

# Time to accelerate, build trust and embed digital medtech in the Belgian healthcare landscape.



## INTRODUCTION

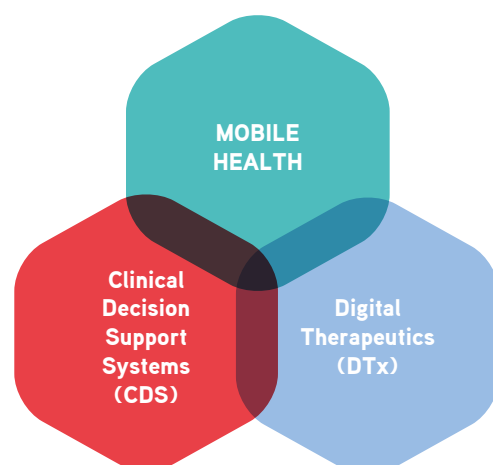
The ageing population, increasing work pressure, growing administrative burdens and sharply rising healthcare costs are just a few factors already causing the healthcare sector to creak. During the covid period, care had to be reorganised overnight. The enormous flexibility of the government, healthcare professionals and patients accelerated the introduction of digital medtech, enabling a.o. telemonitoring and other forms of remote care.

The COVID-19 pandemic has instilled a growing awareness that:

- We need to ensure the workload of our health care professionals remains manageable.
- We need to make the processes and systems through which healthcare is delivered more robust.
- A well informed and engaged patient must be at the centre of each and every healthcare process.
- The information must be available from anywhere and easily shared among healthcare professionals.

A modernization of current care pathways including new technologies is essential to achieve these objectives. It is important to firmly embed these new technological forms of care in the Belgian healthcare landscape. To realise this we need to join forces with all stakeholders who share the ambition to put the patient at the centre of everything we do.

With this position paper beMedTech reaches out to all stakeholders so that Belgium, after being one of the leaders in Europe but now lagging behind in the adoption of digital medtech, can turn the current situation around.



Let's join forces to create a win-win for patients,  
health care professionals and government

## OUR DIGITAL MEDTECH FOCUS:



### CATEGORY 1: MOBILE HEALTH

This includes all medical device software that allows patients to interact with the care provider. For example, tools for remote monitoring of chronic patients. These digital innovations are usually used on prescription or in consultation with the care provider. Those applications can be listed in the [mHealthBelgium](#) portal.



### CATEGORY 2: CLINICAL DECISION SUPPORT SYSTEMS (CDS)

These are used by the healthcare professional themselves, usually a specialist doctor in a hospital context. Think, for example, of radiology, where specific software can already provide a certain interpretation of a medical image. But there is certainly also potential for general practitioners. By mapping symptoms and learning from previous cases, one can diagnose in a more focused way or get support in prescribing the right imaging modality.

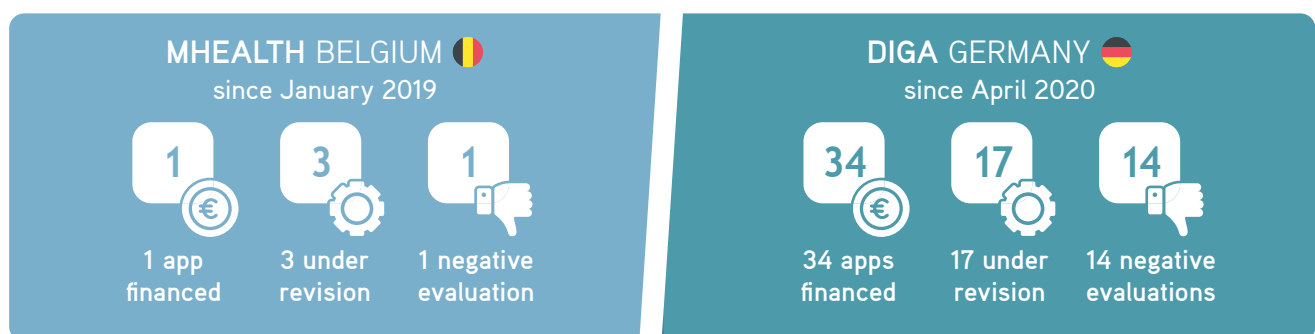


### CATEGORY 3: DIGITAL THERAPEUTICS (DTx)

These products are characterised by their software-controlled therapy. Think of a diabetic patient in whom a closed loop system functions autonomously because smart software analyses the glucose values measured by a sensor, and on this basis determines how much insulin must be administered and directly controls the insulin pump. Details and more examples can be found on the [DTx white paper](#) by beMedTech.

## FINANCING OF HOSPITALS AND CARE PATHWAYS:

To implement all those very diverse digital innovations we need to rethink the Belgian fee-for-service model. The mHealthBelgium validation pyramid is a good initiative for mobile health, but its process is perceived as not very transparent nor fast. In stark contrast with the Belgian mHealth pyramid, the German DiGA application portal - with its FastTrack procedure - has been much more successful.



But DTx and CDS should be embraced as well, beMedTech is actively reaching out to all stakeholders in the healthcare system to bundle forces.

Hospital financing is being thoroughly reviewed by the government in order to make the transition to a prospective financing that is simpler and more transparent than the current calculation method. A transversal cooperation model focused on patients' needs, care organisation and quality of care, rather than on volume-based financial incentives. This new approach in hospital financing supports more efficient care pathways in which digital medtech should be a solution. beMedTech is a constructive partner to the government to work towards a new system of hospital financing.

## OUR AMBITIONS:

As an industry federation and part of MedTech Europe, beMedTech takes the initiative to be a constructive partner in Value Based HealthCare (VBHC) and health digitalisation in Belgium. As digital devices and medical grade software are an important enabler and potential solution to many healthcare challenges nowadays, members of beMedTech acknowledge the urgency to cooperate with all other stakeholders to succeed in making Belgium to become a frontrunner in digital medical technologies which it once was when it pioneered the mHealth pyramid system. To be a constructive partner in this transformation process beMedTech focuses on the following 3 priorities:

### INTEGRATION & HEALTH DATA GOVERNANCE

- beMedTech will propose an approach how mhealth applications could be easily and consistently integrated with existing IT infrastructure on the one hand and what a fair data governance model for such tools would be on the other hand. This will be discussed with relevant stakeholders such as IT vendors and hospitals, but we expect the authorities as well to facilitate and steer this discussion in a positive way. More data that can be shared in an efficient way is a win-win for all stakeholders, the reference can be made with the European Health Data Space initiative that is considering a framework around primary and secondary use of data.

### FASTER ACCESS AND ADOPTION

- By evaluating the mHealthBelgium portal and its processes into a report, we will contribute actively to the discussion towards a more mature and better functioning framework that should aim for faster adoption of mhealth, and preferably also DTx, in the Belgian healthcare landscape. At this moment there is experience by only a few companies who followed the entire process and if Belgium wants to be a frontrunner instead of lagging, changes in the mHealthBelgium process are necessary.
- beMedTech calls upon the Belgian federal government, the National Institute for Health and Disability Insurance (NIHDI) and other competent authorities to enable such easy and fast access to digital innovations through adequate innovation funding. A 'Fast Track to Funding' (or implementation fund) would accelerate adoption and offer healthcare providers the capability to use the full potential of digital health in standard of care. Solid digital health frameworks are already in place in neighbouring countries, e.g. Germany and France, so a comparable modus operandi could be introduced to follow those leading European countries who are often an inspiration to our healthcare system.

### OPEN INTERACTION & AWARENESS CREATION

- A large campaign towards citizens and health care professionals will be executed in 2023. beMedTech (and Agoria) can drive this initiative, but support of many stakeholders, and in particular Federal Public Services Public Health and NIHDI is crucial to reach the target audience in a trusted way. Bundling forces will be a key factor for success.
- By launching a DTx white paper on DTx in June 2022 and reaching out to all possible stakeholders, beMedTech want to inform them about this at present still niche but emerging product group, share knowledge and build confidence. It allows and facilitates new discussions and interactions in an open way between all interested parties.
- beMedTech will create a learning community where best practices will be shown and communicated via a dedicated paper. Those will be presented as well during a large round table with politicians and policy makers. Moreover, information and education sessions will be organised with federations of primary and secondary healthcare.

To successfully achieve these priorities, we want to work  
in an open and transparent way with all relevant stakeholders.

beMedTech pillar Digital MedTech consists of the following companies, all supporting this position paper:

