

French boost European telemedicine

French doctors will be entitled to bill the government for some medical services provided over the phone at the same rate that they invoice for services provided in their offices or hospitals, under new French legislation aimed at promoting the use of telemedicine and redressing regional inequities in the availability of medical services.

“This mode of exercise [telemedicine] is a response to the medical demography inequalities: where health care resources may be more rare, mainly in isolated areas (islands, rural areas, mountain areas, suburbs, prisons),” a spokesperson from France’s Direction générale de l’offre de soins (DGOS), writes in an email, while insisting on anonymity.

“It may assure the provision of quality care and equal access to healthcare for all citizens. Telemedicine can also respond to the issues of increasing life expectancy, which generates a growing demand for health care from older people, often weakened by the accumulation of chronic diseases and aging effects.”

“Each region will set its priority applications based on identified needs: indeed, the needs for telemedicine are not the same from one region to another; regional health agencies will therefore assess priority needs, namely those which are consensual to the health professionals,” the spokesperson added.

Physicians will be entitled to bill for telemedicine services in four situations: consultations without the physical presence of the patient, in which the patient may be alone or accompanied by another physician in loco, in order to clarify clinical data or collaborate in the physical examination; the exchange of medical information between two physicians or specialists; medical follow-ups; and during “teleassistance” of a physician performing a medical procedure (www.legi-france.gouv.fr/affichTexte.do?cidTexte=JORFTEXT000022932449&dateTexte=&categorieLien=id).

The move is expected to provide a



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Some hospital administrators expect that a recent decision to fund medical services provided by physicians over the phone will transform French medicine.

major boost for remotely administered medicine, which has hovered on the fringes of health care for decades but has not become widespread because of technological difficulties, the indifference of the medical profession and lack of reimbursement.

A World Health Organization survey indicates that between 30%–50% of European nations have some manner of telemedicine plan (www.who.int/goe/data/en/) but even those have spotty reimbursement policies. “Certain services, but not all, are reimbursed in some countries but it largely depends on the national or regional authorities and the public health priorities of the country,” Nicole Denjoy, secretary general of the European Coordination Committee of the Radiological, Electromedical and Healthcare IT [Information Technology] Industry writes in an email.

Some hospital administrators expect the move will transform French medicine. “Telemedicine is much more than a new tool, it also represents new working methods, new organizational patterns, new concepts of relationship with

the patient, to be implemented in a generalized sense,” Dr. Pascal Staccini, director of the department of medical informatics at the University Hospital in Nice, France, writes in an email.

Asked if telemedicine raises new ethical and liability issues, Staccini wrote: “The French Order of Physicians is actively working on promoting the education of health professionals in what concerns the deontological rules regarding the protection of clinical data and the accuracy of telemedical work.”

For its part, the French Medical Association appeared entirely onside with the government measures, stating in a press release that the new law “will allow telemedicine to get to more isolated zones, serving the individual interests of our patients and also in a perspective of public health” (www.conseil-national.medecin.fr/article/t%C3%A9l%C3%A9m%C3%A9decine-le-cnom-poursuit-son-implication-1029).

Other European organizations also welcomed the initiative. “This is intended to provide access to doctors more easily and speedily in areas where

doctors are in short supply. Scandinavian countries have led the way in this type of remote consultation, and new initiatives, such as patient-based telemonitoring, have improved the variety of health care available. In all cases it is essential that new technology augments, rather than replaces, the doctor-patient relationship. Provided legal and ethical issues — data privacy, confidentiality and consent — are addressed, these measures are to be welcomed,” Dr. Michael Wilks, a mem-

ber of the executive committee of the Standing Committee of European Doctors (www.cpme.eu), writes in an email.

Some international experts also appeared enthusiastic. “Not all questions really require a physician in loco, and/or a physical examination. If this also opens the door for Web-based (secure) teleconsultation services, where patients can contact physicians from their convenience of their home,

and physicians get reimbursed for these services, then this truly a giant leap forward — and this is something which Canadian policy makers should take a closer look at,” Gunther Eysenbach, senior scientist at the University Health Network in Toronto, Ontario, writes in an email. — Ana Luísa Neves MD, Paris, France, and Tiago Villanueva MD, Lisbon, Portugal

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