



## **EUMASS - UEMASS**

European Union of Medicine in Assurance and Social Security  
Union Européenne de Médecine d'Assurance et de Sécurité Sociale

**XVIIIth EUMASS Congress, Berlin, September 23-25, 2010**

### **President's report**

**Dr Sören Brage, EUMASS President**

At the ending of this excellent congress, it is my great pleasure to a report on the activities of EUMASS in the last two years. We now have a transition period for social insurance doctors in Europe. The insurance systems in the Nordic countries, in Western, and Eastern Europe and in the South are under reforms. The reasons for change may differ, but common are profound effects on the way we work. We are also challenged by effects of the financial crisis with high unemployment, and changes in public health due to environmental threats.

In this report I will reflect on how EUMASS has met its objectives as they are listed in the Statutes:

- EUMASS will ensure that private and social insurance physicians practising in European countries are represented at an international level.
- It will organise an international congress every two years in one of its Member countries.
- It will promote better standards in assurance medicine in Member countries by organising working groups, and supporting and participating in academic and clinical studies into medico-social problems, disability and relevant areas of public health.
- Where appropriate it will defend the ethical standards and the function of social insurance physicians.

### **Congress in Prague 2008**

The 17th EUMASS Congress was held in June 2008 at the Prague Congress Centre. It was organised by the Czech Medical Association, Czech Social Security Administration, and Ministry of Labour and Social Affairs. Many Czech colleagues from the Assessment Services joined us. This was the first time for the Czech organisations to host the congress. The main theme was "*Chronic diseases – their impact on healthcare and social security, including economical aspects*". There were altogether 57 presentations in plenary and parallel sessions on central issues such as main medical causes of work incapacity, work-related illness and work injuries, postgraduate education of medical advisers, mental diseases and long term work incapacity, and the evaluation of functional capacity.

The congress was very successful from both an organizational and financial point of view. It was very well attended with 292 participants from 20 European and 5 American countries.

It is a risky undertaking to organize large, international congresses. EUMASS with its limited means cannot take the financial responsibility. Therefore national member organisations have organised and financed previous events. So far this has worked out very well, and the Prague



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congress was certainly no exception. However, for the future, the EUMASS council should consider other ways to organise and finance EUMASS congresses.

### **The council meetings**

The EUMASS council has met at six occasions in 2008-2010. In October 2008 we were hosted by the CNAMTS in Paris. There were two meetings in Leuven in February in 2009 and 2010 with the Catholic University Leuven as host. The council and the executive committee were also hosted by the Hungarian Ministry of Social Affairs in Veszprem September 2009, and by the Slovakian Social Insurance Administration in Prešov, May 2010. The council had a meeting to prepare for the congress in Berlin, and this meeting was held in Dresden in June 2010. The council meetings have counted 20-30 representatives from most of our member states, and have been efficient and increasingly professional.

The council meetings have in this period included a scientific program on the day before the meeting itself. All these have been well organized, and of high academic and professional interest.

In conjunction with the meeting in October 2008, a questionnaire was distributed to all member organizations in EUMASS to have feedback on the frequency, venue, representation, professional content, language and schedule for the EUMASS council meeting. There was high degree of unanimity for the present way of conducting the meetings. It was however decided that we will include more professional content into the meetings, and conduct them in English with possibility to intervene in French.

At the meeting in Paris in October 2008, the following members were elected to form the executive committee of the council:

- President: L Bojičová
- Vice-president: H-W Pfeifer
- Vice-president: S Brage
- Treasurer: P Donceel
- Secretary General: A de Wind

The executive committee has had its own meetings in connection with the council meetings.

In February 2010, the council was notified that Ljiljana Bojičová had to resign as President of EUMASS. The council and the executive committee were disheartened by her resignation, taking into consideration her immense work to organize, and carry out the Prague Congress in 2008. In accordance with the statutes of EUMASS the oldest Vice-president, S Brage, was appointed President for the period up to the next council meeting. We would like, at this occasion, to thank Dr Bojičová for her devoted work for EUMASS over the last years.

### **The working groups**

Most of the practical work in EUMASS, except for the planning and working with congresses, is done in the working groups. In this period, four groups have been active.



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The working group on taxonomy completed in 2008 a large work on disability benefits arrangements in European countries. The results, including a comprehensive comparison between disability benefits arrangements, are accessible on the EUMASS website under the heading *Assessment of long term incapacity for work in European countries*. In this report the reader can find details of assessment of incapacity for work. The tables are very useful to all persons working in this field, such as physicians, researchers, policymakers. The work was lead by W de Boer under the supervision of EUMASS council. The project was sponsored by the SIG-foundation and TNO Netherlands.

The working group on ICF is working with the dissemination of ICF and the integration of the ICF model into the national insurance administrations. After the successful development of the ICF-based core set for disability assessment, and its publication in 2007, the group has mainly worked with the dissemination of ICF in various national settings, and with the validation of the core set. These two aspects are linked to each other, and dissemination is aided by the validation study.

At the 2008 Congress in Prague, there were several presentations on ICF and on the development of core sets. In connection with the council meeting in 2008, there was organised a mini-symposium on ICF. At the present 2010 congress, three separate workshops on ICF have been held, and this clearly indicates the importance of ICF, and the interest for further work with it.

The validation study of the core set has unfortunately evolved at low speed due to capacity problems. Norway, Germany, Belgium, Romania, Iceland, and Italy either have tested the core set, or are, at the moment, doing it. Preliminary results indicate that social insurance doctors find the core-set sufficient and useful. The collections of data for the validation study will be continuing until the end of 2010.

### The working group for European Disability Rating Scale

In European countries there is a widespread and often mandatory use of disability scales, baremas, and invalidity tables for the assessment of permanent medical disability, particularly in accident insurance. It turns out that these tables, although similar in structure, vary to a considerable extent between countries, and it has frequently been suggested to increase cross-national cooperation. Therefore, at the council meeting in September 2009 the council decided to endorse the establishment of a working group on disability scales. The group conducted a small scale inventory among the member states to map the use of rating scales in Europe. The group was also in contact with CEREDOC that has developed the European Disability Rating Scale.

Based on these efforts, and also on the previous experience of a group working for the Council of Europe around ten years ago, it became evident that the elaboration of a new European disability rating scale would be useful but too large a topic for the working group.

### The Babylon group



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It cannot be denied that there is a high degree of confusion and uncertainty on the use of many terms and concepts in European social insurance. This causes misunderstanding, and retardation of clinical and scientific processes. The council has therefore endorsed the start of a new working group on nomenclature, called the Babylon Group. The working group will have as its main goal to facilitate understanding and communication in the field of insurance medicine in Europe. The definitions will be based on the international regulations.

### **Expansion**

I am happy to state that EUMASS' growth continues. Organizations from Romania have been accepted as new members, 17 countries are now represented in EUMASS. We have in addition received application from two more countries, and hope that they can be included within the next years.

### **Strengthened professionalism**

In both 2009 and 2010 has there been held mini-symposia in conjunction with the February council meetings in Leuven. These symposia have been excellently organized by Professor P Donceel on highly relevant topics for EUMASS. Internationally renowned academics and researchers in social insurance medicine have participated. In 2009 the topics were sickness absence research, and sickness certification in general practice. The 2010 mini-symposium embraced the concepts of work ability, and rehabilitation after head trauma. The symposia have been attended by council members, social insurance doctors, and academics. The quality has been outstanding and inspiring, and the council strongly supports a continuation of these symposia.

In addition, increased time has been given to discussions over professional themes at council meetings, starting with education at the meeting in May, 2010.

### **External collaboration**

EUMASS has a long standing collaboration with the American Academy of Disability Evaluating Physicians (AADEP), and has been discussing future collaboration on education matters. Clement Leech is the liaison member in council in this collaboration.

In my view the network in EUMASS functions very well and the importance of this network must not be underrated. Many members draw advantage on the expertise and network of individual members in studies and work they are doing for their national organisations. Particularly interesting here is the network on sick leave certification and social medicine coaching that many EUMASS members take part, but which is, in effect, an undertaking outside EUMASS.



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### **Administration**

The secretariat has in this period, as earlier, been located in Leuven. We have been greatly aided by Lies van Meerbeek who has been doing an outstanding job to hold this organisation together. She has also greatly aided us with the website.

### **Communication**

The website of EUMASS ([www.eumass.com](http://www.eumass.com)) is our main window to the outside world. This site is public, and contains links to other organisations. The website contains information on social security medicine in Europe, on symposia, on presentations both at congresses and otherwise, and on results from working groups.

There has recently been a change in the structure of the website. We ask of all users to check the new website and send comments to the secretariat.

### **Revision of the statutes**

At the meeting in February 2010, there was suggested a change in the statutes. It was proposed to amend article 16. This article restricted the length of office for executive members. Since election of the executive committee occurs every two years, was felt no need for such restrictions. The council voted in favour of the amendment.

There has been no other changes in the statutes, and, in my personal view, they function well, and serve well the purpose of the EUMASS.

### **Finance**

EUMASS is in a healthy financial state. Our income comes exclusively from membership fees, and the expenditures have in the last years been moderate. It is a great advantage to have some means for the website, for the secretariat, and costs for a few designated speakers at congresses and council meetings.

### **The coming two years 2010-2012**

A new executive committee was elected by EUMASS council in May 2010, and consists of:

- President: Sören Brage
- Vice President: Cristina Dal Pozzo (main organizer of the 2012 Congress in Padova)
- Vice President: Hans-Werner Pfeifer
- Secretary General: Annette de Wind
- Treasurer: Peter Donceel

As an executive committee we will work hard to further strengthen the position and work of EUMASS. This means that we have to adapt to changing circumstances for our work. We will meet increased and better understanding of medical conditions and treatment. We will meet ageing populations, increased demands for integration with labour market authorities,



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and a higher professionalism and independence among case managers/decision makers in the administrations.

These changes will challenge our professional role, and in my view we have to meet them by strengthening our scientific base, and our attempts for a more evidence based practice. We have to improve international cooperation and networks to develop this base, and improve our practice.