

Tonio Borg

Member of the European Commission, responsible for Health

Commissioner Borg delivers speech on sustainable health systems

*Check Against Delivery
Seul le texte prononcé fait foi
Es gilt das gesprochene Wort*

Tonio Borg, European Commissioner for Health, addresses the Malta Parliamentary Health Committee

Valletta, Malta, 13 October 2014

**COMMISSIONER TONIO BORG'S ADDRESS TO THE MALTA
PARLIAMENTARY COMMITTEE FOR HEALTH
13 OCTOBER 2014**

SPEAKING POINTS

[President,] Members of Parliament, Ladies and Gentlemen,

I am delighted and proud to address your newly formed Standing Committee on Health today.

The creation of this Committee shows that policy makers in this country understand the paramount importance of a healthy population. Health is a value in itself, but it is also the cornerstone for a competitive economy.

In recent years, health systems in some EU Member States came under increasing pressure due to the economic crisis. But practically all the Member States face a challenge to safeguard the long-term sustainability of their health system.

No health system in the EU is sustainable unless it is reformed. In the absence of reforms, health spending will increase sharply due to factors such as population ageing, ever growing citizens' expectations, and the availability of better but costly technology.

Malta is no exception. Indeed, the European Commission projects for Malta one of the highest increases in healthcare spending in the EU over the next fifty years.

Therefore, and at the request of the Member States, the Commission has put the issue of sustainability of healthcare systems under the microscope.

Today, I would like to share with you several thoughts how to improve the sustainability of health systems and how the Commission can help.

As you all know, through the “European Semester” each year, the Commission analyses Member States' national economic and structural reforms and provides recommendations for the following 12 to 18 months.

In July this year, the European Council recommended to 16 EU countries to reform their health systems. In general, countries were encouraged to make a more cost-effective use of public resources, often through making healthcare systems less “hospital-centric” over time.

In the case of Malta, this can be done by introducing modern management and procurement practices, by strengthening the primary healthcare system, increasing the focus on prevention, and encouraging community care.

Such reforms may have high upfront costs, but in the medium to long-term they will lead to more cost-effective use of public resources, including through better coordinated delivery of health services.

Health Systems Communication

The Commission has tried to support this reform effort by amassing a robust evidence-base of principles and tools that can support the development of accessible, resilient and effective health systems that not only add more years to life, but add more life to our years. We can – and should – build on lessons learned and experiences gained.

In April 2014, the Commission adopted a Communication on the lessons learnt in recent years to build effective, accessible and resilient health systems. The Communication presents an EU agenda to support Member States on their actions on health systems.

The first aspect is effectiveness: Do our health systems actually improve health? We indeed observe a wide variation among Member States in overall life expectancy as well as other indicators that can be attributed to health systems effectiveness: for instance perinatal mortality or the incidence of particular communicable diseases.

The second important aspect is accessibility: the capacity of a health system to reach the people it aims to serve. Access to healthcare is not just about its overall availability. There are many dimensions, for instance the share of the population that is covered; the basket of care, the affordability of care; and the availability of care in terms of waiting times and travelling distances.

The third and final aspect is resilience – the ability to adapt effectively to changing environments, tackling significant challenges with limited resources – an aspect that has become increasingly important in recent years. This is not just about availability of funds. Looking at how Member States tackled the crisis in the last years, we identified six main factors of resilience: stable funding mechanism, sound risk adjustment methods, good governance, good information flows, adequate costing of health services, adequate and skilled health workforce.

Overall, this is a very ambitious agenda, and the Commission is committed to help. While the organisation of health systems is a task for the Member States, the EU can support national policy making. Let me now focus on how this can be done.

Cross-border Healthcare Directive

Earlier on I spoke about accessibility. Let us consider what the cross-border healthcare Directive could bring. Initially this legislation was primarily about giving people greater choice and access to healthcare by moving across borders. And the Directive strikes a good balance between patients' rights and the realities of health system management.

Perhaps more revolutionary – at least for some countries – are the obligations contained in the Directive for greater transparency. To take just three examples: greater clarity on the contents of the basket of benefits, greater information about the chosen provider, greater comparability of rights and systems across the EU.

The Directive can help patients by empowering them to be effective drivers of reform in their own right.

Health Systems Performance Assessment

I spoke earlier also about effectiveness of health systems.

It is clear that Member States can learn a great deal from each other through comparing variability in health outcomes.

To help, we have set up last July an Expert Group on Health Systems Performance Assessment, which all interested Member States are invited to join. The purpose is to better understand the functioning of our health systems in order to improve their performance. That is: to have health systems which are more effective and provide a more equitable access to citizens.

This collaborative work will help drawing lessons for improving health systems and developing tools to understand variations in health outcomes.

eHealth

eHealth applications can increase the effectiveness of health systems; and deliver more personalised 'citizen-centric' healthcare, which will be more effective.

It has the potential to reduce errors, and shorten hospitalisation.

When applied effectively, eHealth can facilitate inclusion, quality of life and patient empowerment through greater transparency, access to health services and information.

To help realise this potential and the deployment of interoperable solutions, the Commission has set up an effective cooperation body: the eHealth Network.

Over the past two years, the eHealth Network has proved its worth in securing strategic and technical agreements, for example the Patient Summary Guidelines, the forthcoming guidelines on ePrescriptions, and the Patient Registries.

In addition, and together with the Member States, we are launching a new Joint Action to increase the quality of eHealth systems and to reduce barriers to the uptake of new technologies. The involvement of all Member States in these activities is crucial.

Expert Panel

The Commission can also offer independent scientific advice based on the best available science, expertise, and knowledge through its Expert Panel on Effective Ways of Investing in Health.

The Panel is making headways in the healthcare and health policy advice. In its recent report on primary care, the Expert Panel noted that strong primary care systems contribute to equity and improved health outcomes. The Report stressed furthermore that primary care needs to constantly evolve if it is to respond properly to emerging challenges.

Recently, the medical journal '*The Lancet*' used the Panel's Report on primary care as a basis for policy recommendations on primary care.

I believe Malta and the other Member States can only stand to gain by resorting to the confidential, robust and independent advice of the Expert Panel.

Structural Funds

Finally, the EU Structural and Investment Funds can help Member States pursuing health system reforms.

The European Structural and Investment Funds provide opportunities for Member States to invest in Health.

I am convinced that this round of structural funds will help finance much needed structural reforms of Member States' health systems, to make them more effective, accessible and resilient; develop eHealth; support health as an innovative sector; reduce inequalities in health; and promote cross-border cooperation in healthcare.

It is important that Member States seize this opportunity to implement the reforms they need. I therefore encourage Malta to use the structural funds where they can have most impact and can contribute to the implementation of the country-specific recommendations.

Tobacco Products Directive

Before concluding, I would also like to say a few words on an important commitment of mine: reaching an agreement with the European Parliament and the Council on a number of legislative proposals, including the Tobacco Products Directive.

I would like to take the opportunity to thank Malta for the continuous support for a strong tobacco policy.

We are now at a stage where Member States are implementing the new EU law at national level. The new rules will improve the functioning of the internal market while respecting a high level of health protection.

Malta has taken great steps in the fight against tobacco in the past and I would like to thank you for your firm commitment. This is illustrated by the fact that Malta over the past 10 years has been consistently among the top scorers in the Tobacco Control Scale in Europe.

And, fortunately, Malta has not twiddled its thumbs after the introduction of first measures but is keeping its dedication.

With the introduction of pictorial health warnings in 2011 and restrictions towards a ban on smoking in public places in the past years, Malta is demonstrating the political will to combat tobacco – and this will pay off in the long run.

By the way, the Commission just adopted last Friday (the 10th of October) the new library of pictorial health warnings to be used as from 2016.

Tobacco control policy can only be effective if it is constantly updated and adjusted to new circumstances. This means making use of all possible measures, from tax increases to enforcement action against counterfeit or contraband products.

[President,] Members of Parliament, Ladies and Gentlemen,

During my term in office I have worked to improve public health in the EU. Apart from the well-known challenges to public health such as demographic ageing, cross-border health threats or communicable and non-communicable diseases, I realised that the sustainability of our health systems is becoming a key challenge for all of us in Europe.

Of course, each system has its own peculiarities, its strengths and its weaknesses. However, I think there are also common threads and trends all over Europe.

This is why I think that the EU has much to offer in helping Member States cope with this challenge, in particular by establishing learning and cooperation mechanisms, by providing independent expert advice, and by providing funding mechanisms to support and promote health policy reforms in the Member States.

I am glad that Malta has embarked on reforms in the various areas of its health policy at home.

I am grateful that during my term in office Malta has supported and participated in dedicated action on a European scale.

I hope that Malta will remain dedicated and committed to promoting and advancing health at European level.

Thank you.