**Advice case:** Cross-border Emergency Medical Services (EMS) and their Financial Dimension within the Scope of the French-Belgian Convention (2007)

**Advised entity:** French Regional Health Agency Grand Est (FR)

**Expert:** Mission Opérationnelle Transfrontalière (MOT)

### The Context

The France-Belgium Convention on Cross-border emergency medical services (EMS) was signed by the French Ministry of Health and Solidarity and the Ministry of Social Affairs and Health of the Kingdom of Belgium in 2007. The Regional Health Agency Grand Est is a public establishment of the French State, under the supervision of the Ministry of Health, in charge of implementing health policy in the region.

Thanks to the France-Belgium Convention on Cross-border emergency medical services (EMS), the medical emergency services of both states are allowed to intervene on the territory of the other country if they can be there faster than the national services.

However, different categorisation of the types of vehicles that are allowed to cross the border poses an obstacle to the full implementation of a joint emergency services.

### Description of the obstacle

The obstacle lies within the France-Belgium Convention on Cross-border emergency medical services (EMS) itself.

The agreement governs the crossing of so-called Urgency and Resuscitation Mobile Service (Service Mobile d’Urgence et de Réanimation in French, referred to as SMURs) on both sides. However, the term “SMURs” differs in the two countries: in France it refers to ambulances as such, namely vehicles equipped to transport a patient in a life-threatening emergency (Article D6124-2, Code de la santé publique) while on the Belgian side it concerns only light vehicles transporting doctors (Article 4 and Article 4bis, Loi relative à l’aide médicale urgente du 8 juillet 1964).

Because of this differentiation, the Belgian 112 ambulances are not allowed to cross the border.

By the same token, in accordance to the Financial Annex of the Convention, compensation provided to the patients is limited to the interventions of SMURs. Should a vehicle other than SMURs be used for the transportation of the patient, the Financial Annex of the Convention is not applicable.

### Outline of a Possible Solution

The solution in this case would be either to amend the 2007 Convention and broaden its scope to the crossing border of other medical vehicles than SMURs (such as Belgian ambulances) or to conclude and implement a completely new convention.

It would be necessary to allow regular Belgian 112 ambulances transporting patients to operate in coordination with their SMURs, therefore ensuring the possibility for both doctors and patients to cross the border.

No specific changes are required by France within a new or amended convention, provided that a French SMUR has already a crew consisting of a doctor and an ambulance driver able to transport patients as well as the required equipment.

The Financial annex of the convention would also need to be amended to cover the financial costs of
Belgian ambulances crossing the border.

It would be recommended to include in the Convention the planning of compulsory biannual French-Belgian health authorities and stakeholders’ meetings.

The case would partially be resolved by applying the European Cross-Border Mechanism by specifying that Belgian 112 ambulances crossing the border act in accordance with the laws/practices of their State/region of origin.

**What’s next**

- The expert’s report will be presented in occasion of the next annual meeting of the Convention in February 2020. As all the most relevant stakeholders will attend the event, it will be the occasion to draw their attention and pursue the reflection on the necessity to amend the Convention or conclude a more inclusive one following the suggested indications.