



To Members of the European Parliament  
Committee on the Environment, Public Health  
and Food Safety

Brussels, 15 December 2010

Subject: Proposal for a Directive on patients' rights in cross-border healthcare – Social partners' reaction to second reading in the ENVI Committee (on 27 October 2010)

Dear Madam,  
Dear Sir,

We are writing to you as the recognised European Social Partner Organisations for the Health and Hospital Sector. As the draft Directive on patients' rights in cross-border healthcare is currently under discussion in the trilogue-process after the European Parliament second reading at Committee stage, we wish to share with you some of our main concerns with these proposals.

The proposed Directive on patients' rights in cross-border healthcare touches on some of the fundamental cornerstones of Member States health care systems, such as the capacity to plan for the existing and anticipated needs within their respective systems. As the representative organisations of employers and workers in the health and hospital sector we also see it as our role to contribute to the quality and accessibility of patients' care. With this perspective in mind we want to contribute with our joint work to a continuous improvement of health care for all citizens building on our experience as practitioners in the sector.<sup>1</sup> Both HOSPEEM and EPSU consider the equal access to health care as a fundamental human right, which must be facilitated – to the extent possible – in the proximity of patients' living surroundings.

With this in mind, we welcome the wording adopted in the European Parliament draft recommendation for second reading whereby the proposed directive *should not in any way encourage patients to go to another member state to obtain healthcare*.

We also agree that the proposed directive is *complementary to the existing framework on the coordination of social security systems, Regulation EC (No) 883/2004, with a view to application of patients' rights*. We believe it is crucial that this existing legislative framework should not in any way be undermined by the new directive. This because regulation 883/2004 is generally more advantageous for patients and provides for the direct settling of cost for cross-border treatment between competent authorities in the Member States.

It should be emphasised that the draft directive is on the other hand based on the principle that patients will be reimbursed up to the level of cost of that healthcare in their home member state. This would imply that patients from countries with cheaper healthcare are disadvantaged, since they would have to bear personally any additional cost of healthcare that they receive abroad. Barriers would also remain in the form of travel and

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<sup>1</sup> We refer as recent example to Directive 2010/32/EU implementing the Framework Agreement on prevention from sharps injuries, negotiated by HOSPEEM and EPSU.

accommodation expenses as well as having to deal with healthcare in a foreign language. It is therefore likely that patients with higher income or who are more articulated and educated will be able to take more advantage of cross-border healthcare compared to other groups.

We are concerned that a number of amendments proposed in the EP draft recommendation for second reading seek to reduce the possibility for Member States to make use of a system of prior authorisation. We do not agree with such a weakening of the prior authorisation system. The procedure of prior authorisation should in our view not be perceived as a bureaucratic mechanism to deny patients the required treatment. The majority of patients will not be in a position to make informed decisions on their own. They need counseling and guidance to access cross-border healthcare, including for the diagnostic and treatment of rare diseases. Such detailed and personalised counseling can only be made available through a prior authorisation process.

In full respect of Member States competence to organise and finance their respective health care systems, we very much hope that you will take our observations into account at this crucial stage of the negotiations on the Directive. We would welcome an agreement on this Directive between EU Institutions to provide legal clarity and reduce the risk of new cases in front on the European Court.

Yours sincerely

For EPSU



A handwritten signature in black ink that reads "Carola Fischbach-Pyttel".

Carola Fischbach-Pyttel  
General Secretary

For HOSPEEM



A handwritten signature in black ink that reads "Godfrey Perera".

Godfrey Perera  
General Secretary

*HOSPEEM is the European Hospital and Healthcare Employers Association. It regroups at European level national, regional and local employers' associations operating in the hospital and health care sector and delivering services of general interest, in order to coordinate their views and actions with regard to a sector and a market in constant evolution. HOSPEEM is an individual member of CEEP.*

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*EPSU is the European Federation of Public Service Unions. It is the largest federation of the ETUC and comprises 8 million public service workers from over 250 trade unions; EPSU organises workers in the energy, water and waste sectors, health and social services and local and national administration, in all European countries including in the EU's Eastern Neighborhood. EPSU is the recognized regional organization of Public Services International (PSI).*

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