

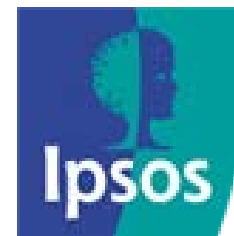
Barriers to cross-border health care: can behavioural insights help?

APPLYING BEHAVIOURAL INSIGHTS TO POLICY-
MAKING: RESULTS, PROMISES AND LIMITATIONS

Conference hosted by EC DG SANCO

30th September 2013

Dr Charlotte Duke, London Economics



Study objective

- Identify the main drivers and barriers to cross-border healthcare choice
- Test if the framing of information on websites, National Contact Points (NCPs), influences choice to seek cross-border healthcare
 - NCPs are portals where citizens can seek key information on cross-border healthcare
 - Established under Directive 2011/24/EU on the application of patients' rights in cross-border healthcare
- Provide recommendations on information provision for NCP portals

Method

- Review of existing literature on the flows of cross-border healthcare within Europe and Internationally
 - Identify the key drivers and barriers
 - Calibrate the experiment component
- Online survey with citizens and doctors in 8 countries
 - The Czech Republic, Estonia, Denmark, Germany, Italy, Poland, Spain, Sweden
 - Total sample 6,500 citizens and 1,150 doctors
 - Of citizens roughly 50% were 'patients' and 3% had received cross-border healthcare
- Online experiment to test the key drivers in choice
 - Framing of information varied on mock-up webpages
 - Waiting time and price varied in a choice experiment
- A survey of payers
 - Views on the Directive and suggestions for NCP websites

The process

- We set-up hypothetical NCP portals
 - Home country NCP and cross-border country NCPs
 - Each NCP portal had 3 web pages
 - Home: About page, reimbursement and benefits cross-border; and, information on appeals and procedures in regard to cross-border providers
 - Cross-border: About page, quality and safety of national providers, legal requirements for national providers
 - Web pages had links between them such that participants could browse in a natural fashion moving backwards and forwards between the pages and the home and cross-border NCP

Framing of the web pages

- Reimbursement page was re-framed to highlight possible advantages of going cross-border rather than only focusing on reimbursement
- The cross-border NCP was provided in the language of the respondent home country
- Reimbursement page was modified to include more detailed and complex information on medical treatments
- Details on cross-border providers legal requirements and validation processes were provided by the home NCP instead of the cross-border NCP

Choice between providers

Respondent Serial: 86. Current question: Q14_2

Which of these two options would you be more likely to choose?

Please select one answer

Name: Marien Krankenhaus

Country: Germany

Distance from you: ~120 kilometers

Cost of treatment: £5,500.00

The health insurance reimburses within two months: £5,000.00

You pay upfront: £5,500.00

Overall cost to you: £500.00



Waiting time: 100 days

Name: University hospital

Country: UK

Distance from you: ~120 kilometers

Cost of treatment: £5,875.00

The health insurance reimburses immediately: £5,000.00

You pay upfront: £875.00

Overall cost to you: £875.00



Waiting time: 100 days

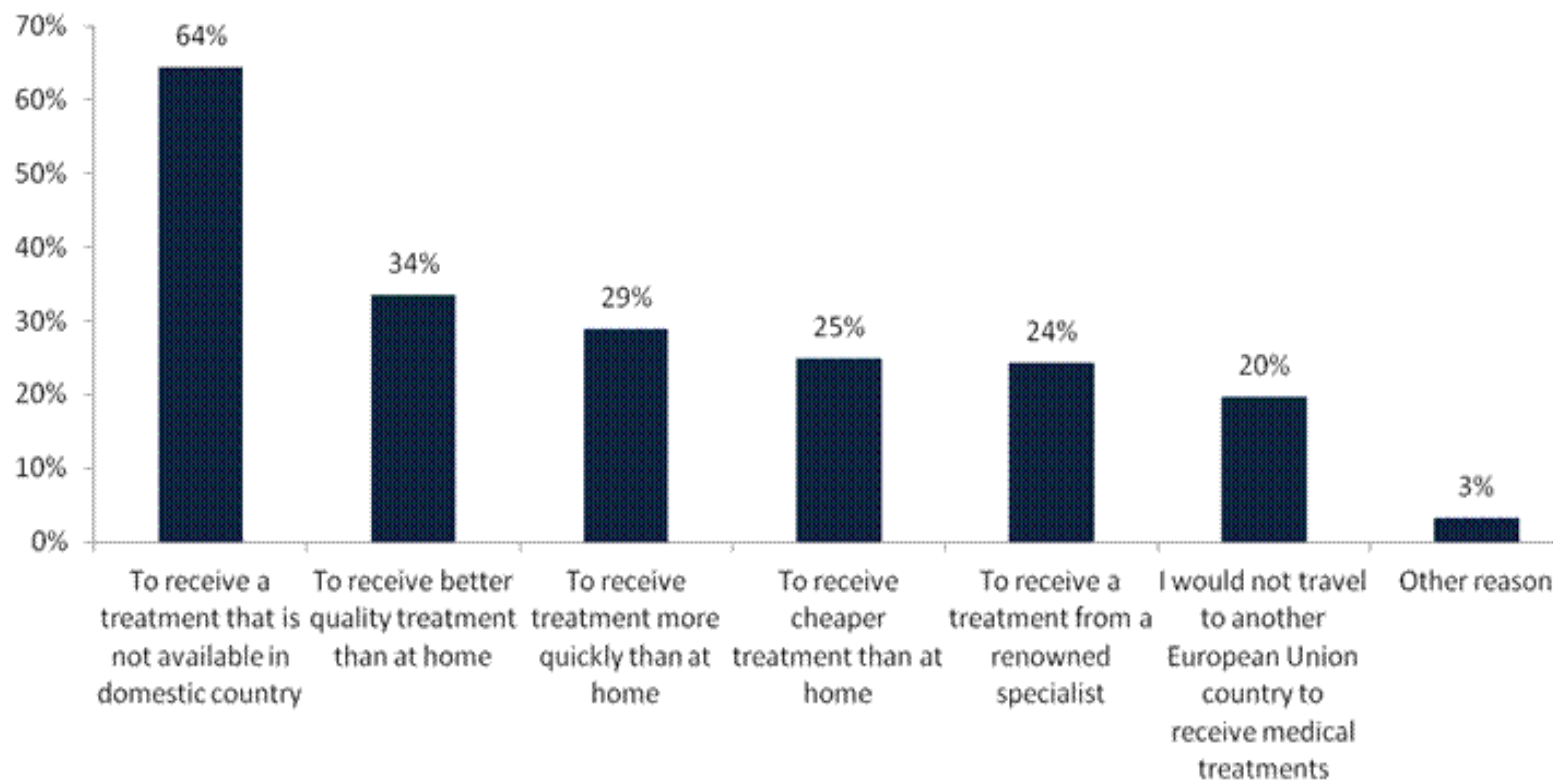
Country pairings for the experiment

Country of origin	Target Country
Denmark	Germany
Estonia	Finland
Germany	Netherlands
Italy	Austria
Poland	Germany
Spain	Germany
Sweden	Denmark
Czech Republic	Austria

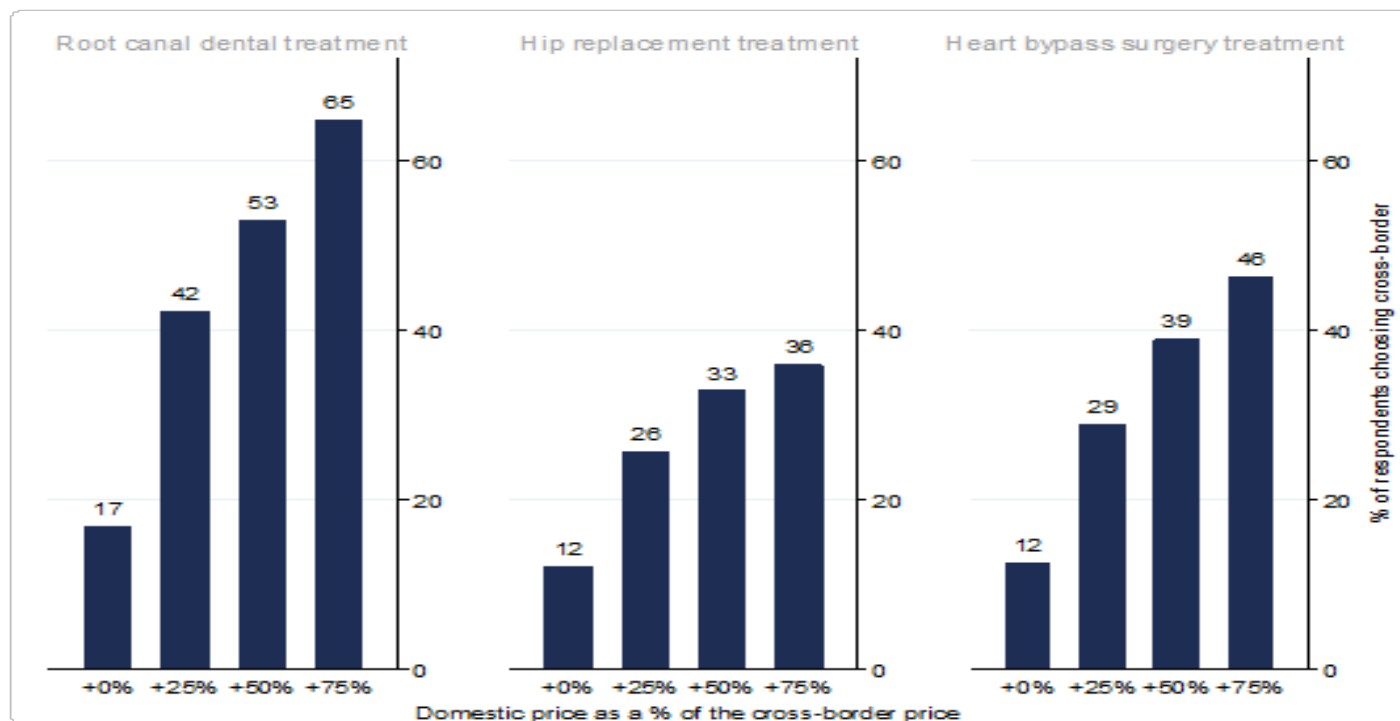
Selected based on existing evidence of cross-border healthcare provision and using expert advisor opinion

Key drivers and barriers for citizens

- Motivation for seeking cross-border healthcare

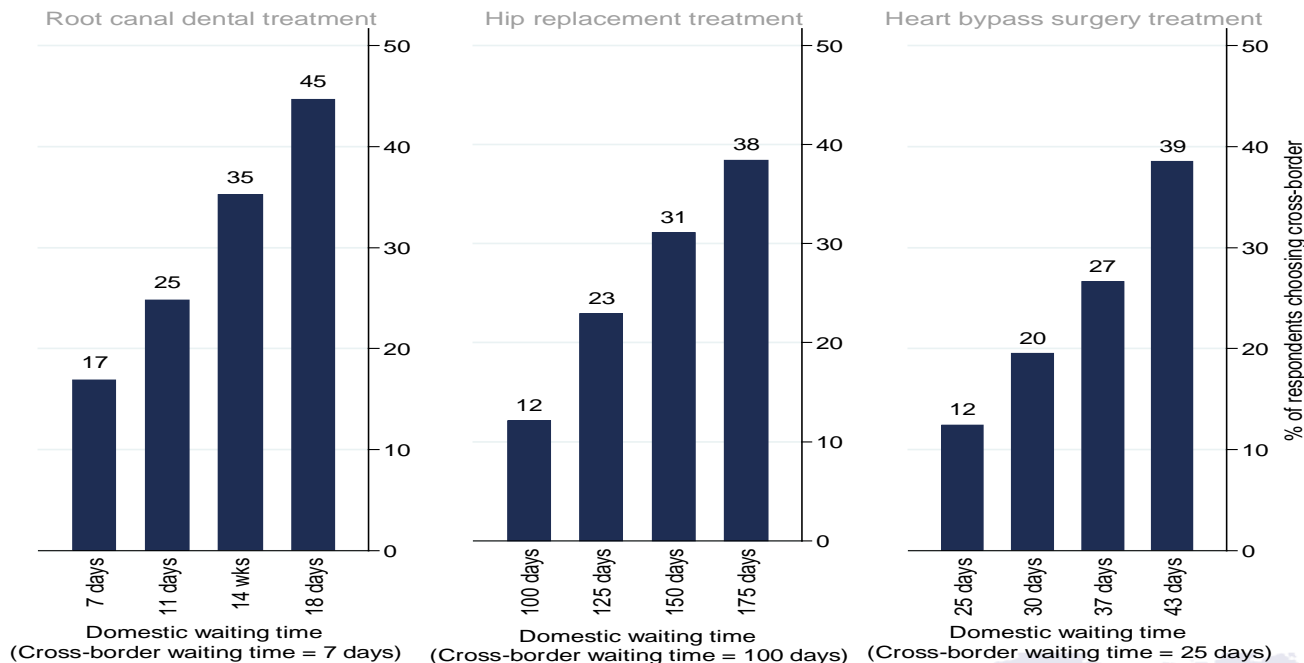


Key drivers and barriers: Cost to the patient



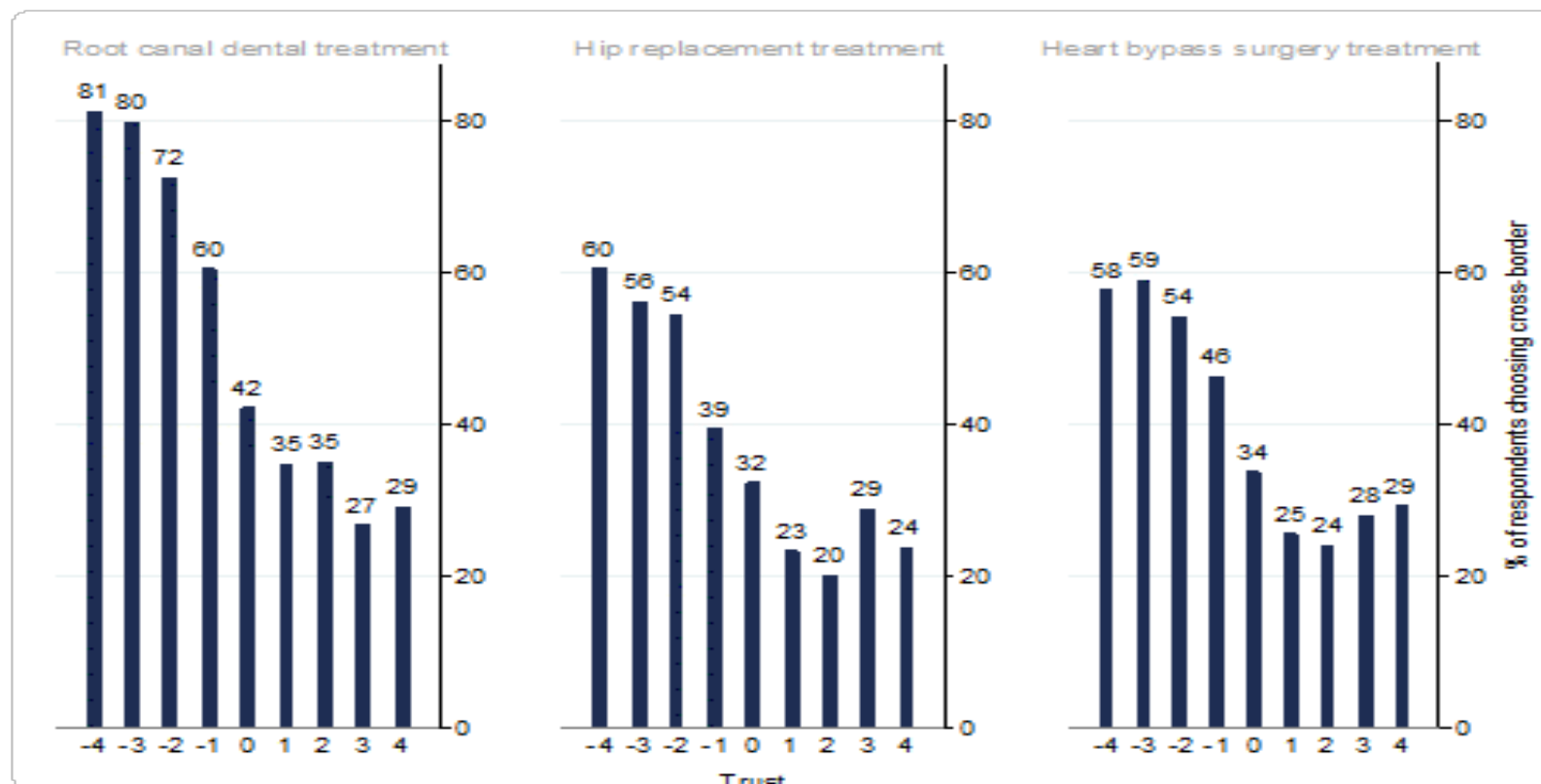
- If cost of domestic treatment relative to cross-border cost is doubled citizens are roughly 40% more likely to choose cross-border, highly statistically significant in all regression specifications used.
- Greatest driver of choice in the experiment.

Key drivers and barriers: Waiting time



- If domestic waiting time relative to cross-border waiting time is doubled citizens are roughly 20% more likely to choose cross-border , highly statistically significant in all regression specifications used
- Second greatest driver of choice in the experiment

Key drivers and barriers: Relative trust



Low confidence in domestic and high confidence in cross-border country



High confidence in domestic and low confidence in cross-border country

Key drivers and barriers: Other findings

- Language is an important barrier (linked with possible familiarity with the country and customs)
 - respondents who spoke the language of the cross-border country were more likely to choose the cross-border option
- Men were more likely to choose cross-border option (supports previous findings by Eurobarometer)
- Respondents who are more risk averse were less likely to choose cross-border option

Framing of information on websites

- Specific framing of the information on the mock-up websites did not have a statistical impact on respondents choice in the experiment
- However, respondent understanding (measured in an incentivised quiz), tended to be lower when information on treatment options was presented in more complex terminology

Information content

- Payers and respondents identified information content important for NCP portals
 - Frequently asked questions section
 - Information on liability and insurance of health professionals
 - Quality and safety information on providers
 - Reviews from previous patients
 - More detailed information on providers

So what does this mean for NCP websites?

- Access to information on costs and waiting time should be available through the portal
- Clear information about healthcare providers in other Member States including liability insurance, quality and safety standards
- Reviews of other patients experiences in the cross-border country
- Information that is not too complex for users