## Re: Response from the Czech Republic to the Commission Communication according to Consultation regarding Community action on health services

Within this document I would like to express the position of the Czech Republic towards Commission's activities regarding providing health services within the internal market.

According to the view of the Czech authorities and institutions there are two basic areas of this topic. They are:

1/ access and entitlements of EU citizens to receive medical treatment within another member states` area and the process of financial reimbursement of those cases

Current legislation as well as currently discussed proposals regarding coordination of social security systems cover the scope and rules for patients' entitlements to receive medical treatment with respect to publicly financed systems of health insurance of member states and corresponding duties of institutions. Problems connected to entitlements to reimbursement of the cost of the treatment provided abroad from public systems have been the hardcore of the ECJ activities within last few years and they have set the basis for the health services discussion.

Therefore this part of the topic should be, according to the Czech position, covered within the scope of those above mentioned instruments of co-ordination. Such solution would help patients, institutions and member states to find all necessary rules within one single document. This would very strongly help to achieve the set objective of <u>legal clarity</u> in this field as well as basic understanding from EU citizens. As one of the essential questions which the Czech Republic feels is to determine a clear distinction between hospital and non-hospital treatment.

The Council working party for Social Questions is currently working on the proposal of new implementing regulation to the Council Regulation 883/2004, the sickness chapter. I find the amendment of this implementing regulation as the most

suitable and convenient way how to include all the ECJ impacts into the EU secondary legislation.

## 2/ quality standards, responsibility of health care providers, creation of certain type of centers of references and other ways of co-operation

Matters which are not directly connected to patients` entitlements to health care and reimbursements and which have not been explicitly subject to ECJ decisions could then be regulated within a certain legal instrument. I am not sure that any directive would be the right solution; the Czech authorities would much better prefer to have certain type of soft law giving them the possibility and guideline how to proceed in the quality of care or responsibility of providers. Regarding this matters it is important to define what all should be included within the area of health services.

The Czech Republic is aware of the fact that the health services could be a very important topic accompanied by many of questions and high level of legal uncertainty. It is a very demanding area which in future might be strongly influenced by many influential groups and there might appear certain stresses to harmonize this sphere, which the Czech authorities fear.

The Czech Republic feels that while creating any new legal document within the health services area it is necessary to be aware of the Article 152 par. 5 of the Treaty, which fully respects responsibility of member states to organize their health care systems and to deliver health care to their population. In this respect, any new legal activity should primarily set which measures are unacceptable within national level rather than to organize (or harmonize) national health care systems.

This paper represents the views of its author on the subject. These views have not been adopted or in any way approved by the Commission and should not be relied upon as a statement of the Commission's or Health & Consumer Protection DG's views. The European Commission does not guarantee the accuracy of the data included in this paper, nor does it accept responsibility for any use made thereof.