



**EUAA Guidelines for  
Local MedCOI expert  
providing Medical Country of Origin Information**





## Table of Contents

Abbreviations and definitions .....	4
I. Introduction .....	6
II. Administrative procedures .....	6
1. Requests and delivery times .....	6
Table 1: Summary request types and delivery times.....	6
2. Ordering Process .....	7
3. Quarterly reporting.....	7
4. Billing and Payments .....	7
5. Contacts.....	7
III. Procedure for the provision of the field Availability (AVA):.....	8
Information on medication availability and availability of medical treatments.....	8
Scope of Services .....	8
1. Request Handling Procedure.....	8
2. Requirements for the content of responses .....	9
2.1 General requirements .....	9
2.2. Requirements regarding geographic areas.....	11
2.3. Requirements regarding availability of treatments .....	11
2.4. Requirements regarding availability of medication.....	12
a. The medicines are clustered by EUAA in medication groups and it is stated which medicines are currently used by the patient and which can serve as an alternative.....	12
b. Determining medication availability .....	13
Table 2: Determining medication availability.....	15
Table 3: Determining medication availability.....	16
3. Procedure in case clarification of information is needed. ....	17
c. In case of unclear request sent by EUAA to the local expert .....	17
d. In case of an unclear response sent by the local expert to EUAA .....	17
4. Procedure in case of impossibility to deliver information .....	17
5. Examples of questions and answer forms .....	17
Example of case description of a case-related request.....	17
Examples of questions for Availability: Information on medication availability .....	18
Example of answer form to be repeated for each medication.....	19
Examples for Availability: Information on availability of medical treatments.....	19
Example answer form (to be repeated for each treatment question): .....	20
IV. Procedure for the provision of the field Accessibility (ACC):.....	21
Scope of Services .....	21
1. Request handling procedure .....	21



2. Requirements for the content of responses .....	22
a. Content of the responses .....	22
b. Consistency with previous answers.....	22
c. Objectivity.....	22
d. Sources .....	22
e. Quality .....	23
f. Economic accessibility .....	23
3. Procedure in case clarification of information is needed .....	24
g. In case of an unclear request sent by EUAA to the local expert .....	24
h. In case of an unclear response sent by the local expert to EUAA. ....	24
4. Examples of questions on medication prices and cost coverage (field Accessibility) .....	24
5. Examples of questions on prices and cost coverage of medical treatments (field Accessibility) .....	25
6. Examples of questions regarding general or case-specific information on healthcare system, insurance schemes, social protection schemes (field Accessibility) .....	26
6.1 Questions about the healthcare system .....	26
6.2 Questions about health insurances schemes .....	27
6.3 Questions about social security/ social protection .....	28
6.4 Questions about Non-governmental support.....	29
6.5 Other questions .....	29
IV. Procedure for ad-hoc meetings: .....	29



## Abbreviations and definitions

EUAA	European Union Agency for Asylum (Contractual Authority)
MedCOI	Medical Country of Origin Information
Local expert	Local MedCOI expert gathering information from the country of origin.
Patient	Person under medical treatment in an EU+ country who claims medical grounds in an international protection or another migration procedure. This person is usually a national of the country of origin.

Country of origin	The country of nationality or, for stateless persons, of former habitual residence.
Registration of medicine	Registration of medication by the (health) authorities in a particular country, e.g., by the national food and drugs administration or ministry of health. This registered medication is often specified in a list of medications and is known by, for example, (central) pharmacies in the country.
Services	The delivery of responses under the contract which meet the quality requirements set.
Treatment modality	Actual specific medical treatment possibilities (clinical, outpatient, specific operations, paramedical treatment, diagnostics, specific medication and medical devices etc.).
Current medication	Currently prescribed medication by the treating physician.
Alternative medication	Possible alternative medication for the same indication.
Public/private facilities	Usually, public facilities are funded by state money and private facilities are owned by private entities.

### MedCOI Requests:

Request	<p>A set of questions by EUAA to the local expert for country-specific information on the availability or accessibility of medical treatment and medication.</p> <p>A <b>request may</b> comprise, depending on the fields covered by the expert, of the following components:</p> <ul style="list-style-type: none"> <li>• Country/region of the desired information.</li> </ul>
---------	---



	<ul style="list-style-type: none"> <li>• Brief description of the complaints and/or diagnosis and, in case of a patient-related request, the age and gender of the patient.</li> <li>• The required medical treatment(s) and treatment modalities such as laboratory tests, diagnostic imaging, etc.</li> <li>• The required medicines and alternative medicines. The generic names of medicines and, if deemed appropriate, the brand names are also stated. The medicines are clustered in medication groups, and it is stated what medicines can serve as an alternative.</li> <li>• Reference to the country-specific healthcare system, insurance/social protection schemes.</li> </ul>
General request	A request relating to information on one specific health condition (e.g., HIV (treatment and/or medication) or a psychiatric condition), not directly related to a specific patient.
Regular request	A request for case-related information (of one individual)
Additional request	Request for information in addition to a request that was responded to before.
Validation request	Request to verify specific information provided before by the local expert.
Request for clarification	A request seeking clarification of unclear or inconsistent information in a response delivered by the local expert.
Response	Factual country-specific medical information obtained by the local expert following a request and published on the restricted EUAA MedCOI portal.



## I. Introduction

This document is meant as a guideline for contracted local MedCOI experts. It explains the administrative procedures and the procedures for the provision of information about the availability and accessibility of medical treatment and medication in the country of origin of the patient.

The EUAA provides access to medical country of origin information (MedCOI). This information supports the national migration and asylum authorities in Europe to reach accurate and fair decisions in international protection and other migration procedures. More precisely, MedCOI is a service for first instance migration authorities of EU+ countries, providing responses to requests for information about the availability and accessibility of medical interventions in countries of origin.

## II. Administrative procedures

### 1. Requests and delivery times

There are three different processing times that can be applied to the different types described above:

- Semi-urgent/urgent<sup>1</sup> (7 calendar days)
- Normal (14 calendar days)
- Special (28 calendar days): Requests containing 65 questions (or more) or requests for information on a specific health condition (General)

In case there is a need for clarification on the provided information, the due date for the expected answer is extended by some days, depending on the type of request:

- Semi-urgent/urgent: 2 working days<sup>2</sup>
- Normal: 3 working days
- Special: 7 working days

**Table 1: Summary request types and delivery times**

Request type	Delivery Times		
	Normal	Semi-urgent/urgent	Special
Regular	14 calendar days	7 calendar days	28 calendar days (from 65 questions)
Additional	14 calendar days	7 calendar days	28 calendar days (from 65 questions)
Validation	14 calendar days	7 calendar days	/
General	/	/	28 calendar days

<sup>1</sup> Semi-urgent and urgent are both used for 7 calendar day requests

<sup>2</sup> Working days are defined as Monday to Friday



In case of delays, EUAA should be informed as soon as possible.

## 2. Ordering Process

EUAA shall submit to the local expert the contract (see Annex II) indicating the period of execution of the tasks and the price for the service provided by the local expert.

The local expert shall send the contract back to the EUAA, duly signed, within 3 working days. Once the contract is signed by both the EUAA and local expert, EUAA may start submitting requests to the local expert.

For example: Contract n. 1: covering period of first year, which will be continued by Contract n. 2, for the second year, etc.

## 3. Quarterly reporting

At the end of each quarter the EUAA will send to a local expert an Application for Payment form containing deliverables, namely request references with dates when the requests were sent out and completed.

Local expert provides feedback to the EUAA in case of any inconsistencies as soon as possible, and if no inconsistencies, signs the form.

Final report is used as confirmation of deliverables by local expert.

## 4. Billing and Payments

Only, actually provided services can be invoiced. The EUAA must approve any submitted documents or deliverables.

After verification of the deliverables, the local expert shall submit the duly signed Application for Payment form to the EUAA functional email [MedCOI@euaa.europa.eu](mailto:MedCOI@euaa.europa.eu)

The Application for Payment form should contain correct information:

- ❖ Name, address, and bank account details of the payee
- ❖ Amount and currency (EUR): corresponding final report
- ❖ Service execution dates
- ❖ Contract number reference  
e.g., EUAA/2024/xxx- Contract number xxx
- ❖ Date and signature of the expert

The Application for Payment should **not** include VAT

After the Application Request is returned and registered, the EUAA pays via a bank transfer within 30 days from receipt of the Application for Payment.

In case of inconsistencies/incompleteness: payment suspension applies until correct information is provided.

## 5. Contacts



Topic	Type	E-mail address
EUAA MedCOI Team/secretariat/invoicing	Functional mailbox	<a href="mailto:MedCOI@euaa.europa.eu">MedCOI@euaa.europa.eu</a>
Contractual matters	Functional mailbox	<a href="mailto:contracts@euaa.europa.eu">contracts@euaa.europa.eu</a> <b>In copy always:</b> <a href="mailto:MedCOI@euaa.europa.eu">MedCOI@euaa.europa.eu</a>

### III. Procedure for the provision of the field Availability (AVA):

#### Information on medication availability and availability of medical treatments

EUAA researches medical treatment possibilities in the countries of origin through several information sources, including by local experts.

Availability is defined as whether medical treatment (including medication) for a specific case may be absent/present/partially present at least in a certain (public or private) medical facility at a certain time somewhere in the country of origin.

Although the requested information is mainly case (patient)-specific, it may sometimes be of a more general nature in the form of a general request for information on one specific health condition (e.g., HIV or diabetes treatments and/or medication). Availability of medical treatment (including medication) does not refer to the economic/geographical/political accessibility of any treatment or general safety problems in the country.

#### Scope of Services

The local expert provides information regarding the availability of medical care and/or medication in the specific country upon request of the EUAA via the online platform [medcoi.euaa.europa.eu](http://medcoi.euaa.europa.eu).

#### 1. Request Handling Procedure

The EUAA adds a (new) request to the workload of the local expert which triggers an automatic notification by e-mail

- a. The subject line of this notification email contains the request identification number and the country in question.





- b. The email text mentions the request status. There are two status options: Answer or Clarification.

The local expert returns the completed answer form by clicking “Send Answer” at the bottom of the online form. The EUAA receives an automatic email notification.

## 2. Requirements for the content of responses

### 2.1 General requirements

#### a. Content of the responses

The local expert shall be able to ascertain the information on availability of medical treatments and/or medications and respond to every question about treatment in accordance with the content of the described medical case. The availability of treatment depends on the case description and does not refer to the general existence of a certain specialist in a country of origin.

The local expert shall be able to examine the availability of all specific medications and/or treatment options and modalities requested by the EUAA. In case anything is unclear to the local expert, an explanation shall be asked to EUAA (see 3.a. *In case of unclear request sent by EUAA to the local expert*).

#### b. Consistency with previous answers

The expert shall, on each occasion, compare the response with previously provided responses about the same subject (in the MedCOI database).

If a newly obtained answer differs from the previous one, an explanation should be included for this change, in case:

- treatment/medication is no longer available while previously it was;
- treatment/medication is currently available while previously it was not.

NB: In case the previous answer about the availability was provided more than one year ago, any difference is regarded as acceptable due to time passed.

#### c. Objectivity

The expert shall maintain a clinical and unbiased viewpoint and provide information in a factual manner, avoiding subjective comments such as personal views on the quality level of healthcare or other subjective opinions.

#### d. Sources

Information **always** needs to be gathered/verified (by phone, email and/or in-person visits) directly with a (health/medical) facility (hospital, hospital pharmacy or regular pharmacy) by the local expert. It is not allowed to only consult a database or online information.

Preferably, the local expert does not use information from intermediary contacts. Just in case such an intermediary contact is needed to complete the assessment, for

example in large countries and in case of region-specific requests, the local expert needs to verify with the intermediary contact that the information is gathered/verified directly with the facility at that moment in time. This is to avoid the use of outdated information. The use of the intermediary contact needs to be mentioned in the additional information with a description of the profession of the intermediary contact. Also, the intermediary contact is not allowed to only consult a database or online information.

**Public/private:** First availability shall be investigated in public facilities and if not available there, then in private facilities.

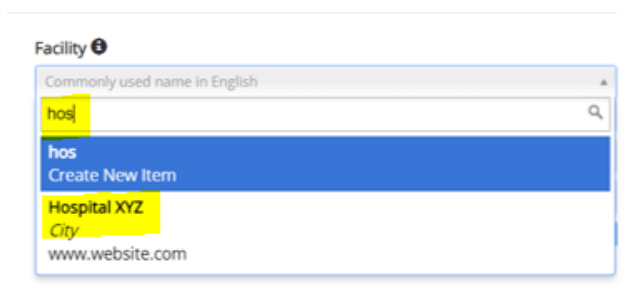
When treatment or medication is available (or partly available): one facility should be mentioned as an example where treatment is available.

When treatment or medication is **not** available, two facilities where the information is obtained must be mentioned. Whenever needed, the local expert should feel free to contact more than two facilities. In case more than two facilities need to be contacted to confirm that the treatment is not available in the country/region, only two of the facilities need to be mentioned. Additional information may be provided in the dedicated field.

Information about the facility should include at least its commonly used name in English and the city of its location. If applicable and possible, the name in the local language and a web page can be entered.

Instructions for inserting facilities in the responses:

- Previously used facility names can be found in the dropdown list. They appear when three characters are typed and once selected, the system fills in the information automatically (see picture below).



- When inserting the names, the local expert should use lower cases but capitalise each word (e.g., Hospital Xxxxx, Clinic Yyyyy, Pharmacy Zzzzzz, etc.) and avoid using all uppercase text (also known as “all caps”).
- It is sufficient to enter the name of the hospital. Adding the department/ward (for example cardiology department) is not necessary.
- In case of a pharmacy at a hospital, it should be made clear that it is part of the hospital (for example University Hospital pharmacy)
- The local expert should avoid using abbreviations.
- The local expert should not include post office box numbers (e.g., BP 1058) or postal codes.

### Special types of facilities:



In case a facility is a medical online store (e.g., online pharmacy, medical equipment store, etc.) it should be explained whether online purchases are a legal and common way of obtaining medications or equipment in the country of origin.

In case a facility is (part of) a pharmacy chain with various pharmacies, a way to trace which specific outlet was contacted is required (e.g., exact and unique name, or more specific address/district). The same, more detailed information is necessary for a general umbrella organisation covering various hospitals/clinics.

In case a facility was contacted but its details are confidential for a specific reason, this should be explained in the additional information. The facility should be entered as confidential/dedicated hospital or confidential/dedicated pharmacy. This could be necessary when local authorities do not divulge for security reasons the list of facilities where some types of treatment/medication (e.g., opioids) are available.

### **e. Quality**

A response should:

- contain objective, truthful, and complete information.
- be formulated in clear English, including all medical terminology used.
- deal with every part of the request.

### **2.2. Requirements regarding geographic areas**

If treatment and/or medication is asked **in the country without further specification**:

Information should be gathered in the capital city or the most appropriate city or area in the country.

The information related to all questions within one request should be gathered in the same city or area if at all possible.

If treatment and/or medication is requested **in a specific region or city within the country**:

Information should be gathered in that area or city.

If no information can be obtained in that specific area, reasons must be given for this, and information is then gathered in the most appropriate nearby region or city within that country.

### **2.3. Requirements regarding availability of treatments.**

Response options:

- a. Yes, treatment is available.

This is the correct response when the requested treatment modality relevant for the case description is present in the country or specified city or area, and one facility where it is available must be mentioned.

- b. No, treatment is not available.



This is the correct answer when the requested treatment modality relevant for the case description is not present in the country or specified city or area, and two facilities where the information was obtained must be mentioned.

c. Partly available.

Treatment is partly available in case part of the treatment is present and another part not. For example, when the surgeon is available but cannot perform a part of the requested surgery.

Or, when in general a medical specialist or other health care professional is available but cannot carry out part of the requested treatment modalities.

**In this case additional explanation should be provided** and one facility where it is partly available must be mentioned.

This option should not be used to distinguish between public and private or to provide general contextual information such as information about waiting lists for a certain treatment.

d. In case of limited or restricted availability:

Some treatments might only be available in certain facilities, e.g., for very severe cases or hospitalised patients (and not for patients visiting the facility as an outpatient) or there is only one facility in the whole country. If it is the case, this should be explained in the additional information box.

## 2.4. Requirements regarding availability of medication

a. **The medicines are clustered by EUAA in medication groups and it is stated which medicines are currently used by the patient and which can serve as an alternative.**

Generic names of medicines are provided by the EUAA and, if deemed appropriate, the brand names are also stated.

The following instructions apply (see also below **Table 2** and **Table 3**):

- The local expert should use only **generic** names for medicines. Be aware that sometimes medication is registered under brand names.
- The local expert should be aware that information about medication being illegally available, available under-the-counter or on the black-market falls **outside the scope of the service**.
- In case a medicine is registered and in stock in pharmacies or other medical facilities and there are no expected supply shortages for the requested medicine, the medicine is regarded as available. One facility should be mentioned as an example of where the medication is available.
- The assessments related to the availability of medication should not be limited to regular pharmacies. Occasionally, due to specific indications, some medicines can be available in specific medical facilities instead of in regular pharmacies. Facilities like hospital pharmacies, dialysis centres, addiction



centres, HIV treatment centres, etc., may also be suitable facilities to assess the availability of medicines.

- In case a medicine is not registered and also cannot be obtained in the country via pharmacies or other medical institutions, the medicine is regarded as not available. At least two facilities/pharmacies should be mentioned where the availability information was obtained.
- In case medication is **available, but currently experiencing supply problems**, the average time of resupply should be indicated. *Currently experiencing supply problems* means that now or in the past four weeks there were supply problems. In case such a medicine can be resupplied (e.g., through ordering via a wholesaler, central pharmacy or directly from abroad), it is essential to provide an indication of the average supply or delivery time in weeks (resupply time).

#### b. **Determining medication availability**

The main factors in establishing if a medication can be considered available are registration, stock and supply details.

##### i. **Registration**

Registration of medication, which is usually made available through lists of registered medicines by the ministry of health or other public authority like a national medicine agency or national food and drug administration is a good indicator for availability of a certain medicine and should be checked, but it is not the only indicator.

Sometimes non-registered medication is still available and on the other hand registered medication is sometimes not available.

Actual suppliers/pharmacies need to be contacted to find out if the medicine in question can in fact be obtained, purchased, or legally ordered by them.

Therefore, many details about registration, stock and supply are important indicators in determining availability. Not all details need to be indicated in the answer form. The required details are mentioned in point 2.4.a.

##### ii. **Stock**

A medicine is regarded to be in stock when it is available at the time of investigation including the four weeks prior to that moment. If a medication is out of stock at the time of research or during the four weeks prior to that moment, supply details need to be investigated.

##### iii. **Supply details**

In case the requested medication is out of stock (now or in the past 4 weeks) but (re-) supply is possible (for instance from a national or international pharmacy/wholesale company/distributor/manufacturer) the average time of resupply needs to be mentioned as precisely as possible, indicating the number of weeks. If the time of re-supply is unknown this must also be mentioned.

It must also be established that the resupply/ordering/purchasing of medication is done legally (for instance: through licensed pharmacies).



How to distinguish between not available and unknown time of resupply:

- In case it is not known whether medication resupply is an option at all = not available
- If medication resupply is possible but the average time of resupply is unknown = supply problem and unknown time of resupply

#### Common situations and exceptional situations

Most common situations are:

- Registered medication can be purchased, obtained, or ordered.
- Medication that is not registered cannot be purchased, obtained, or ordered.

Examples of exceptional situations:

- Registered medication can be purchased, obtained, or ordered, but it is not registered. In such a case, the local expert needs to explain that purchasing, obtaining, or ordering of this medicine is legal (for instance: through licensed pharmacies) and not part of the black market. Further it needs to be clear that in such a situation purchasing, obtaining, or ordering of this medicine is indeed possible and does not depend on uncertain administrative decisions like permits/approvals to order medication from abroad.
- Limited or restricted availability of medicines: for example medication which is only available during clinical admittance and not for patients visiting the hospital as an outpatient, medication which is only available in dialysis centres/ departments and provided during dialysis sessions, medication which is only available for certain medical indications and not for other indications which would also be logical ( e.g., tacrolimus only available for transplant after care and not available for other medical conditions, lamivudine only available for HIV patients and not for hepatitis B patients).

Note: Any exceptional situations as mentioned above should be explained in the free text field “Additional information on medication availability” found under the medication.

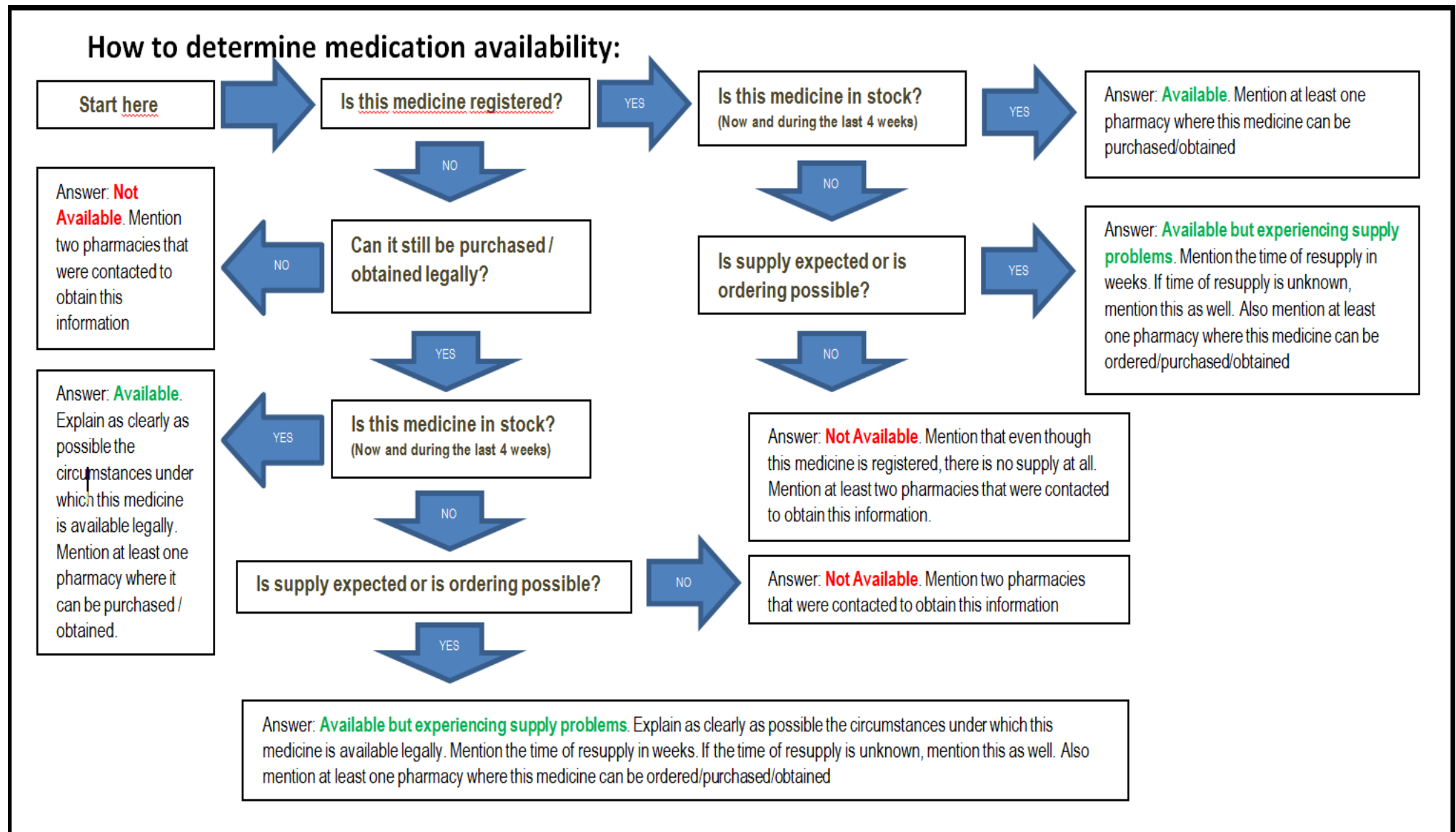
**Tables 2 and 3 below visualise the above-mentioned information concerning availability of medication and explain what to mention in the answer forms in the different situations.**

**Table 2: Determining medication availability**

	<b>In stock</b> Stable supply in (hospital) pharmacy	<b>Current supply problems</b> (including the last 4 weeks) Supply is expected or ordering is possible (from abroad or central pharmacy).	<b>No stock at all</b> Ordering from abroad or from other pharmacy inside the country is not possible
Medication is <b>registered</b> in the country	<b>In answer form: YES</b>	<b>In answer form: AVAILABLE BUT CURRENTLY EXPERIENCING SUPPLY PROBLEMS + Time of resupply (1, 2, 3, 4 weeks, more or unknown)</b>	<b>In answer form: NO</b> <i>In additional information on medication availability, please add the following: Although medication is registered, there is no supply at all</i>
Medication is <b>NOT registered</b> in the country	<b>Under these circumstances:</b> <ul style="list-style-type: none"> <li>It is <u>legally</u> available for example through licenced pharmacies.</li> <li>Availability on the black market has not been included in your research.</li> <li>It can be legally ordered from abroad.</li> </ul> <b>In answer form: YES</b> <i>In additional information on medication availability, please add the following: Although medication is not registered, it is legally available in the following way: (explain as clearly as possible the circumstances under which the medication in question is available)</i>	<b>Under these circumstances:</b> <ul style="list-style-type: none"> <li>It is <u>legally</u> available for example through licenced pharmacies.</li> <li>Availability on the black market has not been included in your research.</li> <li>It can be legally ordered from abroad.</li> </ul> <b>In answer form: AVAILABLE BUT CURRENTLY EXPERIENCING SUPPLY PROBLEMS + Time of resupply (1, 2, 3, 4 weeks, more or unknown)</b> <i>In additional information on medication availability, please add the following: Although medication is not registered, it is legally available (but currently experiencing supply problems) in the following way: (explain as clearly as possible the circumstances under which the medication in question is available)</i>	<b>In answer form: NO</b>



**Table 3: Determining medication availability**





**3. Procedure in case clarification of information is needed.**

**c. In case of unclear request sent by EUAA to the local expert**

If something is missing or unclear, the expert has the opportunity to inform EUAA by sending a comment in the web-portal. The expert is expected to complete the request within the original timeframe.

**d. In case of an unclear response sent by the local expert to EUAA**

The description of the situation and questions are entered by the EUAA MedCOI staff member in a comment in the web-portal.

The request is assigned back to the expert and an automatic e-mail is sent to the expert.

The due date of the response is adjusted according to the type of request.<sup>3</sup>

**4. Procedure in case of impossibility to deliver information**

The expert shall make several attempts to gather the requested information, and if the attempts fail to gather all or a part of the information, the response shall include a clear justification why information could not be obtained. The justification should include:

- a description of the attempt to gather the information (e.g., the process followed, the communication channels used, etc.)
- the reason that the information could not be retrieved.

**5. Examples of questions and answer forms**

**Example of case description of a case-related request**

Request ID	AVA 14949	Due Date	03/12/2023
Type	Regular	Request Sent	20/01/2023
Priority	Normal (14 days)	Response received	
		Date Published	
		Prio Specialism	gastroenterology
		Specialisms	anesthesiology surgery psychiatry

<sup>3</sup> Clarification of an answer is not counted as an additional question



## Patient Information

---

Gender	Male
Age	52
Country of Origin	Algeria
Region or city within country of origin	
Case Description	Patient (male; age: 52) diagnosed with: - PTSD (F43.1) - lumbar pain due to discopathy (M54.1) - cholelithiasis (K80.2) (Calculus of gallbladder with other cholecystitis)
ICD-10 code(s)	F43.1 M54.1 K80.2

### **Examples of questions for Availability: Information on medication availability**

For every requested medication it is indicated which medication group it belongs to and whether it is currently used by the patient or has been suggested as an alternative.

The below is considered containing four questions:

- Is oxycodone available?
- Is paracetamol + tramadol (combination) available?
- Is prothipendyl available?
- Is flupentixol available?

Possible answers are: Yes/ No/ Available, but currently experiencing supply problems (see point [2.4.b](#)) In each answer the local expert should include information about facilities as stipulated in point [2.1.d](#).



### Example of answer form to be repeated for each medication

<b>Medication (generic name)</b> ⓘ oxycodone	<b>Medication Group</b> Pain medication: strong medication	<b>Type</b> Current
---	---	------------------------

---

<b>Additional information</b> Please put extra information or comments about the medication here.	<b>Availability</b> ⓘ ⓘ <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Available, but currently experiencing supply problems, time of resupply 1 week	<b>Pharmacy</b> ⓘ Commonly used name in English Name in local language Internet address (if available) Neighborhood/borough/section (if appropriate) <input type="radio"/> Public <input type="radio"/> Private <input type="button" value="Remove Pharmacy"/> <input type="button" value="+ Add Pharmacy"/>
--	--	--

---

**Additional information on medication availability**

Please put extra information or comments about the medication here.

### Examples for Availability: Information on availability of medical treatments

The below example is considered containing five questions:

- 1) Is surgery: specifically orthopaedic surgery of the spine available?
- 2) Is outpatient treatment and follow-up by psychiatrist available?
- 3) Laboratory test: monitoring full blood count: e.g., Hb, WBC & platelets.
- 4) Diagnostic imaging: ECG (electrocardiogram; cardiology)
- 5) Open question: Is it possible to perform epidural injections for back pain?

If available, please mention the name of the facility (in English and local language), the city/district, the website (if available), and type (public or private). If not available, please mention two facilities where this was researched.

For all questions, possible answers are Yes/ No/ Partly available (see point [2.3](#)). In each answer the local expert should include information about facilities as stipulated in point [2.1.d](#).



**Example answer form (to be repeated for each treatment question):**

**Treatment**

surgery, specifically orthopaedic surgery of the spine

**Availability**

Yes

No

Partly:

Partly:

**Additional information**

Please put extra information or comments about the treatment here.

**Facility**

Commonly used name in English

Name in local language

Internet address (if available)

Neighborhood/borough/section (if appropriate) + city name

Public  Private

[✕ Remove Facility](#)

Commonly used name in English

Name in local language

Internet address (if available)

Neighborhood/borough/section (if appropriate) + city name

Public  Private

[✕ Remove Facility](#)

**Treatment**

outpatient treatment and follow up by a psychiatrist

**Availability**

Yes

No

Partly:

Partly:

**Additional information**

Please put extra information or comments about the treatment here.

**Facility**

Commonly used name in English

Name in local language

Internet address (if available)

Neighborhood/borough/section (if appropriate) + city name

Public  Private

[✕ Remove Facility](#)

**Open Questions** 1

**Question**

Is it possible to perform epidural injections for back pain; if yes, by which kind of specialist and in which facility?

If available, please mention the name of the facility (in English and local language), the city (district), the website (if available), and type (public or private). If not available, please mention two facilities where this was researched.

Please fill in your answer...



#### **IV. Procedure for the provision of the field Accessibility (ACC):**

- **information on medication prices and cost coverage.**
- **general or case-specific information on medical treatments' prices and cost coverage.**
- **general or case-specific information on insurance schemes, social protection schemes, and/or healthcare system**

Medical treatment possibilities in the countries of origin are researched by the EUAA, using several information sources, including local experts.

Accessibility is defined as whether an individual is able to, de facto, obtain medical treatment/medication given the person's financial situation, geographic location and irrespective of his/her race, religion, nationality, membership of a particular social group, or his/her political opinion, upon returning to his/her country of origin/residence.

In the EUAA MedCOI context, the scope is limited to economical and geographic access. Medication and treatment accessibility can be provided for price and cost coverage by public health insurance or equivalent. General or more particular information on the healthcare system and insurance/state contribution schemes can also be included in individual accessibility requests.

Although the requested information is mainly case (patient)-specific, it may sometimes be of a more general nature.

#### **Scope of Services**

The expert provides information regarding the accessibility of medical care and medication in a specific country upon a request of EUAA.

#### **1. Request handling procedure**

EUAA shall contact the local expert by e-mail. In this communication the following elements will be mentioned:

- the request identification number
- an urgent or normal [response time] request
- the response due date
- the number of questions

The request form shall be sent in attachment.

Example:

*Please find enclosed the request: ACC-6864. It is a normal (14-day) request with [X] questions; the due date is dd/mm/yyyy.*



The local expert returns the completed request form by email to the sender and [MedCOI@euaa.europa.eu](mailto:MedCOI@euaa.europa.eu).

## 2. Requirements for the content of responses

### a. Content of the responses

The local expert shall be able to respond to the information request in accordance with the content of the described medical case.

If something is not clear to the expert, an explanation should be asked to EUAA (see below 3. *In case of an unclear request sent by EUAA to the local expert*)

### b. Consistency with previous answers

The local expert shall, on each occasion, compare the response with previously provided responses about the same subject. If a newly obtained answer differs from the previous one, an explanation should be included for this change.

### c. Objectivity

The local expert shall avoid subjective/general comments such as personal views on the quality level of healthcare or other subjective opinions, for example: ‘treatments are far from Western standards’.

Measurable aspects, such as long waiting times, can be mentioned.

### d. Sources

Information **always** needs to be gathered/verified directly (by email, phone or in-person visits) with a concrete health/medical facility (hospital, hospital pharmacy or regular pharmacy) by the expert. It is not allowed to only consult a database or online information.

**Public/private:** Accessibility is investigated in both private and public sector facilities.

Preferably, the local expert does not use information from intermediary contacts. Just in case an intermediary contact is needed to complete the assessment, for example in large countries and in case of region-specific requests, the local expert needs to verify with the intermediary contact that the information is gathered/verified directly with the facility at that moment in time. This is to avoid the use of outdated information. The use of the intermediary contact needs to be mentioned in the additional information with a description of the profession of the intermediary contact. Also, the intermediary contact is not allowed to only consult a database or online information.

Information about the facility should include at least its commonly used name in English and the city of its location. If applicable and possible, the name in the local language and an internet address can be entered.



### **Special types of facilities:**

In case a facility is a medical online store (e.g., online pharmacy, medical equipment store, etc.) it should be explained whether online purchases are a legal and common way of obtaining medications or equipment in the country of origin.

In case a facility is (part of) a pharmacy chain with various pharmacies, a way to trace which specific outlet was contacted is required (e.g., exact and unique name, or more specific address/district). The same, more detailed information is necessary for a general umbrella organisation covering various hospitals/clinics.

In case a facility was contacted but the details for such a facility are confidential for a specific reason, this should be explained in the additional information. The facility should be entered as confidential/dedicated hospital or confidential/dedicated pharmacy. This could be necessary when local authorities do not divulge for security reasons the list of facilities where some types of treatment/medication (e.g., opioids) are available.

#### **e. Quality**

The expert is expected to do his/her utmost to retrieve up-to-date and accurate information. If needed, he/she is expected to contact pharmacies, hospitals, and other sources in the field of healthcare.

The information provided by the expert must meet several quality standards. Therefore, the experts are asked to be transparent about the sources of the information:

- If the information is obtained through literature, the author, title, page and, if possible, the internet link should be mentioned.
- If the information is obtained in a medical institution, an international organisation, an NGO, etc., the name of this institution or organisation, as well as the address and the date of contact must be mentioned.

A reply should:

- contain objective, truthful, precise, and complete information.
- be formulated in clear English, including all medical terminology used.
- deal with every part of the request.

#### **f. Economic accessibility**

Economic accessibility assesses whether a patient in his/her country of origin/residence would be able to access medical treatment due to her/his economic situation.

Factors which may affect economic accessibility, and that are within EUAA MedCOI scope, include:

- the cost of medication
- the cost of treatment



- the health insurance system (universal, public, private), governmental aid programmes, international aid programmes, community health insurances, regional initiatives, etc.

Other questions may be applicable on a case-by-case basis, such as the access to medical care in another country (medical bridge option) or the access to specialist referral system.

### 3. Procedure in case clarification of information is needed<sup>4</sup>

#### g. In case of an unclear request sent by EUAA to the local expert

If something is missing or unclear, the expert has the opportunity to inform EUAA by replying to the e-mail request. The expert is expected to complete the request within the original timeframe.

#### h. In case of an unclear response sent by the local expert to EUAA.

In case of an unclear response, EUAA notifies the expert per email as soon as possible. The local expert provides a clarification within the original delivery time, or within the deadline stipulated in *section II.1. Requests and delivery times*.

### 4. Examples of questions on medication prices and cost coverage (field Accessibility)

Medication information is requested in a table. Information requested in the table includes: brand name, strength of unit, form, number of units in the container, price per box, place where the information was found and reimbursement rates (i.e., is it (partly) covered by some kind of public health insurance, national programme or NGO, or must the patient pay everything him/herself?). Each medication is considered as 1 question.

Information about facility where the answer was obtained is mentioned as per requirements stipulated in point [2.1.d](#).

#### **Volatility and variability of prices of medicines:**

**Volatility:** in case the local expert is aware of recent significant price changes (e.g., increase of prices due to inflation or with high demand/low supply, decrease of prices due to deflation or low demand/ high supply) of the requested medicine, the expert is invited to mention such a situation in the answers.

**Variability:** in case the local expert is aware of a significant price variation of the same medicine between facilities, the expert is invited to mention such a situation in the answers.

---

<sup>4</sup> Clarification of an answer is not counted as an additional question





The example below is counted as 7 questions.

Generic Name	Brand name	Strength of unit	Form	Number of units in the container	Price per box in local currency	Facility name where the information was obtained (Pharmacy, hospital...)	Reimbursement/ special program/ free
Acetylsalicylic acid (Aspirin®)							
Carvedilol							
Digoxin							
Metoprolol							
Spirolactone							
Sertraline							
Warfarin							

### 5. Examples of questions on prices and cost coverage of medical treatments (field Accessibility)

Treatment information is requested in a table. Each Accessibility question related to outpatient treatment (e.g., price for a consult in public and private facilities) is considered as one question and each Accessibility question related to inpatient treatment (in public and private facilities) is considered as another question. Any specific 24-hour hospitalisation fees should be mentioned in inpatient costs (bed, food, medication, consumables etc.). In case additional costs, such as for stay in a ward, is not included in the price for inpatient treatment, this cost must be indicated separately.

Elements requested in the table include price in public and private hospital, the name of the neighbourhood/city, type (public, private) of facility where the information was obtained, the reimbursement rate and the website if available.

In the column reimbursement rate, it should be clearly stated if the reimbursement information relates to public, private or both types of facilities, and which population groups are included.

Information about the facility where the answer was obtained is mentioned as per requirements stipulated in point 2.d).

Volatility and variability of prices of treatments (including laboratory tests, medical devices):

Volatility: in case the local expert is aware of recent significant price changes (e.g., increase of prices due to inflation or with high demand/low supply, decrease of prices due to deflation or low demand/high supply) of the requested treatment, the expert is invited to mention such a situation in the answers.



Variability: in case the local expert is aware of a significant price variation of the same treatment between facilities, the expert is invited to mention such a situation in the answers.

The example below contains 5 questions:

Type of care	Public facility		Private facility		Reimbursement/ special programme/free/comments
	Price in local currency	Facility name + location	Price in local currency	Facility Name + location	
<b>Specialist</b>					
Outpatient treatment and follow-up by an HIV specialist					
Inpatient treatment an HIV specialist*					
<b>Clinical biology</b>					
laboratory test HIV: CD4 count					
<b>Medical imaging</b>					
MRI-Scan					
<b>Treatment</b>					
nephrology: chronic hemodialysis	price per session				

\* Please provide the rate in a standard room/ward or mention a cost range of a stay from the least and most expensive room rate.

## 6. Examples of questions regarding general or case-specific information on healthcare system, insurance schemes, social protection schemes (field Accessibility)

### 6.1 Questions about the healthcare system

Depending on the needs, questions about the organisation of the healthcare system may be subdivided into sub-questions, but it will be still considered as one question. For example,

**Question 1: Healthcare organisation: Please explain how the healthcare system is organised in [country]?**

Please specify:

- *How is healthcare provision organised? What are the levels?*
- *Is there a mandatory referral system? If, yes please explain how the referral system works.*
- *Is there free healthcare in public hospitals? Who is eligible for this free healthcare system?*



The management of a specific disease is considered as a separate question. For example,

**Question 2: How is the treatment for HIV organised?**

Please specify:

- *What is the patient's pathway? Is there a referral system?*
- *At which level of the healthcare pyramid is treatment provided?*
- *Is treatment provided in public and private facilities?*

## 6.2 Questions about health insurances schemes

Depending on the needs, health insurance questions may be divided into sub-questions, but are considered one question. Topics related to public health insurance are considered one question and topics related to private health insurance are considered a separate question. Some countries have mutual health insurances, which is then also a separate question. Questions on national programmes covering the treatment of specific diseases (e.g., HIV) or providing free healthcare to specific population groups (e.g., children, the elderly) are considered as separate questions. For example:

**Question 1: Please explain the public health insurance:**

- *How is it organised? Is it mandatory?*
- *Who can benefit?*
- *Who contributes and what is the amount?*
- *Which costs [relating to the specifics of the request case] are covered?*



**Question 2: Is private health insurance available? Please explain:**

- *How is it organised?*
- *Who can join?*
- *What is the premium?*
- *What is covered [relating to the specifics of the request case]? At what rate?*

**Question 3: Are there community-based health insurances in [country]? Please explain the system:**

- *How is it organised?*
- *What are the eligibility criteria?*
- *What does it cost?*
- *What is covered [relating to the specifics of the request case]? At what rate?*

**Question 4: Is there a national programme that provides free treatment or at a reduced rate for [disease/population group]?**

- *How is it organised?*
- *What are the conditions to join the programme?*
- *What treatment, care, medicines are covered [relating to the specifics of the request case]? What is not included?*

### 6.3 Questions about social security/ social protection

Social security as a topic can cover various aspects. For example:

**Question 1: How is the social security organised in [country]?**

Please specify:

- *Is it a mandatory system?*
- *Which schemes are currently implemented?*
- *What are the benefits?*



**Question 2: Would the patient be entitled to some sort of benefit or subsidy because of a (partial) disablement/invalidity as a result of the illness?**

Please specify:

- *What legislation governs this?*
- *Who is eligible?*
- *What are the benefits?*
- *How does it work in practice?*

#### **6.4 Questions about Non-governmental support**

Non-governmental supports include NGOs, charity organisations, religious organisations, etc. Each topic about the management of a specific disease is considered one question.

For example:

**Question 1: Non-governmental supports for HIV patients?**

- *Are there any NGO, charity organizations, religious organizations, etc. that focus on the access to HIV treatment?*
- *Who can benefit?*
- *What (kind of support) is provided?*

#### **6.5 Other questions**

1. If a disease cannot be treated in the country, is there a possibility of accessing the necessary care in another country? Who would pay for the treatment?
2. What is the incidence of [disease] in the country? What are the most frequent kinds?
3. Is someone who has not worked in [country] entitled to public health insurance?

## **IV. Procedure for ad-hoc meetings:**

Local expert may be invited to prepare and present medical country of origin information materials during MedCOI meeting on an ad-hoc basis (e.g. annual or biannual MedCOI event). Participation in meetings is possible through separate dedicated contracts for such purpose. Meetings may require physical presence at the EUAA in Malta or in any other EU+ country<sup>5</sup> or remote participation by means of a teleconference.



Rules on reimbursement of accommodation and travel costs and daily allowances related to the expert's participation to ad-hoc MEDCOI meetings are provided under the Annex 5 of the draft contract. The price includes preparation, delivery, and any Q&A session required.