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You Impact! From Citizen Involvement to EU Policy Impact

Improving patients' rights in the age of the Cross Border Healthcare Directive

An European debate and webinar among Institutions, experts, civic & patient organizations, students

Istituto Luigi Sturzo, Sala Rossa - Via delle Coppelle n.35, Roma

10.30 – 15.00

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14.10 – 14.45

Building alliances and promoting civil partnerships to strengthen the protection of citizens' rights

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The set of common values and principles that are shared across the Union about how health systems respond to needs of population and patients are that they serve, as the Directive on the application of patients' cross-border healthcare of 9 March 2011 states, are:

- UNIVERSALITY
- ACCESS TO GOOD QUALITY HEALTHCARE
- EQUITY
- SOLIDARITY

In the previously mentioned directive it is explicitly affirmed that Member States should ensure that these values are respected with regard to patients and citizens of other Member States and that all patients should be treated equitably on the basis of their healthcare needs rather than on the basis of their Member State of affiliation.

Taking into account these mandatory principles, alliances and civil partnerships can play a fundamental role not only by being the watchdogs of the application of these values but also by extensively promoting the awareness of patients' rights, specially when it comes to cross-border healthcare with respect to which being adequately informed constitutes an essential part.

Article 20, Paragraph 1 of the Directive obliges the Commission to draw up a report on the implementation of the Directive and to present it to the European Parliament and the Council every three years. The first report has been released, by the 25th of October 2015 and it refers to data collected during the year 2014.

According to this report, the EU citizens are poorly informed about their right as far as cross-boarder healthcare concerns and also about the existence of the contact points in their countries, which should provide them with information concerning healthcare providers including, on request, information on a specific provider's right to provide services or any restrictions on its practice; information on patients' rights, complaints procedure and mechanism for seeking remedies, according to the legislation of that Member State as well as the legal and administrative options available to settle disputes including the event of harm arising from cross-boarder healthcare.



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Only 1 out of 10 resulted aware of the existence of National Contact Points for cross-boarder healthcare. It is clear that more effort needs to be done on this.

Also a major role could be played by civil partnerships in building European reference networks between healthcare providers and center of expertise in the Member states in particular in the area of rare diseases, defined by Article 12. These networks infact are based on voluntary participation by its members.

Therefore, I conclude, this approach on cross-boarder healthcare has given enormous opportunities to EU citizens which have to be explored and promoted more extensively, given that Europe must also move towards a more social union, besides economic and political union.