

# **ERDF support for health infrastructure**

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#### Why invest in health?

#### Public health rationale

- Health inequalities remain large in Europe
- (Cross-border) public health risks

#### Economic and social rationale

- Health impacts on labour productivity and growth
- Health is one of most innovative and productive sectors

#### Territorial rationale

- Territorial cohesion agenda: importance of health in regional and local development
- Ensuring equal access to quality health services

#### Structural challenges

- Pressures on health care systems (e.g. chronic diseases)
- Ageing society
- Sustainability of public finances
- → Need for restructuring and modernization of health sector





## **Health and EU Cohesion Policy**

#### **Challenges of health investments**

- Demographic change
- Technology developments (diagnostics, treatments, pharmaceuticals)
- Inequalities
- Costs
- National policy vs EU added value through cohesion policy

#### Structural/strategic objectives

- Programme objectives (strategic) vs short term solutions
- Coordinated use of ERDF / ESF





## **Health and EU Cohesion Policy**

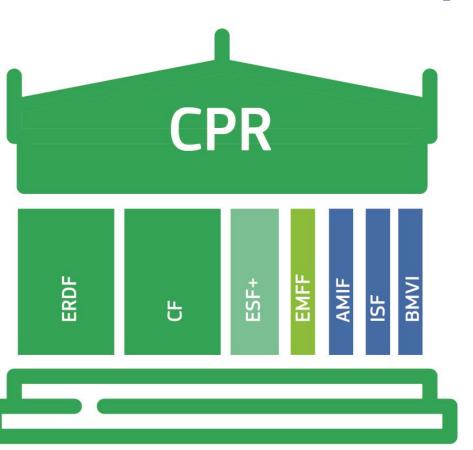
Health increasingly recognised as important asset for regional development and competitiveness and is eligible for cohesion policy funding:

- ERDF in 2014-2020:
- > €4,3 bn for health infrastructure investment and
- ➤ €1 bn for healthy active ageing and e-Health services and applications
- ESF activities linked to ageing, health promotion, training of healthcare providers, etc.





#### **EU Cohesion Policy in 2021-2027**



#### **Common Provisions Regulation:**

- more coherent
- simpler to learn
- simpler to combine



## **Policy objectives**

11 objectives are simplified and consolidated to 5:



- 1. A smarter Europe (innovative & smart economic transformation)
- 2. A greener, low-carbon Europe (including energy transition, the circular economy, climate adaptation and risk management)
- 3. A more connected Europe (mobility and ICT connectivity)
- 4. A more social Europe (the European Pillar of Social Rights)
- 5. A Europe closer to citizens (sustainable development of urban, rural and coastal areas and local initiatives)

Horizontal issues: administrative capacity building, cooperation outside the programme area







## Creating the conditions for success

## **Enabling conditions** (used to be "ex ante")

- Fewer, clearer, tighter link to policy
- Followed up, not just set at the beginning

#### **EU Governance**

- European Semester
- Macroeconomic conditionality
- Reform Support Instrument
- Rule of law







#### **Enabling condition on health**

- in the Common Provisions Regulation

National and/or regional strategic policy framework for health including:

- Mapping of health and long-term care needs, including in terms of medical staff
- Measures for efficiency, sustainability, accessibility and affordability to health and long-term care services
- Measures to promote community based services, including prevention and primary care, home care







#### ERDF 2021-2027 investments in health

- Health infrastructure investments, moving away from a hospitalcentred model to more person-centred approaches, including home care and community-based services, and health promotion and disease prevention facilities and equipment;
- Primary healthcare (e.g. facilities for general practitioners, nurses), secondary healthcare (e.g. facilities for specialists, outpatient clinic), tertiary healthcare (e.g. acute and long-term care hospitals, emergencies services);
- Integration of care between the above three and between health care, social care and long term care, including through integrated IT systems;
- In the scope of **digitalisation of health services**: e-health m-health, telehealth, public information systems and telemedicine.





### **Country example – Hungary**

- Fragmentation of certain sectors (e.g. healthcare)
- Strict eligibility rules, no room for complex programs
- Limited administrative & management capacities of beneficiaries
- Allocation of support did not respond to the needs of most deprived micro-regions
- Initiative to focus on regions most in demand:
  - integrating education, healthcare, social services, employment and public transport
  - 33 most disadvantaged micro-regions (10% of population)
- Experience from implementation
  - Sufficient time to be provided for elaboration of programmes
  - Need for facilitation of consultations among players
  - Admin restrictions of institutional system is a great barrier





## Thank you!