



Update from DG Employment, Social Affairs and Inclusion

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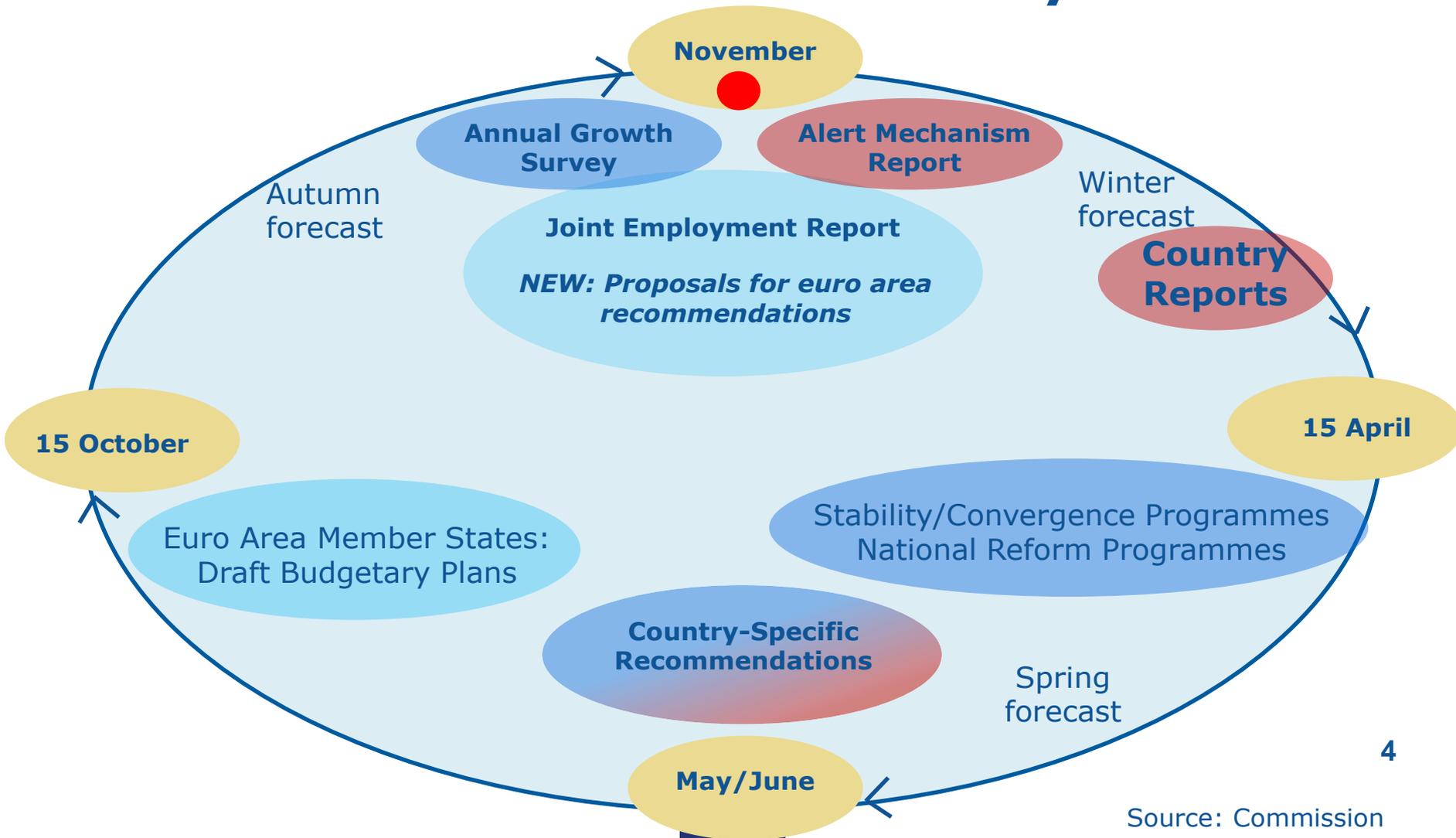
EGHI Meeting
Luxembourg, 11 May 2016

Outline

- ***Health and LTC in the 2016 European Semester***
- ***Health in the social Open Method of Coordination:***
 - **JAF on Health**
 - **SPC in-depth thematic reviews**
- ***Towards a European Pillar of Social Rights***

Health and LTC in the European Semester 2016

The economic surveillance cycle



Healthcare in the 2016 Annual Growth Survey

- ❑ Labour market participation and labour productivity
- ❑ Social investment to strengthen people's capacities to engage in the labour market
- ❑ Financially sustainable and adequate protection for all



- ❑ Reforms need to continue to enhance the cost-effectiveness of healthcare systems and to ensure adequate access.

More specifically Member States shall

- ensure a sustainable financing basis of healthcare systems
- encourage the provision of and access to effective primary health care services
- provide a cost-effective use of medicines
- engage in better public procurement
- improve care integration effectively using up to date information channels (such as e-health)
- assess the relative effectiveness of health technologies
- encourage health promotion and disease prevention

Health and Long Term Care in the European Semester 2016

- ❑ Healthcare is addressed in **20** of the **2016 Country Reports (CRs)**
- ❑ According to the 2016 CRs, **progress** has been **limited in 7 of the 11 healthcare 2015 CSRs**. The COM assess that there has been **some progress for the other 4 MSs** (BG, CZ, SK, IE).
- ❑ **Challenges** relate to long-term fiscal sustainability, inefficient use of resources, access and inequities in access to healthcare, availability of health workforce, low public funding, poor health outcomes, governance, corruption in the health sector, information systems, e-health, etc.

Long Term Care in the European Semester 2016

- ❑ *[...] regarding health care **and long-term care systems**, reforms need to continue to enhance their cost-effectiveness and to ensure adequate access. The demographic challenge affects not only pensions but also health care and long-term care related expenditure (AGS 2016)*
- ❑ 19 CRs mentioned **LTC challenges**. References were to **inadequate provision and coverage** (11), to the **link with insufficient female labour participation** (5), and to **sustainability issues** (15).

Health in the social Open Method of Coordination: Update on JAF Health

JAF Health related activities in 2015

- ❑ **Review of selected set of indicators for development – *16 indicators reviewed (11 adopted for use, 2 dropped, 3 postponed)***
- ❑ **ISG assessment of the analytical capacity of the JAF on Health**
- ❑ **JAF Health country profile charts for all Member States – *short description, concluding remarks, MS' own assessment***
- ❑ **Analytical input based on JAF Health to the SPPM review on health policy reforms**

JAF Health at the ISG in 2016

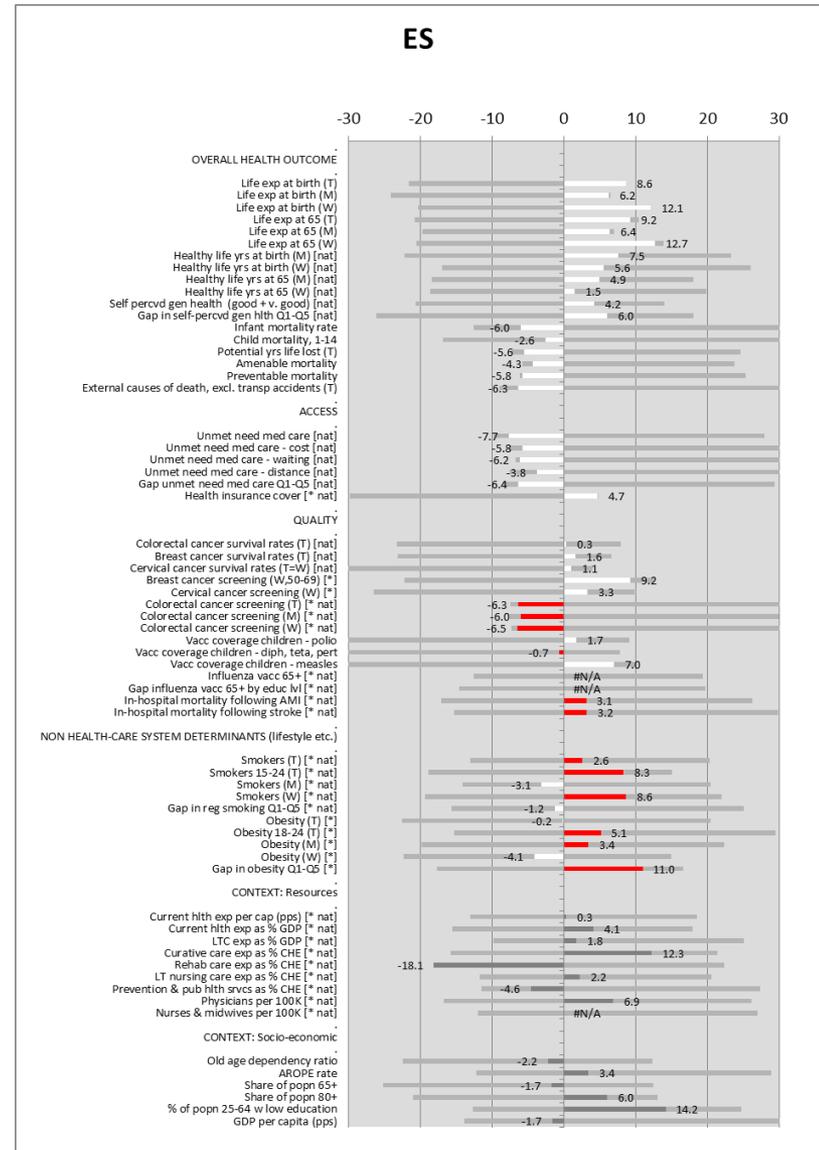
- ❑ **select and review in detail indicators for development and to start work on JAF Health efficiency dimension;**
- ❑ **decide on possible inclusion of time trends for indicators with sufficient country data coverage and sustainable data collection over a reasonable period of time;**
- ❑ **start developing a new concept of visualisation for JAF health NAT indicators and indicators with considerable gaps in data coverage;**
- ❑ **develop practical guidance for verifying the JAF Health results and carrying out a second step quantitative and qualitative analysis.**

Closing the data gap

- ❑ **Expected data from Eurostat: EHIS wave 2, SHA 2011, EU-SILC test module 2017**
- ❑ **Close collaboration with OECD on HCQI to include all EU MS in the 2016-17 data collection for EU policy relevant quality indicators**
- ❑ **WHO advice on the right choice for a children vaccination indicator**

JAF Health profile charts in 2015: an updated example

11 agreed for use indicators has been added to the JAF Health profile charts in 2015

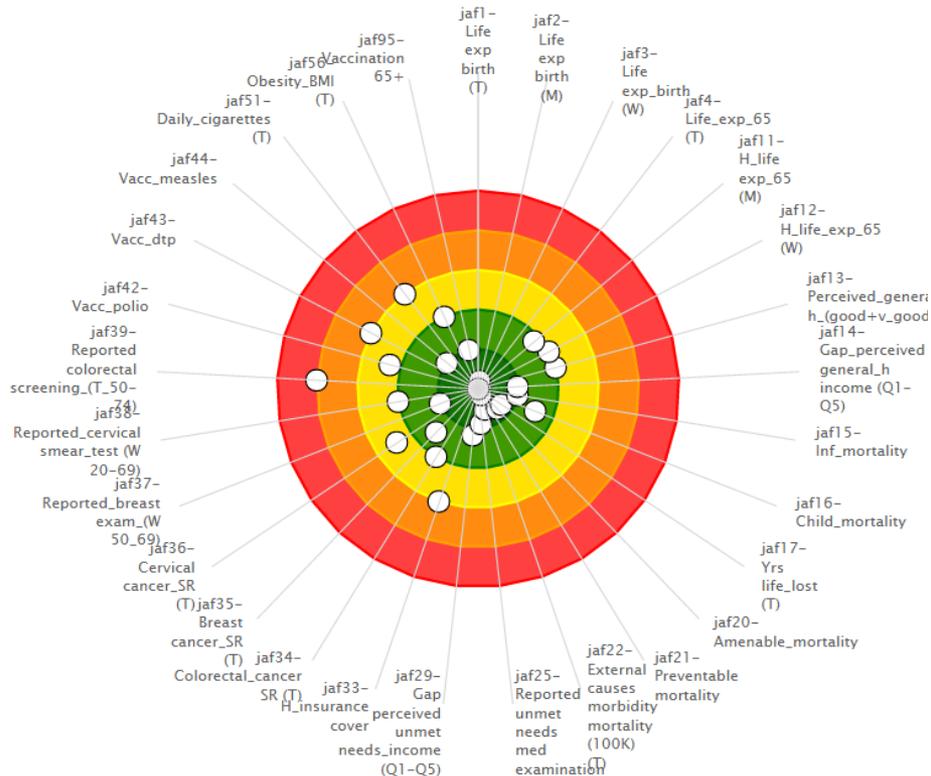




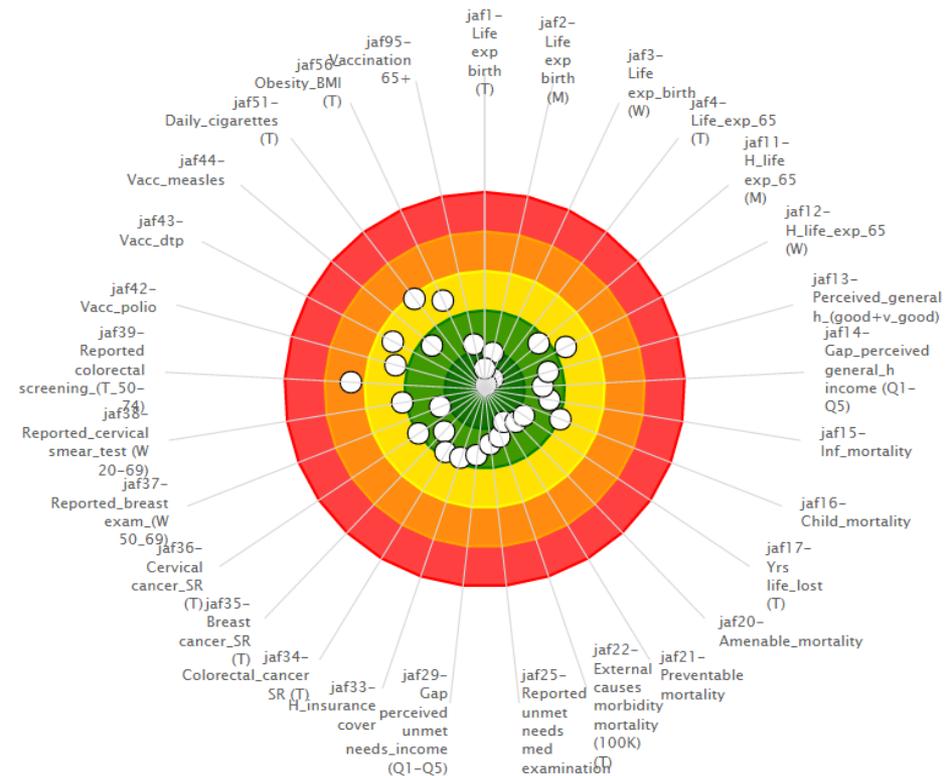
European
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In search of complementary visualisation techniques: Prof. Sabina Nutti et al applied provisionally the dart board visualisation for JAF Health

Quintile method – Spain



MeS method – Spain



Health in the social Open Method of Coordination: SPC in-depth thematic reviews

SPPM in-depth thematic reviews

- Multilateral discussions among Member States for identification of policy measures to tackle shared challenges in social protection and inclusion;
- Based on observed trends of the Social Protection Performance Monitor (SPPM) dash-board.
- SPPM dash-board includes two indicators on health:
 - **Unmet need for medical care**
 - **Healthy Life Years at 65 (men, women)**
- SPPM results for the period 2008-2013 showed that unmet need for medical care has increased in 9 Member States, but decreased in only 3 Member States ➡ SPC in-depth thematic review to the topic of **universal access to health care**

SPC in-depth thematic review on health policy reforms in 2015

- **Joint review with the Council Working Party on Public Health at Senior Level**
- **3 presenting countries and 15 more sharing relevant experience**
- **Broad participation of international organisations and Commission services engaged in health**
- **Summary report of the discussions and main conclusions available online at:**
ec.europa.eu/social/BlobServlet?docId=15014&langId=en

SPC in-depth thematic review on sick leave and sickness benefits in 2016

- **Focus on challenges to enable the access to health care as well as to social protection schemes while avoiding the slide of people on long-term sickness benefits towards early retirement and disability pension;**
- **Put on the agenda the role of social protection in the rehabilitation and reinsertion of working-age people affected by longer-term illness.**

Towards a European Pillar of Social Rights

Commission's priority: A deeper and fairer Economic and Monetary Union

President Juncker, State of the Union address in the European Parliament, September 2015:

*"I will want to develop a **European Pillar of Social Rights**, which takes account of the changing realities of the world of work and which can serve as a compass for the **renewed convergence within the euro area.**"*

Launching a public consultation in 03/2016

- ❑ **First preliminary outline** of the European Pillar of Social Rights, with proposed principles to build on and complement the EU social "acquis" in order to guide policies for well-functioning and fair labour markets and welfare systems.
- ❑ Divided into 3 main categories:
 - 1. Equal opportunities and access to the labour market**
 - 2. Fair working conditions**
 - 3. Adequate and sustainable social protection**
- ❑ The outcome of the debate with EU authorities, social partners, civil society and citizens should feed into a final text of the European Pillar of Social Rights.

12. Health care *and sickness benefits*

- a. Everyone shall have timely access to good quality preventive and curative health care, and the need for healthcare shall not lead to poverty or financial strain.**

- b. Healthcare systems shall encourage the cost-effective provision of care, while strengthening health promotion and disease prevention, in order to improve the resilience of healthcare systems and their financial sustainability.**

THANK YOU!

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