



EXECUTIVE AGENCY FOR HEALTH AND CONSUMERS

Director

## GRANT AGREEMENT FOR AN ACTION - MULTIPLE BENEFICIARIES

AGREEMENT NUMBER — 2010 23 02

The Executive Agency for Health and Consumers (EAHC) (hereinafter referred to as "the Executive Agency"), acting under powers delegated by the Commission of the European Union (hereafter referred to as "the Commission"), and represented for the purposes of signature of this agreement by Mr Luc Briol, Director, or his duly authorised representative,

of the one part,

and

- (1) **Bundesministerium für Gesundheit (ATNA)**  
 Radetzky str. 2. 1030 Wien  
 AUSTRIA  
 Public law entity  
 VAT number: ATU 57161 788

hereinafter called "the co-ordinator", represented for the purposes of the signature of the present agreement by **Dr. Clemens-Martin AUER, General Director**

and the following "co-beneficiaries":

- (2) Koordinační Středisko Pro Resortní Zdravotnické Informační Systémy (**KSRZIS**)  
 – established in Czech Republic
- (3) Národné Centrum Zdravotníckych Informácií (**NHIC**) – established in Slovakia
- (4) Országos Egészségügyi Stratégiai Kutatóintézet (**ESKI**) – established in Hungary
- (5) Department of Health and Children (**DOHC**) – established in Ireland
- (6) Department of Health (**DH**) – established in the United Kingdom
- (7) Directorate General for Public Health and Foreign Health. Ministry of Health and Social Policy (**MSPS**) – established in Spain
- (8) European Health Management Association Ltd (**EHMA**) – established in Ireland

- (9) Ministry of Health of the Republic of Slovenia (**MHS**) – established in Slovenia
- (10) Pharmaceutical Group of the European Union (**PGEU**) – established in Belgium
- (11) European Health Telematics Association (**EHTEL**) – established in Belgium
- (12) Comité Permanent des Médecins Européens (**CPME**) – established in Belgium
- (13) HL7 International Foundation (**HL7 INT**) – established in Belgium
- (14) European Hospital and Healthcare Federation (**HOPE**) – established in Belgium
- (15) Gesundheit Österreich GmbH (**GOEG**) – established in Austria
- (16) Ministero Della Salute (**MDS**) – established in Italy
- (17) European Federation of Nurses Associations (**EFN**) – established in Belgium
- (18) Bundesministerium für Gesundheit (**DENA**) – established in Germany
- (19) Federal Public Service of Public Health, Food Chain Safety and Environment (**PFS PH**) – established in Belgium
- (20) Connected Digital Health on behalf of the Ministry of the Interior and Health (**SDSD**) – established in Denmark
- (21) Administração Central do Sistema de Saúde, I.P. (**ACCS**) – established in Portugal
- (22) Veselibas Ekonomikas Centrs (**CHE VEC**) – established in Latvia
- (23) Ministry for Health, The Elderly & Community Care (**MHEC**) – established in Malta
- (24) Swedish Ministry of Health and Social Affairs (**SENA**) – established in Sweden
- (25) Integrating the Healthcare Enterprise - Europe (**IHE**) – established in Belgium

who have conferred powers of attorney for the purposes of the signature of the present agreement to the representative of the co-ordinator,

collectively “the beneficiaries”, and each individually identified as “beneficiary” for purposes of this agreement where a provision applies without distinction to the co-ordinator or a co-beneficiary

of the other part,

collectively *"the parties to the agreement"*

HAVE AGREED

the **Special Conditions, General Conditions** and **Annexes** below:

- Annex I** Description of the action [Technical Annex]
- Annex II** Estimated budget of the action [Financial Annex]
- Annex III** Reporting requirements
- Annex IV** Letters of mandates conferring powers of attorney from the co-beneficiaries to the co-ordinator
- Annex V** Instructions concerning the eligibility of travel and subsistence expenses (if Commission's rules apply) which form an integral part of this agreement ("the agreement").

The terms set out in the Special Conditions shall take precedence over those in the other parts of the agreement.

The terms of the General Conditions shall take precedence over those in the Annexes.

## I – SPECIAL CONDITIONS

### ARTICLE I.1 – PURPOSE OF THE GRANT

- I.1.1 The Executive Agency has decided to award a grant, under the terms and conditions set out in the Special Conditions, the General Conditions and the Annexes to the agreement, which the beneficiaries hereby declare that they have taken note of and accept, for the action entitled "**Joint Action e-Health Governance Initiative – JA-EHGov**" (*"the action"*).
- I.1.2 The beneficiaries accept the grant and undertake to do everything in their power to carry out the action as described in Annex I, acting on their own responsibility.

### ARTICLE I.2 – DURATION

- I.2.1 The agreement shall enter into force on the date when the last party signs.
- Without prejudice to Article II.16.5, unless otherwise agreed by the parties in writing, the agreement expires four months after the date of notification by the Executive Agency of the final amount of the grant determining the amount of the payment of the balance or the recovery order pursuant to Article II.7, or failing that four months after the date on which the payment of the balance was received.
- I.2.2 The action shall run for **36 months from 1 February 2011** (*"the starting date of the action"*).

### ARTICLE I.3 – ROLE OF THE BENEFICIARIES

- I.3.1 The co-ordinator shall 'inter alia':
- a) have full responsibility for ensuring that the action is implemented in accordance with the agreement;
  - b) be the intermediary for all communication between the co-beneficiaries and the Executive Agency in accordance with Article I.8. Any claims that the Executive Agency might have in respect of the agreement shall be addressed to, and answered by, the co-ordinator, save where specifically stated otherwise in the agreement;
  - c) be responsible for supplying all documents and information to the Executive Agency which may be required under the agreement, in particular in relation to the requests for payment. The co-ordinator shall not delegate any part of this task to the co-beneficiaries or to any other party. Where information



from the co-beneficiaries is required, the co-ordinator shall be responsible for obtaining and verifying this information and for passing it on to the Executive Agency;

- d) inform the co-beneficiaries of any event of which the co-ordinator is aware that is liable to substantially affect the implementation of the action;
- e) inform the Executive Agency of transfers between items of eligible costs, as provided in Article I.4.4;
- f) make the appropriate arrangements for providing the financial guarantee or the joint guarantee of the beneficiaries participating in the action, when requested, under the provisions of Article I.5;
- g) establish the payment requests on behalf of the beneficiaries, detailing the exact share and amount assigned to each beneficiary, in accordance with the agreement, and in particular the estimated eligible costs as foreseen in Annex II, and the actual costs incurred. All payments by the Executive Agency are made to the bank account(s) referred to in paragraph 1 of Article I.7;
- h) where designated the sole recipient of payments on behalf of all of the beneficiaries, ensure that all the appropriate payments are made to the co-beneficiaries without unjustified delay in accordance with paragraph 3 of Article I.7 and shall inform the Executive Agency of the distribution of the Union financial contribution between the co-beneficiaries and of the date of transfer;
- i) be responsible, in the event of audits, checks or evaluations, as described in Articles II.20 and II.6, for providing all the necessary documents, including the accounts of the co-beneficiaries, the original accounting documents and signed copies of sub-contracts, if any have been concluded by the beneficiaries in accordance with Article II.9.

### I.3.2 The co-beneficiaries shall 'inter alia':

- a) agree upon appropriate arrangements between themselves for the proper performance of the action; [The beneficiaries are deemed to have concluded an internal co-operation agreement regarding their internal operation and co-ordination. The co-operation agreement shall include all aspects necessary for the management of the beneficiaries and the implementation of the action;]
- b) forward to the co-ordinator the data needed to draw up the reports, financial statements and other documents provided for in the agreement including its Annexes;
- c) ensure that all information to be provided to the Executive Agency is sent via the co-ordinator, save where the agreement specifically stipulates otherwise;
- d) inform the co-ordinator immediately of any event liable to substantially affect or delay the implementation of the action of which they are aware;




- e) inform the co-ordinator of transfers between items of eligible costs, as provided in Article I.4.4;
- f) provide the co-ordinator with all the necessary documents in the event of audits, checks of evaluations, as described in Articles II.20 and II.6.

#### ARTICLE I.4 – BREAKDOWN OF COSTS – FINANCING THE ACTION

- I.4.1 The total cost of the action is estimated at **EUR 2.003.791,25 (two million three thousand seven hundred and ninety-one Euros twenty-five cents)**, as shown in the estimated budget in Annex II. The estimated budget shall give a detailed breakdown of the costs that are eligible for Union funding under the terms of Article II.14, of any other costs that the action may entail, and of all receipts, so that receipts and costs balance.

The estimated budget in Annex II shall include a table indicating the breakdown of estimated eligible costs and receipts between each beneficiary. The table shall be agreed collectively by the beneficiaries and shall be deemed to form an integral part of the estimated budget of the agreement.

- I.4.2 The total eligible costs of the action for which the Executive Agency grant is awarded are estimated at **EUR 2.003.791,25 (two million three thousand seven hundred and ninety-one Euros twenty-five cents)**, as shown in the estimated budget in Annex II.

Indirect costs are eligible for flat-rate funding up to a maximum of 7 % of the total direct costs eligible, subject to the conditions laid down in Article II.14.3.

- I.4.3 The Executive Agency shall contribute a maximum of **EUR 1.001.894,49 (one million one thousand eight hundred and ninety-four Euros forty-nine cents)**, equivalent to **50 %** of the estimated total eligible costs indicated in Article I.4.2. The final amount of the grant shall be determined as specified in Article II.17, without prejudice to Article II.20.

The Union grant may not finance the entire costs of the action. The amounts and sources of co-financing other than from Union funds shall be set out in the estimated budget referred to in Article I.4.1.

- I.4.4 By way of derogation from Article II.13, the co-ordinator may, in agreement with the co-beneficiaries, when carrying out the action, adjust the estimated budget by transfers between items of eligible costs, provided that this adjustment of expenditure does not affect the implementation of the action and the transfer between items does not exceed **20 %** of the amount of each item of estimated eligible costs for which the transfer is intended, and without exceeding the total eligible costs indicated in Article I.4.2. The co-ordinator shall inform the Executive Agency in writing.

#### ARTICLE I.5 – PAYMENT ARRANGEMENTS

- I.5.1 Pre-financing:

Within 45 days when the last of the parties signs the agreement, a pre-financing payment of **EUR 300.568,35 (three hundred thousand five hundred and sixty-eight Euros thirty-five cents)**, shall be made to the co-ordinator, representing **30%** of the amount specified in Article I.4.3.

#### I.5.2 Further pre-financing payments:

Pre-financing may be paid in several instalments. In that case, payment of each further instalment to the co-ordinator may not be made until at least 30 % of the previous pre-financing payment has been used up. Where the consumption of the previous pre-financing is less than 70 %, the amount of the new pre-financing payment shall be reduced by the unused amounts of the previous pre-financing

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Every request for payment of a further pre-financing instalment must be accompanied by the documents specified in Article II.15.2.

Within 45 days after the Executive Agency receives the request for payment of a further instalment, together with the documents referred to in the previous subparagraph, the compliance of the technical implementation of the action with Annex I will be assessed. Next, upon approval of the technical implementation, within 45 days a first further pre-financing payment of **EUR 200.378,90 (two hundred thousand three hundred and seventy-eight Euros ninety cents)**, shall be made to the co-ordinator, equivalent to **20%** of the amount specified in Article I.4.3.

Within 45 days after the Executive Agency receives the request for payment of a further instalment, together with the documents referred to in the previous subparagraph, the compliance of the technical implementation of the action with Annex I will be assessed. Next, upon approval of the technical implementation, within 45 days a second further pre-financing payment of **EUR 200.378,90 (two hundred thousand three hundred and seventy-eight Euros ninety cents)**, shall be made to the co-ordinator, equivalent to **20%** of the amount specified in Article I.4.3.

The period for payment referred to in the previous sub-paragraph of this article may be suspended by the Executive Agency in accordance with the procedure in Article II.16.2.

#### I.5.3 Payment of the balance:

The request for payment of the balance shall be accompanied by the documents specified in Article II.15.4.

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<sup>1</sup> The new pre-financing instalment shall be reduced by the amount corresponding to the difference between the 70 % threshold and the amount that was actually consumed. (Example: previous pre-financing 300 of which 100 (<70 %) was consumed; calculation: 210 (70 % threshold of 300) – 100 consumed = deduction of 110 from following pre-financing instalment).

The Executive Agency shall have 45 days to approve or reject the technical and financial implementation report or to request additional supporting documents or information under the procedure laid down in Article II.15.4. In that case, the co-ordinator shall have 20 days to submit the additional information or a new report.

A payment representing the balance of the grant determined in accordance with Article II.17 shall be made to the co-ordinator within 45 days following approval by the Executive Agency of the technical implementation report accompanying the request for payment of the balance. The Executive Agency may suspend the period for payment in accordance with the procedure in Article II.16.2.

#### ARTICLE I.6 – SUBMISSION OF REPORTS AND OTHER DOCUMENTS

The provisions relating to the submission of the technical implementation reports, financial statements and other documents referred to in Article I.5 are contained in Annex III.

The technical implementation reports, financial statements and other documents referred to in Article I.5 must be submitted by the co-ordinator in **3 copies in English** on the following dates:

- Interim reports and other documents related to a request for a first further pre-financing as specified in Article I.5.2 **within 2 months following a period of 12 months after the starting date of the action** specified in Article I.2.2, covering the period M1 – M 12;
- Interim reports and other documents related to a request for a second further pre-financing as specified in Article I.5.2 **within 2 months following a period of 24 months after the starting date of the action** specified in Article I.2.2.], covering the period M13 – M24);
- Final reports and other documents related to a request for payment of the balance as specified in Article I.5.3 **within 2 months following the closing date of the action specified in Article I.2.2, covering the whole project duration.**

#### ARTICLE I.7 – BANK ACCOUNT

I.7.1 All payments shall be made to the co-ordinator's bank account or sub-account denominated in euros, as indicated below:

Name of bank:	<b>Österreichische Postsparkasse</b>
Address of the branch:	<b>Georg Coch Platz 2, 1018 Wien, AUSTRIA</b>
Precise denomination of the account holder:	<b>BM für Gesundheit</b>
IBAN account code:	<b>AT53 6000 0000 0507 0066</b>

- 1.7.2. This account or sub-account must identify the payments made by the Executive Agency for carrying out the action for which the grant is awarded. If the funds paid to this account yield interest or equivalent benefits under the law of the State on whose territory the account is opened, such interest or benefits shall, if they are generated by pre-financing payments, be recovered by the Executive Agency as specified in Article II.16.4.
- 1.7.3. Within 45 days of the day on which the bank account under I.7.1 has been credited, the co-ordinator shall transfer to each co-beneficiary the amounts corresponding to their participation in the action in accordance with their pro rata share of the estimated costs as defined in the breakdown in Annex II when pre-financing payments are made, and their share of validated costs actually incurred when other payments are made.

## ARTICLE I.8 –GENERAL ADMINISTRATIVE PROVISIONS

- 1.8.1. Any communication in connection with the agreement shall be in writing, indicating the number of the agreement, the title and acronym of the action and shall be sent to the following addresses:

For the Executive Agency:

Technical reports, requests for payment and any other correspondence must be addressed to:

Executive Agency for Health and Consumers (EAHC)  
Health Unit  
DRB A3/050  
L-2920 Luxembourg  
eahc@ec.europa.eu

Ordinary mail shall be considered to have been received by the Executive Agency on the date on which it is formally registered by the Executive Agency unit responsible referred to above.

For the co-ordinator:

**Ms Isabella WEBER, M.A.**  
Project Coordinator  
**Bundesministerium für Gesundheit**  
Radetzky str. 2. 1030 Wien  
AUSTRIA  
Telephone: +431 71100-4613  
Fax: +431 7134404 1413  
Email address: Isabella.weber@bmg.gv.at

- 1.8.2 Any communication from the Executive Agency to the co-ordinator and/or co-beneficiaries and vice versa shall be made via the co-ordinator, save where specifically indicated otherwise in the agreement.

## **ARTICLE I.9 – LAW APPLICABLE AND COMPETENT COURT**

The grant is governed by the terms of the agreement, the Union law applicable and, on a subsidiary basis, by the law of Luxembourg relating to grants.

The beneficiaries may bring legal proceedings regarding decisions by the Executive Agency concerning the application of the provisions of the agreement and the arrangements for implementing it before the General Court of the European Union and, in the event of appeal, the Court of Justice.

## **ARTICLE I.10 – DATA PROTECTION<sup>2</sup>**

All personal data contained in the agreement, including its execution, or related to it shall be processed in accordance with Regulation (EC) No 45/2001 of the European Parliament and of the Council on the protection of individuals with regard to the processing of personal data by the Community institutions and bodies and on the free movement of such data. Such data shall be processed solely in connection with the implementation and follow-up of the agreement by the Executive Agency and the Commission, without prejudice to the possibility of passing the data to internal audit services, to the Court of Auditors, to the Financial Irregularities Panel and/or to the European Anti-Fraud Office (OLAF) for the purposes of safeguarding the financial interests of the Union.

Beneficiaries may, on written request, gain access to their personal data and correct any information that is inaccurate or incomplete. They should address any questions regarding the processing of their personal data to the Executive Agency and the Commission. Beneficiaries may lodge a complaint against the processing of their personal data with the European Data Protection Supervisor at any time.

## **ARTICLE I.11 – FURTHER SPECIAL CONDITIONS**

The following special conditions apply to this agreement:

- I.11.1 The beneficiary shall submit the payment requests in accordance with article I.5, including the underlying financial statements, in euros. By way of derogation from Article II.16.1, any conversion of actual costs into euros shall be made by the beneficiary at the monthly accounting rate established by the Commission and published on its website for the first day of the month following the end of the reporting period<sup>3</sup>.

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<sup>2</sup> Any question on the application of Regulation (EC) N° 45/2001 should be referred to the Data Protection Officer of the Agency or the Data Protection Officer of the Commission (<http://www.cc.cec/dataprotectionofficer>).

<sup>3</sup> <http://ec.europa.eu/budget/inforeuro/index.cfm?fuseaction=home&Language=en>

- I.11.2 Without prejudice to Article II.3.2, the beneficiaries grant the Executive Agency and the Commission the right to publish results and reports in hard copy or electronic form.
- I.11.3 Without prejudice to Article II.5.1, unless the Executive Agency requests or agrees otherwise, all communications or publications by the beneficiaries collectively or one of the beneficiary individually, which are related to the action, including conferences, seminars, videos, electronic communications or printed matter shall include the following statement: “This *[insert appropriate description, e.g. publication, conference, etc.]* arises from the project *[insert project title]* which has received funding from the European Union, in the framework of the Health Programme.”

## **II – GENERAL CONDITIONS**

### **PART A – LEGAL AND ADMINISTRATIVE PROVISIONS**

#### **ARTICLE II.1 – LIABILITY**

- II.1.1 The beneficiaries shall be responsible for complying with any legal obligations incumbent on them.
- II.1.2 The Executive Agency shall not, in any circumstances or on any grounds, be held liable in the event of a claim under the agreement relating to any damage caused during the action's execution. Consequently, the Executive Agency will not entertain any request for indemnity or reimbursement accompanying any such claim.
- II.1.3 Except in cases of force majeure, the beneficiaries shall make good any damage sustained by the Executive Agency as a result of the execution or faulty execution of the action.
- II.1.4 The beneficiaries shall bear sole liability vis-à-vis third parties, including for damage of any kind sustained by them while the action is being carried out.

#### **ARTICLE II.2 – CONFLICT OF INTERESTS**

The beneficiaries undertake to take all the necessary measures to prevent any risk of conflicts of interests which could affect the impartial and objective performance of the agreement. Such conflict of interests could arise in particular as a result of economic interest, political or national affinity, family or emotional reasons, or any other shared interest.

Any situation constituting or likely to lead to a conflict of interests during the performance of the agreement must be brought to the attention of the Executive Agency, in writing, without delay. The beneficiaries shall undertake to take whatever steps are necessary to rectify this situation at once. The Executive Agency reserves the right to check that the measures taken are appropriate and may demand that the beneficiaries take additional measures, if necessary, within a certain time.

#### **ARTICLE II.3 – OWNERSHIP/USE OF THE RESULTS**

- II.3.1 Unless stipulated otherwise in the agreement, ownership of the results of the action, including industrial and intellectual property rights, and of the reports and other documents relating to it shall be vested in the beneficiaries.



- II.3.2 Without prejudice to paragraph 1, the beneficiaries grant the Executive Agency the right to make free use of the results of the action as it deems fit, provided it does not thereby breach its confidentiality obligations or existing industrial and intellectual property rights.

#### **ARTICLE II.4 – CONFIDENTIALITY**

The Executive Agency and the beneficiaries undertake to preserve the confidentiality of any document, information or other material directly related to the subject of the agreement that is duly classed as confidential, if disclosure could cause prejudice to the other party. The parties shall remain bound by this obligation beyond the closing date of the action.

#### **ARTICLE II.5 – PUBLICITY**

- II.5.1 Unless the Executive Agency requests otherwise, any communication or publication by the beneficiaries collectively or any one of the beneficiaries individually about the action, including at a conference or seminar, shall indicate that the action has received funding from the Union.

Any communication or publication by the beneficiaries collectively or any one of the beneficiaries individually, in any form and medium, shall indicate that sole responsibility lies with the author and that the Executive Agency is not responsible for any use that may be made of the information contained therein.

- II.5.2 The beneficiaries authorise the Executive Agency to publish the following information in any form and medium, including via the Internet:

- the beneficiaries' names and addresses,
- the subject and purpose of the grant,
- the amount granted and the proportion of the action's total cost covered by the funding.

Upon a reasoned and duly substantiated request by the co-ordinator, the Executive Agency may agree to forgo such publicity if disclosure of the information indicated above would risk compromising the beneficiaries' security or prejudicing their commercial interests.

#### **ARTICLE II.6 – EVALUATION**

Whenever the Commission carries out an interim or final evaluation of the action's impact measured against the objectives of the Union programme concerned, the co-ordinator with the support of the co-beneficiaries undertake to make available to the Commission and/or persons authorised by it all such documents or information as will allow the evaluation to be successfully completed and to give them the rights of access specified in Article II.20.

## ARTICLE II.7 – SUSPENSION

- II.7.1 The co-ordinator, in agreement with the co-beneficiaries, may suspend implementation of the action if exceptional circumstances make this impossible or excessively difficult, notably in the event of force majeure. The co-ordinator shall inform the Executive Agency without delay, giving all the necessary reasons and details and the foreseeable date of resumption.
- II.7.2 If the Executive Agency does not terminate the agreement under Article II.11.3, the beneficiaries shall resume implementation of the action as initially planned once circumstances allow and the co-ordinator shall inform the Executive Agency accordingly. The duration of the action might be extended by a period equivalent to the length of the suspension. In accordance with Article II.13, a supplementary written agreement shall be concluded to extend the duration of the action and to make any amendments that may be necessary to adapt the action to the new implementing conditions.

## ARTICLE II.8 – FORCE MAJEURE

- II.8.1 Force majeure shall mean any unforeseeable exceptional situation or event beyond the parties' control which prevents them from fulfilling any of their obligations under the agreement, was not attributable to error or negligence on their part, and proves insurmountable in spite of all due diligence. Defects in equipment or material or delays in making them available (unless due to force majeure), labour disputes, strikes or financial difficulties cannot be invoked as force majeure by the defaulting party.
- II.8.2 A party faced with force majeure shall inform the other party without delay by registered letter with advice of delivery or equivalent, stating the nature, probable duration and foreseeable effects.
- II.8.3 The party faced with force majeure shall not be held in breach of his obligations under the agreement if he's prevented from fulfilling them by force majeure. The parties shall make every effort to minimise any damage due to force majeure.
- II.8.4 The action may be suspended in accordance with Article II.7.

## ARTICLE II.9 – AWARD OF CONTRACTS

- II.9.1 If the beneficiaries have to conclude contracts in order to carry out the action and they constitute costs of the action under an item of eligible direct costs in the estimated budget, they shall seek competitive tenders from potential contractors and award the contract to the bid offering best value for money; in doing so they shall observe the principles of transparency and equal treatment of potential contractors and shall take care to avoid any conflict of interests.
- II.9.2 Contracts as referred to in paragraph 1 may be awarded only in the following cases:

- a) they may only cover the execution of a limited part of the action;
- b) recourse to the award of contracts must be justified having regard to the nature of the action and what is necessary for its implementation;
- c) the tasks concerned must be set out in Annex I and the corresponding estimated costs must be set out in detail in the budget in Annex II;
- d) any recourse to the award of contracts while the action is under way, if not provided for in the initial grant application, shall be subject to prior written authorisation by the Executive Agency;
- e) the beneficiaries shall retain sole responsibility for carrying out the action and for compliance with the provisions of the agreement. The beneficiaries must undertake to make the necessary arrangements to ensure that the contractor waives all rights in respect of the Executive Agency under the agreement;
- f) the beneficiaries must undertake to ensure that the conditions applicable to them under Articles II.1, II.2, II.3, II.4, II.5, II.6, II.10 and II.20 of the agreement are also applicable to the contractor.

## **ARTICLE II.10 – ASSIGNMENT**

Claims for payments to be carried out by the Executive Agency may not be transferred.

In exceptional circumstances, where the situation warrants it, the Executive Agency may authorise the assignment to a third party of the agreement and payments flowing from it, following a written request to that effect, giving reasons, from the co-ordinator in agreement with the co-beneficiaries. If the Executive Agency agrees, it must make its agreement known in writing to the co-ordinator before the proposed assignment takes place. In the absence of the above authorisation, or in the event of failure to observe the terms thereof, the assignment shall not be enforceable against and shall have no effect on the Executive Agency.

In no circumstances shall such an assignment release the beneficiaries from their obligations to the Executive Agency.

## **ARTICLE II.11 – TERMINATION OF THE AGREEMENT**

### **II.11.1 Termination by the co-ordinator**

In duly justified cases, the co-ordinator, in agreement with the co-beneficiaries, may withdraw the beneficiaries' request for a grant and terminate the agreement at any time by giving 60 days' written notice stating the reasons, without being required to furnish any indemnity on this account.

If no reasons are given or if the Executive Agency does not accept the reasons, the agreement shall be deemed to have been terminated improperly, with the consequences set out in the fifth subparagraph of paragraph 5.

### **II.11.2 Termination of the participation of a beneficiary**

In duly justified cases, the co-ordinator may request to terminate the participation of a beneficiary by giving 60 days written notice. The co-ordinator shall include with any such request to the Executive Agency the remaining beneficiaries' proposal to reallocate the tasks of that beneficiary or where relevant to nominate a replacement, the reasons for the termination of the participation and the opinion of the beneficiary whose participation is requested to be terminated.

In duly justified cases, any beneficiary may request the termination of his participation in the agreement. The request must be submitted to the Executive Agency by the co-ordinator by giving 60 days written notice stating the reasons.

If no reasons are given or if the Executive Agency does not accept the reasons, the participation shall be deemed to have been terminated improperly, with the consequences set out in the fifth subparagraph of paragraph 5.

The termination of the participation of the beneficiary concerned shall take effect on the date of the Executive Agency's approval. A written additional agreement shall be concluded to make any amendments necessary to adapt the action to the new implementing conditions resulting from the partial termination.

### **II.11.3 Termination by the Executive Agency**

The Executive Agency may decide to terminate the agreement or the participation of any one or several beneficiaries participating in the action without any indemnity on its part, in the following circumstances:

- a) in the event of a change to the beneficiary's legal, financial, technical, organisational or ownership situation that is liable to affect the agreement substantially or to call into question the decision to award the grant;
- b) if a beneficiary fails to fulfil a substantial obligation incumbent on him under the terms of the agreement, including its annexes;
- c) in the event of force majeure, notified in accordance with Article II.8, or if the action has been suspended as a result of exceptional circumstances, notified in accordance with Article II.7;
- d) if a beneficiary is declared bankrupt, is being wound up or is the subject of any other similar proceedings;
- e) if a beneficiary is found guilty of an offence involving his professional conduct by a judgment having the force of res judicata or if he is guilty of grave professional misconduct proven by any justified means;
- f) if a beneficiary is guilty of misrepresentation or submits information or reports inconsistent with reality to obtain the grant provided for in the agreement;
- g) if a beneficiary has intentionally or by negligence committed a substantial irregularity in performing the agreement or in the event of fraud, corruption

or any other illegal activity on the part of a beneficiary to the detriment of the European Union's financial interests. A substantial irregularity consists of any infringement of a provision of an agreement or regulation resulting from an act or an omission on the part of a beneficiary which causes or might cause a loss to the Union budget.

#### **II.11.4 Termination procedure**

The procedure is initiated by registered letter, with advice of delivery or equivalent. The co-ordinator shall ensure that all beneficiaries are duly informed.

In the cases referred to in points (a), (b) and (d) of paragraph 3, the co-ordinator, in consultation with the co-beneficiaries, shall have 30 days to submit observations and take any measures necessary to ensure continued fulfilment of the beneficiaries' obligations under the agreement. If the Executive Agency fails to confirm acceptance of these observations by giving written approval within 30 days of receiving them, the procedure shall continue to run.

Where notice is given, termination shall take effect at the end of the period of notice, which shall start to run from the date when notification of the Executive Agency's decision to terminate the agreement or the participation of a beneficiary is received.

Where notice is not given in the cases referred to in points (c), (e), (f) and (g) of paragraph 3, termination shall take effect from the day following the date on which notification of the Executive Agency's decision to terminate the agreement or the participation of a beneficiary is received.

#### **II.11.5 Effects of termination**

In the event of termination of the agreement, payments by the Executive Agency shall be limited to the eligible costs actually incurred by the beneficiaries up to the date when termination takes effect, in accordance with Article II.17. Costs relating to current commitments that are not due to be executed until after termination shall not be taken into account.

The co-ordinator shall have 60 days from the date when termination of the agreement takes effect, as notified by the Executive Agency, to produce a request for final payment in accordance with Article II.15.4. If no request for final payment is received within this time limit, the Executive Agency shall not reimburse the expenditure incurred by the beneficiaries up to the date of termination and it shall recover any amount if its use is not substantiated by the technical implementation reports and financial statements approved by the Executive Agency.

Where termination affects the participation of a beneficiary, only those eligible costs actually incurred by the beneficiary concerned up to the date when termination of his participation takes effect, in accordance with Article II.17 shall be considered eligible. Costs relating to current commitments that were not due to be executed until after termination shall not be taken into account. The request for payment of the eligible costs incurred up to the date when the termination of the participation of the beneficiary concerned takes effect shall be included in the following payment request due according to the schedule laid down in Article I.6.

By way of exception, at the end of the period of notice referred to in paragraph 4, where the Executive Agency is terminating the agreement on the grounds that the co-ordinator has failed to produce the final technical implementation report and financial statement within the deadline stipulated in Article I.5 and the co-ordinator has still not complied with this obligation within two months following the written reminder sent by the Executive Agency by registered letter with advice of delivery or equivalent, the Executive Agency shall not reimburse the expenditure incurred by the beneficiaries up to the date on which the action ended and it shall recover any amount if its use is not substantiated by the technical implementation reports and financial statements approved by the Executive Agency.

By way of exception, in the event of improper termination of the agreement by the co-ordinator, or a beneficiary's participation in the action, or termination by the Executive Agency on the grounds set out in points (e), (f) or (g) of paragraph 3, the Executive Agency may require the partial or total repayment of sums already paid under the agreement on the basis of technical implementation reports and financial statements approved by the Executive Agency, in proportion to the gravity of the failings in question and after allowing the co-ordinator, and where relevant co-beneficiaries concerned, to submit their observations.

## **ARTICLE II.12 – FINANCIAL PENALTIES**

By virtue of the Financial Regulation applicable to the general budget of the European Union, any one or several of the beneficiaries declared to be in grave breach of their obligations under the agreement shall be liable to financial penalties of between 2 % and 10 % of the value of their share of the grant in question, with due regard for the principle of proportionality.

This rate may be increased to between 4 % and 20 % in the event of a repeated breach in the five years following the first. The beneficiary concerned shall be notified in writing of any decision by the Executive Agency to apply such financial penalties.

## **ARTICLE II.13 – SUPPLEMENTARY AGREEMENTS**

- II.13.1 Any amendment to the grant conditions must be the subject of a written supplementary agreement. No oral agreement may bind the parties to this effect.
- II.13.2 The supplementary agreement may not have the purpose or the effect of making changes to the agreement which might call into question the decision awarding the grant or result in unequal treatment of applicants.
- II.13.3 Where the request for amendment is made by the co-ordinator, in agreement with the co-beneficiaries, he must send the request to the Executive Agency in good time before it is due to take effect and at all events one month before the closing date of the action, except in cases duly substantiated by the co-ordinator and accepted by the Executive Agency.

## PART B – FINANCIAL PROVISIONS

### ARTICLE II.14 – ELIGIBLE COSTS

II.14.1 To be considered as eligible costs of the action, costs must satisfy the following general criteria:

- they are incurred during the duration of the action as specified in Article I.2.2 of the agreement, with the exception of costs relating to final reports and certificates on the action's financial statements and underlying accounts;
- they are connected with the subject of the agreement and they must be indicated in the estimated budget annexed to it;
- they are necessary for the implementation of the action which is the subject of the grant;
- they are identifiable and verifiable, in particular being recorded in the accounting records of a beneficiary and determined according to the applicable accounting standards of the country where the beneficiary is established and according to the usual cost-accounting practices of the beneficiary;
- they comply with the requirements of applicable tax and social legislation;
- they are reasonable, justified, and comply with the requirements of sound financial management, in particular regarding economy and efficiency.

The beneficiaries' internal accounting and auditing procedures must permit direct reconciliation of the costs and revenue declared in respect of the action with the corresponding accounting statements and supporting documents.

II.14.2 The eligible direct costs for the action are those costs which, with due regard for the conditions of eligibility set out in Article II.14.1, are identifiable as specific costs directly linked to performance of the action and which can therefore be booked to it direct. In particular, the following direct costs are eligible provided that they satisfy the criteria set out in the previous paragraph:

- the cost of staff assigned to the action, comprising actual salaries plus social security charges and other statutory costs included in the remuneration, provided that this does not exceed the average rates corresponding to the beneficiary's usual policy on remuneration;

The corresponding salary costs of personnel of national administrations are eligible to the extent that they relate to the cost of activities which the

relevant public authority would not carry out if the project concerned were not undertaken;

- travel and subsistence allowances for staff taking part in the action, provided that they are in line with the beneficiary's usual practices on travel costs or do not exceed the scales approved annually by the Commission;
- the purchase cost of equipment (new or second-hand), provided that it is written off in accordance with the tax and accounting rules applicable to the beneficiary and generally accepted for items of the same kind. Only the portion of the equipment's depreciation corresponding to the duration of the action and the rate of actual use for the purposes of the action may be taken into account by the Executive Agency, except where the nature and/or the context of its use justifies different treatment by the Executive Agency;
- costs of consumables and supplies, provided that they are identifiable and assigned to the action;
- costs entailed by other contracts awarded by a beneficiary for the purposes of carrying out the action, provided that the conditions laid down in Article II.9 are met;
- costs arising directly from requirements imposed by the agreement (dissemination of information, specific evaluation of the action, audits, translations, reproduction, etc.), including the costs of any financial services (especially the cost of financial guarantees). Such costs may also include specific costs incurred by the co-ordinator for fulfilling his responsibilities in his capacity of the body responsible for the overall management of the action and the co-ordination of the beneficiaries.

II.14.3 The eligible indirect costs for the action are those costs which, with due regard for the conditions of eligibility described in Article II.14.1, are not identifiable as specific costs directly linked to performance of the action which can be booked to it direct, but which can be identified and justified by the co-ordinator or a co-beneficiary using their accounting system as having been incurred in connection with the eligible direct costs for the action. They may not include any eligible direct costs.

By way of derogation from Article II.14.1, the indirect costs incurred in carrying out the action may be eligible for flat-rate funding fixed at not more than 7 % of the total eligible direct costs. If provision is made in Article I.4.2 for flat-rate funding in respect of indirect costs, they need not be supported by accounting documents.

II.14.4 The following costs shall not be considered eligible:

- return on capital;
- debt and debt service charges;
- provisions for losses or potential future liabilities;



- interest owed;
- doubtful debts;
- exchange losses;
- VAT, unless the beneficiary can show that he is unable to recover it according to the applicable national legislation;
- costs declared by a beneficiary and covered by another action or work programme receiving a Union grant;
- excessive or reckless expenditure;
- contributions in kind.

II.14.5 Not applicable.

II.14.6 By way of derogation from paragraph 3, indirect costs shall not be eligible under a grant for an action awarded to a beneficiary who already receives an operating grant from the Union budget during the period in question.

## **ARTICLE II.15 – REQUESTS FOR PAYMENT**

Payments shall be made in accordance with Article I.5 of the Special Conditions.

### **II.15.1 – PRE-FINANCING**

Pre-financing is intended to provide the beneficiaries with a float.

Where required by the provisions of Article I.5 on pre-financing, the co-ordinator shall furnish a financial guarantee from a bank or an approved financial institution established in one of the Member States of the European Union.

The guarantor shall stand as first call guarantor and shall not require the Executive Agency to have recourse against the principal debtor.

The financial guarantee shall remain in force until the final payment by the Executive Agency match the proportion of the total grant accounted for by pre-financing. The Executive Agency undertakes to release the guarantee within sixty (60) days following that date.

### **II.15.2 – FURTHER PRE-FINANCING PAYMENTS**

Where pre-financing is divided into several instalments, the co-ordinator may request a further pre-financing payment once the percentage of the previous payment specified in the provisions of Article I.5 on further pre-financing has been used up. The request shall be accompanied by the following documents:

- a progress report on the technical implementation of the action;

- a detailed financial statement of the eligible costs actually incurred, including a consolidated statement and a breakdown between each beneficiary;
- where required by the above-mentioned provisions of Article I.5, a financial guarantee in accordance with paragraph 1;
- any other documents in support of his request for further pre-financing.

The documents accompanying the request for payment shall be drawn up in accordance with the relevant provisions in Article I.6 and the annexes.

### **II.15.3 – NOT APPLICABLE**

### **II.15.4 – PAYMENT OF THE BALANCE**

Payment of the balance, which may not be repeated, is made after the end of the action on the basis of the costs actually incurred by the beneficiaries in carrying out the action. It may take the form of a recovery order where the total amount of earlier payments is greater than the amount of the final grant determined in accordance with Article II.17.

By the appropriate deadline indicated in Article I.6, the co-ordinator shall submit a request for payment of the balance accompanied by the following documents:

- a final report on the technical implementation of the action;
- a final detailed financial statement of the eligible costs actually incurred, following the structure of the estimated budget, including a consolidated statement and a breakdown between each beneficiary;
- a full summary statement of the receipts and expenditure of the action including a consolidated statement and a breakdown between each beneficiary;
- any other documents in support of his request for payment of the balance.

The documents accompanying the request for payment shall be drawn up in accordance with the provisions of Article I.6 and the annexes.

If an external audit of the action's accounts is not required, the co-ordinator and the co-beneficiaries themselves shall certify that the information provided in their request for payment to the Executive Agency is full, reliable and true. They shall also certify that the costs incurred can be considered eligible in accordance with the agreement, that all receipts have been declared, and that the request for payment is substantiated by adequate supporting documents that can be checked.

On receipt of these documents, the Executive Agency shall have the period specified in Article I.5 in order to:

- approve the final report on the technical implementation of the action and the detailed financial statement;

- ask the co-ordinator for supporting documents or any additional information it deems necessary to allow the approval of the technical implementation report and the financial statement;
- reject the documents referred to in Article I.5.3. and ask for the submission of additional information or a new report.

Failing a written reply from the Executive Agency within the time limit for scrutiny indicated above, the report shall be deemed to have been approved. Approval of the report accompanying the request for payment shall not imply recognition of their regularity or of the authenticity, completeness and correctness of the declarations and information they contain.

If additional information or a new report is requested, the time limit for scrutiny shall be extended by the time it takes to obtain this information. The co-ordinator shall be informed of that request and the extension of the delay for scrutiny by means of a formal document. The co-ordinator shall have the period laid down in Article I.5 to submit the information or new documents requested.

Extension of the delay for approval of the report may delay the payment by the equivalent time.

Where a report is rejected and a new report requested, the approval procedure described in this Article shall apply.

In the event of renewed rejection, the Executive Agency reserves the right to terminate the agreement by invoking Article II.11.3(b).

## **ARTICLE II.16 – GENERAL PROVISIONS ON PAYMENTS**

II.16.1 Payments shall be made by the Executive Agency in euros. Any conversion of actual costs into euros shall be made at the monthly accounting rate established by the Commission and published on its website for the first day of the month following the end of the reporting period<sup>4</sup>, unless the Special Conditions of the agreement lay down specific provisions.

Payments by the Executive Agency shall be deemed to be effected on the date when they are debited to the Executive Agency's account.

II.16.2 The Executive Agency may suspend the period for payment laid down in Article I.5 at any time by notifying the co-ordinator that his request for payment cannot be met, either because it does not comply with the provisions of the agreement, or because the appropriate supporting documents have not been produced or because there is a suspicion that some of the expenses in the financial statement are not eligible and additional checks are being conducted.

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<sup>4</sup> <http://ec.europa.eu/budget/inforeuro/index.cfm?fuseaction=home&Language=en>

The Executive Agency may also suspend its payments at any time if a beneficiary is found or presumed to have infringed the provisions of the agreement, in particular in the wake of the audits and checks provided for in Article II.20.

The Executive Agency shall inform the co-ordinator as soon as possible of any such suspension by registered letter with advice of delivery or equivalent, setting out the reasons for suspension.

Suspension shall take effect on the date when notice is sent by the Executive Agency. The remaining payment period shall start to run again from the date when a properly constituted request for payment is registered, when the supporting documents requested are received, or at the end of the suspension period as notified by the Executive Agency.

- II.16.3 On expiry of the period for payment specified in Article I.5, and without prejudice to paragraph 2 of this Article, the beneficiaries are entitled to interest on the late payment at the rate applied by the European Central Bank for its main refinancing operations in euros, plus three and a half points; the reference rate to which the increase applies shall be the rate in force on the first day of the month of the final date for payment, as published in the C series of the Official Journal of the European Union. This provision shall not apply to recipients of a grant which are public authorities of the Member States of the European Union.

Interest on late payment shall cover the period from the final date for payment, exclusive, up to the date of payment as defined in paragraph 1, inclusive. The interest shall not be treated as a receipt for the action for the purposes of determining the final grant within the meaning of Article II.17.4. The suspension of payment by the Executive Agency may not be considered as late payment.

By way of exception, when the interest calculated in accordance with the provisions of the first and second subparagraphs is lower than or equal to EUR 200, it shall be paid to the co-ordinator only upon demand submitted within two months of receiving late payment.

- II.16.4 The Executive Agency shall deduct the interest yielded by pre-financing which exceeds EUR 50 000 as provided for in Article I.5 from the payment of the balance of the amount due to the beneficiaries. The interest shall not be treated as a receipt for the action within the meaning of Article II.17.4.

Where the pre-financing payments exceed EUR 750 000 per agreement at the end of each financial year, the interest shall be recovered for each reporting period. Taking account of the risks associated with the management environment and the nature of actions financed, the Executive Agency may recover the interest generated by pre-financing lower than EUR 750 000 at least once a year.

Where the interest yielded exceeds the balance of the amount due to the beneficiaries as indicated in Article II.15.4, or is generated by pre-financing

referred to in the previous subparagraph, the Executive Agency shall recover it in accordance with Article II.19.

Interest yielded by pre-financing paid to Member States is not due to the Executive Agency.

- II.16.5 The co-ordinator shall have two months from the date of notification by the Executive Agency of the final amount of the grant determining the amount of the payment of the balance or the recovery order pursuant to Article II.17, or failing that of the date on which the payment of the balance was received, to request information in writing on the determination of the final grant, giving reasons for any disagreement. After this time such requests will no longer be considered. The Executive Agency undertakes to reply in writing within two months following the date on which the request for information is received, giving reasons for its reply. This procedure is without prejudice to the beneficiaries' right to appeal against the Executive Agency's decision pursuant to Article I.9. Under the terms of Union law in this matter, such appeals must be lodged within two months following the notification of the decision to the applicant or, failing that, following the date on which the applicant learned of the decision.

#### **ARTICLE II.17 – DETERMINING THE FINAL GRANT**

- II.17.1 Without prejudice to information obtained subsequently pursuant to Article II.20, the Executive Agency shall adopt the amount of the final payment to be granted to the beneficiaries on the basis of the documents referred to in Article II.15.4 which it has approved.
- II.17.2 The total amount paid by the Executive Agency may not in any circumstances exceed the maximum amount of the grant laid down in Article I.4.3, even if the total actual costs eligible exceed the estimated total eligible costs specified in Article I.4.2.
- II.17.3 If the actual eligible costs when the action ends are lower than the estimated eligible costs, the Executive Agency's contribution shall be limited to the amount obtained by applying the grant percentage of Union co-funding per beneficiary - specified in the table 'Budget by beneficiary' of Annex II, 'Estimated budget of the action' -, to the respective actual eligible costs approved by the Executive Agency per beneficiary.
- II.17.4 The beneficiaries hereby agree that the grant shall be limited to the amount necessary to balance the action's receipts and expenditure and that it may not in any circumstances produce a profit for them.

Profit shall mean any surplus of total actual receipts attributable to the action over the total actual costs of the action. The actual receipts to be taken into account shall be those which have been established, generated or confirmed on the date on which the request for payment of the balance is drawn up by the co-ordinator for financing other than the Union grant, to which shall be added the amount of the grant determined by applying the principles laid down in

paragraphs 2 and 3 of this article. For the purposes of this article, only actual costs falling within the categories set out in the estimated budget referred to in Article I.4.1 and contained in Annex II shall be taken into account; non-eligible costs shall always be covered by non-Union resources.

Any surplus determined in this way shall result in a corresponding reduction in the amount of the grant.

II.17.5 Without prejudice to the right to terminate the agreement under Article II.11, and without prejudice to the right of the Executive Agency to apply the penalties referred to in Article II.12, if the action is not implemented or is implemented poorly, partially or late, the Executive Agency may reduce the grant initially provided for in line with the actual implementation of the action on the terms laid down in the agreement.

II.17.6 On the basis of the amount of the final payment determined in this way and of the aggregate amount of the payments already made under the terms of the agreement, the Executive Agency shall set the amount of the payment of the balance as being the amount still owing to the beneficiaries. Where the aggregate amount of the payments already made exceeds the amount of the final grant, the Executive Agency shall issue a recovery order for the surplus.

#### **ARTICLE II.18 – FINANCIAL JOINT RESPONSIBILITY**

The beneficiaries agree to be irrevocably and unconditionally, jointly and severally responsible for any amount due to the Executive Agency by one of them which could not be honoured by the latter. The amount due to the Executive Agency will not exceed the maximum value of the contribution that could be granted to the beneficiaries in accordance with Article I.4.3, increased where applicable by interest on late payment.

The beneficiaries are not jointly responsible for financial penalties which could be imposed on any defaulting beneficiary in accordance with Article II.12.

#### **ARTICLE II.19 – RECOVERY**

II.19.1 Where an amount, paid by the Executive Agency to the co-ordinator in his capacity of recipient of all payments, is to be recovered under the terms of the agreement, the co-ordinator undertakes to repay the Executive Agency the sum in question, on whatever terms and by whatever date it may specify, even if he has not been the final recipient of the amount due. In the latter case, if payment has not been made by the due date, the Executive Agency reserves the right to recover directly the amount due from the final recipient.

Where such an amount to be recovered under the terms of the agreement was directly paid by the Executive Agency to a beneficiary, or if recovery is justified under Article II.12 of the agreement, the beneficiary concerned undertakes to pay the Executive Agency the sum in question, on whatever terms and by whatever date it may specify.

II.19.2 If the obligation to pay the amount due is not honoured by the date set by the Executive Agency, the amount due shall bear interest at the rate indicated in Article II.16.3. Interest on late payment shall cover the period between the date set for payment, exclusive, and the date when the Executive Agency receives full payment of the amount owed, inclusive.

Any partial payment shall first be entered against charges and interest on late payment and then against the principal.

II.19.3 If payment has not been made by the due date, sums owed to the Executive Agency may be recovered by offsetting them against any sums owed to the concerned beneficiary after informing him accordingly by registered letter with acknowledgment of receipt or equivalent, or, depending on the terms of the Special conditions, by calling in the financial guarantee provided in accordance with Article II.15.1. In exceptional circumstances, justified by the necessity to safeguard the financial interests of the Union, the Executive Agency and/or the Commission may recover by offsetting before the due date of the payment. The beneficiary's prior consent shall not be required. If the recovery remains unsuccessful under the provisions above, the Executive Agency shall hold all the beneficiaries collectively jointly responsible for the amount due in accordance with Article II.18.

II.19.4 Bank charges occasioned by the recovery of the sums owed to the Executive Agency shall be borne by the concerned beneficiary.

II.19.5 The beneficiaries understand that under Article 299 of the Treaty on the functioning of the European Union, the Commission may adopt an enforceable decision formally establishing an amount as receivable from persons other than States. An action may be brought against such decision before the General Court of the European Union.

## **ARTICLE II.20 – CHECKS AND AUDITS**

II.20.1 The co-ordinator undertakes to provide any detailed information requested by the Executive Agency and/or the Commission or by any other outside body authorised by the Executive Agency and/or the Commission to check that the action and the provisions of the agreement are being properly implemented. Where the Executive Agency and/or the Commission so wishes, it may request such information to be provided directly by a co-beneficiary.


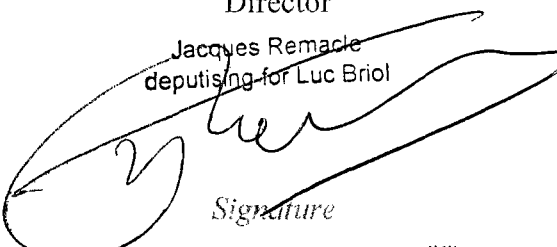
II.20.2 The beneficiaries shall keep at the Executive Agency's disposal all original documents, especially accounting and tax records, or, in exceptional and duly justified cases, certified copies of original documents relating to the agreement, stored on any appropriate medium that ensures their integrity in accordance with the applicable national legislation, for a period of five years from the date of payment of the balance specified in Article I.5.

II.20.3 The beneficiaries agree that the Executive Agency may have an audit of the use made of the grant carried out either directly by its own staff or by any other outside body authorised to do so on its behalf. Such audits may be carried out

throughout the period of implementation of the agreement until the balance is paid and for a period of five years from the date of payment of the balance. Where appropriate, the audit findings may lead to recovery decisions by the Executive Agency and/or the Commission.

- II.20.4 The beneficiaries undertake to allow Executive Agency staff and outside personnel authorised by the Executive Agency and/or the Commission the appropriate right of access to sites and premises where the action is carried out and to all the information, including information in electronic format, needed in order to conduct such audits.
- II.20.5 By virtue of Council Regulation (Euratom, EC) No 2185/96 and Regulation (EC) No 1073/1999 of the European Parliament and the Council, the European Anti-Fraud Office (OLAF) may also carry out on-the-spot checks and inspections in accordance with the procedures laid down by Union law for the protection of the financial interests of the European Union against fraud and other irregularities. Where appropriate, the inspection findings may lead to recovery decisions by the Executive Agency and/or the Commission.
- II.20.6 The Court of Auditors shall have the same rights as the Executive Agency and the Commission, notably right of access, as regards checks and audits.

## SIGNATURES

<p>For the co-ordinator</p> <p><b>Dr. Clemens-Martin AUER</b> General Director</p> <p><i>Lead and am</i></p>  <p>Done at Wien, on <u>13/7/11</u></p>	<p>For the Executive Agency</p> <p><b>Mr Luc BRIOL</b> Director</p> <p>Jacques Remacle deputising for Luc Briol</p>  <p>Signature</p> <p>Done at Luxembourg, on <u>28 JUL. 2011</u></p>
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In duplicate in English



**ANNEX I**  
**DESCRIPTION OF THE ACTION**

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# ANNEX I a

## (Technical annex)

<b>Title:</b>	Joint Action eHealth Governance Initiative (JA-EHGov)
<b>Duration (in months)</b>	36
<b>Priority area:</b>	3.4 GENERATE AND DISSEMINATE HEALTH INFORMATION AND KNOWLEDGE
<b>Action:</b>	3.4.2 Collect, analyse and disseminate health information
<b>Sub-action:</b>	European Health Information System

### Executive summary

The Joint Action aims to support the eHealth Governance Initiative (eHGI) which functions as platform for technical & political co-operation between Member States on eHealth including their relationship with eHealth Stakeholder Groups which include EU level organisations representing health professionals, hospitals, patients, standards developing organisations & industry. The results of which (recommendations, guidelines) will furthermore support the work of the eHealth Network set up in accordance with Art.14 of the Directive on patients' rights in cross-border healthcare. In the framework of the eHealth Network, the Commission & Member States will discuss and agree on political & strategic issues related to eHealth, in accordance with Art.14 of the Directive, including political prioritization in the eHealth interoperability roadmap and its implementation. To ensure coordination, coherence and consistency between the political level (the eHealth Network) and the expert level (the JA on eHGI), the eHealth Network shall provide guidance for the work of the Joint Action as appropriate.

### Strategic relevance & contribution to the programme

Many Member States are today in the process of initiating or rolling out large-scale eHealth investment and implementation programs. Some Member States have been granted financial support from European Structural or Regional Funds in order to reform their national healthcare systems. Thereby, we have a unique window of opportunity to build national solutions on common European or Global standards that enable continuity of care across borders. If we fail, there is a clear risk that national investments will be less efficient, more expensive and not providing the potential benefits for our citizens that otherwise would be possible. National projects could benefit if we can find joint solutions to challenge.

Furthermore, European cooperation on the eHealth area has been running successfully with the support of the European Commission for several years, with an extensive exchange of experiences at expert level. Substantial funding for developing eHealth has been allocated through Community research funds, and MS have moved towards concrete actions to launch cross-border services.

### Methods and means

The JA proposal is not a classic technical IT project but intends to create a political driven mechanism to coordinate ongoing and future activities on eHealth in MS and the European space. In order to tackle Council Conclusions and transform words into action it is proposed to define a European eHealth Governance Model based on MS cooperation with an organization and management suited to attain its ambitious objectives. Conceptual and Operational components of the Governance initiative are organized at three levels:

1. Decision Makers' level and political governance;
2. Strategy level and
3. Operational Level.

In the model proposed, the policy group will be responsible for analysing and acting on inputs by strategic and operational level, interacting with the Commissions and stakeholders, annual or periodical review of strategy and declaration of priorities and adopting Strategy Plans and Work Programmes proposed by the Core Strategy Group.

### **Expected outcomes**

Based on a collaborative model for political, strategic and operational sustainability, the JA will support a new European eHealth Platform in order to establish a permanent network in an international context. It will be used to inform policy and health care decision makers in European countries.

The main outcome of the JA will be the consolidation of the permanent network for eHealth in Europe resulting for recognition of its added value. The commitment expressed by the Ministers of Health of 25 European countries (including both MS and States of the EEA/EFTA) to build a permanent network, with a coordinated MS approach, will be renewed and reinforced by assuring a long-term MS engagement in eHealth Governance Initiative together with the Commission. Additionally, countries not yet involved in the Network, recognise its advantages and join the Initiative while expressing their long-term commitment. At the end of the JA, sustainability of the Network is thus achieved provided by a collaborative platform assuring sustainable growth and employment, quality and continuity of care, etc.

### **General objective of the joint action**

The overall ambition from Member States is to better include eHealth into health policy and better align eHealth investments to health needs. In order to ensure progress, a dedicated mechanism for eHealth is needed to bridge the gaps between the governance, strategy and operational levels.

The European eHealth Governance Initiative aims at improving the quality and sustainability of European Health Systems, by enabling Member States and stakeholders to fully benefit from the opportunities offered by eHealth systems and services. It will aim at improving the coordination of the MS and the EC eHealth policies. The general objective of the Joint Action is to create a platform for Member States coordinated action at Decision Makers' level, in order to: --> Ensure Quality, Continuity, Safety and Efficiency of healthcare provided with the support of ICT:

- Increasing availability and access to healthcare services
- Providing general support for home care and wellbeing of the general population
- Creating confidence and acceptance of users' (professionals, citizens and patients)

## Specific objective(s) of the joint action

#	Title	Description
1	Strategic Guidance	Reviewing eHealth Policies for MS & providing strategic guidance based on outcomes & contributions received by the specific WPs & supporting the the coordinator in the continuous update of the political vision of the eHGI.
2	Translation of Operational Work	Supporting WPI in translating the respective operational work into proposed action by the European Council, etc. & identify the priorities & objectives of the work within the EC, EP and MS Governance structures; Presidency priorities, etc.
3	Deployment Process	Based on the issues of the RoadMap activities regarding the development of the overall European eHealth Interoperability Strategy and drafting of respective briefing notes.
4	MS Implementation Support	Proposals for actions to support the implementation of the RoadMap to be taken forward at EU level & proposals on ways of supporting MS in the implementation of the proposed eHealth strategy. (through e.g. peer reviews).
5	Stakeholder Involvement	Enable active contribution of eHealth stakeholders to the political, strategic and operational levels.
6	Creation of Knowledge Management	Contribute to generate and disseminate eHealth strategies by creating knowledge and information management for the national parliaments and governments, the EC, the Council and the EU-parliament by the involvement of all stakeholders.

**Deliverables**

**Deliverables identified in the following table shall be submitted to EAHC, within two months of the delivery month for the technical and final reports and within one month of the delivery month for all other deliverables**

#	Title	Description	Confidentiality level	Month of delivery
1	Technical and Financial Report I / II / III	General actions done, costs incurred, verification and evaluation of year I / II / III and actions done for communication	Confidential	13
2	Governance Manual	General guidelines for terms of operation and consensus building.	Confidential	5
3	Dissemination Strategy	Description of communication activities to be undertaken during the project to disseminate the project artifacts across the target groups and stakeholders quickly and effectively (incl. eHealth Governance Portal & dissemination material).	Public	4
4	Website	Presentation of the project to the broad public.	Public	5
5	Evaluation Progress Report (I/II) and Final Impact Assessment	Monitoring the general progress of the project (II M25) with the focus on the WPs. General Impact of the eHGI in the field of eHealth (M36).	Public	13
6	Strategy & Policy Alignment Documents	Reflecting the outcomes and contributions received by the specific WPs (Work Package Deliverables) and translated into specific political strategies (year I, II and III).	Public	6
7	Annual Strategic & Political Report	Policy papers to be presented at least in the High level Secretary of States' meeting or eHealth Conference Meetings (year I, II and III).	Public	13
8	Annual Briefing Notes	Documents to be produced for decision making-health authorities (year I, II and III).	Public	4
9	EU eHealth Interoperability Strategy	Transmission of the RoadMap on the meta level to the overall strategy.	Public	34
10	Trust & Acceptability Analysis Report	Analysis of existent stakeholders and provision of recommendations concerning topics to be identified with regards to the WP's objectives.	Public	8

**OVERVIEW - Work Packages and deliverables**

#	Title	Leader	Start	End	Deliverables	Global Cost	Staff
1	Coordination of the joint action	ATNA	1	36	Technical and Financial Report I / II / III Governance Manual	560 000,00 €	660
2	Dissemination of the joint action	NHIC	1	36	Dissemination Strategy Website	330 700,00 €	540
3	Evaluation of the joint action	SDSD	6	36	Evaluation Progress Report (I/II) and Final Impact Assessment	265 000,00 €	323
4	Policy Development and Strategy Alignment	SENA	1	36	Strategy & Policy Alignment Documents Annual Strategic & Political Report	187 790,00 €	503
5	Mainstreaming	FRNA	1	36	Annual Briefing Notes EU eHealth Interoperability Strategy	270 300,00 €	400
6	Trust and Acceptability	PFS PH	1	36	Trust & Acceptability Analysis Report	390 000,00 €	400
Total						2 003 790,00 €	2 826



**Horizontal Work Packages**

**Work package #** 1  
**Work package title** Coordination of the joint action  
**Work package description** Actions undertaken to manage the project and to make sure that it is implemented as planned  
**Work package Leader** ATNA

**List of the partners involved**

ATNA, MSPS, KSRZIS, DH, MHS, PGEU, EHTEL, FRNA, DENA, SDSD, CHE, DoHC, SENA, COCIR

**List of deliverable(s) linked to this work package**

Deliverable #	Deliverable title
1	Technical and Financial Report I/II/III
2	Governance Manual

**Milestones reached by this work package**

#	Milestone title	Month of achievement
1	Project Presentation template and logo	1
2	Governance structure	4
3	Draft financing overview	12

<b>Work package #</b>	2
<b>Work package title</b>	Dissemination of the joint action
<b>Work package description</b>	Actions undertaken to ensure that the results and deliverables of the project will be made available to the target groups
<b>Work package Leader</b>	NHIC

#### List of the partners involved

ATNA, DH, NHIC, ESKI, KITH, MHS, PGEU, CPME, EPF, HOPE, FRNA, DENA, ACSS, EHMA, COCIR, IHE Europe

#### Overview table showing the distribution and target for all project deliverables

#	Title	Distribution Channel	Target Audience
1	Technical and Financial Report I / II/ III	E-Mail, Meeting	EXCO, PSC, EC
2	Governance Manual	E-Mail, meeting	EXCO, PSC, EC
3	Dissemination Strategy	E-Mail, Meeting	EXCO, PSC, EC
4	Website	E-Mail, Meeting	EXCO, PSC, EC
5	Evaluation Progress Report (I/II) and Final Impact Assessment	E-Mail, Meeting, Event / Conference	EXCO, PSC, EC, Public Community
6	Strategy & Policy Alignment Documents	E-Mail, Meeting, Event / Conference	EXCO, PSC, EC, High Level Rep./EPSCO, Public Community
7	Annual Strategic & Political Report	E-Mail, Meeting, Event / Conference	EXCO, PSC, EC, High Level Rep./EPSCO, Public Community
8	Annual Briefing Notes	E-Mail, Meeting, Event / Conference	EXCO, PSC, EC, High Level Rep./EPSCO, Public Community
9	EU eHealth Interoperability Strategy	E-Mail, Meeting, Event / Conference	EXCO, PSC, EC, High Level Rep./EPSCO, Public Community
10	Trust & Acceptability Analysis Report	E-Mail, Meeting	EXCO, PSC, EC, Public Community

#### List of deliverable(s) linked to this work package

Deliverable #	Deliverable title
3	Dissemination Strategy
4	Website

#### Milestones reached by this work package

#	Milestone title	Month of achievement
1	Finalisation of WP2 strategy	3
2	Portal building	3
3	Dissemination materials – first round	7
4	Dissemination materials - second round	19
5	Dissemination materials - third round	28



<b>Work package #</b>	3
<b>Work package title</b>	Evaluation of the joint action
<b>Work package description</b>	Actions undertaken to verify if the project is being implemented as planned and reaches the objectives
<b>Work package Leader</b>	SDSD

**List of the partners involved**

ATNA, DH, ESKI, MHS, PGEU, EHTEL, EPF, FRNA, DENA, SDSD, EKEVYL SA, EHMA, COCIR, IHE Europe

**List of specific objectives**

**Specific objective 1** Strategic Guidance

<b>Process Indicators</b>	<b>Output Indicators</b>	<b>Outcomes Indicators</b>
Alignment of policy and strategy	Annual Strategic and Political Report	Similar governance approach
Provision of information of recent developments to the HLR	Awareness of article 13	Measures taken to ensure implementation

**Specific objective 2** Translation of Operational Work

<b>Process Indicators</b>	<b>Output Indicators</b>	<b>Outcomes Indicators</b>
Number of reviews of eHealth policies	Strategy and Policy Alignment & Documents	Translated and understandable documents to be used on national level
Number of relevant decisions taken	One relevant decision made at the annual Secretary of States' meeting	Consolidated opinions / decisions
European Council topic list	One relevant topic a year for the agenda at the council meeting	Continued focus on eHealth

**Specific objective 3** Deployment Process

<b>Process Indicators</b>	<b>Output Indicators</b>	<b>Outcomes Indicators</b>
Consensus building in relation to interoperability	Interoperability framework	Improved interoperability
Creation of short information	Briefing Notes	Consolidated information for the HLR ready to be used on national level

**Specific objective 4** MS Implementation Support

<b>Process Indicators</b>	<b>Output Indicators</b>	<b>Outcomes Indicators</b>
Implementation planning	EU eHealth Interoperability Strategy	Concrete implementation recommendations

**Specific objective 5** Stakeholder Involvement

<b>Process Indicators</b>	<b>Output Indicators</b>	<b>Outcomes Indicators</b>
Streamlined information focusing on stakeholder needs	Report on results achieved	Awareness and active learning
Involvement of stakeholders in the consortium	75 % directly or indirectly involved	Suitability and usability
Ascertainment of status-quo	Trust and Acceptability Analysis and Report	Concrete recommendations for all stakeholders

**Specific objective 6** Creation of Knowledge Management

<b>Process Indicators</b>	<b>Output Indicators</b>	<b>Outcomes Indicators</b>
Number of generated data entries	Database of validated contributors	Up-to-date information of relevant target groups
Consolidation and approval of reliable medical/technical/legal information	Proposal for a respective data set	Increased quantity and quality of electronic patient information produced

#### List of deliverable(s) linked to this work package

<b>Deliverable #</b>	<b>Deliverable title</b>
5	Evaluation Progress Report (I/II) and Final Impact Assessment

#### Milestones reached by this work package

<b>#</b>	<b>Milestone title</b>	<b>Month of achievement</b>
1	Initiation of evaluation	6
2	Verification of progress based on activities	12
3	Draft Impact assessment report on the whole project as well as recommendations for ongoing sustainability	34

**Work package #** 4  
**Work package title** Policy Development and Strategy Alignment  
**Work package description** WP4 will be supporting the Coordinator by carrying out a continuous political analysis of relevant National and European health strategies and eHealth policies as well as legal documents at EU level.  
**Work package Leader** SENA

#### List of the acronyms of associated partners involved

All members Co-leader: Sweden (SENA)

#### Specific objectives of this work package

Specific Objective #	Specific objective title
1	Strategic Guidance
2	Translation of Operational Work

#### List of deliverable(s) linked to this work package

Deliverable #	Outcomes / Deliverable title
6	Strategy & Policy Alignment Documents
7	Annual Strategic & Political Report

#### Milestones reached by this work package

#	Milestone title	Month of achievement
1	Preparatory work	4
2	Requirement Analysis	3
3	Outcomes Technical WP	11
4	Political Summary (with the Strategic and Political Update Report to be presented, reviewed and discussed in the EXCO Meeting)	4

**Work package #** 5  
**Work package title** Mainstreaming  
**Work package description** The main goal is to produce an agreed proposal for a European eHealth Interoperability Strategy as one of the main health policy instrument in the context of the European eHealth Governance Process.  
**Work package Leader** FRNA

#### List of the acronyms of associated partners involved

ATNA, DH, NHIC, ESKI, KITH, MHS, PGEU, EHTEL, CPME, EPF, HOPE, FRNA, MdS, DENA, PFS PH, ACSS, CHE, AUTH, DoHC, SENA, MoHT, CHA, COCIR, HL7 Int., HDIR Co-Leader: CANOPE

#### Specific objectives of this work package

Specific Objective #	Specific objective title
3	Deployment Process
4	MS Implementation Support

#### List of deliverable(s) linked to this work package

Deliverable #	Outcomes / Deliverable title
8	Annual Briefing Notes
9	EU eHealth Interoperability Strategy

#### Milestones reached by this work package

#	Milestone title	Month of achievement
1	Draft Briefing Notes	3
2	Draft EU eHealth Interoperability Strategy	30

**Work package #** 6

**Work package title** Trust and Acceptability

**Work package description** The objective is to provide stakeholders' representative with the means and the opportunities to discuss and identify possible ways to enhance trust and acceptability and make proposals to Member States' representatives as well as to the EC and industry, as appropriate.

**Work package Leader** PFS PH

#### List of the acronyms of associated partners involved

All members Co-Leaders: MHS and Users Stakeholders (CPME by Michael Wilks and EPF by Liuska Sanna)

#### Specific objectives of this work package

Specific Objective #	Specific objective title
5	Stakeholder Involvement
6	Creation of Knowledge Management

#### List of deliverable(s) linked to this work package

Deliverable #	Outcomes / Deliverable title
10	Trust & Acceptability Analysis Report

#### Milestones reached by this work package

#	Milestone title	Month of achievement
1	Definition of priorities and work plan	3
2	Draft Database (identification of key possible contributors)	5
3	First topic submission	9
4	Submission of topics (every 6 months) for EPSCO agenda	15
5	Proposal for a respective data set	30

**Timetable specification**

	WP 1	WP 2	WP 3	WP 4	WP 5	WP 6
M 1	M	X		X	X	X
M 2	X	X		X	X	X
M 3	X	M		M	M	M
M 4	M	D		M	D	X
M 5	D	D		X	X	M
M 6	X	X	M	D	X	X
M 7	X	M	X	X	X	X
M 8	X	X	X	X	X	D
M 9	X	X	X	X	X	M
M 10	X	X	X	X	X	X
M 11	X	X	X	M	X	X
M 12	M	X	M	X	X	X
M 13	D	X	D	D	X	X
M 14	X	X	X	X	X	X
M 15	X	X	X	X	X	M
M 16	X	X	X	X	X	X
M 17	X	X	X	X	X	X
M 18	X	X	X	X	X	X
M 19	X	M	X	X	X	X
M 20	X	X	X	X	X	X
M 21	X	X	X	X	X	X
M 22	X	X	X	X	X	X
M 23	X	X	X	X	X	X
M 24	X	X	X	X	X	X
M 25	X	X	X	X	X	X
M 26	X	X	X	X	X	X
M 27	X	X	X	X	X	X
M 28	X	M	X	X	X	X
M 29	X	X	X	X	X	X
M 30	X	X	X	X	M	M
M 31	X	X	X	X	X	X
M 32	X	X	X	X	X	X
M 33	X	X	X	X	X	X
M 34	X	X	M	X	D	X
M 35	X	X	X	X	X	X
M 36	X	X	X	X	X	X

**Legend:**

X - Work package duration (start to final months)

D - Month when deliverable will be produced

M - Month when milestone will be reached



**Collaborating partners**

#	Institution	Contact person (First name and Last name)	Address (City, Country)
1	Ministry of Health of Republic of Cyprus	Minas Kyriakides	Nicosia, Cyprus
2	Ministry of Health The Netherlands	Hans B. Havemann	The Netherlands
3	Ministry of Health Luxembourg	Rene Krippes	Luxembourg
4	Ministry of Health Poland	Natalia Zylinska	Warsaw, Poland
5	Ministry of Social Affairs Estonia	Pille Kink	Estonia
6	Norwegian Directorate of Health	Kristian Skauli	Norway
7	European Patients' Forum	Liuska Sanna	Belgium
8	Federal Office of Public Health	Adrian Schmid	Switzerland
9	Norwegian Centre for Informatics in Health and Social Care	Jacob Hygen	Norway
10	Ministry of Health Turkey	Unal Hulus	Turkey
11	Continua Health Alliance Private Stichting	Petra Wilson, Mario Romao	Belgium
12	European Coordination Committee of the Radiological, Electromedical & Healthcare Information Tech.	Nicole Denjoy	Belgium
13	Canope SARL	Norbert Paquel	France
14	ARISTOTELIO PANEPISTIMIO THESSALONIKIS - AUTH University	George Pangalos	Greece
15	Ministry of Health and Sports	FRNA	France

1.1 ANNEX 1b

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**Acronym: JA-EHGov**

**Title: Joint Action eHealth Governance Initiative**

**ANNEX 1b**

**FINAL DRAFT PROPOSAL**



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## 1. Problem analysis including evidence base

Many Member States are today in the process of initiating or rolling out large-scale eHealth investment and implementation programs. Some Member States have been granted financial support from European Structural or Regional Funds in order to reform their national healthcare systems. Thereby, we have a unique window of opportunity to build national solutions on common European or Global standards that enable continuity of care across borders. If we fail, there is a clear risk that national investments will be less efficient, more expensive and not providing the potential benefits for our citizens that otherwise would be possible. National projects could benefit if we can find joint solutions to challenge.

Furthermore, European cooperation on the eHealth area has been running successfully with the support of the European Commission for several years, with an extensive exchange of experiences at expert level. Substantial funding for developing eHealth has been allocated through Community research funds, and Member States have moved towards concrete actions to launch cross-border eHealth services in order to ensure continuity of care for citizens travelling across Europe. The eHealth area has now reached a level of maturity where a stronger involvement and commitment from Member States is needed if we are to bring forward the outcomes of the epSOS Large Scale Pilot and prepare the ground for using the solutions that will be developed.

At the same time, the legal framework in this field has been expanded in recent years, where eHealth has been put in the context of patient mobility and the need for the safe exchange of health data between national healthcare systems. Despite the extensive cooperation at expert level, there is an obvious lack of governance and coordination of ongoing activities. The gaps between the governance, strategy and operational levels are currently hampering the ability to move forward activities and initiatives, reflecting the political ambitions set out.

## 2. Target groups

The primary target are high level national representatives, policy-makers and decision-makers of governments, with the responsibility for designing and implementing health and eHealth policies. This group will use the JA information in their formulation of policies and decisions. All activities of the JA arise from the premise that its outputs will be used to inform, but not mandate the content of national / regional / institutional eHealth and appraisal reports. The secondary target groups of the JA are advisors and/or senior officials which have a key role in developing national strategies for eHealth. The tertiary target group comprises experts and representatives of National, Regional and EU wide projects who are deploying eHealth Services. The last group, transversal target group, are the stakeholders (and the general public).

Since the JA reporting should be transparent and the reports made public, and especially because the JA results will be made available to the public, the target groups de facto include all stakeholders including patients and citizens in general. They will be exposed to transparent, reliable information. Stakeholder umbrella organisations (i.e. policymakers, patient / consumer organisations, health care professionals, industry, and health related media) will be involved in the whole process, from political to operational level, with variable level of responsibility.

### 3. Methods and means

The JA proposal is not a classic technical IT project but intends to create a politically driven mechanism to coordinate ongoing and future activities in eHealth in MS and the European space. In order to tackle Council Conclusions and transform words into action it is proposed to define a European eHealth Governance Model based on MS cooperation with an organization and management suited to attain its ambitious objectives.

Conceptual and operational components of the Governance Initiative are organized at three levels:

1. Decision Makers level and political governance;
2. Strategy level and
3. Operational Level.

The Governance level should be understood as High level national representatives with the responsibility to design and implement health and eHealth policies.

The Strategy level should be understood as advisors and/or senior officials who have a key role in developing national strategies for eHealth. National representatives of the Strategy Group shall be directly appointed by the Governance level.

The Operational level should be understood as experts and representatives of national, regional and/or EU wide projects and or pilots which are deploying eHealth services.

While the Governance and the Strategy levels are often linked, the gap between the operational and the Governance level is a common challenge both at national as well at European level. Often the outcome of the work done at the operational level is not adequately communicated and therefore not fully reflected in the strategy and/or policy decisions. The ambition of the initiative is to bridge these gaps and enable evidence based eHealth. This would provide major added value by enabling healthcare systems to fully benefit from the opportunities offered by ICT and thus contribute to fulfilling their political goals. When shifting focus from development to deployment of eHealth services, there is also a strong need for including all relevant stakeholders, both users (e.g. patient, healthcare staff) and industry, in the governance process. In the model proposed, the policy group will be responsible for:

- analysing and acting on inputs by strategic and operational level,
- interacting with the European Commission and stakeholders,
- annual or periodical review of strategy and declaration of priorities and
- adopting Strategy Plans and Work Programmes proposed by the Core Strategy Group.

The European Core eHealth Strategy Group will be responsible for preparing the work of the Governance Group, basing it on the input received from the operational level. To carry on its tasks the strategy Group will also act as a steering body towards the operational level. The participation in the Strategy Group will be broad when including all participating Member States, stakeholders and DGs of the European Commission. The whole process will be operationally supported by a common Secretariat with a small structure, ensuring continuity, common information (document management and website) and operational platform between the two layers.

The way, how the different WPs operate within the eHGI will be described in an operations manual and approved by the whole consortium. In principle, the workplans of the WPs and the strategic directions in the WPs will be agreed upon in the EXCO. Each WP will produce deliverables that will

be approved by the EXCO before being brought to a further stage (PSC, EC, HLGG).

The evolution of concepts within the eHealth sector is already reflected today in a number of EU-level policy documents (e.g. the Digital Agenda, The Lead Market Initiative on eHealth, etc.), international and national projects, initiatives, etc. Many of them - from research to competitiveness and innovation programme actions - are also supported at EU level. Prioritisation and a concrete action plan are needed in order to bring them to reality for Europe's citizens. Here, the eHealth Governance Initiative serves as a meta-interface with the aim to boost deployment of eHealth services in Member States.

The following list of ideas gives a general overview of the different priority topics that need to be taken into account during the course of the project.

Close collaboration with the European Commission as well as other projects and initiatives is needed in order to align the various objectives of each topic with the ones of the SEHGovIA Thematic Network.

1. The developing of Key Actions / Political RoadMap<sup>1</sup> for cross border eHealth deployment in Europe are dependent on ongoing actions in epSOS, CALLIOPE, the Patient Rights' Directive, the Digital Agenda, STepS/STORK, HPRO, Netcards, etc. and the first political DRAFT document should be ready for political discussion as early as possible and brought to the table of the EPSCO Council. (WP RM) The development of cross-border Identification and Authentication measures takes into account the results of epSOS, STepS/STORK, the Patient Rights' Directive, the Digital Agenda Key Action 13 and should be brought to the EPSCO Council for political decision making. (WP ISM)
2. The minimum cross-border set of patient data included in Patient Summaries and/or ePrescription is dependant on the results of epSOS, the Patient Rights' Directive, the Digital Agenda Key Action 14 where a political decision should be possible at the EPSCO Council. (WP ISM)
3. Clarification of Legal Issue "Legal engineering" (Cross-border data exchange, Data protection ...) dependant on the results of epSOS, the Patient Rights' Directive and should be initiated with the start of the eHealth Governance Process. (LPPD)
4. Secure online access to medical health data / records for patients is dependant on the Digital Agenda Key Action 13 and should lead to concrete results in establishing an action plan. (WP ISM/LPPD)
5. Cross-border Technical Standards (framework, political agreement, interoperability testing, certification ...) dependant on epSOS, the Mandate 403, the Digital Agenda Key Action 5 should lead to concrete results in establishing an action plan. (WP ISM)

<sup>1</sup> The currently developed CALLIOPE EU eHealth Interoperability Roadmap focuses on cross border interoperability. It aims to describe an approach to overcoming any current barriers that fail to enable EU citizens to fully enjoy the potential of travel with all their rights as foreseen in the Treaty. However, in health terms, it is important to consider that crossing borders is not only a challenge with an international character. Such borders also exist between public service sectors, administrations, and professional domains. They form major obstacles to providing integrated services with a citizen focus. The approach of this Roadmap is to consider many different but interrelated aspects of eHealth interoperability. Those aspects reflect the notion of "crossing any border". Therefore the content of the Roadmap is directly transposable to the national and regional levels.

6. The Semantic Framework is dependant on epSOS, EuroDRG, the Patient Rights' Directive and should lead to concrete results in establishing an action plan. (WP ISM)
7. The High Level Trust and Security is dependant on the Patient Rights' Directive and should lead to concrete results in establishing an action plan. (Joint Action)
8. Methods for enabling the use of medical electronic information for public health and research coming out of the Patient Rights' Directive and epSOS. (WP RM)
9. Deployment of Telemedicine with regard to the Patient Rights' Directive. (WP RM)
10. Developing strategic goals / methods for dissemination and communication (Stakeholders, national governments/parliaments, user groups ...). (WP Coordination and EXCO)
11. Ambient Assistant Living with regard to the Digital Agenda Key Action 14 is to be implemented. (WP RM)
12. Developing a strategy for High Level Political Involvement in MS. (WP Coordination)

#### 4. Expected Outcomes

Based on a collaborative model for political, strategic and operational sustainability, the JA will support a new European eHealth Platform in order to establish a permanent network in an international context. It will be used to inform policy and health care decision makers in European countries. The main outcome of the JA will be the consolidation of the permanent network for eHealth in Europe resulting for recognition of its added value. The commitment expressed by the Ministers of Health of more than 25 European countries and respective organisations (including both MS and States of the EEA/EFTA) to build a permanent network, with a coordinated MS approach, will be renewed and reinforced by assuring a long-term MS engagement in the eHealth Governance Initiative together with the European Commission.

Additionally, countries not yet involved in the network, recognise its advantages and join the Initiative while expressing their long-term commitment. At the end of the JA, sustainability of the Network is thus achieved provided by a collaborative platform assuring sustainable growth and employment, quality and continuity of care in the European Health Space. Exchange of information among agencies and administrations is increased and duplication of work in the field of eHealth in Europe is reduced. An increasing number of national, regional and local organisations across Europe include the utilisation of the eHealth tools in their work procedures – i.e. refer to it in their general guidelines or account for it in their specific project plans – and produce eHealth information. Aside from information exchange, the initiative will also be key in identifying existing or new issues in existing or new projects and plans which would highly benefit from a high level collaboration between MS. Referencing and documenting the issue on one side and proposing strategies to tackle it on the other side are essential steps in order to flag it for a further decisional process.

Furthermore, the initiative will serve as a driving force to facilitate decision making at MS level and endorse decisions, guidelines, recommendations or proposals which have been proved mature enough by a majority of MS. The Initiative aims at addressing high priority objectives where specific outcomes will be produced in form of deliverables. Those deliverables which will have already received a great deal of attention at project, taskforce and stakeholders levels will have as priority audience decision makers at MS level. They will however be also disseminated in conferences, workshops and forums. Deliverables will outline how issues are relevant to the identified areas and how they are expected to contribute to achieve the overall objectives and make progress in the quality of Health.

## 5. External and internal risk analysis and contingency planning

1. Change in key personnel in the Main Partner (MP) and/or Associated Partners (APs): Early development of a risk plan; continuous monitoring of changes need to be part of this plan to get new staff quickly integrated. Constant communication through WP1 on the progress in the individual WP will keep the personnel updated.
2. Delay in reporting by APs: Early development of a strategy to require preliminary reporting 30 days prior to final reporting date. A separate MoU will be developed for signature by all the Associated Partners of the JA to detail the responsibilities
3. Financial or management crises in one of the AP organisations: strong central coordination with assistance of WP and taskforce LPs, good internal communication and distribution of tasks among partner organisations should contain the risk of WPs becoming diverted from focus or timetable
4. Major health emergencies affecting large populations: Possibly an early development of an emergency plan by the Executive Committee and constant monitoring of the public health situation for timely response and adjustment of work plans within the project in order to allow priority to immediate public health interventions
5. Consensus between all JA APs cannot be reached on vital issues: Intensive work by the Executive Committee and WPL1 should be put into clarifying positions, regulatory and policy backgrounds for discrepancies. Consensus that will allow the network to move forward towards its objectives should be pursued while accepting that conditions for national implementation may differ.
6. No sustainability of a European Network secured beyond the JA: Each Work Package is responsible for the development of a collaborative model serviced by the Coordinating Secretariat.
7. Deal with the lack of agreement of participations in recommendations or between the JA and the TN: in order to avoid this kind of risks the two instruments will have the same governing bodies as steering group, Secretariat resources and strategy group.

## 6. Horizontal Work package - Description of the work

The JA is structured into several Work Packages. All beneficiaries will contribute experts to carry out the specific tasks within these WPs. Adoptions (e.g. of deliverables), agreements and decisions on governance related matters are taken at the level of the Steering Committee.

### 6.1 Work package number 1

**WP 1 Coordination** - CO - will be in charge of internal and external coordination in the global framework of the European eHealth Governance Initiative and will be the single interface with the European Commission Services and APs for strategic, technical, administrative, financial matters & monitoring.

The other WP Leaders will be responsible for activities' coordination in their respective WP and will assist WP1 Leader (**Main Partner, ATNA**) with timely reporting and providing any information on request. The WP leader will also be responsible to ensure coordination and consistency with the activities of the proposed Thematic Network on eHealth which is funded by CIP ICT PSP.

A 3-year Work Plan will be developed and updated as needed. Reports to the European Commission will be prepared to ensure rigorous quality assurance of the project. With the active support of the secretariat and in full synergy with the proposed Thematic Network coordination, WP1 is responsible

for organising according to needs Steering Committee Meetings. The number of these meetings will however never be inferior to 2 yearly. Representatives of the European Commission, in particular DG SANCO and DG INFSO, and other relevant EU institutions will be invited as observers. The Steering Committee Meeting will decide the working and management plan of the Joint Action, providing opportunity for all JA participants to meet and strengthen JA dynamics.

The Main Partner and the WP Leading Partners will be responsible for potential conflict resolutions between the partners in the framework of the Steering Committee. Administrative support for ensuring consistency and continuity, avoiding duplication among Work Packages and the Thematic Network also needs to be installed.

In order to ensure the contribution of all members in such a large consortium, it is planned to actively involve the different beneficiaries in the different Work Packages by e.g. having parallel sessions during Project Steering Committee Meetings as this was quite successful in the CALLIOPE Thematic Network. Moreover, some beneficiaries are in the observer status (meaning Collaborating Partners). This makes it possible to monitor the different processes from a more distanced view which significantly increases the technical and scientific content of the JA.

Also, experience from the epSOS I and II project will be taken into account, where also a large consortium is involved in the project. In addition to that, every beneficiary is responsible for taking up the discussions and results of the JA in the respective Member States.

Furthermore, the project's success will be certified by a general project governance and structure which all will be combined in guidelines that will be provided WP1 in close cooperation with the Executive Committee. In these guidelines the role of the different beneficiaries will be clarified, dependant on if it is a Member State or another stakeholder group.

Another important fact that will guarantee the positive progress of the project is to involve the High Level Representatives of the MS in the various processes to achieve a clear political commitment by MS. For this it is planned as one of the very first steps in the project to compile a list including exactly those national High Level Representatives.

Since the JA will closely collaborate with the proposed Thematic Network a short explanation is considered at this point. Therefore, it shall be stated that in case the TN will not be approved, the JA will have enough resources and expertise due to its members that the operation of the project is **still guaranteed**. Nevertheless, should both instruments be approved, the synergies already in place will lead faster and more consistently to a sustainable network and concrete results for the eHealth Governance in Europe.

## 6.2 Work package number 2

**WP2 Dissemination** – DISS – (lead by NHIC) will develop a list of stakeholders, formulate the dissemination strategy and, the communication plan, disseminate information from the project to the stakeholders by producing and publishing adequate deliverables, collecting the feedback information from stakeholders and delivering it to the project management.

The Dissemination WP will provide support in information sharing, communication and dissemination, with the aim of supporting eHealth framework activities, action plans and guidelines. WP2 will produce and implement a Communication Plan in order to ensure that all relevant work and outcomes of the Joint Action have an adequate impact at policy level.

Furthermore, WP2 will ensure that quality information is made available at the citizen, patient and professional levels, in order to improve confidence and acceptance in the implementation and use of

eHealth services. The content of dissemination materials will be developed in close cooperation of WP1 and Secretariat. A sustainable, predictable and coordinated eHealth policy has a positive impact in growth and employment and in the competitiveness of the EU industry. Dissemination plan for the JA will be built in M3 with Work Plans to be developed by each Work Package. The perspective of eHealth users will be a guiding principle in defining the JA's dissemination strategy. Partner organizations will have a defined role in promoting results at both European and National level. Dissemination will be supported by electronic eHealth updates to partners and public. This site will provide an information point for the work of the project (including details of partners, objectives, work areas, results, and working papers, public deliverables, etc.) and for related fields of work (links to other projects, services, collaborative efforts, etc., relevant to each part of the project). The communication strategy will include presence and participation through MS participation in relevant international conferences in order to disseminate the main outcomes and experiences of eHealth Governance Initiative. WP2 in collaboration with WP4 will provide information support in developing stakeholder engagement activities. Adaptation of material for gov. audience will need use of communication expertise.

WP2 is responsible for the communication from within the project to the relevant stakeholders and back by working on the following tasks:

**Proposal and maintenance of the stakeholder list.**

There is a huge amount of stakeholders who will be interested in what is going on inside of the Joint Action project. There should be the clear list of the mentioned stakeholders that should receive targeted the information from inside of the project. Because the person(s) in charge could change in time and also new stakeholders can appear, there is clear necessity to maintain the list of stakeholders to be up to date.

**Proposal and maintenance of the dissemination strategy.**

Because not every information is appropriate for all stakeholders, there should be the clear strategy what information should be communicated to whom and why should the information be communicated, when and how. Also the feedback from the stakeholders' level is very important for the project and because of that the dissemination strategy should state when and how the feedback information should be collected.

Because the situation in the European eHealth area could change in time and the changes could have an important influence on the eHealth Governance Initiative, the dissemination strategy should be maintained in the time in the dependence of the actual situation.

**Propose and maintain the annual communication action plan.**

The annual communication action plan is the list of concrete activities, which should be performed to disseminate all important information from the project to all the important stakeholders and collect the feedback information. The structure and the number of concrete dissemination activities will be proposed in the beginning of every year of the project. During the project the plan will be maintained in dependence of the effectiveness of the yet performed activities and in dependence of the changes of the structure of the information to be disseminated.

WP2: Dissemination is very dependent on all the other WPs and activities inside the project.



**Deliverables:****Dissemination strategy**

The deliverable „Dissemination strategy“ deals with the description of the stakeholders that need to be addressed within and outside the project. Furthermore, dependent on the strategic objectives of the project the vision of how to successfully communicate the results will be part of this deliverable.

The main target groups are the governments of the respective MS, the key policy makers in the national and European parliaments, key drivers of interest groups (Users, Industry, etc.) and other relevant policy makers on the European and national level who have the capacity to influence the policy making process in the MS and the EU.

Month of achievement: 1

Confidentiality level: public

Distribution channels: EXCO meeting, email

Target audience: EXC

**Annual communication action plan**

The plan of dissemination includes a list of activities to be undertaken during the first, second and third year of the project in order to disseminate the project artefacts across the target groups and stakeholders quickly and effectively.

Month of achievement: 1, 13, 25

Confidentiality level: public

Distribution channels: EXCO meeting, email

Target audience: EXCO

The annual communication plan includes the implementation of the following activities:

**eHealth Governance portal**

The website (including a public and an internal project part) will be used for dissemination of e.g. actual information, materials, discussions, collecting the feedback from stakeholders.

Month of achievement: 4

Confidentiality level: partially public

Distribution channels: Internet

Target audience: all stakeholders

**Dissemination materials – EU eHealth governance Brochure**

This brochure will contain all the relevant materials being prepared and discussed during the first, second and third years of eHealth Governance project (strategies, roadmaps, guidelines, reports etc.).

Month of achievement: 13, 25, 36

Confidentiality level: public

Distribution channels: EXCO meeting, email, printed brochure

Target audience: EXCO, PSC, EC, High Level Rep./EPSCO

## Dissemination materials – List of eHealth challenges, eHealth solutions and good practices

This brochure will discuss the main eHealth challenges, how to solve them with the concrete eHealth solutions and what are the best practices how to solve the mentioned problems.

Month of achievement: 13, 25, 36

Confidentiality level: public

Distribution channels: EXCO meeting, email, printed brochure

Target audience: EXCO, PSC, EC, High Level Rep./EPSCO

### 6.3 Work package number 3

The **Evaluation** work package – EVA – includes actions undertaken to verify if the JA is being implemented as planned and ensure that all the processes respond to good practice and to specifications of the JA. WP 3 will ensure that the JA achieves its objectives, and that it is vigilant to emerging problems and subsequently corrective in its actions. Ongoing responsibilities of project management, communication with the EU commission and monitoring, including progress against milestones, will be carried out by Work Package 1. The Evaluation Work package will concentrate on supporting these activities by providing an audit function, overall evaluation, verification and feedback processes. It will concretely take the form of an ongoing review undertaken by the WP leader of all actions undertaken for the past period and analyse their coherence with original objectives as defined generally and specifically in each work package. It will also provide recommendations for improvements in the global governance structure.

It should be stated from the very beginning on that the JA facilitates a political process and therefore cannot be compared to the common standards of scientific or organizational projects. Consequently, indicators have to stress the process and output in the form of policy papers delivered to the political institutions of the EC and the MS. For this reason, the impact cannot be measured by concrete political decisions by relevant bodies of the EU-level and MS which cannot be influenced by the eHealth Governance process itself, but the input can be measured by the numbers and the content of policy recommendations drafted by the eHGI.

Evaluation should be seen as an integral part of the initiative, and ongoing evaluation with a report every year should ensure that potential problems are resolved as early as possible should they emerge. At the end of the project an evaluation of the whole project will be carried out and recommendations regarding future sustainability will be part of this evaluation.

This work package is dependent on input from all the vertical work packages and will operate on the basis of the objectives set out in relation to these work packages.

The work package on evaluation should produce 3 deliverables, the third being an evaluation of the whole project as such.

Part of the evaluation will be the different WPs regarding their specific objectives:

1. Strategic Guidance
2. Translation of Operational Work
3. Deployment Process
4. MS Implementation Support

5. Stakeholder involvement
6. Creation of Knowledge Management

All reports should be public and should be distributed through the website. Custom made information suitable for decision making should be distributed directly to high level national representatives and be presented to the eHealth Governance Group at their meetings for discussion and approval.

## 7. Core Work Package – Description of the work

### 7.1 Work package number 4

The goal of **WP Policy Development and Strategy Alignment – PS** – is (in close cooperation with the coordinator) to ensure that all work carried out within the Initiative is responding to the needs of patients and health professionals and is closely linked to the National and European healthcare policy framework. Thereby, work within WP4 has a key role for reaching the main goal of the Initiative, i.e. to better include eHealth into health policy and better align eHealth investments to health needs and bridge the knowledge gaps between the governance, strategy and operational levels.

WP4 will be supporting the Coordinator by carrying out a continuous political analysis of relevant National and European health strategies and eHealth policies as well as legal documents at EU level. WP4 will use the knowledge and outcomes produced by other WPs and translate the respective deliverables into clear policy proposals for decision and action at the political level and to be in line with the political ambitions of the Member States and the European Commission.

#### Specific objectives:

The objective includes supporting the policy development of the Initiative at decision making level by ensuring the implementation of consolidated policy statements, strategies and action plans deployed by:

- Reviewing periodically eHealth Policies and providing strategic guidance for MS, based on outcomes and contributions received by the specific technical WPs and supporting the continuous update of the political vision of the Initiative and the priorities for coordinating policies and actions and benchmarking opportunities as well as monitoring eHealth strategies and initiatives at National and EU level
- Supporting the Coordinator in translating the respective operational work into proposed action by the European Council, etc. and identify the priorities and objectives of the work within the European Commission, European Parliament and MS Governance structures; the Presidency priorities; and ongoing related projects

#### Deliverables:

In accordance with the objectives of this WP, expected results will be updated in internal reports, but also develop the official deliverables, according to the schedule of the entire initiative.

List of deliverables linked to this work package:

D4.x Strategy and Policy alignment documents (reflecting the outcomes and contributions received by the specific WP (Work Package Deliverables) and translated into specific political strategies.)

D4.x Annual Strategic and Political Report (to be presented at least in the High level Secretary of State's meeting or eHealth Conference Meetings)

### **Relationship and dependencies**

For an effective and technical development of the WP P&S, coordination mechanisms will be established with the different WP's who develop other parts of the initiative; those could be bilateral or multilateral and will be also specified in the Operations Manual drafted by WP Coordination.

### **Relationship with WP Coordination: General management of the WP and specific supporting actions.**

- Exchange of information and contributions received by the specific Work Packages
- Support in translating operational work into proposed political actions
- Support the Coordinator in the presentation of Strategies and Policies to Member States and the European Commission at High Level Secretary of State's meeting or eHealth Conference Meetings

### **Relationship with WP Evaluation: Verification of WP implementation and deployment of planned activities and achievement of the objectives**

- Provide budgets and assistance to prepare Evaluation deliveries
- Accomplish deadlines related to evaluation
- Assistance to perform indicators

### **Relationship with WP Dissemination: Communication assurance of the WP outcomes and updates and sharing strategies to interested political stakeholders approach.**

- Assist Dissemination Actions with documents, presentations and different types of materials in relation to the WP's specific objectives
- Support WP Dissemination in order to periodically update the eHealth Initiative Website
- Provide guidance and support for the updates in eHealth political strategies throughout EU and EC with regard to the specific objectives of each WP

### **Relationship with other WPs: Obtainment of relevant technical information and eHealth that can be synthesized in actions and decisions.**

- Supporting the translation of outcomes and contributions of all WP into political proposals
- Providing general political information to other WPs

## **7.2 Work package number 5**

The main objective of **WP Mainstreaming** – MST – (led by France) is to produce an agreed proposal for a European eHealth Interoperability Strategy as one of the main health policy instrument in the context of the European eHealth Governance Process. While the RoadMap intends to establish the factual basis for decision making, the Mainstreaming activity takes the work one step further, building on the richness of the RoadMap content as well as on the continuous involvement of the stakeholders in order to:

- (starting from the RoadMap) propose appropriate routes for reaching the priorities set by the HLR
- produce documents for decision making-health authorities in close cooperation with WP4 and the EXCO (briefing notes)
- ensure that the process is totally understandable for all stakeholder and could be shared with the “whole eHealth community”

### **Specific Objectives:**

- Based on the issues of the RoadMap respective activities regarding the common development of the overall European eHealth Interoperability Strategy by all stakeholders will be provided in briefing notes
- Proposals for actions that are needed to support the implementation of the RoadMap to be taken forward at EU level as well as proposals on ways of supporting MS in the implementation of the proposed eHealth strategy (through e.g. peer reviews, site visits etc) taking full benefit of the EU co-operation and pooled expertise, reflected in the RoadMap

### **Deliverables:**

D5.1 1x3 Briefing Note(s)

D5.2 The EU eHealth Interoperability Strategy

Indicators: 3 briefing Notes (deliver in time for each HLR meeting)  
a minimum of 3 (official) iterations with the HLR  
1 final consolidated document (agreed content by consensus)

### **Relationship and dependencies**

For an effective and technical development of the WP MST, coordination mechanisms will be established with the different WP's who develop other parts of the initiative; those could be bilateral or multilateral and will be also specified in the Operations Manual drafted by WP Coordination.

### **Relationship with WP Coordination: General management of the WP and specific supporting actions.**

- Inform the Coordinator of recent developments within the WP as well as on organizations issues
- Support the Coordinator in bringing together all stakeholders relevant to produce the European eHealth Interoperability strategy

### **Relationship with WP Evaluation: Verification of WP implementation and deployment of planned activities and achievement of the objectives**

- Provide budgets and assistance to prepare Evaluation deliveries
- Accomplish deadlines related to evaluation
- Assistance to perform indicators

### **Relationship with WP Dissemination: Communication assurance of the WP outcomes and updates and sharing strategies to interested political stakeholders approach.**

- Assist Dissemination Actions with documents, presentations and different types of materials in relation to the WP's specific objectives
- Support WP Dissemination in order to periodically update the eHealth Initiative Website
- Provide guidance and support for the updates in eHealth political strategies throughout EU and EC with regard to the specific objectives of each WP

**Relationship with Technical WPs: Obtainment of relevant technical information and eHealth that can be synthesized in actions and decisions.**

- Bring together all WPs and stakeholders to make the process understandable
- Gather all input from the different WPs to produce the European eHealth Interoperability Strategy

**7.3 Work package number 6:**

The general objective of **WP Trust and Acceptability - TA** (lead by PFS PH and the user's stakeholders group) is to provide stakeholders' representative with the means and the opportunities to discuss and identify possible ways to enhance trust and acceptability and make proposals to Member States' representatives as well as to the EC, as appropriate, on how the needs of users shall be best taken into account in the developments of respectively national strategies or EU funded initiatives. The Work Package will support the main outcome of the project, which is contributing to improvements in eHealth governance and enhanced co-ordination between Member States' and the European Commission's eHealth policies. Hence, this creation of knowledge management leads to a measurable improvement in the health status of European citizens, and in the quality and sustainability of European health systems.

The 3 main finalities regarding the scope of this WP within the JA-EHGov can be summarized as follows:

- Help to develop cross-border eHealth architecture and services
- Help to implement an efficient economic subsidiary strategy in term of eHealth investment at regional, national and EU levels
- Help to establish processes which will facilitate global alignment of strategies

This WP is not technical per se, but it is of paramount importance to foster eHealth adoption and use. Consequently, it is more focused on the third finality mentioned here above. The key implicit objective is to identify invariant barriers and drivers to eHealth adoption and use which could be considered as valid for all members of the initiatives. The perspective of the final users (health professionals and citizens in particular) needs thus to be analysed and taken into consideration as early as possible.

The active participation of the EU stakeholders platforms (and their national affiliations) in this WP is thus essential: Materials produced or referenced here are therefore to be seen both as preliminary inputs for other WPs or as essential complementary outputs. Although there exist important dependencies on other WPs, there are also certain topics which can be dealt with more independently (see below).

The participation of the stakeholders in the initiative is already bringing an important added value as

it will facilitate a consensus building deprived from the sometimes too rigid constraints met at national level. Here, perceptions are as important as facts.

The first **operational objective** of the WP will be to list the topics to be addressed and to prioritize them according to:

- Identified objective links with other WPs,
- Link with global deployment of already (or quickly to be) available services.
- Level of maturity of the topic,
- Existence of documented experience.
- Existence of documented gap

The **techniques** proposed in order to reach this objective are:

- Active structured brainstorming
- Complementary literature search and identification of key reliable sources
- Inventory of relevant past or on-going projects
- Detailed analysis and discussion of identified sources (and implied assumptions)
- Analysis of feasibility of generalization (and conditions there of) at EU level.
- Rewriting of materials in order to guarantee optimal dissemination and understanding within the WP and in the other WPs.

Here below a non-exhaustive list of the topics which are subject to be dealt within this WP. (Dependency with other technical WPs is indicated for each of the listed topic):

Nr.	Topics	Dependencies
<b>Aspects linked to TRUST:</b>		
1	Ownership: Is ownership (of service/architecture) a preliminary condition in order for health professionals and citizens to have a positive preliminary attitude towards given architecture and service? How to make compatible ownerships and convergence?	WP ISM
2	Security: What kind of actions are needed in order to convince stakeholders or that a given architecture/service is fully secure?	WP LPPD, WP ISM
3	Legal certainty: What kind of measures are needed in order to make the conditions of legal certainty understood and known by users?	WP LPPD, WP ISM, WP MST
4	Access to data by citizens and sharing of data between different HCPs	WP RM
5	Transparency and consensus building approaches at local, regional, sectoral and national levels	WP RM
6	“Buy in” strategies: Strategies of “enrolment” such as opt in/opt out approaches	WP LPPD
<b>Aspects linked to ACCEPTANCE:</b>		
1	Use: Strategies to promote effective production of meaningful information.	WP RM
2	Usability and disruption avoidance	WP ISM
3	Pricing and business model	WP RM
4	Mobility	WP ISM
5	Accountability and liability of HCPs: the transparency induced by eHealth development links to new questions that need to be	WP LPPD
6	Customization and orchestration of processes	WP ISM

7	Patient empowerment	WP LPPD, WP RM
8	Funding (Reimbursement)	WP RM
9	Training and change management	WP RM
10	Choice of the priority use cases	WP RM

## 8. List of all Deliverables in the JA-EHGov

Due to the fact that some Deliverables are only mentioned in the PDF-Document and some others in this word file, below the list of all can be found:

WP	D. No.	Name of Deliverable
CO	D1.1.1	Technical & Financial Report I
CO	D1.1.2	Technical & Financial Report II
CO	D1.2	Governance Manual
DISS	D2.1	Dissemination Strategy
DISS	D2.2.1	Annual Communication Action Plan I (includes the implementation of D2.3.1 to D2.3.3)
DISS	D2.2.2	Annual Communication Action Plan II (includes the implementation of D2.3.1 to D2.3.3)
DISS	D2.2.3	Annual Communication Action Plan III (includes the implementation of D2.3.1 to D2.3.3)
DISS	D2.3.1	eHealth Governance Portal (= Website)
DISS	D2.3.2	Dissemination Materials: EU eHealth Governance Brochure
DISS	D2.3.3	Dissemination Materials: List of eHealth challenges, eHealth solutions & good practices
EVA	D3.1.1	Evaluation Progress Report I
EVA	D3.1.2	Evaluation Progress Report II
EVA	D3.2	Final Impact Assessment
PS	D4.1.1	Strategy & Policy Alignment Documents I
PS	D4.1.2	Strategy & Policy Alignment Documents II
PS	D4.1.3	Strategy & Policy Alignment Documents III
PS	D4.2.1	Annual Strategic & Political Report I
PS	D4.2.2	Annual Strategic & Political Report II
PS	D4.2.3	Annual Strategic & Political Report III
MT	D5.1.1	Annual Briefing Notes I
MT	D5.1.2	Annual Briefing Notes II
MT	D5.1.3	Annual Briefing Notes III
MT	D5.2	The EU eHealth Interoperability Strategy
TA	D6.1	Trust and Acceptability Analysis Report

## 9. To be included in the TN proposal

WP Roadmapping - RM (to be included in the TN proposal) led by FRNA.

WP Interoperability, Standardization and Market – ISM (to be included in the TN proposal) by DENA.

WP Legal and protection of personal data – LPPD (to be included in the TN proposal) led by AUTH.



**ANNEX II**  
**ESTIMATED BUDGET OF THE ACTION**



ANNEX II  
A. GLOBAL BUDGET (in EUR)

<b>Expenditures</b>	
<u>Direct eligible costs</u>	
E1. Staff	1.079.627,10
<i>a. Costs pertaining to public officials</i>	481.095,10
<i>b. Costs not pertaining to public officials</i>	598.532,00
E2. Travel costs and subsistence allowances	489.824,00
E3. Equipment	0,00
E4. Consumables and supplies directly linked to the project	0,00
E5. Subcontracting costs	145.251,00
E6. Other costs	158.000,00
<b>Total direct eligible costs</b>	<b>1.872.702,10</b>
<u>Indirect eligible costs</u>	
E7. Overheads	131.089,15
<b>Total indirect eligible costs</b>	<b>131.089,15</b>
<b>Total - Expenditures</b>	<b>2.003.791,25</b>

<b>Incomes</b>	
I1. Commission funding	1.001.894,49
I2. Contribution pertaining to public officials	481.095,10
I3. Applicant's financial contribution	520.801,66
I4. Income generated by the project	0,00
I5. Other external resources	0,00
<b>Total - Incomes</b>	<b>2.003.791,25</b>

<b>I1. Commission funding %</b>	<b>50,00%</b>
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ANNEX II  
B. DETAILED BUDGET (in EUR)

<b>E1. Staff</b>						
<b>a. Costs pertaining to public officials</b>						
Partner reference	Function	Name	Number of person days	Daily cost (€ per day)	Cost (€)	
01 - ATNA - AT	Director General	Clemens-Martin Auer	138	638,00	88.044,00	
01 - ATNA - AT	Head of Dep.	Engelbert Preiner	125	441,00	55.125,00	
01 - ATNA - AT	Deputy Head of Dep.	Tanja Niederländer	145	208,00	30.160,00	
		<b>Sub-Total Staff a.</b>	<b>408</b>		<b>173.329,00</b>	<b>01 - ATNA - AT</b>
02 - KSRZIS - CZ	Director of ICT/Dep.	Fares Shima	12	187,50	2.250,00	
02 - KSRZIS - CZ	Executive Officer	Robert Fialka	12	187,50	2.250,00	
		<b>Sub-Total Staff a.</b>	<b>24</b>		<b>4.500,00</b>	<b>02 - KSRZIS - CZ</b>
03 - NHIC - SK	IT manager	Pavol Rieger	70	250,00	17.500,00	
03 - NHIC - SK	Executive Officer	Gschwendt	54	250,00	13.500,00	
03 - NHIC - SK	Executive Officer	Simegh	60	300,00	18.000,00	
03 - NHIC - SK	Executive Officer	Maria Chmelova	50	180,00	9.000,00	
		<b>Sub-Total Staff a.</b>	<b>234</b>		<b>58.000,00</b>	<b>03 - NHIC - SK</b>
04 - ESKI - HU	Head of Information Dep.	György Súrjan	6	445,00	2.670,00	
04 - ESKI - HU	Executive Officer	Akos Moro	5	371,00	1.855,00	
		<b>Sub-Total Staff a.</b>	<b>11</b>		<b>4.525,00</b>	<b>04 - ESKI - HU</b>
05 - DOHC - IE	Officer ICT Unit	Kevin Conlon	5	500,00	2.500,00	
05 - DOHC - IE	Project assistant	Jane Grimson	4	500,00	2.000,00	
		<b>Sub-Total Staff a.</b>	<b>9</b>		<b>4.500,00</b>	<b>05 - DOHC - IE</b>
06 - DH - UK	Project assistant	Chris Wilber	3	805,00	2.415,00	
06 - DH - UK	eHealth Policy Lead	Rod Toohar	6	322,00	1.932,00	
		<b>Sub-Total Staff a.</b>	<b>9</b>		<b>4.347,00</b>	<b>06 - DH - UK</b>
07 - MSPS - ES	Director General	Pablo Rivero	8	500,00	4.000,00	
07 - MSPS - ES	Executive Officer	Esther Gil	17	500,00	8.500,00	
07 - MSPS - ES	Executive Officer	Jose Maria Divar Conde	20	500,00	10.000,00	
07 - MSPS - ES	Project assistant	Borja Beltran	15	500,00	7.500,00	
		<b>Sub-Total Staff a.</b>	<b>60</b>		<b>30.000,00</b>	<b>07 - MSPS - ES</b>
09 - MHS - SI	CEO	Marije Meglic	55	220,00	12.100,00	
09 - MHS - SI	Head of ICT Unit	Smiljana Voncina Slavec	30	229,00	6.870,00	
		<b>Sub-Total Staff a.</b>	<b>85</b>		<b>18.970,00</b>	<b>09 - MHS - SI</b>
16 - MDS - IT	Director General	Rossana Ugenti	10	1.055,52	10.555,20	
16 - MDS - IT	Head of NSIS	Lidia Di Minco	15	468,96	7.034,40	
		<b>Sub-Total Staff a.</b>	<b>25</b>		<b>17.589,60</b>	<b>16 - MDS - IT</b>
18 - DENA - DE	Referent	Erwin Barfels	80	500,00	40.000,00	
		<b>Sub-Total Staff a.</b>	<b>80</b>		<b>40.000,00</b>	<b>18 - DENA - DE</b>
19 - PFS PH - BE	Project manager	Luc Nicolas	57,5	275,00	15.812,50	
		<b>Sub-Total Staff a.</b>	<b>58</b>		<b>15.812,50</b>	<b>19 - PFS PH - BE</b>
20 - SDS - DK	Project Manager	Kenneth Ahrensberg	100	460,00	46.000,00	
20 - SDS - DK	Project Manager	Unknown	18	250,00	4.500,00	
		<b>Sub-Total Staff a.</b>	<b>118</b>		<b>50.500,00</b>	<b>20 - SDS - DK</b>
21 - ACSS - PT	Director General	Fernando Moto	14	323,00	4.522,00	
		<b>Sub-Total Staff a.</b>	<b>14</b>		<b>4.522,00</b>	<b>21 - ACSS - PT</b>
22 - CHE (VEC) - LV	Head of eHealth Unit	Arija Berzina	50	90,00	4.500,00	
		<b>Sub-Total Staff a.</b>	<b>50</b>		<b>4.500,00</b>	<b>22 - CHE (VEC) - LV</b>
23 - MHEC - MT	Project assistant	Rossano Cuschieri	20	500,00	10.000,00	
23 - MHEC - MT	Health consultant	Hugo Agius Muscat	20	500,00	10.000,00	
		<b>Sub-Total Staff a.</b>	<b>40</b>		<b>20.000,00</b>	<b>23 - MHEC - MT</b>
24 - SENA - SE	Deputy Director	Daniel Forslund	60	500,00	30.000,00	
		<b>Sub-Total Staff a.</b>	<b>60</b>		<b>30.000,00</b>	<b>24 - SENA - SE</b>
<b>Sub-Total: Costs pertaining to public officials</b>			<b>1.285</b>		<b>481.095,10</b>	
<b>b. Costs not pertaining to public officials</b>						
Partner reference	Function	Name	Number of person days	Daily cost (€ per day)	Cost (€)	
08 - EHMA - IE	Director	Jen Bremer	5	500,00	2.500,00	
08 - EHMA - IE	Project assistant	Britta Baer	4	500,00	2.000,00	
		<b>Sub-Total Staff b.</b>	<b>9</b>		<b>4.500,00</b>	<b>08 - EHMA - IE</b>
10 - PGEU - BE	Legal Officer	John Chave	5	500,00	2.500,00	
10 - PGEU - BE	Profess. Affair Advisor	Jurate Svarechte	4	500,00	2.000,00	
		<b>Sub-Total Staff b.</b>	<b>9</b>		<b>4.500,00</b>	<b>10 - PGEU - BE</b>
11 - EHTEL - BE	Secretary General	Marc Lange	2	600,00	1.200,00	
11 - EHTEL - BE	eHealth manager	Stephan Schug	3	550,00	1.650,00	
11 - EHTEL - BE	Project assistant	Diane Whitehouse	3	550,00	1.650,00	
		<b>Sub-Total Staff b.</b>	<b>8</b>		<b>4.500,00</b>	<b>11 - EHTEL - BE</b>
12 - CPME - BE	Secretary General	Birgit Beger	5	500,00	2.500,00	
12 - CPME - BE	Senior Policy Advisor	Sophie Peresson	4	500,00	2.000,00	
		<b>Sub-Total Staff b.</b>	<b>9</b>		<b>4.500,00</b>	<b>12 - CPME - BE</b>
13 - HL7 INT - BE	Secretary General	Callierne Chronaki	9	500,00	4.500,00	
		<b>Sub-Total Staff b.</b>	<b>9</b>		<b>4.500,00</b>	<b>13 - HL7 INT - BE</b>

ANNEX II  
B. DETAILED BUDGET (in EUR)

14 - HOPE - BE	Director	Pascal Garel	5	600,00	3.000,00
14 - HOPE - BE	Policy Advisor	Karolina Hanslik	6	250,00	1.500,00
<i>Sub-Total Staff b.</i>			<b>11</b>		<b>4.500,00</b>
15 - GOEG - AT	Project Secretariat	Katrin Morawetz	359	248,00	89.032,00
15 - GOEG - AT	Project Secretariat	Isabella Weber	315	248,00	78.120,00
15 - GOEG - AT	Project Management	Unknown	200	500,00	100.000,00
15 - GOEG - AT	Project Management	Unknown	200	500,00	100.000,00
15 - GOEG - AT	Project Management	Unknown	200	500,00	100.000,00
15 - GOEG - AT	Project Management	Unknown	200	500,00	100.000,00
<i>Sub-Total Staff b.</i>			<b>1.474</b>		<b>567.152,00</b>
17 - EFN - BE	Director General	Paul de Raeye	2	740,00	1.480,00
17 - EFN - BE	Policy Advisor	Silvia Gomez	5	290,00	1.450,00
17 - EFN - BE	Project assistant	Fatima Pereira	5	290,00	1.450,00
<i>Sub-Total Staff b.</i>			<b>12</b>		<b>4.380,00</b>
<b>Sub-Total: Costs not pertaining to public officials</b>			<b>1.541</b>		<b>598.532,00</b>
<b>TOTAL STAFF COSTS</b>			<b>2.826</b>		<b>1.079.627,10</b>

## E2. Travel costs and Subsistence allowances

## Travel costs

Partner reference	Purpose	Means of transport	Place of departure	Destination	Number of persons	Cost
01 - ATNA - AT	all PSC (2x/year)	Flight	Vienna	Brussels	1	3.600,00
01 - ATNA - AT	all EXCO (4x/year)	Flight	Vienna	Brussels	1	7.200,00
01 - ATNA - AT	WP Meetings (12x/year)	Flight	Vienna	Brussels	1	21.600,00
01 - ATNA - AT	eHealth Conference HU	Car (=Train)	Vienna	Budapest	2	520,00
01 - ATNA - AT	eHealth Conference DK	Flight	Vienna	Copenhagen	2	1.200,00
01 - ATNA - AT	eHealth Conference IE	Flight	Vienna	Dublin	2	1.200,00
01 - ATNA - AT	Different Coord. Meetings (1x/y)	Flight	Vienna	Brussels	1	1.800,00
<i>Sub-Total Travels</i>					<b>01 - ATNA - AT</b>	<b>37.120,00</b>
02 - KSRZIS - CZ	all PSC (2x/year)	Flight	Prague	Brussels	1	3.600,00
02 - KSRZIS - CZ	eHealth Conference HU	Flight	Prague	Budapest	1	600,00
02 - KSRZIS - CZ	WP Meetings (4x/year)	Flight	Prague	Brussels	1	7.200,00
02 - KSRZIS - CZ	eHealth Conference DK	Flight	Prague	Copenhagen	1	600,00
02 - KSRZIS - CZ	eHealth Conference IE	Flight	Prague	Dublin	1	600,00
<i>Sub-Total Travels</i>					<b>02 - KSRZIS - CZ</b>	<b>12.600,00</b>
03 - NHIC - SK	all PSC (2x/year)	Flight	Bratislava	Brussels	2	7.200,00
03 - NHIC - SK	all EXCO (4x/year)	Flight	Bratislava	Brussels	1	7.200,00
03 - NHIC - SK	WP Meeting (6x/year)	Flight	Bratislava	Brussels	2	21.600,00
03 - NHIC - SK	eHealth Conference HU	Train	Bratislava	Budapest	1	260,00
03 - NHIC - SK	eHealth Conference DK	Flight	Bratislava	Copenhagen	1	600,00
03 - NHIC - SK	eHealth Conference IE	Flight	Bratislava	Dublin	1	600,00
<i>Sub-Total Travels</i>					<b>03 - NHIC - SK</b>	<b>37.460,00</b>
04 - ESKI - HU	all PSC (2x/year)	Flight	Budapest	Brussels	1	3.600,00
04 - ESKI - HU	WP Meetings (4x/year)	Flight	Budapest	Brussels	1	7.200,00
04 - ESKI - HU	eHealth Conference DK	Flight	Budapest	Copenhagen	1	600,00
04 - ESKI - HU	eHealth Conference IE	Flight	Budapest	Dublin	1	600,00
<i>Sub-Total Travels</i>					<b>04 - ESKI - HU</b>	<b>12.000,00</b>
05 - DOHC - IE	all PSC (2x/year)	Flight	Dublin	Brussels	1	3.600,00
05 - DOHC - IE	eHealth Conference HU	Flight	Dublin	Budapest	1	600,00
05 - DOHC - IE	WP Meetings (4x/year)	Flight	Dublin	Brussels	1	7.200,00
05 - DOHC - IE	eHealth Conference DK	Flight	Dublin	Copenhagen	1	600,00
<i>Sub-Total Travels</i>					<b>05 - DOHC - IE</b>	<b>12.000,00</b>
06 - DH - UK	all PSC (2x/year)	Flight	Leeds	Brussels	1	3.600,00
06 - DH - UK	eHealth Conference HU	Flight	Leeds	Budapest	1	600,00
06 - DH - UK	WP Meetings (4x/year)	Flight	Leeds	Brussels	1	7.200,00
06 - DH - UK	eHealth Conference DK	Flight	Leeds	Copenhagen	1	600,00
06 - DH - UK	eHealth Conference IE	Flight	Leeds	Dublin	1	600,00
<i>Sub-Total Travels</i>					<b>06 - DH - UK</b>	<b>12.600,00</b>
07 - MSPS - ES	all PSC (2x/year)	Flight	Madrid	Brussels	2	7.200,00
07 - MSPS - ES	all EXCO (4x/year)	Flight	Madrid	Brussels	1	7.200,00
07 - MSPS - ES	WP Meetings (6x/year)	Flight	Madrid	Brussels	2	21.600,00
07 - MSPS - ES	eHealth Conference HU	Flight	Madrid	Budapest	1	600,00
07 - MSPS - ES	eHealth Conference DK	Flight	Madrid	Copenhagen	1	600,00
07 - MSPS - ES	eHealth Conference IE	Flight	Madrid	Dublin	1	600,00
<i>Sub-Total Travels</i>					<b>07 - MSPS - ES</b>	<b>37.800,00</b>
08 - EHMA - IE	all PSC (2x/year)	Flight	Dublin	Brussels	1	3.600,00
08 - EHMA - IE	eHealth Conference HU	Flight	Dublin	Budapest	1	600,00
08 - EHMA - IE	WP Meetings (4x/year)	Flight	Dublin	Brussels	1	7.200,00

ANNEX II  
B. DETAILED BUDGET (in EUR)

08 - EHMA - IE	eHealth Conference DK	Flight	Dublin	Copenhagen	1	600,00
				<i>Sub-Total Travels</i>		
					<b>08 - EHMA - IE</b>	<b>12.000,00</b>
09 - MHS - SI	all_PSC (2x/year)	Flight	Ljubljana	Brussels	2	7.200,00
09 - MHS - SI	all_EXCO (4x/year)	Flight	Ljubljana	Brussels	1	7.200,00
09 - MHS - SI	WP Meetings (4x/year)	Flight	Ljubljana	Brussels	2	14.400,00
09 - MHS - SI	eHealth Conference HU	Flight	Ljubljana	Budapest	1	600,00
09 - MHS - SI	eHealth Conference DK	Flight	Ljubljana	Copenhagen	1	600,00
09 - MHS - SI	eHealth Conference IE	Flight	Ljubljana	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>09 - MHS - SI</b>	<b>30.600,00</b>
10 - PGEU - BE	eHealth Conference HU	Flight	Brussels	Budapest	1	600,00
10 - PGEU - BE	eHealth Conference DK	Flight	Brussels	Copenhagen	1	600,00
10 - PGEU - BE	eHealth Conference IE	Flight	Brussels	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>10 - PGEU - BE</b>	<b>1.800,00</b>
11 - EHTEL - BE	eHealth Conference HU	Flight	Brussels	Budapest	1	600,00
11 - EHTEL - BE	eHealth Conference DK	Flight	Brussels	Copenhagen	1	600,00
11 - EHTEL - BE	eHealth Conference IE	Flight	Brussels	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>11 - EHTEL - BE</b>	<b>1.800,00</b>
12 - CPME - BE	eHealth Conference HU	Flight	Brussels	Budapest	1	600,00
12 - CPME - BE	eHealth Conference DK	Flight	Brussels	Copenhagen	1	600,00
12 - CPME - BE	eHealth Conference IE	Flight	Brussels	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>12 - CPME - BE</b>	<b>1.800,00</b>
13 - HL7 INT. - BE	all_PSC (2x/year)	Flight	Heraklion	Brussels	1	3.600,00
13 - HL7 INT. - BE	eHealth Conference HU	Flight	Heraklion	Budapest	1	600,00
13 - HL7 INT. - BE	WP Meetings (4x/year)	Flight	Heraklion	Brussels	1	7.200,00
13 - HL7 INT. - BE	eHealth Conference DK	Flight	Heraklion	Copenhagen	1	600,00
13 - HL7 INT. - BE	eHealth Conference IE	Flight	Heraklion	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>13 - HL7 INT. - BE</b>	<b>12.600,00</b>
14 - HOPE - BE	eHealth Conference HU	Flight	Brussels	Budapest	1	600,00
14 - HOPE - BE	eHealth Conference DK	Flight	Brussels	Copenhagen	1	600,00
14 - HOPE - BE	eHealth Conference IE	Flight	Brussels	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>14 - HOPE - BE</b>	<b>1.800,00</b>
15 - GOEG - AT	all_PSC (2x/year)	Flight	Vienna	Brussels	2	7.200,00
15 - GOEG - AT	all_EXCO (4x/year)	Flight	Vienna	Brussels	1	7.200,00
15 - GOEG - AT	WP Meeting (6x/year)	Flight	Vienna	Brussels	2	21.600,00
15 - GOEG - AT	eHealth Conference HU	Tram	Vienna	Budapest	2	520,00
15 - GOEG - AT	eHealth Conference DK	Flight	Vienna	Copenhagen	2	1.200,00
15 - GOEG - AT	eHealth Conference IE	Flight	Vienna	Dublin	2	1.200,00
				<i>Sub-Total Travels</i>		
					<b>15 - GOEG - AT</b>	<b>38.920,00</b>
16 - MDS - IT	all_PSC (2x/year)	Flight	Rome	Brussels	1	3.600,00
16 - MDS - IT	eHealth Conference HU	Flight	Rome	Budapest	1	600,00
16 - MDS - IT	WP Meetings (4x/year)	Flight	Rome	Brussels	1	7.200,00
16 - MDS - IT	eHealth Conference DK	Flight	Rome	Copenhagen	1	600,00
16 - MDS - IT	eHealth Conference IE	Flight	Rome	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>16 - MDS - IT</b>	<b>12.600,00</b>
17 - EFN - BE	eHealth Conference HU	Flight	Brussels	Budapest	1	600,00
17 - EFN - BE	eHealth Conference DK	Flight	Brussels	Copenhagen	1	600,00
17 - EFN - BE	eHealth Conference IE	Flight	Brussels	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>17 - EFN - BE</b>	<b>1.800,00</b>
18 - DENA - DE	all_PSC (2x/year)	Flight	Bonn	Brussels	1	3.600,00
18 - DENA - DE	all_EXCO (4x/year)	Flight	Bonn	Brussels	1	7.200,00
18 - DENA - DE	WP Meeting (4x/year)	Flight	Bonn	Brussels	1	7.200,00
18 - DENA - DE	eHealth Conference HU	Flight	Bonn	Budapest	1	600,00
18 - DENA - DE	eHealth Conference DK	Flight	Bonn	Copenhagen	1	600,00
18 - DENA - DE	eHealth Conference IE	Flight	Bonn	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>18 - DENA - DE</b>	<b>19.800,00</b>
19 - PFS PH - BE	eHealth Conference HU	Flight	Brussels	Budapest	1	600,00
19 - PFS PH - BE	eHealth Conference DK	Flight	Brussels	Copenhagen	1	600,00
19 - PFS PH - BE	eHealth Conference IE	Flight	Brussels	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>19 - PFS PH - BE</b>	<b>1.800,00</b>
20 - SDDSD - DK	all_PSC (2x/year)	Flight	Copenhagen	Brussels	2	7.200,00
20 - SDDSD - DK	all_EXCO (4x/year)	Flight	Copenhagen	Brussels	1	7.200,00
20 - SDDSD - DK	WP Meeting (6x/year)	Flight	Copenhagen	Brussels	2	21.600,00
20 - SDDSD - DK	eHealth Conference HU	Flight	Copenhagen	Budapest	1	600,00
20 - SDDSD - DK	eHealth Conference IE	Flight	Copenhagen	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>20 - SDDSD - DK</b>	<b>37.200,00</b>
21 - ACSS - PT	all_PSC (2x/year)	Flight	Lisbon	Brussels	1	3.600,00
21 - ACSS - PT	eHealth Conference HU	Flight	Lisbon	Brussels	1	600,00
21 - ACSS - PT	WP Meetings (4x/year)	Flight	Lisbon	Brussels	1	7.200,00
21 - ACSS - PT	eHealth Conference DK	Flight	Lisbon	Copenhagen	1	600,00
21 - ACSS - PT	eHealth Conference IE	Flight	Lisbon	Dublin	1	600,00
				<i>Sub-Total Travels</i>		
					<b>21 - ACSS - PT</b>	<b>12.600,00</b>
22 - CHE (VEC) - LV	all_PSC (2x/year)	Flight	Riga	Brussels	1	3.600,00
22 - CHE (VEC) - LV	eHealth Conference HU	Flight	Riga	Budapest	1	600,00
22 - CHE (VEC) - LV	WP Meetings (4x/year)	Flight	Riga	Brussels	1	7.200,00
22 - CHE (VEC) - LV	eHealth Conference DK	Flight	Riga	Copenhagen	1	600,00



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B. DETAILED BUDGET (in EUR)

22 - CHE (VEC) - LV	eHealth Conference IE	Flight	Riga	Dublin	1	600,00
				Sub-Total Travels	22 - CHE (VEC) - LV	12.600,00
23 - MHEC - MT	all-PSC (2x/year)	Flight	Valletta	Brussels	1	3.600,00
23 - MHEC - MT	eHealth Conference HU	Flight	Valletta	Budapest	1	600,00
23 - MHEC - MT	WP Meetings (4x/year)	Flight	Valletta	Brussels	1	7.200,00
23 - MHEC - MT	eHealth Conference DK	Flight	Valletta	Copenhagen	1	600,00
23 - MHEC - MT	eHealth Conference IE	Flight	Valletta	Dublin	1	600,00
				Sub-Total Travels	23 - MHEC - MT	12.600,00
24 - SENA - SE	all-PSC (2x/year)	Flight	Stockholm	Brussels	2	7.200,00
24 - SENA - SE	all-EXCO (4x/year)	Flight	Stockholm	Brussels	1	7.200,00
24 - SENA - SE	WP Meeting (6x/year)	Flight	Stockholm	Brussels	2	21.600,00
24 - SENA - SE	eHealth Conference HU	Flight	Stockholm	Budapest	1	600,00
24 - SENA - SE	eHealth Conference DK	Flight	Stockholm	Copenhagen	1	600,00
24 - SENA - SE	eHealth Conference IE	Flight	Stockholm	Dublin	1	600,00
				Sub-Total Travels	24 - SENA - SE	37.800,00

**Sub-Total: Travels costs 411.700,00**

**Subsistence allowances**

Partner reference	Purpose	Place	Number of days	Daily rate	Number of persons	Cost
01 - ATNA - AT	all-PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
01 - ATNA - AT	all-EXCO Meet. (4x/y)	Brussels	12	92,00	1	1.104,00
01 - ATNA - AT	WP Meetings (12x/y)	Brussels	36	92,00	1	3.312,00
01 - ATNA - AT	eHealth Conference HU	Budapest	2	222,00	2	888,00
01 - ATNA - AT	eHealth Conference DK	Copenhagen	2	270,00	2	1.080,00
01 - ATNA - AT	eHealth Conference IE	Dublin	2	254,00	2	1.016,00
01 - ATNA - AT	Different Coord. Meetings (1x/y)	Brussels	3	92,00	1	276,00
				Sub-Total Subsistence Allowances	01 - ATNA - AT	8.228,00
02 - KSRZIS - CZ	all-PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
02 - KSRZIS - CZ	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
02 - KSRZIS - CZ	eHealth Conference HU	Budapest	1	222,00	1	222,00
02 - KSRZIS - CZ	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
02 - KSRZIS - CZ	eHealth Conference IE	Dublin	1	254,00	1	254,00
				Sub-Total Subsistence Allowances	02 - KSRZIS - CZ	2.402,00
03 - NHIC - SK	all-PSC Meetings (2x/y)	Brussels	6	92,00	2	1.104,00
03 - NHIC - SK	all-EXCO Meet. (4x/y)	Brussels	12	92,00	1	1.104,00
03 - NHIC - SK	WP Meetings (6x/y)	Brussels	18	92,00	2	3.312,00
03 - NHIC - SK	eHealth Conference HU	Budapest	1	222,00	1	222,00
03 - NHIC - SK	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
03 - NHIC - SK	eHealth Conference IE	Dublin	1	254,00	1	254,00
				Sub-Total Subsistence Allowances	03 - NHIC - SK	6.266,00
04 - ESKI - HU	all-PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
04 - ESKI - HU	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
04 - ESKI - HU	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
04 - ESKI - HU	eHealth Conference IE	Dublin	1	254,00	1	254,00
				Sub-Total Subsistence Allowances	04 - ESKI - HU	2.180,00
05 - DOHC - IE	all-PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
05 - DOHC - IE	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
05 - DOHC - IE	eHealth Conference HU	Budapest	1	222,00	1	222,00
05 - DOHC - IE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
				Sub-Total Subsistence Allowances	05 - DOHC - IE	2.148,00
06 - DH - UK	all-PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
06 - DH - UK	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
06 - DH - UK	eHealth Conference HU	Budapest	1	222,00	1	222,00
06 - DH - UK	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
06 - DH - UK	eHealth Conference IE	Dublin	1	254,00	1	254,00
				Sub-Total Subsistence Allowances	06 - DH - UK	2.402,00
07 - MSPS - ES	all-PSC Meetings (2x/y)	Brussels	6	92,00	2	1.104,00
07 - MSPS - ES	all-EXCO Meet. (4x/y)	Brussels	12	92,00	1	1.104,00
07 - MSPS - ES	WP Meetings (6x/y)	Brussels	18	92,00	2	3.312,00
07 - MSPS - ES	eHealth Conference HU	Budapest	1	222,00	1	222,00
07 - MSPS - ES	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
07 - MSPS - ES	eHealth Conference IE	Dublin	1	254,00	1	254,00
				Sub-Total Subsistence Allowances	07 - MSPS - ES	6.266,00
08 - EHMA - IE	all-PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
08 - EHMA - IE	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
08 - EHMA - IE	eHealth Conference HU	Budapest	1	222,00	1	222,00
08 - EHMA - IE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
				Sub-Total Subsistence Allowances	08 - EHMA - IE	2.148,00
09 - MHS - SI	all-PSC Meetings (2x/y)	Brussels	6	92,00	2	1.104,00
09 - MHS - SI	all-EXCO Meet. (4x/y)	Brussels	12	92,00	1	1.104,00
09 - MHS - SI	WP Meetings (6x/y)	Brussels	18	92,00	2	3.312,00

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B. DETAILED BUDGET (in EUR)

09 - MHS - SI	eHealth Conference HU	Budapest	1	222,00	1	222,00
09 - MHS - SI	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
09 - MHS - SI	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>09 - MHS - SI</b>	<b>6.266,00</b>
10 - PGEU - BE	eHealth Conference HU	Budapest	1	222,00	1	222,00
10 - PGEU - BE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
10 - PGEU - BE	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>10 - PGEU - BE</b>	<b>746,00</b>
11 - EHTEL - BE	eHealth Conference HU	Budapest	1	222,00	1	222,00
11 - EHTEL - BE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
11 - EHTEL - BE	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>11 - EHTEL - BE</b>	<b>746,00</b>
12 - CPME - BE	eHealth Conference HU	Budapest	1	222,00	1	222,00
12 - CPME - BE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
12 - CPME - BE	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>12 - CPME - BE</b>	<b>746,00</b>
13 - HL7 INT. - BE	all PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
13 - HL7 INT. - BE	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
13 - HL7 INT. - BE	eHealth Conference HU	Budapest	1	222,00	1	222,00
13 - HL7 INT. - BE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
13 - HL7 INT. - BE	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>13 - HL7 INT. - BE</b>	<b>2.402,00</b>
14 - HOPE - BE	eHealth Conference HU	Budapest	1	222,00	1	222,00
14 - HOPE - BE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
14 - HOPE - BE	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>14 - HOPE - BE</b>	<b>746,00</b>
15 - GOEG - AT	all PSC Meetings (2x/y)	Brussels	6	92,00	2	1.104,00
15 - GOEG - AT	all EXCO Meet. (4x/y)	Brussels	12	92,00	1	1.104,00
15 - GOEG - AT	WP Meetings (6x/y)	Brussels	18	92,00	2	3.312,00
15 - GOEG - AT	eHealth Conference HU	Budapest	1	222,00	2	444,00
15 - GOEG - AT	eHealth Conference DK	Copenhagen	1	270,00	2	540,00
15 - GOEG - AT	eHealth Conference IE	Dublin	1	254,00	2	508,00
	<i>Sub-Total Subsistence Allowances</i>				<b>15 - GOEG - AT</b>	<b>7.012,00</b>
16 - MDS - IT	all PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
16 - MDS - IT	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
16 - MDS - IT	eHealth Conference HU	Budapest	1	222,00	1	222,00
16 - MDS - IT	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
16 - MDS - IT	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>16 - MDS - IT</b>	<b>2.402,00</b>
17 - EFN - BE	eHealth Conference HU	Budapest	1	222,00	1	222,00
17 - EFN - BE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
17 - EFN - BE	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>17 - EFN - BE</b>	<b>746,00</b>
18 - DENA - DE	all PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
18 - DENA - DE	all EXCO Meet. (4x/y)	Brussels	12	92,00	1	1.104,00
18 - DENA - DE	WP Meetings (6x/y)	Brussels	18	92,00	1	1.656,00
18 - DENA - DE	eHealth Conference HU	Budapest	1	222,00	1	222,00
18 - DENA - DE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
18 - DENA - DE	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>18 - DENA - DE</b>	<b>4.058,00</b>
19 - PFS PH - BE	eHealth Conference HU	Budapest	1	222,00	1	222,00
19 - PFS PH - BE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
19 - PFS PH - BE	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>19 - PFS PH - BE</b>	<b>746,00</b>
20 - SDSD - DK	all PSC Meetings (2x/y)	Brussels	6	92,00	2	1.104,00
20 - SDSD - DK	all EXCO Meet. (4x/y)	Brussels	12	92,00	1	1.104,00
20 - SDSD - DK	WP Meetings (6x/y)	Brussels	18	92,00	2	3.312,00
20 - SDSD - DK	eHealth Conference HU	Budapest	1	222,00	1	222,00
20 - SDSD - DK	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>20 - SDSD - DK</b>	<b>5.996,00</b>
21 - ACSS - PT	all PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
21 - ACSS - PT	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
21 - ACSS - PT	eHealth Conference HU	Budapest	1	222,00	1	222,00
21 - ACSS - PT	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
21 - ACSS - PT	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>21 - ACSS - PT</b>	<b>2.402,00</b>
22 - CHE (VEC) - LV	all PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
22 - CHE (VEC) - LV	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
22 - CHE (VEC) - LV	eHealth Conference HU	Budapest	1	222,00	1	222,00
22 - CHE (VEC) - LV	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
22 - CHE (VEC) - LV	eHealth Conference IE	Dublin	1	254,00	1	254,00
	<i>Sub-Total Subsistence Allowances</i>				<b>22 - CHE (VEC) - LV</b>	<b>2.402,00</b>
23 - MHEC - MT	all PSC Meetings (2x/y)	Brussels	6	92,00	1	552,00
23 - MHEC - MT	WP Meetings (4x/y)	Brussels	12	92,00	1	1.104,00
23 - MHEC - MT	eHealth Conference HU	Budapest	1	222,00	1	222,00

ANNEX II  
B. DETAILED BUDGET (in EUR)

23 - MHEC - MT	eHealth Conference DK	Copenhagen	1	270,00		270,00
23 - MHEC - MT	eHealth Conference IE	Dublin	1	254,00		254,00
				<i>Sub-Total Subsistence Allowances</i>		<i>23 - MHEC - MT</i> 2.402,00
24 - SENA - SE	all PSC Meetings (2x/y)	Brussels	6	92,00	2	1.104,00
24 - SENA - SE	all EXCO Meets (4x/y)	Brussels	12	92,00	1	1.104,00
24 - SENA - SE	WP Meetings (6x/y)	Brussels	18	92,00	2	3.312,00
24 - SENA - SE	eHealth Conference HU	Budapest	1	222,00	1	222,00
24 - SENA - SE	eHealth Conference DK	Copenhagen	1	270,00	1	270,00
24 - SENA - SE	eHealth Conference IE	Dublin	1	254,00	1	254,00
				<i>Sub-Total Subsistence Allowances</i>		<i>24 - SENA - SE</i> 6.266,00
<b>Sub-Total: Subsistence allowances</b>						<b>78.124,00</b>
<b>TOTAL TRAVELS &amp; SUBSISTENCES</b>						<b>489.824,00</b>

E3. Equipment			Partner reference	Description	Cost	
<b>TOTAL EQUIPMENT</b>						<b>0,00</b>

E4. Consumables and supplies directly linked to the project			Partner reference	Description	Cost	
<b>TOTAL CONSUMABLES &amp; SUPPLIES</b>						<b>0,00</b>

E5. Subcontracting costs			Partner reference	Description	Cost	
01 - ATNA - AT	Logo development				5.000,00	
				<i>Sub-Total Sub-Contracting Costs</i>	<i>01 - ATNA - AT</i> 5.000,00	
03 - NHIC - SK	Creation and Maintenance of website				60.000,00	
03 - NHIC - SK	Dissemination material				68.291,00	
				<i>Sub-Total Sub-Contracting Costs</i>	<i>03 - NHIC - SK</i> 128.291,00	
20 - SDSD - DK	Third party evaluation and quality assessment				5.000,00	
				<i>Sub-Total Sub-Contracting Costs</i>	<i>20 - SDSD - DK</i> 5.000,00	
25 - IHE - BE	Consultancy (EUR 580*12 days = travel and subsistence)				6.960,00	
				<i>Sub-Total Sub-Contracting Costs</i>	<i>25 - IHE - BE</i> 6.960,00	
<b>TOTAL SUB-CONTRACTING COSTS</b>						<b>145.251,00</b>

E6. Other costs			Partner reference	Description	Cost	
01 - ATNA - AT	Organization of Workshops for all members (e.g. preparation of the annual briefing notes) - refreshments, fees for premises, etc.				5.000,00	
01 - ATNA - AT	Bank Charges for all partners				2.000,00	
01 - ATNA - AT	Travel costs and subsistence allowances for collaborating partners				150.000,00	
				<i>Sub-Total Other Costs</i>	<i>01 - ATNA - AT</i> 157.000,00	
15 - GOEG - AT	Covering cost of place of mission				1.000,00	
				<i>Sub-Total Other Costs</i>	<i>15 - GOEG - AT</i> 1.000,00	
<b>TOTAL OTHER COSTS</b>						<b>158.000,00</b>



ANNEXE II  
C. BUDGET BY BENEFICIARY (in EUR)

		01 - ATNA - AT	02 - KSRZIS - CZ	03 - NHIC - SK	04 - ESKI - HU
<b>Expenditures</b>					
<b>Direct eligible costs</b>					
	<b>TOTAL</b>				
E1. Staff	1.079.627,10	173.329,00	4.500,00	58.000,00	4.525,00
a. Costs pertaining to public officials	481.095,10	173.329,00	4.500,00	58.000,00	4.525,00
b. Costs not pertaining to public officials	598.532,00	0,00	0,00	0,00	0,00
E2. Travel costs and subsistence allowances	489.824,00	45.348,00	15.002,00	43.726,00	14.180,00
E3. Equipment	0,00	0,00	0,00	0,00	0,00
E4. Consumables & supplies directly linked to the project	0,00	0,00	0,00	0,00	0,00
E5. Subcontracting costs	145.251,00	5.000,00	0,00	128.291,00	0,00
E6. Other costs	158.000,00	157.000,00	0,00	0,00	0,00
<b>Total direct eligible costs</b>	<b>1.872.702,10</b>	<b>380.677,00</b>	<b>19.502,00</b>	<b>230.017,00</b>	<b>18.705,00</b>
<b>Indirect eligible costs</b>					
E7. Overheads	131.089,15	26.647,39	1.365,14	16.101,19	1.509,35
<i>% of Overheads</i>	7,00%	7,00%	7,00%	7,00%	7,00%
<b>Total - Expenditures</b>	<b>2.003.791,25</b>	<b>407.324,39</b>	<b>20.867,14</b>	<b>246.118,19</b>	<b>20.014,35</b>
<b>Incomes</b>					
	<b>1.001.970,00</b>				
	<b>TOTAL</b>				
I1. Commission funding	1.001.894,49	214.100,00	10.433,57	123.059,10	10.007,18
I2. Contribution pertaining to public officials	481.095,10	173.329,00	4.500,00	58.000,00	4.525,00
I3. Applicant's financial contribution	520.801,66	19.895,39	5.933,57	65.059,10	5.482,18
I4. Income generated by the project	0,00	0,00	0,00	0,00	0,00
I5. Other external resources	0,00	0,00	0,00	0,00	0,00
<b>Total - Incomes</b>	<b>2.003.791,25</b>	<b>407.324,39</b>	<b>20.867,14</b>	<b>246.118,19</b>	<b>20.014,35</b>
<b>% of Commission funding</b>	<b>50,00%</b>	<b>52,56%</b>	<b>50,00%</b>	<b>50,00%</b>	<b>50,00%</b>

ANNEXE II  
C. BUDGET BY BENEFICIARY (in EUR)

		05 - DOHC - IE	06 - DH - UK	07 - MSPS - ES	08 - EHMA - IE
<b>Expenditures</b>					
<b>Direct eligible costs</b>					
	<b>TOTAL</b>				
E1. Staff	1.079.627,10	4.500,00	4.347,00	30.000,00	4.500,00
a. Costs pertaining to public officials	481.095,10	4.500,00	4.347,00	30.000,00	0,00
b. Costs not pertaining to public officials	598.532,00	0,00	0,00	0,00	4.500,00
E2. Travel costs and subsistence allowances	489.824,00	14.148,00	15.002,00	44.066,00	14.148,00
E3. Equipment	0,00	0,00	0,00	0,00	0,00
E4. Consumables & supplies directly linked to the project	0,00	0,00	0,00	0,00	0,00
E5. Subcontracting costs	145.251,00	0,00	0,00	0,00	0,00
E6. Other costs	158.000,00	0,00	0,00	0,00	0,00
<b>Total direct eligible costs</b>	<b>1.872.702,10</b>	<b>18.648,00</b>	<b>19.349,00</b>	<b>74.066,00</b>	<b>18.648,00</b>
<b>Indirect eligible costs</b>					
E7. Overheads	131.089,15	1.305,36	1.354,43	5.184,62	1.305,36
	<i>% of Overheads</i> 7,00%	7,00%	7,00%	7,00%	7,00%
<b>Total - Expenditures</b>	<b>2.003.791,25</b>	<b>19.953,36</b>	<b>20.703,43</b>	<b>79.250,62</b>	<b>19.953,36</b>
<b>Incomes</b>					
	<b>1.001.970,00</b>				
	<b>TOTAL</b>				
I1. Commission funding	1.001.894,49	9.976,68	10.351,72	39.625,31	9.976,68
I2. Contribution pertaining to public officials	481.095,10	4.500,00	4.347,00	30.000,00	0,00
I3. Applicant's financial contribution	520.801,66	5.476,68	6.004,72	9.625,31	9.976,68
I4. Income generated by the project	0,00	0,00	0,00	0,00	0,00
I5. Other external resources	0,00	0,00	0,00	0,00	0,00
<b>Total - Incomes</b>	<b>2.003.791,25</b>	<b>19.953,36</b>	<b>20.703,43</b>	<b>79.250,62</b>	<b>19.953,36</b>
	<b>% of Commission funding</b> 50,00%	50,00%	50,00%	50,00%	50,00%

ANNEXE II  
C. BUDGET BY BENEFICIARY (in EUR)

		09 - MHS - SI	10 - PGEU - BE	11 - EHTEL - BE	12 - CPME - BE
<b>Expenditures</b>					
<b>Direct eligible costs</b>					
	<b>TOTAL</b>				
E1. Staff	1.079.627,10	18.970,00	4.500,00	4.500,00	4.500,00
a. Costs pertaining to public officials	481.095,10	18.970,00	0,00	0,00	0,00
b. Costs not pertaining to public officials	598.532,00	0,00	4.500,00	4.500,00	4.500,00
E2. Travel costs and subsistence allowances	489.824,00	36.866,00	2.546,00	2.546,00	2.546,00
E3. Equipment	0,00	0,00	0,00	0,00	0,00
E4. Consumables & supplies directly linked to the project	0,00	0,00	0,00	0,00	0,00
E5. Subcontracting costs	145.251,00	0,00	0,00	0,00	0,00
E6. Other costs	158.000,00	0,00	0,00	0,00	0,00
<b>Total direct eligible costs</b>	<b>1.872.702,10</b>	<b>55.836,00</b>	<b>7.046,00</b>	<b>7.046,00</b>	<b>7.046,00</b>
<b>Indirect eligible costs</b>					
E7. Overheads	131.089,15	3.908,52	493,22	493,22	493,22
<i>% of Overheads</i>	7,00%	7,00%	7,00%	7,00%	7,00%
<b>Total - Expenditures</b>	<b>2.003.791,25</b>	<b>59.744,52</b>	<b>7.539,22</b>	<b>7.539,22</b>	<b>7.539,22</b>
<b>Incomes</b>					
	<b>TOTAL</b>				
	<b>1.001.970,00</b>				
I1. Commission funding	1.001.894,49	29.291,26	3.769,61	3.769,61	3.769,61
I2. Contribution pertaining to public officials	481.095,10	18.970,00	0,00	0,00	0,00
I3. Applicant's financial contribution	520.801,66	11.483,26	3.769,61	3.769,61	3.769,61
I4. Income generated by the project	0,00	0,00	0,00	0,00	0,00
I5. Other external resources	0,00	0,00	0,00	0,00	0,00
<b>Total - Incomes</b>	<b>2.003.791,25</b>	<b>59.744,52</b>	<b>7.539,22</b>	<b>7.539,22</b>	<b>7.539,22</b>
<b>% of Commission funding</b>	<b>50,00%</b>	<b>49,03%</b>	<b>50,00%</b>	<b>50,00%</b>	<b>50,00%</b>

ANNEXE II  
C. BUDGET BY BENEFICIARY (in EUR)

		13 - HL7 INT. - BE	14 - HOPE - BE	15 - GOEG - AT	16 - MDS - IT
<b>Expenditures</b>					
<b>Direct eligible costs</b>					
	<b>TOTAL</b>				
E1. Staff	1.079.627,10	4.500,00	4.500,00	567.152,00	17.589,60
a. Costs pertaining to public officials	481.095,10	0,00	0,00	0,00	17.589,60
b. Costs not pertaining to public officials	598.532,00	4.500,00	4.500,00	567.152,00	0,00
E2. Travel costs and subsistence allowances	489.824,00	15.002,00	2.546,00	45.932,00	15.002,00
E3. Equipment	0,00	0,00	0,00	0,00	0,00
E4. Consumables & supplies directly linked to the project	0,00	0,00	0,00	0,00	0,00
E5. Subcontracting costs	145.251,00	0,00	0,00	0,00	0,00
E6. Other costs	158.000,00	0,00	0,00	1.000,00	0,00
<b>Total direct eligible costs</b>	<b>1.872.702,10</b>	<b>19.502,00</b>	<b>7.046,00</b>	<b>614.084,00</b>	<b>32.591,60</b>
<b>Indirect eligible costs</b>					
E7. Overheads	131.089,15	1.365,14	493,22	42.985,88	2.281,41
	<i>% of Overheads</i> 7,00%	7,00%	7,00%	7,00%	7,00%
<b>Total - Expenditures</b>	<b>2.003.791,25</b>	<b>20.867,14</b>	<b>7.539,22</b>	<b>657.069,88</b>	<b>34.873,01</b>
<b>Incomes</b>					
	<b>1.001.970,00</b>				
	<b>TOTAL</b>				
I1. Commission funding	1.001.894,49	10.433,57	3.769,61	328.534,94	17.283,41
I2. Contribution pertaining to public officials	481.095,10	0,00	0,00	0,00	17.589,60
I3. Applicant's financial contribution	520.801,66	10.433,57	3.769,61	328.534,94	0,00
I4. Income generated by the project	0,00	0,00	0,00	0,00	0,00
I5. Other external resources	0,00	0,00	0,00	0,00	0,00
<b>Total - Incomes</b>	<b>2.003.791,25</b>	<b>20.867,14</b>	<b>7.539,22</b>	<b>657.069,88</b>	<b>34.873,01</b>
<b>% of Commission funding</b>	<b>50,00%</b>	50,00%	50,00%	50,00%	49,56%

ANNEXE II  
C. BUDGET BY BENEFICIARY (in EUR)

	17 - EFN - BE	18 - DENA - DE	19 - PFS PH - BE	20 - SDS D - DK
<b>Expenditures</b>				
<b>Direct eligible costs</b>				
<b>E1. Staff</b>	4.380,00	40.000,00	15.812,50	50.500,00
a. Costs pertaining to public officials	0,00	40.000,00	15.812,50	50.500,00
b. Costs not pertaining to public officials	4.380,00	0,00	0,00	0,00
<b>E2. Travel costs and subsistence allowances</b>	2.546,00	23.858,00	2.546,00	43.196,00
<b>E3. Equipment</b>	0,00	0,00	0,00	0,00
<b>E4. Consumables &amp; supplies directly linked to the project</b>	0,00	0,00	0,00	0,00
<b>E5. Subcontracting costs</b>	0,00	0,00	0,00	5.000,00
<b>E6. Other costs</b>	0,00	0,00	0,00	0,00
<b>Total direct eligible costs</b>	<b>6.926,00</b>	<b>63.858,00</b>	<b>18.358,50</b>	<b>98.696,00</b>
<b>Indirect eligible costs</b>				
<b>E7. Overheads</b>	484,82	4.470,06	1.285,10	6.908,72
% of Overheads	7,00%	7,00%	7,00%	7,00%
<b>Total - Expenditures</b>	<b>7.410,82</b>	<b>68.328,06</b>	<b>19.643,60</b>	<b>105.604,72</b>
<b>Incomes</b>				
<b>1.001.970,00</b>				
<b>TOTAL</b>				
<b>I1. Commission funding</b>	3.705,41	28.328,06	3.831,10	55.104,72
<b>I2. Contribution pertaining to public officials</b>	0,00	40.000,00	15.812,50	50.500,00
<b>I3. Applicant's financial contribution</b>	3.705,41	0,00	0,00	0,00
<b>I4. Income generated by the project</b>	0,00	0,00	0,00	0,00
<b>I5. Other external resources</b>	0,00	0,00	0,00	0,00
<b>Total - Incomes</b>	<b>7.410,82</b>	<b>68.328,06</b>	<b>19.643,60</b>	<b>105.604,72</b>
<b>% of Commission funding</b>	50,00%	41,46%	19,50%	52,18%

ANNEXE II  
C. BUDGET BY BENEFICIARY (in EUR)

		21 - ACSS - PT	22 - CHE (VEC) - LV	23 - MHEC - MT	24 - SENA - SE
<b>Expenditures</b>					
<b>Direct eligible costs</b>					
	<b>TOTAL</b>				
E1. Staff	1 079 627,10	4 522,00	4 500,00	20 000,00	30 000,00
a. Costs pertaining to public officials	481 095,10	4 522,00	4 500,00	20 000,00	30 000,00
b. Costs not pertaining to public officials	598 532,00	0,00	0,00	0,00	0,00
E2. Travel costs and subsistence allowances	489 824,00	15 002,00	15 002,00	15 002,00	44 066,00
E3. Equipment	0,00	0,00	0,00	0,00	0,00
E4. Consumables & supplies directly linked to the project	0,00	0,00	0,00	0,00	0,00
E5. Subcontracting costs	145 251,00	0,00	0,00	0,00	0,00
E6. Other costs	158 000,00	0,00	0,00	0,00	0,00
<b>Total direct eligible costs</b>	<b>1 872 702,10</b>	<b>19 524,00</b>	<b>19 502,00</b>	<b>35 002,00</b>	<b>74 066,00</b>
<b>Indirect eligible costs</b>					
E7. Overheads	131 089,15	1 366,68	1 365,14	2 450,14	5 184,62
	<i>% of Overheads</i>	7,00%	7,00%	7,00%	7,00%
<b>Total - Expenditures</b>	<b>2 003 791,25</b>	<b>20 890,68</b>	<b>20 867,14</b>	<b>37 452,14</b>	<b>79 250,62</b>
<b>Incomes</b>					
	<b>1.001.970,00</b>				
	<b>TOTAL</b>				
I1. Commission funding	1 001 894,49	10 445,34	10 433,57	17 452,14	39 442,31
I2. Contribution pertaining to public officials	481 095,10	4 522,00	4 500,00	20 000,00	30 000,00
I3. Applicant's financial contribution	520 801,66	5 923,34	5 933,57	0,00	9 808,31
I4. Income generated by the project	0,00	0,00	0,00	0,00	0,00
I5. Other external resources	0,00	0,00	0,00	0,00	0,00
<b>Total - Incomes</b>	<b>2 003 791,25</b>	<b>20 890,68</b>	<b>20 867,14</b>	<b>37 452,14</b>	<b>79 250,62</b>
	<i>% of Commission funding</i>	50,00%	50,00%	46,60%	49,77%

ANNEXE II  
C. BUDGET BY BENEFICIARY (in EUR)

25 - IHE - BE	0	0	0
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<b>Expenditures</b>		<b>TOTAL</b>				
<b>Direct eligible costs</b>						
E1. Staff		1 079 627,10	0,00	0,00	0,00	0,00
a. Costs pertaining to public officials		481 095,10	0,00	0,00	0,00	0,00
b. Costs not pertaining to public officials		598 532,00	0,00	0,00	0,00	0,00
E2. Travel costs and subsistence allowances		489 824,00	0,00	0,00	0,00	0,00
E3. Equipment		0,00	0,00	0,00	0,00	0,00
E4. Consumables & supplies directly linked to the project		0,00	0,00	0,00	0,00	0,00
E5. Subcontracting costs		145 251,00	6 960,00	0,00	0,00	0,00
E6. Other costs		158 000,00	0,00	0,00	0,00	0,00
<b>Total direct eligible costs</b>		<b>1 872 702,10</b>	<b>6 960,00</b>	<b>0,00</b>	<b>0,00</b>	<b>0,00</b>
<b>Indirect eligible costs</b>						
E7. Overheads		131 089,15	487,20	0,00	0,00	0,00
	<i>% of Overheads</i>	7,00%	7,00%	-	-	-
<b>Total - Expenditures</b>		<b>2 003 791,25</b>	<b>7 447,20</b>	<b>0,00</b>	<b>0,00</b>	<b>0,00</b>

<b>Incomes</b>		<b>TOTAL</b>				
	<b>1.001.970,00</b>					
I1. Commission funding		1 001 894,49	5 000,00	0,00	0,00	0,00
I2. Contribution pertaining to public officials		481 095,10	0,00	0,00	0,00	0,00
I3. Applicant's financial contribution		520 801,66	2 447,20	0,00	-	-
I4. Income generated by the project		0,00	0,00	0,00	0,00	0,00
I5. Other external resources		0,00	0,00	0,00	0,00	0,00
<b>Total - Incomes</b>		<b>2 003 791,25</b>	<b>7 447,20</b>	<b>0,00</b>	<b>0,00</b>	<b>0,00</b>
	<b>% of Commission funding</b>	<b>50,00%</b>	<b>67,14%</b>	<b>-</b>	<b>-</b>	<b>-</b>

## ANNEX III REPORTING REQUIREMENTS

### 1. INTERIM IMPLEMENTATION REPORT(S)

The interim technical implementation report(s) will describe the work carried out and the results obtained during the period indicated in article I.6 of this grant agreement and state in particular:

- the results obtained to date and an indication of any deviation from the initial work programme set out in annex I to the grant agreement that has occurred or is likely to occur<sup>1</sup>;
- the work programme planned for the following period;
- copies of any publications, products or other relevant outputs or deliverables of the project to date.

The interim financial implementation report(s) will compare the expenditure incurred during the reporting period with the foreseen budget stated in Annex II of this grant agreement. The budget implemented in the interim financial report should follow the same structure as the estimated budget in Annex II.

The interim implementation report(s) and any other documents referred to, must be sent to the Executive Agency before the date indicated in article I.6.

### 2. FINAL IMPLEMENTATION REPORT

The final implementation report referred to in Article I.6 should include in particular a final technical implementation report and a final financial report<sup>2</sup>:

#### 2.1. Technical implementation report

##### *2.1.1. Detailed description of all the activities conducted*

The description should relate to the activities specifically foreseen in Annex I. This section of the report should summarise the activities specifically foreseen and those directly related to the objectives of the project and present and explain the activity actually done, their correspondence to the foreseen programme and objectives, and show how each activity has contributed to the stated objectives.

Copies of any publications, products or other relevant outputs or deliverables of the project to date shall be annexed.

---

<sup>1</sup> Without prejudice to Art. II.13.

<sup>2</sup> N.B. : The description of the required content of the activity report is not exhaustive



Any difference between the programme and objectives foreseen and those actually conducted and achieved must be highlighted and explained.

### ***2.1.2. Manpower for the execution of the activities***

This section of the report should present a complete list of all the persons who have participated in the execution of the project and, for each of them, the man/days of work, the professional level or category and the corresponding unit and total cost. In order to conciliate the man/days of work with the expenditure, the portion of time of each individual carrying out the action must be recorded.

In the case of partner organisations or external bodies, the organisation to which each person belongs should be clearly identified. The activities conducted by each person involved will be described and it will be explained how they relate to the various activities and objectives of the project.

It must be shown how the data requested for Annex II compares with the corresponding information provided with the proposal. It should naturally also correspond to the details provided in the financial report.

### ***2.1.3. Partners involved***

This section should present how the work has been distributed among the various partners. It will explain which activities the various partners have conducted, how they have been co-ordinated and how they have contributed to the set objectives.

### ***2.1.4. Countries involved***

This section should explain what activities have been conducted in each of the countries involved and how the results have been made available in each country.

### ***2.1.5. Achievement of the objectives***

This section should explain how the objectives have been achieved. It should present an evaluation of the results achieved and explain on what monitoring, assessment or relevant evidence the conclusions presented on the results achieved are based. Any problem in achieving the objectives must be highlighted and explained.

## **2.2. Financial report**

The beneficiaries should respect the following rules:

- Their final financial report must follow the same structure as the estimated budget in Annex II.
- The financial report must be certified according to the provisions of the Article 180, paragraph 1a of the Implementing Rules<sup>3</sup> and signed.

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<sup>3</sup>

The beneficiary shall certify on his honour that information contained in requests for payments is full, reliable and true. He shall also certify that the costs incurred can be

- The payment request (dated and signed) must be jointed to this report.

**IMPORTANT: The absence of complete, clear and structured information and data as described in this annex will be a reason for non acceptance of the activity report.**

---

considered eligible in accordance with the grant agreement and that requests for payment are substantiated by adequate supporting documents that can be checked.

**ANNEX IV**  
**LETTERS OF MANDATE**



2

LETTER OF MANDATE<sup>1</sup>

Coordination Center for Departmental medical information systems, KSRZIS

Videnská 1958/9, Prague 4 , 140 21, Czech Republic

Not subject to VAT

"the co-beneficiary", represented for the purposes of signature of this mandate by Mr. Fares Shima,  
director  
of the one part,

and

Bundesministerium für Gesundheit (ATNA)

Radetzkystraße 2, A-1030 Wien

ATU57161788,

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Clemens-  
Martin, Director General]

of the other part,

## HAVE AGREED

For the purposes of the implementation of the agreement

Title : **[Joint Action e-Health Governance Initiative]**

Acronym : **[JA-EHGov]**

Contract No. : **[100868]**

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

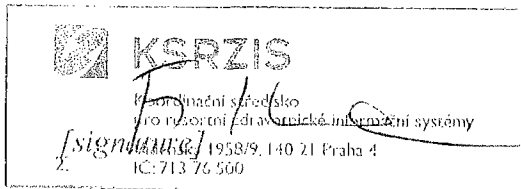
1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.  
Delete if the beneficiary is a natural person or a public-sector body. <sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)

3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

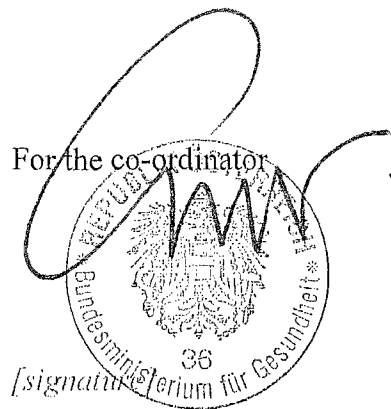
SIGNATURES

For the co-beneficiary  
Mr. Fares Shima, director



Done at Prague, 21<sup>th</sup> of September 2010

For the co-ordinator



Done at

*Vienna*

27. Sep. 2010

In duplicate in English

M

3

LETTER OF MANDATE<sup>1</sup>

NARODNÉ CENTRUM ZDRAVOTNICKÝCH INFORMÁCIÍ NCZI  
public interest entity financed by contribution from Ministry of Health, Slovak Republic<sup>2</sup>

Lažarova 26, 811 09 Bratislava, Slovak Republic  
2020830119,

("the co-beneficiary"), represented for the purposes of signature of this mandate by [RNDr.  
Lubomir Vleak, CSc., director  
of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzkystrasse 2, 1030 Vienna, Austria]  
[ATU57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-  
Clemens, Director General]  
of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]  
Acronym : [JA-EHGov]  
Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body. 82 of 128

<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)

3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

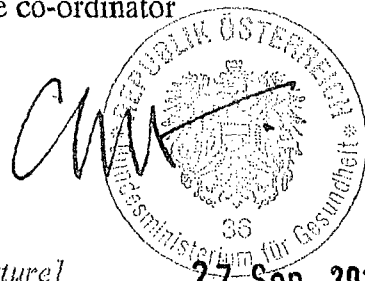
For the co-beneficiary

RNDr. Lubomír Vlček, CSc.  
director

[signature]

Done at Bratislava, 3.12.2010

For the co-ordinator



[signature]

27. Sep. 2010

Done at Vienna

In duplicate in English

*Add or remove the necessary spaces to adjust your headed paper to this document.*

## LETTER OF MANDATE<sup>1</sup>

4

NATIONAL INSTITUTE FOR STRATEGIC HEALTH RESEARCH HUNGARY (ESKI)

<sup>2</sup>

<sup>3</sup>

H-1051 Budapest, Arany J. u. 6-8.

Hungary

VAT number: HU-15318657241,

("the co-beneficiary"), represented for the purposes of signature of this mandate by [György

Surján acting general director

of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzky street 2, 1030 Vienna, Austria]

[ATU57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-

Clemens, Director General]

of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]  
Acronym : [JA-EHGov]  
Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

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2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive

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<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)


M



funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

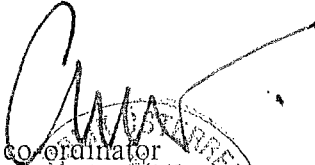
3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

  
 For the co-beneficiary  
 [György Surján acting general director]

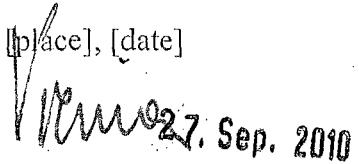
*[signature]*

Done at Budapest, 21/10/2010

  
 For the co-ordinator  
 [name/forename/function]

*[signature]*

Done at [place], [date]



In duplicate in English





## LETTER OF MANDATE<sup>1</sup>

Department of Health & Children

Hawkins House

Poolbeg St

Dublin

Ireland

represented for the purposes of signature of this mandate by Kevin Conlon, Principal Officer, ICT,  
and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzkystrasse 2, 1030 Vienna, Austria]

[ATU57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-Clemens, Director General]

of the other part,

### HAVE AGREED

For the purposes of the implementation of the agreement

Title : **[Joint Action e-Health Governance Initiative]**

Acronym : **[JA-EHGov]**

Contract No. : **[100868]**

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

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Cuirfear fáilte roimh chomhfhreagras i nGaeilge

Department of Health & Children

Hawkins House Dublin 2

Teach Haicín Baile Átha Cliath 2

Tel (01) 635 4000

Fax (01) 635 4001

Email [info@health.gov.ie](mailto:info@health.gov.ie)

Web [www.dohc.ie](http://www.dohc.ie)

for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.

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SIGNATURES

For the co-beneficiary

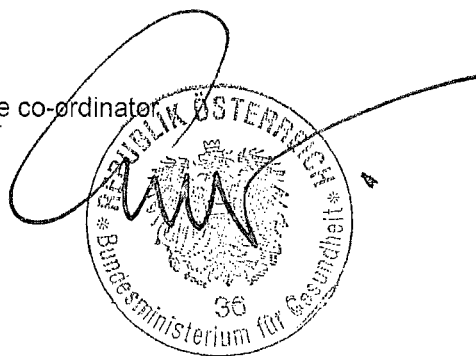
Kevin Conlon

Head of ICT

*[Handwritten signature]*  
[signature] 5/5/11  
2011

Done at Dublin, 5/5/2011

For the co-ordinator



Done at, *[Handwritten signature]*, 5/5/11

In duplicate in English

- 1 Please use the headed paper on national language of the organisation who gives mandate.
- 2 Delete if the beneficiary is a natural person or a public-sector body.
- 3 Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)

*M*

*[Handwritten scribble]*



Department  
of Health

6

Quarry House  
Quarry Hill  
Leeds  
LS2 7UE

Tel: 0113 254 5000  
Direct Line: 0113 254

## LETTER OF MANDATE

Department of Health (DOH)  
Quarry House  
Quarry Hill  
Leeds  
LS2 7UE

VAT No. 888815064

("the co-beneficiary"), represented for the purposes of signature of this mandate by [Paul Jones, NHS Chief Technology Officer, Department of Health, Informatics Directorate] of the one part,

and

Bundesministerium für Gesundheit (ATNA)  
Radetzkystraße 2, A-1030 Wien  
ATU57161788,

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Clemens-Martin, Director General] of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]

Acronym : [JA-EHGov]

Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

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2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.
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5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

For the co-beneficiary  
[Paul Jones, NHS Chief Technology Officer]

Done at Quarry House on 23/09/2010

In duplicate in English

For the co-ordinator

[ ]

Done at [ ]  
27. Sep. 2010



## LETTER OF MANDATE<sup>1</sup>

[Ministry of Health and Social Policy] [MPSP]

ESPAÑA

("the co-beneficiary"), represented for the purposes of signature of this mandate by **Pablo Rivero, Director General, Quality Agency for the NHS** of the one part,

and

**[Bundesministerium für Gesundheit] [ATNA]**  
**[Radetzkystreet 2, 1030 Vienna, Austria]**  
**[ATU57161788],**

("the co-ordinator"), represented for the purposes of signature of this mandate by **[Auer, Martin-Clemens, Director General]** of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : **[Joint Action e-Health Governance Initiative]**  
Acronym : **[JA-EHGov]**  
Contract No. : **[100868]**

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

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co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

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5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

For the co-beneficiary  
**[Pablo Rivero Corte, Director General]  
General]**



*[signature]*

Done at **[Madrid], [Sept. 20, 2010]**

In duplicate in English

For the co-ordinator  
**[Auer, Martins-Clemens, Director]**



*[signature]*

Done at **[Vienna], [Sept. 20, 2010]**



European Health Management Association

Director: Ms. Jennifer Bremner

Rue Belliard 15/17, 6th Floor

1040 Brussels, Belgium

+32 2 5026525

Email: [info@ehma.org](mailto:info@ehma.org)Web: [www.ehma.org](http://www.ehma.org)

## Letter of mandate<sup>1</sup>

European Health Management Association Limited (EHMA)

Not-for-profit company with limited guarantee<sup>2</sup>

No 477611<sup>3</sup>

Rock Road 118, Booterstown, Co. Dublin, Ireland

(none),

("the co-beneficiary"), represented for the purposes of signature of this mandate by Bremner,

Jeni; Director

of the one part,

and

Bundesministerium für Gesundheit (ATNA)

Radetzkystraße 2, A-1030 Wien

ATU57161788,

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer,

Clemens- Martin, Director General]

of the other part,

HAVE AGREED

For the purposes of the implementation of the  
agreement

Title : [Joint Action e-Health Governance Initiative]

Acronym : [JA-EHGov]

Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,,

The following:

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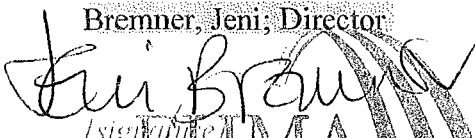
Director: Ms. Jennifer Bremner  
Rue Belliard 15/17, 6th Floor  
1040 Brussels, Belgium  
+32 2 5026525  
Email: [info@ehma.org](mailto:info@ehma.org)  
Web: [www.ehma.org](http://www.ehma.org)

with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.

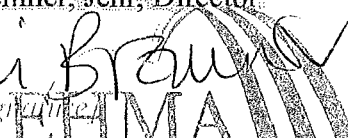
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.
3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

For the co-beneficiary  
Bremner, Jeni, Director

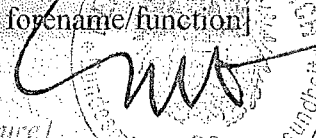


[signature]

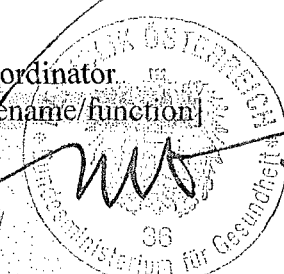


European Health Management Association  
Done at Brussels, 17 September 2010

For the co-ordinator  
[name/ forename/function]



[signature]



Done at [place], [date]

*V. Bremner*, 27. Sep. 2010

In duplicate in English

**LETTER OF MANDATE<sup>1</sup>**

9

Ministry of Health of the Republic of Slovenia  
Štefanova ulica 5, 1000 Ljubljana  
96395265

("the co-beneficiary"), represented for the purposes of signature of this mandate by Dorijan Marušič, minister of the one part,

and

Bundesministerium für Gesundheit (ATNA)  
Radetzkystraße 2, A-1030 Wien  
ATU57161788,

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Clemens-Martin, Director General] of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]

Acronym : [JA-EHGov]

Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body.

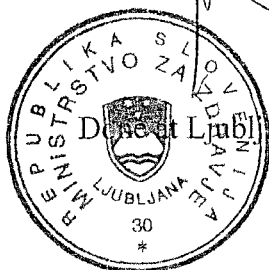
<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)



3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES:

For the co-beneficiary  
Dorijan Marušič, minister



Done at Ljubljana, 20.9.2010

In duplicate in English

For the co-ordinator  
Auer, Clemens-Martin, Director General



Done at Vrmeny

27. Sep. 2010



**PGEU GPUE** Groupement Pharmaceutique de l'Union Européenne  
Pharmaceutical Group of the European Union

10

## LETTER OF MANDATE<sup>1</sup>

The Pharmaceutical Group of the European Union - PGEU

AISBL<sup>2</sup>

1253048-90<sup>3</sup>

rue du Luxembourg, 19-21 / 6

B-1000 Brussels

BE0468971838,

("the co-beneficiary"), represented for the purposes of signature of this mandate by CHAVE, John,  
Secretary General

of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzkystreet 2, 1030 Vienna, Austria]

[ATU57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-  
Clemens, Director General]

of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : **[Joint Action e-Health Governance Initiative]**

Acronym : **[JA-EHGov]**

Contract No. : **[100868]**

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Exécutive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

<sup>1</sup> Replace with the heading, acronym and language of the organisation who gives mandate.

<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body.

<sup>3</sup> Delete if the beneficiary is a public-sector body. For contract organisers, indicate the number of their identity card or, failing that, of their passport or equivalent.)



**PGEU GPUE** Groupement Pharmaceutique de l'Union Européenne

The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.

- 4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
- 5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

**SIGNATURES**

For the co-beneficiary  
CHAVE, John, Secretary General

*John Chave*  
[signature]

Done at [place], [date]

*Bruxelles, 25/10/2010*

In duplicate in English

For the co-ordinator  
[name/forename/function]

*[Signature]*  
[signature]

Done at [place], [date]

*Vienna, 27. Sep. 2010*





EUROPEAN HEALTH TELEMATICS ASSOCIATION



## LETTER OF MANDATE

European Health Telematics Association (EHTEL)  
 International Association as per the Belgian law  
 ID No: 0472058913  
 Rue d'Arlon, 50, 1000, Brussels, Belgium  
 VAT: BE 472.058.913,

("the co-beneficiary"), represented for the purposes of signature of this mandate by Lange Marc, Secretary General

of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]  
 [Radetzkystrasse 2, 1030 Vienna, Austria]  
 [ATU57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-Clemens, Director General]

of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : **[Joint Action e-Health Governance Initiative]**  
 Acronym : **[JA-EHGov]**  
 Contract No. : **[100868]**

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
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5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

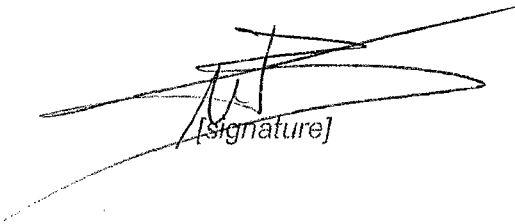
## SIGNATURES

For the co-beneficiary

Lange Marc, Secretary General

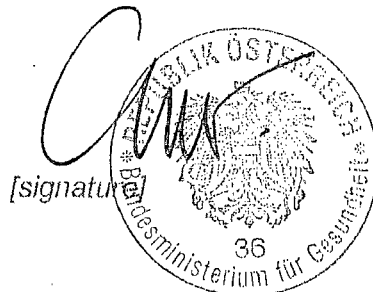
For the co-ordinator

Auer, Martin-Clemens, Director General



[signature]

Done at Brussels, 20 September 2010

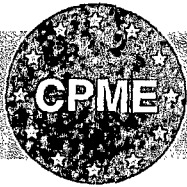


[signature]

Done at [place], [date]

*V. Auer*, 27. Sep. 2010

In duplicate in English



COMITÉ PERMANENT DES MÉDECINS EUROPÉENS  
STANDING COMMITTEE OF EUROPEAN DOCTORS



## LETTER OF MANDATE<sup>1</sup>

Standing Committee of European Doctors - CPME

a.i.s.b.l.<sup>2</sup>

462509658<sup>3</sup>

Rue Guimard 15, BE-1040 Brussels, Belgium

N.A.,

("the co-beneficiary"), represented for the purposes of signature of this mandate by Birgit Beger,  
Secretary General

of the one part,

and

Bundesministerium für Gesundheit (ATNA)

Radetzkystrasse 2, A-1030 Wien

ATU57161788,

("the co-ordinator"), represented for the purposes of signature of this mandate by Auer, Clemens-  
Martin, Director General

of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : **Joint Action e-Health Governance Initiative**  
Acronym : **JA-EHGov**  
Contract No. : **100868**

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body.

<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)

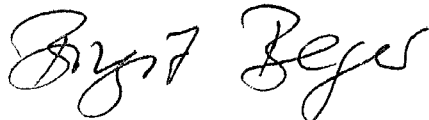


acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
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5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

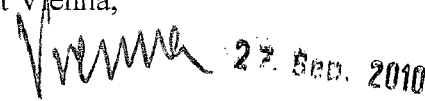
For the co-beneficiary  
BEGER/ Birgit/ Secretary General

  
[signature]

Done at Brussels, 17/09/10

For the co-ordinator  
AUER/Clemens-M./ Director General

  
[signature]

Done at Vienna,  


In duplicate in English

STANDING COMMITTEE OF EUROPEAN DOCTORS  
COMITE PERMANENT DES MEDECINS EUROPEENS (CPME)  
Rue Gulmard 15  
B-1040 BRUXELLES  
Tel.: +32 (0)2 732 72 02  
Fax: +32 (0)2 732 73 44  
www.cpme.eu

2 of 2

M



23-09-10;11:46 ;From:

To:9\*0043171344042;

# 1/ 2

13

LETTER OF MANDATE<sup>1</sup>

[HEALTH INTERNATIONAL] [HE7]

[Private Foundation]<sup>2</sup>[0826312613]<sup>3</sup>

[Square de Meeus 38/40 • 1000 Brussels • Belgium]

[E],

("the co-beneficiary"), represented for the purposes of signature of this mandate by [Catherine Chronaki, Secretary General]

of the one part,

and

[Bundesministerium für Gesundheit] [A.T.N.A.]

[Radetzky street 2, 1030 Vienna, Austria]

[ATU57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-Clemens, Director General]

of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]  
 Acronym : [JA-EHGov]  
 Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body.

<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)

23-09-10;11:46 ;From:

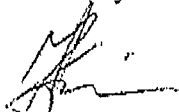
To:9\*0043171344042;

# 2/ 2

- 3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
- 4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
- 5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

For the co-beneficiary  
 [Catherine Chronaki  
 Secretary General]

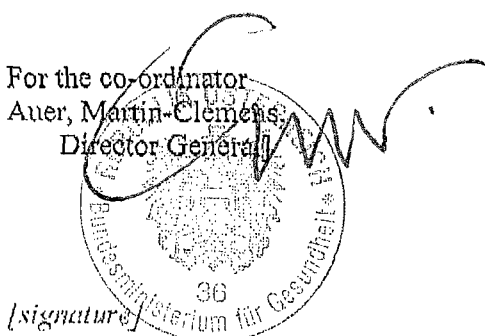


CATHERINE CHRONAKI  
 [signature]

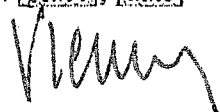
Done at  
 Brussels, September 22, 2010,

In duplicate in English

For the co-ordinator  
 Auer, Martin-Clemens  
 Director General]



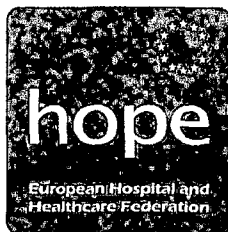
Done at [place], [date]



27. Sep. 2010



14



**LETTER OF MANDATE**

EUROPEAN HOSPITAL AND HEALTHCARE FEDERATION (HOPE)

International non-profit association under Belgian law

Bd. Auguste Reyers 207-209

1030 Brussels

Belgium

Company number 457.663.618

Not subject to VAT

("the co-beneficiary"), represented for the purposes of signature of this mandate by

Pascal GAREL, Chief Executive

of the one part,

and

Bundesministerium für Gesundheit (ATNA)

Radetzkystraße 2

1030 Wien

Austria

ATU57161788

("the co-ordinator"), represented for the purposes of signature of this mandate by

Clemens-Martin AUER, Director General

of the other part,

**HAVE AGREED**

For the purposes of the implementation of the agreement

**Joint Action e-Health Governance Initiative**

**Acronym JA-EHGov**

**Contract n° 100868**

between the Executive Agency for Health and Consumers and the co-ordinator,

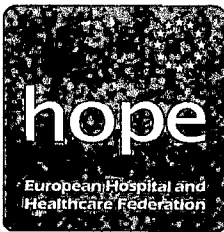
The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.

Bd. A. Reyers 207-209, b7 - BE-1030 BRUSSELS  
 Tel +32-2-742 13 20 - Fax +32-2-742 13 25  
 sg@hope.be - www.hope.be

HOPE is an international non-profit association under Belgian law

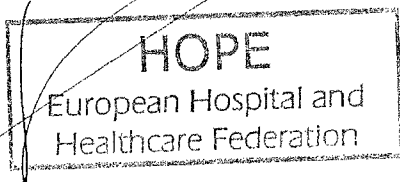
M



2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.
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5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

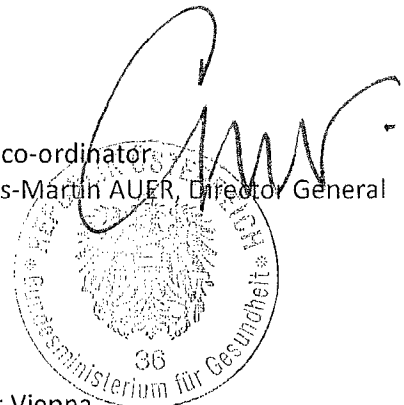
SIGNATURES

For the co-beneficiary  
Pascal GAREL, Chief Executive



Done at Brussels  
September 21, 2010

For the co-ordinator  
Clemens-Martin AUER, Director General



Done at Vienna  
Date  
27. Sep. 2010

In duplicate in English

M

## LETTER OF MANDATE<sup>1</sup>

[Gesundheit Oesterreich GmbH] [GOEG]

<sup>2</sup>

<sup>3</sup>

[Stubenring 6, 1010 Vienna, Austria]

[ATU 62777178],

("the co-beneficiary"), represented for the purposes of signature of this mandate by [Melitopoulos, Arno, General Manager]

of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzkystrasse 2, 1030 Vienna, Austria]

[ATU 57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-Clemens, Director General]

of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]  
 Acronym : [JA-EHGov]  
 Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

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<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

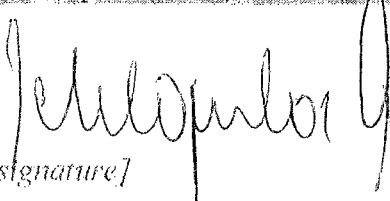
<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body.

<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)

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5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

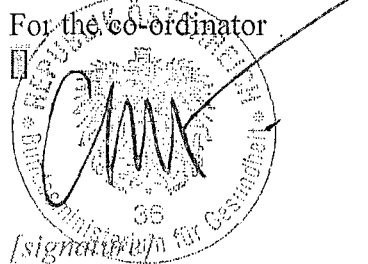
SIGNATURES

For the co-beneficiary  
[Melitopoulos Arno, General Manager]

  
[signature]

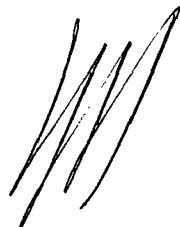
Done at [Vienna, [28<sup>th</sup> April 2011]

For the co-ordinator

  
[signature]

Done at [Vienna], [ 3/5/11

In duplicate in English





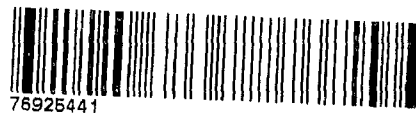
*Ministero della Salute*

DIPARTIMENTO DELLA QUALITA'  
DIREZIONE GENERALE DEL SISTEMA INFORMATIVO  
Ufficio III - Nuovo Sistema Informativo Sanitario

Ministero della Salute

DGSI

0003496-P-22/09/2010



16

DGSI/ III  
F.7.b.a/2010/340

Dear Tanja Niederländer  
Bundesministerium für Gesundheit  
Unit I/A/9  
Radetzkystr. 2  
1030 Vienna  
Austria

**Object: Joint Action e-Health Governance Initiative (100868) – Letter of mandate**

### LETTER OF MANDATE

Ministry of Health (Mds)  
Viale Giorgio Ribotta, 5 - 00144 Roma (Italy)  
VAT Number 97023180587,  
("the co-beneficiary"), represented for the purposes of signature of this mandate by Dr. Rossana Ugenti,  
Director General, Directorate General of Information System (DGSI)  
of the one part,

and

Bundesministerium für Gesundheit (ATNA)  
Radetzkystraße 2, A-1030 Wien  
ATU57161788,  
("the co-ordinator"), represented for the purposes of signature of this mandate by Auer, Clemens-  
Martin, Director General  
of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : **Joint Action e-Health Governance Initiative**  
Acronym : **JA-EHGov**  
Contract No. : **100868**

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

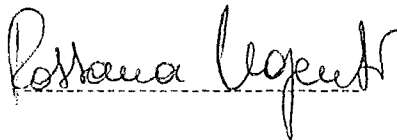
- 1 The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.



- 2 The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.
- 3 The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
- 4 The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
- 5 A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

For the co-beneficiary

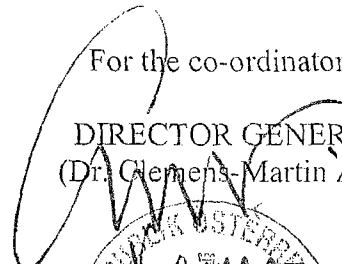
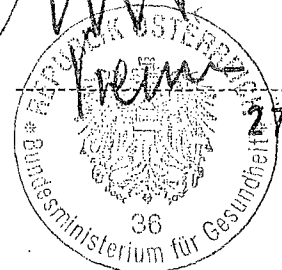
DIRECTOR GENERAL  
(Dr. Rossana Ugenti)



Rome, September 22<sup>th</sup>, 2010

For the co-ordinator

DIRECTOR GENERAL  
(Dr. Clemens-Martin Auer)

27. Sep. 2010



EFN Brussels Office  
Clos du Parnasse 11a  
B-1050 Brussels

Tel. +32 2 512 74 19  
Fax +32 2 512 35 50

E-mail efn@efn.be  
Web www.efnweb.eu

Registration Number NGO  
0476.356.013

17

## LETTER OF MANDATE<sup>1</sup>

EUROPEAN FEDERATION OF NURSES ASSOCIATIONS - EFN

A.S.B.L.<sup>2</sup>

476.356.013<sup>3</sup>

CLOS DU PARNASSE 11A -1050 BRUSSELS - BELGIUM

N/A,

("the co-beneficiary"), represented for the purposes of signature of this mandate by PAUL DE  
RAEVE, GENERAL SECRETARY  
of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzky street 2, 1030 Vienna, Austria]

[ATU57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-  
Clemens, Director General]  
of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]  
Acronym : [JA-EHGov]  
Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

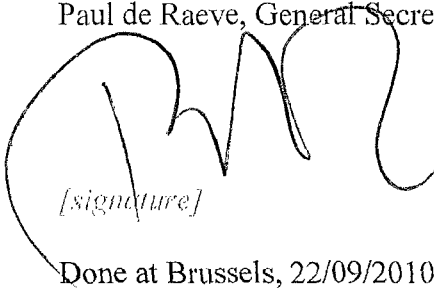
<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body.

<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, indicate the number of their identity card or, failing that, of their passport or equivalent.)



2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.
3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

For the co-beneficiary  
Paul de Raeve, General Secretary

  
[signature]  
Done at Brussels, 22/09/2010

For the co-ordinator

  
[signature]  
Done at   
Vienna, 27. Sep. 2010

In duplicate in English



18

LETTER OF MANDATE<sup>1</sup>

Bundesministerium für Gesundheit DENA

2  
3

Friedrichstraße 108, 10117 Berlin, Germany

("the co-beneficiary"), represented for the purposes of signature of this mandate by Paland, Norbert, Ministerialdirigent of the one part,

and

Bundesministerium für Gesundheit ATNA

Radetzkystrasse 2, 1030 Vienna, Austria

ATU57161788,

("the co-ordinator"), represented for the purposes of signature of this mandate by Auer, Martin-Clemens, Director General of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : Joint Action e-Health Governance Initiative  
 Acronym : JA-EHGov  
 Contract No. : 100868

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body.

<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)

M

acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

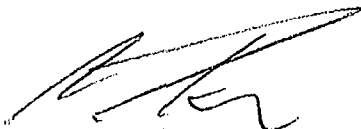
SIGNATURES

For the co-beneficiary

For the co-ordinator

Paland, Norbert Ministerialdirigent

Auer, M. Clemens Director-General



Bundesministerium für Gesundheit  
Friedrichstr. 108 - 10117 Berlin  
Done at Berlin, 11.10.2010

[signature]

Done at Vienna,



In duplicate in English

27. Sep. 2010





Eurostation Bloc II  
1er étage – bureau 1D01H  
Place Victor Horta 40/B10  
B - 1060 Bruxelles  
Belgium

19

General Directorate of Healthcare Institutions

## LETTER OF MANDATE<sup>1</sup>

PFS PUBLIC HEALTH, FOOD CHAIN CONTROL AND ENVIRONMENT

<sup>2</sup>

<sup>3</sup>

Place Victor Horta 40, Bte 10 1060 Bruxelles BELGIUM

(“the co-beneficiary”), represented for the purposes of signature of this mandate by Dirk  
CUYPERS, President  
of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzkystrasse 2, 1030 Vienna, Austria]

[ATU57161788],

(“the co-ordinator”), represented for the purposes of signature of this mandate by [Auer, Martin-  
Clemens, Director General]  
of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]  
Acronym : [JA-EHGov]  
Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body.

<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)

M

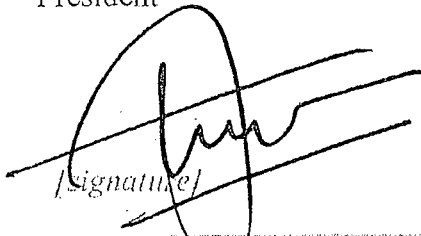
acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

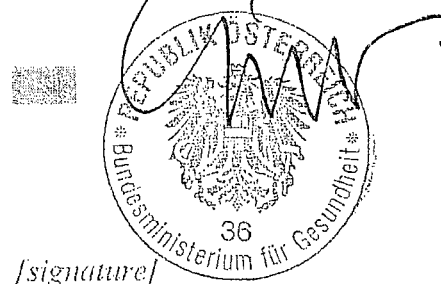
For the co-beneficiary

Dirk CUPYPERS,  
President

  
[signature]

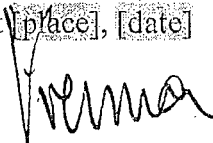
Done at Brussels, 21/09/2010,

For the co-ordinator

  
[signature]

Done at [place], [date]

27. Sep. 2010



In duplicate in English





Copenhagen 20 September 2010

Islands Brygge 39  
DK 2300 København S

Rugårdsvej 15, 2.sal  
DK 5000 Odense C

[www.sdsd.dk](http://www.sdsd.dk)

## LETTER OF MANDATE<sup>1</sup>

Connected Digital Health on behalf of the Ministry of the Interior and Health SDSD  
Governmental  
30487850  
39, Islands Brygge, DK 2300 Copenhagen S,

("the co-beneficiary"), represented for the purposes of signature of this mandate by Larsen, Otto -CEO  
of the one part,

and

Bundesministerium für Gesundheit (ATNA)  
Radetzkystraße 2, A-1030 Wien  
ATU57161788,  
("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Clemens-Martin, Director General]  
of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : **[Joint Action e-Health Governance Initiative]**

Acronym : **[JA-EHGov]**

Contract No. : **[100868]**

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
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ceive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.

4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.

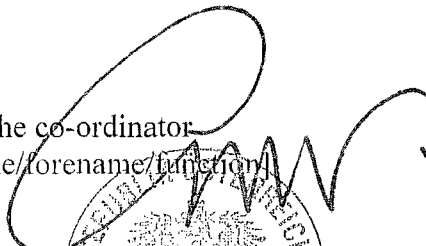
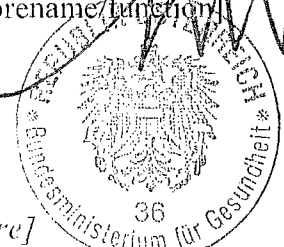
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

For the co-beneficiary  
[Larsen/Otto/CEO]

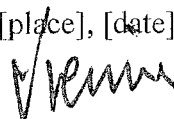
  
[signature]

For the co-ordinator  
[name/forename/function]

  
  
[signature]

Done at Copenhagen 20 September 2010  
In duplicate in English  
2 of 2

Done at [place], [date]

 27. Sep. 2010





## LETTER OF MANDATE<sup>1</sup>

[Administração Central do Sistema de Saúde, I.P.] [ACSS]  
<sup>2</sup>  
<sup>3</sup>

[Av. João Crisóstomo, 11 - 1000-177 Lisboa, Portugal]  
 [508188423],

(“the co-beneficiary”), represented for the purposes of signature of this mandate by [Teixeira, Manuel, President of the Board]  
 of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzkystrasse 2, 1030 Vienna, Austria]  
 [ATU57161788],

(“the co-ordinator”), represented for the purposes of signature of this mandate by [Auer, Martin-Clemens, Director General]  
 of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : **[Joint Action e-Health Governance Initiative]**  
 Acronym : **[JA-EHGov]**  
 Contract No. : **[100868]**

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

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2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

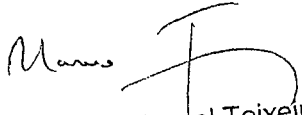
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<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)

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5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.


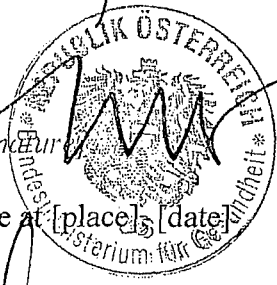
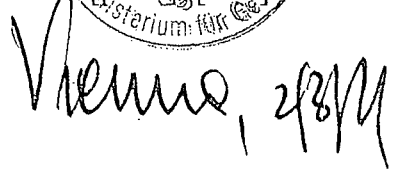
SIGNATURES

For the co-beneficiary  
Teixeira, Manuel, President of the Board

  
[signature] Manuel Teixeira  
Presidente

Done at Lisboa, 10<sup>th</sup> of February, 2011

For the co-ordinator  
[name/forename/function]

  
[signature]  
Done at [place], [date]  
  


In duplicate in English



22



## VESELĪBAS EKONOMIKAS CENTRS

Duntes iela 12/22, Rīga, Latvija, LV - 1005 Tālr.: +371-67501590, fakss: +371-67501591 e-pasts: info@vec.gov.lv

### LETTER OF MANDATE

The Centre of Health Economics (Veselības ekonomikas centrs –VEC)  
 Address : 12/22 Duntes Street, Riga, Latvia, LV-1005  
 (“the co-beneficiary”), represented for the purposes of signature of this mandate by Daiga Behmane, Director  
 of the one part,

and

Bundesministerium für Gesundheit (ATNA)  
 Radetzkystraße 2, A-1030 Wien  
 ATU57161788,  
 (“the co-ordinator”), represented for the purposes of signature of this mandate by  
 [Auer, Clemens-Martin, Director General]  
 of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : **Joint Action e-Health Governance Initiative]**  
 Acronym : [JA-EHGov]  
 Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.



## VESELĪBAS EKONOMIKAS CENTRS

Duntes iela 12/22, Rīga, Latvija, LV - 1005 Tālrs.: +371-67501590, fakss: +371-67501591 e-pasts: info@vcc.gov.lv

3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

### SIGNATURES

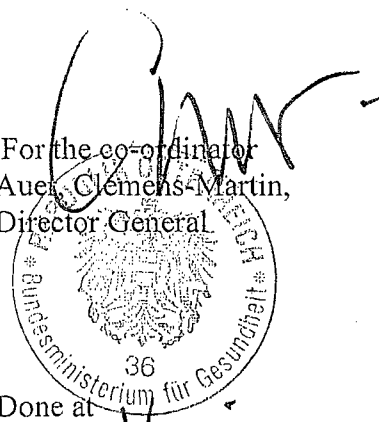
For the co-beneficiary  
Daiga Behmane, Director

Done at Riga, 21 September 2010



In duplicate in English

For the co-ordinator  
Auer, Clemens-Martin,  
Director General



Done at Vienna, 27. Sep. 2010

23

MINISTERU GHAS-SAHHA,  
L-ANZJANI U KURA FIL-KOMUNITA'



MALTA

MINISTRY FOR HEALTH,  
THE ELDERLY and COMMUNITY CARE

Ufficju tas-Segretarju Permanenti

Office of the Permanent Secretary

**LETTER OF MANDATE<sup>1</sup>**

Ministry for Health, the Elderly & Community Care  
Palazzo Castellania  
15, Merchant Street  
Valletta, Malta

3

MT 1279 9127,

("the co-beneficiary"), represented for the purposes of signature of this mandate by Dr Hugo Agius Muscat, Consultant (Public Health Health Medicine) and National eHealth Coordinator of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzkystrasse 2, 1030 Vienna, Austria]

[ATU57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-Clemens, Director General] of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]  
Acronym : [JA-EHGov]  
Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.

PALAZZO CASTELLANIA, 15, MERCHANTS STREET, VALLETTA, MALTA

TELEPHONE 2299 2369; TELEFAX: 2299 2657

Site: [www.ehealth.gov.mt](http://www.ehealth.gov.mt) email: [permsec.hecc.mhecc@gov.mt](mailto:permsec.hecc.mhecc@gov.mt)

EAHC	Executive Agency for Health & Consumers
Registered on <b>14-04-2011</b>	
ARES / 429 806	
DIR	ADMIN HEALTH C-BTSF

HEALTH PROGRAMME			
ATTRIBUTIONS			
ACTION	GD		
INFO			
EAHC	15 AVR. 2011		
URGENT			

M

2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.
3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

DR. HUGO AGNUS MUSCAT  
 NATIONAL E-HEALTH CO-ORDINATOR  
 For the co-beneficiary  
 [name/forename/function]

*Hugo Agnus Muscat*  
 [signature]

Done at [place], [date]  
 VALLETTA, MALTA 29/3/2011



For the co-ordinator  
 [name/forename/function]

[signature]

Done at [place], [date]  
*Vienna 1/4/11*

In duplicate in English

*[Handwritten scribble]*

*M*



## LETTER OF MANDATE<sup>1</sup>

Socialdepartementet (SENA)

2

3

Fredsgatan 8  
SE-103 33 STOCKHOLM  
SWEDEN

("the co-beneficiary"), represented for the purposes of signature of this mandate by Olivia Wigzell,  
Director  
of the one part,

and

[Bundesministerium für Gesundheit] [ATNA]

[Radetzkystreet 2, 1030 Vienna, Austria]  
[ATU57161788],

("the co-ordinator"), represented for the purposes of signature of this mandate by [Auer, Martin-  
Clemens, Director General]  
of the other part,

<b>Bundesministerium für Gesundheit</b>	
Est-Nr. ....	
Eingel.: 27. Okt. 2010	
Registrierdatum .....	
<input type="checkbox"/> Kurzarchiv <input type="checkbox"/> Langzeitarchiv	
Skartierung ab .....	
GZ. ....	Blg. ....

HAVE AGREED

For the purposes of the implementation of the agreement

Title : [Joint Action e-Health Governance Initiative]  
Acronym : [JA-EHGov]  
Contract No. : [100868]

between the Executive Agency for Health and Consumers and the co-ordinator,

The following:

1. The co-beneficiary grants power of attorney to the co-ordinator, to act in his name and for his account in signing the above-mentioned agreement and its possible subsequent riders with the Executive Agency for Health and Consumers. Accordingly, the co-beneficiary hereby mandates the co-ordinator to take full legal responsibility for the implementation of such an agreement.
2. The co-beneficiary hereby confirms that he has taken careful note of and accepts all the provisions of the above agreement with the Executive Agency for Health and Consumers, in particular all provisions affecting the co-beneficiary and the co-ordinator. In particular, he acknowledges that, by virtue of this mandate, the co-ordinator alone is entitled to receive funds from the Executive Agency for Health and Consumers and distribute the amounts corresponding to the co-beneficiary's participation in the action.

<sup>1</sup> Please use the headed paper on national language of the organisation who gives mandate.

<sup>2</sup> Delete if the beneficiary is a natural person or a public-sector body.


<sup>3</sup> Delete if the beneficiary is a public-sector body. (For natural persons, also indicate the number of their identity card or, failing that, of their passport or equivalent.)



3. The co-beneficiary hereby agrees to do everything in his power to help the co-ordinator fulfil the co-ordinator's obligations under the above agreement. In particular, the co-beneficiary hereby agrees to provide to the co-ordinator whatever documents or information may be required, as soon as possible after receiving the request from the co-ordinator.
4. The provisions of the above agreement, including this mandate, shall take precedence over any other agreement between the co-beneficiary and the co-ordinator which may have an effect on the implementation of the above agreement between the co-ordinator and the Executive Agency for Health and Consumers.
5. A signed copy of this mandate shall be annexed to the above agreement and shall form an integral part of it.

SIGNATURES

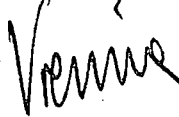
For the co-beneficiary  
Olivia Wigzell  
Director


  
[signature]

Done at Stockholm, 2010-10-19

For the co-ordinator



Done at 

  
~~1-8 März 2010~~

In duplicate in English



## LETTER OF MANDATE<sup>1</sup>

IHE-Europe aisbl] [IHE-EUR  
aisbl<sup>2</sup>

0471998931<sup>3</sup>

[Diamant Building, 80 BD A. Reyers, 1030 Brussels  
BE 0898.675.997,

("the co-beneficiary"), represented for the purposes of signature of this mandate by Künecke, Peter  
Vendor CoChair / LEAR for IHE  
of the one part,

and

Bundesministerium für Gesundheit ATNA

Radetzkystreet 2, 1030 Vienna, Austria  
ATU57161788,

("the co-ordinator"), represented for the purposes of signature of this mandate by Auer, Martin-  
Clemens, Director General  
of the other part,

HAVE AGREED

For the purposes of the implementation of the agreement

Title : **Joint Action e-Health Governance Initiative**  
Acronym : **JA-EHGov**  
Contract No. : **100868**

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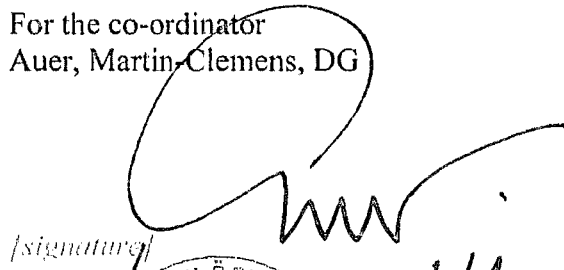
SIGNATURES

For the co-beneficiary  
[Künecke, Peter, LEAR]

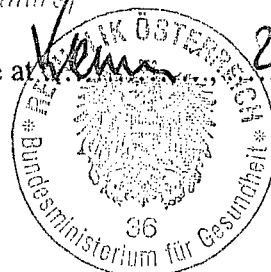
  
[signature]

Done at Erlangen, 2011-03-23

For the co-ordinator  
Auer, Martin-Clemens, DG

  
[signature]

Done at  22/3/11



In duplicate in English





## ANNEX V

**INSTRUCTIONS  
CONCERNING THE ELIGIBILITY OF TRAVEL AND SUBSISTENCE EXPENSES**

**(IF COMMISSION'S RULES APPLY)**

1. **Flat-rate subsistence allowances** cover all subsistence expenses during missions, including hotels, restaurants and local transport (taxis and/or public transport). They apply in respect of each day of a mission at a minimum distance of 100 km from the normal place of work. The subsistence allowance varies depending on the country in which the mission is carried out. The daily rates will correspond to the sum of the daily allowance and the maximum hotel price set out in Article 13 of Annex VII of the Staff Regulations.<sup>1</sup>

Missions in countries other than EU 27, Acceding and Applicant countries and EFTA-EEA countries shall be subject to the prior agreement of the Executive Agency. This agreement shall be related to the objectives of the mission, its costs and the reasons therefore. For these other countries not referred to above, the daily rates will correspond to the sum of the daily allowance and the maximum hotel price set out in Commission Decision C(2008) 6215.<sup>2</sup>

2. **Travel expenses** are eligible under the following conditions:
- travel by the most direct and most economic route;
  - distance of at least 100 km between the place of the meeting and the normal place of work;
  - travel by rail: first class;
  - travel by air: economy class, unless a cheaper fare can be used (e.g. Apex); air travel is allowed only for return journeys of more than 800 km;
  - travel by car: reimbursed on the basis of the equivalent first class rail fare.

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<sup>1</sup> Regulation 31/1962/EEC laying down the Staff Regulations of Officials and the Conditions of Employment of Other Servants of the European Economic Community and the European Atomic Energy Agency

<sup>2</sup> Commission Decision C(2008)6215 of 18 November 2008: General implementing provisions adopting the Guide to missions for officials and other servants of the European Commission