



CITIZEN'S SUMMARY

Patient's rights in cross-border healthcare

EU citizens facing a health problem while travelling in another Member State can already obtain healthcare and be reimbursed thanks to the coordination of EU social security systems. Those who cannot get the healthcare they need in their own country within a reasonable time can also rely on this system. But citizens may have other reasons for travelling abroad to receive treatment. For example, they may live in a border region where the closest health facilities are across the border. These people will in future find it easier and safer to be treated in other Member States thanks to a European Commission initiative to clarify the circumstances under which cross-border healthcare can be provided and reimbursed. A Draft Directive on the Application of Patient's Rights in Cross-border Healthcare was adopted on July 2, 2008. It will come into effect after scrutiny and debate in the Council of Ministers and the European Parliament.



The issue

Each year a small number of European citizens choose to seek medical treatment in another EU country. However today, the rules about rights and reimbursements are far from clear. And this sometimes has led to such matters being determined by the European Court of Justice (ECJ). In a number of cases, the ECJ has ruled that patients had the right to be reimbursed for healthcare received abroad. Whilst the rulings were clear in these individual cases, how they apply in general is not.

Both the Council and the European Parliament urged the Commission to clarify the situation and develop a specific legal framework taking into consideration the specificities of the health field.

Better access, more safety and quality

The directive would improve the practical and the safety and quality aspects of cross-border healthcare to the benefit of individual patients and European health systems overall. As long as a treatment is covered by their home healthcare system, patients would be allowed to receive it in another country without getting authorisation beforehand. They would pay for treatment and then be reimbursed up to the sum they would have received for the same treatment at home. Under certain circumstances, however, for hospital care, a Member State may decide to introduce a system of administrative prior authorisation.

Information about these issues would be readily available through national contact points. The text clarifies that responsibility in terms of safety and quality for the treatment provided lies with the country of treatment. And if something goes wrong, patients would know how to seek redress and compensation. All Member States should also have clear safety and quality standards based on common principles agreed at EU level.



This framework would also promote European cooperation in the field of healthcare through:

- the development of European reference networks, which would bring together, on a voluntary basis, specialised healthcare centres across the EU to make it easier for patients to access highly specialised care,
- shared health technology assessment to reduce duplication of efforts, and thus promoting effective use of resources,
- increased activities in the field of information and communication technologies ("e-Health") to help improve the quality, safety and efficiency of healthcare.

This legislation would not change the role of Member States in the field of health. It would still be fully up to them to organise their respective health systems as they choose and to define what treatments are covered by their social security schemes.



<http://health.europa.eu>