

Assessing the impact of cross-border healthcare in the EU

**Katarzyna Byszek
Warsaw School of Economics**

Warsaw, December 5th 2019



PRESENTATION PLAN

- 1. What is cross-border healthcare and how is it funded?**
- 2. Are patients willing to travel to another country for medical treatment?**
- 3. Who utilises cross-border healthcare?**
- 4. What are the factors driving cross-border healthcare?**
- 5. How does cross-border healthcare impact Member States?**

CROSS-BORDER HEALTHCARE NEEDED MORE TRANSPARENT REGULATIONS

OVERALL OBJECTIVE:

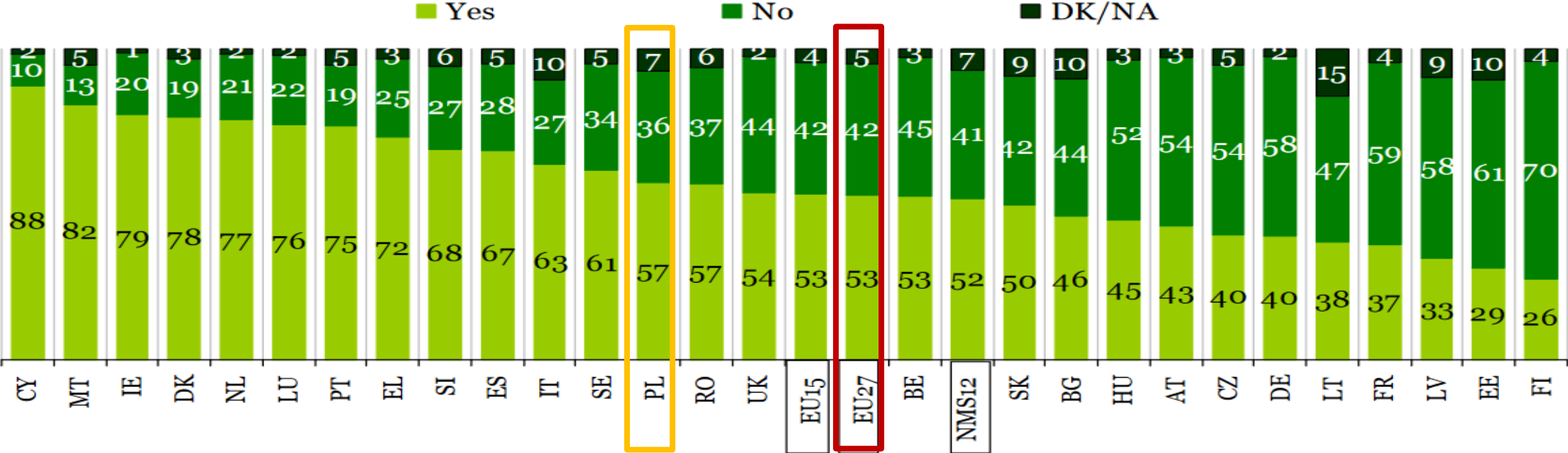
- **clear framework for cross-border healthcare within the EU**

SPECIFIC OBJECTIVES:

- **ensure that rights to reimbursement for healthcare abroad can be used in practice**
- **ensure high-quality, safe and efficient cross-border healthcare**

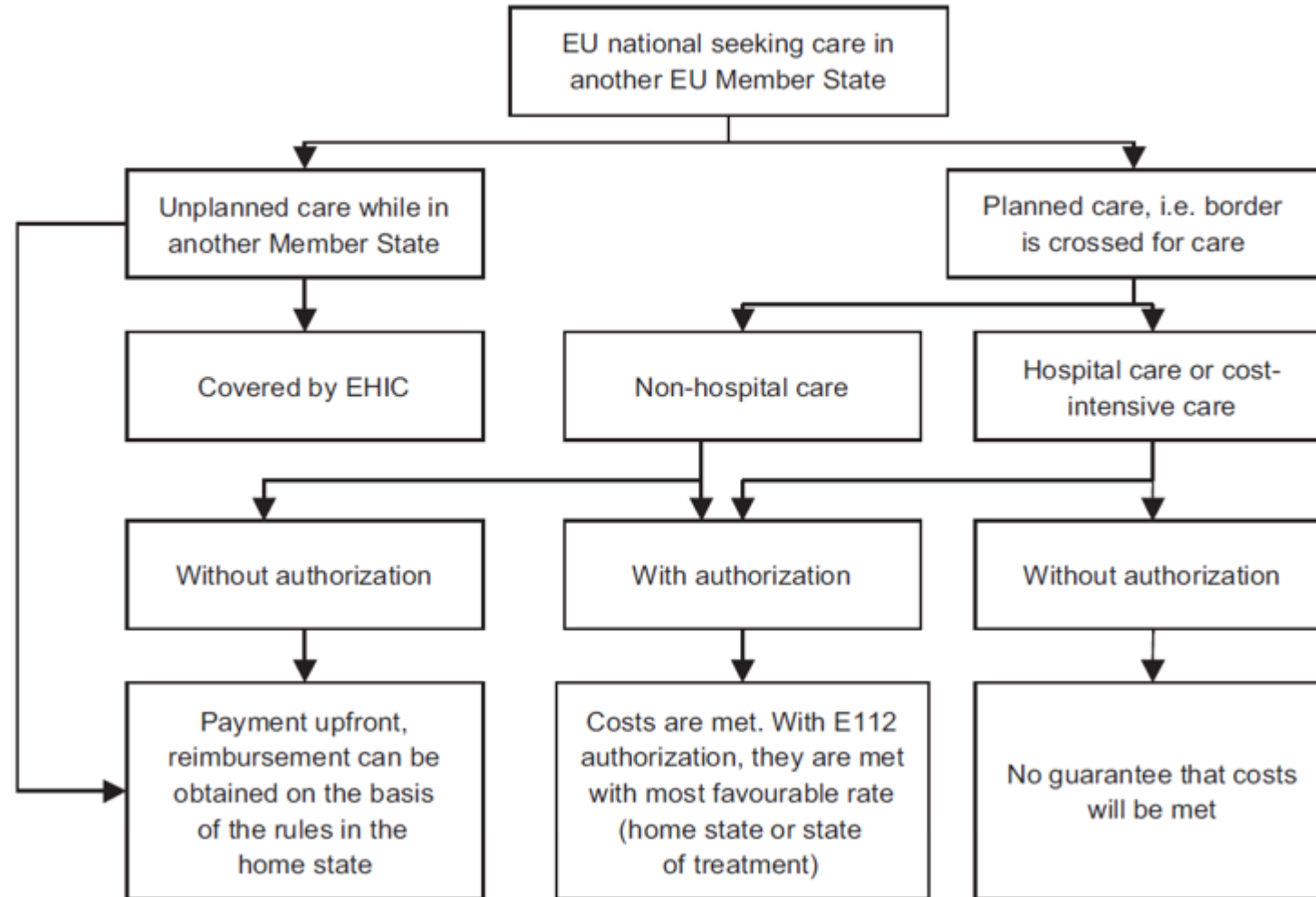
OVER HALF OF THE EU POPULATION WILLING TO USE CROSS-BORDER HEALTHCARE

Would you be willing to travel to another EU country to receive medical treatment?



Source: Flash Eurobarometer 210 , Cross-border health services in the EU. Analytical report, 2007

FINANCING CROSS-BORDER HEALTHCARE



Source: WHO 2016

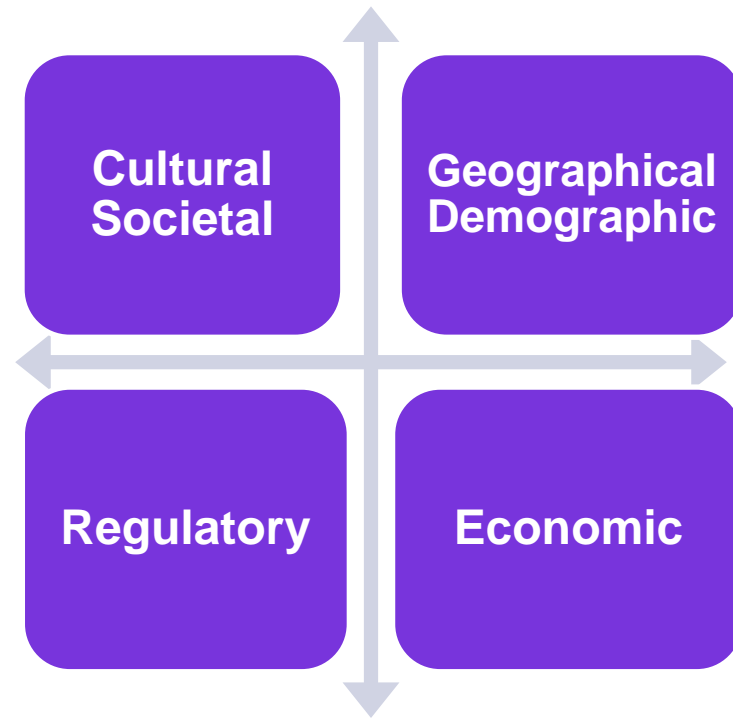
WHO UTILISES CROSS-BORDER HEALTHCARE?

- **Temporary visitors**
- **People retiring to other countries**
- **People living in border regions**
- **People going abroad on their own initiative**
- **People sent abroad by their home systems**



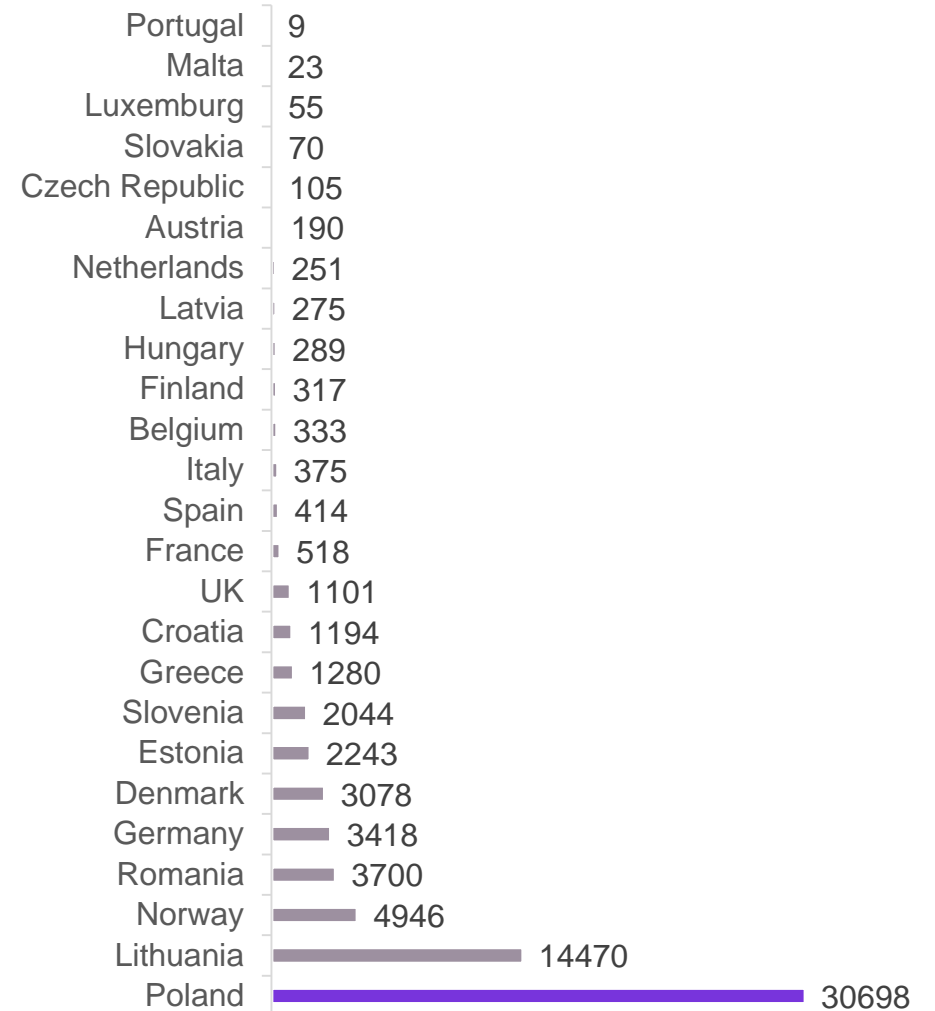
FACTORS DRIVING CROSS-BORDER HEALTHCARE

- Patients might seek care in another European country due to **availability, affordability, familiarity** and **perceived quality** of healthcare (Glinos et al., 2010)
- There is no or almost no geographical, cultural or administrative barrier present that would prevent patients from seeking healthcare abroad (European Commission 2018)
- Driving factors to be grouped into four dimensions:



PATIENTS WANT TO KNOW MORE ABOUT THEIR RIGHTS WITH REGARD TO HEALTHCARE IN THE EU

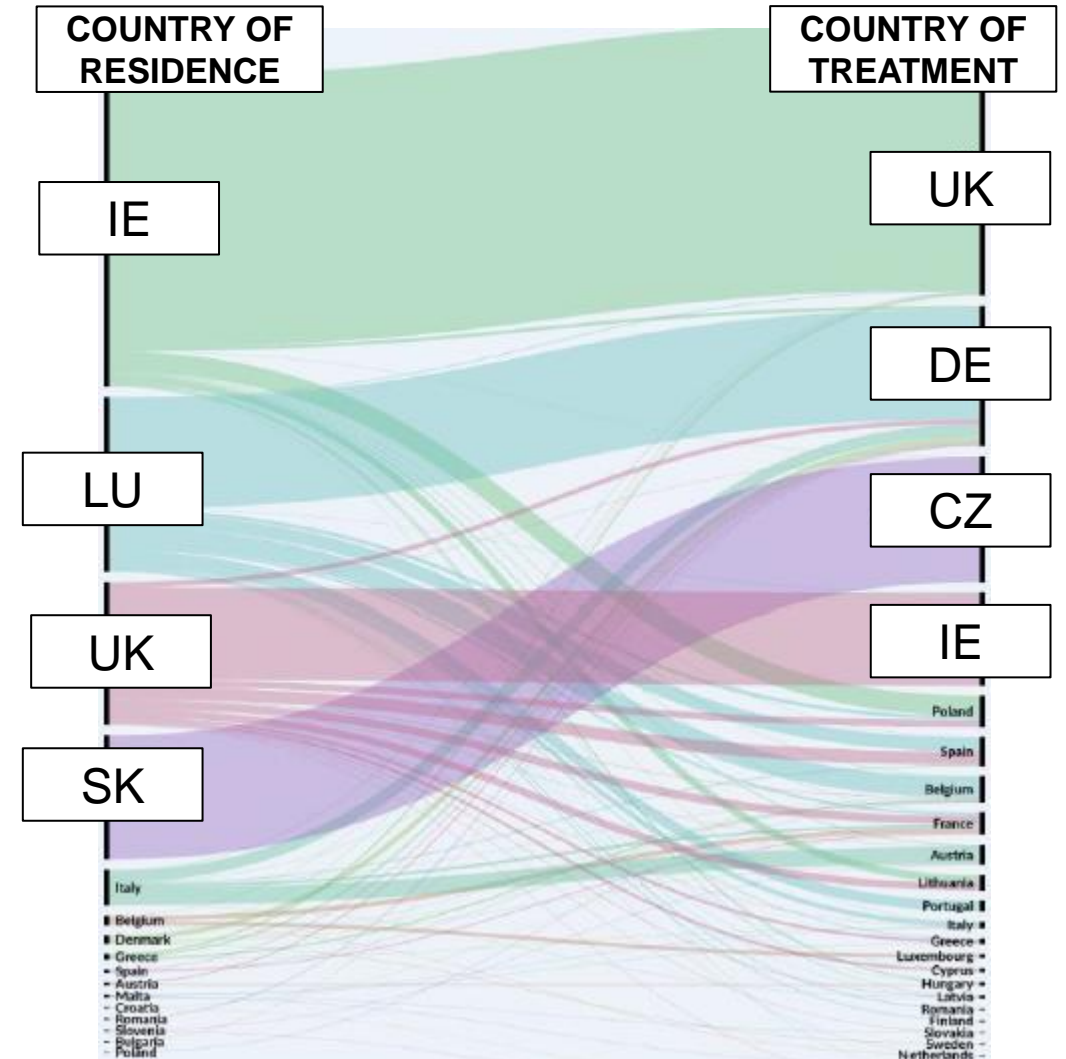
- Member States reported the number of enquiries about access to care under the directive received by national contact points
- A total of 71,396 requests for information were received, with most member states receiving fewer than 1,000 requests in 2017.
- **Poland** and Lithuania are the outliers at **30,698** and **14,470** respectively.
- The data show that almost two thirds of the requests for information were made by telephone, with the remainder either written (email) or made in person.



Source: EC 2018, Data for patient migration in 2017

ALL PATIENT MOBILITY WITH PRIOR AUTHORISATION IN EUROPE IN 2017

- In 2017 the most significant flow of patients is as follows:
 - Ireland to UK (617)
 - Slovakia to Czech Republic (282)
 - Luxembourg to Germany (251)
 - UK to Ireland (206)
- These four country pairs represented **over 70% of all the cases** of patient mobility under the directive where prior authorisation had been granted
- In all other cases the numbers of patients travelling were in low double digits



FURTHER CONSIDERATIONS

- Does providing patients with more information about their rights, quality of care and generally of cross-border healthcare increase patient migration?
- Do patients have greater influence on planning their treatment?
- Is prior authorization used as a limitation to healthcare or mechanism to control costs?
- Risks of financial drain on government resources?

**Thank you
for your attention**

**Contact:
katarzyna.byszek@gmail.com**

