| Basic information | |
|---|---|
| **2007/2515(RSP)**<br>RSP - Resolutions on topical subjects | Procedure completed |
| Resolution on the provision of cross-border health care<br>**Subject**<br>4.20.06 Health services, medical institutions | |

| Key events | | | |
|---|---|---|---|
| **Date** | **Event** | **Reference** | **Summary** |
| 12/03/2007 | Debate in Parliament | | |
| 15/03/2007 | Decision by Parliament | T6-0073/2007 | Summary |
| 15/03/2007 | Results of vote in Parliament | | |
| 15/03/2007 | End of procedure in Parliament | | |

| Technical information | |
|---|---|
| **Procedure reference** | 2007/2515(RSP) |
| **Procedure type** | RSP - Resolutions on topical subjects |
| **Procedure subtype** | Debate or resolution on oral question/interpellation |
| **Legal basis** | Rules of Procedure EP 142-p5 |
| **Stage reached in procedure** | Procedure completed |

**Documentation gateway**

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| Document type | Committee | Reference | Date | Summary |
|---|---|---|---|---|
| Oral question/interpellation by Parliament | | B6-0013/2007 | 12/03/2007 | |
| Motion for a resolution | | B6-0098/2007 | 12/03/2007 | |
| Text adopted by Parliament, topical subjects | | T6-0073/2007 | 15/03/2007 | Summary |

# Resolution on the provision of cross-border health care

2007/2515(RSP) - 15/03/2007 - Text adopted by Parliament, topical subjects

The European Parliament adopted a resolution on Community action on the provision of cross-border healthcare, and welcomed the Commission initiative to launch a consultation procedure on the best form of Community action with a view to providing a framework for cross-border aspects of healthcare. It was necessary to necessary to create a legal framework for cross-border healthcare provision which best guaranteed patients' timely access to appropriate and high-quality healthcare, the development of cross-border healthcare provision and the sustainability of healthcare financing.

Parliament pointed out that the European Court of Justice (ECJ) had given a number of rulings since 1998 allowing patients to move freely in search of medical treatment and care and thus applying the principle of free movement to the reimbursement of healthcare provided abroad. The ECJ first ruled that making reimbursement of costs incurred in another Member State subject to prior authorisation should be considered as a barrier to the provision of services. It then developed further the principles on reimbursement and the need for prior authorisation. Parliament considered, therefore, that ensuring legal certainty as regards the reimbursement of the costs for cross-border healthcare was one of the priority issues not only for patients but also for national health insurance systems and healthcare providers. It underlined the need to clarify procedures and conditions for reimbursement in various cases, adding that patient mobility must always be a matter for free patient choice and that no pressure must be brought to bear on patients' freedom of choice.

Urging the Commission to develop common principles and basic guidelines for healthcare in order to guarantee patient safety, Parliament also took the view that the development of harmonised health indicators (such as blood test standards) at Community level was very important to improving the exchange of best practice, particularly between health professionals. The EU must play an important role in improving the availability of information for patients on cross-border mobility by coordinating cooperation between Member States in this field.

Parliament went on to stress the need to ensure patient safety in all circumstances regardless of where and how healthcare is provided. There must be clarity on the responsibilities between authorities in supervising healthcare providers and for effective information exchange between national authorities on the registration and disciplinary status of health care professionals. Parliament felt that it was necessary to create a mechanism for appeals on malpractice in cross-border healthcare. It pointed out that healthcare and medical treatment required follow-up, which might take a long time, and there should be clear rules on the division of tasks and responsibilities between healthcare providers during the different stages of treatment and care. For patient safety, the framework legislation should a duty upon national authorities to exchange registration and disciplinary information about healthcare professionals engaging in cross-border healthcare.

MEP’s considered that there is a need to incorporate a common charter of patients" rights into the framework in order to ensure that such rights were exercised in practice across borders and in the home country. The framework should also incorporate a mechanism for data collection and exchange of information between national authorities on healthcare providers, their registration and disciplinary status, and available expertise. The creation of a network of European Centres of Reference would bring also considerable benefits to the treatment of diseases.

Parliament appealed to the Member States to introduce a one-stop-shop approach to complaint procedures for patients. It called on the Commission to pay special attention to the provision of information to patients on their rights and obligations and introduce appropriate provisions in its legislative proposal. Lastly, it felt that the forthcoming Community framework could provide an opportunity to empower European citizens as patients as well as encourage Member States to develop their healthcare systems.