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On 9 April 2015, the CPME Executive Committee adopted the 'CPME response to public consultation of Expert Panel on Effective Ways of Investing in Health on Competition among Healthcare Providers in the European Union – Investigating Policy Options' (CPME 2015/035 FINAL)

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**CPME response to public consultation of Expert Panel on Effective Ways of Investing in Health on Competition among Healthcare Providers in the European Union – Investigating Policy Options**

*The Standing Committee of European Doctors (CPME)<sup>1</sup> represents national medical associations across Europe. We are committed to contributing the medical profession's point of view to EU and European policy-making through pro-active cooperation on a wide range of health and healthcare related issues.*

CPME welcomes the opportunity to provide comments on the consultation on the Preliminary Opinion on Competition among Healthcare Providers in the European Union – Investigating Policy Options.

CPME would like to underline that healthcare services cannot be equated to services which are purely commercial in nature. Nor is the demand and supply of healthcare services subject to conventional market forces. The potential of competition as a policy tool is therefore limited.

CPME reiterates that policy decisions must serve the objective of attaining the best possible quality of care for every patient. Under no circumstances may high quality care and patient safety be put at risk by policy decisions, in particular they must always take precedence over economic concerns<sup>2</sup>. Please find in the following some examples of sub-sectors in which these objectives must be safeguarded:

- As regards competition in the pharmaceutical market, the availability of generics can improve access to healthcare for patients and contribute to reducing expenditure at patient and system-level. In all cases the safety of the pharmaceutical must be the priority concern for market authorisation, while doctors should not be restricted in their clinical independence as regards prescriptions<sup>3</sup>.
- One example of areas in which there is a recognised need to adopt rules modulating competition to the sector's specificities is the restrictions on advertising by doctors and other healthcare professionals through professional rules. CPME supports the continuation of such rules.

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<sup>1</sup> CPME is registered in the Transparency Register with the ID number 9276943405-41.

<sup>2</sup> Please find a similar argumentation in [the CPME Statement on Health Technology Assessment in Relation to Cross-Border Healthcare](#).

<sup>3</sup> For further details, please consult [the CPME Position Paper on Generics, Right of Substitution and Generic Delivery](#).



- The preliminary opinion also makes reference to the standardisation of products, including healthcare services, describing it as a tool for facilitating the comparability of services and hence patient choice. CPME would like to underline that technical standardisation is not suitable for healthcare services. To ensure high quality care and patient safety, guidelines for medical practice must uphold professional autonomy and professional responsibility, as well as include scientific knowledge and technical skills, national and professional-level (self-regulatory) regulation, and ethics<sup>4</sup>.

In conclusion, policy decisions must safeguard equitable access to high quality patient care and ensure patient safety. Using competition among healthcare providers as a policy tool must not undermine these objectives. CPME therefore supports a cautious approach to considering the introduction of elements of increased competition in healthcare services.

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<sup>4</sup> For further details, please consult the [CPME Position paper on the standardisation of healthcare services](#).