

Collectif Interassociatif Sur la Santé



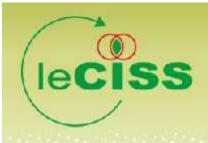
# The role of the CISS in the implementation of the Directive in France

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#### Who we are

- Created in 1995
- Brings together 40 associations with complementary approaches including associations of diseased people, seniors, disabled people, families and consumers.
- Coordinates a network of 25 regional CISS across France allowing us to:
  - Be heard when health policies are decided and implemented at the regional level
  - Inform, counsel and train representatives of health care users who sit in regional, territorial and local bodies



#### Our missions

Informing health system users on their rights regarding access health care facilities, health professionals as well as social welfare organisations.

Monitoring the evolution of the national health system, analysis critical issues and defining common strategies in order to improve the care of health system users.

Training representatives of the health system users on their rights regarding access health care facilities, health professionals as well as social welfare organisations.

Advocating, sharing our observations and claims to consolidate the CISS as a key actor and a representative of health system users.



#### Crossborder care: a reality

In 2012, France reimbursed over 481 millions euros for treatments received by French citizens in other EU countries.

- Belgium: 212 533 993 euros

- Spain: 95 031 368 euros

Portugal: 77 776 390 euros

- Germany: 27 166 244 euros

- Switzerland: 22 535 509 euros

In comparaison, France was reimbursed over 615 millions euros.

# Is the directive a solution to the issue of renouncement to health care?

In 2013, 33% of French citizens have renounced health care for financial reasons (27% in 2012).

- Dental care: 25%

Optical purchase: 17%

Medical checkups: 12%

Drug purchase: 7%

– Heavy treatments: 7%

The global rate for EU citizens is 18%



## Role of the CISS in the transposition of the Directive

The CISS participated in the campaign called « Make them informed! », launched by Active Citizenship Network in May 2013

#### Objectives:

- Effective involvement of patient organisations in the transposition process in all MS
- Accessible, complete, citizen friendly and personalized info. provided through the NCP
- Information campaigns on citizens' new rights



### Role of the CISS in the transposition of the Directive

33 organisations from 12 countries signed the Manifesto and asked their Ministry of Health to be involved in the transposition process

So did the CISS, with the following results: Consultation on the Decree transposing the Directive on medical prescriptions, but at a very late stage

No involvement in the transposition of the other provisions, especially the NCP, which are still under discussion in the Ministry



To keep exerting pressure on the Ministry of Health, with the following objectives:

- To speed up the transposition process;
- To control that it respects the requirements of the Directive and the expectations of patients and users, especially in the fields of:
  - > Access to information;
  - > The conditions for prior authorisation; and
  - > The reimbursement of costs (timing & conditions).



The tools that shall be used are the following:

- Direct contacts with the Ministry;
- Dialogue and exchange of information with DG SANCO, Healthcare systems Unit;
- Exchange of information and of good practices with organisations from other MS;
- The media, if necessary.



To inform patients on their rights deriving from the Directive: Disseminating information on these rights through the CISS communication tools (new website, newsletter, factsheets) and DG SANCO leaflet, even before the transposition of the Directive;

Training the staff of "Santé Info Service" (CISS hotline) and the CISS member organisations, so that they can advice citizens

www.leciss.org



To monitor the correct implementation of the Directive provisions on patient rights, collecting the claims of citizens through "Santé Info Service" (CISS hotline);

To report and discuss the cases of bad implementation with the competent public authorities, including the European Commission.