Bucharest
30.07.2026

Ms Ursula von der Leyen
President of the European Commission

Subject: Safeguarding education and healthcare in the implementation of Romania’s RRP Milestone 420

Dear President von der Leyen,

Europe's resilience, recovery and competitiveness will ultimately depend on the people who educate its future workforce and protect the health of its citizens. Through the Competitiveness Compass and the Union of Skills, your Commission has rightly placed human capital, talent retention and resilient public services at the centre of Europe's economic and social agenda.

Recent developments regarding the implementation of Romania's public-sector remuneration reform under Milestone 420 of the Recovery and Resilience Plan have generated significant concerns among representative trade union organisations from the education and healthcare sectors. While we fully recognize Romania's responsibility to adopt this reform and the importance of ensuring fiscal sustainability, we believe that its implementation should remain fully consistent with the Recovery and Resilience Facility's broader objective of strengthening human capital, public services and social resilience.

We therefore respectfully seek the European Commission's support in identifying solutions that reconcile these objectives. The current situation in Romania represents a critical test of our ability to reconcile fiscal sustainability with investment in people.

Recent data, unfortunately, show that 40% of Romanian 15-year-olds do not reach minimum proficiency in mathematics, reading and science, compared with an EU average below 30%. The early school-leaving rate reaches 23.7% in rural areas, compared with 4.6% in cities.

At the same time, Romania has 3.7 practising physicians per 1,000 inhabitants, compared with an EU average of 4.3, while national health expenditure represents only 5.8% of GDP, compared to the 10.0% average across the Union. A 2023 survey conducted by the Romanian College of Physicians found that almost two thirds of doctors under the age of 35 intended to leave the country.

The remuneration gap further increases these risks. According to Eurostat's 2022 Structure of Earnings Survey, mean gross monthly earnings in Romania were approximately half the EU level in both sectors: EUR 1,478 compared with EUR 2,948 in education, and EUR 1,624 compared with EUR 3,008 in human health and social work activities. While these figures cover broad economic sectors rather than individual statutory salary scales, they clearly illustrate the competitive pressure Romania faces in retaining qualified professionals within the European labour market.

These are not abstract statistical differences. They directly affect Romania's capacity to provide education and healthcare in rural and underserved areas, to reduce school dropout, to develop the skills needed by the European economy and to ensure the continuity of essential medical services.

The Recovery and Resilience Facility was designed precisely to strengthen Europe's long-term resilience and human capital. Article 3 of Regulation (EU) 2021/241 identifies both "health, and economic, social and institutional resilience" and "policies for the next generation, children and youth, such as education and skills" among its six fundamental pillars. The implementation of one RRP milestone should therefore not undermine two of the Facility's core objectives.

Against this background, the ongoing implementation of Milestone 420 has become the subject of intense public debate in Romania. The objective of the reform is legitimate and necessary. However, the manner in which it is implemented should avoid consequences that could weaken sectors already facing structural shortages. We believe that this objective can be achieved through constructive dialogue and appropriate technical solutions, with the support of the European Commission where necessary. Unfortunately, the current interim Government and Prime Minister lacked good will in this regard.

While we fully support the objective of creating a transparent, equitable and fiscally sustainable public-sector remuneration framework, a reform cannot be considered sustainable if it aggravates staff shortages, reduces the attractiveness of essential professions or creates new inequalities between occupational categories.

On 13 July 2026, the European Commission submitted proposal COM (2026) 378 to amend Romania's Recovery and Resilience Plan. As the relevant Council procedure has not yet been completed, we believe that this is the appropriate moment to clarify how the revised Milestone 420 should be applied to essential public services.

The proposed reform by the interim government provides that public-sector base wage levels in place in august 2025 should remain unchanged and introduces a revised variable-pay framework, including a cap on bonuses of 20% of the base salary at the level of each main budgetary authority. It also establishes aggregate fiscal parameters for the evolution of the public-sector wage bill.

These aggregate requirements should not automatically result in uniform reductions in individual total monthly earnings. Nor should statutory payments compensating for additional workload, essential duties, occupational risks or work performed in difficult or underserved areas be treated in the same manner as discretionary bonuses.

The European health workforce situation provides a compelling reason for caution. According to *Health at a Glance: Europe 2024*, 20 EU countries reported shortages of doctors and 15 reported shortages of nurses. The estimated EU shortfall reached approximately 1.2 million doctors, nurses and midwives in 2022 when measured against minimum staffing thresholds for universal health coverage. More than one third of doctors and one quarter of nurses in the EU were over the age of 55.

Romania faces additional structural vulnerabilities. It had 8.2 nurses per 1,000 inhabitants in 2023, compared with an EU average of 8.5, while health expenditure amounted to approximately EUR 1,800 per person, adjusted for purchasing power, compared with EUR 3,832 across the EU. The OECD's 2025 review of Romania's healthcare system also notes that previous salary increases contributed to stabilising the outflow of health professionals. More than 90% of Romanian doctors were nevertheless employed in urban areas in 2024, illustrating the persistence of severe territorial inequalities.

Through Romania's Recovery and Resilience Plan (RRP) and the Health Programme, with the support of the European Investment Bank, Romania is currently delivering the largest healthcare infrastructure investment programme since the fall of communism. This includes the construction of the country's first 22 new hospitals in over three decades, comprising eight hospitals financed through the RRP, nine through the Health Programme, three National Severe Burn Centres and the three Regional Emergency Hospitals. These historic European investments are already improving the capacity, performance and quality of Romania's healthcare system. However, these efforts will not achieve their intended objectives if the healthcare workforce is weakened through reductions in total remuneration and continued restrictions on recruitment. Modern hospitals cannot deliver better care without sufficient, motivated and well-qualified healthcare professionals.

Furthermore, both Romania and the European Union are facing an increasingly complex geopolitical and security environment, with Romania situated on the Union's Eastern border in close proximity to the war in Ukraine. In such circumstances, strengthening rather than weakening healthcare systems is a matter not only of public health, but also of strategic resilience and civil preparedness. The operational capacity of emergency departments, intensive care units and public hospitals is essential for ensuring an effective response to major emergencies, humanitarian crises or potential security threats. Any reform that undermines the availability of qualified healthcare personnel would therefore run counter to the broader European objective of strengthening resilience and preparedness.

Romania's education system is equally exposed. The Commission's 2026 Country Report identifies shortages of teachers in rural areas and in STEM disciplines, aggravated by unattractive working conditions. Eurostat data show that Romania's overall early school-leaving rate was 15.5% in 2025, compared with 9.1% across the EU. Participation in pre-primary education was 76.5% in Romania in 2024, compared with an EU average of 95.0%. The 2025 Education and Training Monitor further indicates that only 23.2% of Romanians aged 25–34 held a tertiary qualification in 2024, compared with 44.1% across the Union.

The concerns raised by representative trade unions must therefore be properly considered. In healthcare, SANITAS and the Healthcare Solidarity Federation have requested protection against reductions in total monthly earnings, fair salary coefficients, appropriate recognition of shifts, night work, on-call duties, weekends, public holidays and difficult or hazardous working conditions, the correction of inequalities affecting medical, technical, administrative and auxiliary personnel, and recruitment based on objectively demonstrated staffing needs and available budgets.

In education, the Federation of Free Trade Unions in Education, the "Spiru Haret" Federation and the "Alma Mater" National Trade Union Federation, which together represent more than 300,000 employees, submitted a detailed common proposal on the 3rd of June 2026. On July 23rd, the three organisations rejected the subsequent draft and called for genuine negotiations, arguing that the commitments made following the 2023 general strike had not been respected.

Their proposals include a fairer coefficient grid reflecting qualifications, responsibilities, teaching grades and seniority; an appropriate calculation of hourly teaching based on the statutory teaching norm; the preservation of rights already obtained through merit-based procedures; and adequate recognition of classroom leadership, neuropsychological workload, special education, simultaneous teaching, pedagogical practice, doctoral qualifications, work in isolated areas and responsibilities within universities. They also request fair treatment for teaching, auxiliary, administrative and university personnel.

In this spirit, we respectfully invite the European Commission to support the Romanian authorities in identifying practical solutions that allow the full implementation of Milestone 420 while safeguarding the resilience of the education and healthcare systems. In particular, we would welcome the Commission's guidance regarding the following issues:

- Confirm that the implementation of Milestone 420 may include targeted sector-specific derogations or equivalent safeguards for healthcare and education, provided that Romania respects the milestone's overall fiscal parameters.
- Clarify that the 20% cap established at the level of each main budgetary authority does not, in itself, require across-the-board reductions in individual total monthly earnings and does not prevent Romania from protecting essential public services.
- Clarify that statutory payments linked to additional workload, continuity of essential services, occupational risks, difficult working conditions or work in underserved areas do not have to be treated as discretionary bonuses for the purpose of the cap. This should cover, in particular, on-call duties, shifts, night and weekend work and hazardous conditions in healthcare, as well as classroom leadership, additional teaching, special and simultaneous education, pedagogical responsibilities and work in isolated or understaffed areas in education.
- Encourage an effective non-regression safeguard for total monthly earnings, particularly for professionals ensuring the continuity of healthcare and education services, as well as the protection of rights granted through existing merit-based procedures for their legally established duration.
- Ensure that the sectoral impact of the reform is fully considered before the assessment of the milestone, based on complete and disaggregated simulations covering all occupational categories, base salaries, additional duties, allowances and existing merit rights, as well as the consequences for recruitment, retention, rural and underserved areas and service continuity.
- Encourage genuine and documented negotiations with representative healthcare and education trade unions before the final adoption and implementation of the new remuneration framework, in line with the Council's 2026 recommendation on the systematic, meaningful and timely involvement of social partners.
- Support needs-based recruitment in healthcare and education, allowing public hospitals, schools and universities to fill vacancies on the basis of objectively demonstrated needs and

available budgets, particularly in institutions, regions and professional categories facing severe staff shortages.

- Clarify that specific derogations may apply to the strategic sectors of education and healthcare, in the sense that certain provisions of the remuneration legislation applicable to these sectors, may enter into force in successive stages, depending on national macroeconomic developments.

If the current wording of the proposed revised milestone does not provide sufficient legal certainty for these safeguards, support a targeted clarification or adjustment of the implementing framework before it is finalised.

Our requests do not seek to transfer responsibility for setting public-sector remuneration from the Romanian authorities to the European Commission, nor do they question Romania's fiscal commitments under the Recovery and Resilience Facility. Rather, they aim to ensure that the implementation of an agreed reform fully reflects the Facility's broader objectives of strengthening resilience, investing in people and preserving the quality of essential public services.

In the current context of ongoing discussions in Romania regarding the future remuneration framework, the Commission's support in identifying balanced and legally sound solutions would represent an important contribution to the successful implementation of this reform. We remain convinced that fiscal responsibility and investment in education and healthcare can and should be pursued together.

We would therefore appreciate the Commission's views on how these considerations could be taken into account during the final implementation of Milestone 420 and in its dialogue with the Romanian authorities.

Yours sincerely,

Victor NEGRESCU
Vice-president of the European Parliament
Member of the Committee on Public Health, Co-chair of the Intergroup on the Future of Education and Skills for a Competitive Europe

Adrian STREINU-CERCEL
Member of the Romanian Senate
Chair of the Committee on Health

Alexandru-Mihai GHIGIU
Member of the Romanian Chamber of Deputies
Chair of the Committee on Education