

## 6 HEALTH CARE FOR FOREIGNERS

Data on foreigners provided in this chapter come from the National Health Information System (NHIS) and have been processed by the Institute of Health Information and Statistics of the CR (IHIS CR). To put it concretely, the data have been collected by national health registers (the National Register of Hospitalised Patients, the National Register of Reproduction Health), an information system of bodies for public health protection (the Register of Tuberculosis), and by an Annual report on the utilisation of health care by foreigners. The aforementioned selected data sources on the health sector only provide partial information on the total utilisation of health care by foreigners in the CR and their state of health. Further information on data sources of the NHIS can be found on the website of the IHIS CR at: <https://www.uzis.cz/index-en.php>.

Besides information from data of the NHIS published here, the Health Insurance Bureau publishes data on utilisation of health care by foreigners – citizens of the EU/EEA and Switzerland, and foreigners from countries with which it has signed an agreement on social security, including the area of health insurance and provision of health care, and data on costs spent on that health care. For more information see: <https://www.kancelarzp.cz/index.php/en>.

### Methodological notes on the Tables

**Table 6-1 Trends in utilisation of health care by foreigners in the years 2010-2021 and Tables 6-2a (6-2b) and 6-3a (6-3b) Utilisation of health care by foreigners in 2021**

Data on the utilisation of health care by foreigners are measured by an annual report “V (MZ) 1-01”. It is only filled in by providers of inpatient care for health care establishments denoted as hospitals regardless the type of care they provide to foreigners, i.e. including outpatient care. The report does not measure health care paid from the public health insurance. Therefore, it only regards foreigners who cover health care from health insurance policies concluded in the CR, insurance policies concluded abroad, in cash, or whose health care is reimbursed by state authorities (the Ministry of Health, the Ministry of the Interior, the Ministry of Justice, regional authorities, and the like). The figures also include asylum applicants accommodated in asylum facilities health care for whom is paid by the Ministry of the Interior. On the other hand, foreigners with refugee status and granted asylum should not be included in statistics anymore.

From the total number of 204 providers, 3 reporting units did not deliver the report in 2021. In the last year available, those establishments reported health care provided to 2.5 thousand foreigners in total, with the total volume of costs in the amount of CZK 4.4 million. Therefore, the under-estimation of data for 2021 due to those health establishments may amount to about 1.7% as for the number of foreigners, however, less than one percent in terms of costs.

The number of foreigners utilising health care in hospitals outside the public health insurance considerably increased from 2010 to 2021 by 87% from 79.6 thousand persons to 148.5 thousand persons. In 2020, probably due to an influence of measures limiting movement of persons during the pandemic, there was a decrease by 18.7% to 103.8 thousand persons. Last year (2021), on the other hand, the number of reported foreigners considerably increased by 44.7 thousand (43%), namely also due to operation of COVID-19 vaccination centres for foreigners, too, as was explained by the providers. An increase mainly occurred in foreigners from non-EU countries, namely by 26.4 thousand persons (48%). As for foreigners from the EU Member States, the increase was by 18.4 thousand (38%). In the outcome, the share of foreigners from the EU Member States thus decreased to 45.1% compared to the maximum in 2016, which was 54.1%.

As for costs spent on the health care provided to foreigners, an increase in 2021 was less considerable, namely by 20% from CZK 975 million to 1.167 billion. In comparison to the year 2019, which was not influenced by the COVID-19 pandemic, the increase was by less than half the amount (by 8%). The average costs per foreigner in 2021 decreased, compared to the previous year, from CZK 7.2 thousand to CZK 5.9 thousand as for foreigners from third countries (non-EU countries), and from CZK 11.9 thousand to CZK 10.3 thousand for foreigners from Member States of the EU.

Costs for citizens from Member States of the EU amounted to 58.9% of the total costs in 2021 and their share has been gradually decreasing since 2016.

In terms of distribution in the territory of the CR, the highest number of foreigners was again treated in hospitals in the Hl. m. Praha Region, to put it concretely it was 64.4 thousand persons (42.4%). As for the number of treated foreigners, other Regions ranked as follows: the Jihomoravský Region (18.6 thousand persons), the Středočeský Region (11.5 thousand), and the Moravskoslezský Region (8.5 thousand). In 2021, the highest number of foreigners treated in the CR was again among citizens of Slovakia (36.9 thousand). They were followed by Ukrainians (28.1 thousand), Russians (9.5 thousand), Vietnamese (8.6 thousand), and Germans (7.6 thousand).

The highest costs were for citizens of Slovakia (CZK 427.0 mil.) followed by citizens of Ukraine (CZK 185.2 mil.), Germany (CZK 75.9 mil.), Viet Nam (CZK 54.3 mil.), Poland (CZK 44.1 mil.), and the Russian Federation (CZK 34.1 mil.). As at 31 December 2021, for health care provided to foreigners, the total of CZK 65.8 million remained unpaid after the maturity date, which is 5.6% of the total amount of costs for health care provided to foreigners in hospitals. For foreigners from Member States of the EU, CZK 23.3 million (35.4%) remained overdue.

#### **Table 6-4 Foreigners treated in hospitals by cause of hospitalisation in 2021**

Data in the Table come from the National Register of Hospitalised Patients (NRHOSP); they were included in the publication after two years again. Data from the years 2016 and 2017 were vastly reported in an incorrect way as for citizenship, which artificially caused an enormous increase in the number of hospitalised foreigners. Along with a transition to a new information system within the NHIS united technological platform, rules for reporting foreigners were made stricter in 2019.

The National Register of Hospitalised Patients (unlike the “V (MZ) 1-0” report) measures care regardless the way of payment and only for patients hospitalised on a bed. Thus, unlike the report, it also monitors foreigners with permanent residence in the Czech Republic who are participants of the public health insurance as required by law. On the other hand, the report measures both the outpatient and inpatient care, however, only the one, which is not paid from the public health insurance. Although both the cases apply to care provided in hospitals in the Czech Republic, the mentioned numbers of foreigners in both the data sources are incomparable due to those reasons. They only overlap as for utilisation of inpatient health care by foreigners paid outside the public health insurance.

In 2021, 61.6 thousand cases of hospitalisation of foreigners in hospital departments (wards) were reported, i.e. by 5.3% less hospitalisations compared to the previous year (2020). The most frequent reason for hospitalisation of foreigners remains the same as in the previous years: “pregnancy, childbirth, and the puerperium” (35% of female hospitalisations). It is followed (with 10% of all hospitalisations) by related “factors influencing health status and contact with health services” (most often, hospitalisation of healthy infants (newborns), accompaniment of a sick child; it is followed by examinations and investigations (medical check-ups), which require hospitalisation, and the like). The third most frequent reason (8.4% of hospitalisations) among foreigners was “injury, poisoning and certain other consequences of external causes,” which as for males ranks second with 13% of hospitalisations. Compared to the previous year, the number of hospitalisations of foreigners decreased virtually in all groups of reasons. When expressed in absolute numbers, mainly as for hospitalisations due to “pregnancy, childbirth and the puerperium” (Chapter XV) it was by 1.6 thousand cases (11%) and due to related aforementioned reasons (“factors influencing health status and contact with health services”) within the Chapter XXI it was by 1.9 thousand (22%). The number of injuries dropped, too, by 521 cases (9%). On the other hand, a more considerable increase was recorded in relation to the COVID-19 as for hospitalisations due to “diseases of the respiratory system” (Chapter X) by 1.6 thousand cases (50%). The COVID-19 disease is coded within a newly included chapter XXII called “Codes for special purposes,” namely under the following codes: U07.1, U07.2, or U69.75, however, usually as a secondary diagnosis code. For the purposes of statistics provided here, only the primary reason for hospitalisation is taken into account.

## **Tables 6-5 and 6-6 Abortions in female foreigners**

Data on abortions in female foreigners come from the National Register of Reproduction Health - Abortions. All types of abortions made in health establishments of the CR have to be reported on the form "Application for (a Legally) Induced Abortion – Report of Abortion and Ectopic Pregnancy". This report is compulsory and both are liable to it: Czech nationals – females with permanent residence in the territory of the CR as well as female foreigners regardless of the type and length of their stay. Data on abortions are only published as for female foreigners with a permanent or a long-term residence in the territory of the CR.

In 2021, 1 609 abortions in female foreigners with a permanent or a long-term residence in the territory of the CR were registered in the Czech Republic, which is a decrease, compared to the previous year, namely by 0.2 p. p. Of that, 927 abortions (57.6%) were legally induced abortions, of which 14.2% were medically indicated. Vacuum aspirations (menstrual regulations) made 66.9% of all legally induced abortions; compared to the previous year, they decreased by 3.0 p. p. (639 in 2020 and 620 in 2021). The decrease can be related to a change in the reporting of vacuum aspirations (menstrual regulations). Before 2021, they were reported by means of the item of length of gestation, whereas from 2021 these abortions are determined from the item of age of the foetus.

Since 2002, the total number of abortions in female foreigners has been gradually decreasing (from 2 751 in 2002 to 2 238 in 2005). From 2006 to 2008, the number of abortions increased. After the three years of growth, the number of abortions in female foreigners in the CR was continually decreasing from 2009 to 2017 (from 3 020 in 2009 to 1 691 in 2017). Although in 2018 there was an increase compared to 2017, in 2019 there was a decrease in the number of abortions again (from 1 712 in 2018 to 1 699 in 2019). In 2020 and 2021, the number of abortions in female foreigners continued to decrease (1 612 abortions in 2020 and 1 609 in 2021). The evaluation of the data by Region is influenced by the biggest concentration of foreigners in the Hl. m. Praha Region and the Středočeský Region, in which there is the highest proportion of abortions within the whole CR.

## **Table 6-7 Newly notified TB cases in the CR by the patient's country of birth**

The table gives the number of new(ly) notified cases of tuberculosis (TB) in the CR broken down by the country of birth of patients (not necessarily foreigners).

In 2021, 357 TB cases were newly notified in the CR in total. Compared to the previous year, the number of notified cases decreased (by 11 cases less, compared to 2020). From a long-term point of view, the number of TB cases in the CR has been permanently decreasing. The number of TB cases among Czech citizens decreased, year-on-year (by 17 cases), whereas the number of TB cases among persons born outside the CR has slightly increased (by 6 cases). Out of the total number of recorded TB cases, the share of persons born outside the CR is 37.0%. The highest number of new(ly) notified TB cases in the CR in 2021 was among citizens of Ukraine (35 cases), Romania (17), Slovakia (15), Viet Nam (15), Mongolia (12), and India (10).

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Since 2018, Table 6-4 has been added again to Chapter 6 on health care for foreigners in the Czech Republic. It shows numbers of hospitalised foreigners in hospitals in the CR, the same as in the publication with data for the year 2015 (formerly Table 6-3). The data are provided for the health sector as a whole. Before 2003, data in tables were only published for the sector of the Ministry of Health.

From 2018, the Table 6-1 including a chart is being added in the beginning of the chapter; the chart shows utilisation of health care by foreigners in hospitals in the CR outside the public health insurance. It is followed by Tables 6-2a, 6-2b, 6-3a, and 6-3b, which have the same source. Due to an undetected error of several providers that provided (despite the methodology of the report) costs in CZK, while it had to be in thousands of CZK, overestimated results were presented in publications in 2016 and 2017. This publication already contains the series with corrected data for the years 2015

and 2016. In the “*Foreigners in the Czech Republic*” publication, an overview table has been published since 2011, which applies to utilisation of health care by foreigners by Region (Table 6 - 2b) and by total costs (Table 6-3b).