Dear members, dear friends,

At the beginning of our General Assembly, I recalled that this year marks the 25th anniversary of AIM’s move from Switzerland to Brussels. That decision proved to be advantageous: Brussels is not only the center of European institutions, but also a place of many important gatherings.

In my introduction then, I also indicated that we live in very turbulent times. I will not repeat the examples here - you all know them - but both geopolitically and in the politics of many individual countries, the achievements of our society are under pressure. Especially in these times, it is important that countries cooperate with each other, in Europe and globally. And that this cooperation is neither abstract nor over people’s heads, but rather becomes concrete. We must show that international cooperation is necessary to solve the problems of our time and to take away anxieties and uncertainties from people, and thus also show that those who rely on nationalism and false nostalgia offer false solutions and ultimately only worsen our problems.

In this special briefing you will again find an overview of all the interesting meetings we had in Brussels. I highlight two themes directly related to this: the role of mutuals in social economy and our preparation for the upcoming European elections. Indeed, both show that solidarity is a central core value in our societies and that only a social Europe has a future.

We made a good start in Brussels with our lobby for the memorandum and made valuable contacts. In the coming months, we will continue to invest in those contacts to highlight our messages as expressed in our memorandum. I call on all European members of AIM to also spread our priorities in their own countries, among their own candidates for the European Parliament.

We are also on the right track when it comes to international attention to mutuals and recognition of our role in social economy. We are making progress and together with our members we will continue to make the case nationally and internationally. Because it is mutuals that can contribute to social security and social justice in such turbulent times.

We are approaching the end of the year. I wish you beautiful and festive days and a happy New Year. But let us also remember all those people for whom there is no celebration at all, who are suffering and live in poverty and great uncertainty. Let us hope that the New Year brings light on the horizon for them too.

I hope to meet you all again in person at our next General Assembly, in June 2024 in the beautiful city of Prague!

Loek Caubo
Latin-America Committee

The Role of Mutuals in ensuring access to high quality Long-term Care.

26 October – The AIM Latin-American Committee met to discuss the global challenges related to demographic change, the rise in co-morbidities, and the consequent demand for long-term care (LTC). The first part of the meeting allowed members to learn from the European Care Strategy while the second part enabled them to exchange best practices in the provision of long-term care.

The European Care Strategy was presented by Jessica Carreño Louro, AIM coordinator of the working group on long-term care. She presented first the main challenges which the strategy aims to tackle. With 38.1 million people in the EU expected to need long-term care in 2050 (23.5% more than in 2019), the Strategy rightly aims at ensuring quality, affordable and accessible care services, with improved working conditions, gender equality and work-life balance for caregivers. The Strategy is a non-binding document, given the limitations of the European Commission’s competence when it comes to health or LTC. Yet, Member States have made a series of commitments which should lead to improvements in the sector like for example the appointment of national LTC coordinators and the submission of national action plans and progress reports. The European Commission will monitor progress through its European Semester, based on a sector specific European indicator framework which is currently being developed in collaboration with MS.

Members could then present their national experience.

Nazly Beltrán, Gestarsalud (Colombia) presented best practices in comprehensive and innovative care of some EPSs affiliated to Gestarsalud, which have obtained good results in terms of risk management. She started with the example of Mutual Ser, an EPS with 2,500,000 members. Today 29% of Mutual Ser’s affiliates are enrolled in one of the 20 risk categories created by the mutual and in 2022 a growth of 20.5% was observed in each of these categories. After identifying the risk population and with the help of a platform called “zona ser” (a means of communication or interaction that allows working in real time both with patients for authorization issues and with providers) patients are identified, screened, risk stratified and the patient is entered into the care routes through the network of providers. Care protocols are also defined for each of the cohorts and, additionally, a series of indicators are stipulated that allow Mutual Ser to ensure and permanently monitor the progress of each of its programs. Nazly also presented how the mutual “Anas Wayuu”, with a predominantly indigenous population of 72.18% and 65.24% residing in rural areas, ensures access to care.

Arielle García, from the French Federation of Mutuals (FNMF- France), started by explaining how mutuals manage more than 2,900 care and support services in her country. Arielle presented the example of the bigenerational house A.I.M.E.R., designed to bring together, under the same roof, older people in the early stages of dependency and/or cognitive illness, who want to benefit from a secure and friendly living environment, and students in the health professions. Living in the Maison bi-générationnelle is an added bonus for students in the medical or paramedical sectors. Students benefit from low-rent accommodation in the heart of Limoges and a 2-hour/week student contract, rewarding their presence and involvement with the seniors. The homes are equipped with home automation systems, lighting, electric blinds, centralised controls and remote assistance systems to provide maximum security and responsiveness in the event of an incident.

Rodrigo Geroni, from FeNAMMF (Argentina), then summarised the activities of the Federation of Trade Mutuals, associated with FAECYS, the Argentine Federation of Trade and Service Employees, which has a social security scheme for 1,200,000 workers, the largest in Argentina. Social security contributions are low, because wages are low and given that 40% of employment is in the black economy, which breaks the solidarity
system. Mutuals play a key role here, covering what the social security system does not cover, including care for older people. Rodrigo highlighted the challenge posed by the lack of funding. The FeNAMMF is trying to associate commercial mutuals with therapeutic care cooperatives in order to cover these care needs. They are also working to train the people who make up these cooperatives, by collaborating with university careers that provide qualifications that improve the labour force and also the qualification of the wages that are paid.

Nora Landart, from CAM (Argentina) explained how her organization rethinks and tests with concrete experiences the role of mutuals in relation to care. She began by describing the theoretical, methodological, ethical and political dimensions. She emphasized the strategic planning proposed by CAM to the mutuals, which proposes to articulate within the sector, cooperatives and mutuals, compensating the weaknesses of each with the strengths of the other and vice versa. The strategy includes leadership training, which is articulated in collaboration with the university. Nora closed with the concrete experience of the pilot project “cuidarte bien” in the province of Córdoba, Argentina, a care cooperative created by CAM, which has 55 professional caregivers providing services. In this way, the mutual contributes to guaranteeing access to an integrated, accessible and quality long-term care service.

Julio Martinez, from the Spanish Association (Uruguay), explained how the system in his country strictly distinguishes between health care, from prevention and health promotion to palliative care, on the one hand, and on the other hand, long-term care for dependent persons, which is the responsibility of the National Care System. His organisation has always focused on health care. However, the increase in life expectancy led them to begin to venture into the subject of care. The Spanish Association has twice as many older adults as the percentage of the country, which makes addressing the issue of caregiving a very relevant issue for the organization. The Association provides home care to patients, both in terms of medical care and nursing care, and has a complementary home interaction system and a palliative care system. In 2015, they created a collateral company, the non-profit corporation “Familia Acompañantes”, dedicated to the accompaniment of patients in sanatorium and at home. A year ago, La Española also took over the “Hogar Español”, a home for older people.

As a conclusion, Alejandro Russo, Vice-President for the AIM Latin-American Region, summarised the exchanges, highlighting again the relevance of a topic, which will stay on the agenda of the Committee and of AIM for the coming years.
Africa & Middle East Committee

Improving the quality of services towards affiliates and population buy-in to UHC

Brahima Traoré, Director-General of MUGEF-CI, presented the deployment of the Carte Unique Intelligent (unique smartcard – CUI), a solution for the electronical management of services provided by MUGEF-CI. The CUI:

- Facilitates access to benefits by dematerializing medical prescriptions and the delivery of care or electronic medical records
- Secures transactions and reinforces control at the mutualist’s point of contact
- Helps centralize the management of health insurance schemes via web and shortcuts the provider network interconnection.

The CUI ecosystem consists of the card that gives its beneficiaries access to the mutual’s products, a computer that enables healthcare professionals or the mutual to take care of the beneficiaries, consult their history, issue invoices and provide partial access to the medical file, and act as a terminal that enables authentication, prescription and dispensing operations. MUGEF-CI has a total of 4,775 active partners to deploy the cards, with a further 1,926 to go and 1,102 terminals available.

Faced with the challenges encountered with cards and terminals, such as difficulty in reading them, sharing members’ data with third parties, or technical constraints in reading certain terminals, MUGEF-CI has entered into partnerships, namely with FAMOCO, with the aim of constantly improving the performance of its cards and terminals and in order to better protect users’ data, improve card reading and authentication, and facilitate the use of the user interface.

Abdelmounaïme Sami, Chairman of the Board of Directors of MUPRAS, issued a presentation on improving the quality management of mutual health insurance services: the example of MUPRAS with their ISO 9001 certification. MUPRAS’s decision to seek ISO 9001 certification, a quality management system standard, was motivated by several factors, including the quest to strengthen the confidence of members and partners, improve the credibility and reputation of MUPRAS, and the need for MUPRAS to reinforce its position within the Moroccan healthcare system. Certification has helped reduce errors thanks to better-defined processes, fostered open and more transparent communication within MUPRAS, and enabled audits of MUPRAS entities to create a process of continuous improvement and implementation of corrective actions. Lastly, certification has enabled the increase of internal efficiency in a context of cost control. Claims, for example, are processed within a maximum of 5 days. For reimbursements, the response time is 48 hours. Certification has also facilitated the promotion of social initiatives. The certification process led to the production of procedures, internal documents and performance indicators by the MUPRAS staff.

The meeting was followed by a session on “Charting a path towards effective population buy-in to UHC within strong health systems”. Henri Kamvunze Esq., Executive Secretary of POMUCO (Plateforme des Organisations Promotrices des Mutuelles de Santé en RDC – Platform of Organisations Promoting Mutual Health Insurance in the DRC), presented the progress made towards the deployment of UHC in the country. The President of the DRC promulgated the law on UHC in the DRC in
March 2023, which modifies and completes the law of December 13, 2018 already regarding UHC. The UHC law institutes three health insurance schemes: the compulsory scheme, the complementary scheme and the medical assistance scheme for indigent populations. These schemes are broken down into sub-schemes. The representative of the mutualist actors was integrated into the UHC steering committee following lobbying by the mutualist actors based on the contents of the Lomé Platform and the Dakar Declaration. Within the framework of the UHC, mutuals have the choice of either being in charge of collecting contributions or being a delegated management organisation in charge of strategic purchasing of healthcare. The legal bases for the collection of contributions, and the establishment of mutual federations to act as the interface for the collection of contributions, are still outstanding issues.

Babacar Ngom, Chairman of the Board of Directors of the Mutuelle de Santé des Agents de l’État du Sénégal, then presented the MSAE’s contribution to health coverage in Senegal. Membership of the MSAE is open to civil servants working in the public sector, universities, local authorities and national companies. Members who are retired, on secondment or on leave of absence retain their rights. MSAE also works in partnership with professional associations, NGOs and local authorities to ensure access to healthcare services for non-member populations. Between 2018 and 2023, 8,470 people benefited from the MSAE’s work in a variety of areas: awareness-raising and preventive health initiatives (conferences, walks), blood drives for hospitals and blood banks, and the opening of healthcare centres (medical-social centres - dental practices) to welcome non-member populations, offering quality care at social rates. In 2022, the 5 MSAE dental practices treated 13,126 patients, including 2,109 members and 11,017 non-members.
Joint Committee Meeting

What legal frameworks for a flourishing social and solidarity economy in which mutuals can play their part?

After an introduction from Loek Caubo, Chantal Line Carpentier, Co-Chair, UN Inter-Agency Task Force on Social and Solidarity Economy (UNTFSSE), presented the UN Resolution Promoting the Social and Solidarity Economy for Sustainable Development. The Resolution was adopted in April and sponsored by Chile, Senegal and Spain with support from France. Other co-sponsors joined. The Resolution takes up the definition of the social and solidarity economy that was adopted by the International Labour Conference in June 2022. It has four operating paragraphs aimed at encouraging Member States, UN agencies as well as multilateral, international and regional financial institutions to support and enhance the SSE as a possible model for sustainable economic and social development. It also requests the UN Secretary-General to prepare a report, within existing resources, in collaboration with the UNTFSSE, on the implementation of the present resolution. The UNTFSSE is currently reinforcing its governance and finalising its 5 priorities for its 2024 – 2026 strategic programme: 1. Support UN Member States in enabling policy measures and frameworks on the SSE; 2. Promote Education & Capacity Building on the SSE; 3. Promote Localization of the SSE; 4. Promote Effective Financing and support of SSE entities; and 5. Statistics to measure impact of SSE.

Simel Esim, Co-Chair, UN Inter-Agency Task Force on Social and Solidarity Economy (UNTFSSE) introduced participants to the International Labour Conference’s Resolution concerning decent work and the social and solidarity economy. To Ms Esim it was very important that the definition of SSE encompasses the various realities of the concept across the globe, that the text emphasises informality. National implementation of the recommendations is now key, and barriers and obstacles should be identified and lifted. On their side, the International Labour Organization has adopted a seven-year plan to implement the Resolution, through research, statistics, partnerships, policy development, dialogue and capacity building. ILO focuses on five areas: care economy, informal economy, just transition, supply chains, and the role of SSE organisation in crises and post-crisis situations. In terms of research, 11 country research are ongoing, including with 6 African countries in order to adapt international definition to the national context. On policy, ILO is developing guidelines on SSE legislation development. The UNTFSSE developed a social economy awareness-raising tool. Ms Esim invited AIM to work with them on all these aspects.

The keynote speakers were then joined by Sarah de Heusch, Director at Social Economy Europe, Alejandro Russo, AIM’s Vice-President in charge of Latin America, and Abdelaziz Alaoui, AIM’s Vice-President in charge of the Africa and Middle East for a panel discussion moderated by Alain Coheur, Director for European and International Affairs for Solidaris and member of the European Economic and Social Committee. The debates highlighted how vital it is to raise awareness amongst the officials of the United Nations on the key role mutuals play in the achievement of the sustainable development goals.

Sarah de Heusch stressed the positive impact of the UN and ILO resolutions, which reinforce regional policies such as the EU Social Economy Action Plan. The momentum at European level is unique and it is now necessary to build bridges between the different families of the social economy. She also called for the creation of specific statistics to show the added value of the social economy ecosystem, focussing on indicators that go beyond GDP and that measure the qualitative input of those organisations when it comes for example to social and territorial cohesion and social innovation.

Alejandro Russo reminded of the importance of the resolutions for the social and solidarity economy and for mutuals more particularly as they provide global visibility to those organisations which play a role in the achievement of each and every SDG. The resolutions will be key tools to influence public policies in the countries of the region. Alejandro Russo described
how varied the legal landscape is in his region, referring to Argentina, Colombia and Uruguay. His country has a specific law on mutuals and an agency (INAES) in charge of controlling them. In Uruguay, no specific regulation exists. Mutuals are considered private associative not-for-profit entities. Yet, a wide regulatory framework rules healthcare provision. Finally, in Colombia, it is the law 100 from 1993 which creates the whole social security system and also regulates the so-called “health promoting organisations” (Empresas Promotoras de Salud – EPS).

Abdelaziz Alaoui highlighted the same diversity in the landscape of mutuals and social economy organizations in Africa and the Middle East, where mutuals have been present since at least the beginning of the 20th century. Despite that presence in a number of countries, their role in the healthcare system varies greatly. It is against this backdrop, where there is a certain ambition in the role entrusted to mutuals, but also legislative uncertainty in some countries, that the Resolutions of the International Labour Conference and the United Nations were adopted. Abdelaziz Alaoui stressed the need to organise events and initiatives to appropriate the content of the recommendations at local level and ensure the recognition of mutuals at national level.

During the exchanges, some countries were highlighted as best practices, such as Spain which has a law and political strategy since 2011, France and its social and solidary economy law, Senegal, which has a specific law and ministry on social economy, and Argentina, where half of the population is affiliated to a cooperative or a mutual. The discussions allowed to stress the need to unite all social economy actors and to put mutuals at the table of international fora. It also opened avenues for cooperation with ILO and the UN.
European Affairs Committee

“Crucial Years for Solidarity and Health - AIM’s Manifesto for the upcoming European elections!”

On 8 November, AIM European Affairs Committee discussed the AIM memorandum for the upcoming elections “Crucial Years for Solidarity and Health”. AIM President Loek Caubo welcomed the participants and introduced the discussions by mentioning the challenges people are facing, including climate change, demography, expensive medicines and health inequalities.

In the first panel on the promotion of solidarity based and not-for-profit health systems, Eric Chenut, President of Mutualité Française discussed with Member of European Parliament (MEP) Sirpa Pietikäinen about the promotion of solidarity-based health systems. Eric Chenut emphasized that mutuals can quickly adapt to new situations such as the COVID crisis. For example, mutuals quickly entered partnerships with psychotherapists, and were able to offer services that could not even be offered in this form by any other health insurance companies. MEP Sirpa Pietikäinen emphasized that populations will have more care needs in the future and she wishes that all Member States would give the care to mutuals as they are not for profit and do not look at patents as “profitable clients”. She offered to continue working with AIM in the future.

In the second panel on fair pricing of medicines, MEP Kathleen van Brempt highlighted that the EU and countries outside the EU need accessible and affordable medicine. Transparency is in her opinion the key issue. Ulrike Elsner, CEO of the “Verband der Ersatzkassen” (Germany) added that the pharmaceutical packages, the joint vaccine procurement, and the European regulation on HTA are positive EU initiatives. It is necessary to create incentives for the industry and to guarantee transparency, possibly accompanied by sanctions. It is normal that prices are not part of the legislation, but the current price development is no longer affordable for social security. Olga Solomon from the European Commission said that it is not possible to guarantee access with the legislation alone. Member States are responsible as well.

AIM Vice-President, Verena Nold, and Maya Matthews from the European Commission discussed the European Health Data Space. Maya Matthews explained that the Commission started with the healthcare sector because it gives the most added value. Verena Nold agreed that good quality data is important for telemedicine and AI. She adds that health apps are also important but there is the danger that the most vulnerable cannot use them. Maya Matthews
said that training in digital skills is key.

In the fourth panel, MEP Manuela Ripa discussed health in all policies with Rain Laane, CEO of the Estonian Health Insurance Fund. While Manuela Ripa pointed out that there is a lack of health literacy and that good sense should prevail over economic interests, Rain Laane explained how they try to put prevention in the focus in Estonia. They renamed the Estonian sickness fund in health insurance fund.

Alejandro Russo and Abdelaziz Alaoui, both Vice-Presidents of AIM, were discussing International Cooperation to achieve Universal Healthcare Coverage in the last panel. Alejandro Russo emphasized that mutuals are very important for social issues because with their democratic and not-for-profit structure they are the most efficient, when it comes to access to healthcare for all. Abdelaziz Alaoui said that it is important that mutuals expand their health coverage to achieve universal access to healthcare.

After the conclusions of the Executive Director Sibylle Reichert, Eric Chenut, Ulrike Elsner, Verena Nold, Rain Laane, Alejandro Russo and Abdelaziz Alaoui named the most important issues for them in the next legislative period: digitalisation of healthcare in Europe, affordable medicines, solidarity, prevention, mental health, water problems and international pandemics.
AIM’s General Assembly was organised in the premises of our Belgian member Solidaris. For the first time, the number of days was reduced to two in order to have a more compact and intense meeting. It was also a special edition of our meeting, as AIM celebrated its 25 years in Brussels.

As the meeting was organised at Solidaris’ headquarters, Jean-Pascal Labille held a keynote speech where he focused on the promotion of the one health approach, the need to put patients in the centre of attention and to defend a more social, open, democratic state where the most vulnerable are protected through a health and social system that is based on solidarity such as the mutual model. During the general Assembly, we were proud to welcome a new member: the MSAE, the Mutual for the civil servants in Senegal.

AIM members adopted the long version of AIM’s memorandum. The short version had been adopted in June in Geneva. This longer version should allow for interested parties to dive deeper into AIM’s calls and read the concrete proposals that AIM is putting forward for the upcoming elections.

The Vice-Presidents presented the works of their respective region or area of responsibility. We heard about the latest developments in Latin America by Alejandro Russo, Africa and the Middle East by Abdelaziz Alaoui and Europe by Verena Nold. AIM’s members were also informed about the works in the Mutuals Working Group by Yannick Lucas and in Communication by Marion von Wartenberg.

Loek Caubo presented the status of reflections concerning AIM’s financial future. The concrete proposals will be prepared by both the Presidium as well as the Internal Audit Committee.

Based on a questionnaire, AIM developed the work programme for the mandate of this new Presidium. The priorities are aligned with AIM’s memorandum. A separate work programme has been developed for Africa and the Middle East and Latin America.

Finally the General Assembly adopted the proposals for the chairs of AIM’s working groups.
Special Thanks
AIM warmly thanks Ms Ann Deleu, Sandra Leenaerts, Nancy Vander Cruyssen and Lorena Randazzo, as well as Mr Bart Ceuppens, for their support in the organisation of our meetings.

Upcoming meetings
The next General Assembly will take place in Prague on 11 and 12 June 2024.

Presentations are available upon request.