Dejan Malesic

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Global Benefits Vision: Could you expand

a little on how eHealth can help address prevention matters and what is the benefit, not only to the insurance industry but to the insured.

Dejan Malesic: The approach between patients and health–care services is completely reversed within the new eHealth model.

Physicians have constant access to the patient's medical data and have tools (thanks to AI) to monitor only data which is relevant to that patient.

The most relevant benefits for insureds are better quality of service, huge savings, and time.

This innovative eHealth approach, offered for example by proximity medicine, lets patients do most of the diagnosis at home, or at a nearby pharmacy, or at the office. Therefore, the large amount of out of the pocket money (due to travel costs) and time spent by insureds can be saved.

Apart from saving time and money, from a patient perspective, proximity medicine is extremely well perceived in terms of safety and the additional confidence of being assisted whenever and wherever they are. Lastly, it helps get rid of the traditional bottlenecks and long queues in hospitals/clinics.

Global Benefits Vision: You mentioned that having a large range of affordable IoT devices and range of technologies. Could you be more specific about those technologies and how to make them affordable to the masses?

DM: Due to the level of miniaturization of medical-grade wearables, insureds can have at their fingertips, a real laboratory and diagnosis equipment connected to their smartphones. The cost of these devices is very reasonable, even if the same devices need to be acquired by insureds. But, within health plan packages, it is possible (and quite common) to make different combinations with devices for selfmeasurements and a tele-consulting service. Therefore, insureds can also receive all relevant devices for their healthcare plan without any additional cost on their side (this cost might be covered by their employer and/or health-insurance company as a part of their overall business strategy).

Global Benefits Vision: How will Artificial Intelligence (AI) play a role on the transformation of the prevention process?

DM: As AI collects an individual patient's data and begins to learn how patients react differently to feedback, it can begin tailoring feedback so that it's personalised and predictive. Such feedback is the foundation upon which a preventive healthcare system is built. ••



Zeist RetireVitally conference, hosted by PGGM - 24 January 2019

WORKSHOP 3 focused on 'Return-to-work programs Finnish style' and was presented by **Dr. Seppo Kettunen**, MD. Dr. Kettunen works as an adjunct chief physician at Ilmarinen Mutual Pension Insurance Company of Ilmarinen in Finland. He discussed the Finnish model for return-to-work programs and revealed how return-to-work programs are designed and how they work in practice.

Workshop 4 'Addressing and facilitating later retirement' by Britt Brandum of PKA in Denmark, presented how joint efforts, from public regulation to general agreements between the social partners over flexible pension products and a change of counselling have facilitated this development. Britt also discussed her views on the challenges to come.

Workshop 5 'Healthy Society,' was given by Brigit Heemskerk of Healthy Society, NL. The former manager and director in healthcare discussed a Stanford-based approach for employees who have a long-term illness or have long-term health problems by focusing on knowledge promotion, practicing health skills, and social support of a group. The power of the approach is that it supports self-management for employees while offering an organization the opportunity to set up their own support structure through a 'train the trainers' spread model. Heemskerk also challenged participants to think about sustainable employability from a co-creating point of view.

Workshop 6 was facilitated by **Cécile Vokleber**, of Agirc–Arrco (France). Her workshop was titled 'Aging prevention centers and further initiatives targeting active employees in France' and discussed how the pension network of Agirc–Arrco, at the request of the French social partners, conducts and evaluates several experiments aimed at maintaining employment

and returning to work. Employment spaces, prevention centers, as well as "club houses" inspired by the New York Fountain House (mental health), are some of the initiatives carried out in partnership with various public actors.

WORKSHOP 7 e-Health and prevention programmes was presented by **Dejan Malesic**, who is head of business development for Previmedical/Previnet, a leading Italian based TPA for healthcare, pension, and insurance service.

Dejan pointed to three areas of concern: How to achieve cost effectiveness of the prevention process; how innovation and e-health can lead to an efficient prevention model; and which role should insurance companies have in the prevention process. He also discussed hypertension, diabetes, back pain and lifestyle habits as being the silent killers according to the WHO, and the biases inherent in traditional healthcare.

Dejan shared how technological solutions such as an eHealth 'ecosystem' can help address prevention matters. Bold transformation, according to Dejan, can only come about with a large range of affordable IoT devices coupled with a range of technologies and methodologies of telemedicine such as telemonitoring and proximity medicine.

Workshop 8 titled e-Counselling: Best practices for individuals close to retirement, was given by **Chris Launay** of Psya in France and Spain. Lunay discussed the application of 'e-counselling,' which includes online and on-demand support, for anyone close to retirement or in an early-stage of retirement. The session's discussion centered around the common psychosocial factors such as depression, loneliness, one's perceived health status, self-esteem, self-achievement, ego-