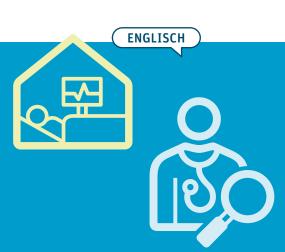


# Information about out-of-hospital intensive care needs assessments



# Dear insurance member,

you have submitted a medical prescription for out-of-hospital intensive care services to your health insurance fund. This is why your health insurance fund has asked the Medical Advisory Service to conduct a socio-medical needs assessment that includes a recommendation. The Medical Advisory Service is the independent consultancy and assessment service supporting statutory health and care insurance funds on medical and care-related issues.

### Where will the needs assessment be conducted?

To conduct the assessment, one of the Medical Advisory Service's assessors will visit you at the location where the out-of-hospital intensive care is to be provided. This may be in your own home, in shared accommodation, or in an inpatient care or assisted living facility. The Medical Advisory Service will suggest an appointment time in advance.

# What happens during the needs assessment?

The assessors are especially qualified medical doctors. It is also possible that a qualified care professional who is supporting the medical assessor in conducting the needs assessment will visit you. During the needs assessment, the assessor will verify whether the legal requirements for out-of-hospital intensive care are met. The Medical Advisory Service will also check that you are well supported at the place where the services are to be provided, and whether your medical and nursing care is guaranteed there. For children, this place may also be a kindergarten, a child care centre, or a school.

In order to determine your entitlement to out-of-hospital intensive care, the assessor will gather information about your individual situation during a personal on-site visit, and also review all existing documentation, for example physiotherapy, occupational therapy, and speech therapy reports, as well as nursing care documentation. This enables them to gain a comprehensive picture of your own personal situation. Please note: the on-site assessment will take about one hour.

### Other assessment details

During the assessment, the assessor will – insofar as this is possible – first speak with the person who is to receive out-of-hospital intensive care. In addition, the assessor will also speak with the relatives and other loved ones present, with the legal guardian, or with the care professional.

## What happens following the assessment?

A final result of the needs assessment only becomes available when the assessor has evaluated all information gathered during the on-site visit and from the documentation. The Medical Advisory Service summarises the results in an assessment report sent to the health insurance fund. The assessment provides information about whether the medical prerequisites for out-of-hospital intensive care are met, and whether treatment plans may need to be optimised in any way. The health insurance fund will make its decision on the basis of the assessment report. The health insurance fund will then send you a notification stating whether it approves the medically prescribed out-of-hospital intensive care.

# What if you disagree with the health insurance fund's decision?

If you have any objections to the health insurance fund's decision, you can lodge an appeal with your health insurance fund within one month after receipt of the notification.





# At a glance

# Worth noting

# How to prepare for an assessment by the Medical Advisory Service

- → Please inform the Medical Advisory Service if you are unable to keep the appointment.
- → If you have legal guardianship, please inform your legal guardian about the needs assessment.
- → Please also inform your care service provider about the assessment appointment.
- → Consider in advance which information about your personal situation and about the need for out-of-hospital intensive care is important.
- → Ask the person who is your main care provider, or who knows your situation particularly well, to be present during the assessment.
- → If you need interpretation into sign language, please contact your health insurance fund.
- → The assessment will be conducted in German. If you do not speak German sufficiently well, it is best if you have language support from a relative, a friend, or from an interpreter.

# What documents are needed?

- → Ahead of the assessment, your health insurance fund will already have requested documentation from your attending physicians and allied health practitioners, as well as from your care service provider.
- → Please also keep any available documents at hand for the assessment appointment.

Out-of-hospital intensive care is a very complex health insurance benefit that must be individually tailored to the patient and that requires a doctor's prescription. It is used for patients who may experience life-threatening situations at any time, and who therefore require the constant presence of a care professional. This applies, for example, to insurance members who rely on mechanical ventilation.

Such especially trained care professionals recognise changes in the patient's health status early on and thus contribute to avoiding complications.

Insurance members must submit the prescription for out-of-hospital intensive care to their health insurance fund. The health insurance fund is obliged to commission the Medical Advisory Service to conduct an assessment at the point of service, i.e. at the location where the affected person receives care. During the assessment, the Medical Advisory Service verifies whether the prerequisites for the prescription are met, and whether medical and nursing care is guaranteed at the point of service.

Aiming for nationally uniform assessments, the Federal Medical Advisory Service has, together with experts in the field, developed and issued the 'Out-Of-Hospital Intensive Care Assessment Guide'. Using this guide is mandatory for all Medical Advisory Services.





You can find further information about out-of-hospital intensive care assessments, about your rights, and about the processing of your personal information at: www.medizinischerdienst.de



This information in English can be found at: www.medizinischerdienst.de

Цю інформацію українською мовою Ви можете знайти за посиланням: www.medizinischerdienst.de

تجدون هذه المعلومات باللغة العربية على صفحة الشابكة (الإنترنيت): www.medizinischerdienst.de

The LEGAL BASIS for the assessment procedure are formed by § 37c of the Social Code (SGB) V, §§ 60 et seq. SGB I, as well as the Out-Of-Hospital Intensive Care Assessment Guide (Begutachtungsanleitung außerklinische Intensivpflege, BGA AKI) according to SGB V.

An information service provided by the Medical Advisory Services.

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