

EPF BRIEFING FOR MEMBERS
regarding the Commission's proposal for a Directive of the European Parliament and the Council for the application of cross-border healthcare patient rights

July 2008

MAIN MESSAGE

- EPF welcomes the draft Directive – we feel our response to the Commission's Consultation on Health Services last year based on input from our diverse membership has been largely understood and reflected. The Directive is rights-based, focuses on core principles around quality, safety, and equity, provides for the tools to make it work for patients and is an important legal framework upon which to build.

KEY POINTS

- As a basic principle, patients want to receive their healthcare as close as home as possible but there are instances when it is preferable to receive treatment abroad (patients who live in cross-border regions and have easier access to healthcare in the neighbouring country, patients with diseases for which a specialised treatment is available only in another Member States, patients that choose a specific treatment abroad etc).
- The Directive provides the legal clarity regarding patients' rights that was needed following several European Court of Justice (ECJ) rulings, initiated by patients themselves, that ruled that they had the right to reimbursement following treatment abroad. However, the Directive does not create other possibilities to receive healthcare abroad than those established by the ECJ rulings.
- The Directive will enable cross border healthcare to happen within a clear framework of safe, high quality and efficient healthcare throughout the EU. The Directive is not aimed at changing how Member States organise their national health systems – this remains the primary responsibility of each of them – but facilitates cooperation between Member States health systems, which will lead ultimately to improved quality across the board.
- The increased information and cooperation among Member States resulting from the implementation of the Directive will help to improve the overall quality of healthcare throughout the EU and challenges some of the basic inequities confronting EU patients. The Directive shall apply to provision of healthcare regardless of how it is organised, delivered and financed or whether it is public or private.

- The Directive will also reduce inequities linked to the uncertainties that existed around receiving treatment abroad. Patients need to be sure about when they will be reimbursed and under what conditions and this needs to be appropriately communicated.
- The development of European Reference networks will enable easier access to highly specialised care and ensure efficient use of resources for such conditions.
- Information, Communication Technology and Patients rights is one of EPF's priorities. The Directive will facilitate developments to help national e-health systems be compatible with other Member States systems and meet certain standards. Patients will have the opportunity to benefit from services from abroad while staying in their own country, for example through the use of telemedicine.

EPF Preliminary DRAFT recommendations

1. We welcome that cooperation agreements between all EU social security systems have already been set up and citizens who travel to another Member State other than their home country to obtain medical treatment can be reimbursed for the same or similar treatment as in their national health system. However, there are two concerns:

- An effective administrative mechanism for rapid reimbursement should be set up so that unnecessary delays can be avoided.
- Patients in difficult economic situations may not be able to pay the costs to the healthcare provider abroad up front.
- Further work is needed by the Commission and Member States to build upon the current proposal and explore workable mechanisms to deal with these issues.

2. We welcome that national contact points will be established in each Member State to inform patients about the options available to settle any dispute, help to identify the appropriate out-of-court settlement schemes etc. EPF recommends that these contact points are set up in a transparent way and that quality information is appropriately disseminated across the country and regions. Patient organisations, if adequately resourced, can play a useful support role and supplement the formal information received from health authorities.

3. The mental health and well-being implications of patients' mobility should also be examined. Ways of providing appropriate psychological support to patients receiving health care support should be explored by the Commission and Member States.