



European Civil Service **FEDERATION** de la Fonction Publique Européenne



It is high time to reform the JSIS, our health care reimbursement scheme !!!!

It has been more than 14 years since the reimbursement ceilings were revised.

The corresponding Commission decision on the JSIS dates from 2007 !!

Since then, medical costs have increased significantly; new pharmaceutical treatments are available... And nothing is changing...

The JSIS, our primary system of medical coverage which was once a high quality reference is now lagging behind ... it no longer even meets the objectives set by the Staff Regulations in article 72 which provides for coverage rates of 80 and 85%...

Many colleagues share their grievances with us.

The Covid crisis has affected us all and some colleagues have higher medical expenses, especially with psychologists. However, the reimbursement of a limited number of visits to a psychologist is subject to the prescription of a general practitioner.

These colleagues wonder why the JSIS does not align with the Belgian system where visits to a psychologist are allowed without a prescription. And also for children!

Others do not understand why PMO does not reimburse homeopathic medicines like Belgium does when the medicine is marked with an asterisk * on the prescription.

More generally, certain drugs are absent from the JSIS list and are therefore not reimbursed while Belgian medical insurance reimburses them.

Some medical specialists also charge double the amount for their services as soon as they know you are working for the EU!

Contract agents or ASTs and AST / SCs with modest salaries sometimes have high medical costs and have difficulty advancing these costs and have to wait for reimbursement, without even mentioning the problem of the costs of emergency medical treatment.

So why do we have to advance all the medical costs and then receive a partial refund weeks later when it should be possible to issue a JSIS medical card recognised throughout the EU and avoid such cash advances as is the practice in Belgium?

It is therefore high time to bring our healthcare reimbursement system up to date!!!

The Federation proposes the following avenues to improve and thoroughly modernise our JSIS, Joint Sickness Insurance Scheme:

- Extended coverage with improved and updated reimbursements taking into account the real costs of the services;
- JSIS has a reserve fund of over € 300 million; this excessive reserve, which grows year after year, remains unused;
- At least a third of this sum should be used to extend and increase levels of reimbursements and also to ensure quality care for dependence;
- It is not the mission of the JSIS to make a reserve fund grow indefinitely; this largely unused financial reserve can ultimately only stimulate the appetite of Member States, and may well encourage them to grab it, even though a large chunk of that money comes directly from our salaries;
- A reinforcement of the budget for the social policy of the Commission, to support colleagues with disabilities (personal or family) and who do not have access to a number of national aids;
- The introduction of a health insurance card proving our primary coverage with the JSIS which would be recognised in all Member States, thus facilitating coverage and avoiding the unjustified overbilling which is currently observed. Some limited progress has been timidly achieved with the Netherlands: further negotiation are still needed to reach a satisfactory arrangement there ... and from that experience, the system should be generalised EU-wide!
- Better support for expenses incurred outside the EU (UK, US, CH, etc...).

- A clarification of the coverage of care and hospitalizations linked to Covid and potential aftermath.

As of next week, the Federation will invite you to complete a survey in order to collect your opinions and expectations and thus be able to propose the best improvements for the management of our health insurance scheme during current and future negotiations.