

# **HEALTH SYSTEM IN CZECH REPUBLIC**

- Life expectancy at birth is increasing, having reached 73.82 years for men and 80.30 years for women in 2007, which is well above the average for the new EU Member States
- The rate of infant mortality in 2007 was among the lowest in the world. That same year, diseases of the circulatory system were the most frequent causes of death, followed by malignant neoplasms, external causes and respiratory disease

- The Czech Republic has a system of social health insurance (SHI) based on compulsory membership in a health insurance fund. The funds are quasi-public, self-governing bodies that act as payers and purchasers of care.
- The Ministry of Health's chief responsibilities include setting the health care policy agenda, supervising the health system and preparing health legislation. The Ministry also administers certain health care institutions and bodies, such as the public health network and the State Institute for Drug Control (SÚKL).
- The regional authorities and the health insurance funds play an important role in ensuring the accessibility of health care, the former by registering health care providers, the latter by contracting them. Eligible residents may freely choose their health insurance fund and health care providers. The health insurance funds must accept all applicants who have a legal basis for entitlement; risk selection is not permitted.
- SHI contributions are obligatory and based on wage or income; they are paid by employers, employees and self-employed individuals, among others. Patient empowerment has become increasingly important since 2005 and has been supported by a variety of initiatives

- Health expenditure from public sources as a share of total health expenditure is among the highest in the World Health Organization (WHO) European Region.
- Although health expenditure from private sources is low compared to other European countries, amounting to 14.2% of total health expenditure in 2007, it is likely to rise due to a trend towards greater cost sharing. Private sources of expenditure are mainly used to cover the costs of over-the-counter pharmaceuticals, some dental procedures, co-payments on medical aids and certain prescription pharmaceuticals, and user fees for doctor visits.
- General practitioners (GPs) in private practice are paid using a combination of capitation and a system of fee-for-service payments; the latter is applied primarily for preventive care. Non-hospital ambulatory care specialists are also paid using a capped fee-for-service scheme and a number of other health services.

- The Czech Republic has an extensive public health network responsible for a range of services, including epidemiological surveillance, immunization logistics, quality analyses for consumer and industrial products, and monitoring the impact of environmental factors on health status. Its main actors are the National Institute of Public Health, the Regional Public Health Authorities, and the Regional Institutes of Public Health. Regulatory authority for primary care, which includes GPs, paediatricians, gynaecologists, dentists and pharmacists, is divided among the State, the regions, and the health insurance funds.
- Approximately 95% of primary care services are provided by physicians working in private practice, usually as sole practitioners. Patients register with a primary care physician of their choice, but can switch to a new one every three months without restriction. Primary care physicians do not play a true gatekeeping role; patients are free to obtain care directly from a specialist and do so frequently. Secondary care services in the Czech Republic are offered mainly by private practice specialists, health centres, polyclinics, hospitals and specialized inpatient facilities. After a variety of reforms in the 1990s, hospitals that formerly belonged to the State are now owned and managed by a range of actors, including government ministries, regions, private entities and churches. Almost all pharmacies in the Czech Republic are run as private enterprises, and at the time of writing there is a trend towards the establishment of pharmacy chains, especially in urban areas.

# Useful information for you

- The main provider of public health insurance in the Czech Republic is Všeobecná zdravotní pojišťovna (VZP).
- Under Czech law, all citizens and residents must have some type of health insurance. Each doctor is contracted to one or a number of these health insurance providers.
- If you aren't a resident but are legally employed here, with a labor permit, your employer should organize your health insurance for you. Any employer who says otherwise doesn't know the law or is willfully deceiving you.

- People who are here for a short stay should organize short-term contractual health insurance, which can be signed up for by foreigners visiting the country for a period up to 365 days. It covers necessary and urgent treatment for accidents or illness.
- Long-term contractual health insurance is available for non-permanent residents, including students and the self-employed.

# Finding doctor

- One common complaint is that after doing the right thing and getting insurance, foreigners can't find a doctor who will accept their type of insurance.
- As we don't plan on being sick or picking up injuries, we don't think of these details when we, or loved ones, need medical attention.
- To prepare yourself if this problem arises, I would suggest going to your insurance company's website and looking for contracted doctors (*smluvní lékaři* in czech) in your area.



# Medical fees in CZ

- Hospitalization cost 60 CZK per day, providing you are admitted to a hospital bed.
- The emergency room costs 90 CZK per day.
- The upper limit for healthcare fees is 5,000 CZK, above which you won't be expected to pay.
- Remember these fee is for insured patients and that you pay them on top of your insurance.

- <http://www.nrc.cz/en/health-system-review-czech-republic>
- <http://prague.tv/en/s72/Directory/c202-Health-Wellness/n1423-healthcare-in-the-czech-republic>