

IPCEI Med4Cure: The Re-Industrialisation of Europe EIT Health Flagships Call 2025

Frequently Asked Questions (FAQs)

In this document you will find your most common questions answered relating to the IPCEI Med4Cure: The Re-Industrialisation of Europe EIT Health Flagship Call 2025. For your ease we have grouped these around common themes – if you have a question that is not covered here, please don’t hesitate to reach out to your regional [Co-Location Centre](#).

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GENERAL QUESTIONS

ELIGIBILITY

- 1. Are entities from any country eligible, or are only entities from the countries participating in the IPCEI participate?**

Any country that is participating and eligible for Horizon Europe funding can participate in this call.

- 2. There has been a development regarding the UK's association to the Horizon Europe programme, which will likely come into effect on 1 January 2024. Does this change UK partners' eligibility to receive funding from EIT Health in the IPCEI Med4Cure: The Re-Industrialisation of Europe Flagship Call 2025?**

Yes, UK entities will now be eligible to directly receive EIT funding, if selected as a part of a granted project consortia and will be treated as all other participants from Horizon Europe participating and associated countries. UK entities selected as part of prior calls for proposals (2023 and prior) will continue to be covered by the local UK reimbursement scheme. Further information on this topic can be found on the [UK Research and Innovation website](#) or by reaching out to the EIT Health Ireland-UK Co-location Centre.

- 3. Are entities based in Switzerland eligible to receive EIT funding following a successful application to the IPCEI Med4Cure: The Re-Industrialisation of Europe Flagship Call 2025?**

Switzerland is currently not an associated country of the Horizon Europe programme. As such, Swiss entities are not directly eligible to receive EIT funding, when part of a selected project consortia. Entities can receive up to €60,000 in EIT funding within the [EIT Health Business Plan 2023-2025](#). However, for funding above €60,000 organisations need to refer to the Swiss national reimbursement scheme. In the current non-associated third country model, researchers and innovators in Switzerland are funded directly by the Swiss Confederation if the complete project proposal has been positively evaluated. Further information is available on the [State Secretariat for Education, Research and Innovation \(SERI\)](#) of Switzerland or by reaching out to the EIT Health Germany-Switzerland Co-location Centre.

- 4. Are all Hungarian entities eligible to receive EIT funding following a successful application to the IPCEI Med4Cure: The Re-Industrialisation of Europe Flagship Call 2025?**

Due to a [decision by the Council of the European Union](#), published on and effective as of 15 December 2022, certain Hungarian institutions designated as "public trust foundations" are currently not eligible to receive funding under the Horizon Europe and Erasmus programmes. These Hungarian entities can still participate without receiving EIT funding, as an Associated Partner, if allowed by the call conditions. Further information can be found on the EU Commission Funding and Tenders FAQ website.

MEMBERSHIP / CONSORTIUM

ELIGIBILITY

- 5. Can a consortium make a proposal without any EIT Health members as part of the consortium?**

There must be at least one current paying EIT Health Core or Associate Partner in the consortium.

- 6. For the evaluation process, does it make any difference if the application is submitted by an applicant outside of the EIT Health community?**

The evaluation process is the same for all applications, regardless of whether they are members from within or outside the EIT Health community. There are eligibility rules on the overall consortium. A minimum of one EIT Health member, Core or Associate, is required. It is highly recommended to contact various EIT Health members as early as possible to foresee what is feasible, secure their participation and construct solid consortia.

7. The call is now open to the participation of all entities (external EIT Health partners). Will external partners be able to lead projects?

Yes, non-EIT Health members can lead projects.

8. Can non-members of the EIT Health community secure as much funding as EIT Health Core/Associated Partners?

With the new regulation of Horizon Europe, non-members do not have a funding cap but must become members of EIT Health if they are selected for funding planning to receive more than €50,000 euros per year.

9. Does the mandatory requirement of at least one EIT Health Partner per consortium also include external or network partners? or must they be Associate or premium(core) partners?

The requirement of at least one EIT Health Partner refers to paying Associate or Core partners. So, one of those must be part of the consortium.

10. What if an organisation is willing to become EIT Health Partner but is not formally approved by EIT Health as member of the association at the proposal stage?

The requirement of at least one EIT Health Partner refers to currently paying Associate or Core partners. So, one of those must be part of the consortium.

11. Can a research centre be the coordinator of a project proposal? Do you expect the micro or small enterprise partner to coordinate the project?

There are no rules on who should be the activity leader. It can be any member of the consortium. Usually, the activity leader is the member at the centre of the project, the member that is driving it. However, it is important to keep in mind that in all innovation projects, a product or service should be launched on the market. The role of the commercialisation partner is crucial and should be clearly identified. The commercialising entity of the project must be identified at the proposal submission stage, regardless of who is the coordinator of the project.

12. Can a Swiss start-up apply and lead a project, especially if they are teaming up with other existing EIT Health Partners who do not want to lead?

No, this is not possible. In return for providing grant funding and in-kind contributions, EIT Health enters into a "Grant to Options agreement" with the Small and Micro Enterprise that is commercialising the innovation or technology at the heart of the project. In the case of Swiss Small and Micro Enterprises participating in a project, it would be the State Secretariat for Education, Research and Innovation of Switzerland (SERI) that would provide the funds directly to the Swiss Small or Micro Enterprise. Therefore, because EIT Health will not directly fund the Swiss Small or Micro Enterprise, it cannot receive the 'options' in that enterprise, contained within the "Grant to Options agreement". The consortium may still involve a Swiss entity, as long it is a partner organisation and not the Small or Medium Enterprise that is commercialising the innovation or technology. Please see full details in the call document or reach out to the EIT Health Germany-Switzerland Hub for support.

13. Where can I find the list of IPCEI Direct and Associated partners?

All IPCEI Direct and Associated partners can be seen in the call document introduction section, and also on the European Commission communication on the IPCEI Med4Cure programme - https://ec.europa.eu/commission/presscorner/detail/en/ip_24_2852.

14. Is the IPCEI Direct or Associated Partner obliged to become an EIT Health partner?

Since IPCEI Direct or Associated Partners do not receive funding, it is not mandatory for the IPCEI Direct or Associated Partners to become an EIT Health Partner. However, they must report co-funding.

15. Is there a limit on the number and type of partners in a project?

There is no limit on the number of partners. You may have any number of different hospitals, academics, medical, business institutions etc, in your consortium. The important thing is to have the right skills and partners in place to deliver on your project.

16. Can more than one start-up participate in one consortium?

No, we expect one micro or small enterprise per project.

17. Can an IPCEI Direct or Associated Partner participate in various EIT Health projects?

Yes, a single IPCEI Direct or Associated Partner can participate in any number of different proposals in this call to complement an IPCEI project, and any other EIT Health call.

CALL BUDGET

ELIGIBILITY

18. Will projects have indirect costs? If so, what percentage?

Yes, the same percentage as in Horizon Europe - 25%.

19. Where can information be found regarding eligible costs for each call within the flagship?

We follow Horizon Europe cost eligibility rules for all our programmes and activities. The Annotated Model Grant Agreement or AMGA is the backbone of all Horizon Europe grant agreements.

Visit: <https://connections.eithealth.eu/guidance/financial-guidance> to download the AMGA, which provides the description of eligible costs for Horizon Europe projects.

EVALUATION

20. Who will perform the eligibility checks?

EIT Health staff will check that each application meets the eligibility criteria that is detailed in the call document. Applications that meet the stated eligibility criteria then move on for formal evaluation. Applications that do not meet the eligibility criteria will be rejected.

21. Who will perform the application evaluations?

Standard EIT Health practice is to contract with independent experts who will review the quality of applications and assign each application a score in accordance with the call score card (see call document). The highest scoring applications are then ranked and depending on the available budget and the fulfilment of the conditions stated in the call document, they are invited to receive funding.

FINANCIAL SUSTAINABILITY RETURN TO EIT HEALTH

22. When will the due diligence for start-ups take place?

The due diligence process will start after the Hearings. Entities who can provide results of a recent due diligence process may be exempt from undertaking another due diligence process.

23. Why is the project delivery timescale shorter in this call than in the previous EIT Health Flagship 2024 call?

EIT Health's business plan is ending in 2025 and the current call is designed with this in mind. For this reason, all funds need to be spent by 31 December 2025. Once the rules for 2025 onwards are defined, a new call will be considered.

REIMBURSEMENT RATE

24. Regarding co-funding, can the funds come from other grants, or does it need to be from private investment?

Co-funding can come from different sources, private funding, own resources and other grants. However, Horizon Europe strictly prohibits double funding from the EU budget. Any given action may receive only ONE grant from the EU budget (except for EU Synergy grants) and the same costs may under NO circumstances can be declared to two different EU actions. Co-funding for the same activity cannot come from multiple but different EU funds. The minimum requirement for co-funding is 50%, which is expected to come from member states funding of the IPCEI granted projects.

25. Regarding co-funding, should the company have capability to co-finance at the time of submission or at the actual start date of the project?

EIT Health will not audit the financial status of an applicant at proposal stage. The project should have sufficient financing until the pre-financing will be launched. This could mean between 3 to 6 months depending on how fast the contracts can be signed. Pre-financing is paid only once agreements are signed between the relevant party or parties, and EIT Health.

26. How can we have synergies with other EU funding without falling in the double funding trap?

As stated above, co-funding for the same activity cannot come from multiple but different EU funds. A single project may receive funding from a number of different EU funds, but these funds must be financing clear and separate activities within the project. For example, one EU fund may be used to finance staffing costs, and a separate EU fund may be used to finance the costs of materials. If the funding is not supporting the same cost of the project, it will not be considered as double funding. The minimum requirement for co-funding is 50%, which is expected to come from member states funding of the IPCEI granted projects.

27. Are co-funding percentages applied per project or per partner?

Co-funding percentages are applied per project and not by partner. It is possible to have multiple partners each providing less than 50% of the co-funding, but together their contributions amount to 50% of the funding of the project.