



Final minutes of meeting Cross-border Healthcare Expert Group 19 October 2017, 10:00-17:00

PARTICIPANTS:

- Present: Belgium, Croatia, Cyprus, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Ireland, Italy, Latvia, Luxemburg, Malta, Netherlands, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, United Kingdom and Norway.
- Excused: Austria, Bulgaria, Czech Republic and Lithuania.

1. WELCOME AND INTRODUCTORY REMARKS

The draft agenda was accepted without changes. The Chair explained the objectives of the meeting:

- Share experiences implementing the Directive 2011/24/EU.
- Exchange views on the Commission's 2018 report on the operation of Directive 2011/24/EU on the application of patients' rights in cross-border healthcare.
- Present the Commission's "Data collection 2016" on patient mobility in the cross-border healthcare context.
- Inform on scoping work launched under the Health Programme notably in view of the preparation of the Report on the operation of the Directive to the European Parliament and the Council due by October 2018.

2. IMPLEMENTATION OF THE DIRECTIVE 2011/24/EU

Member States were informed about the drafting process of the implementation report. The deadline for adoption, set out in Article 20(1) of the Directive, is 25 October 2018. The studies commissioned at the request of Member States under the Health Programme would be presented in the afternoon session (one on information to patients and a second one on cross-border cooperation in healthcare).

The report will cover:

- State of play of transposition, compliance check and important provisions (e.g. the use of prior authorisation, reimbursement practices, information to patients); it will identify good practices;
- Patient flows and financial dimensions;
- State of play of the cooperation chapter: ERN, HTA, eHealth;
- Report on the use of delegated powers;

There was a general exchange of views concerning the experience in the implementation of the Directive in Member States. Issues such as awareness raising, "medical tourism", European Reference Networks and treatments available in other Member States (but not in the national reimbursement basket) were reported as challenges in the implementation.

The Chair concluded that whilst the use of the Directive is still relatively low, patient mobility was not the core objective of the Directive. The jurisprudence of the ECJ was consolidated in a single legal instrument for the benefit of patients and Member States; moreover, cooperation in healthcare received a Chapter in and of itself.

Member States were then invited to communicate their views on the next implementation report. The participants expressed favourable views and welcomed the forthcoming report, highlighting their willingness to support the European Commission in its data collection and evidence-gathering endeavour.

Finally, MSs were informed that the Court of Auditors started a performance audit in the field of cross-border healthcare access, including the cooperation chapter (HTA, ERN, eHealth). Expected timeframe of this investigation is 1.5 years and the Court might visit MSs as well.

DATA COLLECTION

Ms. Petra Wilson, Health Connect Partners, presented the data collection study, describing the main patient mobility flows as well as the methods and the limitations of the study. A general exchange of views followed. Member States were invited to comment the initial findings and send any missing data since the study is not yet finalised.

The Chair thanked those administrations that already submitted data for the reporting year 2016 for having submitted the data for the patient mobility exercise, as well as those who sent data for 2015 later this year. Member States were urged to improve data collection to get better data for the next report. If data is not directly available, we should work together to make our best estimates.

With regard to the adoption of the 2018 Report, it was agreed that data for the year 2017 should, exceptionally given the upcoming report, be submitted by the end of February 2018. Some Member States raised concerns related to technical difficulties. Nonetheless, all participants agreed that their final deadline to submit 2017 data is the end of May 2018. Member States accepted to render such mutual assistance as is necessary for the upcoming Report.

3. UPDATE ON EUROPEAN REFERENCE NETWORKS; INFORMATION ON AD-HOC NCP SUBGROUPS ON ERN

The European Commission informed that at the last NCP meeting (5 May 2017), it was decided to establish an ad-hoc group to discuss the involvement of NCPs in relation to ERNs. It was concluded that patients' awareness on recent ERN developments at EU level should be raised, not least via raising participants' knowledge of this policy field.

4. CROSS-BORDER COOPERATION AND PROVIDING INFORMATION TO CITIZENS

There were three main presentations in the field:

- a) The Commission Communication on Boosting growth and cohesion in the EU border regions was presented, together with the recent [bilingual brochure](#) adopted in this respect.
- b) Progress to date in terms of the study on cross-border cooperation (capitalising on existing initiatives for cooperation in cross-border regions) and on cross-border health services (enhancing information provision to patients) was presented.

5. E-HEALTH DEVELOPMENTS AT EU LEVEL

Developments in the field of digital health and care, and notably the upcoming European Commission Communication in the field of the Digital Single Market were discussed.

6. WORKING TOGETHER

A representative of DG GROW presented the European Commission's initiatives related to electronic invoices. An important point that received due attention was that e-invoicing will become mandatory in public procurement and public authorities (including hospitals) should be in a position to receive e-invoices from their suppliers, in line with the provisions of the Electronic Invoicing Directive (Directive 2014/55/EU) in Public Procurement.

7. AOB AND CLOSING OF THE MEETING

The Chair closed the meeting and thanked the participants and the colleagues who organised the meeting for their resilience and for the thorough work that is being carried out.