

Implementing the Directive on patients' rights in cross-border healthcare: are we ready?

by Michela Tinelli and Zlatko Nikoloski, on behalf of the LSE EUCBCC Team

On Friday 25 October 2013 European Union countries will bring into force their regulations necessary to comply with the Directive on patients' rights in cross-border healthcare. On the same day at LSE, policymakers will join academics from the 13 partner institutions in the [European Union Cross Border Care Collaboration \(EUCBCC\) project](#) to discuss international experiences (for more information about the event or to book a place please see [here](#)).

The Directive 2011/24/EU, adopted by the European Parliament in March 2011, specifies patients' rights to access safe and good quality treatment across EU borders, as well as reimbursement of costs. It further builds on the benefits already offered to European citizens through existing Regulations on social security that have been in place since 1971 (for more information on the Directive see [here](#)).

Evidence from the EUCBCC project suggests that use of health care services in another EU country is very limited with EU citizens usually seeking care in their home country, and only occasionally considering what is available in other countries. Opting for cross-border care usually happens when people need specialized treatment; when the costs of cross-border health care services are lower than what they would pay at home (e.g. dental treatment); for proximity of locations in border regions; or when falling ill while visiting abroad. As cross-border movement is influenced by care costs, it is likely that not all income groups will be able to afford the costs of seeking care abroad, even though services may be much cheaper compared to the care offered at home.

Although less than 1% of current healthcare expenditure is for planned cross-border healthcare treatments such as hip and knee operations or cataract surgery according to the European Commission, there is a growing interest by EU citizens to seek health care treatments abroad ([European Commission – MEMO/11/32 19/01/2011](#)). The EUCBCC project aims to provide a better understanding of what cross-border care means for patients, and to gain useful comparative insights from a series of case studies on cross-border care. The project explored a range of stakeholder views on the Directive including patients, users of long-term care, health care professionals, and policy makers.

The EUCBCC project makes a two-fold contribution to informing policy decision-making. First, it examines six aspects of health care delivery where procedures need to converge in order to assure patients that abroad they can receive healthcare of adequate quality and safety (see figure 1): continuing quality health professionals; treatment pathways; content and scope of medical records; medical prescribing; public reporting of quality; and long-term care and media reporting. Second, it looks at three specific areas (dentistry, collaborations between hospitals in border areas, and telemedicine) where there is already cross-border collaboration, in order to identify practical issues that have arisen, and how they have or have not been addressed.

Figure 1: Dimensions of cross-border care from EUCBCC project



If you are interested in attending the event, you can book online via LSE Conferences and Events (for more details see [here](#)).

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