EU cross-border healthcare: better management needed to deliver on high ambitions, say Auditors

EU patients still face challenges in benefiting from the actions envisaged by the EU directive on cross-border healthcare, according to a new report by the European Court of Auditors. Only a minority of potential patients are aware of their rights to seek medical care abroad. At the same time, the auditors also found problems and delays in exchanging patient health data electronically between Member States. Moreover, actions to facilitate access to healthcare for rare disease patients need to be improved.

The 2011 EU cross-border healthcare directive is aimed at ensuring safe and high-quality medical care across borders in the EU, as well as providing for reimbursement abroad under the same conditions as at home. EU patients who seek healthcare in another Member State – for example, undergoing planned hospital treatment or purchasing medicines – are therefore entitled to relevant information on standards of treatment, reimbursement rules and the best legal route.

The auditors examined whether the European Commission has monitored the implementation of the EU cross-border healthcare directive and supported Member States in informing patients of their rights. They assessed the results achieved on exchanges of health data across borders and checked key actions on rare diseases.

“EU citizens still don’t benefit enough from the ambitious actions set out in the Cross-Border Healthcare Directive” said Janusz Wojciechowski, the Member of the European Court of Auditors responsible for the report. “EU action includes the right to cross-border treatment, facilitating the exchange of patients’ health data across borders, and initiatives for rare diseases. But better management is needed to deliver on these ambitions.”

The auditors found the Commission had monitored the transposition of the directive into national law and its implementation by the Member States well. It also supported the Member States in improving information on patients’ rights to cross-border healthcare, but there were still some gaps.

The purpose of this press release is to give the main messages of the special report by the European Court of Auditors. The full report is on www.eca.europa.eu.

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The Commission underestimated the difficulties involved in deploying EU-wide eHealth infrastructure. By the time of the audit – November 2018 – Member States were only just about to start exchanging patient health data electronically, so the benefits for cross-border patients could not be demonstrated. Furthermore, the Commission did not properly assess either the potential use or the cost-effectiveness of exchanging cross-border health data.

Finally, the European Reference Networks for rare diseases are an ambitious innovation and are widely supported by doctors, healthcare providers and patients, say the auditors. Despite the fact that a total of between 27 and 36 million people suffer from rare diseases in the EU, the networks face significant challenges to ensure they are financially sustainable and able to operate effectively across national healthcare systems.

The auditors recommend the Commission should:

- provide more support for national contact points to improve information on patients’ rights to cross-border healthcare;
- better prepare for cross-border exchanges of health data;
- improve support for and management of European Reference Networks to facilitate rare disease patients’ access to healthcare.

Notes to Editors

A 2015 Eurobarometer survey reported that fewer than 20 % of citizens were aware of their rights regarding cross-border healthcare.

There are two different legal routes for patients to obtain cross-border healthcare treatment: via either the EU directive or the EU regulation on the coordination of social security systems. Under the directive, around 200 000 patients a year, or fewer than 0.05 % of EU citizens, take advantage of treatment in another Member State. The majority of patient mobility has been between neighbouring Member States: France recently reported by far the highest number of outgoing patients, while the majority of cross-border patients sought healthcare in Spain, Portugal, Belgium and Germany – see cross-border healthcare 2016.

EU funding for cross-border healthcare comes primarily from the EU’s Health Programmes, which provide around €64 million a year for health-related issues. Expenditure for the reimbursement of medical care abroad under the directive is estimated at 0.004 % of the EU-wide annual healthcare budget.

The ECA presents its special reports to the European Parliament and Council of the EU, as well as to other interested parties such as national parliaments, industry stakeholders and representatives of civil society.

The ECA’s special report 07/2019 “EU actions for cross-border healthcare: significant ambitions but improved management required” is available on the ECA website (eca.europa.eu) in 23 EU languages.