### 6. HEALTH CARE FOR FOREIGNERS

Data on foreigners shown in this chapter were obtained from national health registers (the National Register of Hospitalized Persons and the National Register of Reproduction Health), information system of bodies for public health protection (Register of Tuberculosis) and reports on the utilization of health care by foreigners. The reports are processed by the Institute of Health Information and Statistics of the CR (IHIS CR) in the framework of the National Health Information System (NHIS).

The health care data provide only non-exhaustive information on the utilization of health care by foreigners and their state of health in the CR.

Further information can be obtained on the IHIS CR's website: http://www.uzis.cz/en

The Centre for International Reimbursements (CIR) publishes data on utilization of health care by foreigners - nationals of the EU/EEA and Switzerland, and foreigners from countries with which it has signed an agreement on social security, including However, it should be stressed that the Centre for International Reimbursements uses a different definition than the Aliens Act. More information can be obtained at: www.cmu.cz/en

# Methodological notes on Tables

## Tables 6-1a (6-1b) and 6-2a (6-2b) Utilization of health care by foreigners

Data on the utilization of health care by foreigners are measured through annual report "V (MZ) 1-01". It is compiled only by hospitals and regards foreigners that 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, Ministry of the Interior, Ministry of Justice, regional authorities, and the like). The figures also include asylum seekers accommodated in asylum facilities of the Ministry of the Interior, whose health care is paid by the Ministry of the Interior.

Foreigners, whose health care is paid from the public health insurance, are not included in the report.

The publication "Foreigners in the Czech Republic" contains since 2011 a clearly arranged table, which applies to utilization of health care by foreigners by region broken down by persons utilising health care (Table 6-1b) or total costs (Table 6-2b).

In 2016 a total of 118 395 foreigners found a medical treatment in the hospitals of all the ministries in the Czech Republic, out of that a total of 64 091 persons originated from the EU member countries. The mentioned numbers continue to be higher than in the previous years. From the point of view of the regional distribution, the most of the foreigners, 54 612 were treated in hospitals in Hl. m. Praha Region. On the other places, taking into account the numbers of treated foreigners, there were Jihomoravský Region (14 005), Karlovarský Region (8 049), Plzeňský Region (7 030) and Středočeský Region (6 146).

In 2016, in the Czech Republic the health care was provided most often to citizens of Slovakia (28 332). Following there were nationals of the Ukraine (13 049), Russia (10 197), Germany (9 493) and Viet Nam (5 673).

Health care provided to foreigners in hospitals of the CR required costs in the total amount of CZK 2 242 903 thousand, out of this total 42.1% (CZK 945 509 thousand) made the costs for patients from EU member countries. The coasts of the health care provided were the highest for nationals of the Ukraine (CZK 512 418 thousand), then for nationals of Slovakia (CZK 456 237 thousand) and Russia (CZK 304 673 thousand). For health care provided to foreigners, as at 31 December 2016, the total of CZK 31 million (i.e. 1.4% of the total amount of costs for health care provided to foreigners in hospitals) remained unpaid after a maturity date, while CZK 16 million went to foreigners from EU member countries.

## Tables 6-3 and 6-4 Abortions in female foreigners

All types of abortions made in health establishments of the CR shall be reported on the form "Application for Induced Abortion - Report of Abortion and Ectopic Pregnancy". This report is also filled in for female foreigners with permanent or long-term residence in the CR. Female foreigners with temporary residence and female tourists are not monitored.

In 2016, 1 773 abortions in female foreigners were registered in the Czech Republic, which is again decrease in comparison to the previous year, i.e. by 7.7 p. p. 1 091 (61.5%) out of the total number were induced abortions while 16.5% of induced abortions were therapeutic abortions. Vacuum aspirations made up 69.9% of all induced abortions. Compared to the previous year, they again decreased in their number by 14.7 p. p. (894 in 2015 and 763 in 2016).

The total number of abortions in female foreigners had been decreasing gradually since 2002 (from 2 751 in 2002 to 2 238 in 2005). From 2006 to 2008, the number of abortions was increasing. Since 2009, after three years of growth, the number of abortions in female foreigners has been decreasing continuously. The evaluation of the data by region is influenced by the biggest concentration of foreigners in the HI. m. Praha Region and the Středočeský Region, in which there is the biggest proportion of abortions within the entire CR.

### Table 6-5 Newly notified TB cases in the CR by the patient's country of birth

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

There were 517 TB cases newly notified in 2016, i.e. the same number like in 2016. It means that a formerly rising trend in the number of newly notified TB cases was interrupted. While the number of TB cases in Czech nationals decreased year-on-year, the number of TB cases in foreigners increased by 41 cases and their share in the total number of TB cases increased from 21.3% to 29.2%.

The highest numbers of newly notified TB cases in the CR in 2016 went to the account of the nationals of the Ukraine (41 cases), Slovakia (21), Romania (21) and Viet Nam (21).

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Chapter 6 on the health care for foreigners in the Czech Republic has been published since 2010 with a more narrow scope than in the previous years. It applies to the omission of the formerly first Table, 6-1 Health insurance contracts of foreigners, and the scope of present Tables (6-1 and 6-2) Utilization of health care by foreigners. Another change in this year's publication concerns the omission of the table relating the foreigners treated in hospitals (former Table 6-3). Due to the changes in hospitals' information systems, the validation of the way in the reports on the care of the foreigners in hospitals is necessary at present.

The data are provided for health sector as a whole. Until and including 2002, only data for the Ministry of Health were provided in the tables.