

## **An active role for the health consumer**

Europe is destined to become a single market for health care services. In another ten years we will have difficulty understanding why national boundaries used to be considered so important – and obstructive – for health care. Europeans will then be accustomed to moving between the EU countries in search of the best possible care, and care enterprises will be able to set up shop where there is need and demand for their services. Health consumers will have access to knowledge enabling them to actively choose their care providers, with public care funding following them to pay for their care, wherever in the EU it may be provided.

This is the perspective in which to view the Draft Directive on Services in the Internal Market which 11th November forms the subject of a hearing in the European Parliament. At first sight the directive mainly consists of screeds of statutory text, but the Commission's strategy is clear, namely to spur the integration of service markets and by doing so to improve economic growth. With health consumers wishing to take an active stance and with more and more alternative care providers appearing all over Europe, health care should not longer be viewed in terms of national public monopolies but rather as an important growth industry.

New decisions by the European Court are successively advancing the right of health consumers to mobility within the Union. In just a few years this right has been expanded from the right of purchasing spectacles abroad with public funding support to the right of seeking highly specialised medical care. Under this new case law, the consumer who finds waiting times in the country of domicile to be excessively long is entitled to the corresponding care abroad at the same cost as in the country of domicile.

This is a perfectly logical development if we believe in European integration. But – and this is where the draft directive comes in – it is a “one-legged” development. Consumer mobility is of the utmost importance, but why leave it at that? Why not allow care producers to come to people in need of care, as is unquestionably the basic idea of the EU? “Mobility of services and people” should mean, not only that we are entitled to go to a care provider abroad but also that we are entitled to receive the same high-quality or competitively priced care in our own country.

Just think how drastically waiting times in certain Member States could be shortened if care providers from other countries were allowed, unimpeded, to start up in business where waiting lists are longest! Just think how much public authorities would be able to save by engaging effective producers with lower overheads! Not to mention the numbers of people who would then be spared suffering, medication and sicklisting.

There is widespread concern about supervision in the event of care providers being allowed to establish themselves in other countries. Who would then be responsible for supervising them – the authority in the country the producer comes from, or the authority where the new activity is conducted? It would be strange indeed if this question could not be resolved and if hesitancy in the Parliament were allowed to stand in the way of cross-border European co-operation for better health care.

Obviously there has to be expert surveillance of the quality and safety of health care, but let us not overlook the most important quality surveyor of them all: the health consumer! Who has a bigger stake than the health consumer in the quality of care, medical safety and matters of responsibility? Today the consumer's possibilities of quality surveillance in health care are very limited by comparison with practically any other service one cares to mention.

Consequently the health care sector lacks the consumer pressure which has given us far safer cars, cheapened air travel and revolutionised IT services. A breakthrough for comparative information about care providers and services will enable the demanding health consumer/patient to become an active driving force and quality monitor in present-day health care and also among the care providers wishing to help realise the vision of European co-operation.

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