



AIM

Healthcare and
social benefits
for all



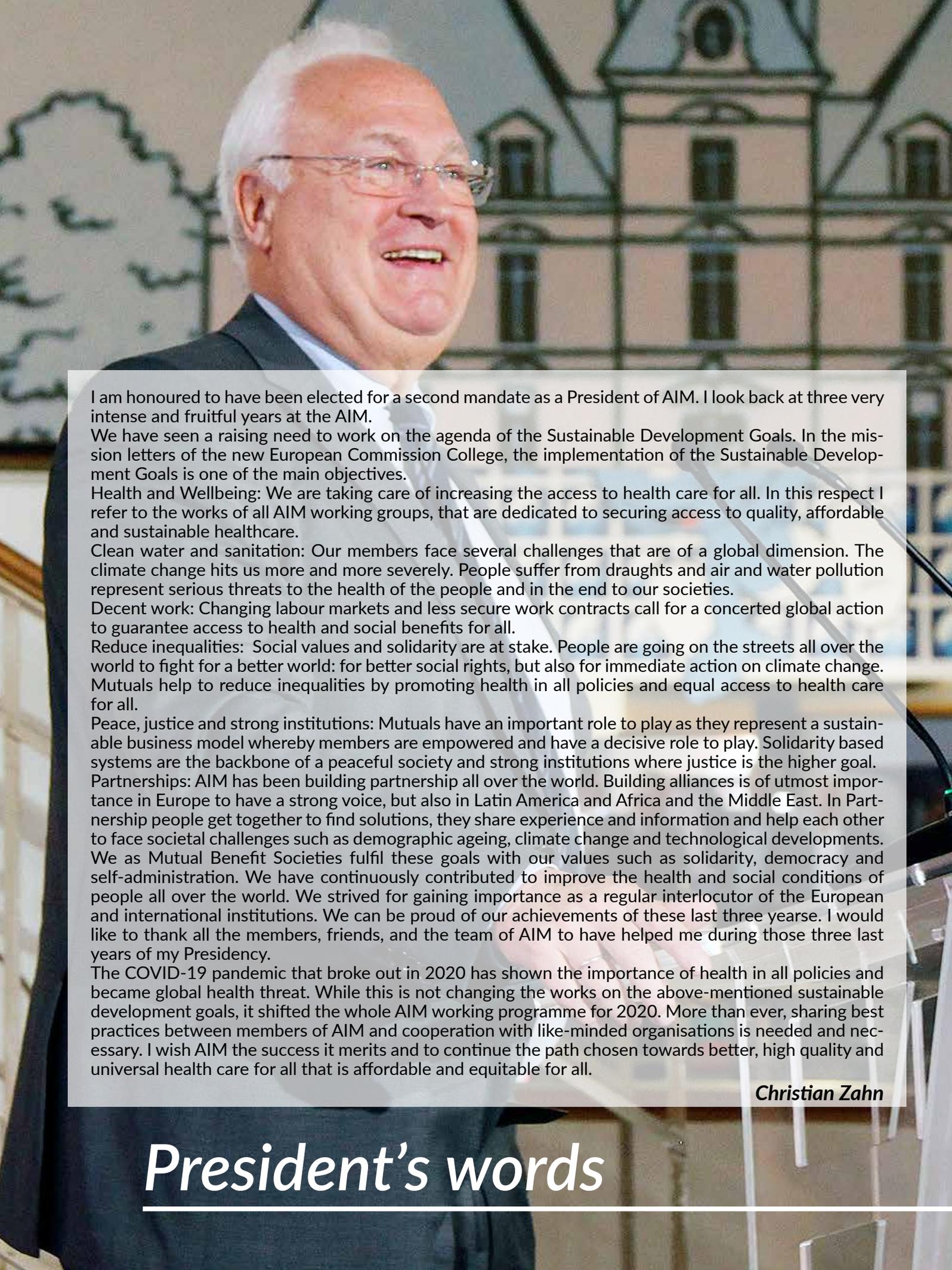
ACTIVITY REPORT

2017
2020

2017 2020 ACTIVITY REPORT

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I am honoured to have been elected for a second mandate as a President of AIM. I look back at three very intense and fruitful years at the AIM.

We have seen a raising need to work on the agenda of the Sustainable Development Goals. In the mission letters of the new European Commission College, the implementation of the Sustainable Development Goals is one of the main objectives.

Health and Wellbeing: We are taking care of increasing the access to health care for all. In this respect I refer to the works of all AIM working groups, that are dedicated to securing access to quality, affordable and sustainable healthcare.

Clean water and sanitation: Our members face several challenges that are of a global dimension. The climate change hits us more and more severely. People suffer from draughts and air and water pollution represent serious threats to the health of the people and in the end to our societies.

Decent work: Changing labour markets and less secure work contracts call for a concerted global action to guarantee access to health and social benefits for all.

Reduce inequalities: Social values and solidarity are at stake. People are going on the streets all over the world to fight for a better world: for better social rights, but also for immediate action on climate change.

Mutuals help to reduce inequalities by promoting health in all policies and equal access to health care for all.

Peace, justice and strong institutions: Mutuals have an important role to play as they represent a sustainable business model whereby members are empowered and have a decisive role to play. Solidarity based systems are the backbone of a peaceful society and strong institutions where justice is the higher goal.

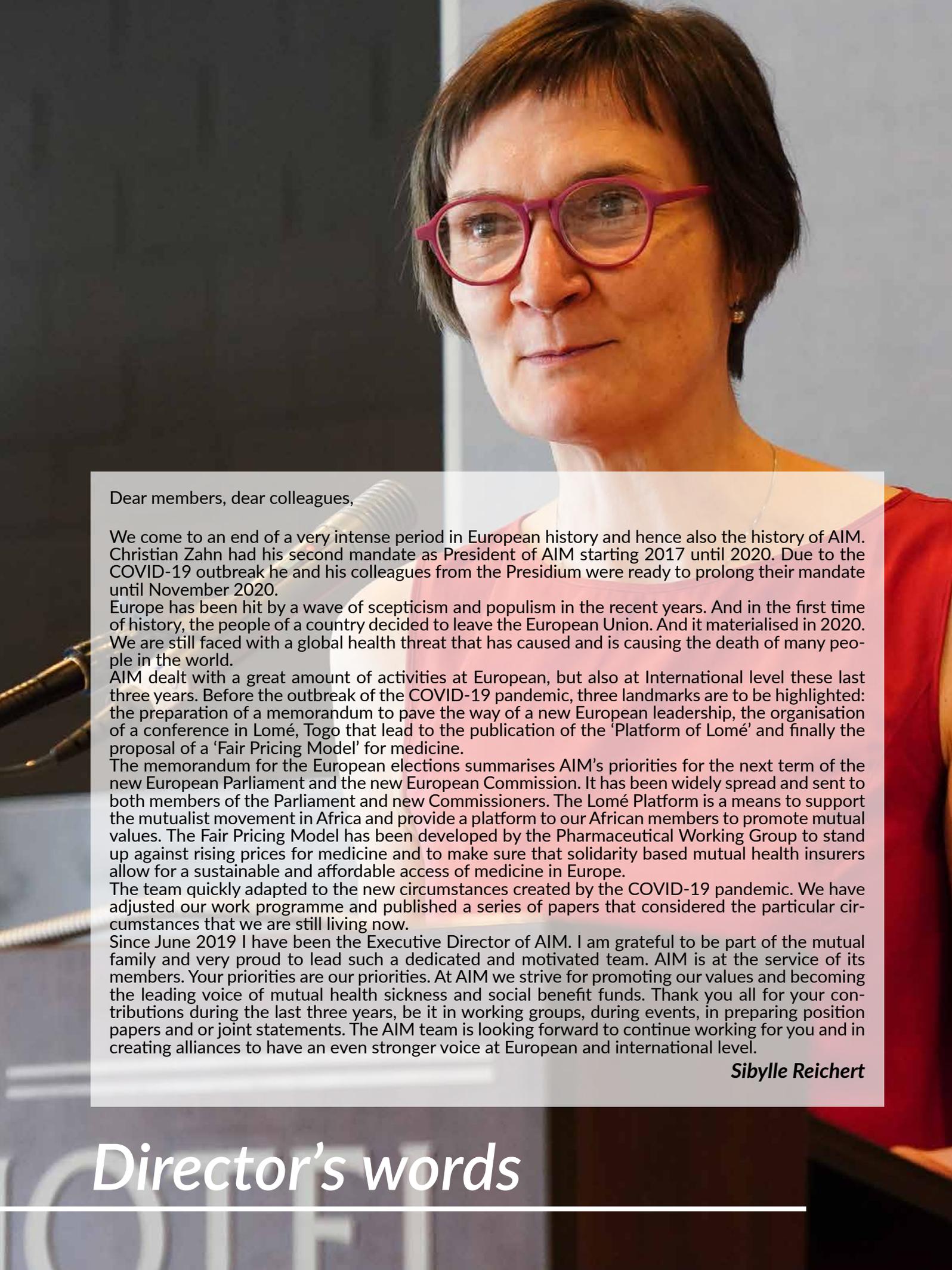
Partnerships: AIM has been building partnership all over the world. Building alliances is of utmost importance in Europe to have a strong voice, but also in Latin America and Africa and the Middle East. In Partnership people get together to find solutions, they share experience and information and help each other to face societal challenges such as demographic ageing, climate change and technological developments.

We as Mutual Benefit Societies fulfil these goals with our values such as solidarity, democracy and self-administration. We have continuously contributed to improve the health and social conditions of people all over the world. We strived for gaining importance as a regular interlocutor of the European and international institutions. We can be proud of our achievements of these last three years. I would like to thank all the members, friends, and the team of AIM to have helped me during those three last years of my Presidency.

The COVID-19 pandemic that broke out in 2020 has shown the importance of health in all policies and became global health threat. While this is not changing the works on the above-mentioned sustainable development goals, it shifted the whole AIM working programme for 2020. More than ever, sharing best practices between members of AIM and cooperation with like-minded organisations is needed and necessary. I wish AIM the success it merits and to continue the path chosen towards better, high quality and universal health care for all that is affordable and equitable for all.

Christian Zahn

President's words



Dear members, dear colleagues,

We come to an end of a very intense period in European history and hence also the history of AIM. Christian Zahn had his second mandate as President of AIM starting 2017 until 2020. Due to the COVID-19 outbreak he and his colleagues from the Presidium were ready to prolong their mandate until November 2020.

Europe has been hit by a wave of scepticism and populism in the recent years. And in the first time of history, the people of a country decided to leave the European Union. And it materialised in 2020. We are still faced with a global health threat that has caused and is causing the death of many people in the world.

AIM dealt with a great amount of activities at European, but also at International level these last three years. Before the outbreak of the COVID-19 pandemic, three landmarks are to be highlighted: the preparation of a memorandum to pave the way of a new European leadership, the organisation of a conference in Lomé, Togo that led to the publication of the 'Platform of Lomé' and finally the proposal of a 'Fair Pricing Model' for medicine.

The memorandum for the European elections summarises AIM's priorities for the next term of the new European Parliament and the new European Commission. It has been widely spread and sent to both members of the Parliament and new Commissioners. The Lomé Platform is a means to support the mutualist movement in Africa and provide a platform to our African members to promote mutual values. The Fair Pricing Model has been developed by the Pharmaceutical Working Group to stand up against rising prices for medicine and to make sure that solidarity based mutual health insurers allow for a sustainable and affordable access of medicine in Europe.

The team quickly adapted to the new circumstances created by the COVID-19 pandemic. We have adjusted our work programme and published a series of papers that considered the particular circumstances that we are still living now.

Since June 2019 I have been the Executive Director of AIM. I am grateful to be part of the mutual family and very proud to lead such a dedicated and motivated team. AIM is at the service of its members. Your priorities are our priorities. At AIM we strive for promoting our values and becoming the leading voice of mutual health sickness and social benefit funds. Thank you all for your contributions during the last three years, be it in working groups, during events, in preparing position papers and or joint statements. The AIM team is looking forward to continue working for you and in creating alliances to have an even stronger voice at European and international level.

Sibylle Reichert

Director's words

INFO

STRATEGY =



1. 2017-2020



1.1 Our Voice gets louder

Over the last three years, AIM has managed to voice its members' priorities in the European and International arenas. To do so, it highlighted the key role they play in delivering the future of healthcare as well as their expertise to bring affordable, accessible health and social benefit coverage. Mutual benefit societies represent a model for the social solidarity that Europe's citizens value. Their potential to eliminate existing health inequalities and raise overall healthcare standards and their democratic governance resonate this solidarity.

AIM's objective was therefore to keep health and access to healthcare and social benefits for all at the heart of EU social policy. We called for equitable access, irrespective of status or income; and for the reduction of existing inequality between EU Member States. To reach those objectives, AIM continued to emphasise the need for better health promotion and disease prevention as part of a 'Health in All Policies' approach. We also lobbied to take the impact of other policies on health into account. The increasing cost of pharmaceuticals and their pressure on national healthcare systems was another key concern. AIM therefore dedicated lots of energy on fair pricing and has developed a model which was presented in December 2019 (more information under "pharmaceuticals working group"). Innovation in health systems was also at the core of our activities. Beyond new medicines or medical technologies, AIM called for European research programmes to accelerate the reform of healthcare systems, improving their effectiveness and efficiency. As in previous years, the recognition of healthcare and social benefit mutuals and their contribution to healthcare and social benefit delivery as well the achievement of the sustainable development goals was high on our agenda. AIM called on the EU to recognise the specificities of social economy enterprises such as mutuals and to allow them to participate in the Single Market in the same way as other enterprises. We highlighted their unique not-for-profit approach as an ideal model for modern solidarity and asked for proper regulation and taxation. This was also an objective for our international activities. In the Africa and Middle East and Latin-American regions, AIM worked and supported its members in achieving or maintaining a legislative and financial 'fit for purpose' framework. We also highlighted and promoted the role and potential of mutuals in improving healthcare coverage rates.



1.2 New Members



APM

Associação Portuguesa
de Mutualidades

APM Redemut

The APM, the Portuguese Association of Mutuals, is a federation of mutualist associations that represents the interests of its members, defining the strategic direction and guidelines of mutualism as an associative movement of social solidarity that guarantees its members effective social protection at lower costs.

For the social usefulness of this movement, APM affirms, daily, mutualism as an effective solution in protecting citizens and promoting the synergies of its members, in a spirit of sharing and cooperation, which gave birth to REDEMUT.

REDEMUT is an innovative project that comes from the initiative of the Mutualist Associations that make up APM, with the objective of providing a network of health and social support services “of all, with all and for all”.

Fédération des Mutuelles Professionnelles et Caisses de Solidarité



The Fédération des Mutuelles Professionnelles et Caisses de Solidarité (FMP/B), was created in June 2005. The federation brings together more than 30 professional mutuals grouped into seven(07) Unions. As an umbrella organization, its role is to represent and facilitate the development of its members. As such, it organizes meetings with the administrative authorities in order to defend the interests of mutuality; pools its expertise and experience; and contributes to national workshops and exchanges on the implementation of universal health insurance.



HIO

The HIO's vision is, through the implementation of the National Health Insurance System (GHS), for every Cypriot citizen to enjoy lifelong, equal and unhindered access to high quality healthcare services.

The HIO's mission is to implement the GHS, a people-centred system reflective of modern thinking and practices, which is based on the principles of social solidarity, justice and universality, both in regards to contributions and coverage.

The GHS is a comprehensive and financially sustainable healthcare system aiming at meeting the expectations of Cypriot citizens for equal access to treatment and provision of high quality healthcare by using, in the best possible way, all available resources.

InterMutuelles Assistance



The IMA Group designs, assembles and implements assistance solutions on behalf of its shareholders, and customers: French and international companies related, amongst others, to the insurance world. From emergency assistance to long-term support of beneficiaries, the IMA Group offers a comprehensive range of products and services in the areas of secure mobility (travel), housing (connected home) and health (healthy living) as well as the customer relationship. To support the beneficiaries of our shareholders and partners on a daily basis wherever they are, the IMA Group has been developed abroad and can rely on its 14 branches. As every country is unique, IMA's branches in the national markets allow a real understanding of the local cultures and expectations.



2. Working Groups



2.1 European Affairs

European Pillar of Social Rights

President Juncker proposed the establishment of a European Pillar of Social Rights, which would take account of the changing realities of Europe's societies and developments in the world of work. AIM participated in a broad public consultation in 2016 on this European Pillar of Social Rights. AIM was quoted in the Commission paper on the evaluation of the consultation. The Pillar of Social Rights was jointly proclaimed by the European Parliament, the Council and the Commission on 17 November 2017 at the Gothenburg Social Summit for Fair Jobs and Growth. Since then AIM is working on the implementation of the principles of the European Pillar on Social Rights, notably on access to social protection for platform workers, the Revision of the EU legislation on social security coordination: regulation 883/2004 as well as a European Labor Authority. AIM also worked on the European Social Security Number (ESSN). In December 2017, the EU Commission published a public consultation to facilitate the identification of persons across borders for the purposes of social security coordination. The objective was to ensure the quick and accurate verification of their social security insurance coverage status. AIM reminded the EU Commission that the European Social Security Number should not impose costs on the health systems in the different Member States and that it should not disturb the health systems. The EU Commission put the project on hold for the moment. In January 2020, the European Commission has published a communication on Social Europe. Alongside this communications, a consultation "Social Europe: Have your say!" has been launched. Stakeholders were invited to make concrete proposals on how to implement the European Pillar of Social Rights. AIM has answered the consultation.

Output:

- Consultation European Pillar of Social Rights - Answer from the International and European Association of Mutual Benefit Societies (AIM) and its implementation from December 2016 on
- Participation and oral input from AIM in the Hearing of the European Commission on access to social protection on 15 December 2017 AIM recommendation on systems "Ensuring access to social protection in changing labour realities December 2019
- Participation in a consultation on a proposal for a regulation on a European Social Security Number



European Standardization in healthcare Services

The European Standardisation Organisation (CEN) has been developing standards in the healthcare sector limited to medical devices and eHealth applications. These standards support either the implementation of European legislation or the interoperability and effectiveness of healthcare ICT applications and information. However, in recent years, CEN is increasing the development of standards in the healthcare services sector. In 2017, it was expected that CEN/TC 403 (Aesthetic surgery and aesthetic non-surgical medical services) will finalise a European standard on non-surgical aesthetic medical procedures. Two other technical committees will continue to develop standards in the healthcare services sector: CEN/TC 449 (Quality of care for older people) and CEN/TC 450 (Minimum requirements of patient involvement in person-centered care).

All European stakeholders (European Hospitals Federation- HOPE, Standing Committee of European Doctors – CPME, Council of European Dentists – CED, European Federation of Public Service Unions – EPSU, European Trade Union Confederation – ETUC, European Social Insurance Platform - ESIP, and AIM), who were invited as observers, expressed deep concerns about the development of European Standards in relation to healthcare services. Therefore, CEN has created a Focus Group on Healthcare Services to discuss and make proposals in relation to an overall approach and methodology towards standardisation in the area of healthcare services.

In July 2017, the AIM wrote a joint letter together with other healthcare stakeholder organisations stating that standardization in the healthcare sector is welcomed, when it comes to ICT and technical questions. In this case, standardization can be very useful. AIM opposed standardization affecting healthcare services and the impact on patient safety and quality of care. After months of intensive lobbying, CEN did not install the Healthcare Focus Group and reduced its work regarding healthcare services.

Output:

- Joint letter AIM, HOPE, CPME, CED, EPSU, ETUC, ESIP to the Health Services Focus Group (HSFG) of CEN, Vienna meeting 21./22. March 2017
- Open letter AIM, HOPE, CPME, CED, EPSU, ETUC, ESIP to the Health Services Focus Group (HSFG) of CEN in July 2017
- 2017 - Regular meetings of CEN/HSFG





Digital Health & AI in Healthcare

Digital Health

AIM answered a public consultation from the European Commission on “Transformation of Health and Care in the Digital Single Market”, which ran from July – October 2017.

Based on that consultation, AIM wrote a position paper on the Commission’s communication on “Enabling the digital transformation of health and care in the Digital Single Market; empowering citizens and building a healthier society, which was published on 25 April 2018”. The European Commission has adopted a communication to develop an action plan in the field of digital health. This approach is supposed to provide a basis for EU action in digital health over the next years. It includes providing support for the exchange of e-prescriptions and electronic patient summaries, enabling cross-border exchange of full electronic health records, voluntary coordination in sharing data and resources for disease prevention and research, and finally capacity building and exchange of innovation and best practices for healthcare authorities.

AIM emphasized in its position, that patients need to be in control of their health data meaning that patients’ consent must be sought whenever their data is collected, processed and accessed. Control also includes knowing who had access to data, in the most user-friendly and easiest manner. AIM welcomed the efforts of the European Commission to drive digitization such as electronic health records with a summary of the patient’s health status and past interventions, prescriptions, and hospitalization. According to AIM, it can lead to faster and better diagnosis and help to decide about the correct intervention that is suitable for the patient. With regards to reimbursement, AIM demanded that the EU Commission should ensure that apps distributed or used within the EU comply with the requirements of the EU General Data Protection Regulation. Apps with a medical therapeutic purpose should be classified as medical devices and fall under the scope of the medical devices regulation. AIM proposed that the European Commission could promote a voluntary network for Member States to exchange views on national practice regarding reimbursement of digital interventions.

In June 2019, AIM had a meeting with DG CNECT on Electronic Health Records to offer its expertise and to have an exchange.

AIM also answered a consultation from the WHO on “Global Strategy on Digital Health”, which ran in April 2019. It emphasized that actors in the field of health are not mentioned in the list of stakeholders identified in the strategic objectives, including not-for-profit healthcare insurers such as AIM members. The latter mentioned are often forgotten in the list, although they play an important role. It is important that the all people, dealing with healthcare should be included.

In May 2019, AIM contributed as well to the Smart Health Strategic Value Chain action plan of DG GROW, where AIM was invited as the only non-industry organization.

End of 2020, AIM will publish a position paper on sharing of health data, which is currently in preparation. Major issue is the discussion about sharing of health data with industry. Another big topic is the creation of a European Health Data Space. The paper will be sent to the digital advisor of the cabinet of the President of the European Commission von der Leyen.



Artificial Intelligence in Healthcare

AIM also contributed to two consultations from the European Commission, which were published on 19 February 2020. A consultation on a European Data Strategy and on the White Paper on AI. After publishing its position paper on Artificial Intelligence in healthcare, AIM participated upon invitation of the European Commission in a workshop of the AI High Level Group in healthcare on 21 April 2020. The AI High Level Group developed policy and investment recommendations on AI. An annex on AI in healthcare alongside the recommendations was published in July 2020. AIM had commented on this annex.

Output:

- Public consultation from the European Commission on “Transformation of Health and Care in the Digital Single Market”, July – October 2017
- The digital transformation must support solidarity-based health systems - AIM’s position paper on digital healthcare
- WHO consultation on “Global Strategy on Digital Health”, April 2019
- AIM contribution to the Smart Health Strategic Value Chain action plan of DG GROW, May 2019
- AIM position paper on artificial intelligence in healthcare
- AIM answer to the consultation on a European Data Strategy and
- AIM answer to the consultation on the White Paper on Artificial Intelligence

European Elections

In 2018, AIM prepared a memorandum towards the European elections, which took place in May 2019. AIM wrote recommendations for a more social and health Europe in five priority areas: play a key role in prevention, contribute to sustainable access to pharmaceuticals, encourage healthcare innovation at EU level, take an international perspective and recognise healthcare mutuals as a social economy actor. The memorandum was presented to the then EU Commissioner for Health, Vytenis Andriukaitis at the AIM Board of Directors in November 2018.

Output:

- AIM Memorandum - Health at the Heart of a Social Europe
- Video – AIM memorandum for the elections
- Meeting with Unit C1 Performance of national health systems
- Participation of Commissioner for Health Vytenis Andriukaitis to AIM General Assembly in November 2018



Public Event

AIM, together with EuroHealth-Net, EMSA, CED, EPF, HOPE, CPME, PGEU and ESIP, organised a public event at the European Parliament. The meeting, hosted by MEPs Peter Liese (EPP) and Sara Cerdas (S&D) was attended by about 80 participants. It consisted in two panel debates. Participants highlighted the greatest healthcare challenges for the coming years and the need for EU collaboration to tackle them. The event was a great opportunity to show that the health community is united and ready to speak with one firm voice as a trustworthy collaborator to EU Institutions.

Output:

- 9 October 2019 – “Von der Leyen 2019-2023: EU Health Champions wanted!”



AIM Recommendations to the Pandemic

Related to the pandemic, which broke out in February 2020 in Europe, AIM drafted a paper on “Only with solidarity we overcome pandemics”, which recommendations on the role of the EU in health, the role of Member States and recommendations in the field of pharmaceuticals, eHealth, prevention and long-term care. An AIM task force was established to support the drafting of the paper. The AIM recommendations will be published during the AIM General Assembly in November 2020.



2.2 Mutual Values

Strategy on the Promotion of Mutuels within the Framework of Social Economy

For a long time the Mutuels Working Group had been pleading for a European Statute for Mutuels (EMS). As a European statute of for mutual benefit societies has not been realised so far, AIM decided to collaborate with other social economy actors. The objective is to promote the legal recognition of mutual model and social economy enterprises, their values and principles at European level .

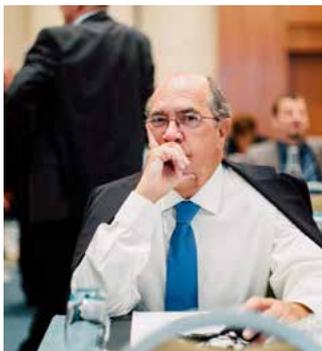
As a first action, AIM organized an event on Social Economy in Brussels on 8 March 2018 in the European Economic and Social Committee (EESC). During this event, it was discussed that barriers to cross border activities of mutuels should not (only) be brought to the attention of policy makers in Brussels but should be tackled by creating jurisprudence through starting a court case.

In this regard, a new report on the need to adopt a new notion of low profitability written by Laetitia Driguez, associate professor at the University Sorbonne in Paris, was discussed. The report stated that art. 54 of the Treaty on the Functioning of the European Union (TFEU), which codifies the freedom of establishment for enterprises, would only refer to for-profit-organisations and non-profit-organisations. Mutuels, with their specificity of distributing any profit to their members, do not seem to be covered by that definition in article 54. This report and AIM's work on it caught the interest of the European Commission, which lead to many meetings and exchanges with them.

In May 2017, AIM applied to be able to send a members of the expert group on Social Economy and Social Enterprises of the European Commission (GECES) and was accepted. This group assists the Commission in relation to the implementation of existing Union legislation, programmes and policies regarding social economy enterprises.

Output:

- AIM event on Social Economy and its access to the Internal Market, 8 March 2018
- Becoming a member of the expert group on Social Economy and social enterprises of the European Commission (GECES) May 2017





Governance of Mutuels

AIM organised an event with the Spanish member Divina Pastora in Valencia on 28 September 2018 in order to promote mutuels. The topic was “Mutual Governance”. AIM members discussed with CIRIEC-Spain (International Centre of Research and Information on the Public, Social and Cooperative Economy) the main principles and challenges of mutuels, when it comes to governance. The Head of the area of authorizations and system of government in the Directorate General of Insurance and Pension Funds of Spain presented Governance in mutuels and common international standards. AIM members from France, Spain, Portugal, Slovenia and Belgium presented their challenges. It was agreed to do more events on mutuels and Solvency II. On 29 March 2019, AIM had an expert meeting with the European Commission, Unit of Social Economy DG Growth, to discuss the challenges of mutuels. The Commission stated that challenges of mutuels were quite high on the agenda. AIM hired a lawyer to look into legal possibilities to get recognition of mutuels. Together with the European Commission and the lawyer, AIM developed a non-paper, proposing alternatives of a possible legal recognition for mutual benefit societies at European level. An option was to no longer seek acceptance by all the Member States, but only by those that are willing to move forward. This initiative is called enhanced cooperation procedure and must be decided upon by at least nine Member States. Such a procedure aims “(...) to further the objectives of the Union, protect its interests and reinforce its integration process”. The tool of enhanced cooperation allows Member States to move at different speeds and towards different goals than those outside the enhanced cooperation area. The procedure is designed to overcome paralysis, where a proposal is blocked by an individual country or a small group of countries who do not wish to be part of the initiative. It does not, however, allow for an extension of powers outside those permitted by the EU Treaties. It was agreed to use an already existing group of 14 EU countries which are active in developing social economy at the national and European levels. This group could be asked to develop a legal framework on mutuels/associations (as these are the two groups, which tried to achieve a statute).

Output:

- AIM – Divina Pastora event on “Mutual Governance in Valencia, 28 September 2018
- Expert meeting with the European Commission and a lawyer, 29 March 2019
- Non-paper on a proposal for a possible legal framework for a new European initiative for mutual benefit societies, June 2019





Social Economy

Social Economy Europe prepared an action plan on Social Economy. The plan was supposed to be adopted in July 2018 and then presented to the European Commission. AIM was actively participating on that documents and attended various events, organised by Social Economy Europe.





2.3 Pharmaceuticals and Medical Devices

Health Technology Assessment

AIM has been at the forefront of the discussions regarding the European Commission's proposal on Health Technology Assessment. The proposal was released in January 2018. The most prominent feature of the Commission draft is that it foresees mandatory joint scientific assessments of clinical aspects of health technologies at European level. Once done, these assessments can't be conducted again at national level. Other aspects (economic assessment) should remain a national exercise, while voluntary cooperation on this issue at European level is possible.

AIM supports the overall objective of the proposal on HTA to bring EU collaboration in the field further. However, AIM put forward conditions in this respect. AIM thinks that mandatory scientific assessments of clinical aspects can only be possible, if Member States have the possibility to do context-specific additional clinical assessments. More clarity needs to be created in the regulation about the timing of joint clinical assessments. The methodological framework to be used needs to be described in the regulation as well as the transparency of assessment outcomes and the data used need to be ensured. In addition, stakeholder consultation at critical steps before and after the assessments is crucial. AIM's calls for better provisions for joint clinical assessments were heard by the European Parliament in its position on the dossier. However, wider stakeholder involvement is not secured at this stage.

AIM has held many meetings with key players on the dossier. It was invited at a meeting in the European Parliament along with other healthcare NGOs in order to express its views on the Commission proposal. It was followed by bilateral talks between AIM and individual MEP offices. In April 2018, AIM was also invited to present its views to Commissioner for Health Vytenis Andriukaitis.

In addition to its work on the HTA legislative proposal, AIM was also involved in various networks for Health Technology Assessment. AIM brought its members' perspective on European HTA cooperation in EUnetHTA, a network that connects public national HTA agencies, research institutions and health ministries, enabling an effective exchange of information and support for policy decisions by Member States on pharmaceuticals' therapeutic value. The Health Technology Assessment Network is a closer network, gathering only member states Health Technology Assessment agencies. AIM is member of its Stakeholder Pool.

Output:

- February 2018 - AIM's position paper on the European Commission's draft proposal
- March 2018 - Meeting between HTA proposal rapporteur, and healthcare NGOs in the European Parliament
- March 2018 - Bilateral meeting between AIM and the Political Adviser for the S&D Group
- April 2018 - Bilateral meeting between AIM and ALDE/Renew Europe and the HTA proposal shadow rapporteur for the ENVI Committee
- April 2018 - Meeting between AIM and European Commissioner Andriukaitis on the European Commission's HTA proposal
- June 2018 - AIM's position on the European Commission's proposal for a regulation on health technology assessment and the European Parliament ENVI committee draft report on the same proposal
- October 2018 - AIM's position paper on the European Parliament's vote on the HTA proposal



Fair pricing

In December 2019, AIM has developed and launched in the European Parliament a proposal on a fair European maximum price calculation model for pharmaceuticals in the European Union. The drafting of the proposal was prompted by the current trends in terms of the price of pharmaceuticals products. There is an increase in terms of absolute prices of products, mainly oncology and rare diseases products. This increase is accompanied by doubts as to whether the products actually deliver added therapeutic value in comparison with products that are already on the market. In addition, high prices preclude access in countries that cannot afford those treatments. Lastly, it is hard to understand the price structure of such products, more specifically the share of R&D is hard to determine and it is. In order to address this, AIM has developed a proposal to set up a calculation method to calculate fair pharmaceuticals prices. Such a method would take into account aspects such as real R&D, the number of patients, production and overhead costs, sales and medical information, profit before tax, and an innovation bonus to reward therapeutic added value. The launch event in the European Parliament gathered in a full house around 50 participants coming from healthcare organisations from across Europe, as well as the European institutions to discuss the challenges of the current pharmaceuticals pricing model and potential solutions.

AIM's proposal caught the attention of journalists, stakeholders and policy-makers in Brussels. Key for this was that AIM's position is a concrete proposal to better regulate the way medicinal products' prices are set, in a context when an increasing number of Member States have difficulties paying for new oncology and rare disease medicines. Another factor of success was also that the proposal was launched just a few days after the new European Commissioner for Health and Food Safety, who has to help ensure the supply of affordable medicines, took office. It was a clear proposal put to her just days after she took her position.

AIM is engaged since December 2019 in a series of activities to promote the model further, including the drafting of an action plan, outreach to healthcare stakeholders and European institutions as well further development of the model

Output:

- September 2017 - AIM's position paper on fair medicines prices
- December 2019 - AIM's proposal on a European drug pricing model for fair and transparent prices
- December 2019 - Launch of AIM's proposal on a European drug pricing model for fair and transparent prices in the European Parliament
- July 2020 - Publication of AIM and 11 other public health organisations' recommendations on fair pricing





European Pharmaceutical Strategy

AIM is deeply involved in the design and adoption of the European Pharmaceutical Strategy, a key dossier of the current college of Commissioners. In June 2020, the European Commission published a roadmap and opened a public consultation towards the European Pharmaceutical Strategy. The roadmap sets out its ambitions for the future of pharmaceutical markets, to ensure Europe's supply of safe and affordable medicines and to support the European pharmaceutical industry to remain an innovator. As part of its reaction to these first steps, AIM made loud and clear that the European Pharmaceutical Strategy should be first and foremost a public health strategy, a strategy that shapes a pharmaceutical industry for better public health in Europe, focusing around four key objectives: Ensuring access to affordable medicines for all—including the principle of fair prices; Ensure the supply of medicines for patients across Europe; Getting on the market the therapies that health systems need; Harnessing the challenge of real-world data for better pharmaceuticals.

AIM also held a number of discussions with the European Commission officials around the European Pharmaceutical Strategy, including with the European Commissioner for Health and Food Safety, the Deputy Director-General for Health and Food Safety.

Output:

- June 2020 – Publication of AIM's reaction to the publication of the European Pharmaceutical Strategy Roadmap
- June 2020 – Meeting with the Deputy Director-General for Health and Food Safety
- July 2020 - Publication of AIM's recommendations on the European Pharmaceutical Strategy
- September 2020 – Submission of AIM's reply to the public consultation on the European Pharmaceutical Strategy





Relationships with the European Medicines Agency

AIM has been involved in multilateral talks with the European Medicines Agency (EMA), along with the European Social Insurance Platform (ESIP), MEDEV as well as the Mechanism for Coordinated Access (MoCA). These meetings have offered the opportunity for payers and for the European Medicines Agency, two critical stakeholders in the marketing of products, to come together and discuss issues of common interest. This was also the occasion to assess how to synergize the different aspects of products' arrival on markets. Following discussions at the meetings, EMA has produced a guide for a common understanding of the wording of therapeutic indications for products. Against the background of its outreach towards the EMA, AIM has replied to the agency's public consultation on its strategy up to 2025. AIM asked for the reinforcement of evidence at the time of marketing authorisation, for stringent requirements regarding follow-up of therapeutic performance by companies and to take into account the impact on health care setting / patient treatment process as a whole. AIM suggested EMA to start a reflection on establishing a permanent working structure and information exchange process between EMA and payers with relevant objectives, planning and responsibilities.

Output:

- September 2017 - EMA-Payer Community meeting in London
- June 2019 - EMA-Payer Community meeting in Amsterdam
- June 2019 - AIM's reply to EMA's public consultation on Regulatory Science to 2025
- August 2020 - AIM's reply to the European Medicines Agencies Network Strategy to 2025





Price Transparency

AIM is a member of the Stakeholder Network of the EURIPID Collaboration. The EURIPID Collaboration is a voluntary, non-profit cooperation between European countries on building up and maintaining a database with information on national prices and pricing regulations of medicinal products in a standardized format. Non-European countries also participate in the database: Israel, Norway, Switzerland. As part of its participation to the first meeting of EURIPID's stakeholder network, AIM developed and presented a statement for the continuation of the EURIPID collaboration.

The statement underlined that EURIPID should help reach more transparency in general. Indeed, at this stage the EURIPID database only collects official, list drug prices while many member states actually use confidential rebates. This therefore reduces the reliability of the database. To AIM, the EURIPID database should include real net prices, which would take into account all commercial conditions given by a company. The modalities for its calculation should be available to interested parties. AIM also called for the content of the EURIPID database to be shared/accessible to more stakeholders than just Member States' authorities. AIM is participating in the EURIPID collaboration's workstream on transparency and is in contact with the leaders of the project to see how to have better access to the content of the database.

In May 2019, AIM published a press release on the occasion of the discussion and adoption by the World Health Organization of a Resolution on transparency of pharmaceutical products' prices, R&D costs, patent status, supply chains and marketing costs. In its press release, AIM pushed for the adoption of an ambitious Resolution, as several WHO Member States attempted to water down the initial text. The Resolution was eventually adopted end May 2019. The final text still calls for the transparency on the pharmaceutical markets but unfortunately only focuses on the transparency of prices and leaves the R&D costs aside.

Output:

- April 2019 - AIM's declaration on the occasion of the EURIPID Stakeholder Meeting
- April 2019 - Participation in the EURIPID Stakeholder Meeting
- May 2019 - AIM's press release on the occasion of the discussion and adoption of the World Health Organization's Resolution on "Improving the transparency of markets for medicines, vaccines, and other health products"





Expanding the Label of old medicinal Products

The European Commission launched in 2018 the Repurposing of Medicines. The framework aims to provide support to not-for-profit stakeholders who have the data and scientific rationale for a new indication of a specific medicinal product and who have the aim to see this new use added on the label of the product. The objective is to confirm new uses of existing drugs in cases when the industry is not ready to commit to the necessary studies to extend the labelling of a specific medicinal products. Conversely, the repurposing framework aims give guidance to not-for-profit organisations which have limited regulatory expertise but still seek label extension for pharmaceutical products.

The European Commission has launched the pilot phase of the project in July. AIM is part of the Repurposing Observatory Group, a group which is in charge of concluding on the practical aspects of the implementation of the repurposing framework, promoting interaction, reporting on the challenges, successes and opportunities of the framework and of making recommendations to facilitate the cooperation between parties..

Output:

- July 2019 - Participation in the Repurposing framework's meeting





2.4 Prevention

Marketing

The prevention working group continued working, together with a broad coalition of health-related NGOs, on the revision of the Audiovisual Media Services Directive.

On 25 May 2016, the Commission adopted a proposal to revise the AVMSD. It includes provisions governing commercial communications for foods high in fat, sugar and salt and alcoholic beverages to children and minors. The AVMSD coalition sent a letter to MEPs in the leading committee (CULT) underlining the importance of effective rules to limit the exposure to health-harmful marketing. It called for restrictions on advertising during peak viewing hours and on sponsorship and product placement in order to protect minors and empower parents in their efforts to educate children about healthy lifestyles. Amendments were also put forward for the vote in the ENVI Committee, of which some were adopted. Furthermore, AIM also co-signed a joint open letter to Ministers which stressed that the revision of the AVMSD presents a key opportunity to reduce exposure of Europe's children to commercial communications for products that can harm their health (health-harmful products) and that it is an opportunity which cannot be missed by governments. AIM lobbied European institutions in order to influence the dialogues. The coalition is now working on a proposal of EU Directive on marketing to children for both alcohol and unhealthy food. The proposal will be pushed through the new European Commission and other institutions.

Output:

- 2017 - Joint Letters and amendment proposals on the Audiovisual Media Services Directive
- proposal Directive





Alcohol Labelling

AIM together with a broad coalition of other NGOs raised awareness and lobbied the EC for the proper labelling of both alcoholic and non-alcoholic food products.

In March 2017, the European Commission published a report clearly stating that no objective grounds were identified which would justify the absence of information on ingredients and nutritional information on alcoholic beverages. The European Commission gave the alcohol producers one year to deliver a self-regulatory proposal that would cover the entire sector of alcoholic beverages. In March 2018 industry produced a self-regulatory proposal. It failed to produce a uniform approach for the whole sector, instead presenting sector specific annexes. Additionally, the proposal leaves it up to the food business operators responsible for the food information to decide how to display the information.

AIM, together with a broad coalition of other NGOs lead by Eurocare, raised awareness on social media and lobbying the EC by underlining the inappropriateness of the proposal. A joint Press Statement was published on 5 June 2019.

Output:

- 2017 - Joint Letters and amendment proposals on the Audiovisual Media Services Directive
March 2017 - Joint Press Statement – Spirits Industry afraid of their own ingredients?





Vaccination

Beginning of December 2017, AIM organised a seminar on vaccine hesitancy. The WHO, the European Commission, the Standing Committee of European Doctors (CPME), Vaccines Europe and AIM gathered in order to discuss one of the great 21st century challenges for public health. AIM published a press release on the event and a position paper on Vaccine Hesitancy.

AIM has also become an official partner in the joint action on vaccination. The working group decided to get involved in work packages (WP) 4, 5 and 8 of the JA. Regarding vaccination, a survey was sent to members regarding their specific role regarding immunisation.

AIM organised a survey in order to get to know members' opinion and role regarding vaccination. That survey served as a basis to AIM position paper on the issue, published in April 2020, during immunization week.

Output:

- December 2017 – AIM organises Seminar on Vaccine Hesitancy
- January 2018 – AIM answers consultation on strengthened cooperation against vaccine preventable diseases
- PR – Vaccine Hesitancy, a public health threat to be tackled through multi-stakeholder collaboration
- Position Paper - AIM welcomes the European Commission proposal for stronger cooperation against vaccine-preventable diseases
- Position Paper – EU collaboration on Vaccination, AIM's view
- December 2018 – AIM becomes an official partner in the European Commission's Joint Action on Vaccination
- November 2019 – Article "AIM calls for European Action with regard to Vaccine Hesitancy" – published in The European Files (November issue, n°60)
- April 2020 – AIM position paper on Vaccination





Health in all Policies

In June 2018, AIM adopted a declaration on Health in all Policies. In its declaration, AIM invites Member States' Policies and European Regulation to address all determinants of health, by enhancing cross-sector cooperation for both policy making and implementation. For this cross-sector cooperation to be effective, AIM underlines the need for new financing models, which facilitate long-term commitment and across-portfolio budgeting. Furthermore, the document stresses the importance of local level involvement, of bottom-up approaches, and the necessary shift in mind-set in the way health is perceived. Disease prevention should be prioritised as well as chronic disease management and early intervention. Recommendations on the improvement of health literacy and of the measurement of health outcomes are also part of the paper. Finally, AIM stresses the potential of settings-based approaches and of big data in the development of more efficient actions and policies for better health.

Against the background of the adoption of that declaration, AIM had a meeting with the members of the Regulatory Scrutiny Board, in charge of verifying the impact assessment of all new EU laws or revisions. The exchange allowed to get a better understanding on how the impact on health is taken into account and to raise awareness of the importance of achieving health in all policies.

Output:

- June 2018 - Declaration on Health in all Policies
- July 2018 - Meeting with the Members of the Regulatory Scrutiny Board
- May 2020 - Top 10 preventive actions





Nutrition

In December 2017, AIM answered to the open public consultation on the initiative to limit industrial trans fats intakes in the EU. On that occasion AIM also published a position paper as well as a Video on this topic.

The AIM position paper calls on the European Commission to set limits to the presence of industrial trans fats in both pre-packed and non-pre-packed food by means of legally-binding measures; introduce the obligation to indicate trans fats contents in foods on labels in a clear and understandable way; increase nutritional literacy and populations' awareness on the health effects of TFAs; make healthier choices more available and affordable; and improve food products across the European Union by creating incentives which would lead food business operators to engage into reformulation and to look for environmental-friendly and healthy alternatives to partly hydrogenated oils. AIM also mentions that it would welcome an initiative to introduce higher taxation rates for products with high TFA levels.

In May 2019, the Regulation limiting transfats to 2 grams per 100 grams of fat in food was adopted.

As part of the EU Green Deal, the European Commission launched a Farm to Fork Strategy, which aims to make food systems fair, healthy and environmentally-friendly. In March 2020, AIM reacted to the EC roadmap. In May 2020, a PR was published after the publication of the Strategy, welcoming its ambitions, key in achieving the Sustainable Development Goals and in the implementation of a successful Green Deal.

Output:

- PR - The European Commission's initiative to limit industrial TFAs, an opportunity to improve the health of Europeans
- Video -What are TFAs? AIM Recommendations
- March 2020 - AIM reaction to the Farm to Fork Roadmap
- May 2020 - Press Release: "AIM welcomes the Farm to Fork Strategy proposal, a further step in the right direction"





EU's Beating Cancer Plan

The European Commission has made official its intention to publish its EU's Beating Cancer Plan at a launch event in February 2020. The first step in that Plan was a consultation, to which AIM answered.

Ahead of the launch of that Consultation, AIM has teamed up with a group of organisations in order to call for a focus on prevention in the Cancer Plan. The group has put together a statement which underlines that the "Europe's Beating Cancer Plan is a key opportunity to put prevention where it belongs, at the heart of the European Union's (EU) health agenda".

AIM also reacted to the publication of the Roadmap, in March 2020, calling, amongst others, for a health in all policies approach. The documents were shared with institution and a virtual meeting organized with MEP Trillet-Lenoir.

Output:

- February 2020: Press Release - Reaction to the launch of the Consultation
- February 2020: Joint Statement – Prevention at the heart of Europe's Beating Cancer Plan
- March 2020: Reaction to the publication of the EU's Beating Cancer Plan Roadmap
- May 2020: Conference-call with MEP Véronique Trillet-Lenoir





Mental Health

AIM has set up the European Mental Health Alliance (EUMHAlliance) together with other health-related NGOs. It organized, in October 2017, a conference on “Mental Health at the workplace” in cooperation with the European Committee of the Regions Interregional Group on Health and Wellbeing and its secretariat EUREGHA. The event attended by over a hundred participants encouraged an open dialogue on how to promote mentally healthy workplaces between employees, employers, users of mental health services, and human resources specialists. On the occasion of the event, a Press Release was published. The Alliance also published several joint press releases to feed into the European Semester process or react to Council conclusions. In October 2019, it organized a capacity-building seminar on the “future of work and mental health”. A podcast on “the effects of working in the gig economy on young people’s mental health” was also produced.

In November 2018, AIM organized a conference on “the Future of Mental Health”.

Early 2020, the COVID-19 pandemic had an enormous impact on mental health and well-being worldwide. During the pandemic, people became more at risk of experiencing, directly or indirectly, confusion, frustration, anxiety, and fear, sometimes combined with a lack of access to and continuity of care and adequate support for pre-existing ill-mental or physical health conditions. AIM therefore decided to publish a joint statement, in collaboration with 10 other healthcare-related NGOs in order to issue a set of recommendations to decision makers.

Output:

- AIM works with the Alliance for Mental Health on all Policies
 - October 2017 - Conference: “Mental Health at the Workplace”
 - October 2019 - The Future of Work and Mental Health: capacity-building seminar
 - April 2017 - PR: World Health Day Depression: the biggest barrier to workplace well-being
 - July 2018 - Mental health and employment-related issues to feature in the European Semester process; Recommendations for reflection
 - Podcast: The effects of working in the gig economy on young people’s mental health
 - May 2019: No Future of Work without Mental Health - EUMH Alliance response to the adoption of the adoption of Council Conclusions on Young People and the Future of Work
- 6 November 2018 – AIM Conference on “The Future of Mental Health”.
- 8 May 2020 – Joint Statement: “Mental Health in the eye of the COVID-19 hurricane”



Gambling

AIM published its memorandum on gambling in March 2020. The issue of problematic gambling is increasingly spread and awareness amongst decision makers is low at this point. The intention was to share the memorandum with EU institutions and to look for support from other like-minded organisations.

In that context, AIM had a call with Unit E2 - Public Interest Services at DG Internal Market, Industry, Entrepreneurship and SMEs (GROW). They explained that it was a political decision from the Juncker Commission to stop all activities around gambling, not considered as a priority. DG GROW (and others) are therefore still following those directives and will continue to do so unless the new commission decides otherwise.

With the emergence of the COVID-19 pandemic and the rising concerns throughout Europe on its impact on online gambling and consequently on public health, AIM updated its memorandum and disseminated it once more. Following that, AIM contacted different cabinets. AIM discussed this issue with representatives of DG GROW and the cabinet of Justice Commissioner Reynders. The issue is not currently a priority within the Commission. DG Grow would lead the way on this topic. AIM will continue its cooperation with the Commission in this respect and will draw attention to this important subject.

Output:

- 9 March 2020: Publication of the AIM Memorandum on Gambling
- 20 April 2020: Memorandum updated in light of the COVID-19 pandemic
- 26 June 2020: Meeting with the Cabinet of Didier Reynders (Commissioner for Justice) and with DG JUST





eHealth Promotion and Disease Prevention

The topic of quality assessment of health promotion and disease prevention apps is a key topic for AIM members. AIM organised on 18 February a seminar on the topic 'Apps upon Prescription'. The event was attended by over 30 participants, amongst which the European Commission. It showed the relevance of health apps to all healthcare mutuels and sickness funds. After the event, AIM was contacted by a European Commission's official, asking for information on the reimbursement of eTools by healthcare payers across Europe. Following that exchange, AIM decided to carry out a survey amongst its members to get a better understanding of the tools they develop themselves and those they reimburse. The document was the shared with the Commission and was the basis of first contacts with UNIT C1 of DG SANTE.

Output:

- February 2018 - AIM organizes seminar on the topic 'Apps upon Prescription'
- Survey: AIM members and ICT tools
- 27 November 2019 - AIM participation to the European Commission Scientific Panel for Health workshop 'Health and wellbeing - the role of health research'

Environment and Health

AIM adopted a [declaration](#) on air pollution and health. The document called for the adoption of comprehensive and strict air quality standards, in line with WHO recommendations. It also called on decision-makers to strengthen efforts to bring down emissions of air pollutants from all sectors; and invited health ministers, health authorities and health representatives to become more engaged in clean air efforts and to do so while adopting a Health in all Policies approach.

In December 2019, the European Commission presented its ambitious Green Deal, which paves the way for environmental policies for the years to come. AIM published a Press Release, welcoming the intentions described in the EC proposal.

Output:

- 15 November 2018 - The Brussels declaration on air pollution and health
- December 2019 - The EU Green Deal: an opportunity for public and planetary health"
- June 2020 - Reaction to the Chemicals Strategy Roadmap - "A Chemicals Strategy should foremost aim at healthier citizens on a healthier planet"



Factsheets

The Prevention working group is working on a series of 12 factsheets on areas for action related to health promotion and disease prevention in order to provide, on the one hand, facts and figures related to the issue, and on the other, a series of recommendations to decision-makers. The documents consist on a factsheet and a more detailed document attached to it and describing those recommendations in more depth. A section containing best practices from AIM members is also included. Those best practices were then be used to make “twitter cards” to be published on social media around the date of publication. The factsheets which were already published cover the following issues: Mental Health, Physical Activity, Alcohol, Healthy Diet and Antibiotic use. Others will follow first half of 2021 on Sexual health, Health checks, Sleep, Vaccination, Road safety and Chemicals / environment. The order of publications was chosen according to key dates at European or international level, in order to achieve a greater visibility.

Output:

- Beginning of September 2020: Mental Health Factsheet
- End of September 2020: Physical Activity Factsheet
- Beginning of October 2020: Alcohol Factsheet
- Mid-October 2020: Healthy Diet Factsheet
- November 2020: Antibiotic Use Factsheet

FACTSHEET n°1: MENTAL HEALTH
OUR RECOMMENDATIONS
 1 Mental health should be embedded in all Policies.
 2 A greater and more efficient focus should be put on the prevention of mental health disorders such the promotion of...

FACTSHEET n°2: PHYSICAL ACTIVITY
RECOMMENDATIONS
 1 Improve health literacy as a booster of physical activity from an early age on.
 2 Strengthen primary health care and social services to promote physical activity at local level.

FACTSHEET n°5: ANTIBIOTIC USE
RECOMMENDATIONS
 Prevent the misuse of antibiotics through higher levels of health literacy.
 Strengthen the role of primary care in tackling AMR.
 Collect more and better data on AMR.
 Follow the One Health approach.
 Implement delinkage models to develop new antimicrobials.
 Think global.

FACTSHEET n°3: ALCOHOL USE
RECOMMENDATIONS
 Reduce availability of alcohol at the point of sale.
 Increase the price of alcoholic beverages.
 Ensure proper screening, early detection and referral when necessary.
 Ensure proper labelling of alcoholic beverages.

FACTSHEET n°4: HEALTHY DIET
RECOMMENDATIONS
 Incentivise the food and drinks industry to reformulate their unhealthy products so as to propose healthier alternatives.
 Strengthen the role of primary care in preventing eating disorders and promoting healthy diets.
 Encourage an increased consumption of fresh fruit and vegetables through a settings approach.
 Protect children and minors from exposure to the marketing of foods or drinks that are high in fat, sugar or salt.
 Provide clear and comprehensive information to consumer on labels.
 Encourage the production and consumption of sustainable foods.
 Make use of economic incentives or disincentives to produce healthy diets.



2.5 Long-term Care

Mapping of Long-term Care (LTC) Systems

October 2017 – Working group meeting in Brussels on the Swedish LTC system

After learning about the Swedish LTC system, the working group visited a facility in the heart of Brussels, considered a pioneer in its approach to dementia and related diseases: the Maison Vésale, which provides housing and care to around 120 people. The house uses a rather unique concept for the country, first of all, because the house is specifically set up for people with dementia. Secondly, the house has been built with the ambition to create an environment as ‘at home’(maison) and not like in a hospital (through the architecture and the professional approach). The staff doesn’t walk around in traditional white outfits but they are all, including management and office personnel, engaged in contact with inhabitants, for example by having meals together, and by not working only 9-5 from Monday to Friday. Other innovative concepts applied in in the house are the use of smell and music to identify the different corridors.

February 2018 – Study visit to Paris (France)

The AIM long-term care (LTC) working group met in France, where they got to learn more on the French organization and financing of LTC. The afternoon session allowed participants to visit the “Hospital Sainte-Marie” (USSIF), a support site for people with Alzheimer’s disease or their relatives and caregivers. USSIF offers a multidisciplinary approach based on prevention and care of crisis at home. Their main objectives are to get rid of psychotropic drugs, promote rehabilitation, prevent offsetting, upgrade self-esteem, achieve high quality of care, improve accessibility to quality care, and delay nursing home placement. The most innovative aspects of their programmes are the non-pharmacological therapies such as the art or music therapies. Performed by therapists, they are integrated into care plans for people with Alzheimer’s disease or related disorders.

September 2018 – Study visit to Stuttgart (Germany)

AIM members met at the Robert-Bosch Hospital in Stuttgart to learn about the German long-term care system and share best practices in terms of carers’ support, falls prevention and eLTC solutions. The event started with a presentation of the German system and the recent reforms in Germany, which allowed to better include mental ailments. Professor Pfeiffer, researcher at the hospital in Stuttgart, also presented a set of counselling guidelines on support to informal carers. Some telehealth solutions to manage





patients with chronic diseases and evidence-based fall prevention were also shown. Participants had the chance to visit some wards of the Robert-Bosch Hospital, where innovative techniques for preventing falls or alleviating their consequences are tested. Amongst the most impressive results, researchers found out that by training 45 minutes a year on a special running track, elderly people fall no more.

February 2019 – Working group meeting in Brussels on the Lithuanian LTC system

The meeting allowed participants to get to know the Lithuanian system and the challenges which it will have to face in the coming years. Participants also discussed the latest developments regarding Regulation 883/2004 on the Coordination of Social Security Systems. The group decided to work on a position paper on LTC. (see below)



May 2019 – Study visit to Leiden (the Netherlands)

The working group had the chance to learn more about the Dutch long-term care system during a study trip which took place in Leiden. The morning programme allowed participants to get to know the way LTC is organised and financed in the Netherlands. In the afternoon, participants visited the 'Topaz' nursing home which offers personalised care, adapted depending on the region where the institution is located. A nurse presented their project of "doodle boards", a frame containing pictures and texts concerning each individual patient. Displayed in the person's bedroom, they allow the staff to have more meaningful exchanges with their patients, enhancing their quality of life but also improving the staff's working conditions.



Lobbying for enhanced EU Action in the Field of LTC

AIM published a position paper on LTC. The document calls for a clear and objective definition of eligibility criteria for LTC and based guidelines to fight inequities. AIM also calls for the establishment of financing and organisational systems so as to ensure that every citizen in the EU has sustainable access to high quality LTC. eSolutions, informal carers, healthy ageing and outcome indicators are also devoted specific attention to.

The AIM team met with the DG EMPL in July 2019. The meeting allowed the Commission to get acquainted with AIM work in the field of LTC and to discuss the above mentioned issues. Following that meeting, contacts were kept with DG Employment, on the work carried out by the EU Commission on indicators for LTC. DG EMPL asked AIM to send its thoughts on outcome measurement and quality assurance. The reflection paper was shared with the European Commission.

Output:

- July 2019 - Meeting with DG EMPL, European Commission
- December 2019 - AIM position paper on long-term care
- March 2020 - Reflexion paper: "Measuring the outcomes and comparing the quality of long-term care services"
- May 2020: working group on LTC and COVID-19 with the presence of the OECD

Healthy Ageing

The European Commission plans to publish its Green Paper on Healthy Ageing by the end of 2020. AIM met with the cabinet of Vice-President for Democracy and Demography Dubravka Šuica, in February 2020, to hear more about the intentions of the Commission regarding that paper. Upon their recommendation, AIM published its recommendations to the Green Paper beginning of July 2020. The document is based on the positive health model, which truly embodies the health in all policies approach, allowing for a broader and more in depth understanding of the concept of health and well-being. According to AIM, the Green Paper can make a considerable contribution to the achievement of the Sustainable Development Goals. Healthy ageing should be an overarching aim of all EU initiatives and be at the centre of a sustainable recovery plan. It should also be an integral part of the European growth strategy. Following the publication of the paper, AIM had meetings with the cabinet of Commissioner for Health Stella Kyriakides and with other EU officials, amongst which DG EMPL C: Social Affairs and Inclusion.

Output:

- February 2020: Meeting with the cabinet of Vice-President for Democracy and Demography Dubravka Šuica
- July 2020: AIM recommendations on the Green Paper on Healthy Ageing
- July 2020: meeting with the cabinet of Commissioner for Health Stella Kyriakides
- September 2020: meeting with DG EMPL C: Social Affairs and Inclusion



2.6 Fight against Fraud

The working group on the fight against fraud met twice. The first time, in April 2018, it dealt with the topic of corporate compliance. As AIM members are active in a more and more complex environment, the rules and regulations that AIM members have to comply with are becoming more complex too, for example financial regulations and regulations related to data management, security and privacy. AIM members want to comply with those codes of conduct, rules and national, European and international regulations, but due to their complexity and the fragmented approach of those rules within organisations (for instance two different departments dealing in silos with a horizontal issue), there is a risk of non-compliance, which can have large financial and/or reputational consequences for the organisation. The meeting on the first day was the opportunity for attending AIM members to hear more about risks which could be imposed on them due to the lack of compliance of rules. AIM invited several experts, academics, heads of non-governmental organisations who instructed AIM members on various topics, such as the consequences of the Volkswagen scandal emissions on the automotive sector, the whistleblowing Directive as well as latest developments regarding the security of information networks.

AIM and the European Healthcare Fraud and Corruption Network (EHFCN) also organized together a meeting in the European Parliament, dealing with cross border aspects of fraud. Indeed, the European Union legislation on cross-border healthcare, the Single Market or the coordination of social security systems have offered many opportunities for patients, healthcare professionals, the industry and public authorities to exchange healthcare services, medicines and medical devices cross-border. However, this integration has also offered ways for individuals or organisations to engage in cross-border fraud activities that bring financial, social and physical damages in member states. The meeting gathered around 50 participants. Host MEP was Anne Sander, from the centre-right EPP group.

During the remainder of the meeting, working group members decided that it is important to focus on the exchange of experience in the working group. As a result, the AIM Secretariat developed a questionnaire on the promotion of an anti-fraud culture among AIM member organisations. The survey was sent to AIM members in the summer of 2018. The survey shows a fairly diverse landscape of activities for the promotion of the fight against fraud in AIM members.

The results of the survey were discussed at the next working group meeting which took place in November 2019,





where members confirmed the importance of information exchange. Members also heard a presentation on Hermeneut, an EU project dealing with the protection of intangible assets, such as reputation, from cyber-attacks. Then, AIM member NHIF (Lithuania) presented the country's activities to fight corruption, which include a whole range of activities and initiatives, from an overall strategy on the issue to employees training on the issue. The meeting ended with a presentation of the use of artificial intelligence to detect cases of fraud.

Output:

- Joint EP event with the European Healthcare Fraud and Corruption Network (EHFCN) on Addressing cross-border healthcare fraud - 25 April
- AIM survey on the promotion of an anti-fraud culture among AIM member organisations - summer, autumn 2018





3. Regions



3.1 Africa & Middle-East

Presidium Meeting in Marrakesh

AIM's Presidium met in April 2017 in Marrakesh with Moroccan members. The Presidium was informed about the healthcare system of the country and of recent developments related to the Moroccan mutualist movement. The meeting was kindly hosted by the President of the Mutuelle des Douanes and entirely facilitated by Abdelaziz Alaoui, AIM Vice-President for the African and Middle-East Region.

The Presidium discussed with the Moroccan mutuels about the new code for mutuels which threatens to forbid mutuels to provide healthcare services to their members. The code could put an end to the specific governance that gives mutuels their identity as well as imposes disproportionate oversight from public authorities on the mutuels' functioning. AIM President Christian Zahn underlined that AIM would be willing to help to lobby for a Code that supports the further development of mutualism in the country.

The Presidium was also informed about the imminent establishment of a national federation of healthcare mutuels in the country. This federation would help to further unite the mutualist movement in Morocco and to speak with one voice, for example in relation the code and jointly communicate to the broader public about the added value of mutuels in the healthcare system.

In the days prior to the meeting, with the support of Abdelaziz Alaoui, AIM's secretariat visited members in Casablanca and in Rabat. AIM's staff were amazingly welcomed by the Caisse Mutualiste Interprofessionnelle Marocaine (CMIM), the Mutuelle des Forces Auxiliaires (MFA), the Mutuelle d'Action Sociale (MAS), the Mutuelle Générale de l'Education Nationale (MGEN), the Mutuelle de l'Office d'Exploitation des Ports (MODEP) and Mutuelle de Prévoyance et d'Actions Sociales de Royal Air Maroc (MUPRAS). They also met with the World Health Organization's Representation in Morocco. Those meetings were an opportunity for the Secretariat to visit members' mutuels and healthcare centres in order to understand the practicalities of their work, but also to hear face-to-face about members' concerns. The discussions of course fed into the content of Thursdays' discussion between the AIM Presidium and AIM members.





Strengthening Mutuals across the African Continent

AIM Presidium members participate in the launch of the National Union of Moroccan Mutuals

In May 2019, the National Union of Moroccan Mutuals (Union Nationale des Mutuelles Marocaines - UNMM) was launched in Rabat. This federation includes most of AIM's public and semi-private sector member mutuals. The federation is presided by Miloud Masside, President of MGEN Maroc while Fouad Bajilali president of the Mutuelle des Forces Auxiliaires (MFA) is Secretary General. The launch meeting was attended by Mr Mohamed Yatim, Moroccan Minister for Employment and Professional Inclusion, an important indication of the Moroccan government's involvement with mutuals. Christian Zahn, President of AIM also attended the meeting. He underlined the importance of the creation of the union, a very timely development in the long history of the Moroccan mutualist movement. The union is a strong signal that Moroccan mutuals cooperate and will help structure mutuals' advocacy around the draft code of mutuality.

Abdelaziz Alaoui's visit to Lebanon

In November 2017 AIM Vice-President Abdelaziz Alaoui attended the Lebanese day of mutuals. Our Lebanese members hosted AIM, and the event went very well. One striking element was the good relationship between the Ministry of Health that is responsible for Mutuals.





AIM Secretariat's activities in Geneva

Throughout 2018, the AIM Secretariat went on several missions to Geneva. In March, the Secretariat held meetings with the International Labour Organization (ILO). To ILO, mutuals are one of the societal structures that need to advocate for decisive political action in order to improve social protection. However, ILO remains quite doubtful regarding mutuals' ability to deliver universal healthcare because affiliation is voluntary – where it is not conducted well, reliance on mutuals leads to disappointing results. The meeting also led to the agreement that ILO would be attending the international African mutualist conference.

In May 2018 the Secretariat went again to Geneva during the International Labour Conference. AIM took advantage to meet with the International Social Security Association (ISSA). ISSA updated AIM on the work of their technical commission on mutuals which works on the topics of the improvement of management, eHealth, or the management of the health insurance system. They expressed the wish to have a more regular collaboration with AIM. ISSA suggested to identify one topic on which we could conduct a “short” project to see how collaboration could materialise. AIM proposed the combination of compulsory and complementary health insurance systems including AIM's point of view on other output materials, such as the ISSA guidelines. AIM also met with the Health Systems Governance and Financing Department of the World Health Organization. The reason to meet was to follow-up on a policy brief that AIM interpreted as concluding that mutuals are not a relevant vehicle to lead to universal health coverage. They informed AIM that they were more balanced. To them, however for mutuals to develop they need two things: to be compulsory, even at community-level and be subsidized, which is in line with AIM's recommendations for mutuals in Africa. In their opinion, mutuals are very important for universal health coverage as they can help with the governance of health systems. Since they are close to adherents and people's needs, they can be relevant to steer public health decision. The mutual model also corresponds very much with the paradigm at WHO that health systems must be participatory and include citizens.

Lastly, the Secretariat met with a Counsellor for Health at the French Mission to the United Nations in Geneva. He informed the Secretariat that he believes that mutuals have an obvious role in Universal Health Coverage. He was happy to meet with AIM as it is the first time that he met the international body representing mutuals.

As a result of its activities in March, October, the Secretariat attended in October Geneva the Third Multi-Stakeholder meeting of ILO's Social Protection Floors Initiative. It was the first time AIM attended this meeting. It was also clear during the meeting that mutuals share the same concerns as the participating government representatives: the problems posed by the coverage of informal workers, challenges regarding the financing, etc... However, it also made clear that more communication needs to be done to convince ILO to change its focus from tax-based, publicly-funded





health insurance schemes to also consider that mutuals are able, under certain conditions, to deliver on sustainable access to healthcare on a wide scale.

Abdelaziz Alaoui's visit to Burkina Faso

Vice-President for Africa and the Middle East Abdelaziz Alaoui went on a mission to Burkina Faso in November 2018. There, Burkinabese AIM member MAADO prepared a series of meetings. Vice-President Alaoui met with the General Secretary of the Prime Minister, with the General Secretary as well as the Director-General of the Ministry for Public Servants. The visit was also the occasion to strengthen the ties between AIM and the Burkinabese government and show that mutuals are active on the ground. AIM met with UEMOA too, to discuss the future international conference on mutualism in Lomé.

The Lomé Conference

End January 2019 AIM organised in Lomé, Togo, the international conference on mutuality "Le Pari de la Mutualité pour le XXI^{ème} Siècle". The organization of this conference was one of the objectives of the region's work programme. It was held under the high patronage of the Presidency of the Togolese Republic, in collaboration with the West African Economic and Monetary Union. It brought together over two days approximately 224 unique participants from 18 African and European countries.

In terms of agenda, the first day consisted of high-level statements and roundtables. It was opened by the AIM President Christian Zahn, AIM Vice-President for Africa and the Middle-East Abdelaziz Alaoui, the Resident Representative of the West African Economic and Monetary Union in Lomé and Gilbert Bawara, the current Minister of Public Service, Labour and Social Protection of Togo.

The opening was followed by a series of round-table discussions on the following topics:

1. The mutualist commitment...a political action bringing solidarity
2. For efficient and solidarity-based mutuals: focus on compulsory membership
3. For efficient and supportive mutuals: focus on delegated management

These round tables were organized with mutualist representatives from the South as well as from the North, and international organizations.





The second day was organised around the Lomé Platform, a unique document of the mutualist movement. It is the result of a process of collective reflection and drafting by the various actors involved in the promotion of mutuals, carried out both from Africa and Europe. The Platform is a document carried by the African mutualist movement and supported by the international mutualist world. It contains proposals and demands addressed to supranational organisations and political decision-makers in various African countries. The day culminated in the adoption, by acclamation, of the Lomé Platform by the mutualist organisations present.

Two press conferences were held during the event, each time with the presence of Togolese mutualists and government representatives as well as representatives of the Togolese press.

AIM's financial partners around the conference were FNM (the French mutuality), Montepio, the Christian mutual societies from Belgium, the Free Mutuals from Belgium, the PASS program, Solidaris (Belgium) and the MASMUT program. The NGOs backed by Belgian mutuals, the Belgian Directorate General for Development, UAM-Afro, the Togolese mutualist platform, the Togolese health insurance institute were also associated.

The adoption of the Lomé Platform was followed by the roll-out of a communications campaign and workshops in African countries as well as in Brussels in order to promote the document.

Output:

- AIM Secretariat's mission to Morocco - April 2017
- AIM Presidium's meeting in Marrakech - 28 April 2017
- AIM Vice-President Abdelaziz Alaoui's attendance of the National Day of Lebanese mutuals - November 2017
- AIM Secretariat's mission to Geneva - March 2018
- AIM President Christian Zahn and Vice-President Abdelaziz Alaoui's attendance of the launch of the National Union of Moroccan Mutuals - May 2018
- AIM Secretariat's mission to Geneva on the occasion of the International Labour Conference - May 2018
- Vice-President Abdelaziz Alaoui's visit to Burkina Faso - November 2018
- AIM International Mutualist Conference in Lomé "Investing in Mutuals for the XXIst century" - 22-23 January 2019
- Development of communications materials around the Lomé Platform - January 2020





EU-Africa Partnership.

In March, the European Commission published a communication on the future EU-Africa Partnership. The partnership will define the axes for the collaboration between the two continents. Indeed, the European Commission is negotiating the successor of the Cotonou agreements, the overarching framework for EU relations with African, Caribbean and Pacific (ACP) countries. In autumn 2020, the European legislators and the European Commission were negotiating the Multiannual Financial Framework (MFF), the Union's budget for the next seven years, which includes the overall funding for development cooperation. AIM is committed to making sure that the development of strong social protection systems in Africa remains an important element of the EU's development cooperation framework. On the African side, the African Union has launched the African Continental Free Trade Area, the largest free trade area in the world in terms of participating countries. At the same time, in 2018, six of the ten fastest growing economies in the world were African and the EU intends to take advantage of the economic dynamism of some African countries.

The EU's relationship with Africa is a key priority for the new Commission. The new COVID reality makes this relationship all the more important.

Output:

- Discussion with the Cabinet of European Commissioner for International Partnerships
- Publication of AIM's response to the EU-Africa Communication

International Day of Mutualist Women

AIM's Director attended the International Day of Mutualist Women, which took place in Abidjan, Côte d'Ivoire, from 4 to 5 March. It was organised by PASS, a programme to support social strategies in Africa. The conference was organised with leading women of African mutuals from countries of the West African Monetary Union (i.e. Benin, Burkina Faso, Côte d'Ivoire, Guinea-Bissau, Mali, Niger, Senegal and Togo) and Europe. Women play an important role in mutual societies in Africa. PASS organised this meeting of leading women from mutuals to provide them with a platform for exchanging experiences and information on the solidarity actions they are taking in their countries.

The conference made it clear that women everywhere face the same difficulties, such as how to achieve a good work-life balance, the role of women in the health sector and how to strengthen the role of women in the management structures of mutuals. To mark the occasion, PASS has developed a website for the international network of mutual women, which aims to connect women around the world to share experiences and knowledge.



3.2 Latin-America

Exchanging experiences regarding ICT

Latin-American members met regularly during AIM's General Assembly meetings. At those meetings, ICT tools have been given a preferred place.

In 2018, they discussed the potential of eHealth solutions to chronic disease management. The latest Belgian developments in the field and participants briefly discussed the potential benefits of eSolutions in their respective contexts while highlighting some upcoming challenges and limitations.

In June 2019, the Committee exchanged experiences with Luxemburgish experts on eHealth. The meeting allowed to highlight the minimum requirements for eHealth and more specifically electronic health records to be up scaled and reach their full potential.

In November 2019, AIM organised a study visit in collaboration with the Belgian Intermutualist Centre (CIN). The meeting allowed participants to get a better understanding of the electronic exchange of data between Belgian mutuels and providers, as well as the coordination of homecare around elderly people. A Committee meeting was also organised on the issue of 'ICT tools for mutuels'. Members could expose their best practice and discuss upcoming challenges.





The Presidium visits Latin-American Members

In March 2018, AIM was welcome by its Argentinian member CAM in Buenos Aires and by Uruguayan UMU in Montevideo. They had organised an interesting programme to allow AIM's Presidium members to get a better understanding of the realities of mutuals in both countries. President Christian Zahn, Vice-Presidents Matthias Savignac, Abdelaziz Alaoui, and Elisa Torrenegra, Treasurer Alain Coheur, and Jessica Carreño Louro from the AIM secretariat, were part of the journey. Activities included an International Seminar which was attended by around 200 people. In Argentina, AIM representatives met the Permanent Commission on "Cooperatives, Mutuals and Non-Governmental Organizations". They also met the President of the National Institute of Social Economy (in Spanish INAES), with whom they discussed the importance of the movement for social development and for social cohesion. The Argentinian Superintendence of Health Services (ASSS) was also part of the program. This is the government entity responsible for regulating and controlling healthcare sector actors. It ensures compliance with the policies in the area of promotion, preservation and recovery of the population's health and the effective realization of the right to enjoy the health benefits established under the current

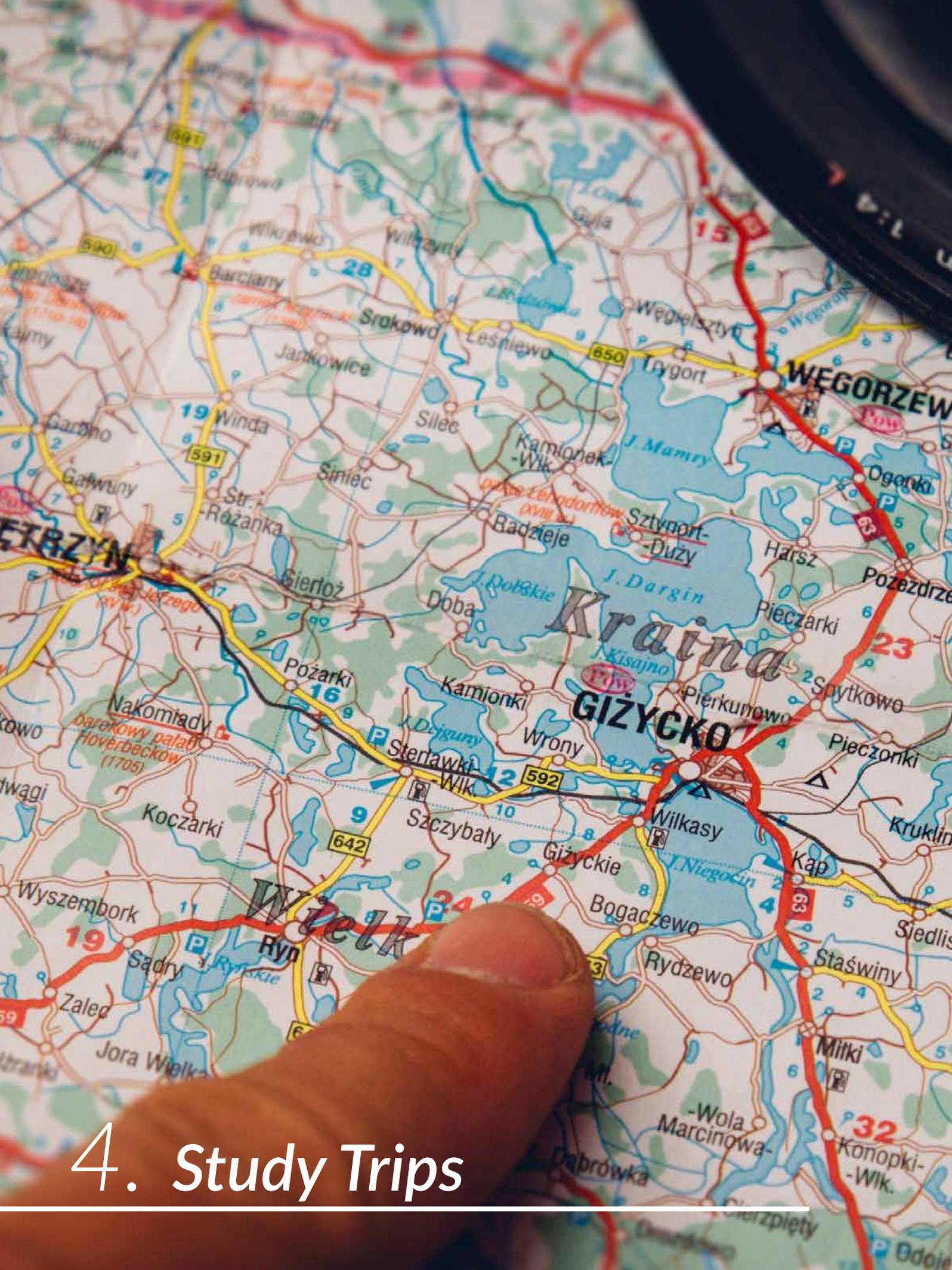
legislation.

The AIM President and other Presidium members visited the Spanish Hospital, in the city of La Plata. The Hospital was inaugurated in 1977 and created by Spanish immigrants in order to "cultivate the body and minds" of its affiliates. The AIM delegation also travelled to Rosario, 300 km North from Buenos Aires, which is considered the Capital of Mutualism in the country for the number of mutuals which are active in the city. The Mutual of Affiliates to the Medical Association of Rosario (AMR) and the Federation of Mutualist Entities of the Province of Santa Fe were visited.

On 22 March 2018, an International seminar organised by CAM gathered around 200 mutualists around the globe. On the occasion of the event, AIM published the Press Release: "International Seminar reaffirms the Importance of Mutualism in answering 21st Century Challenges".

The AIM delegation also crossed the river of La Plata to visit its Uruguayan member the Union of Mutuals of Uruguay (UMU). AIM Presidium members took part in a debate at the National Institute of Cooperativism (INACOOP), which was opened by Ernesto Murro, Minister of Labour and Social Security of Uruguay. After the panel, AIM delegation visited UMU's member entities: the Spanish Association, Cutcsa and Casa de Galicia.





4. Study Trips



4.1 Health Systems Reform

Promote the sharing of information between members is an important activity of AIM. Concerned by the little information AIM members have from each other, the working group had decided to focus its activities on establishing an international comparison of the role of mutuals/health insurance funds in the health system in their home country by analysing the different services and programs they offer.

The objective of these meetings was to learn about the functioning and the role of mutuals/health insurance funds in other countries to be able to compare their activities around the globe in order to understand how they work, the role and power of mutuals/health insurance funds on each of them and the people in charge of those organisations. It is very difficult to get to know the whole health system of a country. Instead, AIM members were asked to focus on the exchange of the services and programs they offer, such as prevention programs, how the reimbursement of generics works, etc. Most of this information can be found on the websites. AIM members should explain their offers on their websites in order to exchange information and to learn from each mutuality's successes, weaknesses and challenges.

The workshops were supposed to contribute to strengthen the relationship and to allow for better collaboration between members by enabling a better understanding of the different healthcare systems, thus strengthening the role of the AIM as an international platform.

Study trips were made into the following countries:

January 2017	London, UK	AIM: Benenden
October 2017	Zurich, Switzerland	AIM: santésuisse
May 2018	Budapest, Hungary	AIM: Hungarian Health Insurance Fund
January 2019	Paris, France	AIM: Mutualité Française
October 2019	Vilnius, Lithuania	AIM: Lithuanian Health Insurance Fund



4.2 eHealth

February 2018 - Utrecht

AIM visited Trimbos International, the Dutch Institute of Mental Health and Addiction, a non-profit research and knowledge centre located in Utrecht. The study trip focused on Trimbos' activities as a centre of innovation. Trimbos develops healthcare digital applications that help with the support of better mental healthcare for all age groups within the Dutch population.

During the meeting, AIM members had the opportunity to learn more about Trimbos, an independent institute founded in 1996. Its more than 200 employees, a third of which are researchers, work on projects financed by the Dutch government, the European Commission, municipalities and other private donors. The institute focuses on 5 main themes: alcohol addiction, tobacco consumption, drugs addiction, common as well as more severe mental health disorders. Its work mainly revolves around the development of digital and eHealth solutions, the development of clinical guidelines and standards of care in line with health professionals as well as the conduct of health economics analysis.



A number of Trimbos projects aiming at solving specific problems were presented: the development of a video game to help high-school students cope with depression and mental illness among their peers. Another intervention is specifically aimed at helping return to work for employees after 4 to 26 weeks of absence from work. Trimbos also gave a sweeping overview of its digital and eHealth solutions.

Trimbos has many internet portals dedicated to specific diseases and mental ailments. One includes for instance a self-test for depression that was completed over 80.000 times from September 2016 up to December 2017. A test on alcohol consumption is also made available by Trimbos as well as a dedicated mHealth application to help reduce alcohol intake. Participants also heard about the Dutch mental health system, that is characterised by a high number of professionals and beds in comparison to OECD average and with a satisfactory outcome for patients (e.g. a low level of unmet medical needs). The system was subject to many policy changes from 2008 to 2015 in order to shift from inpatient to outpatient care leading to a significant decrease of numbers of patients in specialist mental health care.

Still, financing remains fragmented and objectives are not aligned between municipalities, that need to organise mental health services, and insurers, who also have a responsibility in this field. The rest of the visit consisted in the presentation of Trimbos' helpline for gambling, alcohol, tobacco addiction and drug use, activities to help counter alcohol and tobacco-related harm as well as virtual reality glasses that are developed to help empathy among health professionals and carers dealing with Alzheimer's patients.



5. Communications



A new logo

The previous AIM logo dated from 2014, which was then redesigned together with the Communication Task Force. Mid-2017, the revamp of the AIM website was the occasion to refresh it to make it more attractive and user-friendly.



AIM Healthcare and social benefits for all



Twitter

The last triennium ended with 900 followers. Today, AIM has over 1650 followers. It earned in average 2 retweets and 3 likes per day. AIM has increased considerably its visibility on Twitter, which has become an unneglectable tool to support the organisation's lobby activities.

Videos

AIM decided to make use of a new communication tool: videos. The two main objectives were on the first hand to raise awareness on the organisation, the mutual model and social economy and to use them as a support to lobby activities. A series of 8 videos were published so far.

Output:

- [AIM Teaser Aftermovie General Assembly 2017](#) - July 2017
- [AIM - about us](#) - July 2017
- [TFAs? AIM recommendations](#) [PR series #1] & [Short version](#) - January 2018
- [What is a healthcare mutual?](#) [What is? series #1] - January 2018
- [What is Social Economy?](#) [What is? series #2] - June 2018
- [AIM Memorandum \(Full\)](#) & [short version](#) - June 2019



AIM in the Press

AIM has also increased its visibility in European Press. It was interviewed by Politico at several occasions and its events and publications were covered by several media. Contacts with journalists now take place on a regular basis and a trust relationship has been established.

Work Programme

In November 2017, AIM published its Work Programme for the period 2017-2020. It contained the main priorities for each working group and regions as well as a description of the general trends and the direction the organisation would work in.

Output:

- Article "AIM calls for European Action with regard to Vaccination Hesitancy" in "The European Files" – Issue: November 2019 – n°60
- „Europa nach der Wahl – das Spiel beginnt aufs Neue“ – Ersatzkasse Magazin – 4th Issue 2019
- „Schrittweise zu fairen Arzneimittelpreisen“ - Ersatzkasse Magazin - 1st Issue 2020
- „Was erwarten Sie von der deutschen EU-Ratspräsidentschaft mit Blick auf Gesundheitspolitik?“ – Ersatzkasse Magazin – 4th Issue 2020

Memorandum & one pager

On the occasion of the European 2019 Elections, AIM published a memorandum on its priorities for European Institutions. Both the content and layout of the document were produced by the AIM team. The memorandum was available in English, French, German and Spanish. A one-pager summarising the document was also created in order to support AIM in its lobby activities towards EU officials.

AIM healthcare and social benefits for all

RECOMMENDATIONS

Ahead of the upcoming 2019 European elections, AIM offers the following recommendations to EU decision makers that it believes can deliver equitable access to healthcare for all European citizens.

- 1 Play a key role in prevention**
Champion health prevention and disease prevention as part of a 'Health in All Policies' approach. This will improve overall population health in all Member States, reducing the burden on healthcare systems.
- 2 Contribute to sustainable access to pharmaceuticals**
The increasing cost of pharmaceuticals is pressuring national healthcare systems. The institutions should prioritise negotiating incentives for innovative pharmaceuticals, seeking a balance allowing all citizens sustainable access to modern therapies without undermining innovation.
- 3 Encourage healthcare innovation at EU level**
Health innovation means more than new medicines or medical technologies. European research programmes should be used to accelerate the reform of healthcare systems, improving their effectiveness and efficiency.
- 4 Promote a more inclusive perspective**
Parliamentary committees the EU should encourage to include and establish healthcare mutuals, leveraging members in Latin America and Western Africa.
- 5 Make us a social economy actor**
Healthcare delivery, one that needs to be able to recognise the specificities of social members who participate in the Single Market is not a for-profit approach - an ideal model for them are not-for-profit and co-ops.

Healthcare institutions can help ensure equitable access to a social Europe with health at its heart.

AIM Healthcare and social benefits for all

Health at the Heart of a Social Europe

As Europe's health mutuals and health insurance bodies, AIM's members play a vital role in delivering the future of healthcare. Our members already use their expertise to bring affordable, accessible health coverage to almost 200 million people in Europe. Given fair access to the Single Market, they will also help eliminate existing health inequalities and raise overall healthcare standards. In addition, our member-owned, member-governed, not-for-profit approach is a model for the social solidarity that Europe's citizens value.

A better, stronger, more cohesive Europe

Europe's institutions can play a leading role. Lacking these health issues that drive national policies, such as vaccination coverage and solidarity over medical shortages. They can help make Europe's healthcare systems more efficient by promoting increased collaboration and data sharing. This can deliver a stronger, more cohesive Europe without eroding on Member State competences.

What is AIM?

The international association of Mutual Benefit Societies is an international umbrella organisation of federations of health mutuals and other not-for-profit health providers. It has 37 members from 20 countries in Europe, Latin America and Africa and the Middle East. 53 of its members, from 20 countries, are based in the European Union. AIM members provide compulsory and/or supplementary health coverage to around 200 million people around the world, including close to 200 million people in Europe, on a not-for-profit basis. Some AIM members also manage health and social services. Collectively, they have a turnover of almost €300 billion.

AIM members are either mutual or health insurance funds. They are:

- Private or public legal entities
- Solvency rated
- Not-for-profit oriented organisations, surpluses are used to benefit the members
- Democratically elected members play a role in the governance of the organisation

AIM WORK PROGRAMME 2017 2020

AIM memorandum for the European Parliament Elections 2019



6. AIM Bodies



Honorary Post

Geert Messiaen, former General Secretary of the Belgian Union National des Mutualités Libérales, was appointed honorary member at AIM General Assembly in Luxemburg, in June 2019. Mr Messiaen was chair of AIM working group on health and environment and a strong defender of the cause. He was the engine behind AIM declarations on air pollution and was key in keeping AIM involved in the fight for a better environment for better health.



Tributes



President of CIRIEC International, and Vice-President of the APM-Redemut, Jorge de Sá was a strong advocate of mutuals and the social economy, He dedicated part of his career to the study and defense of the role of Social Economy, having been directly involved in the creation of a new legal and institutional framework of Social Economy in his country, in particular in the process of the newly created Portuguese Confederation of Social Economy..

Malte Enderlein was Head of Unit 'Policy /Legislation' and Deputy Head of Unit 'Policy and Autonomous Management' at vdek. He was supporting our President Zahn for all this activities in AIM. Malte was an active member of the European Affairs Working Group and Mutuals Working Group. He was a person of integrity and an honest and tireless promoter of AIM.



Ron Hendriks was President of AIM from 2002 to 2005 and was nominated Honorary Member. He was a representative of AIM Dutch member ZN. He was a highly appreciated President of our Association. He is remembered for having a very positive mindset and for promoting AIM with all his heart.

Hans Bender was a highly respected member of the AIM General Assembly and Board of Directors from January 2006 to December 2013, as representative of AIM German member vdek.



Dr. Wolfgang Schrörs was deputy member of the AIM General Assembly and Board of Directors between February 2018 and November 2019 as a representative of AIM German member vdek.



Presidium



“

I feel pride and hope after these 9 years working for AIM. I am proud of our achievements in the fight for better health and reduced inequities. I am proud of the way solidarity continues to be our red thread in all our activities but also in the relationships between our members. I am proud of my dear Presidium colleagues and of our staff in Brussels for their commitment to their work and to serve our organisation. I have hope because I know that AIM is able to turn the many challenges that lay in front of us into opportunities, thus participating in making universal access to health care for all a reality across the world. I have also hope, because I truly believe in the benefits and further development of our mutualist model in the years to come.

”

Christian Zahn, President

“

The start of the Commission Von der Leyen in December 2019 can be an important turning point for the future of health policy in Europe. I am glad that its mandate reflects many of the priorities we have set ourselves for the coming years. Together with the commission, with our members and with our AIM team we will continue our efforts for access to good healthcare for all Europeans.

”

Loek Caubo, Vice-President for the European Region



“

The last year of this triennium showed incredible changes in the place of healthcare in our societies, in all societies. The Covid19 pandemic hit all countries around the world. It dramatically underlined the need of a strong social protection. Our fight for social justice, our fight to promote better healthcare policies, our fight to regulate the prices of medicine, our fight to promote social economy enterprises and mutuals : all these things are even more important for the period to come. We must stand strong and work for the world we want to live in. Aim and its members have to engage themselves in these collective challenges. The great works we have already done have to be amplified. It's all together that we will succeed in this important task.

”

Matthias Savignac, Vice-President for International Collaboration

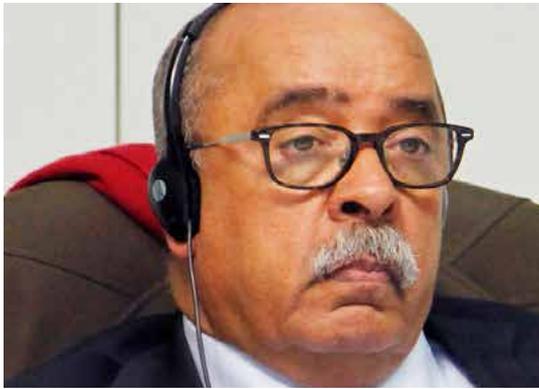


“ I've been engaged in AIM's work and life for more than 20 years ! I don't recall another period of time having gone so fast, like these last three years. We all really did work... AIM and mutuals are now better known, well respected, in every field it operates. We didn't do it all, but we are pretty much closer. Thanks to a Great President, Christian Zahn, and thanks to a Great Team, AIM's staff. Thank you very much. It has been an honor. ”

Pedro Bleck da Silva, Vice-President for Mutuals and Social Economy

“ The presence of Latin America in AIM helps us to grow and become stronger in this way of life we have chosen, working for the common good. In recent years, having belonged to AIM allowed us to make its developments visible and to learn from European developments on issues of great importance to mutuals in the region, such as clinical history or the care of chronic diseases. The visit of the Presidium to the region allowed the European members to participate in the day-to-day life of the region's mutuals and to see their great potential for services in their communities in their real social context. ”

Elisa Torrenegra, Vice-President for the Latin-American Region



“ The last three years have seen a revival of AIM's activity in the Africa and Middle East region. I am pleased with the success of the various missions organised in the field as well as the impact of the Lomé conference. The COVID-19 crisis is a reminder of the urgency of the mutualist recommendations made at the end of the conference. Mutuals will continue to contribute to the creation and strengthening of social protection systems, which they call for. ”

Abdelaziz Alaoui, Vice-President for the Africa & Middle-East Region

“ At the end of this period, thanks to prudent management, our association was able to build up sufficient reserves to deal with the many uncertainties that weigh on our future. A financial solidity that has allowed us not to increase membership fees while leaving us room for manoeuvre to sustain and develop our activities. Many thanks to our members who place their trust in us on a daily basis. ”

Alain Coheur, Treasurer



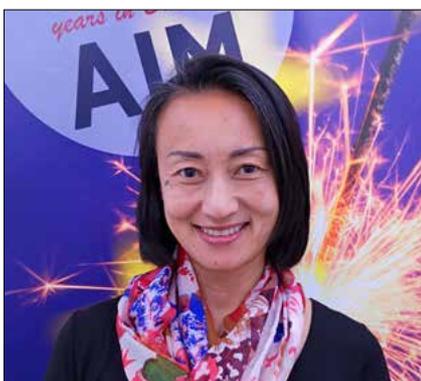


Secretariat



Sibylle Reichert became AIM Executive Director of AIM in June 2019, after the departure of former Director Menno Aarnout. Sibylle joined from the Federation of the Dutch Pension Funds, where she worked from 2009 to 2019. After studying French, Spanish and Business Administration, she started her career in international companies as a marketing and project manager in Germany. She has lived in Brussels since 2003 and worked for the European Association of Paritarian Institutions of Social Protection (AEIP) until 2009. During her time at the AEIP, Sibylle has collaborated with AIM on long-term care projects.

A German national, she speaks French, English, Spanish, and Dutch fluently and has basic knowledge of Italian and Portuguese.



Patty (Phuong) Truong joined the AIM team in September 2019. She has a background in corporate accounting working previously in hi-tech companies in the Silicon Valley. She volunteers her time with an ADHD non-profit in Brussels working with children and adults who learn and work differently. To this end she is certified as an NLP and Body Talk coach-practitioner bringing awareness to neurodiversity and to the whole body mind wellness connection. Patty joined the AIM team to assist with administrative functions and event planning while Cristina was on medical leave. She continues with the team on a part time basis to help streamline processes so that the AIM team can better serve their members.

Internal Audit Committee

From 2017 to 2019, the AIM Internal Audit Committee was chaired by Jürgen Hohnl, Director of IKK. The Committee was composed by the following people: Jürgen Hohnl, Alain Coheur, Christian Horemans, Arielle Garcia, Daisy Verschueren and Malte Enderlein, who passed away in July 2019.

The Internal Audit Committee meets twice a year. The objective of the meetings was to get oversight over the financial situation of AIM taking into account the past result and working on the respective future budget for the year to come. The Internal Audit Committee has proposed to raise the membership fee due to the potential unsustainable financial situation of AIM in the future. To this end, a projection has been made until the year 2022 with different scenarios. The IAC proposed to the Presidium to take a strategic look into the future of AIM by taking into account the financial situation and the ambition of AIM members.



7. *Finances*



The Finances of AIM from 2017 to 2019 have shown a stable positive result. While a negative result has been budgeted for all those years, AIM ended the financial years 2017, 2018 and 2019 with a positive result.

In 2017, AIM showed a positive result of € 11,565. The positive result was the consequence of a change in personnel. Furthermore, some savings were made. The membership fees dropped from a budgeted € 843.097 to € 829.903.

In 2018, AIM showed a positive result of € 17.565. The positive result was due to savings in salary, but also the general expenses. The budgeted membership fees were € 806.576, the final income from membership fees was €802.457.

In 2019, AIM again showed a positive result of € 71.109. This is due to changes of the director and the long-term absence of two members of the personnel. The income of membership fees went down from budgeted € 820.000 to € 801.650.

The positive result will add to the reserves of the AIM which amount to € 1.367.184 end 2019. The development of a lower income from membership fees will lead to a situation that is unsustainable on the long run.

Therefore, the BoD has adopted an increase of the membership fee by 1% in 2021 and by 1% in 2022.

Balance Sheet

Assets	2017	2018	2019
Fixed assets			
Tangible	8 919	5 228	1 538
Intangible	9 983	9 260	7 975
Financial	30 088	30 113	30 138
Current assets			
Short term account receivable	4 879	6 475	7 906
Disposable assets	1 247 696	1 231 949	1 294 793
Accruals and Deferrals	30 869	67 853	24 834
Total	1 332 434	1 350 878	1 367 184

Liabilities	2017	2018	2019
Equity			
Associative funds	239 707	239 707	239 707
Allocated funds	46 941	46 941	46 941
Results brought forward	891 884	909 448	980 557
Debts			
Accounts payable	34 425	9 698	12 773
Tax, salary and social security debts	84 500	96 940	60 127
Accruals and Deferrals	34 977	48 144	27 079
Total	1 332 434	1 350 878	1 367 184



Profit & Loss

Expenses	2017	2018	2019
RENT, SERVICES, MISSIONS, GOODS, MEETING COSTS, ETC.	326 185	275 015	300 119
SALARIES AND SOCIAL SECURITY	473 329	494 011	416 236
DEPRECIATION	5 528	6 839	7 225
OPERATING & FINANCIAL COSTS	16 826	14 152	14 261
TOTAL EXPENSES	821 868	790 017	737 841
INCOME	2017	2018	2019
CONTRIBUTIONS	829 903	802 457	801 650
OTHER OPERATING INCOME	3 530	5 125	7 299
TOTAL INCOME	833 674	807 581	808 950
RESULT	11 565	17 565	71 109



8. Annexes



7.1 Family Pictures



Antwerp - June 2017



Tallin - June 2018



Brussels - November 2018



Luxembourg - June 2019



Brussels - November 2019



7.2 List of publications

- 06.06.2017 Letter to President Juncker on the Future of European Health Cooperation
- 28.06.2017 AIM stresses the Importance of Mutuals in the Fight for Universal Healthcare Coverage.
- 29.06.2017 PR: Christian Zahn re-elected as AIM President
- 30.06.2017 PR: Big Data opens opportunities for improving healthcare when balanced with the right privacy of personal data
- 30.06.2017 PR: Care integration offers opportunities for AIM members to steer necessary change in health delivery
- 18.09.2017 PR: AIM public statement on the Juncker's Speech State of the Union 2017
- 27.09.2017 Joint PR: Exploring opportunities for collaboration between regulators and healthcare payers.
- 11.12.2017 PR: Vaccine Hesitancy, a public health threat to be tackled through multi-stakeholder collaboration

- 22.01.2018 Position Paper on TFAs
- 09.02.2018 PR: What payers think about the latest HTA proposal
- 02.03.2018 AIM Recommendations to tackle Vaccine Hesitancy in the EU
- 13.03.2018 Joint reaction to the Alcohol Industry self-regulatory proposal
- 22.03.2018 PR: International Seminar reaffirms the Importance of Mutualism in answering 21st Century Challenges
- 27.04.2018 PR: AIM welcomes the European Commission proposal for stronger cooperation against vaccine-preventable diseases
- 03.05.2018 AIM Position Paper on Digital Healthcare: The digital transformation must support solidarity-based healthcare systems
- 11.06.2018 PR: AIM agrees on position regarding the draft EC regulation on HTA and the Cabezón report
- 21.06.2018 AIM Declaration on Health in all Policies
- 01.10.2018 Mutuals governance challenged by European law
- 03.10.2018 HTA vote in the EP: much more meat on the bones, but it still needs a bit more cooking
- 15.11.2018 AIM memorandum for the European Elections
- 15.11.2018 AIM Declaration on Air Pollution and Health
- 26.11.2018 PR: EU Medical Devices Regulation: Patient safety must prevail

- 26.02.2019 PR: Medical Devices: Time to implement Regulations and increase Transparency
- 05.04.2019 PR: Mutuals and non-profit healthcare payers play a vital role in the achievement of Universal Healthcare Coverage



- 26.04.2019 PR: No Future of Work without Mental Health
- 23.05.2019 PR: We need more transparency on medicinal products markets!
- 05.06.2019 Joint PR: MoU between EC and the Spirits Industry fails to acknowledge consumers' right to information
- 29.11.2019 PR: State of Health in the EU hits the Bullseye!
- 04.12.2019 AIM Fair Pricing Paper
- 04.12.2019 PR: AIM calls for fair and transparent prices for pharmaceuticals
- 13.12.2019 PR: The EU Green Deal: an opportunity for public and planetary health

- 15.01.2020 PR: Health insurance funds and health mutuals welcome the Commission's reflections on a strong social Europe
- 14.02.2020 PR: AIM supports the need for a European approach to fight cancer
- 17.02.2020 Joint Statement – Prevention at the heart of Europe's Beating Cancer Plan
- 25.02.2020 PR: Artificial intelligence: great potential for not-for-profit healthcare insurance and for patients' needs
- 03.03.2020 AIM's reaction to the EU's Beating Cancer Plan Roadmap
- 04.03.2020 AIM Recommendations for the Future of long-term Care
- 09.03.2020 Memorandum on Gambling
- 13.03.2020 PR: AIM calls for a real social pillar to be included into the EU-Africa Strategy
- 16.03.2020 AIM publishes reaction to Farm to Fork Strategy Roadmap
- 18.03.2020 Joint letter to the European Commission on Covid19
- 23.03.2020 Position Paper: The impact of solvency II rules on mutual benefit societies in the sector of social protection
- 25.03.2020 PR: Time for pandemic solidarity!
- 20.04.2020 Gambling and Covid: AIM updates its memorandum
- 21.04.2020 Position Paper: Artificial intelligence in healthcare: a great potential in an ecosystem of trust!
- 22.04.2020 Position Paper: EU Collaboration on Vaccination
- 03.07.2020 AIM Recommendations on the Green Paper on Healthy Ageing
- 07.07.2020 Recommendations towards fair medicines prices in Europe
- 10.09.2020 AIM Mental Health Factsheet
- 23.09.2020 AIM Physical Activity Factsheet
- 02.10.2020 AIM Alcohol Factsheet
- 16.10.2020 AIM Healthy Diet Factsheet
- 18.11.2020 AIM Factsheet on Antibiotic Use



7.3 Credits

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Pp. 3, 11, 14, 22, 37, 56, 57, 63 (up)

Pp. 9, 11, 14, 20, 21, 23, 25, 27-29,
37, 38, 40, 41, 46, 54, 62 (up)

Pp. 2, 15, 24, 63 (down)

Pp.17, 19, 62 (down)

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Healthcare and
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