

# Czechia: Strengthening intensive care capacity for COVID-19 patients, and the consequences of the pandemic for healthcare

ESPN Flash Report 2020/49

IVAN MALÝ – EUROPEAN SOCIAL POLICY NETWORK

AUGUST 2020

*Apart from various social distancing measures, travel restrictions and widespread testing, the Czech government also adopted effective measures to maximise intensive care capacity for COVID-19 patients. This has helped to prevent overloading of inpatient care units and a collapse of the medical system. However, the volume of other medical services provided fell significantly, causing problems both to patients and to providers of medical services. The Ministry of Health has responded to this situation and stabilised the healthcare system.*

#### LEGAL NOTICE

*This document has been prepared for the European Commission. However, it reflects the views only of the authors, and the Commission cannot be held responsible for any use which may be made of the information contained therein.*



## Description

In Czechia, the first three COVID-19 cases were recorded on 1 March. The steep increase in new cases peaked at the end of March (373 new cases were registered on 27 March) and then started to gradually decrease before increasing again in July with a peak on 24 July: 281 new cases (see Komenda et al. 2020). As of 3 August, the total number of COVID-19 cases was over 17,000 (for a total population of 10.7 million inhabitants); 386 patients had died.

The Czech government's response has been designed from the beginning in close collaboration with epidemiological experts and has included measures fairly similar to those applied in other EU countries. The focus was on social distancing measures, protection of the most vulnerable population groups, reduction of the risk of importing the virus from abroad, and testing. The main goal was to flatten the incidence curve as much as possible in order to prevent a collapse of the healthcare system, mainly in relation to facilities providing intensive care. This risk is not negligible – there are currently about 4,500 intensive care beds for adult patients in Czechia. The number of lung ventilators for adults is about 2,080 units, of which a significant proportion are being used by patients with other diseases; only some, therefore, can be allocated to COVID-19 patients. Such capacity would most likely be insufficient in case of a second wave of the pandemic.

To achieve the above-stated goal, the Ministry of Health adopted a series of measures.

Starting from 17 March, acute inpatient healthcare providers were forced to reduce planned medical services to those “essential” for the health of their patients. Two days later (19 March), the ministry ordered healthcare providers to reserve a certain number of beds (preferably beds equipped with artificial pulmonary ventilation or oxygen therapy) for COVID-19 patients. Admission of new patients for follow-up inpatient rehabilitation care was prohibited on 23 March. An extraordinary measure issued by the Ministry of Health on 8 April required all providers to report the available intensive care bed capacity. In order to coordinate and monitor the allocation of intensive care bed capacity for the hospitalisation of COVID-19 patients in each region, the ministry established a number of regional intensive care coordinators. These coordinators monitor the dedicated intensive care bed capacity and the number of free intensive care beds within their region.

The Ministry of Health expected that the cost of all the healthcare services, in all segments, suspended or delayed due to the pandemic would be approximately 30.8 billion CZK (€1.2 billion) in 2020. In inpatient care, the volume of services fell to 30-50% of the previous year's figures between March and May.

Starting from May, it returned to the pre-COVID level as most restrictions were lifted. The ministry decided to issue a new reimbursement decree (No. 305/2020 Coll.; MH 2020a) to help healthcare providers and to prevent a financial collapse of the healthcare system. This decree covers the deficit that occurred due to a decline in demand, the government measures, and also as a consequence of the precautionary reduction of services decided by the providers themselves to protect their personnel. It also compensates providers for the higher costs associated with care for COVID-19 patients, and envisages an increase in expenditure under the public healthcare insurance scheme of almost 5 billion CZK (€200 million) compared to the originally planned expenditure for 2020.

In order to address the consequences of COVID-19, the government has also radically increased the contributions of persons covered by the state insurance regime, from CZK 1,067 (€42.7) per person per month to CZK 1,567 (€62.7). This represents a 47% increase and is designed to generate an additional 20 billion CZK (€8 billion) in revenue by the end of 2020. A further increase of 200 CZK (€8) per person per month is scheduled from 1 January 2021. This should generate additional revenue of about 50 billion CZK (€2 billion) in 2021 (MH, 2020b).



## Outlook and commentary

The ministry's measures effectively helped to prevent the overloading of inpatient care. The number of hospitalised COVID-19 patients exceeded 400 only in the first half

of April (with a peak of 437 patients on 9 April). The number of patients in a serious condition exceeded the level of 100 only twice. Currently, there are 103 hospitalised patients, of which 19 patients require highly intensive care (Komenda et al. 2020).

The compensation decree has drawn criticism in two respects. According to the Association of Czech and Moravian hospitals, the volume of services will fall even below the level that the ministry has required for full reimbursement (79-85% of the originally planned level of services in 2020). The second argument reflects a legal point: according to a reputable lawyer (Ondřej Dostál), as the restrictions it has imposed have caused economic losses, the government should compensate providers from its own resources; not from the health insurance fund (Bumba and Erhart, 2020). Despite these criticisms, the compensation decree has the potential to ease, to some extent, the financial difficulties faced by healthcare providers and to stabilise the healthcare system.

The temporary decline in accessibility of healthcare resulting from the aforementioned reduction of services between March and May 2020 will likely negatively affect the health status of many people. According to a survey conducted by the Alliance for Individualised Support (2020), at least 40,000 people with disabilities and chronically ill patients found that their treatment conditions were significantly more difficult, and their health status worsened, as a consequence of the decline.

## Further reading

Aliance pro individualizovanou podporu/Alliance for Individualised Support (2020), "Pandemie ukázala slabinu zdravotního a sociálního systému: Lidé zasažených opatřeními je čtyřikrát víc než lidí s COVID-19" [The pandemic highlights the weakness of the healthcare and social system: there are four times as many people affected by the measures than those with COVID-19]. Press release. Available at: <https://bit.ly/3eVYhGI>

Bumba J. and Erhart, M. (2020), "Kompenzace nemocnicím favorizuje predatory, říká expert..." [According to the expert, hospitals' compensation favours predators...]. iROZHLAS.cz, 22 June 2020, Available at: <https://plus.rozhlas.cz/kompenzace-nemocnicim-favorizuje-predatory-rika-expert-za-mene-prace-stejna-8233071>

Komenda M., Karolyi M., Bulhart V., Žofka J., Brauner T., Hak J., Jarkovský J., Mužík J., Blaha M., Kubát J., Klimeš D., Langhammer P., Daňková Š., Májek O., Bartůňková M. and Dušek L. (2020), "COVID 19: Přehled aktuální situace v ČR." [Up-to-date reporting on the COVID-19 epidemic in the Czech Republic]. Available at: <https://onemocneni-aktualne.mzcr.cz/covid-19>

MH, Ministry of Health (2020a), Vyhláška č. 305/2020 Sb. [Decree No. 305/2020 Coll.]. Available at: <https://www.zakonyprolidi.cz/cs/2020-305>

MH, Ministry of Health (2020b), Senát schválil zvýšení plateb za státní pojištění [The Senate has approved an increase in contributions paid for state-insured persons]. Press release, 29.4.2020. Available at: <https://www.mzcr.cz/tiskove-centrum-mz/senat-schvalil-zvyseni-plateb-za-statni-pojistene/>

## Authors

[Ivan Malý](#) (Masaryk University)

*The Flash Reports are produced by the European Social Policy Network (ESPN) established in 2014 to provide the European Commission with independent information, analysis and expertise on social policies in 35 European countries. The topics covered are identified by ESPN experts in the light of significant developments in their countries, or in some cases suggested by the Commission or the Flash Reports' editorial team (Eric Marlier and Slavina Spasova). The ESPN is managed by LISER (Luxembourg Institute of Socio-Economic Research), APPLICA and the OSE (European Social Observatory). More information on the ESPN: <http://ec.europa.eu/social/main.jsp?catId=1135&langId=en>.*

Quoting this report: Malý, M. (2020). *Czechia: Strengthening intensive care capacity for COVID-19 patients, and the consequences of the pandemic for healthcare*, ESPN Flash Report 2020/49, European Social Policy Network (ESPN), Brussels: European Commission.