



Executive summary

1. Ad hoc assessment for the support of the establishment of the simplified costs options for the Health Operational Program (POS) 2021-2027 is part of the contract „**Implementation of the Plan for the Assessment of the Human Capital Operational Program 2014-2020 Lot 2: Assessment of the interventions in the field of technical assistance**”, together with three assessment exercises aiming at the Retrospective Assessment of the Human Resources Development Operational Program 2007-2013, an intermediate and a final assessment of the Human Capital Operational Program 2014-2020 and other ad hoc assessments which were defined as needed.
2. The ad hoc assessment which is the subject of this report was based on the request for services no. 95443/22.10.2020, filed by the Ministry of Investments and European Projects (former Ministry of European Funds) and its purpose is the support for the identification and defining of the simplified costs options applicable in the implementation of the interventions of the European Social Fund (FSE+) funded through POS 2021-2027 based on the lessons learned and based on the experience from the implementation of POCU 2014-2020.
3. Two specific objectives were set, corresponding to the stages for the implementation of the assessment, more specifically:
 - Identification of simplified cost options appropriate to actions funded under the themes covered by this ad hoc assessment
 - Defining of simplified cost options, identified according to the requirements of the regulations of the European Structural and Investment Funds and the formats of the operational program.
4. The request for services specified 10 evaluation topics, which outline the POS actions for which the assessment methodology will be applied:
 - Topic 1: Early diagnosis of patients with risk criteria in neuro-vascular pathology;
 - Topic 2: Early Diagnostic Measures and Treatment for Lung Cancer;
 - Topic 3: Early Diagnostic Measures and Treatment for Prostate Cancer;
 - Topic 4: Early Diagnostic Measures and Treatment for Gynecological Cancer / Genetic Testing (BRCA, MSIH, PDL, ALK, ER, PR, BRAF, KRAS, etc);
 - Topic 5: Early diagnostic neonatal / postnatal measures and / or treatment for premature retinopathy;
 - Topic 6: Early diagnostic neonatal / postnatal measures and / or treatment for neuro-sensory hearing;
 - Topic 7: Neonatal diagnosis for congenital dysplasia;
 - Topic 8: Early diagnostic neonatal / postnatal measures and / or treatment for congenital heart malformations;
 - Topic 9: Early diagnostic neonatal / postnatal measures and / or treatment for congenital metabolic syndromes;
 - Topic 10: Early diagnostic pediatric neurology measures and / or treatment - rare diseases / rare genetic diseases, genetic testing of rare epilepsy.
5. The evaluation questions correspond to the two specific objectives, namely:
 1. What are the recommended simplified cost options for the analysis area topics?
 2. What is the way to define simplified cost options to be subject to ex-ante assessment by the Audit Authority and submitted by the European Commission?



6. In order to answer the assessment questions, the proposed methodology included a set of methods and tools designed to match the complexity of the process, actions, cost types, beneficiaries and target groups. The methodology was built on a process common to the ten topics and adapted to the specifics of each topic.
7. Thus, the common process consisted in consulting specialty literature (including the latest practices given the major concern of the European Commission and the Member States to use simplified costs in the 2021-2027 programming period), analysis of operations for which the assessment topic creates the opportunity to implement simplified costs, identification of appropriate simplified cost options (which offer advantages) from the range offered by regulations, selection of feasible ones, for which the characteristics and the amounts may be defined, under the quality conditions required by the Regulation and the requirements of the ex-ante assessment.
8. For each assessment topic, the operations in which the medical services that are the subject of the ten assessment topics will be funded were analyzed. Due to the fact that during the assessment implementation period the program was modified several times, the analyses were updated, the latest version of the program being the one published in June 2022.
9. The identification of cost-effective simplified options was made based on several analyses on the provisions of the European Structural and Investment Funds Regulation, previous experience in Romania and other Member States in applying simplified cost options and availability of data for estimating amounts. The analysis highlighted the fact that there is experience in defining and implementing similar simplified cost options in FESI programs in Romania, but for different pathologies.
10. For the ten topics, the standard unit cost scale has been identified as the most suitable, to which simplified cost options provided for in the Common Provisions Regulation 2021/1060 can be added, more specifically options for indirect expenses, in the form of flat rates.
11. For each topic, the process and succession of medical services absolutely necessary to achieve the objective of the topic were analyzed, which can be formulated generally and comprehensively as early diagnosis of the pathologies indicated for each topic. The factors that may affect the participation of the beneficiaries were also analyzed, more specifically going through all stages of preventive consultation, risk assessment, diagnosis and, as appropriate, minimum interventions to reduce the risk of disease.
12. The analysis led to the identification of a long list of 20 simplified costs, suitable for the funded actions, which were further analyzed from the perspective of defining them according to the requirements of the Common Provisions Regulation 2021/1060 applicable to the European Structural and Investment Funds between 2021-2027.
13. The analysis of the possibility of defining the identified simplified cost options included (i) the regulations on the manner and funded of medical services included in the simplified cost, as well as (ii) the availability of data to substantiate the unit cost scale according to the conditions required by robustness and approximation of the real cost.
14. Available data and ways of funding health services through national programs or the health insurance system were analyzed and led to the conclusion that the most robust data source is represented by the standard unit costs regulated by national law and applicable for the settlement of medical services.
15. The analysis found that for four of the 20 identified suitable costs, simplified cost options could be defined according to the requirements of the Regulation, namely two simplified cost options for assessment and diagnosis of lung cancer and two simplified cost options for risk assessment, diagnosis of prostate cancer.
16. Other sources of data are needed for the other simplified cost options, namely market studies to know the real costs of the health care market, as they do not have the standard unit costs provided by law. Due to the fact that market research is expensive, the managing authority will decide on the basis of the extension of the actions that will be the subject to these simplified cost options, in terms of amounts allocated and number of



beneficiaries, if the benefits of simplification justify the effort of the market study.

17. The four simplified cost options defined in response to the second assessment question are:

- (i) Standard unit cost scale for beneficiaries of risk assessment and diagnostic services for lung cancer pathology (beneficiaries with negative result);
- (ii) Standard unit cost scale for beneficiaries of risk assessment and diagnostic services for lung cancer pathology (beneficiaries with positive result);
- (iii) Standard unit cost scale for beneficiaries of risk assessment and diagnostic services for prostate cancer pathology (beneficiaries with negative result);
- (iv) Standard unit cost scale for beneficiaries of risk assessment and diagnostic services for prostate cancer pathology (beneficiaries with positive result).

For each unit cost it was necessary to enter and calculate two amounts applicable alternatively according to the specific, alternative recommended investigations.

18. For the four simplified cost options, the information required by the format of Appendix I to the program is provided. Some details depending on the structure and mechanism of funding the actions of the program such as „ Total amount (national and EU) expected to be reimbursed” are to be specified by the program management authority.
19. The study provides details on the process of supplying services and unit costs on component services, services for which no standard unit costs are identified for which settlement at real costs is recommended, so as to give the program managing authority the opportunity for a flexible approach in implementation, such as defining milestones. These milestones would allow the partial settlement of the services for beneficiaries who leave the procedure during the process.
20. The evaluation recommends testing the standard scales of unit costs defined with service providers in the two areas, pulmonary and prostate pathologies, to identify possible barriers to applying them and the opportunity to define milestones. It is recommended to analyze simplified cost options for which it has not been possible to define and estimate the amounts of the scales at this stage and to determine the size of the funding and the number of potential beneficiaries that can justify starting a market study to estimate the real costs of the market.