Question for written answer E-010662/2013 to the Commission
Rule 117
Ria Oomen-Ruijten (PPE)

Subject: Amendments to the Dutch Care Insurance Act contrary to the free movement of patients

- follow-up question

In answer to Question E-004616/2013, the Commissioner stated that care insurers cannot restrict access to cross-border healthcare and reject reimbursement on the grounds that they do not have a contract with a given provider of healthcare in another EU Member State. The Netherlands Government does not consider that its proposed legislative amendment breaches European law. Before the calendar year, policy-holders choose an insurance policy for the year ahead. In so doing, they choose between a 'naturapolis' (designated care providers policy), a 'restitutiepolis' (non-contracted care policy) and a policy combining elements of both. In the case of the 'naturapolis', the insured person is in principle expected to use care providers who have a contract with the care insurer. Thanks to the selective purchase of care by the care insurer, the nominal premium for such a policy is generally lower than for a 'restitutiepolis'.

- 1. If a patient has opted for a 'naturapolis' at a lower premium, subject to the restriction that if care is received from an uncontracted care provider, the reimbursement will be smaller or zero, is it permissible for the Dutch care insurer to stipulate that the reimbursement will be smaller or zero if care is received from an uncontracted care provider in another Member State?
- 2. Can such a provision be reconciled with the free movement of patients, particularly as Dutch care insurers, for logical reasons, have less interest in concluding contracts with care providers in Member States other than Belgium and Germany, and less opportunity to do so?
- 3. Recital 4 of Directive 2011/24/EU provides that the transposition of that Directive into national legislation and its application should not result in patients being encouraged to receive treatment outside their Member State of affiliation. If a patient with a 'naturapolis' would receive a reduced or zero reimbursement for treatment by an uncontracted national care provider, while, according to the case-law of the Court of Justice (the van Braekel judgment), he would be entitled to a larger reimbursement if he made use in a planned manner of an uncontracted care provider in another Member State, does this, in the Commission's view, constitute encouragement as referred to in Recital 4 of the Directive?

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