

Regio Basiliensis and AEBR

EUROPEAN HEALTH COOPERATION
-ADDED VALUE FOR CITIZENS, ECONOMY AND REGIONS-

2nd AEBR Forum on 22 February 2008
in cooperation with Regio Basiliensis

Summary results

1. European framework for health cooperation

1.1 General developments

- The internationalisation doesn't stop short of the health systems, in particular in border regions.
- A successive reorganisation of national health systems as result of the common market and economy policy of the European Union is obvious:
 - Current developments at the European level – irrespective a decision in favour or against a EU directive – have a great impact on patient insurance and service lists.
 - Cross-border utilisation of health services (patient mobility) entails also the aspect of free movement of services in the European common market.
- Hospital treatment abroad remains still quite complicated due to the strength of the nationally organised hospital structures and traditions.
- The quality of health cooperation depends quite often on the similarity of systems on both sides of the border.
- While using cross-border health services citizens need more clarity and legal certainty as regards their rights as patients.
- But: only two percents of patients go abroad for a treatment. This is one percent of total health expenses.
- Considering the effects of demographic change the efficiency of health systems has to be enhanced, also in a cross-border context.
- Health services have to take more into account the needs of patients.
- In the future patients will spend more on their health than today.
- With regard to cross-border provision of health services the patients' security is at risk due to growing antibiotic resistance (e.g. problems with MRSA).

1.2. Developments at European level

- Health services are an important element of the European social model as well as the economic, social and territorial cohesion of the EU.

- Due to disadvantageous concerns of some member states regarding the specialities of health services, they are finally not covered by the directive on services.
- The EU Commission has postponed the proposal for a directive on cross-border healthcare.
- The European Parliament urged the Commission to present a draft paper regulating the cross-border health services (April 2005: European Parliament report on patient mobility and healthcare developments in the European Union; March 2007: European Parliament resolution on Community action on the provision of cross-border healthcare).

1.3. Desirable contents of a EU directive

- The directive should focus on the regulation of services, the harmonisation of vocational education and the mutual recognition of diploma without, however, interfering with national healthcare systems;
- The patient has to be in the focus;
- It should aim at supervising and strengthening patients' rights, in particular in the cross-border healthcare provision that requires the elaboration of individual solutions taking into account the regional situation.
- In the future patients treated abroad have to be legally entitled to the reimbursement of costs (principle: refunding in accordance with the health care reimbursement rates at home, inclusively pharmaceuticals).
- For daily, routine consultations patients should be allowed to choose the closest hospital, for complicated treatment the most competent hospital in the region (Permission by the health insurance might be necessary if a hospital in the neighbouring country has been chosen. The EU, however, should define transparent criteria in order to limit refusals!).
- Ambulatory treatment in the neighbouring country has to be possible without a prior permission by health insurances (if the costs are higher as at home, however, the additional costs must be paid privately by the patient or he should have a supplemental private insurance).
- The risk of „uncontrolled medical tourism“ can not jeopardise a reliable demand planning in a country (e.g. hospitals, specific medical equipment).

- For citizens contact points in each member state should be the first place to search information.

2. Added value of cross-border cooperation in healthcare

- Cross-border regions have the function of laboratories and provide pragmatic solutions.
- Cross-border cooperation clarifies the questions of access, quality, information, transparency and healthcare costs.
- Cross-border cooperation and mobility across borders provides the opportunity for:
 - more competitiveness and a better distribution of tasks between service providers that can result in lower costs and in the long run in a qualitatively better service,
 - individual and targeted cooperation between health insurances, hospitals and other service providers,
 - cooperation projects that use health infrastructure and required resources from both sides of the borders and in this way ensure a better capacity utilisation.
- Cross-border healthcare is developing into a significant economic sector:
 - Live sciences, industrial and medical technology are an important backbone of the regional economy;
 - Producers of medical equipment as well as suppliers of medical services benefit from additional contracts in cross-border healthcare;
 - Additional jobs are created in the growing health sector;
 - Highly specialised medicine and division of services improve the attractiveness of the regional location.
- Thanks to cross-border catchment areas (critical mass for investments) it's possible for regions on both sides of the border:
 - to purchase even complex medical facilities enabling a medical specialisation;

- to provide better services to citizens on both sides of the border as regards the spatial distance, waiting time and overcoming language barriers,
 - to ensure the availability of high-quality health services,
 - to improve the emergency care,
 - to improve the access to nursing services.
- A highly specialised medicine in a cross-border region comes along with education, research and investments in this region.
 - A uniform certification system (including evaluation and adjustment to new requirements) is a helpful instrument while using the cooperation experiences gained in a border situation in the development of European health sectors.

3. Specific actions in border and cross-border regions (in coordination and cooperation with the responsible national institutions)

- Joint cross-border supply and demand planning in healthcare, joint healthcare funding models and joint management of a cross-border health region.
- In specie distribution of health services with mutual disclaimer planning (specialisation and focus on particular medical fields).
- Coordination of cross-border healthcare planning inclusively hospital demand planning, rescue etc. with strategies in the countries' interior.
- Cooperation between hospitals with multilingual staff that are in the position to ensure a full service nursing care.
- Network of hospitals specialised on particular disease research that facilitates the cross-border admission of patients.
- Creation of a cross-border rescue service (with ambulances, emergency physicians, staff and guidelines for treatment, operating time of ambulances, working time of physicians, medical care in the ambulance as well as uniform audible and visible signals).

- Cross-border training in theory and practice (professional language courses, information on the different systems, mutual recognition of diploma, training in comparable treatment and care methods).
- Staff with linguistic competence in healthcare facilities on both sides of the border.
- Cross-border health insurance card as well as quick and reliable electronic payment processes.
- Suspension of the territoriality principle in the health insurance systems.
- Joint actions against the antibiotic resistance.

4. Role of the Association of European Border Regions (AEBR)

- Mouthpiece and lobby of border and cross-border regions.
- Active participation in the development of cross-border healthcare in Europe.
- Partnership with HOPE and the European patients' organisations.
- Organisation of European seminars on cross-border healthcare.
- Partner in European networks, projects and pilot actions etc.
- Platform for the exchange of best practices.