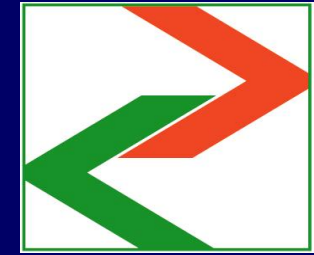


Arbeitsgemeinschaft Europäischer Grenzregionen (AGEG)
Asociación de Regiones Fronterizas Europeas (ARFE)
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Comunità di lavoro delle regioni europee di confine (AGEG)
Europæiske grænseregioners Arbejdsfællesskap (AGEG)
Werkgemeinschaft van Europese grensgebieden (WVEG)
Associação das Regiões Fronteiriças Europeias (ARFE)
Σύνδεσμος Ευρωπαϊκών Συνοριακών Περιφερειών (ΣΕΣΠ)
Stowarzyszenie Europejskich Regionów Granicznych (SERG)

EUREGIO II 3rd Partners' Meeting
DIMDI, Köln
19-20 May 2010

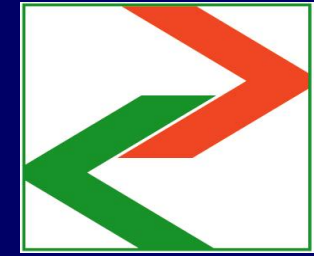


The Association of European Border Regions (AEBR)

1. Priorities and activities related to health care in border regions
2. Work Package # 2



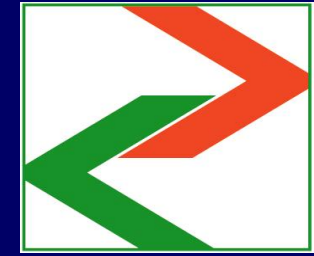
AEBR Interest in EUREGIO II



- n The AEBR was asked by some border areas to deal strongly with cross-border health
- n Practically every border region deals with in one or another way: 400 specific projects? (EUREGIO I detected 328 project bodies)
- n Strong potential: many networks have been created at different levels, but few support from national authorities



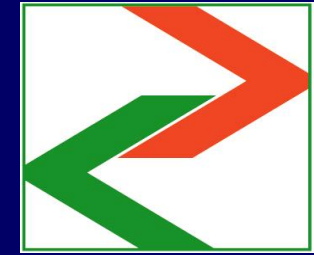
AEBR Interest in EUREGIO II Reasons



- Process of EU Integration
- Internationalisation: patients' mobility, European insurance cards, provision of services to liberalize market
- Greater border permeability: better profit of resources
- Better division of labour
- Cost-savings and long-term better supply in an environment of increasing costs (and crises)

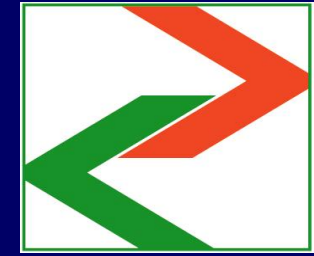


Success examples



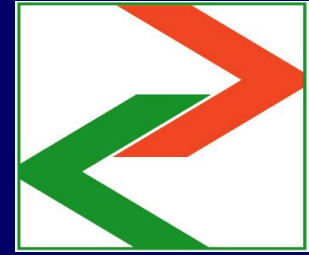
- euregio maas-rhein: common Insurance Card, Euroregional Center for Top Medicine (Aachen-Maastricht-Liège)
- Cerdanya hospital (EGTC)
- The Irish Case
- Extremadura (E) and Alentejo (P)
- Øresund (DK – SE)

Spectrum of CBC Health Issues



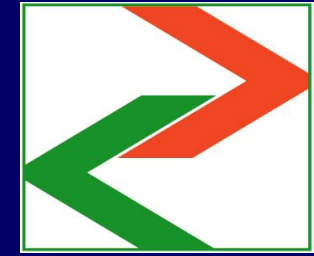
- Management of illnesses and prevention
- Active cooperation in disasters protection and emergency services
- Telemedicine
- Research
- Training
- ...

CB Health Provision



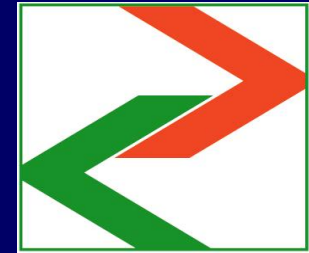
- Optimization of the quality of medicine and life
- Creation of provision networks

Reasons for long-lasting cooperation



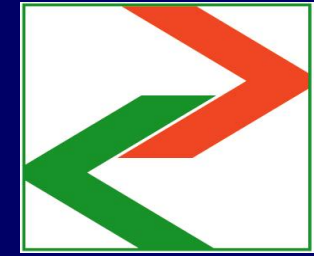
- Urgencies
- Waiting-lists
- CB use of free experts
- CB use of specialized medical services
- Economical factors
- CB use of medical facilities and equipments
- CB use of high-qualified staff
- Experience and information exchange
- CB data (CB health reports)
- Strengthen self-help

Health Provision



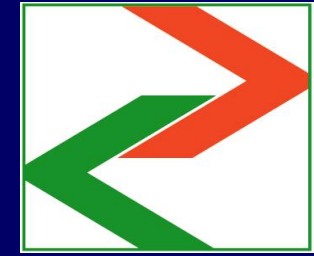
- Common logistics
- Hospital management
- Laboratories
- Blood banks
- Radiology devices
- Pharmacy systems
- Caterings
- Electronic tools
- Data use and management
- High-qualified staff training
- Pathology
- Facilities for aged-people and rehabilitation
- Telemedicine
- Electronic patient data
- Excellence centres
- Int'l health card

Health Prevention



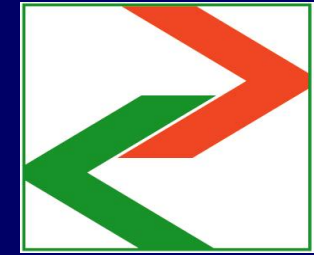
- Methods and prevention programmes
- Training for multipliers
- Networking
- Information materials
- Prevention campaigning
- Discriminated children and youngsters

Problems and external factors



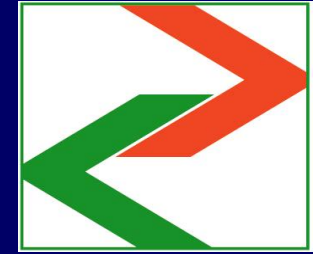
- Quality standards
- Continuity of treatments and assistance
- Different price structures
- Language difficulties
- Absence of cross-border chip-cards
- Different social systems
- Different operational plans, standards, radio frequencies, etc. (disasters and emergencies)

Counter-factors



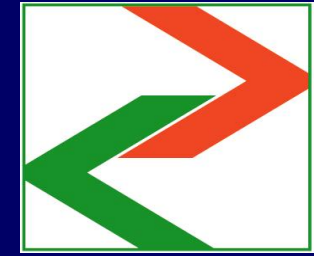
- Financial problems
- Administrative efforts/costs and bureaucratic procedures
- Interest conflicts and legal problems
- Different structures, competencies and subsidy programmes
- Data protection problems
- Difficulties to find partners, cooperation agreements, etc.
- Lack of cooperation agreements, etc.
- Dependency from personal engagement

Approaches and favouring factors



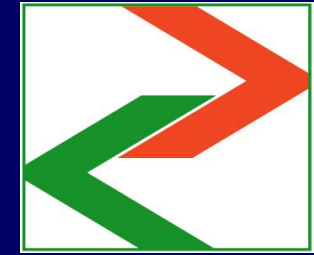
- Interchangeable social security
- CB medical insurance
- Bilateral agreements
- Specific agreements between health facilities and projects' holders
- Private-public partnership
- Non-profit-oriented-cooperation
- Common investments and health facilities
- CB model-projects
- CB medical competence centres
- CB diagnosis and therapy centres
- Information for patients and provision tenders
- Experience and information exchange
- CB operational planning and exercise (disasters and emergencies)
- CB needs analyses and programmes through

VERY HELPFUL FACTORS



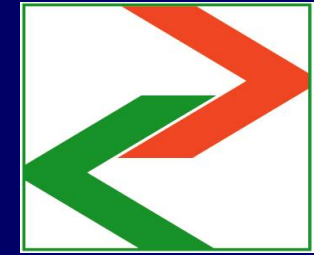
- Personal implication of actors
- Political support (national, regional, and local)
- Partners' experiences
- Acknowledged usefulness of the activities
- Partners' border proximity, etc.

Main Euroregions' work



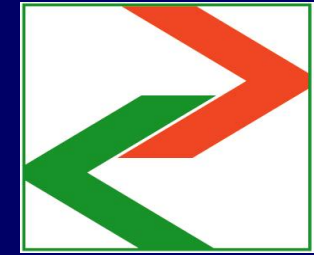
- Medium-term programmes that cover many sectors
- Getting financial resources
- Smooth the path for political lobbies
- Supporting specific CB health initiatives and projects
- Developing CB health programmes through CB committees or working groups
- Health networks

Future tasks



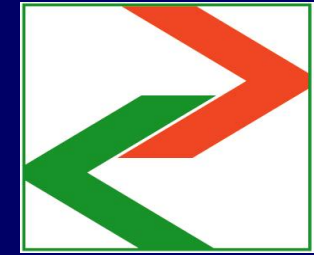
- Common investments in hospitals, specialized departments, elderly projects, rehabilitation centres, etc.
- Health facilities in spatial structured border areas
- Clarify the planning and financial requirements, searching for partners, etc.
- Need of a critical mass to attract partners from the other side of the border
- Creation of CB influence areas

Summary: the role of CB structures



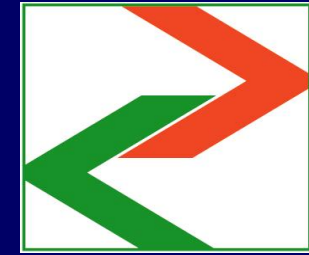
- Euroregions are service providers, partners and engines for cross-border health
- Take care of CB planning and programming, financing, common partners and good common health projects
- Protect CB health cooperation
- Solve problems encountered by different actors

Current AEBR Activities



- n Task Force on Cross-Border Health: animation of the AEBR Network
- n Newsflash
- n AEBR Fora: The Basel Forum on CB Health: 2005, 2008 and 2009 (Lörrach)
- n Follow-up of the Directive
- n Contacts with the European Commission, the European Parliament and the Committee of the Regions
- n Contacts with other Associations: AER, CPMR, CEMR, MOT

Future EU Cohesion and Structural Policies



Cooperation
Objective

CB eligible
regions 2007-
2013

Crossborder Cooperation Areas 2007
Régions de coopération transfrontalière 2007
Regionen grenzübergreifender Zusammenarbeit 2007

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Enschoder Straße 362, D-48509 Gronau
 info@aebr.eu, www.aebr.eu
 Editing: J. Gabbe, M. Guilermo, V.v.Malchus,
 C.Panday, M.-L. Percu, A. Winkler



Leibniz Institute for Regional Geography, Leipzig
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 R.Richter
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Orange line: AEBR Member/Membre de l'ARFE/Mitglied AGEG

Yellow line: Non-member of AEBR/Non-membre de l'ARFE/
 Nichtmitglied AGEG

1: Number of the large-scale crossborder cooperation/
 Número de la cooperación transfrontalière vaste/
 Nummer der großräumigen grenzübergreifenden
 Zusammenarbeit

Red line: AEBR Member/Membre de l'ARFE/Mitglied AGEG

Green line: Partial AEBR Member/Membre partiel de l'ARFE/
 Teilmitglied AGEG

Dotted line: In the planning stage/prévu/in Planung

Blue line: Non-member of AEBR/Non-membre de l'ARFE/Nichtmitglied AGEG

Red dashed line: Crossborder region in the planning stage/
 Région transfrontalière prévue/
 Grenzübergreifende Region in Planung

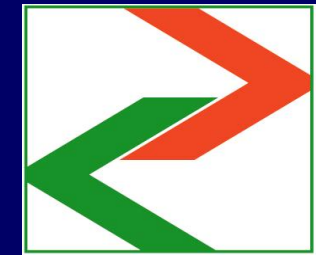
1: Number of the border and crossborder Region/
 Número de la región fronteriza o transfrontalière/
 Nummer der Grenz- und grenzübergreifenden Region

Black dashed line: National border/Fronteriza nacional/Staatsgrenze

- A. ANDORRA
- LI. LIECHTENSTEIN
- L. LUXEMBOURG
- P.J.I.R.M. PORANEŠNA JUGOSLOVENSKA
 REPUBLIKA MAKEDONIJA
- R.F. ROSSIJSKAJA FEDERACIJA
- SI.O.V. SLOVENIJA
- S.M. SAN MARINO
- V. CIITTÀ DEL VATICANO

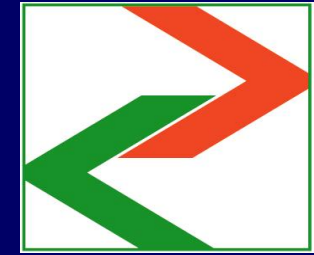
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**AEBR
 Map**

**CBC
 areas in
 2007**

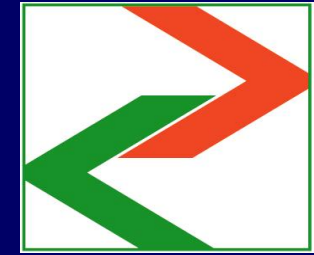


THANK YOU VERY MUCH!

HAVE A SAFE TRIP BACK HOME!

info@aebr.eu

www.aebr.eu



Thank you very much for your attention!



Martín Guillermo Ramírez, AEBR
m.guillermo@aebr.eu