

## Feature Stories



Interview with Tanel Ross, Director of the Estonian Health Insurance Fund



AIM will hold a Conference in Abidjan about African healthcare mutuals



AIM Conference on Sustainable Access to Medicines



European Ministers of employment and social affairs want to promote social and solidarity economy

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## What's next?

- 22 January** European Affairs working Group
- 25 January** Pharma Working Group
- 26 January** AIM Conference on Sustainable access to medicines in the EU



## Top Tweets



AIM @AIM\_Healthcare · 3 déc. 2015

AIM proudly represents the [#mutual](#) movement with [@AMICE\\_Mutuals](#) & [@mutualite\\_fr](#) at Luxembourg Conf "Boosting [#socialenterprises](#) in Europe"

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AIM @AIM\_Healthcare · 20 nov. 2015

Lisbon Declaration - AIM says: EU Member States must give refugees access to healthcare [urlz.fr/2lj8](http://urlz.fr/2lj8)

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AIM a retweeté



**Marina Schmidt** @MarinaSchmidtEU · 26 nov. 2015

Event Tip: Discuss Medicines  in the EU with Social Healthcare Insurers. [@ESIP\\_EU](#) [@AIM\\_Healthcare](#) [@IsmailErtug](#)



### Interview with Tanel Ross, Estonian Health Insurance Fund

*After organizing their study trip in the Estonian capital of Tallinn, AIM interviewed Tanel Ross, CEO of the Estonian Health Insurance Fund, on the strengths and challenges of his system and organization and on the study trip experience as a whole.*

#### Can you pick 5 words to describe Estonian healthcare system?

Universal, solidarity-based, comprehensive, effective, broadly accessible and changing to ensure sustainability and improve accessibility.

#### What do you consider are the major strengths of your system?

This will also explain my selection of words a little bit – health insurance in Estonia is compulsory and financed by 13 % earmarked social tax (social contribution) on salaries paid by employers. People entitled to social health insurance are permanent residents of Estonia, persons living in Estonia (on the basis of a temporary residence permit or right of residence for whom social tax is paid or who pay social tax on their own behalf), people considered equal to the above mentioned persons on the basis of the Health Insurance Act or a relevant contract (children, unemployed persons, pensioners etc.). Social health insurance covers 95-96% of the population. Health insurance in Estonia is based on solidarity: all insured persons get the same kind of medical care irrespective of the size of their contribution, personal health risks or age.

Estonian health insurance system is generally considered quite effective. Primary care is easily accessible – family physician must see a patient within 5 working days and in acute cases within the same day. We are also known for our e-services (digital prescriptions and patient management systems) which gives us a solid basis for analysis, planning, budgeting and contracting. Despite that we still face some challenges that are familiar to several European countries. There is a growing need for nursing care due to aging population. Since working (tax paying) population is decreasing, the sustainability of our system will be challenged in the near future and changes must be made.

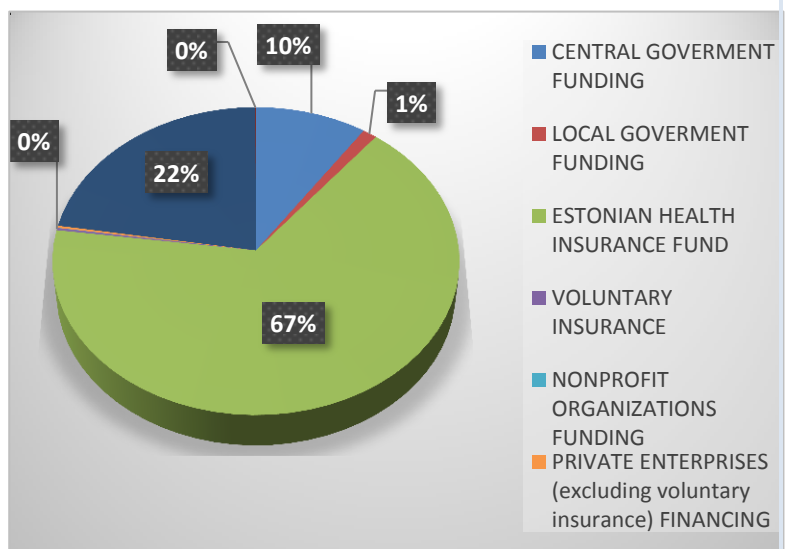
#### What is currently the role of your organization in the system, and how do you see it in the future?

The main functions and purposes of EHIF are to cover the costs of health services provided to insured persons, finance the purchase of medicinal products and medicinal technical aids, provide the benefits for temporary incapacity for work and other benefits, prevent diseases and health promotion.

EHIF has a big role in developing treatment quality and directing the way towards strategic purchasing of healthcare services. EHIF is currently the biggest buyer in Estonian market.

#### Which are the major obstacles which you will have to face and how do you plan to do so?

In 2014, a study "The State of Health Care Integration in Estonia" was carried out in Estonia as a joint research agenda between the Estonian Health Insurance Fund (the EHIF) and the World Bank Group



(WBG). The results showed that Estonian health care system is still very hospital and specialist care centred due to our Soviet history. People have the general idea that proper treatment can only be done by a specialist and have low confidence in family physicians. Also, the integration of services is low. Despite that, Estonia has managed to decrease the number of hospitals and beds significantly comparing to the period 20 years ago. This could be improved even more with strengthening primary level care. For further interest, the study is accessible on our [website](#).

*How would you briefly describe the study trip experience in Tallinn?*

The study trip was a great opportunity to the participants from EHIF to have a side look to their everyday efforts and to the whole Estonian system. It was refreshing to analyse our strengths and weaknesses in the pleasant company of international experts.

*What do you consider was the added value of getting to know other healthcare systems via AIM study Trip?*

It has a lot of value in it. Firstly, it gives a basis of knowledge to improving one's own system. Hearing the best practices and mistakes of other countries sets the mind in motion about the do's and don'ts. Secondly, you have a direct contact to so many different countries experts that you may contact in your further everyday work. AIM is a great community for exchanging practices and seeing your country as a part of Europe in general. We cannot afford to be distant from the problems that, for example, Germany may be facing since being a part of Europe, it eventually affects us all the same.

*Which healthcare system would you like to discover next?*

The German one.

**AIM President interviewed by a Portuguese TV Station**

*Mr. Christian Zahn, AIM President, was interviewed by Montepio after AIM Board of directors meeting in Lisbon on his general impressions on the meetings.*

"This event in Lisbon is very important for us because we face many problems in Europe in health care. We have the financial crisis, the economic crisis, the differences between north and south, and also uneven developments in health care.

We have millions of refugees coming to Europe. Which health care will be provided to them? What is being done by each country?

Another problem are the rocketing costs of drugs. And we cannot solve these problems on a national scale. It is necessary for countries to hold discussions with each other and also to define strategies for the future on what will be done at the level of the costs of medicines?

The population is ageing and access to health care is increasingly expensive. And societies only have a certain budget allocated to health care and no more. With that budget, we have to be efficient and we must ensure that all innovations come to the patients: rich or poor, men or women, old or young. That's the most important." Please click [here](#) to read AIM Special Briefing on the Board of Director meetings which took place in Lisbon.



## **AIM underlines the importance of adequate processing of personal data for mutuals and health insurance funds**

*9 December - AIM reacted to the latest version of the Data Protection Regulation published in December and reaffirmed its position in view of the final trialogue meetings.*

In the consolidated version of the text, some important and significant changes have been made to the document, answering both the need to strengthen data subjects' rights and protection, while at the same time considering health and social protection organisations' special needs.

While recognising the improvements in the text as a whole, AIM also has some reservations on some topics (*National Identification Number or Notion of Public interest* in the context of processing of sensitive data) which are once more worth to be underlined. AIM position is available [here](#).

## **European Institutions**

### **➤ European Commission**

#### **European Commission answers a parliamentary question on TTIP's potential impact on the price and reimbursement of medicines**

26 November – Member of European Parliament Jude Kirton-Darling (UK - S&D) pulled the Commission's attention about how US medicine pricing and reimbursement is dependent on market conditions after a US company decided to raise the price of AIDS drug from \$13.50 per pill to \$750. MEP asked the Commission whether the TTIP could result in introducing such a model in the EU and question whether there been any request from the US to introduce the principle of competitive markets in relation to medicine pricing and/or reimbursement.

Commission answered that member States will continue being fully responsible for the decisions on pricing and reimbursement of medicinal products. Although, the US has signaled interest in having provisions in TTIP on pricing and reimbursement, the Commission does not consider that this would be necessary or appropriate. In particular, the Commission will not accept a clause requiring the determination of the reimbursement amount of medicines to be based on competitive market-derived prices. Question and answered are available [here](#).

### **➤ Council of the European Union**

#### **Council conclusions on personalized medicine for patients**

7 December - EU Health Ministers adopted conclusions in the field of personalized medicine. Personalised medicine refers to a "medical model using characterisation of individuals' phenotypes and genotypes (e.g. molecular profiling, medical imaging, lifestyle data) for tailoring the right therapeutic strategy for the right person at the right time".

In the field, Ministers particularly recommend using the existing mechanisms at EU level to foster cooperation on health technology assessment and on eHealth. Work of the STAMP expert group on fast and secure access to medicines for patients should be further developed as well as the pilot project on adaptive pathways. EPSCO also recommend exploring the potential of "big data" in the context of personalized medicine. For more information, read the conclusions [here](#)

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### Conference: The Role of Employment in the Lives of People with Mental Health Problems

10 December – The conference organized by Mental Health Europe (MHE) and hosted by MEPs Liadh Ní Riada (GUE/NGL) and Marian Harkin (ALDE) focused on the topic of mental illnesses as an important driver of unemployment and inactivity.

“Mental health (MH) troubles are an epidemic and need to be tackled from a very young age”, such were the opening words of MEP Ní Riada who underlined the importance of fighting stigma, normalizing mental health problems, and focusing on action points rather than nice speeches.

Work gives people meaning and values. Evidence shows that people suffering from mental ill-health are disproportionally represented in unemployment, although most of them are in work. Employment plays a crucial role in the lives of people with MH problems as it contributes to well-being and can improve treatment outcomes.

The conference counted on the participation of representatives of the OECD, the European Commission and patients, amongst others. Some recommendations merged from discussions, such as the need to help young people through MH awareness and education policies, the necessity to develop an employment-oriented mental healthcare system, the importance of developing better workplace policies with employer support mechanisms and incentives and the need to make benefits and employment services fit for claimants with MH problems. The audience could also hear some strong testimonies from patients which showed that stigma is far from being overcome and that employment is part of the equation in fighting stereotypes. Click [here](#) to see the full programme of the conference.

### ➤ Pharmaceuticals - Medical devices



### SAVE THE DATE: Conference on Sustainable Access to Medicines

ESIP and AIM organise a Parliamentary workshop on Sustainable Access to Medicines in the EU at the European Parliament.

Prices of new medicines are attaining levels which threaten access to pharmaceuticals and the sustainability of healthcare systems. ESIP and AIM are committed to ensure an equal and universal access to healthcare for all and therefore urge European institutions and stakeholders to find solutions to maximize benefits for patients while safeguarding the universality of financially constrained European healthcare systems.

The workshop will explore ways to find the right balance between fostering innovation to provide safe, high quality and innovative medicines to those in needs, and ensuring at the same time the financial sustainability of our healthcare systems.

The workshop will take place on Tuesday, 26 January 2016 in the European Parliament at 1:30. Registrations can be made [here](#).



## ➤ Trends in health systems

### Online courses to know more about health insurance

1 December - AIM Polish member NFZ provides online courses to learn about Polish health insurance health system.

The project called *Akademia NFZ* proposes a wide range of information both for patients to find their way in the healthcare system and take care of their health: find a specialist, have a healthy lifestyle, know their rights, etc. However, the course is also intended to healthcare professionals who will get hints on how to register a patient, to give appropriate information or send claims. A module about patients' rights has recently been translated into English. Online course is available [here](#).



## ➤ International



### AIM will hold a Conference in Abidjan about the healthcare mutual movement in Africa

AIM will organise an international conference on current challenges and upcoming perspectives of the African mutual movement from 2 to 4 March 2016 in Abidjan, Ivory Coast.

This event will be organized in collaboration with the African Union of Mutuality (UAM), the PASS and the Masmut program. The conference will gather mutuals across Africa but also from Europe, national and international institutions and any other organisation active in the field of solidarity-based health insurance to discuss the prospects of mutual movement following the establishment of universal health coverage in many countries of the continent.

The participants and speakers will discuss many topics of interest for mutuals such as national structuring, management tools, communication, partnerships or development of healthcare provision. A detailed program will be sent shortly. Registrations can already be made [here](#).

### COP21: Historic International Agreement reached

12 December – the 21<sup>st</sup> International Climate Change Conference was hosted in Paris by the United Nations. Its aim: reach an agreement which would replace the Kyoto Protocol, the objective of which was to reduce CO2 emissions between 2008 and 2012.

The draft deal which was released was backed by the EU, US and over 100 developed and developing countries with no objections. The deal consisted in capping global warming well below 2 degrees Celsius. The so-called Paris Agreement had to face stark divisions between developing and developed countries. Although it was agreed, the goal seems far to reach considering the promises of emission cuts given by Member States. They will be asked to submit “Countries’ Intended Nationally Determined Contributions” (INDCs) every five years, which cannot be less ambitious than their previous climate plan. However, INDCs are estimated to cap global warming at only 2.7 degrees, far from the agreed objective. Whether this unprecedented agreement will manage to bring about the necessary changes and allow to positively impact global health remains to be seen. For more information, please read the [article](#).

## Social Economy

### European Ministers of employment and social affairs want to promote social and solidarity economy

7 December - Employment, Social Policy, Health and Consumer Council of the EU (EPSCO) adopted conclusions on “[The promotion of the social economy as key driver of economic and social development in Europe](#)”.

The Council Conclusions refer to traditional social economy players - cooperatives, mutuals, associations, foundation - as well as new forms of social enterprises based on the primacy of people over capital and on solidarity principles.

With such conclusions, the EU recognises the contribution of social economy players to several EU objectives like a smart, sustainable and inclusive growth, high quality employment, social cohesion, local and regional development and environmental protection.

The Council invites the European Commission and the different Member States to promote the development of social economy with key initiatives such as:

- the development and implementation by Eurostat and national statistical authorities of satellite accounts
- development of legal frameworks to unlock the potential of the social economy in terms of growth and employment
- the deployment of structural funds and better regulation policy initiatives
- the active use of EU financial instruments to improve the access to finance of social economy enterprises

AIM as well as Social Economy Europe (SEE) has actively contributed and supported the adoption of the Council Conclusions. You can find the Conclusions [here](#).

### Luxembourg Presidency Conference: Boosting social enterprises in Europe

3-4 December – Luxembourg closed its EU Presidency with a big conference about social Economy in which AIM, together with AMICE and Mutualité Française, had a stand to showcase activities of mutuals.

The Conference was divided into two sections, social innovation as a key driver for economic sustainable



development and the financing of social economy enterprises.

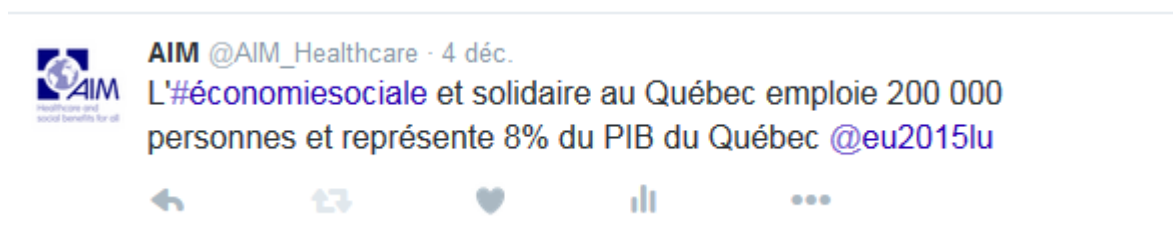
The Conference has been opened by Luxembourgish Employment and Social Economy Minister Nicolas Schmit who reminded of the importance of social economy enterprises for European economic growth and social inclusion.

Jens NILSSON, Member of the European Parliament and Georges DASSIS, President of the European Economic and Social Committee, both emphasized the role of social economy players at local, national and European level.



During the afternoon, panellists presented different socially innovative initiatives such as a hotel in Vienna which employs migrants and refugees. Another panellist described social innovation as an answer to unmet or inadequately met or new needs and identified the main barriers for social innovation such as financing opportunities or collaboration possibilities.

On the second day, participants could enjoy an overview of the state of play of social economy enterprises in Quebec and more specifically about the financing opportunities.



Several experts were also invited to talk about *Individual Savings into Social Economy Enterprises*. They discussed the possible and needed policies to foster the financing of social economy by the population. AIM's partner AMICE underlined the difficulties faced by mutuals to invest in real economy because of the solvency rules and the lack of legal recognition at EU level.

Member of EESC, Ariane Rodert, presented the EESC [opinion](#) on the financial ecosystem for social economy enterprises which considers that an ideal financial ecosystem for social economy should include features such as a multi-stakeholder approach, hybrid and patient capital solutions with guarantee schemes.

At the end of the conference, Minister Schmit presented the Luxembourg declaration "[A roadmap towards a more comprehensive ecosystem for social economy enterprises](#)", signed by 6 EU Member States (France, Italy, Luxembourg, Slovakia, Slovenia and Spain).

The declaration states the importance of developing a common understanding of the social economy, and calls on the European Commission to include and recognise social economy enterprises and organisations in its Internal Market Strategy. The declaration aims to create an informal group of Member States for which social economy promotion at EU level is a political priority.



## Social Economy Europe has a new President

*Social Economy Europe (SEE) held its General Assembly beginning of December during which Mr Juan Antonio Pedreño (CEPES) was elected as new president. Alain Coheur (AIM), Luigi Martignetti (REVES) and Emmanuel Verny (Chambre française de l'ESS) were elected Vice-presidents.*

AIM warmly thanks Alain Coheur for his excellent work and important commitment to uphold the principles of mutuals towards the EU. AIM welcomes Mr Juan Antonio Pedreño and anticipates a long and successful cooperation between AIM and SEE.



AIM @AIM\_Healthcare · 3 déc.

AIM thanks A. Coheur for his work as President of @SocialEcoEU & looks forward to working with Mr Pedreño for @CEPES2

Social Economy EU



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## Events

### ➤ Forthcoming Events

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|-------------------|--|
| <b>11 January</b> | The European Chemicals Agency (ECHA) organises a two-day <a href="#">expert workshop</a> on “Valuing the health impacts of chemicals”, to be held in Helsinki, Finland.  |
| <b>11 January</b> | The Foundation for European Progressive Studies (FEPS) organises a two-day <a href="#">seminar</a> on “The Peoples’ Business: How cooperatives and mutuals can contribute to the policy agenda of European progressives”, Sofia, Bulgaria. |
| <b>12 January</b> | The European Parliament’s Social Economy Intergroup organises a <a href="#">public hearing</a> on “The social economy: creating good quality jobs in Europe”.  |
| <b>15 January</b> | The Centre on Global Health Security organises a <a href="#">roundtable discussion</a> on “Extractive Industries and Public Health: Reducing the Risk of Health Emergencies”, to be held in London, United Kingdom.                        |
| <b>19 January</b> | The European Health Telematics Association (EHTel) organises the <a href="#">Joint Digital Healthcare Symposium "Our Digital Health ... is everyone ready?"</a> during two days in Brussels.   |
| <b>21 January</b> | The European Commission's Scientific Panel for Health (SPH) organises a <a href="#">public conference</a> on Better research for better health, a holistic approach to challenges and opportunities.                                       |
| <b>21 January</b> | The European Commission (DG EMPL) organise a <a href="#">conference</a> entitled “A review of employment and social developments in Europe in 2015”.   |
| <b>26 January</b> | The <a href="#">TACD Multi-stakeholder Forum</a> on “The precautionary principle in TTIP: trade barrier or essential for consumer protection?” takes place.  |
| <b>27 January</b> | The European Generic and Biosimilar Medicines Association (EGA) organises the <a href="#">9<sup>th</sup> Pharmacovigilance Conference</a> in London.   |

- 27 January** Bruegel organises an [event](#) on Improving healthcare systems in Europe.
- 28 January** Conférence-débat de la [Pilule d'Or Prescrire 2016](#) : AMM "fractionnées" : les projets imprudents de l'Agence européenne du médicament – Paris
- 28 January** European Social Observatory : [Health systems and EU law and policy](#) - The state of the art and direction of travel, Brussels

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*The monthly AIM Flash is compiled by Romain Chave and Jessica Carreño Louro.*

*Layout: Romain Chave and Jessica Carreño Louro*

*For more information on one of the topics mentioned above, please contact the AIM Secretariat.*

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