



EUROPEAN COMMISSION  
HEALTH AND FOOD SAFETY DIRECTORATE-GENERAL

Health systems, medical products and innovation  
**Performance of National Health Systems**

## **Minutes of the Expert Panel on innovative ways of investing in health**

Brussels, 13.6.2017

Minutes of the  
2<sup>nd</sup> Working Group Meeting on Benchmarking access to healthcare in the EU  
Audio conference  
Brussels, 13.6.2017

### **1. Approval of the agenda and of the minutes of previous meeting**

No comments were made on the agenda or the minutes of the previous meeting.

### **2. Nature of the meeting**

The 2<sup>nd</sup> Working Group meeting on Benchmarking access to healthcare in the EU took place on 13 June 2017 via an audio link. The meeting, which was a non-public meeting, was chaired by the Chair of the Working Group.

### **3. Update on the Opinion**

The Chair opened the discussion and handed the floor to the Rapporteur who explained the draft he had distributed in advance of the meeting. The Working Group members commented amongst other things on the following points:

- the approach to set targets and whether timelines should be used,
- patient expectations and whether this should be added to the opinion,
- benchmarking and its use to monitor progress,
- providing for some good practices to share experiences between countries,
- availability and access: these terms could be clarified,
- parts on inequality need more clarification,
- considering input on equity and mental health,
- need to shorten the opinion and provide for graphical presentation.

The part on targets of the opinion will be subject of further work. It needs to be shortened and more conclusive. The idea of benchmarking is to help Member States to breach their gaps in access to health care. To achieve this, the opinion will identify good examples. Bottlenecks in terms of capacities to improve the situation will be better highlighted in the text. Differences between availability and accessibility will be better explained. Furthermore, aspects of equity will be considered to the extent possible on the basis of the ideas discussed: barriers in access for certain populations, including sometimes invisible populations. A line on addressing the gaps in access healthcare by people with mental illnesses will be included in the text.

The Commission proposed to sharpen the part on second level indicators addressing specific challenges in specific Member States, which could be grouped according to some prevailing characteristics in terms of problems in access to healthcare. The Commission also suggested contextualising the analysis, making correlations with at-risk of poverty indicators. Experts think that this analysis would however be beyond the available resources and they can only strengthen the analysis on equity aspects.

#### **4. Conclusions/recommendations/opinions**

It was agreed to clarify the terms availability and accessibility and strengthen the parts on inequality and mental health. It was also agreed that good practices will be provided, providing some guidance to Member States on how to reach benchmarks.

The revised version will be circulated on 19 or 20 June.

#### **5. Next steps**

The Rapporteur will update the current draft document incorporating the suggestions from the Working Group members by the beginning of the week commencing Monday 19 June 2017. Any further comments to this new version should be submitted to the Rapporteur so that a new version can be submitted to the Plenary meeting on 29 June 2017.

#### **6. Next meeting**

The Working Group will discuss the draft opinion at the Plenary meeting on 29 June 2017. No other Working Group meetings have been planned so far.

#### **7. List of participants**

Prof. BARRY Margaret  
Dr BOUREK Aleš  
Prof. BROUWER Werner  
Prof. DE MAESENEER  
Prof. LEHTONEN Lasse  
Prof. McKEE Martin  
Dr MURAUŠKIENE Liubove  
Prof. NUTI Sabina  
Prof. SICILIANI Luigi

Ms PTAK Katarzyna – DG SANTE  
Ms KONTINEN Päivi – DG SANTE