

WORKSHOP 2: A EUROPEAN HEALTH CARE MARKET FOR PATIENTS?

Conclusions of the debate. Rapporteur : Robert Kieffer

In the debate, opinions about justification of the enforcement of the rules of competition and free market of health care remained divided. On the one hand, there are those who put forward the constructive character of the enforcement of market rules to this sector, referring notably to a cost reduction and an efficiency increase. On the other hand, some insist on the necessity to take into account the paradigm of social protection and the specificity of health care and are against the submission of this field to the market forces only.

Moreover, projections concerning the evolution of the costs related to health care, would soon put forward the issue of setting of priorities for health care to be financed by public funds.

The nowadays situation thus presents some advantages as well as some risks. The advantages concern an improvement of the access to health care for the patients. The risks weight down on the financing of social security systems and maybe on quality.

A necessary objective is to create more legal security for the patient as well as for the administration. One should clarify the patients' rights either through interpretation or through adaptation of the regulations.

As it will not be possible to eliminate the dual character of the access to cross-border health care, which will necessarily coexist in the future, it would nevertheless be interesting to give to the European Court of Justice some indications in the secondary legislation in order to combine the rules of free competition with the features of the health care market.

The second topic which was discussed was the problem of the guarantee of quality in the field of health care. This problem is of the utmost importance and goes far beyond the problem of free access to cross-border health care, as far as it concerns the patients' security. Hence the necessity for the medical training to be not only defined at European level in terms of duration, but to realise that there should be a European supervision on the content of the training and of the acquired competencies.

The third topic concerns an improving of the organisation of cross-border health care for border regions. Patients' information about the existing offer should be promoted and agreements between partners on both sides of the border should be stimulated. Moreover, the European regulation should guarantee to people living in cross-border regions a better access to health care, by giving them a right of access when the health care which is provided on the other side of the border is closer to their home than the one provided in their own country. Consequently, this measure would compel the Member States to take into account in the planning of the offer, the existing offer of health care on the other side of the border.

An important suggestion is to take into account the situation of the countries applying for entry into the European Union. The possible solutions for the refunding of cross-border health care must avoid burdening these countries with a disproportionate financial charge in the present integration process.

Finally, the workshop participants asked the Commission to state clearly its position in this issue, especially in the context of the new open co-ordination policy.

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