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Germany unveils a new strategy to "bring healthcare into the 21st century"

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Although Germany's economy ranks among the strongest in Europe, the digitalization of healthcare has long been lagging. While most of the EU countries have already successfully introduced such e-health services as e-prescriptions and electronic health records (EHR), their adoption has been delayed for years in Germany.

The only light that brightened the conservative paper-dominated health sector was the so-called Digital Health Applications (DiGA). As a result of a law introduced in 2019, doctors can prescribe mobile health apps, and statutory health insurers reimburse their use.

This open-minded approach to digital therapeutics was welcomed enthusiastically worldwide. Still, it has not made revolutionary changes for patients – the use of DiGA remains low.

After the recent parliamentary elections in September 2021, the new governing "traffic light" coalition (SPD, FDP, and Greens) promised to change this. German Federal Minister of Health, Professor Karl Lauterbach, announced a comprehensive strategy to be developed. In charge of preparing the



On the 9th of March, the 44-page strategy has been finally released. It will be translated into action within two legislative projects: **the Digital Act**, which improves everyday treatment with digital solutions, and the **Health Data Use Act**, which will open up health data for research.

Among the key goals and deadlines set in the paper are:

- By the end of 2024, the **electronic patient record** will be available for all citizens with statutory health insurance (opt-out approach);
- By 2025, 80 percent of those with statutory health insurance will have an electronic patient record (elektronische Patientenakte, ePA);
- By the end of 2025, 80 percent of ePA users undergoing medication treatment will have access to a new service called "**digital medication overview**" to avoid/limit unintentional drug interactions;
- By the end of 2026, a new institution – **Health Research Data Center** (Forschungsdatenzentrum Gesundheit) – will run at least 300 research projects involving health data;
- The **e-prescription** is to become a binding standard in the provision of medicines on the 1st of January, 2024;
- In the future, **assisted telemedicine** will be offered in pharmacies or health kiosks, especially in underserved regions;
- Treatment programs are to be supplemented with **digital programs**.

There are eight rationales – and expected benefits – behind the strategy. And those are mentioned on the first pages of the document:

Lower mortality. Heart failure is the most common reason for hospitalization. Telemonitoring reduces rehospitalization and mortality rates among patients with heart failure.

Less paperwork. 90 percent of nurses feel overburdened by bureaucracy. For example, electronic records make work easier and save time when monitoring systems document vital signs.

Early recognition of complications. High blood sugar and blood pressure can lead to kidney damage. Digitalization helps to detect the risk of kidney damage in people with diabetes earlier.

Reduced mismedication. 30-40 percent of people over 65 take at least four medicines daily; one in three patients 75+ takes at least eight medicines. Data from the electronic patient records can support automated checks of drug therapy safety and help identify medication risks.

Recognize risks faster. About 5 in 100 women are diagnosed with gestational diabetes during pregnancy. Through digitization, gestational diabetes can be treated earlier for the benefit of mother and child based on available data.

Reduced radiation exposure. Interventional cardiologists and cardiologists have to deal with the increased risk of cancer due to high radiation exposure. Robotic coronary interventional systems can reduce radiation exposure during surgery for the cardiologist by 95.2 percent.



More time for patients. 55 percent of speech therapy practices complain about the shortage of skilled workers. Thanks to time savings through teletherapy, more patients can be cared for.

Access to data for research

Another part of the strategy relates to data processing which will be regulated in the Health Data Use Act.

To provide access to research data from various sources (e.g., cancer registries and health insurance data), a central data access and coordination point will be established (decentralized data storage). Furthermore, the **Health Research Data Center** (FDZ) at the Federal Institute for Drugs and Medical Devices (BfArM) will be further developed. In the future, the research industry will also be able to submit requests to access the data.

In an interview with the FAZ, Federal Minister of Health Prof. Karl Lauterbach said that digitization is not an end in itself but an important component of modern medicine.

"I have to ensure that our healthcare system finally arrives in the 21st century. To do that, I'm approaching the issue pragmatically. The German problem with digitization is that we make many things too complicated. I want to avoid that. That's why the "electronic patient record for all" should become a reality," according to Prof. Lauterbach.

In his view, the existing health data are stored in separate silos: hospitals, health insurance companies, cancer registries, and genome databases. The goal is to connect the data in pseudonymized form for research purposes. "We have not been able to do that so far. That is why Biontech left Germany for the [COVID-19] studies. If we don't change it, we will soon no longer play a role in pharmaceutical research," concluded Prof. Lauterbach.

To download the strategy (in German), please [click here](#).

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