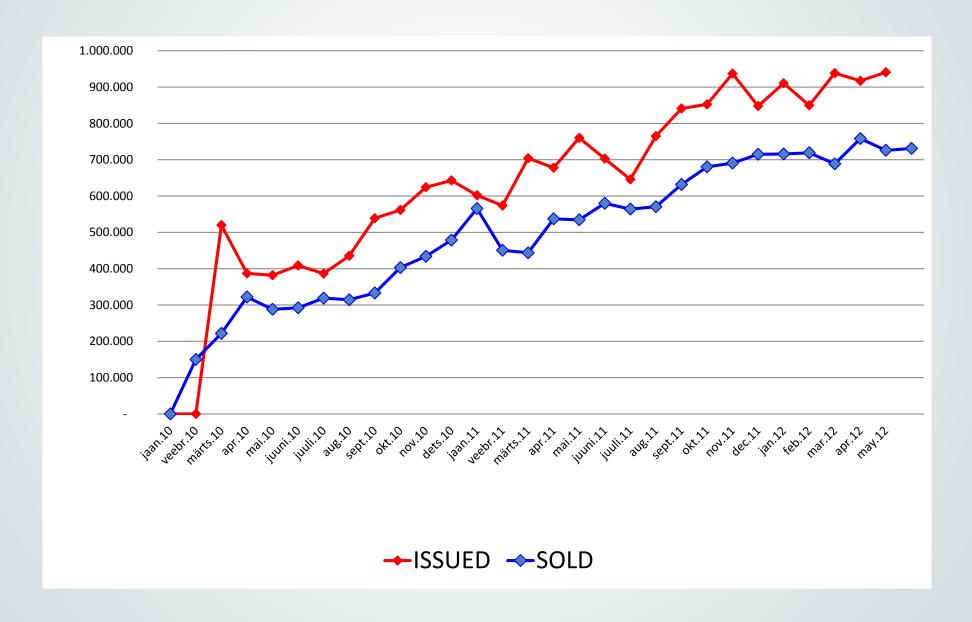
Document type	Count	Even
Document type	Count	LVCII
Out-patient consultation notes	12 441 200	Procedu
Referral answer	5 615 987	Analysis
In-patient consultation notes	1 487 551	Diagnosi
Referral	427 258	Encounte
Immunization notification	345 611	Case
Children Health check notifications	300 898	Observa
Daycare consultation notes	213 418	Immuniz
Emergency care summary	191 852	Surgery
Home nursing summary	3 968	
Total	21 027 743	

<b>Event type</b>	Count
Procedure	119 454 936
Analysis	57 026 835
Diagnosis	25 576 308
Encounter	24 352 899
Case	16 435 472
Observation	15 604 410
Immunization	1 064 996
Surgery	670 828

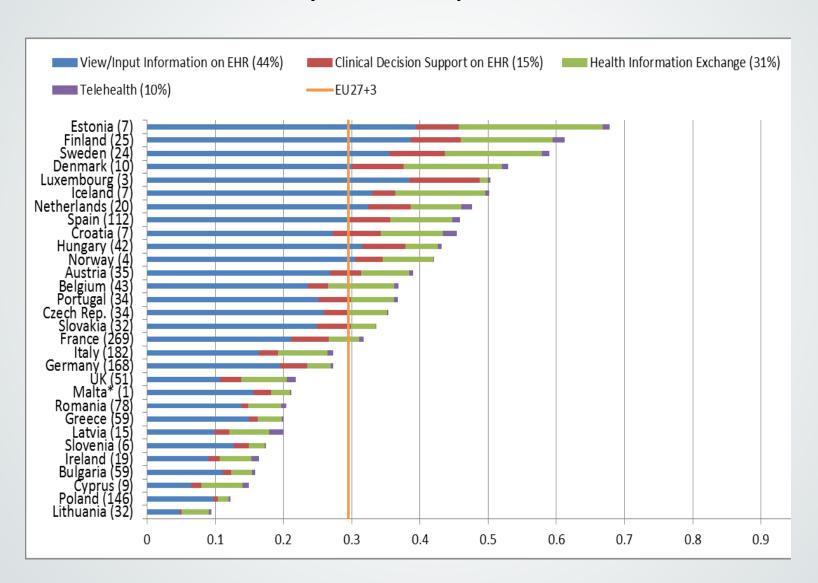
### HIS usage per month



### **ePrescription**



# European Hospital Survey: Benchmarking Deployment of e-Health Services 2012 The Availability and Use Composite Indicator



Estonian eHealth,

where

do you

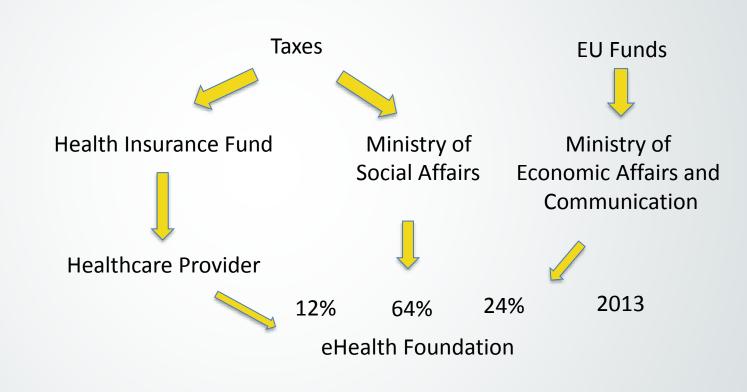
get the

money?



### eHealth Foundation financing

Year	<b>Expenditure (€)</b>
2005	6 853
2006	259 944
2007	462 193
2008	1 009 156
2009	1 178 362
2010	1 433 602
2011	1 834 204
2012	3 048 636
2013	3 293 680



Without EU financing 1/3 from HCP-s and 2/3 from Social Ministry



### EU funded projects

#### Estonian eHealth Foundation

- Electronic Health Record (1.6 mln €)
- Digital Registration (0.2 mln €)
- Digital Images (0.2 mln €)
- Activity surveillance module (0.4 mln €)
- Statistics module (0.4 mln €)
- Authentication and authorization module (0.2 mln €)
- eLaboratory (0.2 mln €)

#### Health Insurance Fund

Digital Prescription (0.24 mln €)



### Lessons learned

- Resources were planned only for central development.
- Usability is important. Developing process has to include medical competence – users
- Data quality is important
  - Complete and quality data give value
- Balance between security and usability
  - PIN for every document ...

#### Digital stamp for family doctors



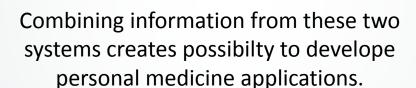


### Personalized medicine

... proposes the customization of healthcare - with medical decisions, practices, and/or products being tailored to the individual patient. The use of genetic information has played a major role in certain aspects of personalized medicine, ...



Over 50 000 donors in database



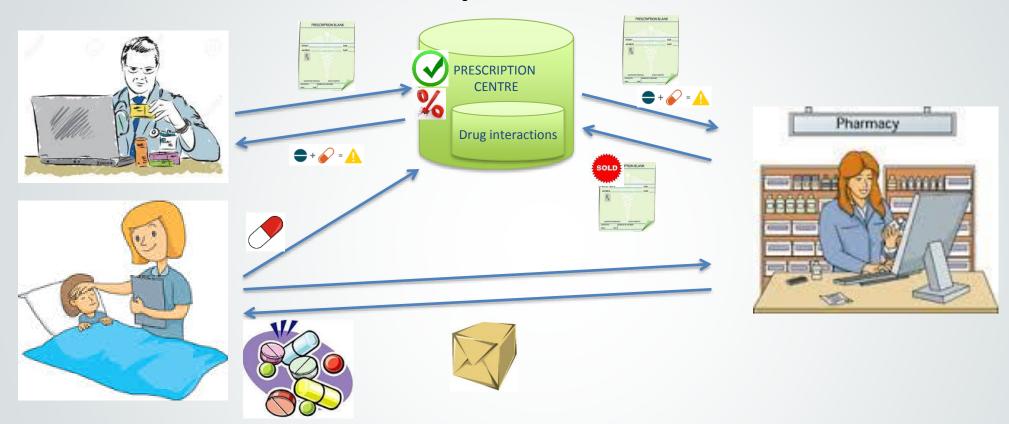


Over 1 000 000 citizens have documents in database

### Estonian E-health strategy 2020

- 5 Focus domains
  - Quality of health data and infrastructure
  - Orientation to person and personalized medicine
  - Integral case handling and organizational cooperation
  - Performance and quality of services evaluation / analytics
  - Telemedicine services
- Workgroups services, architecture, justice, research and development, international cooperation, management and financing

### ePrescription evolution



Drug interactions
Electronic ordering
Fast delivery
Usage registration (sensor-enabled pills?)

## Questions?

# **THANK YOU**

Artur Novek Estonian eHealth Foundation