



ELGA

Austrian National eHealth Infrastructure Use-cases, Policies and Architecture



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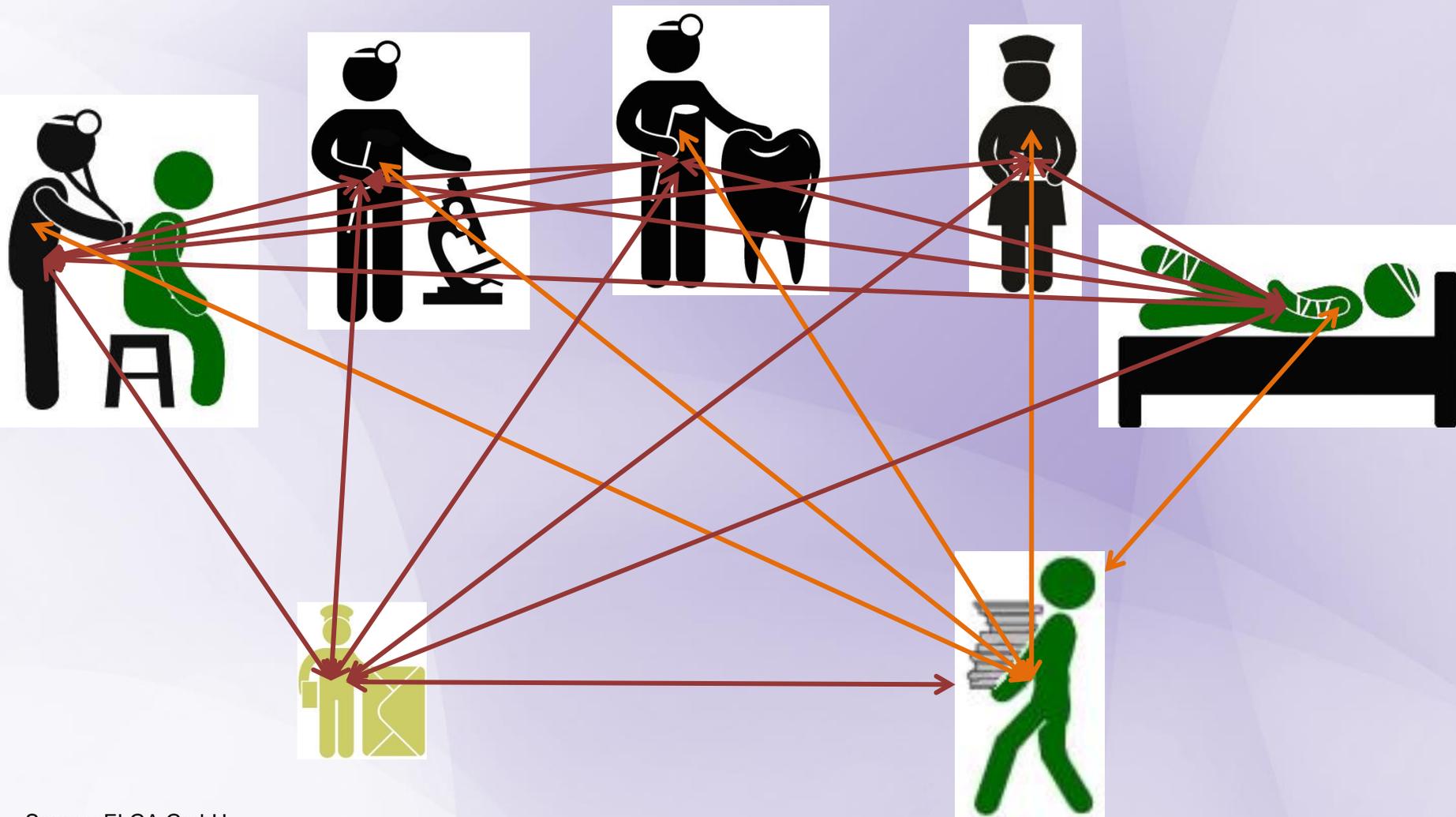
IHE | Integrating
the Healthcare
Enterprise

- Population: **8,36 Mio** (equipped with e-card)
- Hospitals: **266** (containing 64.000 beds)
- Medical Doctors in hospitals: **21.700**
- Care personnel: **82.600**
- General practitioners: **6.400**
- Specialists: **19.200**
- Dentists: **4.600**
- Doctors in training: **6.900**
- Midwives: **1.800**
- Pharmacies: **2.250**
 - (Public pharmacies and pharmacies in hospitals and with general practitioners)
- **Financing by Federal entity, Provinces and Social insurances**



**The 3 owners
of ELGA**

Information / communication without ELGA



Source: ELGA GmbH

Information / communication with ELGA



**Medical information,
whenever and wherever needed**



- **Current use cases (operational)**
 - Identification of patient and access to demographic data
 - Authentication of health service provider and patient
 - Access control and logging
 - **ELGA app 1: e-Reports:** Sharing clinical documentation
 - Discharge Summary (Physician, Nursing), Radio report, Lab report, Nursing report
 - **ELGA app 2: e-Medication:** Sharing medication data (clinical scope)
 - Aka „Patient’s Medication List“
- **Currently in pilot**
 - e-Immunization: Immunization registry for all citizens
 - Exchange of Images: Sharing clinical images
- **Currently in design phase**
 - e-Prescription (reimbursement scope)
 - e-Reports: Outpatient report

ELGA - Base principles

All citizens are “in” by default
(Opt-out possible)

All ELGA applications designed for “full coverage”

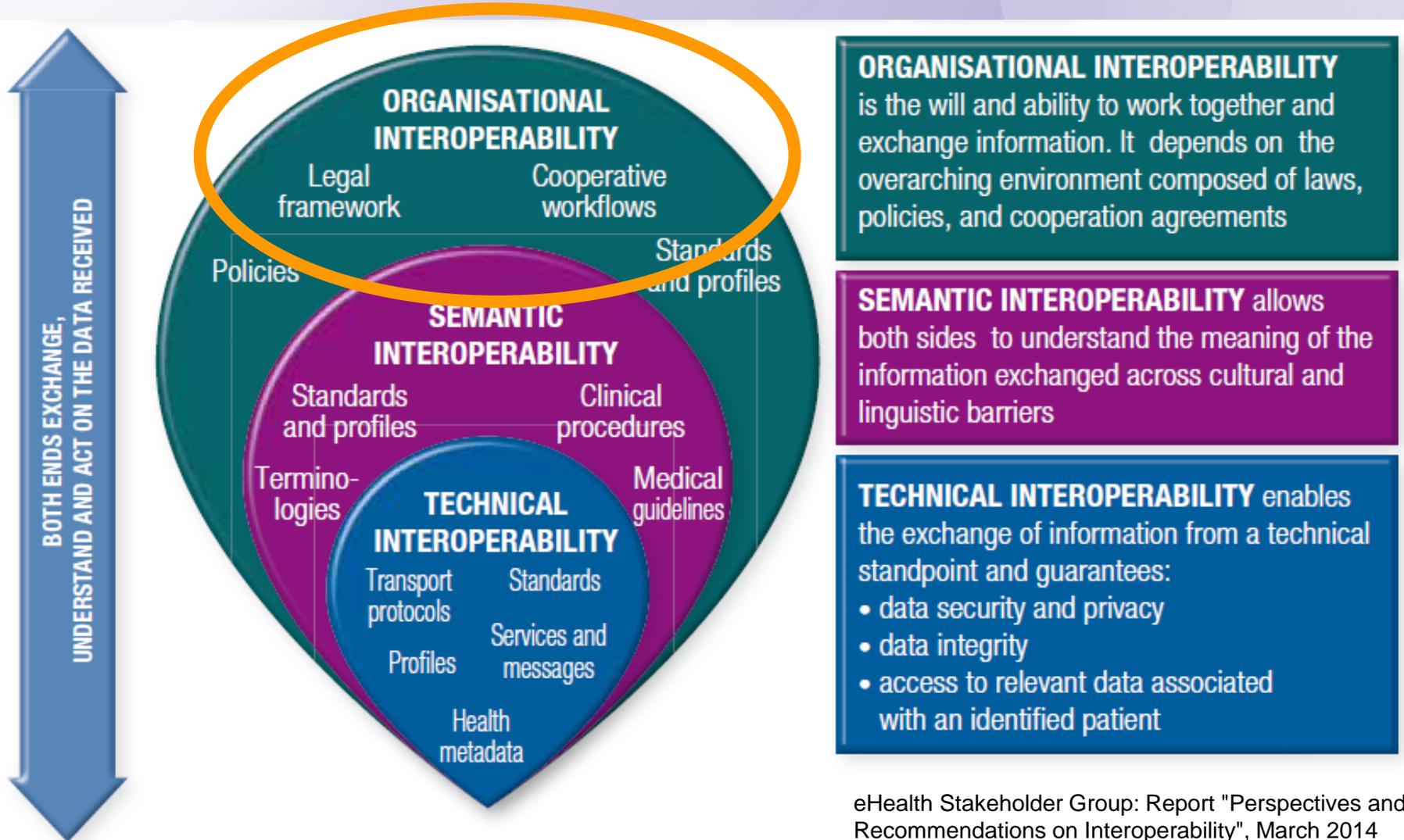
No pilots, but step-wise rollout

ELGA connects all facilities

It's the national e-Health
“backbone infrastructure”

No portals!
Systems connected natively

Layers of Interoperability

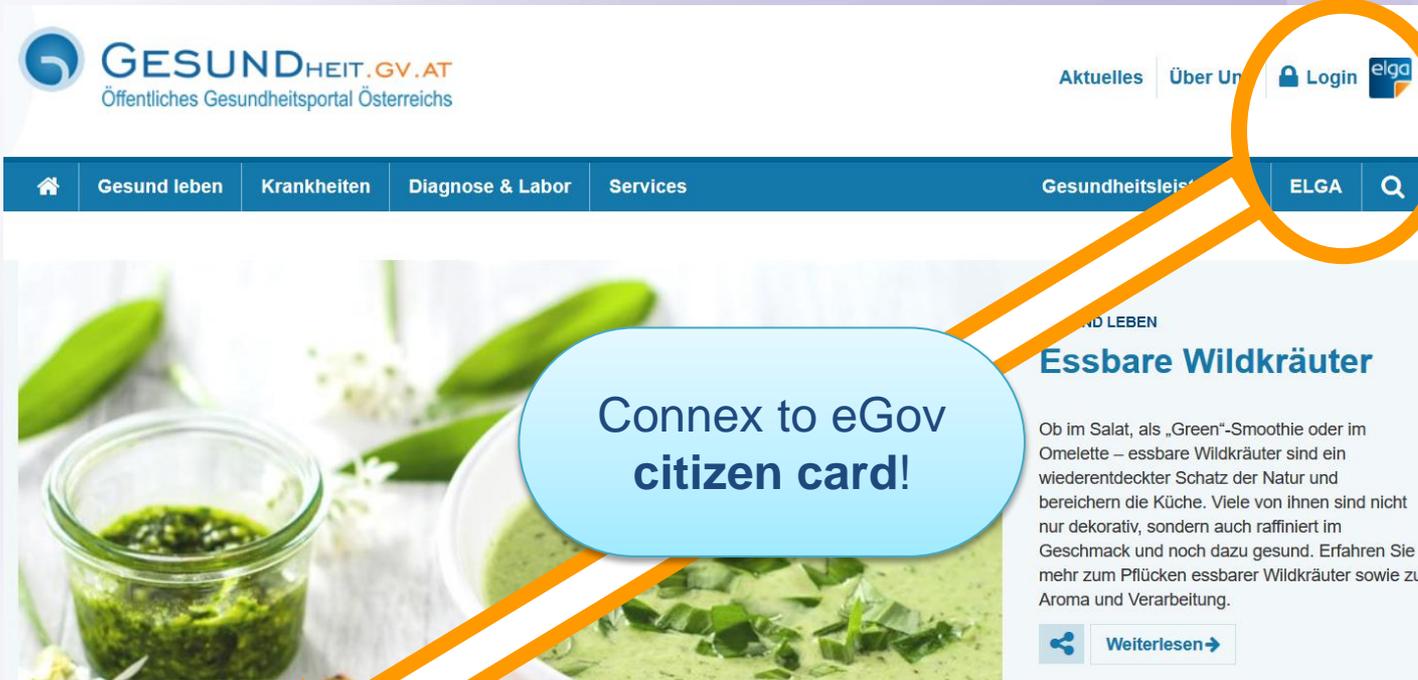


eHealth Stakeholder Group: Report "Perspectives and Recommendations on Interoperability", March 2014

http://ec.europa.eu/newsroom/dae/document.cfm?doc_id=5168&usg=AFQjCNEkGJHkR4TyyycRbj5FmDif3T7YPA&sig2=WHoQC4xURmGXaJTYt-Mt1A

- Federal ELGA law created in 2013 as legal basis ([Link to ELGA law](#))
- Participation in ELGA of citizens is voluntarily by „Opt Out“ („in“ by default)
 - Objection against the **creation** of data
 - generally or
 - within the individual case of treatment and care (“situative opt-out”)
 - Objection against **access** to data
 - generally or
 - concerning individual applications or
 - for specific HCPs or documents
 - View documents: **Patient can view/download** own documents and medication list
 - View access log: **Patient can view who has accessed** which data at which time
- Participation in ELGA of healthcare service providers is **mandatory**
- Provisions to the quality of documents in ELGA
 - **Only nation-wide harmonized document-types are allowed!**
- Ban on use for (physicians of) insurances, government, employers, etc.
- Timeline: Decision: 2006 - Planning: 2007- 2014 - Rollout: since 2015

This ensures semantic interoperability!



Citizen portal

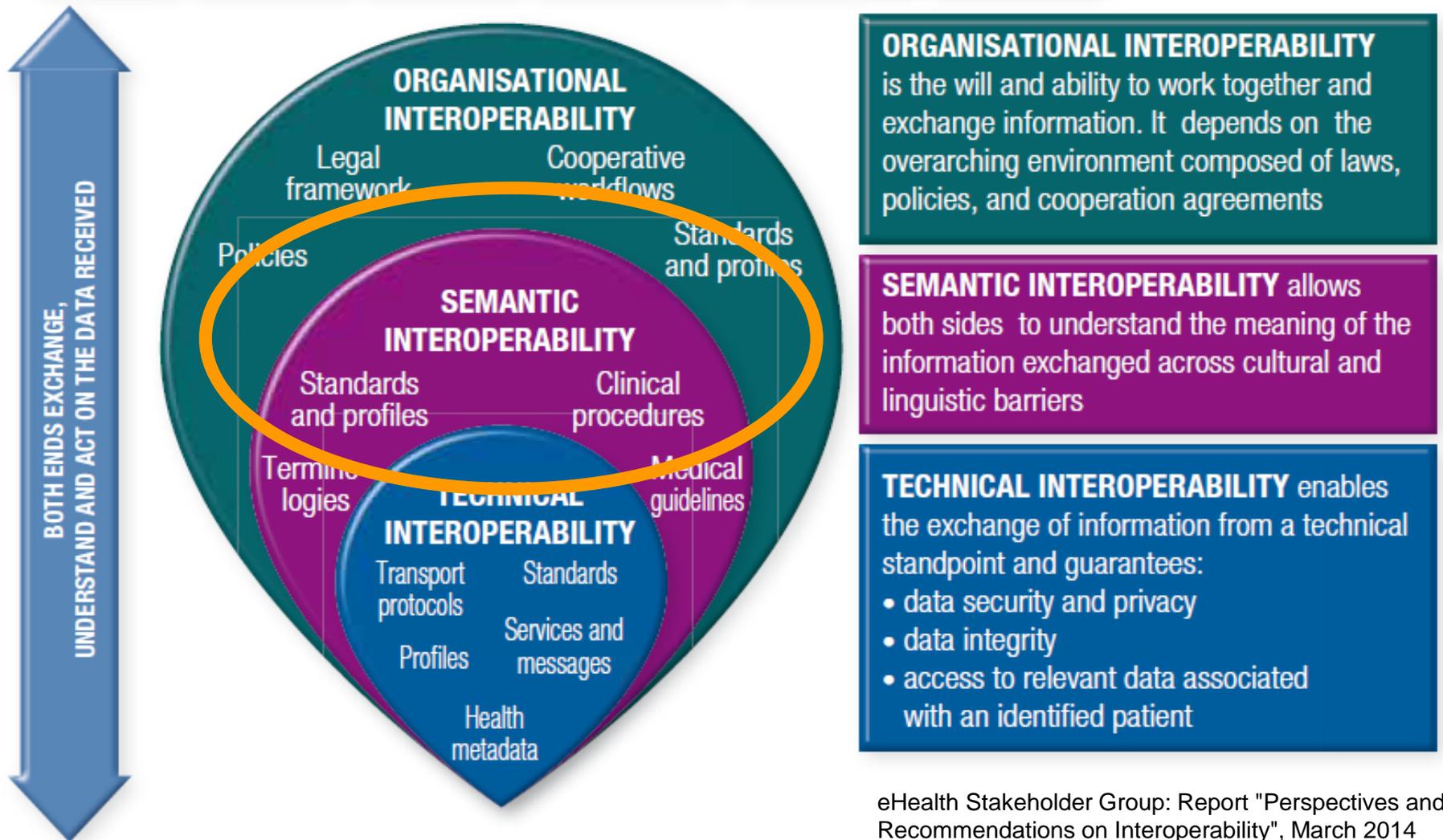
- Common health info
- ELGA info
- Login to ELGA
- Sponsor-free

ELGA portal

- Declare Opt-out
- View ELGA documents
- Manage access rights
- View access log



Layers of Interoperability



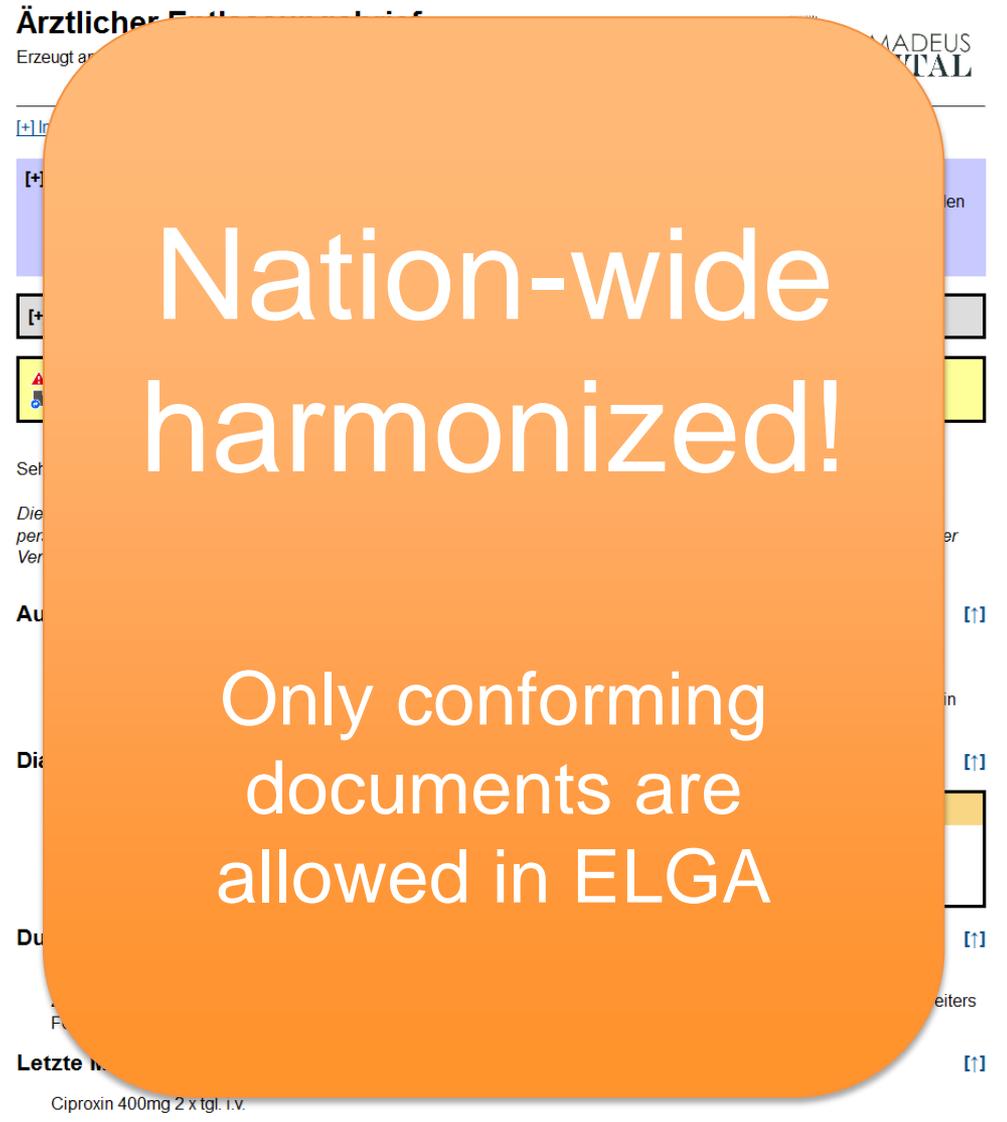
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- **Uniform content and structure**
 - User friendly
 - Quality assured
- **Coded entries combined with narrative/free text**
- **Machine-processable**
 - Faster workflow
 - Automation
 - Decision support

Nation-wide
harmonized!

Only conforming
documents are
allowed in ELGA



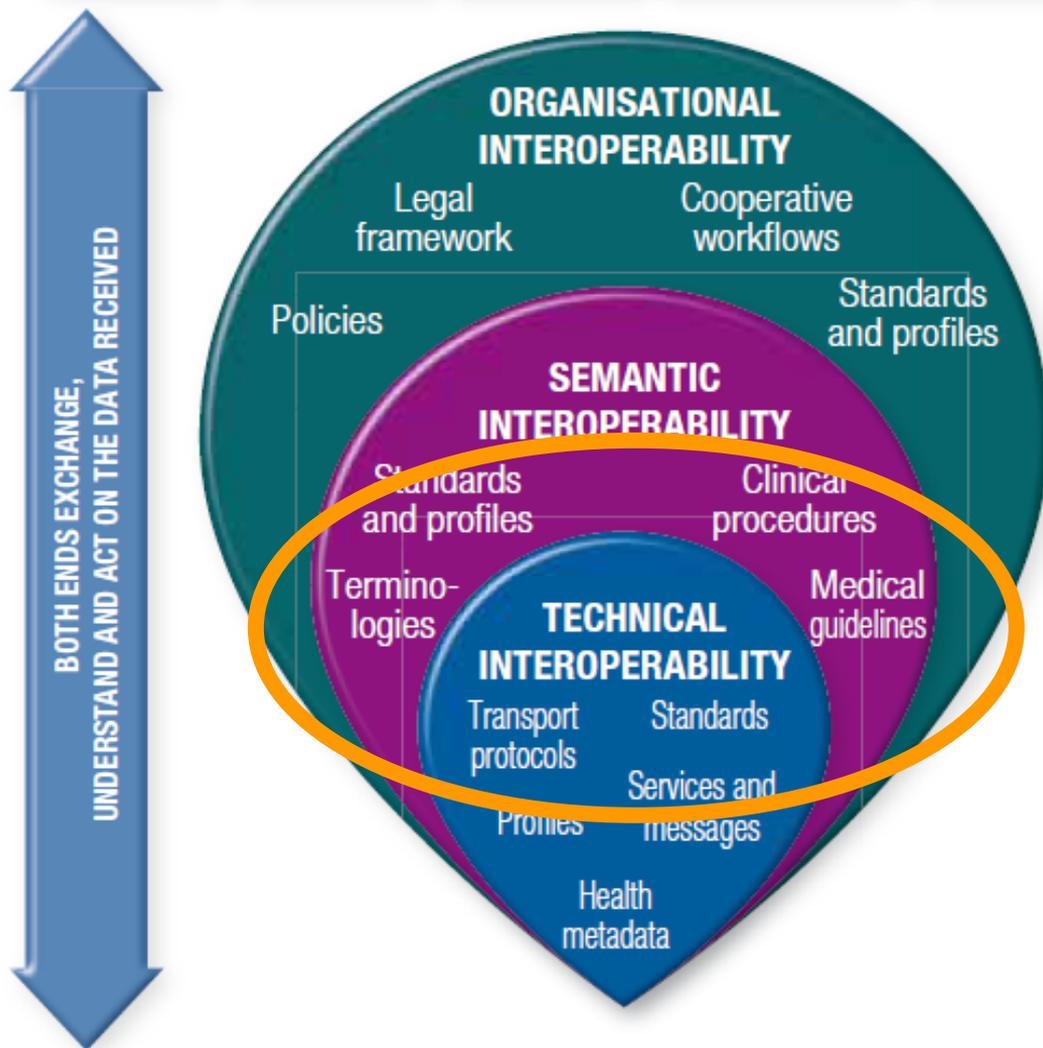
- Information and tools for implementers ([link](#))
 - **ELGA CDA Implementation Guides**
 - XDS-Metadata specification
 - Value Sets (code lists)
 - CDA-Sample Reports (XML)
 - ELGA Referenzstylesheet (XSLT)
 - XML-Schema for ELGA CDA (XSD)
 - Conformance Testing (Schematron)
 - Styleguides
 - :
 - OID Registry ([link](#))
 - CDA-Online-Validator ([link](#))
 - Terminology Server ([link](#))

Stepwise implementation
of semantic interoperability

EIS Basic/Structured
EIS Enhanced
EIS Full support

Usability of ELGA-functions within
PHR/EHR-Systems is a critical
success factor!

Layers of Interoperability



ORGANISATIONAL INTEROPERABILITY

is the will and ability to work together and exchange information. It depends on the overarching environment composed of laws, policies, and cooperation agreements

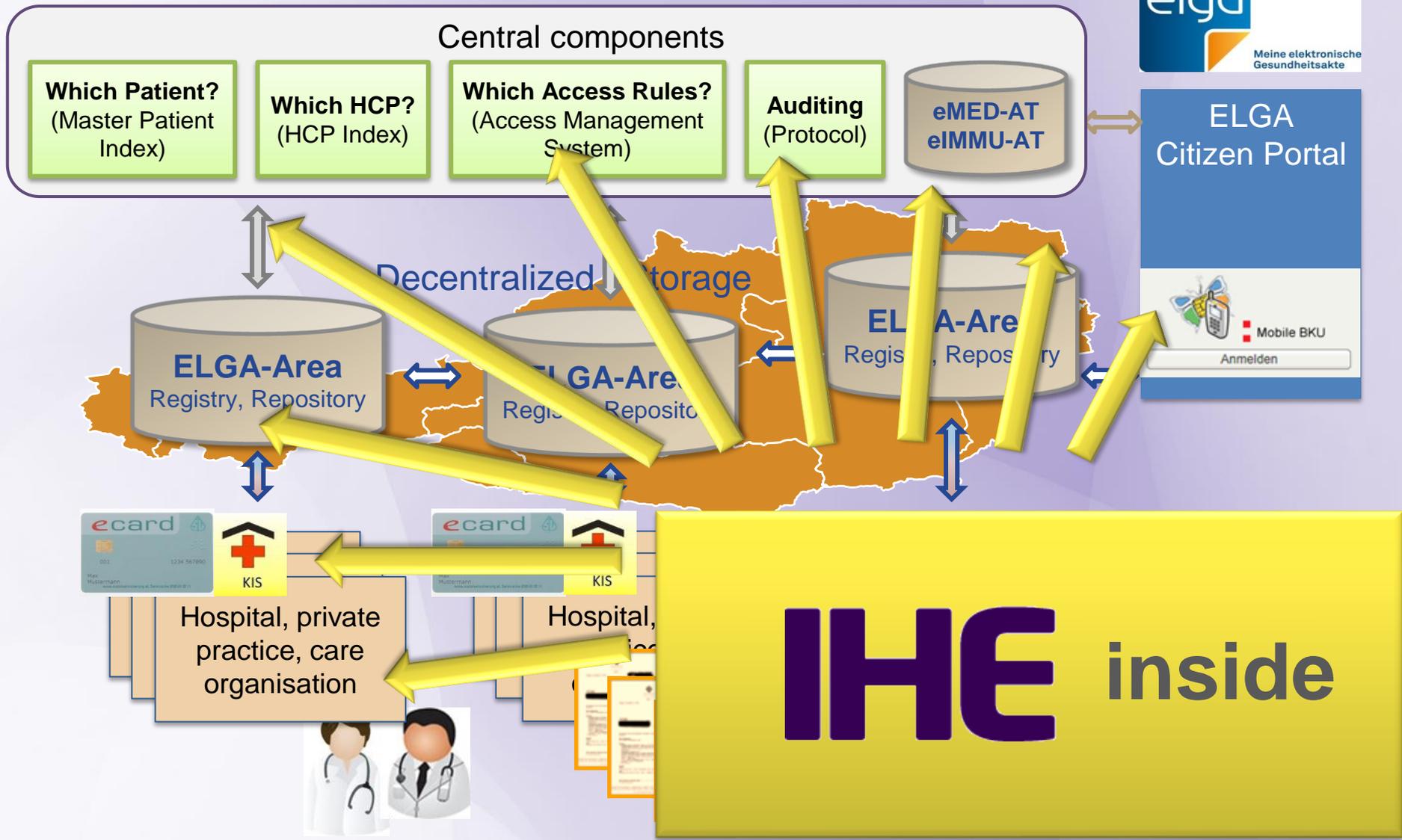
SEMANTIC INTEROPERABILITY allows both sides to understand the meaning of the information exchanged across cultural and linguistic barriers

TECHNICAL INTEROPERABILITY enables the exchange of information from a technical standpoint and guarantees:

- data security and privacy
- data integrity
- access to relevant data associated with an identified patient

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- IHE Profiles used:
 - Patient identification and demographics: **PIXv3/PDQv3**
 - Sharing clinical documents: Cross-Enterprise Document Sharing (**XDS.b**), **XCA**
 - Sharing medication information: **CMPD, PRE, DIS, PADV, PML**
 - Access control and audit: **ATNA**
 - Healthcare Provider Authentication: **XUA**
 - Discharge Summaries and Nursing Reports: **XDS-MS**
 - Laboratory reports: **XD-LAB**
- International standards used (endorsed by IHE profiles):
 - Transport standards: W3C (SOAP, HTTP), TLS, OASIS SAML, WS-Trust
 - OASIS ebXML for Cross-Enterprise Document Sharing
 - **HL7® CDA®** for nation-wide harmonized clinical documents
 - HL7® v3.x for patient-identification related communication
 - **DICOM** – international imaging standard (WADO)
- Terminologies & classifications used:
 - **ICD-10, LOINC, SNOMED-CT**, Austrian terminologies (medicines, etc.)

■ Coverage of ELGA

■ e-Report:

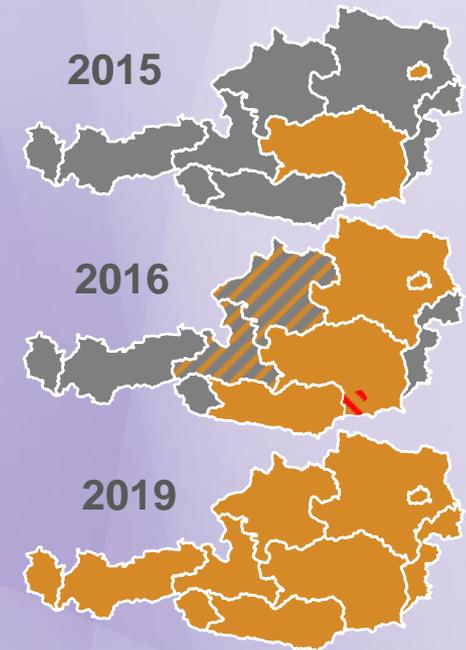
- Gov hospitals: 97,5% (89% of total beds)
- Other hospitals: 25%
- Selected PCPs reading

■ e-Medication:

- PCPs: 87%
- Pharmacies: 53%

■ Patients in ELGA

- 7,6 M patients registered in ELGA since go-live
- 99,5% unique ID coverage (non-citizens get an ID)
- 3% opted out (generally)
- 0,62% opted out (situative)



- **Stage 1: eHealth Digital Service Infrastructure (eHDSI)**

- Cross-border exchange of ...
 - Patient Summary
 - e-Prescription

Future

Design phase



- **Stage 2: EC Recommendation on an European EHR Exchange format**

- Further extend eHDSI by ...
 - Discharge Summary
 - Radiology report and -images
 - Lab reports

Available

Pilot phase

Available

Available

- **Future use-cases / applications**
 - **Share more document types (“more e-Reports”)**
 - Pathology report, Patient Summary, Advanced directives, ...
 - **e-Referral**
 - **Tele-consultations** and **Tele-monitoring** (device communication)
 - All use-cases needed for engagement of the citizen by **mHealth**
 - Appointments, Doctor/Patient communications, Mother/Child management and process
- **ELGA “Plus”**
 - Use infrastructure for provider-specific / regional applications (virtual network)
- **Main focus on convergence of Clinical- and Administration processes!**

- **ELGA**
 - Austrian Citizen Health portal: www.gesundheit.gv.at
 - ELGA Homepage: www.elga.gv.at



- **European Union**
 - eHealth Stakeholder Group: Report "Perspectives and Recommendations on Interoperability"
 - [Stakeholder Group Report](#)
 - European Commission recognizes 27 IHE profiles that should be referenced in public procurement documents
 - [EC Recommendation](#)
 - EC Recommendation on a European Electronic Health Record exchange format
 - [European Electronic Health Record exchange format](#)

IHE

Integrating
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Changing the Way Healthcare CONNECTS

<http://www.ihe.net>



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