AdAM Ein Projekt von BARMER und KVWL

Patient information

Application of an electronic medication management support system – AdAM

Dear patient,

Nowadays effective medications are available for the treatment of many illnesses, and it is sometimes necessary that you take a number of different drugs. The aim of the AdAM project is to help ensure that your drugs are carefully selected to avoid unwanted interactions when you take them.

In the following pages, we will explain the project to you and request that you agree to take part in it. The project will be conducted in Westphalia-Lippe and will be scientifically evaluated.

What is the aim of the project?

The BARMER health insurance fund and the Westphalia-Lippe Association of Statutory Health Insurance (SHI) Physicians intend that the AdAM project should further improve the safety of patients taking a number of medications at the same time, and help doctors in the treatment of their patients.

What is new about this project is that your family practitioner will be able to retrieve electronic information from the BARMER database. With the help of these data, participating doctors will gain a more comprehensive overview of all their patients' treatments and prescriptions. Specifically, your family practitioner can access information on the medications, remedies and aids that you have been prescribed in the last 36 months, as well as the diagnoses and treatments that have been documented in the system, including those by other doctors.

All this information will make it easier to check your drug therapy for possible interactions and intolerances. Additionally, you will receive a medication plan with the names of your medications, dosage information, and further easy-to-understand information on taking your drugs.

In order that doctors can call up the required data, every participating practice is electronically linked to an assigned BARMER computer via the Association of SHI Physicians (gkvi, based in Wuppertal, www.gkvi.de).

Who is eligible to participate in the project?

All patients insured by BARMER may participate in the project and receive treatment from one of the participating family practitioners. To be eligible for participation, patients must be taking three prescription medications.

How and what will be scientifically evaluated?

On the one hand, the project will evaluate whether the intervention has enabled hospitalization to be avoided and whether it has led to any changes in drug therapies (project phase 1). On the other hand, the project will check whether these changes have been lasting (project phase 2).

As the first phase of the project is a so-called cluster-randomized study, only half of the participating doctors and their patients may participate in the intervention. It is important to separate the doctors into an intervention group and a control group to determine whether the project has any influence on the success of the therapy. In the second phase of the project, the investigation will aim to determine whether any changes are lasting. In this phase, which will begin after 15 months, doctors in the control group and their patients may also participate in the project intervention.

What is the actual project procedure?

After your doctor has provided you with detailed information and you have read this patient information leaflet, you can provide your written agreement to participate. Subsequently, your family practitioner will immediately be able to retrieve and use data on your treatments that are stored in the BARMER computer. This will be made possible using a particularly secure connection between the family practice and the BARMER computer via the Westphalia-Lippe Association of SHI Physicians (KVWL, based in Dortmund).

The data stored in the BARMER computer and the current status of your treatment will then be compared and updated on the basis of a personal consultation with your doctor in the family practice. After the consultation, the family practitioner will use a computer program that has been specially developed for the project to check your drug therapy for any unwanted interactions.

Should it be necessary, the doctor will contact medical specialists that are treating you and agree on changes to your medication. Afterwards, patients will receive a medication plan that has been updated according to your needs, and which includes all important information.

Will my participation in the project cost anything?

Participation in the project is free of charge for patients.

Can I end my participation in the project prematurely?

The agreement to participate can be withdrawn at any time without providing reasons for doing so, and will not have any negative effects on your medical treatment. It is simply necessary to state that you wish to cancel your participation in written form and send the cancellation letter to BARMER at the following address:

BARMER, Subject: AdAM project, Lichtscheider Str. 89, 42285 Wuppertal

What will happen to my data?

The family practitioner is the only person to have complete access to patients' treatment data stored at BARMER, and you have signed the agreement to participate only with reference to your family practitioner.

The data used in the project will be transmitted and stored in encrypted form. Family practitioners can only make changes to data they have entered into the database during the course of the project.

Your family practice will transmit your signed declaration of consent and agreement to participate to the Westphalia-Lippe Association of SHI Physicians where it will be stored electronically. The signed document will then be forwarded to BARMER. All participating patients will be registered with the Westphalia-Lippe Association of SHI Physicians and the BARMER insurance fund for the purpose of carrying out the project, as well as healthcare accounting.

Your family practitioner will be permitted to access all the medical data stored at BARMER for a period of up to three years. The data will include an overview of all the doctors that have treated you, including their documented diagnoses, all prescription invoices and information on hospitalization (inpatient diagnoses, dates of admission and discharge, name of the hospital). You have the right to see, correct and delete data that has been entered into the database by the doctor, as well as the right to object to specific data and the right to data portability.

The data on participating patients will be made available to the universities that have been commissioned to conduct the scientific evaluation in pseudonymized form. Pseudonymized means that names and other personally identifiable information (e.g., social insurance number) will be replaced with artificial identifiers, so that research scientists are unable to recognize the specific person that is referred to.

Should a participating patient file an objection, or wish to discontinue participation in the project, or if the contract with the Westphalia-Lippe Association of SHI Physicians is cancelled, all data that have been collected as part of the project will, on receipt of the corresponding notification, be deleted.

Who do I contact if I have any further questions?

If you have any further questions, please call the toll-free telephone number 0800 333 004 327 331 from a German fixed or mobile phone network.

Participating doctor's personal seal

DECLARATION OF CONSENT AND AGREEMENT TO PARTICIPATE IN THE PROJECT

Application of an electronic medication management support system

The Westphalia-Lippe Association of Statutory Health Insurance Physicians (KVWL) and the BARMER health insurance fund have signed a contract for the application of an electronic medication management support system. In abbreviated form, the project is also known as **AdAM**.

Declaration of consent and agreement to participate

I have been extensively and comprehensively informed about the nature, significance and implications of the AdAM project. I have read and understood the text of the patient information leaflet. I had the opportunity to discuss the implementation of the project with my family practitioner. All my questions were answered to my satisfaction.

I agree to permit my doctor to retrieve data on my invoiced treatments and drug prescriptions from all physicians that have treated me over the past 36 months on an ongoing basis. I would like my doctor to comprehensively check my medication on the basis of a cross-physician overview of all my treatment data. My family practitioner will also receive information on my hospitalizations, including diagnoses documented by hospitals, as well as, for example, invoiced prescriptions for remedies and medical aids, and nursing care. I am pleased that my doctor will be supported by BARMER in my medication and care management.

If necessary, I consent to my doctor contacting my other medical specialists in order to discuss my drug therapy.

My participation in this project is voluntary. Participation under the conditions of the contract begins when I sign this declaration of consent. My participation ends when I revoke or cancel this declaration, when the contract expires, or if I am no longer insured by BARMER.

I also agree that the Westphalia-Lippe Association of Statutory Health Insurance Physicians (KVWL, based in Dortmund) and BARMER should collect, process and otherwise use my data in order to carry out this project, as well as for healthcare accounting. This agreement to participate will be electronically recorded at KVWL and transmitted to BARMER. KVWL and BARMER will treat my data confidentially and in compliance with prevailing data protection regulations.

Cancellation policy

I can cancel my participation within two weeks of signing an agreement to participate without providing reasons. To meet the deadline, it is sufficient that notice of cancellation is sent to BARMER in due time. After the deadline has expired, it remains possible to cancel participation in the project. In order to provide notice or cancel, a notice of cancellation should be sent in written form to the following address:

BARMER, Subject: Project AdAM, Lichtscheider Str. 89, 42285 Wuppertal.

Krankenkasse bzw. Kostenträger BARMER		
Name, Vorname des Versicherten <FV31901_Komplettname> <FV31901_Vorname> <FV31901_Strasse> >FV31901_Hausnr> <FV31901_PLZ> <FV31901_Ort>		geb. am <FV31901_Gebdatum>
Kostenträgerkennung 104940005	Versicherten-Nr. <FV31901_KVNR >	Status
Betriebsstätten-Nr. <FV31901_BSNR>	Arzt-Nr. <FV31901_LELANR>	Datum

QR-Code

18mm x 18mm

Declaration of consent and agreement to participate

DECLARATION OF CONSENT AND AGREEMENT TO PARTICIPATE IN THE PROJECT:

Application of an electronic medication management support system

I agree to participate in the project for the application of drug therapy and care management (AdAM).

I have received one copy each of the patient information leaflet and the declaration of consent. A further copy will remain in the practice and the signed original will be sent by mail to the Association of Statutory Health Insurance Physicians (KVWL, Dortmund), where it will be electronically registered and forwarded to BARMER.

Date (DD. MM.YYYY) Signature of patient or legal representative

Consent that data may be used for the purpose of scientific evaluation and monitoring

I further agree that, in pseudonymized form and in compliance with prevailing legal requirements, my medical treatment and prescription data may be used for the purpose of scientifically evaluating the cost effectiveness, efficiency and quality of treatment/care management. The scientific evaluation will be conducted by research staff at the participating universities in the German states of North Rhine-Westphalia and Hesse. Pseudonymization means that my name and other identifiers (e.g. social insurance number) will be replaced by labels that rule out the identification of my person.

Date (DD.MM.YYYY) Signature of patient or legal representative

The physician will mail the original declaration of consent to:

KVWL, Projekt AdAM, Robert-Schimrigk-Str. 4-6, 44141 Dortmund.

A copy will also be provided to the patient, and a further copy included in the patient's records at the practice.