Open Access

Epidemiology & Public Health

Article Type: Short Commentary

Volume 4 Issue 2 - 2026

European healthcare disparities

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Abstract

This document, authored by individuals with extensive international expertise, underscores that, despite a shared set of principles, European healthcare systems exhibit considerable diversity and face numerous complex legal, organisational, and economic challenges. The European Union Directive on cross-border healthcare has played a pivotal role in driving essential reforms; however, achieving effective implementation and comprehensive harmonisation requires sustained, coordinated efforts over the long term.

An important observation is that Europe does not lack regulatory frameworks; rather, it is hindered by a deficiency in coordination among its various systems. Moving forward, the emphasis should ideally shift from merely expanding patient mobility rights to cultivating the conditions that facilitate such movement. This includes advancing interoperable digital systems, establishing clearer liability frameworks, and aligning reimbursement pathways across nations.

Telemedicine has the potential to transform healthcare access and delivery, but this opportunity can only be fully realised if the current regulatory fragmentation is comprehensively addressed. If not properly managed, telemedicine may replicate existing cross-border barriers, albeit in a digital format. Ultimately, progress in this domain may arise less from top-down harmonization efforts and more from the creation of scalable regional collaborations that could serve as exemplars for broader adoption throughout Europe.

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Received: Jun 02, 2026

Accepted: Jul 22, 2026

Published: Jul 29, 2026

Epidemiology & Public Health - www.jpublichealth.org

Citation: Holzheimer RG, Hakim N. European healthcare disparities. Epidemiol Public Health. 2026; 4(2): 1101.

Keywords: European healthcare systems; Patient mobility; Cross-border healthcare; Medical liability; Liability insurance; Cross-border cooperation; Resource pooling; Telemedicine; Quality assurance; Harmonization; Reform.

Introduction

European health systems are based on social solidarity and universal coverage, although there are significant variations in their designs, including differences between tax-financed and social insurance systems [1,2]. Although healthcare is mainly regulated at the national level, EU law is increasingly influencing healthcare organisations and financing, particularly in areas such as patient mobility and cross-border healthcare [3].

Patient mobility and cross-border healthcare

The EU has strengthened patient rights for cross-border healthcare through Directive 2011/24/EU. Although few patients seek treatment abroad, the legal and organisational challenges associated with it remain significant [4,5]. Key considerations involve reimbursement for treatment expenses, quality assurance protocols, continuity of care, and acknowledgement of prescriptions and professional qualifications [6,7]. There are exceptions to the EU Cross-border Healthcare Directive 2011/24/EU: organ transplantation surgery is not included and requires specific authorisation. The quality and safety standards for transplantation are outlined in Directive 2010/53/EU and Directive 2012/25/EU. The 2011 directive emphasises patients' freedom of choice in healthcare and supports the establishment of European Reference Networks (ERNs), but it does not directly facilitate the movement of healthcare professionals.

The transfer of healthcare workers is primarily regulated by Directive 2005/36/EC, which is affected by various legal and administrative barriers. While destination countries benefit from filling workforce gaps and improving resource allocation, source countries may face challenges, including brain drain and workforce imbalances. Overall, while mobility enhances the healthcare landscape in the EU, it requires careful management to ensure that both source and destination countries receive balanced benefits [8-11]. The success of the endeavour may be affected by the existing legal framework.

Legal framework and influence of EU law

Key rulings by the European Court of Justice (ECJ) have promoted the mobility of patients and healthcare services, but they have also created areas of uncertainty [3,12]. National healthcare systems must apply objective, non-discriminatory criteria for the authorisation and reimbursement of cross-border health services [12]. Despite efforts towards standardization, significant discrepancies in liability and insurance regulations continue to exist across nations. This patchwork of laws not only complicates compliance but also highlights the ongoing challenge of achieving true harmonization in this critical area [13].

Medical liability and insurance

There is a notable disparity in medical liability systems and professional liability insurance throughout Europe. Countries like Germany and the UK implement effective mediation and structured compensation frameworks, while France adopts a no-fault system. Furthermore, the choice between claims-made and occurrence-based insurance presents substantial economic and legal consequences for healthcare providers that cannot be overlooked [14]. To achieve meaningful progress, we must embrace additional reforms.

Challenges and need for reform

The rising number of liability cases and the expanding definition of liability are contributing to increased insurance premiums and promoting defensive medical practices among healthcare providers. Additionally, the introduction of the EU directive has been a significant driver of reform across various jurisdictions, particularly in areas related to liability insurance and patient rights [15].

To achieve better coordination and harmonisation, we must continue to advance our efforts, especially in liability management and quality assurance. Together, we can enhance our practices and ensure a more effective and efficient system! [13].

Cross-border cooperation and resource pooling

Collaborative initiatives, such as joint procurement of health technologies and collective mobilisation of skilled professionals, are increasingly seen as promising solutions to enhance healthcare delivery. However, these efforts are often hindered by a range of challenges, including administrative hurdles, complex regulatory frameworks, and linguistic barriers that can complicate communication and coordination among stakeholders [16,17]. To make cross-border initiatives truly successful, it is essential to secure strong political support, build trustworthy relationships, establish transparent processes, and clearly define everyone's roles and responsibilities. These elements together create a powerful foundation for collaboration and mutual success [18].

Technological innovation and telemedicine

Telemedicine and digital health services offer promising avenues to improve access to healthcare across borders, enabling patients to receive care regardless of geographic boundaries. However, these innovative solutions face significant challenges due to the lack of standardised legal frameworks and ongoing concerns about liability. The absence of uniform regulations can lead to confusion and uncertainty for both healthcare providers and patients, potentially hindering the full realisation of telehealth's benefits [18,19]. Telemedicine presents intricate legal challenges as the healthcare sector undergoes a digital transformation, particularly concerning cross-border services. The European Union has been actively working to harmonise civil liability laws across its Member States; however, this endeavour remains incomplete, leading to inconsistencies across legal systems. The adaptability of EU private international law in addressing diverse legal frameworks has been evident, yet the complexities associated with medical liability introduce uncertainty for both healthcare providers and patients. The swift advancement of artificial intelligence technologies further complicates regulatory decisions. Although the EU has made significant progress towards harmonising liability regulations, achieving complete standardisation appears unlikely due to the structural limitations inherent in the EU legal system. It is imperative to establish effective guidance on the application of EU private international law to cross-border eHealth services to ensure interoperability and benefit both EU citizens and the healthcare sector [20].

Discussion

European healthcare systems face a complex challenge: they must balance the pursuit of social goals, such as ensuring equitable access to medical services for all citizens, with the need to comply with internal market regulations that foster competition and efficiency. Additionally, these systems must uphold the principle of freedom of movement, which allows individuals to seek healthcare across borders within the European Union. This intricate interplay requires careful navigation to maintain high-quality care while promoting both individual rights and systemic viability [1,2]. There exists no universal solution applicable to all circumstances; each system possesses unique advantages and limitations. It is advisable to exchange best practices and gradually align with foundational principles to facilitate progress [14]. The immediate risks and challenges faced by German surgeons engaging in cross-border healthcare within neighboring European countries can be categorized into organizational stressors and considerable legal uncertainties [21,22].

Surgeons working in border regions are facing significant challenges due to a combination of staff shortages, overwhelming workloads, and increasing administrative responsibilities [23].

Despite the EU Directive on Patients' Rights in Cross-Border Healthcare (2011/24/EU), significant ambiguities persist regarding liability and data protection. There is a notable absence of clear EU-level regulations regarding the allocation of responsibility for clinical errors that occur in another member state [22]. The complexity of professional liability insurance necessitates that surgeons verify the extent of their coverage, particularly concerning procedures conducted internationally. The variance in insurance systems across countries significantly

increases the risk of inadequate coverage [24]. In border regions, language barriers, along with differences in workplace culture and administrative procedures, present significant challenges to daily clinical practice. In the Euregio Meuse-Rhine region, which encompasses Germany, Belgium, and the Netherlands, specific deficiencies in situational awareness and innovative capacity have been identified within German healthcare institutions. These deficiencies increase vulnerability to crises in a cross-border context. The findings underscore the need for healthcare institutions not only to enhance the resilience of individual employees, particularly in border regions, but also to improve their preparedness for potential threats and crises. This preparedness must take into account the distinct needs of each country involved [24].

Germany has generally complied with the requirements set forth by the European Union directive with minimal modifications. The country had previously established crucial components, including central contact points and transparency initiatives, in accordance with these guidelines [5]. In Italy, the elevated incidence of liability cases has prompted deliberations on potential reforms, alongside an increasing propensity toward defensive medicine practices [15]. Cross-border initiatives illustrate that localised and regional collaboration often produces more advantageous outcomes than approaches driven solely by market forces [18]. Administrative challenges, regulatory complexities, and inconsistencies in national funding present substantial obstacles to effective healthcare collaboration. Nevertheless, the existing literature identifies potential pathways for improvement. It is essential to streamline administrative processes and promote regulatory harmonisation to harness the benefits of cross-border healthcare cooperation fully. Achieving this objective requires coordinated efforts at both national and supranational levels, along with a thorough examination of individual factors, including language proficiency. By integrating insights from various disciplines, this review emphasizes the importance of a comprehensive understanding of cross-border human resource pooling in healthcare and highlights the need for interdisciplinary and multilevel research in this domain [19].

Summary and conclusion

This document underscores that, despite shared foundational principles, European healthcare systems exhibit significant diversity and face intricate legal, organisational, and economic challenges. The EU Directive on cross-border healthcare has generated significant momentum; however, effective implementation and comprehensive harmonisation of these frameworks will require sustained, long-term efforts. It is evident that Europe does not lack regulatory measures; rather, it suffers from a deficiency in coordination. The forthcoming phase should prioritize not merely the expansion of patient mobility rights but also the establishment of enabling conditions, such as interoperable digital systems, clearer liability frameworks, and aligned reimbursement pathways. Telemedicine has the potential to be a pivotal advancement in this context, provided the issue of regulatory fragmentation is addressed. Otherwise, there exists a risk of replicating existing cross-border barriers within a digital framework. Ultimately, the path to progress may lie less in top-down harmonisation and more in scalable regional collaborations that could serve as exemplary models for wider adoption.

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