NOTE

From: Presidency
To: Council
No. prev. doc.: 9409/18 SAN 163
Subject: Employment, Social Policy, Health and Consumer Affairs Council session on 22 June 2018
The future of health in the EU
- Policy debate

1. On 6 June 2018, the Permanent Representatives Committee was informed by the Presidency about the preparations for the policy debate on the future of health in the EU scheduled to take place at the Council (EPSCO) session on 22 June 2018¹.

2. The Permanent Representatives Committee agreed to hold the policy debate as proposed by the Presidency and that it should be public.

3. The Council is consequently invited to hold a public policy debate on the basis of the Presidency note set out in the Annex to this document.

¹ See document 9409/18.
Making the case for health:
The future of health in the EU

Europe is traditionally associated with core values such as social equality, health, education, and cultural identity: a benchmark not simply of a working economy but also of an environment supporting a healthy and well-educated population. This is the result of a long social history and evolution, prioritising people's needs and putting them first. Health policies and healthcare have a special role, keeping the population in good health and making sure that whenever there is a need to strike a balance with other interests, health considerations will prevail.

Healthcare is a sector that invests in healthy people: that investment is the best foundation for the future of a competitive and prosperous European Union.

The Bulgarian Presidency of the Council coincides with a period of intense debate on the future of the policies of the European Union. This debate is indeed taking place in the context of the negotiations on the multiannual financial framework of the EU². The purpose of the discussion on the future of health however is not to debate on funding, but to provide an opportunity for health ministers to shape the political agenda by setting a strategic vision from Member States' perspective.

To this end, the Presidency organised various preparatory debates at political and at technical level that outlined key perspectives and possible areas of cooperation on health for the future.

Two Presidency conferences took place in Sofia, Bulgaria: 'Health as the real winner: Presidency conference on options to provide better medicines for all' and the Presidency conference 'The healthy future of Europe: healthy nutrition for children'. Those events demonstrated that cooperation at Union level among experts on health is particularly useful in areas that have a cross-border dimension or facilitate national measures based on exchange of best practices. In the health domain it is often the case that a 'one-size-fits-all' solution is not feasible. The conferences demonstrated that where harmonisation cannot be the solution, cooperation can be a bottom-up way to identify best practices and make improvements, as required by the national context.

A key message from all preparatory discussions was that cooperation at Union level is needed in order to exchange, but also in order to safeguard the particular role that health has to play in establishing the balance between trade and health. In a competitive and innovative Europe the role of industries in generating growth, jobs and revenues is important. The EU does need proper incentives and support for research and scientific progress. At the same time, it is important that health supports framework conditions stimulating industries to deliver for patients, and acts as a broker, whenever public and private interests diverge. Trust in a robust regulatory framework safeguarding consumers' and patients' interests for example is of fundamental importance for Europeans. Losing that filter might be detrimental for citizens' perception of EU initiatives and solutions.

Cooperation on health at Union level has furthermore been outlined as an important **mechanism for Member States with regard to initiatives which can be considered counterproductive from a public health perspective**. One of the examples discussed was the topic of standardisation of health services⁴. Delegations exchanged their concerns related to the activities of CEN/CENELEC on standards for medical services, in the development of which industry played a leading role. The discussions, which took place together with representatives of the competent Directorates-General in the Commission⁵, as well as of CEN/CENELEC, have resulted in an improved understanding of the need for all parties to respect the division of competencies established by EU primary law. The CEN/CENELEC Focus Group on Healthcare Services has now been disbanded. This can be seen as an encouraging step; some questions about future standardisation activities however remain open.

It is important that the reluctance to shift competencies in a largely non-harmonised area⁶ is not confused with a reluctance to cooperate further on health, and *vice versa*: the desire to keep health on the EU agenda is not interpreted as a willingness to transfer responsibilities to the EU.

While confirming that there is a benefit in continued cooperation between Member States, it is important that ministers outline concrete policy areas with potential added-value for cooperation. This is particularly relevant bearing in mind that topics inherent to health such as eHealth, pharmaceuticals, medical devices, standards for medical services or even health systems, are already increasingly being dealt with at Union level by experts on digitalisation, research, trade, social or other policies. It is also timely because that debate can inspire solutions related to future developments at Union level.

**Against this background, the Council is invited to consider the following questions:**

- How can Member States shape the agenda on health and make sure that the framework remains in line with EU primary law?
- Which are the areas that provide added value, and what is the right framework and direction?

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⁴ Working Party on Public Health at Senior Level, at the meeting on 12 February 2018.
⁵ DG GROW, DG SANTE
⁶ See, in particular, Article 168(7) of the Treaty on the Functioning of the European Union.