

# Achieving universal health coverage

## What is the topic about?

Universal Health Coverage (UHC) is a paramount concern for policy-makers across the European Union (EU). UHC encompasses three dimensions: population coverage, service coverage and cost coverage. It aims to ensure that everyone has access to quality health care without facing financial hardship. However, a formal entitlement to coverage does not always guarantee real access to health care services for all population groups, as services may not be available due to a variety of reasons such as waiting times, long distance or care denial. Although European countries have made progress toward achieving UHC, there is still a need to better understand and address the existing gaps in coverage and access.

## Why is it important to EU Member States?

UHC holds immense significance for EU Member States due to its potential to enhance the health and well-being of their populations while also promoting social and economic stability and equity. Moreover, UHC contributes to health system resilience and performance by addressing key objectives such as health improvement, people-centeredness, financial protection, effectiveness, safety, user experience and access to health care services. The relevance of UHC became even more apparent in the context of the COVID-19 pandemic, where access to health care services could make a life-saving difference. The pandemic has had a significant impact on other sectors of the health care system, such as cancer care, and has affected vulnerable population groups disproportionately. By achieving UHC and improving health care access, Member States can enhance their preparedness to respond to public health emergencies and promote equitable health outcomes for all.

Member States who achieve UHC can also ensure financial risk protection, reducing the burden of health care costs on individuals and families. It is crucial for Member States to pursue UHC because disparities in coverage and access persist and are widening within the EU. Some countries still have significant portions of their populations without statutory health coverage, and certain vulnerable groups, such as irregular migrants and citizens who are subject to financial hardship, face barriers to accessing health care.

### What has the EU done on this topic to date?

While UHC is primarily a responsibility of individual Member States, as defined in the Treaties, the EU has supported initiatives and policies that contribute to its realisation. The EU's European Pillar of Social Rights emphasises the right to timely access to affordable, preventive, and curative health care of good quality.

The EU has been involved in collecting data and indicators related to UHC and access to health care services, such as the European Union Statistics on Income and Living Conditions Survey (EU-SILC) and the European Health Interview Survey (EHIS). These data sources help monitor access to health care and unmet medical needs across EU countries. In addition, the European Observatory on Health Systems and Policies and the OECD, in cooperation with the European Commission, publish Country Health Profiles every two years. Moving forward, these resources can be further improved, making them even more effective in exposing gaps and opportunities to advance UHC.

Furthermore, the EU provides funding for health care research and infrastructure projects, and sets broad health and safety standards and facilitates cross-border health care services through the Regulation (883/2004) on the coordination of social security systems and the Patients' Rights Directive (2011/24/EU). These in turn may have implications for achieving UHC nationally as well. Lastly, during the COVID-19 pandemic, the EU, through its Civil Protection Mechanism played a significant role in realising access by facilitating the temporary deployment of health care professionals to areas with high infection rates.

Europe's Beating Cancer Plan is one of the initiatives that has been developed to build a strong and resilient European Health Union and is putting emphasis on ensuring access to cancer prevention, screening, treatment and care. Another focus is on equality, for example through the European Inequalities Registry, which allows inequalities in access to be monitored across and within countries.

In view of the challenges, further progress could be made by strengthening the European Pillar of Social Rights, by promoting an EU-wide common health benefits basket, by investing in the development and enhancement of UHC indicators, by building on the experiences of the European Reference Networks (ERNs) in providing support for the diagnosis and treatment of rare diseases, and by addressing geographical, social, educational, economic, disease-related, and vulnerable population inequities through shared dedicated funding.

These actions would require cooperation and consensus among EU Member States, as well as careful consideration of legal, financial and practical implications. Additionally, the EU would need to balance its role with the responsibilities and autonomy of individual Member States in health care provision.

### Key takeaways

- Achieving UHC is essential for EU Member States because it can improve population health, reduce the financial burden placed on individuals, enhance health system resilience, and promote equitable health care access. This is particularly relevant in the context of public health emergencies like the COVID-19 pandemic.
- While health care is primarily the responsibility of individual Member States, the EU could support UHC efforts through various actions, investing in UHC indicators, creating a shared fund for resource-poor areas and expanding the mandate of European Reference Networks (ERNs) to ensure access for patients from small and less affluent Member States.
- The EU has been involved in collecting data and indicators related to UHC and access to health care services, which helps monitor health care access across EU countries, but these can be improved further to have more impact on policy. Additionally, the EU can set health and safety standards, facilitate cross-border health care services, provide funding for health care research and infrastructure, and support health care access during crises like the COVID-19 pandemic.

---

### Further reading

Expert Group on Health System Performance Assessment (2021). Improving access to healthcare through more powerful measurement tools. An overview of current approaches and opportunities for improvement (2021). Available at: [https://health.ec.europa.eu/publications/improving-access-healthcare-through-more-powerful-measurement-tools\\_en](https://health.ec.europa.eu/publications/improving-access-healthcare-through-more-powerful-measurement-tools_en)

Palm W, Webb E, Hernández-Quevedo C, Scarpetti G, Lessof S, Siciliani L, van Ginneken E. Gaps in coverage and access in the European Union. Health Policy. 2021 Mar;125(3):341-350. doi: 10.1016/j.healthpol.2020.12.011. Epub 2020 Dec 25. Available at: <https://www.sciencedirect.com/science/article/pii/S0168851020303225?via%3Dihub>

Webb E, Offe J, van Ginneken E. Universal Health Coverage in the EU: what do we know (and not know) about gaps in access? Eurohealth, 28 (3), 13–17. Available at: <https://apps.who.int/iris/bitstream/handle/10665/362197/Eurohealth-28-3-13-17-eng.pdf?sequence=1&isAllowed=y>

### Author

**Ewout van Ginneken**, European Observatory on Health Systems and Policies

---