

# PMO<sup>1</sup>: Some Good news and some not so good

By Martine Platteau-Guillaume and Eva Dudzinska<sup>2</sup>

## MyPMO<sup>3</sup>

1. The app has recently been **updated and improved** to include prior authorisations, recognition of a serious illness, pharmaceutical products, online help and Pension statements. The next module will enable access to preventive medicine screening.
2. Currently, while using the My PMO app on a **smartphone** (it is not accessible via an ordinary gsm mobile phone), you must leave the app in order to click on the EU Login app, complete the authentication process then return to My PMO. From 29 October, the option “on mobile authentication” is available and it is possible to make the connexion by facial or fingerprint recognition, or simply by a number code, without having to toggle between the two apps as hitherto.
3. If you use My Remote (<https://myremote.ec.europa.eu>) from your **PC, laptop or tablet** it is far simpler simply to click on the MyPMO option which opens immediately, rather than go through the JSIS/RCAM option which requires an additional authentication.

## JSIS/RCAM and MyPMO

4. Since last June, the option “**submit a question**” has no longer been available. The PMO, overwhelmed with requests, needed to cut off the entry of new requests generated by account sheets. AIACE Int has insisted that this option be re-instated, but subsequently it has been completely withdrawn by PMO. **Alternative ways** to submit a question, after noting the references on the account sheet are either
  - (a) In **JSIS onlign**: via the folder “Contact PMO”+ Procedures - Account sheets, or
  - (b) In **My PMO** : via “JSIS Help Online”+ Procedures - Account sheets.
5. The option “**On behalf of**” which enabled a question to be put for another pensioner (for example by a JSIS Ambassador or other volunteer) has been abolished because a complete and secure option of **Delegation** is planned for 2025. Meanwhile the former paper-based proxy procedure is still available. AIACE Int has insisted to the Director

---

<sup>1</sup> PMO is the acronym of the Paymaster Office, a Commission Department responsible for payment of staff salaries, pensions and allowances and for reimbursements under the JSIS.

<sup>2</sup> The authors are, respectively, the leader of the EU Login Helpdesk and the President of AIACE-Danmark who is also the AIACE Int representative on CGAM. This is an unofficial translation and adaptation by Tom Kennedy, Chairman of AIACE-UK. Original version dated 24 October 2024. This translation made on 28 October 2024, rev. 7 November.

<sup>3</sup> “My PMO” is a mobile application which enables pensioners to consult JSIS, submit requests for prior authorisation and make claims for re-imburement and consult SYSPER. It replaced PMO Mobile and is available to download from the Apple app and Google play stores.

of PMO that the Ambassadors of each national Section should be at least informed that a reply has been sent to the pensioner concerned, although we recognise that the Data Protection Regulation prohibits divulcation of the *content* of the reply.

### Changing Bank Account Information

6. **Changing bank account details** (new account, change of name etc.) will be extremely difficult between 1 November 2024 and 1 February 2025 because of updating to the accounting system. During that period changes may still be made **via EU Login** - My Remote/ Financial and Legal information. However, in urgent cases (e.g. death of a pensioner), or for pensioners who do not use EU Login, we advise you to contact [PMO-FILIP@ec.europa.eu](mailto:PMO-FILIP@ec.europa.eu).

#### Staff Contact: Move of the ‘ticket’ system from “JIRA” to “Service Now”<sup>4</sup>

7. Although the submission of a new request may not be too confusing, the follow-up is more so and we have asked DG-HR to distribute the “Quick Guide” to the use of the new system which is already available on the AIACE-Int website in English (see: <https://aiace-europa.eu/fr/tools/staff-matters-contact/>). The main problem is that the move to a different platform has mixed up the chronological order of older ‘tickets’ and, above all, that PMO has built up a huge backlog which means very long waiting times for the reply to arrive.

### Other Applications

8. **Creation of a new EU Login account**  
There is a significant delay in sending “tokens” (i.e. the final access code) to new users; The procedure to simplify the creation of an EU Login has begun but has not been finalised.  
In both cases the response of the PMO is the same: “The IT team is overloaded with work”.
9. **From 2025, authentication by the “Mobile Phone + SMS” option will be phased out.** It will be essential to install the EU Login app **OR** to use an official access such as “Itsme”<sup>5</sup>. Although use of the EU Login app is easy, installing it and its initial configuration can be more complicated for users who do not regularly use IT tools. Pensioners who still use an old “gsm” mobile phone (i.e. not a “smartphone”) will have to resort to using paper forms.

### Non-IT Issues

10. The **Single Telephone Number** has been a disappointment, especially for pensioners who do not use the IT tools. There may be a long time to wait for a reply; high cost of calls for those calling from outside Belgium; priority given to urgent cases and other difficulties. AIACE-Int has made various proposals for improvements to the service

---

<sup>4</sup> A.k.a. “Snow”.

<sup>5</sup> Itsme is a website which securely stores your identity data and verifies that you are who you say you are for the purpose of other applications. It is available in the UK.

and PMO has accepted that the present situation is unacceptable and has undertaken to seek solutions.

### **CGAM and Revision of the General Implementing Provisions**

11. In the summer of 2023 the CGAM finalised its proposals for new General Implementing Provisions (“GIP”s) and sent them to PMO and DG-HR. The former Director of PMO was not favourably disposed towards the proposals and the internal work on them made no progress until his departure in early 2024. We note that the new team has been more active, but concern remains that the innovations will cost more than before. However, we have learned that the Central Committee intends to submit a “sequential” proposal for amendments to the GIPs before the end of the year. The priority will be to propose changes which will have minimal cost implications and to update the most outdated re-imburement ceilings. Watch this space!
12. With regard to the **ceilings**, it must be recalled that those currently applicable were set in 2007, based upon data from 2005-06. At that time the prices set by the Belgium national medical insurance Institute (INAMI) were used as a guide for each treatment, however, as a precaution, those figures were multiplied by a factor of three. The ceilings were not therefore regarded as a way to save money, but rather as a means to avoid excessive costs. That is why the 2007 ceilings have remained, for the most part, broadly acceptable to this day, however PMO is aware that it is absolutely necessary to make progress in this area.
13. One idea of the Central Committee is gradually to abandon the ceilings and replace them with a more general use of the principle of “excessivity”. That would permit real and up to date prices to be taken into account, for example in cases where certain prices are set by national scales.
14. In addition to those ceilings, the Central Committee will take as its other priority to update the sections on Serious Illness and Handicap in the GIPs.

### **Parity Coefficients**

15. Our current ceilings date from 2007, but in certain countries outside Belgium, the level of prices is much higher than it is in Belgium. That was why it was provided by Article 20(5) of the Common Rules that parity coefficients should be set every two years in order to ensure equal treatment whichever country of the EU the member lived in (the UK is still treated as a Member State for this purpose).
16. On the basis of invoices submitted for each treatment and in each country parity coefficients are regularly set to ensure that equality by providing a coefficient for each treatment in each Member State (including UK). However, the rule is that everyone must be treated in the same way. That means that if, as a result of ceilings being outdated, members resident in Belgium are only re-imbursed at 60% of the cost of treatment (instead of the 80 to 85% provided for by the Staff Regulation), then members living in Denmark or Italy will only receive 60% too. Even if the amount of

the expenditure not re-imbursed is substantially higher in Denmark or Italy than in Belgium, that is not taken into account, what matters is that the percentage is the same.

17. The most recent parity coefficients were set in the Spring of 2021. At the end of 2022 they were extended for two years because of COVID, and they will be extended for a further six months until the end of June 2025 to enable PMO to check its figures and develop a realistic and correct formula for the future. The first calculations, based upon the method used hitherto, gave rather unconvincing results. As mentioned above, the PMO is currently considering a radical solution: namely, in due course to abolish ceilings and replace them with the concept of excessivity. Initially this concept could be introduced for the smaller countries which frequently experience a shortage of invoices for many treatments meaning that there is not a sufficient amount of data to be statistically significant. In order, nonetheless, to guarantee an equitable level of reimbursement, the principle of excessivity might provide an appropriate solution. Eventually, the intention would be to abolish ceilings and replace them with a generalisation of the principle of excessivity, however that will require the establishment of a “normal” price for each treatment in the countries concerned.

### **Article 72(3) – Special Reimbursement**

18. Article 72 (3) of the Staff Regulations provides that “Where the total [medical] expenditure not reimbursed for any period of twelve months exceeds half of the [pensioner’s] basic monthly ... pension special reimbursement shall be allowed by the appointing authority”.
19. The calculation is rather complicated (in particular any part of the total regarded as “excessive” must be excluded) and that is why, in the past, members who were entitled to the payment were automatically notified by PMO of their entitlement. For about ten years PMO no longer does so – for “technical” reasons, namely because this feature was never included in the JSIS online application, which was introduced in 2013. The member must therefore be aware that this provision exists, know how to make the calculations and how to submit the request – and be ready to insist because there is a serious risk that the first response will (incorrectly) be negative.
20. The staff Unions are now also demanding a solution to the problem of a lack of transparency surrounding the application of Article 72(3) and PMO seems to be disposed to set up a working group within CGAM to discuss the matter.
21. As for 10 years, many pensioners have not been informed of their right to a special reimbursement following a period of heavy medical expenditure, AIACE-Int has insisted to the Director of PMO that the option of requesting the special reimbursement provided for by Article 72(3) should now at least be added to MyPMO. PMO has responded that they were required to pay this special reimbursement on request, but not to inform members that they were entitled to it.
22. AIACE regards that position as arbitrary and incorrect in the light of the provisions of the second paragraph of Part 1 of Chapter 6 of the GIPs, which clearly provides that “an information note drawn up on the basis of amounts spent during a retrospective period of a maximum 36 months, shall be sent **automatically**, or upon request, to a

member who may be entitled to the benefit of a special reimbursement” (emphasis added).

23. That explicit obligation is not subject to the capacity of the administration to implement appropriate IT procedures and, in their absence, PMO is required to provide that information by any available means (for example by periodic extracts from reimbursement statements by comparison with their income over the period). The lack of an IT tool does not therefore prevent any concerned member from submitting a request in accordance with that provision. If several members were systematically to submit requests for the information concerning them there would be a risk of paralysing the work of the settlements offices. On behalf of AIACE-Int Franco Rinaudo (President of the Italian Section) has developed a *ready-reckoner* in Excel which enables the computation of an Article 72(3) special reimbursement.
24. That tool could be included in the database of the RCAM, but the central settlements office has refused to do so. Moreover, the member is under an obligation to send the information note, duly signed and specifying the twelvemonth period, within the 36 months, that he wishes to have taken in to consideration.
25. There is a second obligation incumbent on PMO which derives from the third paragraph of that provision, namely that, in the absence of a response of the member on the period selected, to take into account the period which seems to be the most favourable for them. In this clear situation, it seems certain that the Court of Justice, dealing with a case against the failure of PMO to provide the necessary information, would annul such a failure to give due effect to the benefit provided by Chapter 6 of the GIPs.