| Country | Health care (III) | | |
|---|---|---|---|
| | *iii. Please inform on the categories of patients exempted from co-payments (for GP/specialist + hospital care)* | | |
| | *Situation 1/1/2008* | *Situation 1/7/2013* | *Regulatory changes* |
| AT | *1. Medical treatment:*<br>No charges for children, pensioners and the needy.<br><br>*2. Hospitalisation:*<br>The participation in case of hospitalisation is limited to a maximum of 28 days per calendar year. | *1. Medical treatment:*<br>No charges for children, pensioners and the needy.<br><br>*2. Hospitalisation:*<br>The participation in case of hospitalisation is limited to a maximum of 28 days per calendar year. | No regulatory changes over the 5-year period according to the MISSOC Tables. |
| BE | *1. Medical treatment:*<br>Preferential treatment for certain groups: the disabled, pensioners, widows/widowers, orphans (ex-VIPO), beneficiaries of the Guarantee of income for elder persons (garantie de revenus aux personnes âgées, GRAPA), claimants of integration income (revenu d'intégration), disabled children benefiting from family benefit supplements and persons benefiting from a handicap allowance, beneficiaries of a partial or total income from the Public Centre for Social Assistance (Centre public d'action sociale/Openbaar Centrum voor Maatschappelijk Welzijn), a worker in a situation of controlled unemployment, aged at least 50 and who is since at least 1 year completely unemployed with regard to the | *1. Medical treatment:*<br>Preferential treatment for certain groups: the disabled; pensioners; widows/widowers; orphans (ex-VIPO); beneficiaries of the Guarantee of income for elder persons (garantie de revenus aux personnes âgées/inkomensgarantie voor ouderen), of the guaranteed income for old people (revenu garanti aux personnes âgées/gewaarborgd inkomen voor bejaarden) or of a pension increase; recipients of the integration income (revenu d'intégration/leefloon); disabled children with a physical or mental incapacity of at least 66%; persons benefiting from a disabled persons' allowance; beneficiaries of a partial or total income from the Public Centre for Social Assistance (Centre public | No age condition for unemployed persons to |

| | | | |
|---|---|---|---|
| | unemployment regulation. They are granted if the family's annual gross taxable income is less than a maximum of € 13,782.42 + € 2,551.49 per dependant. OMNIO Status: extension of the preferential system to persons and households with low income who cannot benefit from the preferential system (BIM, formerly VIPO). Annual gross taxable income is less than a maximum of € 13,782.42 + € 2,551.49.<br><br>*2. Hospitalisation:*<br>Notably for dependent children, those benefiting from the preferential scheme and the assimilated unemployed: € 4.83 per day. Where hospitalised within a psychiatric home for more than 5 years: For those benefiting from a preferential scheme, for the assimilated unemployed with no dependent person or without the obligation of paying an alimony by legal decision or by notarised deed: € 13.59 per day. For normal beneficiaries, for those benefiting from the preferential scheme with dependants or obligation of paying an alimony by legal decision or by notarised deed and their dependants: € 4.83 per day. | d'action sociale/Openbaar Centrum voor Maatschappelijk Welzijn); workers who are wholly unemployed since at least one year; single-parent families; beneficiaries of the heating allowance; foreign unaccompanied minors, etc. They are granted if the family's annual gross taxable income is less than a maximum of €16,632.81 + €3,079.19 per dependant.<br><br>OMNIO Status: extension of the preferential system to persons and households with low income who cannot benefit from the preferential system (BIM). Annual gross taxable income is less than a maximum of €16,306.86 (claimant) + €3,018.84 (per additional household member) (application year 2013, income from fiscal year 2012).<br><br>*2. Hospitalisation:*<br>Notably for dependent children, those benefiting from the preferential scheme and the assimilated unemployed: €5.44 per day.<br><br>When hospitalised within a psychiatric home for more than 5 years:<br>For those benefiting from the preferential scheme, for the assimilated unemployed with no dependent person or without the obligation of paying an alimony by legal decision or by notarised deed: €15.31 per day.<br>For normal beneficiaries, for those benefiting from the preferential scheme with dependants or obligation of paying an alimony by legal decision or by notarised deed and their dependants: €5.44 per day. | be able to benefit from the preferential scheme. Extra categories benefiting from this scheme. At the same time, the income ceiling was increased by 20%. |
| BG | *1. Medical treatment:*<br>Exemption from payment of the fees is granted to any person suffering from a | *1. Medical treatment:*<br>Exemption from payment of the fees is granted to: | |

| | | | |
|---|---|---|---|
| | disease as designated in a list appended to the National Framework Agreement; any family member who has not attained the age of 14, or who has attained the age of 14 but has not attained the age of 18, or who is a dependant; any member of the armed forces performing compulsory military service; any person who has sustained an injury in the course of or in connection with national defence; any war veteran and war-disabled; any person remanded in custody or any person arrested or persons deprived of his or her liberty; any indigent receiving income support under the Social Assistance Act; any person without an income, who has been placed in a child-care home, in a preschool child-care home, or in a public-care institution; any medical specialist.<br><br>*2. Hospitalisation:*<br>Exemption from payment of the fees is granted to any person suffering from a disease as designated in a list appended to the National Framework Agreement; any family member who has not attained the age of 14, or who has attained the age of 14 but has not attained the age of 18, or who is a dependant; any member of the armed forces performing compulsory military service; any person who has sustained an injury in the course of or in connection with national defence; any war veteran and war-disabled; any person remanded in custody or any person arrested or persons deprived of his or her liberty; any indigent receiving income support under the Social Assistance Act; any person without an income, who has been placed in a child-care home, in a preschool child-care home, or in a public-care institution; any medical specialist. | • persons with diseases specified in the annex to the National Framework Contract;<br>• minors and unemployed family members;<br>• victims of, or connected with, the country's defence;<br>• war veterans and war invalids;<br>• detainees and prisoners;<br>• poor people receiving state aid;<br>• people without income, living in care homes;<br>• health professionals;<br>• pregnant and young mothers, up to 45 days after birth;<br>• insured persons with severe invalidity who in addition are suffering from specified diseases;<br>• patients with malignant neoplasm.<br><br>*2. Hospitalisation:*<br>Exemption from payment of the fees is granted to:<br><br>• persons with diseases specified in the annex to the National Framework Contract;<br>• minors and unemployed family members;<br>• victims of, or connected with, the country's defence;<br>• war veterans and war invalids;<br>• detainees and prisoners;<br>• poor people receiving state aid;<br>• people without income, living in care homes;<br>• health professionals;<br>• pregnant and young mothers, up to 45 days after birth;<br>• insured persons with severe invalidity who in addition are suffering from specified diseases;<br>• patients with malignant neoplasm. | New categories of persons exempted from patient's charges in case of both medical treatment and hospitalisation. |

| | | | |
|---|---|---|---|
| CH | *1. Medical treatment:*<br>Children do not pay the excess. Maximum amount of the share of costs for children: CHF 350 (€ 212). Several children from the same family insured by the same insurer pay together a maximum of CHF 1,000 (€ 605). No participation in the case of maternity benefits. No excess for certain prevention measures carried out under national or cantonal programmes (currently, cantonal mammography screening programmes and cantonal human papillomavirus vaccination programmes). In the case of insurance with a limited choice of service suppliers (HMO, for example), the insurer may give up charging wholly or partly the share of costs and the excess. The beneficiaries of supplementary benefits to old-age, survivors' and invalidity insurance (Ergänzungsleistungen zur Alters-, Hinterlassenen- und Invalidenversicherung, EL/prestations complémentaires à l'assurance-vieillesse, survivants et invalidité. PC) (non-contributory benefits subject to means testing) are reimbursed for the costs of participation referred to in the KVG/LAMal (up to a ceiling).<br><br>*2. Hospitalisation:*<br>For insured persons living in the same household as any other member of their family: no contribution to the costs of board and accommodation in the case of hospital stays. For the rest, see above "medical treatment". | *1. Medical treatment:*<br>• Children do not pay the excess.<br>• Maximum amount of the share of costs for children: CHF350 (€284).<br>• Several children from the same family insured by the same insurer pay together a maximum of CHF1,000 (€810).<br>• No participation in the case of maternity benefits.<br>• No excess for certain prevention measures carried out under national or cantonal programmes (especially cantonal programmes of breast cancer screening by mammography and cantonal human papillomavirus vaccination programmes).<br>• In the case of insurance with a limited choice of service suppliers (HMO, for example), the insurer may give up charging wholly or partly the share of costs and the excess.<br>• The beneficiaries of supplementary benefits to old-age, survivors' and invalidity insurance (Ergänzungsleistungen zur Alters-, Hinterlassenen- und Invalidenversicherung, EL/prestations complémentaires à l'assurance-vieillesse, survivants et invalidité. PC) (non-contributory benefits subject to means testing) are reimbursed for the costs of participation referred to in the KVG/LAMal (up to a ceiling).<br><br>*2. Hospitalisation:*<br>• For children (< 18 years) and young adults (< 25 years) in studies or apprenticeship: no contribution to the costs of board and accommodation in the case of hospital stays.<br>• For the rest, see above "medical treatment". | Introduction of an exemption of patient's charges in case of hospitalisation of minors or students below age 25. |

| | | | |
|---|---|---|---|
| CY | *1. Medical treatment:*<br>Recipients of Public Assistance (Δημόσιο Βοήθημα) benefit, invalidity pensioners and war pensioners and persons over 65; military personnel; medical personnel.<br><br>*2. Hospitalisation:*<br>Military and medical personnel are exempted from paying any fees. | *1. Medical treatment:*<br>Patients entitled to free of charge medical care (see "Field of application, 1. Beneficiaries" above) make no contribution toward fees but do have to pay € 2.00 per visit at outpatients departments.<br><br>Persons entitled to medical care at reduced fees pay € 6.50 and € 8.50 per visit to a general practitioner and specialist respectively plus 50% of prescribed fees for laboratory, x-ray and other examination.<br><br>Everybody else pays € 14.50 and € 20.50 per visit to a general practitioner and specialist respectively.<br><br>*2. Hospitalisation:*<br>Inpatient treatment is provided free of charge to families with low income, see "Field of application, 1. Beneficiaries" above.<br><br>Active and retired civil servants, members of the police, members of the educational service, dependants of these groups, the dependants of the armed forces personnel, families with at least three children (dependent or not) and certain other groups entitled with free of charge treatment pay € 6.83, € 10.25 and € 20.50 per inpatient day respectively for 3rd, 2nd and 1st class accommodation.<br><br>Inpatients entitled to medical care at reduced fees pay 50% of the normal charges.<br>Inpatients not entitled to any fee reduction pay € 71.76, € 102.52 and € 123.02 per inpatient day respectively for 3rd, 2nd and 1st class accommodation and € 205.03 for | System reform. |

| | | | |
|---|---|---|---|
| | | the intensive care unit. | |
| CZ | *1. Medical treatment:*<br>No exemptions from co-payments. Exemption from regulatory charges: some groups of patients e.g. persons with an infection disease, persons which are in material need. Regulatory charges are also not applicable in the case of preventive examination, dispensatory care, hemodialysis, laboratory or diagnostic examination and examination of a transfusional service doctor.<br><br>*2. Hospitalisation:*<br>Exemption from regulatory charges: some groups of patients, e.g. persons with an infection disease, persons which are in material need. | *1. Medical treatment:*<br>No exemptions from co-payments.<br><br>Exemption from regulatory charges: some groups of patients, e.g.<br>• persons placed in children's homes,<br>• persons placed in homes for disabled persons or for elderly persons if their minimum income remainder (as specified by another legal provision) is less than CZK800 (€31),<br>• persons ordered a protective treatment by the court,<br>• persons proved to be in material need,<br>• persons obliged to be treated for an infectious disease etc.<br>• Regulatory charges are also not applicable in case of preventive examination, dispensary care provided to selected patients and pregnant women, hemodialysis, laboratory or diagnostic examination, examination of a transfusional service doctor and for children up to age of 18.<br><br>*2. Hospitalisation:*<br>Exemption from regulatory charges:<br>• persons placed in children's homes,<br>• persons placed in homes for disabled persons or for elderly persons if their minimum income remainder (as specified by another legal provision) is less than CZK800 (€31),<br>• persons ordered a protective treatment by court,<br>• persons proved to be in material need,<br>• persons obliged to be treated for an infectious disease, | Income-related condition in case of disabled and elderly. |

| | | | |
|---|---|---|---|
| | | • institutional care of newborns in maternity hospitals. | |
| DE | *1. Medical treatment:*<br>No co-payment for children. Exemption of participation for expenses above 2% (1% in case of chronic diseases) of the gross income. Reduction of co-payment for early-detection measures and bonus models.<br><br>*2. Hospitalisation:*<br>No charge for children. | *1. Medical treatment:*<br>No co-payment for children. Exemption of participation for expenses above 2% (1% in case of chronic diseases) of the gross income. Reduction of co-payment for early-detection measures or a choice of rate concerning special health care systems.<br><br>*2. Hospitalisation:*<br>No charge for insured persons under the age of 18 (exception: travel costs) and patients who already exceeded the expenses limit of 1% or 2% of the gross income. | |
| DK | *1. Medical treatment:*<br>No exemptions or reductions.<br><br>*2. Hospitalisation:*<br>Non-approved private establishments: In the case where a public hospital refers a patient to a private establishment: no charge. | *1. Medical treatment:*<br>No exemptions or reductions.<br><br>*2. Hospitalisation:*<br>Non-approved private establishments: In the case where a public hospital refers a patient to a private establishment: no charge. | No regulatory changes over the 5-year period according to the MISSOC Tables. |
| EE | *1. Medical treatment:*<br>In case of a specialised doctor, the fee shall not be demanded from: children under 2 years of age; pregnant women from the 12th week of pregnancy; people who will receive stationary medical care after inevitable ambulant care. In case of a home visit of doctor (or specialised doctor), the fee shall not be demanded from: children under 2 years of age; pregnant women from the 12th week of pregnancy. | *1. Medical treatment:*<br>In case of a specialised doctor, the fee shall not be demanded from:<br>• children under 2 years of age;<br>• pregnant women from the moment pregnancy is medically determined;<br>• people who will receive stationary medical care after inevitable ambulant care.<br>• In case of a home visit of doctor (or specialised doctor), the fee shall not be demanded from: | No regulatory changes over the 5-year period according to the MISSOC Tables. |

| | | | |
|---|---|---|---|
| | *2. Hospitalisation:*<br><br>In-patient fee shall not be demanded for: Periods of intensive care; in-patient specialised medical care in connection with pregnancy or delivery; in-patient medical care to a minor. | •children under 2 years of age;<br>•pregnant women.<br><br>*2. Hospitalisation:*<br>In-patient fee shall not be demanded for:<br>•Periods of intensive care;<br>•in-patient specialised medical care in connection with pregnancy or delivery;<br>•in-patient medical care to a minor. | |
| EL | *1. Medical treatment:*<br>Not applicable: no charges.<br><br>*2. Hospitalisation:*<br>Not applicable: no charges. | *1. Medical treatment:*<br>No exemption or reduction of patient charges.<br><br>*2. Hospitalisation:*<br>No patient charges for heart surgery (for both adults and children). | Exemption (heart surgery) in connection with the introduction of patient charges (see Health care_II). |
| ES | *1. Medical treatment:*<br>Not applicable.<br><br>*2. Hospitalisation:*<br>Not applicable. | *1. Medical treatment:*<br>Not applicable.<br><br>*2. Hospitalisation:*<br>Not applicable: no patient charges. | No regulatory changes over the 5-year period according to the MISSOC Tables. |
| FI | *1. Medical treatment:*<br>Health centre: Patients under the age of 18 are exempt from fees. Public sector: An overall ceiling of € 590 per year for public sector fees (excluding e.g. fees for dental care). € 12 per day is charged for in-patient care in the hospitals after reaching the ceiling.<br><br>*2. Hospitalisation:*<br>Public hospital: Patient under the age of 18 may be charged only for the first seven | *1. Medical treatment:*<br>Health centre:<br>Patients under the age of 18 are exempt from fees.<br><br>Public sector:<br>An overall ceiling of €636 per year for public sector fees (excluding e.g. fees for dental care).<br><br>*2. Hospitalisation:*<br>Public hospital: | |

| | | | |
|---|---|---|---|
| | treatment days in a calendar year. The fee for in-patient care in psychiatric units is € 12. | An overall ceiling of €636 per year for public sector fees. €15.10 per day is charged for in-patient care in the hospitals after reaching the ceiling.<br><br>Patient under the age of 18 may be charged only for the first seven treatment days in a calendar year.<br><br>The fee for in-patient care in psychiatric units is €15.10. | |
| FR | *1. Medical treatment:*<br>General scheme for employees (Régime général d'assurance maladie des travailleurs salariés, RGAMTS): Costs completely covered at 100% of the responsibility rate, in particular: Beneficiaries of an invalidity pension (pension d'invalidité), beneficiaries of a work injury pension (rente d'accident de travail) at a rate > 66.66% together with their family members, persons suffering from certain diseases, for those diseases only, persons with resources under a certain ceiling. Exemption from the € 1 flat-rate co-payment for: Children under 18 years of age, persons with resources below a certain limit.<br><br>*2. Hospitalisation:*<br>General scheme for employees (Régime général d'assurance maladie des travailleurs salariés, RGAMTS): Suppression of participation from 31st day of hospitalisation and for certain severe surgery treatments. Holders of an invalidity pension (pension d'invalidité) or a work injury pension (rente d'accident de travail) at a rate > 66.66% are covered 100% together with their family members. Persons with resources under a certain ceiling. Persons | *1. Medical treatment:*<br>General scheme for employees (Régime général d'assurance maladie des travailleurs salariés, RGAMTS):<br><br>Costs completely covered at 100% of the responsibility rate, in particular:<br><br>• Beneficiaries of an invalidity pension (pension d'invalidité),<br>• beneficiaries of a work injury pension (rente accident du travail) at a rate > 66.66% together with their family members,<br>• persons suffering from certain diseases, for those diseases only,<br>• persons with resources under a certain ceiling.<br><br>Exemption from the €1 flat-rate co-payment for:<br><br>• Children under 18 years of age,<br>• persons with resources below a certain limit.<br><br>*2. Hospitalisation:*<br>General scheme for employees (Régime général d'assurance maladie des | No regulatory changes over the 5-year period according to the MISSOC Tables. |

| | | | |
|---|---|---|---|
| | suffering from certain diseases (only for those diseases). In case of a 100% financing, the person concerned must pay the daily lump-sum (with certain exception). | travailleurs salariés, RGAMTS):<br><br>No participation from 31st day of hospitalisation and for certain severe surgery treatments.<br><br>Holders of an invalidity pension (pension d'invalidité) or a work injury pension (rente accident du travail) at a rate > 66.66% are covered 100% together with their family members.<br><br>Persons with resources under a certain ceiling.<br><br>Persons suffering from certain diseases (only for those diseases).<br><br>In case of a 100% financing, the person concerned must pay the daily lump-sum and the flat-rate co-payment (subject to exceptions). | |
| HR | | *1. Medical treatment:*<br>Patient under the age of 18 are exempt from fees. The same applies for regular students, persons suffering from certain listed diseases (for those diseases only), persons with a disability needing constant assistance and organ donors.<br><br>*2. Hospitalisation:*<br>Patient under the age of 18 are exempt from fees. The same applies for regular students, persons suffering from certain listed diseases (for those diseases only), persons with a disability needing constant assistance and organ donors. | |
| | | | |

| | | | |
|---|---|---|---|
| HU | *Medical treatment and hospitalization:*<br>Exemptions from visit/daily fees: material scope of application: emergency care, long-term medical treatments, epidemic care, catastrophic health care, public health screening, pre-natal care, childbearing, puerperal care; personal scope of application: minors, homeless, prisoners, employees of certain official bodies, full-time students, those insured who gave blood at least 30 times. Those who have paid the daily-fee 20 times in the given year, for more outpatient treatment in the same day by the same provider, for the provisions not reimbursed from the National Health Insurance Fund. The socially disadvantaged receive visit/daily fee subsidy. | *Medical treatment and Hospitalisation:*<br>No exemption or reduction of patient charges. | Abolishment of (reductions of/exemptions from) the visit fee and hospital daily fee (see also Health care_I and _2). |
| IE | *1. Medical treatment:*<br>Persons with full eligibility are not required to participate.<br><br>*2. Hospitalisation:*<br>Exemptions from both sets of charges mentioned above include: women receiving services in respect of motherhood; children up to the age of six weeks; children suffering from prescribed diseases and disabilities, (the exemption applies only to treatment for the prescribed condition); children referred for treatment from child health clinics and school health examinations; persons receiving services in respect of prescribed infectious diseases; medical card holders and their dependants; long stay patients who are already being charged under other specific regulations; persons deemed to be eligible by the Health Service Executive (HSE) where undue hardship would be caused. | *1. Medical treatment:*<br>Persons with full eligibility are not required to participate.<br><br>*2. Hospitalisation:*<br>Exemptions from both sets of charges mentioned above include:<br>• women receiving services in respect of motherhood;<br>• children up to the age of six weeks;<br>• children suffering from prescribed diseases and disabilities, (the exemption applies only to treatment for the prescribed condition);<br>• children referred for treatment from child health clinics and school health examinations;<br>• persons receiving services in respect of prescribed infectious diseases;<br>• medical card holders and their dependants;<br>• long stay patients who are already being | No regulatory changes over the 5-year period according to the MISSOC Tables. |

| | | | |
|---|---|---|---|
| | | charged under other specific regulations;<br>• persons deemed to be eligible by the Health Service Executive (HSE) where undue hardship would be caused. | |
| IS | *1. Medical treatment:*<br>Pensioners pay between ISK 500 (€ 5.44) and ISK 1,100 (€ 12) per visit to a health care centre or a general practitioner. There is no charge for children under the age of 18.<br><br>Pensioners pay ISK 1,100 (€ 12) + 13.33% of the remaining costs per visit to a specialist but max. ISK 21,000 (€ 228) per visit and children under the age of 18 pay 1/9 of ISK 3,100 (€ 34) + 40%, which is the general charge, but at least ISK 550 (€ 5.98).<br>There is a ceiling of maximum yearly payment for all insured persons: For a single person ISK 21,000 (€ 228), for children of the same family ISK 7,000 (€ 76), for a pensioner ISK 5,200 (€ 57). After this ceiling is reached, a person is entitled to a discount card to use for the remainder of the year.<br><br>*2. Hospitalisation:*<br>Not applicable: no charges. | *1. Medical treatment:*<br>Health care centres and general practitioners:<br>Pensioners aged 67 to 69 pay between ISK800 (€4.95) and ISK2,080 (€13) per visit. Other pensioners pay between ISK500 (€3.09) and ISK1,300 (€8.05) per visit. There is no charge for children under the age of 18.<br><br>Specialists:<br>Pensioners aged 67 to 69 pay ISK3,500 (€22) + 13.33% of the remaining costs, but max. ISK24,900 (€154), per visit to a specialist working under a contract with the Icelandic Health Insurance (Sjúkratryggingar Íslands). Other pensioners pay ISK1,600 (€9.91) + 13.33% of the remaining costs, but max. ISK7,800 (€48), per visit to a specialist working under a contract with the Icelandic Health Insurance. Children under the age of 18 pay 1/9 of ISK4,500 (€28) + 40%, which is the general charge, but at least ISK720 (€4.46). If the specialist is not working under a contract with the Icelandic Health Insurance, the insured person pays in full but he/she can receive the same amount as would have been paid by the Icelandic Health Insurance as a refund.<br><br>Maximum yearly payment for all insured persons:<br>For a single person ISK31,100 (€193), for children of the same family ISK9,400 (€58), | Introduction of an age-related condition for pensioners who pay patients' charges in case of medical treatment. |

| | | | |
|---|---|---|---|
| | | for a pensioner ISK7,800 (€48), except for pensioners aged between 67-69 for whom the maximum yearly payment is ISK24,900 (€154).<br>After this ceiling is reached, a person is entitled to a discount card to use for the remainder of the year.<br><br>*2. Hospitalisation:*<br>Not applicable: no patient charges. | |
| IT | *1. Medical treatment:*<br>Tests, visits to a specialist and medication of group B are free of charge for: civil disabled (more than 2/3 of invalidity); service disabled (categories 1 to 5); war disabled (cat. 1 to 8); children up to 6 years; and persons aged over 65 if they come from a family whose income is below € 36,152; recipients of minimum pensions (pensione minima) aged over 60 and unemployed persons with an annual family income of less than € 8,263: this limit amounts to € 11,362 for a couple and is increased by € 516 for each dependent child; recipients of social pensions (assegno sociale) and their dependent family; blind and deaf mute. Are partly free of charge for: those suffering from a chronic illness and inducing a disability; civil disabled less than2/3; service disabled (categories 6 to 8); in the case of pregnancy and maternity.<br><br>*2. Hospitalisation:*<br>Not applicable: no charges. | *1. Medical treatment:*<br>Tests, visits to a consultant and medication of group B are free of charge, based on the household income and disability, for:<br>•civil disabled (more than 2/3 of invalidity);<br>•service disabled (categories 1 to 5);<br>•war disabled (cat. 1 to 8);<br>•children up to 6 years;<br>•and persons aged over 65 if they come from a family whose income is below €36,152;<br>•recipients of minimum pensions (pensione minima) aged over 65 and unemployed persons with an annual family income of less than €8,263: this limit amounts to €11,362 for a couple and is increased by €516 for each dependent child;<br>•recipients of social pensions (assegno sociale) and their dependent family;<br>•blind and deaf mute.<br><br>Are partly free of charge for:<br>•those suffering from a chronic illness and inducing a disability;<br>•civil disabled less than2/3;<br>•service disabled (categories 6 to 8);<br>•in the case of pregnancy and maternity. | No regulatory changes over the 5-year period according to the MISSOC Tables. |

| | | | |
|---|---|---|---|
| | | *2. Hospitalisation:*<br>Not applicable: no charges. | |
| LI | *1. Medical treatment:*<br>Half contributions for: insured persons who have reached regular retirement age. No contributions for: children under the age of 20. No contribution for chronically ill persons. No contribution for certain services.<br><br>*2. Hospitalisation:*<br>Half contributions for: insured persons who have reached regular retirement age. No contributions for children under the age of 20. No contribution for chronically ill persons. No contribution for certain services. | *1. Medical treatment:*<br>• Half contributions for: insured persons who have reached regular retirement age.<br>• No contributions for: children under the age of 20.<br>• No contributions for benefits relating to maternity and preventive medical check-up.<br>• No contribution for chronically ill persons according to the list of indications.<br><br>*2. Hospitalisation:*<br>• Half contributions for: insured persons who have reached regular retirement age.<br>• No contributions for children under the age of 20.<br>• No contributions for benefits relating to maternity and preventive medical check-up.<br>• No contribution for chronically ill persons. | |
| LT | *1. Medical treatment:*<br>No exemptions or reductions.<br><br>*2. Hospitalisation:*<br>Not applicable: no charges. | *1. Medical treatment:*<br>No exemptions or reductions.<br><br>*2. Hospitalisation:*<br>No exemptions or reductions. | No regulatory changes over the 5-year period according to the MISSOC Tables. |
| LU | *1. Medical treatment:*<br>In a whole year, participation cannot exceed 2.5% of the yearly contribution income.<br><br>*2. Hospitalisation:*<br>Not applicable: no exemption nor reduction of user charges. | *1. Medical treatment:*<br>In a whole year, participation cannot exceed 2.5% of the yearly income subject to contributions.<br><br>*2. Hospitalisation:*<br>Not applicable: no exemption nor reduction | No regulatory changes over the 5-year period according to the MISSOC Tables. |

| | | | |
|---|---|---|---|
| | | of user charges. | |
| LV | *1. Medical treatment:*<br>No contributions required from: Persons who receive preventive health services, children under 18 years, pregnant women and women in the period following childbirth up to 42 days for health care services related to the medical supervision of the pregnancy and during the period following childbirth, as well as to the course of pregnancy, victims of Chernobyl, those persecuted for their political beliefs, poor persons, suffers of TB, AIDS, syphilis and other infectious diseases (only for the treatment required for these diseases), those with mental disorders (only for psychiatric treatment), those who receive chronic haemodialysis, haemodiafiltration, and peritoneal dialysis, those who require emergency treatment, residents of state and municipality social care centres, all persons for whom vaccination or passive immuno-therapy (within the framework of the State immunisation programme) as well as vaccination against influenza is performed.<br><br>*2. Hospitalisation:*<br>No contributions required from those listed above. | *1. Medical treatment:*<br>No contributions required from:<br>• Persons who have annually visit for preventive health check;<br>• children under 18 years,<br>• pregnant women and women in the period following childbirth up to 42 days for health care services related to the medical supervision of the pregnancy and during the period following childbirth, as well as to the course of pregnancy,<br>• victims of Chernobyl,<br>• those persecuted for their political beliefs,<br>• those who suffer from TB, AIDS, syphilis and other infectious diseases (only for the treatment required for these diseases),<br>• those with mental disorders (only for psychiatric treatment),<br>• those who receive chronic haemodialysis, haemodiafiltration, and peritoneal dialysis,<br>• those who require emergency treatment,<br>• residents of State and municipality social care centres,<br>• all persons for whom vaccination or passive immuno-therapy (within the framework of the State immunisation programme) as well as vaccination against influenza is performed,<br>• organ donors,<br>• persons receiving permanent artificial lung ventilation in home settings,<br>• persons who receive palliative care and health care at home,<br>• persons being tested within the framework of the national screening programs,<br>• disabled persons (only category I disability), | Extension of the category of persons benefiting from exemptions from participation. Among the newly exempted categories: needy persons and residents of State and municipality social care centres. |

| | | | |
|---|---|---|---|
| | | • needy persons,<br>• those working in Emergency Medical Service.<br><br>*2. Hospitalisation:*<br>No contributions required from those listed above. | |
| MT | *1. Medical treatment:*<br>Not applicable: no charges.<br><br>*2. Hospitalisation:*<br>Not applicable: no charges. | *1. Medical treatment:*<br>Not applicable: no patient charges.<br><br>*2. Hospitalisation:*<br>Not applicable: no patient charges. | No regulatory changes over the 5-year period according to the MISSOC Tables. |
| NL | *1. Medical treatment:*<br>Compensation for chronically ill patients.<br><br>*2. Hospitalisation:*<br>Compensation for chronically ill patients. | *1. Medical treatment:*<br>Chronically ill patients may receive compensation (Compensatie eigen risico, CER) of the yearly compulsory deductible paid.<br><br>*2. Hospitalisation:*<br>Chronically ill patients may receive compensation (Compensatie eigen risico, CER) of the yearly compulsory deductible paid. | |
| NO | *1. Medical treatment:*<br>Charges for children under 16 are added to those of a parent to meet the ceiling. Children under 12 are exempt from charges. Special exemptions from cost-sharing charges apply to a limited number of diseases and groups of patients. No charges in the case of occupational injury or disease. | *1. Medical treatment:*<br>• Children under 16 are exempt from charges.<br>• Special exemptions from cost-sharing charges apply to a limited number of diseases and groups of patients.<br>• No charges in the case of occupational injury or disease.<br><br>*2. Hospitalisation:* | No regulatory changes over the 5-year period according to the MISSOC Tables. |

| | | | |
|---|---|---|---|
| | *2. Hospitalisation:*<br>Outpatients: Charges for children under 16 are added to those of a parent to meet the ceiling. Children under 12 are exempt from charges. Special exemptions from cost-sharing charges apply to a limited number of diseases and groups of patients. No charges in the case of occupational injury or disease. | Outpatients:<br>• Children under 16 are exempt from charges.<br>• Special exemptions from cost-sharing charges apply to a limited number of diseases and groups of patients.<br>• No charges in the case of occupational injury or disease. | |
| PL | *1. Medical treatment:*<br>No exemptions or reductions.<br><br>*2. Hospitalisation:*<br>Not applicable: no charges. | *1. Medical treatment:*<br>Not applicable: no patient charges.<br><br>*2. Hospitalisation:*<br>Not applicable: no patient charges. | No regulatory changes over the 5-year period according to the MISSOC Tables. |
| PT | *1. Medical treatment:*<br>Exemption for some specific groups, e.g. pregnant women, children under 12 years, pensioners with income below the national minimum wage, persons responsible for certain disabled young people, the socially and economically disadvantaged.<br><br>*2. Hospitalisation:*<br>Not applicable: no charges. | *1. Medical treatment:*<br>Exemption for some specific groups, e.g.: pregnant women; children under the age of 12; persons in situation of need, whose income does not exceed 1.5 times the indexing reference of social support IAS (indexante dos apoios sociais = €419.22); and unemployed persons registered with the job centre whose unemployment benefit does not exceed 1.5 times the IAS.<br><br>*2. Hospitalisation:*<br>Not applicable: no exemption or reduction of patient charges. | Income-related condition (linked to the IAS) for persons in situation of need and unemployed persons. |
| RO | *1. Medical treatment:*<br>Not applicable.<br><br>*2. Hospitalisation:*<br>Not applicable. | *1. Medical treatment:*<br>Not applicable: no patient charges.<br><br>*2. Hospitalisation:*<br>Not applicable: no patient charges. | No regulatory changes over the 5-year period according to the MISSOC Tables. |

| | | | |
|---|---|---|---|
| SE | *1. Medical treatment:*<br>Most county councils do not charge any fees for children. Limitations for high costs. When a person within a 12 months period has costs for public health and medical care the limit is a maximum of SEK 900 (€ 95). For pharmaceutical products, see below.<br><br>*2. Hospitalisation:*<br>Patient's charge may be reduced according to income-test. | *1. Medical treatment:*<br>Most county councils do not charge any fees for children/youth.<br><br>Limitations for high costs. When a person within a 12-month period has costs for public health and medical care the limit is a maximum of SEK1,100 (€126). For pharmaceutical products, see "4. Pharmaceutical products".<br><br>Certain county councils (landsting) or regions (regioner) apply lower rates to some groups, e.g. people over 65 years old.<br><br>*2. Hospitalisation:*<br>Patient's charge may be reduced according to an income test or if the patient is over 64 years old. The charge may also be reduced if the patient receives certain types of benefits.<br>In general, patients under 18, 19 or 20 years of age pay no charge. | New categories of beneficiaries of reduced fees in case of hospitalization: young people and people >64 years old. |
| SI | *1. Medical treatment:*<br>No patient contribution for: Preventive examinations, treatment and rehabilitation of children, students and minors with development deficiencies; treatment of war invalids and civilian invalids of war; urgent treatment of seriously physically or mentally disabled persons, persons over 75 years of age, recipients of social assistance etc; health care of women, including family planning advice, contraception, pregnancy and childbirth; prevention, detection and treatment of communicable diseases | *1. Medical treatment:*<br>No patient contribution for:<br>• Preventive examinations, treatment and rehabilitation of children, students and minors with development deficiencies;<br>• treatment of war invalids and civilian invalids of war;<br>• urgent treatment of seriously physically or mentally disabled persons, persons over 75 years of age, recipients of social assistance etc;<br>• health care of women, including family planning advice, contraception, pregnancy | No regulatory changes over the 5-year period according to the MISSOC Tables. |

| | | | |
|---|---|---|---|
| | (including AIDS); treatment and rehabilitation of occupational diseases and employment injuries and some other diseases (malignant illnesses, epilepsy, cerebral paralysis, multiple sclerosis); emergency medical treatment (including emergency transportation); nursing care visits, home treatment and nursing in social care institutes.<br><br>*2. Hospitalisation:*<br>Persons with at least 70% physical disability, disabled entitled to Assistance and Attendance Allowance (dodatek za pomoč in postrežbo), recipients of Social Assistance. | and childbirth;<br>• prevention, detection and treatment of communicable diseases (including AIDS);<br>• treatment and rehabilitation of occupational diseases and accidents at work and some other diseases (malignant illnesses, epilepsy, cerebral paralysis, multiple sclerosis);<br>• emergency medical treatment (including emergency transportation);<br>• nursing care visits, home treatment and nursing in social care institutes.<br><br>*2. Hospitalisation:*<br>Persons with at least 70% physical disability, disabled entitled to Assistance and Attendance Allowance (dodatek za pomoč in postrežbo), recipients of Social Assistance. | |
| SK | *1. Medical treatment:*<br>No co-payment for transport for disabled patients, for patients in dialysis programme, in carcinology or cardio-surgery cure.<br><br>*2. Hospitalisation:*<br>Not applicable: no participation. | *1. Medical treatment:*<br>No co-payment for transport for disabled patients, for patients in dialysis programme, in carcinology or cardio-surgery cure.<br><br>*2. Hospitalisation:*<br>Not applicable: no patient participation. | No regulatory changes over the 5-year period according to the MISSOC Tables. |
| UK | *1. Medical treatment:*<br>Not applicable: no participation.<br><br>*2. Hospitalisation:*<br>Not applicable: no charges. | *1. Medical treatment:*<br>Not applicable: no patient charges.<br><br>*2. Hospitalisation:*<br>Not applicable: no patient charges. | No regulatory changes over the 5-year period according to the MISSOC Tables. |