Beyond Lowest Price: MedTech Europe's First Reaction to the EU Procurement Regulation

Brussels, 10 September 2026 - MedTech Europe welcomes the European Commission's proposal for a new Public Procurement Regulation, published on 9 September 2026, and the ambition behind it. For the medical technology sector, this reform carries particular weight. In Europe, healthcare is among the largest areas of public spending, and hospitals and clinics overwhelmingly obtain the technologies needed to care for patients through public procurement. These rules decide which technologies are bought, and on what terms.

What we welcome

Ending lowest-price buying is the single most important improvement. The proposal sets the best price-quality ratio as the standard award method and makes best value for public money a principle of the Regulation. Price-only awards have held back quality, innovation and resilience in European healthcare for years, and the Commission is right to close that door.

Beyond the award rule, the proposal hands buyers a better toolkit. The new framework gives public buyers more scope to describe the outcome or performance they need and allow the market to propose the best solution, rather than prescribing in detail what that solution should look like. Procurement becomes digital by default, and suppliers register their credentials once instead of resubmitting them for every tender. Barriers that keep smaller companies out come down too: turnover thresholds are capped, and a first-time bidder no longer has to prove they have bid before. Underneath all of it runs a commitment to professionalise public buying, which is where most of the difference will be made.

What needs to be strengthened

Good tools only deliver if they are used. Moving to a directly applicable Regulation is the right choice, but many of the proposal's most valuable provisions remain optional, left to buyer discretion, or postponed to future implementing acts. Consequently, a reform designed to create one predictable European market risks producing continued fragmentation instead.

This applies most clearly to value-based procurement. A minimum quality weighting of 30% still allows price to decide an award, and broad derogations risk reopening the door to price-only buying. The quality weighting should be raised, the derogations narrowed, and quality defined in terms that reflect what matters in healthcare: clinical performance, patient outcomes, and the efficiency and total cost of care along the patient pathway. Market consultation should be a required step, not an option, so that buyers and suppliers can align on what is actually available before a tender is launched.

One further point deserves attention: suppliers need time and forward visibility to prepare good offers, but the proposal shortens bid deadlines without any advance signal of what is coming.

What needs to be reconsidered

Two areas need particular attention in healthcare. First, European preference: we support a stronger European industrial base and welcome that preference stays voluntary and respects the Union's trade commitments. But medical technologies are not ordinary industrial goods. Origin rules focused on the place of final assembly risk overlooking the research, design, certification and clinical support delivered in Europe, and requirements reaching down to individual components could delay patient access to the best available technology. Applied case by case across thousands of contracting authorities, they also risk inconsistent requirements and escalating information demands on suppliers. Health should be exempted, or any preference confined to clearly defined categories where competition is sufficient and supply is secure.

Second, resilience and security of supply: we share the goal and welcome the recognition of health as a critical sector. But the new security and resilience duties must be proportionate, workable and consistent with the Union's trade commitments, and information requests need to be coordinated across Europe rather than designed buyer by buyer. Resilience is built across the whole supply chain; it cannot rest on individual buyers or bidders alone.

Oliver Bisazza, CEO of MedTech Europe, said: "Public procurement plays a decisive role in determining whether medical technologies reach European patients. This reform gets the direction right by moving away from lowest-price buying. Now Europe must make sure that promise reaches every patient the same way, in every hospital, in every Member State."

Next steps

MedTech Europe will publish a detailed assessment and will work with the European Parliament and the Council to make this reform deliver for patients, health systems and Europe's competitiveness.

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About MedTech Europe

MedTech Europe is the European trade association for the medical technology industry including diagnostics, medical devices and digital health. Our members are national, European and multinational companies as well as a network of national medical technology associations who research, develop, manufacture, distribute and supply health-related technologies, services and solutions.
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