Biannual briefing on European priorities related to health care

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Every six months, this series of briefings provides a summary of the priorities on the European Union agenda that are likely to have an impact on Member States' health care and health insurance systems. While the organisation, financing and delivery of health care fall within the competence of the Member States, the European Union can guide and support strategies in this area, not only through its health policy per se, but also through social and employment policies, economic, research and innovation policies, internal market regulation policies, not to mention its financing instruments. For this reason, the note presents the main priorities set in European health policy and, where appropriate, in other areas. Emphasis is placed on the position of the Member States at European level – by monitoring the work of the rotating Presidency of the Council of the European Union – and on the new strategies proposed by the European Commission.

This briefing focuses on the second half of 2024, first analysing the work of the Hungarian Presidency of the Council of the European Union, and then considering the priorities set by the European Commission. It concludes with a presentation of the programme planned for the first half of 2025 by the Polish Presidency of the Council.

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RESULTS OF THE HUNGARIAN PRESIDENCY OF THE COUNCIL

Hungary took on the Presidency of the Council of the European Union (EU) from 1 July to 31 December 2024, following on from Belgium and thus completing the programme[1] defined by the trio of Member States holding the Presidency since July 2023, which also includes Spain. As a reminder, this programme highlighted the trio's desire to contribute, in the area of health, to strengthening the European Health Union and the resilience of health systems, preparing Member States for future health emergencies, and promoting health and healthy lifestyles. The following areas were particularly targeted: antimicrobial resistance, access to critical medicines, prevention of health risks through the 'One Health' approach, as well as mental health, cardiovascular diseases and rare diseases.

The priorities put forward by the Hungarian Presidency did not specifically include the health sector. Instead, the seven priorities set out in its programme[2] were geared to the following general objectives: strengthening European economic competitiveness; strengthening defence policy; supporting the EU enlargement process; limiting illegal immigration; contributing to the definition of the future cohesion policy, in order to reduce regional disparities and ensure economic, social and territorial cohesion within the EU; guiding the future agricultural policy in favour of European farmers; and finally, addressing the demographic challenges posed by the ageing of the European population with regard to the sustainability of the welfare state and labour shortages. Despite this general approach, the Hungarian Presidency nevertheless addressed a number of issues relating to health and, more specifically, health care, particularly in the Council's Employment, Social Policy, Health and Consumer Affairs (EPSCO) configuration.

We present below three aspects of the Hungarian Presidency's work: 1) the Presidency's work to continue ongoing legislative files; 2) the specific topics it raised with a view to defining a common position of the Member States; 3) other themes that the Presidency placed on the agenda to stimulate debate, but drawing on the work and events of other partners. We shall see that the emphasis was placed on issues linked to strengthening health care systems in their day-to-day operation, particularly the prevention and management of non-communicable diseases. As indicated in its programme, the Hungarian Presidency wanted to prioritise areas of health policy that had been neglected in the wake of the Covid-19 pandemic, or where there had been delays in implementing reforms

Ongoing legislative files

Under the Hungarian Presidency, a number of compromise texts were discussed on the revision of European pharmaceutical legislation, without however a common position being reached on the matter. As a reminder, the package presented by the European Commission in April 2023 includes two reforms: a regulation[3] laying down procedures for the authorisation and supervision of medicinal products for human use and establishing rules governing the European Medicines Agency; and a

1. Council of the EU (2023) Taking forward the strategic agenda: 18-month programme of the Council (1 July 2023 - 31 December 2024), 10597/23, 20.06.2023 (document available in the following languages: EN, FR, NL).
2. HU24EU (2024) Programme of the Hungarian Presidency of the Council of the European Union in the second half of 2024 (EN).
3. European Commission (2023) Proposal for a Regulation of the European Parliament and of the Council laying down Union procedures for the authorisation and supervision of medicinal products for human use and establishing rules governing the European Medicines Agency, amending Regulation (EC) No 1394/2007 and Regulation (EU) No 536/2014 and repealing Regulation (EC) No 726/2004, Regulation (EC) No 141/2000 and Regulation (EC) No 1901/2006, COM(2023) 193 final, 26.04.2023 (EN/FR/NL).

directive [4] establishing a Union code relating to medicinal products for human use. The stated aim of this revision is to adapt and simplify current legislation, while ensuring the quality, safety and efficacy of medicines for patients, and harmonising the internal market. Under the Hungarian Presidency, discussions focused in particular on the following aspects: 1) *incentives* to support innovation while reducing the complexity of the procedures and guaranteeing the availability of medicinal products on the market; 2) national and centralised *marketing* , as well as the governance of the European Medicines Agency; and 3) the management of *shortages* and security of supply of medicinal products, as well as provisions relating to orphan medicinal products and medicinal products for paediatric use. As indicated in the progress report [5] presented to the health ministers at the EPSCO Council on 3 December 2024, the revised texts presented by the Hungarian Presidency cover around two-thirds of the articles in the pharmaceutical package and will serve as a basis for further discussions. The main issues still to be resolved concern the balance to be struck between, on the one hand, the incentives granted to the pharmaceutical industry for the production and supply of medicinal products and, on the other, the need to guarantee all Member States equal access to the market and a continuous supply of innovative medicinal products, as well as the sustainability of the costs generated for health care systems. A balance also needs to be struck between the new provisions regulating the marketing of medicinal products, and the need not to restrict freedom of enterprise or the availability of medicinal products whose use is already well established within the EU. Other issues require further legal examination, for example the powers conferred on the European Commission to deal with shortages and secure the reliable supply of critical medicines.

The Hungarian Presidency also encouraged discussions on the implementation of the regulation establishing a European Health Data Space (EHDS). [6] This data space is intended to improve accessibility to health data for both patients and health care professionals, and should support research, innovation and the development of health care policies. A working lunch was organised on this subject in conjunction with the informal meeting[7] of health ministers in July 2024. The participants stressed the need for a gradual implementation of the new regulation, adapted to the different levels of progress in the Member States, and for joint action in this area to improve the quality and performance of health care at EU level.

Topics prioritised in view of a common Council position

Within the 'health' strand of the EPSCO Council, the Hungarian Presidency's work focused firstly on cardiovascular health. In this area, the health ministers adopted conclusions [8] at their formal meeting on 3 December 2024. The content of the conclusions was informed by the debates between experts and political decision-makers that took place during the high-level conference on cardiovascular health[9] organised in Budapest on 3 and 4 July, as well as by the informal meeting[10] of

4 . European Commission (2023) Proposal for a Directive of the European Parliament and of the Council on the Union code relating to medicinal products for human use, and repealing Directive 2001/83/EC and Directive 2009/35/EC, COM(2023) 192 final, 26.04.2023 (EN/FR/NL).

5. Council of the EU (2024) Pharmaceutical package: Progress report, 2023/0132(COD); 2023/0131(COD) (EN, FR, NL)

6. A provisional agreement on this regulation was reached with the European Parliament in March 2024, under the Belgian Presidency of the Council; it was formally adopted by the Council on 21 January 2025.

7. HU4EU (2024) Health ministers meet in Budapest to discuss the issues that may define the European Union's health policy in the coming years, Press release, 25.07.2024 (EN).

8 As a reminder, the conclusions are adopted by consensus between all the Member States following a debate at a Council meeting. This type of document is not foreseen in the Treaties and has no legal effect, but it aims to define commitments or a political position on a subject.

9. HU4EU (2024) High-Level Conference on Cardiovascular Health, Press release, 03.07.2024 (EN).

10. See footnote 7.

health ministers on 25 July. The conclusions [11] adopted support the improvement of cardiovascular health by focusing on prevention, early detection, treatment and rehabilitation. In particular, the European Commission is invited to adopt preventive measures to reduce the main modifiable risk factors, building on Europe's Beating Cancer Plan, and to pursue its implementation through the adoption of legislative and non-legislative proposals addressing health determinants, including socio-economic and commercial determinants. Member States are also asked to develop or, where appropriate, update strategic measures, as part of either a standalone plan or a broader strategic agenda on non-communicable diseases, aimed at promoting primary and secondary prevention, guaranteeing equal access to cardiovascular health care, and strengthening the training of health care professionals in this area.

The second area targeted by the Hungarian Presidency within the 'health' strand of the EPSCO Council concerns organ donation and transplantation. Following the adoption in June 2024, under the Belgian Presidency, of the Regulation [12] on standards of quality and safety of substances of human origin intended for human application, the Hungarian Presidency wished to discuss the operational arrangements relating to organ donation and transplantation, in order to improve practices at national level and strengthen cross-border collaboration within the EU. These aspects were discussed at the high-level ministerial conference [13] organised on 10 and 11 July in Budapest, as well as at the informal meeting[9] of health ministers on 25 July. Following these exchanges, the health ministers adopted conclusions [14] on organ donation and transplantation at their formal meeting on 3 December. In these conclusions, the European Commission is notably invited to update the action plan in force for the period 2009-2015 in order to strengthen cooperation between Member States in this area. For their part, the Member States are invited to develop and consolidate institutional, legal and ethical frameworks that facilitate organ donation and transplantation; to facilitate and encourage public education and the training of health professionals; and to support research in this area.

Within the 'Employment and Social Policy' strand of the EPSCO Council, the Hungarian Presidency addressed the issue of women's mental health. Conclusions[15] were adopted on this subject at the formal Council meeting on 2 December 2024, with the aim of improving the mental health of this target group by promoting gender equality. They follow on from the conclusions[16] on mental health adopted in November 2023 under the Spanish Presidency of the Council, the communication [17] published by the European Commission on a global approach to mental health, and the European Commission's strategy [18] for equality between men and women 2020-2025. In its conclusions, the Council invited the Member States to integrate a gender perspective

11. Council of the EU (2024) Conclusions on the improvement of cardiovascular health in the European Union - Approval, 15315/24, 14.11.2024. (EN, FR, NL).
12. European Parliament and Council of the EU (2024) Regulation (EU) 2024/1938 of the European Parliament and of the Council of 13 June 2024 on standards of quality and safety for substances of human origin intended for human application and repealing Directives 2002/98/EC and 2004/23/EC, Official Journal of the European Union, 17.07.2024 (EN/FR/NL).
13. HU4EU (2024) High-Level Ministerial Conference on Organ Donation and Transplantation, Press release, 10.07.2024 (EN).
14. Council of the EU (2024) Draft Council conclusions on enhancing organ donation and transplantation - Approval, 14697/24, 14.11.2024 (EN, FR, NL).
15. Council of the EU (2024) Conclusions on strengthening women's and girls' mental health by promoting gender equality, 16366/24, 03.12.2024 (EN, FR, NL)
16. Council of the EU (2023) Conclusions on mental health, 15971/23, 30.11.2023 (EN, FR, NL).
17. European Commission (2023) Communication from the Commission on a comprehensive approach to mental health, COM(2023) 298 final, 07.06.2023 (EN/FR/NL)
18. European Commission (2020) Communication from the Commission. A Union of equality: gender equality strategy 2020-2025, COM(2020) 152 final, 05.03.2020 (EN/FR/NL)

into the development of measures to promote and support the mental health of women and girls, and to promote access to health, social and psychological support services for parents and vulnerable groups.

The topic of promoting social inclusion by reducing territorial inequalities was also targeted by the Hungarian Presidency. Conclusions [19] on this topic were adopted at the formal Council meeting on 2 December 2024. They focus in particular on improving access to support services (including health care) and employment services for people at risk of poverty or social exclusion, including the Roma population. The Member States were asked to reduce territorial inequalities, for example by better identifying and mapping disadvantaged areas, including health indicators, and by developing integrated measures combining several areas, including health care.

Another issue targeted by the Hungarian Presidency was labour and skills shortages within the EU. The issue is particularly important for the health care sector, which is seriously affected by these shortages. While the Belgian Presidency addressed this topic by focusing more directly on the specificities of the health care professions, the Hungarian Presidency considered how to promote access to employment for under-represented groups in areas where shortages are identified. These groups include, for example, women, low-skilled and older workers, people from ethnic minorities and people with disabilities. Conclusions[20] on this topic were adopted by the employment and social affairs ministers at the formal Council meeting on 2 December 2024. These propose a series of measures to encourage training and education, promote the attractiveness of sectors in short supply and reduce individual and structural barriers to participation in the labour market. These measures include health promotion and investment in health care, with a particular focus on the elderly.

Other topics on the agenda

The Hungarian Presidency stimulated debate on the European Health Union in the light of the report on the future of European competitiveness published by Mario Draghi[21] in September 2024. This reflected the Presidency's desire to discuss the issue of economic competitiveness across all sectors; it also related to the conclusions [22] adopted in June 2024 under the Belgian Presidency concerning the future of the European Health Union. At the formal Council meeting on 3 December, the ministers examined the points of convergence and divergence between the conclusions and recommendations put forward by Mario Draghi and those set out by the Council to strengthen the European Health Union. The preparatory note [23] drafted by the Hungarian Presidency and sent to all ministers highlights the fact that the recommendations of the Draghi report focus on the pharmaceutical sector – improving innovation and securing the supply chain and strategic autonomy of medicines. While these measures are considered as important, the note nevertheless points out that patient access to health care and the sustainability of health care systems are just as essential. On the basis of the Council conclusions adopted in June, the note thus reiterates the Member States' call for joint action at EU level on prevention and health promotion, the fight against antimicrobial resistance, the health

19. Council of the EU (2024) Draft Council Conclusions on improving access to enabling services and employment services in order to promote the social inclusion of people at risk of poverty or social exclusion, including Roma, by reducing territorial inequalities - Approval, 15610/24, 26.11.2024 (EN, FR, NL)
20. Council of the EU (2024) Conclusions on labour and skills shortages in the EU: Mobilising untapped labour potential in the European Union, 16556/24, 04.12.2024 (EN, FR, NL)
21. Draghi M. (2024) The future of European competitiveness. Part A | A competitiveness strategy for Europe, Brussels, European Commission
22. Council of the EU (2024) Draft Council conclusions on the future of the European Health Union: a Europe that cares, prepares and protects, 9900/24, 29.05.2024 (EN, FR)
23. Council of the EU (2024) The European Health Union in light of the report on 'The future of European Competitiveness' - Exchange of views, 15278/24, 15.11.2024. (EN, FR, NL).

workforce, climate change, crisis preparedness and the fight against communicable diseases

The issue of people's mental health was also discussed in the context of the triple global crisis we are facing today, which combines climate change, loss of biodiversity and pollution**.** In collaboration with the World Health Organisation, a high-level dialogue [24] was held in Brussels on 7 October to discuss the negative impact of this triple crisis on people's mental health and well-being. The participants examined how to develop multi-sectoral actions and offer support to the population not only in the event of emergencies, but also in relation to the multiple and growing vulnerabilities engendered more slowly and progressively by climate change.

Exchanges have also been promoted in the field of rare diseases, this time in collaboration with the European Economic and Social Committee (EESC). In particular, the Hungarian Presidency asked the EESC to draw up an exploratory opinion on how the EU can get involved in the fight against rare diseases so that no one is left behind. This opinion [25] was adopted by the EESC at its plenary session on 23 October 2024 and was presented at a high-level conference [26] organised in Budapest on 29 November 2024. The European Commission is invited to propose a comprehensive European Action Plan on Rare Diseases, setting common, measurable and achievable targets by 2030. The main conclusions of the discussions held on this opinion were presented to the health ministers at their formal meeting on 3 December.

PRIORITIES SET BY THE EUROPEAN COMMISSION

Following the European elections in June 2024, the second half of the year was marked by the election of the new European Union executive for the period 2024-2029. Ursula von der Leyen was (re)elected President of the European Commission in July and will hold this office for a second term. The Commissioners she nominated in September were confirmed by the European Parliament following a series of hearings in early November. Below, we present an overview of the main political guidelines relating to health care that have been announced for the new legislature, and which are reflected in the missions assigned to the new Commissioners.

Overall, the health care initiatives announced in the political guidelines[27] presented by Ursula von der Leyen are mostly closely linked to economic and security objectives. The majority of these actions have been included in a new plan to ensure Europe's prosperity and competitiveness; the aim for the health care sector and the pharmaceutical industry is here to ensure their resilience and reduce dependence on outside countries (for example in medicines supply). Actions aimed more specifically at strengthening preparedness and response capabilities for health crises are in line with the objective of reinforcing European defence and security. Finally, the only actions presented in relation to the objective of supporting the population and strengthening the European social model concern the strengthening of the European Child Guarantee, which promotes the social inclusion of children through better access to education, health and social services, and the protection of young people's mental health.

24. WHO (2024) High-level policy dialogue: Mental health and the triple planetary crisis: a call for action, Press release, 07.10.2024 (EN)
25. EESC (2024) Leaving No One Behind: European Commitment to Tackling Rare Diseases, SOC/806-EESC-2024 (EN/FR).
26. EESC (2024) The EU needs a European Action Plan on #RareDiseases, Press release, 29.11.2024 (EN/FR)
27. von der Leyen U. (2024) Europe's choice. Political guidelines for the next European Commission 2024-2029, Brussels (EN, FR, NL).

Most actions relating to health care have been entrusted to the new Commissioner for Health and Animal Welfare, Olivér Várhelyi.[28] He works under the direction of the Executive Vice-President for a Clean, Just and Competitive Transition, Teresa Ribera, and will be supported in his duties by the Directorate-General for Health and Food Safety. His mission is to complete the European Health Union and continue to build on the 'One Health' approach. In the area of medical products, Várhelyi has been tasked with presenting a Critical Medicines Act. This legislative measure was requested by Belgium and several other Member States in May 2023, and is in line with the measures initiated by the European Commission to address shortages of medicines, including the Critical Medicines Alliance [29], which officially began its work under the Belgian Presidency of the Council of the EU. Várhelyi will also support the conclusion of the negotiations related to the revision of the European pharmaceutical legislation, and will promote the implementation and evaluation of the current legislative framework for medical devices. He will also continue the work initiated by the European Commission in the fight against antimicrobial resistance and in the prevention of non-communicable diseases**.** In the latter area, Várhelyi intends not only to ensure the implementation of Europe's Beating Cancer Plan, but, as well, to prepare a European plan for cardiovascular health, also covering diabetes and obesity, as he announced at his hearing[30] before the European Parliament. As far as the mental health of young people is concerned, Várhelyi's task is to direct an EU-wide survey to examine the impact of social media and excessive screen time on young people's well-being. Digitalisation and innovation have also been given top priority. In addition to supporting the implementation of the European Health Data Space, Várhelyi has been mandated to propose two new measures in the first 100 days of the new cycle: a European plan for the cybersecurity of hospitals and health care providers [31] and a legislative act on biotechnologies aimed at modernising the way sectors such as health care work.

Issues relating to health crises and sexual and reproductive health have been entrusted to the new Commissioner for Equality, Preparedness and Crisis Management, Hadja Lahbib.[32] Members of the European Parliament expressed their dissatisfaction with Várhelyi's responses on sexual and reproductive rights and vaccination, and explicitly asked for his mandate to be limited[33] if he were to be confirmed as Commissioner. Lahbib alone will now work on these issues under the direction of Vice-President Roxana Mînzatu (*see below)*, and she will be supported in her duties by the European Commission's Health Emergency Response and Preparedness Authority (HERA). This does, however, raise questions about the health Commissioner's actual capacity to address medicines shortages, an area in which HERA also has a role, and to develop the European Health Union in a coherent way. In terms of crisis preparedness, Lahbib is tasked with developing a new strategy to support medical countermeasures against threats to public health, such as those associated with chemical, biological, radiological and nuclear security. This strategy will include new measures for joint procurement and stockpiling. It will also be concerned with the monitoring of implementation of the EU health crisis and

28. European Commission (2024) Mission letter. Olivér Várhelyi. Commissioner for Health and Animal Welfare, 01.12.2024 (EN).
29 European Commission (2024) Commission launches the Critical Medicines Alliance to help prevent and address shortages of critical medicines, Press release, 24.04.2024 (EN/FR/NL).
30 .European Parliament (2024) Hearing of Commissioner-designate Olivér Várhelyi. Press release. 06.11.2024 (EN/FR).
31. This plan was presented on 15 January 2025 (EN/FR/NL).
32 European Commission (2024) Mission letter. Hadja Lahbib. Commissioner for Equality, Preparedness and Crisis Management, 01.12.2024 (EN, FR, NL).
33. European Parliament (2024) Evaluation Letter. Mr Olivér Várhelyi, Commissioner-designate for Health and Animal Welfare, D (2024) 33814, 21.11.2024 (EN, FR); Fortuna, G. (2024) MEPs strip Hungarian Commissioner of key health competencies, Euronews [Online] (EN).

pandemic plan, which is due to be adopted in 2025 and which aims to support joint action by the Member States against cross-border health threats.

Employment policy will be primarily in the hands of the Executive Vice-President responsible for Social Rights and Skills, Quality Jobs and Preparedness, Roxana Mînzatu. [34] This policy also has an impact on health care by tackling labour and skills shortages. Ursula von der Leyen is particularly committed to addressing these shortages and has asked Roxana Mînzatu to prepare a roadmap for quality jobs, as well as an initiative on the portability of skills. This initiative should take up and deepen the work begun on the recognition of professional skills and qualifications at EU level. Neither the policy guidelines presented by von der Leyen nor Mînzatu's mission letter specifically target health care workers, unlike long-term care workers, for whom Mînzatu will have to develop a coherent framework to meet the challenges they face. It remains to be seen to what extent the specific characteristics of the health care sector in general will be taken into account and addressed in the initiatives planned by the Executive Vice-President. It should be noted that, at her hearing [35], Mînzatu expressed her desire to tackle the 'brain drain' of health care workers in Europe by investing more and more effectively in training, and by encouraging European university alliances enabling future health care professionals to study in the best universities while continuing to work in their own countries. These issues of mobility and qualifications are partly linked to the existing legislative frameworks regulating the mobility of people, goods and services within the internal market. In his hearing[36] before the European Parliament, **the Executive Vice-President for Prosperity and Industrial Strategy, Stéphane Séjourné**, pledged to accelerate and simplify the cross-border recognition of professional qualifications in the next Single Market Strategy scheduled for June 2025. However, no mention was made of how the specificities of the health care professions could be taken into account, as requested in the Conclusions on the future of the European Health Union[37] adopted under the Belgian Presidency of the Council of the EU.

Social policy will also be guided by executive vice-president Roxana Mînzatu; including the issue of accessibility of health care**.** Mînzatu has been mandated to draw up a new action plan for the implementation of the European Pillar of Social Rights, principle 16 of which concerns access for all to high-quality, affordable, preventive and curative health care. She will also be responsible for strengthening the European Child Guarantee, which requires Member States to guarantee children's access to a range of services, including health care. Mînzatu has also been tasked with drawing up the first European strategy to combat poverty. In her written answer [38] to the European Parliament, she stated that she wanted to adopt a comprehensive approach to poverty, going beyond employment and social policies to include areas such as education, health care and housing. She also confirmed her desire to integrate the social convergence framework more fully into the European Semester. This framework aims to take greater account of social spending, including public spending on health, in the EU's economic and social coordination.

We conclude this summary of the political guidelines of the new European Commission by addressing research and innovation policies, as these also influence the way in which research and

34. European Commission (2024) Mission letter. Roxana Mînzatu. Executive Vice-President for Social Rights and Skills, Quality Jobs and Preparedness, 01.12.2024 (EN).
35. European Parliament (2024) Hearing of Vice-President-designate Roxana Mînzatu. Press release. 12.11.2024 (EN/FR)
36. European Parliament (2024) Hearing of Executive Vice-President-designate Stéphane Séjourné. Press release. 12.11.2024 (EN/FR).
37. See footnote 22.
38. European Parliament (2024) Questionnaire to the Commissioner-designate Roxana Mînzatu. Executive Vice-President for People, Skills and Preparedness, 22.10.2024 (EN, FR, NL)

innovation in the health sector will be prioritised and financed. These policies will be divided between at least three Commissioners. The first is **the Executive Vice-President for Tech Sovereignty, Security and Democracy, Henna Virkkunen.** [39] She has been tasked with stimulating innovation in the field of artificial intelligence (AI) and will have to develop a strategy for the application of AI to improve the delivery of public services, including in the health care sector. Virkkunen will also support Commissioner Várhelyi in the area of cybersecurity for health care infrastructure. Secondly**, the Commissioner for Start-ups, Research and Innovation, Ekaterina Zaharieva**, [40] has been mandated to propose a new European Research Area with the aim of guaranteeing a 'fifth freedom' within the European single market, namely the freedom of movement of researchers. As well as developing a long-term strategy to boost European research infrastructure in general, its mandate includes, more specifically, the definition of a multidisciplinary strategy for life sciences in Europe, aimed at promoting life sciences and biotechnologies by 2040, with potential repercussions for health care. Finally, to ensure investment in strategic research and technology, **the Executive Vice-President for Prosperity and Industrial Strategy, Stéphane Séjourné**, will be responsible for developing a European Competitiveness Fund. This fund could merge a dozen existing research and innovation programmes, including the EU4health programme, which is currently one of Europe's main sources of funding for health projects. This potential merger has raised concerns about the ability to govern such a fund and the possible imbalances between different sectoral priorities. [41] Given the cuts already made to the budget of the EU4health programme[42] in the 2021-2027 multiannual financial framework, we will have to remain vigilant concerning the decisions taken at this level in the post-2027 period.

PROGRAMME PLANNED BY THE POLISH PRESIDENCY OF THE COUNCIL

Poland will take on the Presidency of the Council of the EU for the first half of 2025, thus launching the work programme of the new trio of Member States holding the Presidency of the Council for the next eighteen months, which also includes Denmark (June-December 2025) and Cyprus (January-June 2026). This programme[43] is aligned with the strategic priorities set by the European Council for the period 2024-2029 and is structured around three main priorities: 1) a strong global role and security for Europe; 2) European prosperity and competitiveness; and 3) European values of freedom and democracy. Commitments specific to the area of health are included in the second priority. In this area, the trio undertakes to pursue cooperation through the European Health Union, to support the resilience and cybersecurity of health care systems, and to improve the accessibility of medicines and medical devices while guaranteeing the competitiveness of the EU pharmaceutical sector. The trio's programme links these commitments to the goal of 'moving forward together' and leaving no one behind (p.8), and describes them as ways to help 'build a thriving longevity society, preserve the sustainability of our social protection systems and our economy, and improve the quality of life' of European citizens (p.9).

39. European Commission (2024) Mission Letter. Henna Virkkunen. Executive Vice-President for Tech Sovereignty, Security and Democracy, 01.12.2024 (EN)
40. European Commission (2024) Mission letter. Ekaterina Zaharieva. Commissioner for Startups, Research and Innovation, 01.12.2024 (EN)
41 Wulff Wold J. (2024) One Competitiveness Fund to rule them all - the Commission's considered R&I overhaul, Euractiv [Online] (EN); Zubașcu F. (2024) Commission prepares to bundle all research and innovation money into competitiveness fund, Sciences | Business [Online] (EN).
42. Council of the EU (2024) EU long-term budget for 2021-2027: Council concludes the mid-term revision, Press release, 28.02.2024 (EN/FR/NL).
43. Council of the EU (2024) Taking forward the strategic agenda 18-month programme of the Council (1 January 2025 - 30 June 2026), Council of the European Union (EN, FR, NL).

The programme set out by the Polish Presidency is underpinned by the slogan 'Security, Europe'.[44] In the current context of crises, uncertainties and transitions, the Presidency has decided to target actions that can contribute to strengthening European security in all its dimensions, including health. Initiatives linked to the health sector are therefore associated with the objective of ensuring health security, which is one of the seven areas[45] explicitly highlighted by the Polish Presidency. The priority given to health security is justified by the need to strengthen Europe's resilience against the negative impacts potentially associated with pandemics, extreme weather events and natural disasters, hybrid and cyber security threats.

More specifically, the issue of health security will be addressed in three major areas: the digitalisation of health care; the mental health of children and young people; and health promotion and prevention. Regarding digitalisation, the Presidency wishes to support the development of cross-border telemedicine services, also taking into account the implementation of the future European Health Data Space. It also intends to promote reflection on the need for a more restrictive regulatory framework at European level to ensure the cybersecurity of medical devices, and is willing to examine measures proposed by the European Commission as part of the new plan for the cybersecurity of hospitals and health care providers (see section 2). With regard to the mental health of children and young people, the Presidency wishes to promote debate on the impact of digitalisation on the well-being of children and young people. This area is included in the political guidelines of the new European Commission, and the Polish Presidency plans to adopt Council conclusions on this issue. Finally, with regard to prevention and health promotion, the Presidency's objective is to discuss the effectiveness of prophylactic measures implemented by Member States, in order to identify good practices and propose actions to be implemented at national and EU level

In terms of ongoing legislative files directly linked to health care, the Polish Presidency will focus in particular on the issue of medicinal products. It will continue discussions on the revision of European pharmaceutical legislation. In its programme, the Polish Presidency stresses the need to take account of the patient's perspective and to promote both the diversification of supply chains and production in the EU. Discussions are also planned on the specific issue of critical medicines

We conclude the presentation of the programme of the Polish Presidency of the Council by highlighting two initiatives announced in connection with other policy areas, but which are also likely to influence health care systems and health insurance. In terms of economic policies, the Polish Presidency wishes to monitor the implementation of the new economic governance framework and plans to prepare Council recommendations [46] establishing net expenditure trajectories and identifying the reforms and investments needed to extend these trajectories from four to seven years. This spending, reform and investment work will also include the health sector, according to the guidelines established by the Member States. With regard to social and employment policy, the Polish Presidency plans to present Council conclusions on the implementation of the Beijing Platform for Action, adopted in 1995 to advance women's rights and setting out measures to be taken in twelve areas, including health.

44. Polish Presidency (2024) Programme of the Polish Presidency of the Council of the European Union - January 1 - June 30, 2025 (EN).
45. The other six areas are: defence and security; protection of people and borders; resistance to foreign interference and disinformation; security and freedom of business; energy transition; and competitive and resilient agriculture.
46. As a reminder, recommendations are non-mandatory EU acts with no binding legal effect. The purpose of this type of document is to provide guidance on the interpretation or content of European law