



COMMISSION OF THE EUROPEAN COMMUNITIES

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Amended proposal for a

**REGULATION OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL**

**Amending Council Regulation (EEC) No 1408/71 on the application of social security schemes to employed persons and their families moving within the Community, and Council Regulation (EEC) No 574/72 fixing the procedure for implementing Regulation (EEC) No 1408/71, in respect of the alignment of rights and the simplification of procedures**

(presented by the Commission pursuant to Article 250 (2) of the EC Treaty)

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### **Amending Council Regulation (EEC) No 1408/71 on the application of social security schemes to employed persons and their families moving within the Community, and Council Regulation (EEC) No 574/72 fixing the procedure for implementing Regulation (EEC) No 1408/71, in respect of the alignment of rights and the simplification of procedures**

#### **1. BACKGROUND**

Following the conclusions of the Barcelona European Council, held on 15 and 16 March 2002, a European health insurance card would replace the current paper forms needed for medical treatment during a temporary stay in another Member State.

On 18 June 2003, the Administrative Commission adopted the three necessary decisions to replace E form 111 by the health insurance card.

To facilitate the replacement of others forms needed for medical treatment during a temporary stay in another Member State, it was proposed to modify Regulations 1408/71 and 574/72.

Consequently, the Commission tabled a proposal for a modification of the Regulations on 27 June 2003.

This proposal has three objectives :

- align the rights of all groups of insured persons during a temporary stay in a Member State other than the competent State to enable all persons covered by the Regulation to receive any benefits in kind that may become necessary for medical reasons during a stay in another Member State;
- simplify the formalities for patients who need care in the State of stay, specifically by doing away with the obligation to contact the social security institution of the place of stay before seeing a care provider, thus allowing them direct access to care providers;
- draw up a provision that defines the relationship between social security institutions and users.

At its plenary part-session of 4 December 2003, the European Parliament adopted 27 amendments to the Commission's proposal.

## **2. EXAMINATION OF AMENDMENTS**

The Commission agrees to incorporate all amendments adopted by the European Parliament.

### **2.1. Amendment 8**

This amendment recalls in a precise way the mandate of the Barcelona European Council. The Commission can accept it.

### **2.2. Amendment 9**

This amendment can be accepted as the current proposal takes the rights of insured persons a step further.

### **2.3. Amendment 10**

This amendment aims to specify the rights of the insured persons during a temporary stay in another Member State and can be accepted by the Commission.

### **2.4. Amendments 11 and 33**

The proposal simplifies the formalities for patients who need care in the State of stay by allowing them direct access to care providers. Amendments 11 and 33 aim to be sure that the care providers will be fully aware of the extent of the rights of the insured persons during the temporary stay. They are acceptable.

### **2.5. Amendments 12, 14, 15, 16, 17, 18, 19, 20, 21, 22, 25, 26, 28 and 30**

The purpose of these amendments is to clarify and to make more precise the Commission's proposal or to make some linguistic corrections. They are acceptable.

### **2.6. Amendments 13 and 32**

These amendments aim to ensure the information of the insured persons about their rights and obligations arising from the new Regulation. The Commission can accept them.

### **2.7. Amendment 23**

The purpose of amendment 23 is to specify in a precise way the obligation of information of the institution and of the insured persons about their situation. It can be accepted by the Commission.

### **2.8. Amendment 24**

This amendment aims to replace the word "penalties" which is strong and refers to criminal law, by "measures" which is softer. It is acceptable.

### **2.9. Amendments 27, 29 and 31**

The purpose of these amendments is to specify that the document (European health insurance card or E-form) has the same effect with regard to the care provider as

national evidence of the entitlements of the persons insured with the institution of the place of stay. They can be accepted by the Commission.

#### **2.10. Amendment 34**

Concerning the entry into force of the new Regulation, **amendment 34** makes sure that the new Regulation will enter into force on the same date (1 June 2004) as the European health insurance card. As far as the direct access to care providers is concerned, for purely administrative reasons, the entry into force is postponed until 1 July 2004. This amendment can be accepted.

### **3. CONCLUSION**

Pursuant to Article 250(2) of the EC Treaty, the Commission amends its proposal for a Regulation as outlined above.