

## 6. HEALTH CARE FOR FOREIGNERS

Data on foreigners provided in this chapter, which are in the framework of the National Health Information System (NHIS) processed by the Institute of Health Information and Statistics of the CR (IHIS CR), have been obtained from 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 from an Annual report on the utilization of health care by foreigners. The aforementioned selected data sources on the health sector provide only partial information on the total utilization of health care by foreigners in the CR and their state of health.

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

Health Insurance Bureau publishes data on utilization 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. However, it has to be stressed that the Health Insurance Bureau uses different definitions than the Act on the Residence of Aliens on the Territory of the Czech Republic. More information can be obtained at: <https://www.kancelarzp.cz/index.php/en> .

### Methodological notes on the Tables

**Table 6-1 Trends in utilization of health care by foreigners in the years 2010-2018 and Tables 6-2a (6-2b) and 6-3a (6-3b) Utilization of health care by foreigners**

Data on the utilization of health care by foreigners are measured by an annual report “V (MZ) 1-01”. It is filled in only by hospitals regardless the type of care they provide (both in-patient and out-patient care). It 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 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 (now Table 6-2b) or total costs (now Table 6-3b).

An overall development of the number of foreigners utilizing health care in hospitals out of public health insurance (see Table 6-1) increased from 2006 to 2016 by 71% from 69.2 thousand persons to 118.4 thousand persons; the increase stopped there. A more marked increase was among foreigners from the EU. Costs of health care for foreigners increased even more distinctively; it was two times higher from almost CZK half a billion to more than a billion. While average costs per foreigner from a third country were stagnating in that period on the level of up to 6.8 thousand, among foreigners from the EU they increased from a similar value up to CZK 10 thousand in 2018.

Due to an undisclosed mistake of several providers that were reporting costs in ones of CZK (instead of thousands of CZK, as it is right according to the methodology), results presented in publications from 2016 and 2017 were overvalued. This publication contains a development series with already corrected data for the years 2015 and 2016.

In 2018, 119 212 foreigners in total found a medical treatment in hospitals of all ministries in the Czech Republic, i.e. by 1 925 persons more compared to the previous year. Of the total number of treated foreigners, 59 770 persons (50.1%) were from Member States of the EU. From the point of view of distribution by Region, the highest number of foreigners was treated again in hospitals of the Hl. m. Praha Region, i.e. 49 499 persons. As for the number of treated foreigners,

other Regions ranked as follows: the Jihomoravský Region (15 692 persons), the Plzeňský Region (7 435), the Středočeský Region (6 904), and the Moravskoslezský Region (6 219). In 2018, the highest number of foreigners treated in the CR was among citizens of the Slovak Republic (26 300). They were followed by Ukrainians (18 819), Russians (8 574), Germans (8 545), and Vietnamese (5 096).

In 2018, health care provided to foreigners in hospitals of the CR required costs in the total amount of CZK 1 021.1 million, of which 60.8% (CZK 618.3 mil.) were costs for patients from Member States of the EU. The highest costs were for citizens of Slovakia (CZK 343.2 mil.) followed by citizens of the Ukraine (CZK 132.0 mil.), Germany (CZK 68.2 mil.), the Russian Federation (CZK 59.9 mil.), and the United Kingdom of Great Britain and Northern Ireland (CZK 45.8 mil.). As at 31 December 2018, for health care provided to foreigners, the total of CZK 49 million (i.e. 4.8% of the total amount of costs for health care provided to foreigners in hospitals) remained unpaid after the maturity date. For foreigners from Member States of the EU, CZK 21 million was unpaid in due time.

#### **Table 6-4 Foreigners treated in hospitals by cause of hospitalization in 2018**

Data in this Table come from the National Register of Hospitalised Patients; 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 foreigners.

In 2018, the number of hospitalized foreigners increased compared to the last published piece of data (from the year 2015) almost twice to 70.3 thousand cases. The reason is that the item of citizenship is now reported much better after errors have been disclosed on the side of the supplier of hospital information systems. Despite that, the numbers of reported foreigners in the "V (MZ) 1-01" report (questionnaire form) are incomparable to those from the National Register of Hospitalised Patients, although hospitals are the source in both the cases. It is because the questionnaire monitors both the outpatient and inpatient care; however, only that one, which is not paid from the public health insurance system. The National Register of Hospitalised Patients monitors care irrespective of the way it is paid for; however, only for hospitalised patients (inpatient care).

The most frequent reason for hospitalization of foreigners remains the same as in previous years: pregnancy, childbirth, and the puerperium (27% of hospitalizations as for females). It is followed (with 13% of hospitalizations) by related factors influencing health status and contact with health services (most often, accompaniment of a sick child as for females; it is followed by medical check-ups and examinations, which require hospitalization, and observations when there is some suspicion of certain diseases). The third most frequent reason (10% of hospitalizations) among foreigners are injuries, poisoning, and some other consequences of external causes, which as for males rank first with 15% of hospitalizations.

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

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

In 2018, 1 712 abortions in female foreigners with a permanent or a long-term residence on the territory of the CR were registered in the Czech Republic. It is an increase by 1.2 p. p. compared to 2017. Of that, 1 016 abortions (59.3%) were induced abortions, of which 19.0% were medically indicated. Vacuum aspirations (menstrual regulations) made 68.8% of all induced abortions; compared to the previous year, they increased by 0.7 p. p. (694 in 2017 and 699 in 2018).

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). In 2018, after nine years of decreases, the number increased compared to the previous year. 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 biggest proportion of abortions within the entire CR.

**Table 6-7 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).

In 2018, 444 TB cases were newly notified in the CR. Compared to 2017, the number of notified cases decreased (by 61 cases, year-on-year). 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 has markedly dropped, year-on-year (by 49 cases); however, among persons born outside the CR it decreased only slightly, by 12 cases. Out of the total number of recorded TB cases, the share of persons born outside the CR is 33.1%. The highest number of newly notified TB cases in the CR in 2018 was among citizens of the Ukraine (37 cases), Slovakia (24), Romania (16), Viet Nam (12), and Mongolia (9).

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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 hospitalized foreigners in hospitals in the CR, the same as in the publication with data for the year 2015 (formerly Table 6-3). A new Table 6-1 including a chart was added in the beginning; it shows utilization of health care by foreigners in hospitals in the CR outside the public health insurance. It is followed by Tables 6-2a (6-2b) and 6-3a (6-3b), which have the same source.

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.