



## EDF's recommendations for the European Commission's evaluation of patient rights in cross-border healthcare

8 July 2021

Access to health is a fundamental human right of persons with disabilities. It is recognised and protected under the UN Convention on the Rights of Persons with Disabilities ratified by the European Union (hereinafter 'EU') and all its Member States, and the EU Charter of Fundamental Rights. Under EU law, patients have a right to seek healthcare in other EU Member States. However, the exercise of this right depends greatly on how well EU law is transposed and implemented, and of the level of discrimination patients with disabilities may face when seeking healthcare.

The European Disability Forum will publish a report on access to cross-border healthcare by patients with disabilities in September 2021 to contribute to the evaluation of patients' rights, and in particular of the Patients Mobility Directive.

At this stage, EDF submits the key findings of the report.

### EDF findings

The EU and the Member States have committed to 'take all appropriate measures to ensure access for persons with disabilities to health services'.<sup>1</sup> Yet, the review of the NCPs websites and national legislation on disability discrimination reveals a number of obstacles:

- **Patients seeking cross border healthcare face difficulties finding information on their rights under the Patient Mobility Directive.** The content of the websites can be incomplete, inaccurate, or unclear. The "need to further improve the websites" noted in the European Commission's last Report on the operation of the Patient Mobility Directive remains acute.<sup>2</sup> Only 2 NCPs provide information on mental healthcare, and no NCPs provide information on sexual and reproductive health.
- **Limited to no disability specific information is provided to patients with disabilities on the NCPs websites.** The limited information provided to patients with disabilities concerns physical accessibility of healthcare facilities, and/or the provision of reasonable accommodation..

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<sup>1</sup> Art. 25 UN Convention on the Rights of Persons with Disabilities.

<sup>2</sup> Report from the Commission to the European Parliament and the Council on the operation of Directive 2011/24/EU on the application of patients' rights in cross-border healthcare (COM(2018) 651 final), 11.

- **Accessibility of information for patients with disabilities is not guaranteed.** NCPs websites are not digitally accessible to patients with disabilities, including those using assistive technologies like screen readers. These websites do not fully comply with the requirements of the Web Accessibility Directive. Other accessibility formats such as videos in sign languages and Easy to Read formats are not provided.
- **Almost no NCPs websites provide information of the reimbursement of additional disability related costs.** Only two NCPs websites provide limited information. Although this is optional for EU Member States, this makes more difficult cross-border healthcare to patients with disabilities. The fact that no information is easily accessible may be a deterrent to patients with disabilities even in cases where the State may cover these costs.
- **Disability based discrimination in access to healthcare is not fully prohibited in almost half of the EU Member States.** Disability based discrimination and denial of reasonable accommodation can hinder access to cross border healthcare by patients with disabilities.

## Recommendations

The European Disability Forum recommends that the Commission conducts a detailed review of the NCPs' websites and require NCPs to ensure that:

- **Information is provided on both the Patients Mobility Directive and Regulation 883/2004 routes to access cross-border healthcare on the NCPs websites.** Greater transparency would enable patients to make an informed choice while strengthening their ability to exercise their rights to planned cross-border healthcare. Even if information about the Regulation 883/2004 route is available upon request, websites that do not (adequately) inform patients about their rights create an information gap that negatively affects the right to planned cross-border healthcare. Presumably, this would also help to reduce the NCPs' administrative burden by reducing the number of repeat answers to near-identical requests.
- **Websites are accessible to patients with disabilities in line with the Web Accessibility Directive.** NCPs should review their websites to ensure they are accessible to persons with disabilities by complying with the Web Accessibility Directive requirements, including an accessibility statement in which users can find accessibility-related information of the website, and a feedback mechanism to raise issues concerning the accessibility of the websites. They should also improve accessibility of the information by providing additional alternative accessible formats, such as Easy-to-Read information and key information in sign language.
- **Websites provide disability specific information for patients with disabilities seeking cross border healthcare.** That should include information on accessibility of healthcare facilities, the possibility to request reasonable accommodation, reimbursement of disability-specific costs, and mental health and sexual and reproductive health services. To enhance

visibility, a **specific webpage** could list information that would be relevant to patients with disabilities, adding an invitation to contact the NCP for further queries.<sup>3</sup>

In addition, the European Commission must take additional measures to ensure access to healthcare services, including cross-border healthcare to all patients with disabilities. In particular it should:

- **Revise the Patients Mobility Directive and Regulation 883/2004 to require the reimbursement of disability-related additional costs.** Whether disability-related additional costs (e.g. increased transport costs and costs incurred by personal assistants) are reimbursed has an obvious impact on the capacity of patients with disabilities to exercise their right to planned cross-border healthcare. A previous report showed that no additional costs were reimbursed in 76% of an admittedly small sample.<sup>4</sup>
- **Support the adoption of a horizontal equal treatment directive** prohibiting disability-based discrimination in access to healthcare. The barriers faced by patients with disabilities in access to cross border healthcare is compounded to the barriers and discrimination they encounter in seeking healthcare in general. Harmonised anti-discriminatory legislation and requirement to provide reasonable accommodation are necessary to ensure cross-border healthcare.

### **About the European Disability Forum**

The European Disability Forum (EDF) is an umbrella organisation of persons with disabilities that defends the interests of over 100 million persons with disabilities in the European Union. We are a unique platform which brings together representative organisations of persons with disabilities from across Europe. We are run by persons with disabilities and their families, and as such represent a strong, united voice of persons with disabilities in Europe.

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<sup>3</sup> Such measures would constitute one of the '[a]ctions promoting access to health services and related facilities and care for people with disabilities' that the EU4Health Programme envisages with a view to 'enhancing access to quality, patient-centred, outcome-based healthcare and related care services, with the aim of achieving universal health coverage'.

<sup>4</sup> IF, Impact of cross-border healthcare on persons with disabilities and chronic conditions (<https://www.ifglobal.org/publications/if-report-impact-of-cross-border-healthcare-on-persons-with-disabilities-and-chronic-conditions/>, 2016), 3, 15.