COMMISSION DECISION
of 5 July 2012
on setting up a multisectoral and independent expert panel to provide advice on effective ways of investing in health
(2012/C 198/06)

THE EUROPEAN COMMISSION,

Having regard to the Treaty on the Functioning of the European Union,

Whereas:

(1) Under Article 168(2) of the Treaty on the Functioning of the European Union, Member States are required, in liaison with the Commission, to coordinate among themselves their policies and programmes in the areas referred to in paragraph 1. The Commission may, in close contact with the Member States, take any useful initiative to promote such coordination, in particular initiatives aiming at the establishment of guidelines and indicators, the organisation of exchange of best practice, and the preparation of the necessary elements for periodic monitoring and evaluation.

(2) The Council conclusions on common values and principles in European Union health systems (1), adopted in June 2006, recognise that while it is not appropriate to try to standardise health systems at an EU level, there is immense value in work at a European level on health care. Member States have therefore committed themselves to working together to share experiences and information about good practices.

(3) The Decision No 1350/2007/EC of the European Parliament and of the Council of 23 October 2007 establishing a second programme of Community action in the field of health (2008-13) (2) (hereinafter referred to as ‘the health programme’), while reiterating, in accordance with Article 168 of the Treaty on the Functioning of the European Union, that health services are primarily the responsibility of Member States, stresses that cooperation at Community level can benefit both patients and health systems. According to Article 2 of this Decision, read in conjunction with points 3.2.2 and 3.2.3 of the Annex, one of the objectives of the health programme is to generate and disseminate health information and knowledge by providing analysis and technical assistance in support of policy makers in the development and implementation of legislation related to the scope of the programme.

(4) The Council conclusions ‘Towards modern, responsive and sustainable health systems’, adopted on 6 June 2011 (3), invite the Commission and Member States to initiate a reflection process aiming to identify effective ways of investing in health, and the Commission to support the reflection process by facilitating the access to independent and multisectoral expert advice.

(5) The Council Working Party on Public Health, meeting at senior level, established a forum for cooperation on effective ways of investing in health, and endorsed the creation of working groups on different topics, such as: enhancing the adequate representation of health in Europe 2020 and in the European Semester, defining success factors for the effective use of Structural Funds for health investments, cost-effective use of medicines, integrated care models and better hospital management, measuring and monitoring the effectiveness of health investments.

(6) The Commission is participating in all these sub-groups with a view to support Member States’ cooperation on health systems and to assist it through provision of information and knowledge.

(7) Sound and timely scientific advice is an essential requirement for Commission’s provision of information and knowledge relating to sustainability of healthcare systems. It must be based on the principles of excellence, independence, multisectoral approach and transparency.

(8) In that context, it is appropriate to establish an expert group which will support the Commission, by providing independent and sound advice on effective ways of investing in health.

(9) The expert group should be composed of experienced and knowledgeable persons coming from the public or private sector, as well as from civil society. It is essential that the expert panel make best use of scientific expertise in the EU and beyond as may be necessary for a specific question.

(10) Rules on disclosure of information by members of the group should be laid down.

(11) Personal data should be collected, processed and published in accordance with Regulation (EC) No 45/2001 of the European Parliament and of the Council of 18 December 2000 on the protection of

(2) OJ L 301, 20.11.2007, p. 3.
(3) OJ C 202, 8.7.2011, p. 10.
individuals with regard to the processing of personal data by the Community institutions and bodies and on the free movement of such data \(^4\).

\(^{(12)}\) A system of indemnities should be put in place in order to ensure that experts with appropriate competences participate in the group, in representation of civil society, public and private sector.

\(^{(13)}\) It is appropriate to fix a period for the application of this Decision. The Commission will in due time consider the advisability of an extension,

HAS DECIDED AS FOLLOWS:

**Article 1**

Subject matter

An expert group on effective ways of investing in health (hereinafter ‘the panel’) is hereby established.

**Article 2**

Mission

1. The mission of the panel shall be to provide the Commission, upon its request, with independent and multi-sectoral advice on effective ways of investing in health in the fields of expertise set out in Annex I.

2. Advice provided by the panel shall take account of the work of other Union bodies concerned with the sustainability of health systems, such as the Economic Policy Committee and the Social Protection Committee.

3. The Commission will circulate advice from the panel to the Member States indicating interest.

4. The advice will remain informal and will in no circumstances be binding.

**Article 3**

Membership — Appointment

1. The panel shall be composed of a maximum of 17 members. The Commission shall determine the number of members of the panel, aiming to ensure the broadest knowledge and understanding of different health systems across the EU.

2. Members of the panel will be individuals appointed in a personal capacity, in the framework of an open call for applications.

3. Members of the panel shall be appointed by the Director-General for Health and Consumers from individuals who have responded to the call for applications and who comply with the requirements set out in the call. The members of the panel shall be experts in one or more of the fields of expertise referred to in Annex I, and shall collectively cover the widest possible range of disciplines.

4. Members of the panel are appointed for three years. Their term of office may be renewed, at most for three consecutive terms.

5. Members of the panel who are no longer capable of contributing effectively to their duties, who resign or who do not comply with Article 339 of the Treaty, may be replaced for the remainder of their term of office. In that case, the Director-General for Health and Consumers may appoint a replacement, following an open call for applications.

6. Members of the panel shall act independently and in the public interest.

7. The names of members of the panel shall be published in the Register of the Commission expert groups and other similar entities (hereinafter ‘the Register’).

8. Personal data shall be collected, processed and published in accordance with Regulation (EC) No 45/2001 of the European Parliament and of the Council of 18 December 2000 on the protection of individuals with regard to the processing of personal data by the Community institutions and bodies and on the free movement of such data \(^5\).

**Article 4**

Operation

1. The panel shall elect the Chairperson and a Vice-Chairperson, according to the rules of procedures referred to in paragraph 9 and in compliance with the Commission horizontal rules on expert groups \(^6\).

2. Upon request for advice, the chairperson of the panel will appoint a rapporteur from among its members. For particularly complex questions of multidisciplinary nature, more than one rapporteur may be appointed. The rapporteur(s) and the Commission shall agree on the terms of reference of the request for advice. The rapporteur(s) shall be responsible for drafting the advice.

3. The panel may create working groups to examine particular issues. The working groups shall be chaired by a member of the panel. The working groups shall report back to the panel under the responsibility of their chair.

4. In agreement with the Commission services, the panel may invite external experts, as well as experts from other EU bodies that they consider to have the relevant scientific knowledge and expertise, to contribute to their work. Commission officials from services with an interest in the proceedings may attend meetings of the panel.

5. The Commission may request the panel to consult with other bodies for the preparation of the advice.

6. The Commission may ask the panel to organise one or more meetings, should it deem it necessary for the panel to

\(^{*}\) See footnote 4.

\(^{*}\) C(2010) 7649 final, rule 11(1).
provide advice. The Commission establishes the venue of the meetings in order to ensure the highest effectiveness of the panel's activities. Subsistence and travel costs shall be borne by the European Commission, as provided for in Annex II.

7. Members of the panel, as well as the invited experts, shall comply with the obligations of professional secrecy laid down by the Treaty and its implementing rules, as well as with the Commission’s rules on security regarding the protection of EU classified information, laid down in the Annex to Commission Decision 2001/844/EC, ECSC, Euratom (7). Should they fail to respect these obligations, the Commission may take appropriate measures.

8. The Directorate-General for Health and Consumers shall provide secretarial services to the panel, particularly through organisation of meetings and reimbursement of travel and subsistence expenses.

9. The panel shall adopt its rules of procedure by simple majority of its members, on the basis of a proposal presented by the Commission services, in compliance with the Commission horizontal rules on expert groups and the standards rules of procedure for expert groups (8).

10. The Commission shall publish relevant information on the activities carried out by the panel either by including it in the Register or via a link from the register to a dedicated website.

Article 5
Meeting expenses

1. Members of the panel and invited experts shall be entitled to an indemnity for their preparation of and participation in the meetings of the panel, and for serving as rapporteur on a specific question, as provided for in Annex II.

2. Travel and subsistence expenses incurred by members of the panel and invited experts as per Article 4(4) shall be reimbursed by the Commission in accordance with the provisions in force within the Commission.

3. The expenses referred to in paragraphs 1 and 2 shall be reimbursed within the limits of the available appropriations allocated under the annual procedure for the allocation of resources.

Article 6
Applicability

This Decision will apply until 1 October 2015.

Done at Brussels, 5 July 2012.

For the Commission

John DALLI
Member of the Commission


(8) SEC(2010) 1360 final, Annex IV.
ANNEX I

FIELDS OF EXPERTISE

The panel shall support the Commission in identifying effective ways of investing in health, so as to pursue modern, responsive and sustainable health systems.

Examples of potential areas of activities include, but are not limited to: primary care, hospital care, pharmaceuticals, research and development, prevention and health promotion, links with the social protection sector, cross-border issues, system financing, information systems and patient registers, health inequalities.

The fields of expertise that the panel shall be able to cover include:

— health planning and budget prioritisation, including:
  — epidemiology,
  — actuarial science,
  — health economics,
  — biostatistics,
— health services research, including:
  — inter-regional and international comparison study,
  — evidence-based medicine,
  — public health surveillance,
  — linking of population-based registers,
— hospital and healthcare management, including:
  — socio-economic evaluation,
  — accountancy,
  — accreditation schemes,
  — performance measures,
— healthcare provision, including:
  — eHealth, health information systems, and patient register; interlinkage of different register,
  — quality assurance standards for health, standardising procedures, health indicators, data protection,
  — health-screening programmes,
  — introduction of new technologies and treatment regimens,
  — health insurance,
  — implementation of emergency/crisis measures,
— health education and promotion, including:
  — behavioural economics,
  — preventive medicine,
  — health awareness programmes,
  — health and safety at work.
ANNEX II

INDEMNITIES

Panel members and invited experts shall be entitled to indemnities related to their preparation of and participation in the meetings of the panel as follows:

for preparation of and participation in meetings:

— EUR 385 for each full day participation or EUR 200 for participation in a morning or afternoon meeting of the panel, or at an external meeting attended in connection with the panel’s work,

— EUR 385 for each full day of preparation of a meeting of the panel. In the absence of a different estimation done by the Chairman and approved by the Commission, it is intended that for each meeting day two preparatory days are needed;

for acting as rapporteur for a question requiring not less than one day of preparation of draft advice and with the Commission’s prior written agreement:

— EUR 385 for each full day participation and for each full day of preparation of a meeting of the panel. In the absence of a different estimation done by the Chairman and approved by the Commission, it is intended that for each meeting day two preparatory days are needed.

In addition, subsistence and travel costs will be reimbursed in accordance with the provisions in force within the Commission.

The Commission will regularly assess the need to adapt these indemnities in light of prices indexes, the evaluation of indemnities paid to experts in other Union bodies and the experience on the workload for members, associated members, other scientific advisors and external experts. The first assessment will take place in 2013.