

Abstract

The thesis deals with patient mobility in the European Union. It is particularly focused on legislation development of cross-border healthcare providing.

Its purpose is to analyse and critically evaluate different regulations of this issue. Using the comparison of individual legislation whether it is regulation, directive or case law, aims to explain the basic principles that patient undergoing a treatment in another Member State obey.

The thesis is composed of five chapters. Chapter one is an introduction to the general context of health policy and modification in primary law.

The second chapter assesses the role of patient in the European Union, which is seen here as a community of free market. The chapter has the largest content. This part is dedicated to it with an emphasis on significant impact that this area has brought the case law of the Court of Justice of the EU. The case law pointed to the need to adhere the primary law to address this issue, which prohibits Member States to impose restrictions that could restrict the free movement of patients. Health care has been classified as a service and the patient has been recognized as a consumer *sui generis*. It specifies and particularly explains the procedures of the Court that intervened in the existing legislation by its liberal stridency. Regulations had to pass the amendment because of the judgements of the Court of Justice of the EU which guarantees patients a much broader right than the regulations.

The third chapter focuses on legislative developments of adjustments in cross-border healthcare and critically compares the changes and the incorporation of case law in the new legislation.

The fourth chapter deals in detail with particular types of treatment that the patient can undergo. It draws attention to gaps in legislation and evaluates disputes which may arise between the regulation and case law. It calls for solving the biggest problems especially in the area of prior authorization and reimbursement of medical expenses. It clarifies the principles that in these situations patients can manage to preserve their right of access to cross-border healthcare.

The last chapter introduces the latest legislation, which is Directive 2011/24. This again critically examines the extent to which the new regulation coincides with the decision of the Court of Justice of the EU. It clearly introduces new rules and simplifies the overall legislation.

It should be noted that the path to the last directive was challenging, but gave both patients and Member States basic principles that must be respected by both sides. The present thesis

evaluates the different legislation and highlights the uncertainties that may be a common problem in understanding the case. The present thesis evaluates different legislation and highlights the uncertainties that may be a common problem in understanding the case. It is the first time that free movement of patients has a relatively comprehensive regulation that covers most areas of dispute. It is therefore expected that after the treatment has become a major source of Directive 2011/24, the majority of cases of cross-border care will be regulated through it.