EUROVOC descriptor:
  - free movement of persons
  - free movement of workers
  - infectious disease
  - infectious disease
  - cross-border cooperation
  - cross-border cooperation
  - provision of services
  - health care profession
  - protection of privacy
  - patient's rights
  - public health
  - freedom of movement
  - social security
  - data protection
  - EU Member State
  - information technology applications
  - personal data
  - health care
  - health care
  - mobile phone
  - digital technology
  - epidemic
  - epidemic
  - emergency aid
  - digital single market
  - European Union Solidarity Fund

Directory code:
  - 13.20.60.00 Industrial policy and internal market / Industrial policy: sectoral operations / Information technology, telecommunications and data-processing
  - 15.30.00.00 Environment, consumers and health protection / Health protection
  - 15.30.00.00 Environment, consumers and health protection / Health protection
Healthcare in other EU countries — patients’ rights

SUMMARY OF:
Directive 2011/24/EU on the application of patients’ rights in cross-border healthcare

SUMMARY

WHAT DOES THIS DIRECTIVE DO?

- It sets out the conditions under which a patient may travel to another EU country to receive safe and high quality medical care and have the cost reimbursed by their own health insurance scheme.
- It also encourages cooperation between national healthcare systems.

KEY POINTS

- The EU country providing the treatment must ensure that:
  - all the information necessary for patients to make an informed choice,
  - transparent complaint procedures exist,
  - professional liability insurance or similar guarantees are in place,
  - privacy of personal data is respected,
  - patients have access to a written or electronic record of the treatment they receive,
  - the healthcare fees charged are the same as for domestic patients.
- The EU country where the patient is insured must ensure that:
  - the cost of the healthcare provided is reimbursed,
• information on patient rights and entitlements is available,
• patients have access to any medical follow-up treatment which might be necessary,
• patients have access to their medical records.
• National contact points exist to provide information and to consult with patient organisations and healthcare providers and insurers.
• Healthcare providers give information to patients including the following:
  • treatment options,
  • availability,
  • quality and safety of the healthcare they provide,
  • prices,
  • authorisation or registration status.
• A patient's own country must reimburse the cost of the treatment according to the scales it applies domestically. It may also decide to reimburse travel and accommodation costs.
• A patient may require prior authorisation from their own country before going abroad for treatment. This may be necessary if the medical care involves at least one night in hospital and/or the use of highly specialised and cost-intensive medical equipment, or if it poses a particular risk for the patient or the population.
• A national authority may refuse to give prior authorisation if it considers it can provide the patient with the necessary healthcare within a time limit which is medically justifiable.
• Requests for medical treatment in another EU country must be dealt with within a reasonable period of time.
• Prescriptions issued in one EU country are valid in another.
• National health authorities must cooperate with each other in implementing the legislation and in developing European reference networks between healthcare providers and centres of expertise.
• The cooperation extends to tackling rare diseases, developing e-health and assessing new health technology.
• The legislation does not cover long-term care, allocation of and access to organs or vaccinations.
• The directive does not affect how EU countries organise and finance their national health systems for their own citizens.
• The European Commission produces a report every 3 years on the way the system is working and how the directive operates. The first report was adopted in September 2015.

WHEN DOES THE DIRECTIVE APPLY?
It entered into force on 24 April 2011. EU countries had to incorporate it into national law by 25 October 2013.

BACKGROUND
The reason the rules for cross-border healthcare needed clarifying is that they had been developed based on individual judgments of the Court of Justice of the European Union over a period of more than 10 years. The directive was brought forward specifically to
clarify the rights to healthcare which derive from the Court's rulings based on Article 56 of the Treaty on the Functioning of the European Union, and to enable these rights to be used in practice. The directive aims to clarify the relationship between its rules on cross-border healthcare and the existing framework provided by Regulation (EC) 883/2004 on social security coordination.

Cross-border care: a legislative framework


Commission Recommendation (EU) 2020/518 of 8 April 2020 on a common Union toolbox for the use of technology and data to combat and exit from the COVID-19 crisis, in particular concerning mobile applications and the use of anonymised mobility data

ACT


The successive amendments to Directive 2011/24/EU have been incorporated into the original text. This consolidated version is of documentary value only.

RELATED ACTS


Commission Delegated Decision 2014/286/EU of 10 March 2014 setting out criteria and conditions that European Reference Networks and healthcare providers wishing to join a European Reference Network must fulfil (OJ L 147, 17.5.2014, pp. 71-78)

Commission Implementing Decision 2014/287/EU of 10 March 2014 setting out criteria for establishing and evaluating European Reference Networks and their Members and for facilitating the exchange of information and expertise on establishing and evaluating such Networks (OJ L 147, 17.5.2014, pp. 79-87)

Commission Implementing Decision 2011/890/EU of 22 December 2011 providing the rules for the establishment, the management and the functioning of the network of national responsible authorities on eHealth (OJ L 344, 28.12.2011, pp. 48-50)

Commission Implementing Decision 2013/329/EU of 26 June 2013 providing the rules for the establishment, management and transparent functioning of the network of national authorities or bodies responsible for health technology assessment (OJ L 175, 27.6.2013, pp. 71-72)