



2018/2108(INI)

18.9.2018

AMENDMENTS

1 - 41

Draft opinion
Maria Grapini
(PE623.966v00-01)

on the implementation of the cross-border health care directive
(2018/2108(INI))

Amendment 1
Maria Grapini

Draft opinion
Citation 1 (new)

Draft opinion

Amendment

- *having regard to Articles 114 and 168 of the Treaty on the Functioning of the European Union (TFUE);*

Or. en

Amendment 2
Maria Grapini

Draft opinion
Citation 1 a (new)

Draft opinion

Amendment

- *having regard to Directive 2011/24/EU of the European Parliament and of the Council of 9 March 2011 on the application of patients' rights in cross-border healthcare;*

Or. en

Amendment 3
Maria Grapini

Draft opinion
Citation 1 b (new)

Draft opinion

Amendment

- *having regard to the Commission communication of 25 April 2018 on enabling the digital transformation of health and care in the Digital Single*

*Market ; empowering citizens and
building a healthier society;*

Or. en

**Amendment 4
Maria Grapini**

**Draft opinion
Recital A (new)**

Draft opinion

Amendment

A. Whereas according to Article 20 of Directive 2011/24/EU , the Commission is expected to present an implementation report on the operation of that directive every 3 years; whereas the Commission should constantly assess and regularly present information on patient flows , on the administrative , social and financial dimensions of patient mobility and on the functioning of the European reference networks and national contact points;

Or. en

**Amendment 5
Maria Grapini**

**Draft opinion
Recital A a (new)**

Draft opinion

Amendment

A a. Whereas further clarity and transparency for the conditions under which healthcare providers are operating is needed in order to secure safe patient mobility;

Or. en

Amendment 6
Maria Grapini

Draft opinion
Recital A b (new)

Draft opinion

Amendment

A b. Whereas the Commission communication on e-health notes that health and care systems require reforms and innovative solutions to become more resilient, accessible and effective; whereas therefore the use of new technologies and digital tools should be strengthened to attain greater quality and sustainability of healthcare services;

Or. en

Amendment 7
Igor Šoltes

Draft opinion
Recital A c (new)

Draft opinion

Amendment

A c. Whereas according to a 2015 Eurobarometer survey, less than 20% of citizens were aware of their rights regarding cross-border healthcare;

Or. en

Amendment 8
Igor Šoltes

Draft opinion
Recital A d (new)

Draft opinion

Amendment

A d. Whereas according to the 2015 Commission report on the operation of Directive 2011/24/EU on the application of patients' rights in cross-border healthcare, it remains difficult for citizens to find out how they can use their rights in terms of cross-border healthcare;

Or. en

**Amendment 9
Cristian-Silviu Buşoi**

**Draft opinion
Recital A e (new)**

Draft opinion

Amendment

A e. whereas there is still a considerable number of Member States where obstacles placed in the way of patients by health systems are significant and it only deepens the fragmentation of the access to services;

Or. en

**Amendment 10
Cristian-Silviu Buşoi**

**Draft opinion
Recital A f (new)**

Draft opinion

Amendment

A f. whereas the result of the implementation of the current Directive shows that in 2015 not all the Member States implemented completely or

correctly the Directive;

Or. en

Amendment 11
Cristian-Silviu Buşoi

Draft opinion
Recital A g (new)

Draft opinion

Amendment

A g. whereas in terms of data, not all the Member States were able to supply data or information regarding the patient travelling abroad; whereas data collection is not always comparable from one Member State to another;

Or. en

Amendment 12
Jasenko Selimovic

Draft opinion
Paragraph 1

Draft opinion

Amendment

1. Notes the benefits of Directive 2011/24/EU in clarifying the rules on cross-border healthcare and in ensuring access to safe and high-quality cross-border healthcare in the Union, as well as for achieving patient mobility in accordance with the case-law of the Court of Justice; urges Member States to ensure its proper implementation, guaranteeing a high level of public health protection that contributes to the improvement of citizens' health, while respecting the principle of the free movement of persons within the internal market;

1. Notes the benefits of Directive 2011/24/EU in clarifying the rules on cross-border healthcare and in ensuring access to safe and high-quality cross-border healthcare in the Union, as well as for achieving patient mobility in accordance with the case-law of the Court of Justice; ***expresses disappointment that, although he transposition deadline for the Directive was 25 October 2013, infringement proceedings were launched against 26 Member States on the grounds of late or incomplete notification,*** urges ***therefore*** Member States to ensure its proper implementation, guaranteeing a

high level of public health protection that contributes to the improvement of citizens' health, while respecting the principle of the free movement of persons within the internal market;

Or. en

Amendment 13
Lucy Anderson, Marlene Mizzi

Draft opinion
Paragraph 1

Draft opinion

1 Notes the benefits of Directive 2011/24/EU in clarifying the rules on cross-border healthcare and in ensuring access to safe and high-quality cross-border healthcare in the Union, as well as for achieving patient mobility in accordance with the case-law of the Court of Justice; urges Member States to ensure its proper implementation, guaranteeing a high level of public health protection that contributes to the improvement of citizens' health, while respecting the principle of the free movement of persons within the internal market;

Amendment

1 Notes the benefits of Directive 2011/24/EU in clarifying the rules on cross-border healthcare and in ensuring access to safe and high-quality cross-border healthcare in the Union, as well as for achieving patient mobility in accordance with the case-law of the Court of Justice; urges Member States to ensure its proper implementation, guaranteeing a high level of public health protection that contributes to the improvement of citizens' health, while respecting the principle of the free movement of persons within the internal market; ***stresses the focus of the Directive should be on addressing the imbalances between Member State healthcare and improving patients' rights rather than seeking to boost privatisation of the healthcare sector in different Member States in order to foster more market competition between healthcare providers within the single market.***

Or. en

Amendment 14
Maria Grapini

Draft opinion
Paragraph 1 a (new)

Draft opinion

Amendment

1 a. Encourages the Commission to review the real situation of cross-border healthcare in the Union more often than it is required as a minimum, according to Article 20 of Directive 2011/24/EU; considers it useful for the Commission to review the situation annually and to present a report to the Parliament at least every two years;

Or. en

Amendment 15
Jasenko Selimovic

Draft opinion
Paragraph 1 a (new)

Draft opinion

Amendment

1 a. Recalls that Article 8(2)(a) of Directive 2011/24/EU allows Member States to use a system of prior authorisation for healthcare that is subject to planning requirements if it involves overnight hospital accommodation or if it requires use of highly specialised and cost-intensive medical infrastructure or medical equipment, insists however, that any system of prior authorisation must be necessary and proportionate to the objective to be achieved, and may not constitute a means of arbitrary discrimination or an unjustified obstacle to the free movement of patients;

Or. en

Amendment 16
Jasenko Selimovic

Draft opinion
Paragraph 1 b (new)

Draft opinion

Amendment

1 b. Deplores that in a significant number of Member States, it is still unclear for patients exactly which treatments are subject to prior authorisation, urges Member States to clarify how they use the criteria “overnight stay” and “highly specialised care” so that those are clearly understandable for patients and authorities;

Or. en

Amendment 17
Jasenko Selimovic

Draft opinion
Paragraph 1 c (new)

Draft opinion

Amendment

1 c. Recalls that, although Article 7(9) of the Directive permits Member States to limit the application of the rules on reimbursement of cross-border healthcare for overriding reasons of general interest, Article 7(11) requires that such limitations be necessary and proportionate; urges Member States to facilitate the reimbursement of cross-border healthcare;

Or. en

Amendment 18
Jasenko Selimovic

Draft opinion
Paragraph 1 d (new)

Draft opinion

Amendment

1 d. Regrets that application of the Directive to ‘telemedicine’ has led to a certain lack of clarity, as some Member States reimburse or provide consultations with general practitioners at a distance, whilst others do not; encourages Member States to harmonize the way their reimburse ‘telemedicine’;

Or. en

Amendment 19
Maria Grapini

Draft opinion
Paragraph 2 a (new)

Draft opinion

Amendment

2 a. Underlines the importance for healthcare providers and professionals to have professional civil liability insurance, as provided for in Directives 2005/36/EC and 2011/24/EU, in order to improve the quality of health services and to increase patient protection;

Or. en

Amendment 20
Igor Šoltes

Draft opinion
Paragraph 2 a (new)

Draft opinion

Amendment

2 a. Notes that collection of data is not

comparable from one Member State to another; encourages therefore the Commission to establish a common framework to assess properly the benefits of Directive 2011/24/EU and allow comparison between Member States;

Or. en

Amendment 21
Jasenko Selimovic

Draft opinion
Paragraph 2 a (new)

Draft opinion

Amendment

2 a. Urges Member States to address the remaining issues concerning the mutual recognition of medical prescriptions between Member States;

Or. en

Amendment 22
Cristian-Silviu Buşoi

Draft opinion
Paragraph 2 a (new)

Draft opinion

Amendment

2a. Highlights the importance to collect and have available the data for patients travelling abroad for treatment, and calls upon the Commission to address this matter through a European Record for patients;

Or. en

Amendment 23
Richard Sulík

Draft opinion
Paragraph 2 a (new)

Draft opinion

Amendment

2 a. Recommends the Commission to develop guidelines on informing patients about step-by-step procedures for using the cross-border health care services and to create standardised templates for all types of forms required in cross-border healthcare, in cooperation with the involvement of patient organisations;

Or. en

Amendment 24
Cristian-Silviu Buşoi

Draft opinion
Paragraph 2 b (new)

Draft opinion

Amendment

2b. Underlines that digitalization could bring an added value to the implementation of the Directive, and e-health interoperability should be a priority to improve global patient records and continuity of care.

Or. en

Amendment 25
Richard Sulík

Draft opinion
Paragraph 2 b (new)

Draft opinion

Amendment

2 b. Recommends to Member States to publish accurate and easily understandable information about step-by-step procedures for using the cross-border health care services;

Or. en

Amendment 26
Cristian-Silviu Buşoi

Draft opinion
Paragraph 2 c (new)

Draft opinion

Amendment

2c. Calls on the Commission to put in place a mechanism where patients should be able to address complaints in cases where their rights have been not respected or even violated;

Or. en

Amendment 27
Richard Sulík

Draft opinion
Paragraph 2 c (new)

Draft opinion

Amendment

2 c. Asks Member States and National Contact Points to inform patients beyond generic information, such as links to national laws or regulatory documents and to provide practical and easily understandable complex legal and medical information;

Or. en

Amendment 28
Richard Sulík

Draft opinion
Paragraph 3 a (new)

Draft opinion

Amendment

3 a. Recommends the Commission to establish and publish benchmarks and key indicators for quality of healthcare and patient safety and compare information across institutions and Member States;

Or. en

Amendment 29
Lucy Anderson, Marlene Mizzi

Draft opinion
Paragraph 3 a (new)

Draft opinion

Amendment

3 a. Notes the continued success of the European Health Insurance Card and the positive impact this has had on the lives of many who have made use of it throughout the EU and EEA.

Or. en

Amendment 30
Lucy Anderson, Marlene Mizzi

Draft opinion
Paragraph 3 b (new)

Draft opinion

Amendment

3 b. Notes that the Directive fundamentally is failing to address widening health inequalities across the

EU and that those from poorer countries are still unable to access much-needed specialist treatment in other Member States.

Or. en

Amendment 31
Richard Sulík

Draft opinion
Paragraph 4 a (new)

Draft opinion

Amendment

4 a. Reminds that eHealth applications are financed or co-financed from the Union's budget, therefore highlights the Commission should more actively address the lack of interoperability between Member States' eHealth solutions;

Or. en

Amendment 32
Richard Sulík

Draft opinion
Paragraph 4 b (new)

Draft opinion

Amendment

4 b. Asks the Commission to identify the Member States with interoperable and properly functioning eHealth solutions and their individual functionalities;

Or. en

Amendment 33
Jasenko Selimovic

Draft opinion
Paragraph 5

Draft opinion

5. Stresses the importance of information to patients about their rights and the procedures, costs and reimbursement rates in cross-border healthcare within the framework of Directive 2011/24/EU; invites the Commission to take measures to increase patients' awareness about their rights and about the National Contact Points.

Amendment

5. ***Underlines that patient organisations have reported their concern that patients are faced with a labyrinth of confusing, sometimes insufficient and sometimes too detailed information' with regard to cross-border healthcare; stresses therefore*** the importance of information to patients about their rights and the procedures, costs and reimbursement rates in cross-border healthcare within the framework of Directive 2011/24/EU; invites the Commission to take measures to increase patients' awareness about their rights and about the National Contact Points.

Or. en

Amendment 34
Lucy Anderson, Marlene Mizzi

Draft opinion
Paragraph 5

Draft opinion

5. Stresses the importance of information to patients about their rights and the procedures, costs and reimbursement rates in cross-border healthcare within the framework of Directive 2011/24/EU; invites the Commission to take measures to increase patients' awareness about their rights and about the National Contact Points.

Amendment

5. Stresses the importance of information to patients about their rights and the procedures, costs and reimbursement rates in cross-border healthcare within the framework of Directive 2011/24/EU; invites the Commission to take measures to increase patients' awareness about their rights and about the National Contact Points. ***Member States should collaborate to promote national safety and quality standards.***

Or. en

Amendment 35
Igor Šoltes

Draft opinion
Paragraph 5

Draft opinion

5. Stresses the importance of information to patients about their rights and the procedures, costs and reimbursement rates in cross-border healthcare within the framework of Directive 2011/24/EU; invites the Commission to take measures to increase patients' awareness about their rights and about the National Contact Points.

Amendment

5. Stresses the importance of ***comprehensive, easy-to-understand and easy-to-access*** information to patients about their rights and the procedures, costs and reimbursement rates in cross-border healthcare within the framework of Directive 2011/24/EU; invites the Commission to take measures to increase patients' awareness about their rights and about the National Contact Points.

Or. en

Amendment 36
Jasenko Selimovic

Draft opinion
Paragraph 5 a (new)

Draft opinion

Amendment

5 a. Regrets that patient mobility for planned healthcare remains low, whilst patient mobility in terms of unplanned healthcare seems to be considerably higher, highlights that the level of use of planned healthcare elsewhere is far below the potential levels suggested by the number of people indicating in the Eurobarometer survey that they would consider using cross-border healthcare, encourages therefore Member States to do their utmost to raise awareness among citizens on the general rights under the Directive;

Or. en

Amendment 37
Igor Šoltes

Draft opinion
Paragraph 5 a (new)

Draft opinion

Amendment

5 a. Highlights in this regard the key role of National Contact Points in providing information to patients on their rights, procedures, costs and reimbursements as well as complaint mechanisms in order to help them taking a decision; Calls therefore for the allocation of appropriate resources and staff in order to ensure their proper functioning and invite the Commission to define common guidelines for National Contact Points on the core information to be delivered to patients;

Or. en

Amendment 38
Richard Sulík

Draft opinion
Paragraph 5 a (new)

Draft opinion

Amendment

5 a. Welcomes the pending audit of the European Court of Auditors on whether implementation of the Directive to date has been effective, and whether cross-border healthcare is delivering benefits to patients; strongly encourages the Commission and the Member States to take the recommendations of this audit into account;

Or. en

Amendment 39
Maria Grapini

Draft opinion
Paragraph 5 a (new)

Draft opinion

Amendment

5 a. Calls on the Commission and the Member States to work towards and propose joint, simplified and explicit healthcare measures for citizens in cross-border situations in the Union to increase public health protection.

Or. en

Amendment 40
Maria Grapini

Draft opinion
Paragraph 5 b (new)

Draft opinion

Amendment

5 b. Notes that citizens , and in particular patients, as well as healthcare professionals, providing services abroad , either experience difficulty in finding and understanding the information on the applicable rules and procedures in other Member States or are not aware of their rights; calls on the Commission to improve the functioning of the national contact points, in order to promote regular exchange of information which is comprehensive and user-friendly so that citizens and professionals traveling abroad can make well-informed decisions and save time and costs; considers that each Member State must be responsible for the accuracy of the information provided via National Contact Points;

Or. en

Amendment 41
Richard Sulík

Draft opinion
Paragraph 5 b (new)

Draft opinion

Amendment

5 b. Encourages Member States to highly consider the undue delay rule of reimbursement for cross-border health care services introduced by Directive and not to apply burdensome requirements not justified by Directive such as documents certified by a consul in the country of treatment, a sworn translation of invoices or a referral from a medical professional in the home country, annual reimbursement limit for cross-border care;

Or. en