

ระบบการรักษาพยาบาลผู้ป่วยชาวฮังการี — โอกาสในการขยายตลาดโรงพยาบาลของไทย

1. Hungarian healthcare system – health insurance

Given the fact that there is no uniform funding system in Europe, the Hungarian system can only be compared with the funding practices of individual Member States. The Hungarian methods are closest to the German, French, and Belgian techniques. In these countries, about two thirds of social protection expenditures are covered by contributions, payable in 50-60% by the employer. The same applies to the Hungarian system, where general social security is based on contribution payment, but employers pay a much higher ratio than others. In Hungary, some 6-7% of the GDP goes to health care, lower than the average of the OECD

Hungary has a tax-funded universal healthcare system, organized by the state-owned **National Health Insurance Fund** (Hungarian: *Országos Egészségbiztosítási Pénztár (OEP)*). Health insurance is absolutely free for children, mothers or fathers with baby, students, pensioners, people with socially poor background and handicapped people (including physical and mental disorders).

Total health expenditure was 1,511 US\$ per capita in 2010, 1,053 US\$ governmental-fund (69.7%) and 458 US\$ private-fund (30.3%)

Despite recent improvements, life expectancy in Hungary is still among the lowest in Europe; Roma people have a life expectancy up to ten years lower than for ethnic Hungarians.

Year	Life expectancy (years, Man/Woman)	Infant mortality rate (‰)
1960	65.9 / 70.1	47.6
1970	66.3 / 72.1	35.9
1980	65.5 / 72.7	23.2
1990	65.1 / 73.7	14.8
2001	68.2 / 76.5	8.1
2011	71.0 / 78.8	4.9

Source: Central Statistic Office

In Hungary the whole system of health care is undergoing a change at present. Social security is based on the system of national insurance. Everybody who is working either for an employer or as self-employed has to pay a certain percentage of their income as contribution to the national insurance fund. The fund also receives considerable contributions paid by employers and from general taxation. The contributions from the basis of both the health service funds and taste pension funds.

The funds are used to provide **free medical treatment** for patients and several kinds of state benefits **including unemployment, invalidity, sickness and childcare benefits as well as family allowances**, and to provide other social services to people who need them.

The system of retirement pensions has been widened recently. People will have to choose between state and several kinds of non-state pension funds to pay their contributions to and they can also take life-insurance policies, which will provide them with additional pensions. There are several alternatives and the decision is hard to make.

People **receive free medical treatment under the National Health Service** within the network of family doctors. Every person who makes his/her national insurance contributions receives a social **security card** which proves that he/she is entitled to receive free medical services both in hospital and outside. People are not obligated to use the service, they may also go to doctors **as private patients** if they can afford it, and pay huge sums of money for the service. However, most people choose a general practitioner in the area where they live and become registered on his/her list. Each GP receives a fixed payment from the health service funds for each patient on his/her list. Surgeries are open 4 hours a day treating patients who are mobile, and those who are laid up with an illness are visited at home. If a person isn't able to work because of sickness, the GP puts him/her on the sick list and the patient will receive sickness benefit from the insurance fund at a given rate.

If a patient needs specialist treatment or is to be operated on in hospital, the family doctor will send him/her to an outpatients' clinic for special examinations (e.g. blood test, X-ray etc.) or to hospital.

2. / Health Insurance for Hungarian citizens being abroad

With some countries Hungary has an agreement and so when you **Hungarian citizens are abroad as a tourist** they don't have to pay for health care or if they have to, the insurance company will pay it back to them. **But they should to take out policy before their journey.**

As of 1st November 2005, Hungarian residents travelling within the European Economic Area (European Union, Norway, Iceland and Liechtenstein) and – from 1st April 2006 – in Switzerland, whether for private or professional reasons, are being issued with a **European Health Insurance Card**, which simplifies the procedure for receiving any medical assistance that might become necessary during a temporary stay in another country.

Any person, who is resident in Hungary and is entitled to health care services of the Hungarian mandatory health insurance scheme, as well as those who are insured in Hungary and reside in an other Member State of the European Economic Area, can apply for a European Health Insurance Card. By submitting this card, the entitled person can receive benefits, which are medically necessary during temporary stay in the other country. Hungarian insured persons can also use the card in countries outside the European Economic Area, in countries with which Hungary has concluded arrangements on the acceptance of the European Health Insurance Card (e.g. Croatia, Bulgaria etc.). Of course, in these countries the Card entitles only to the immediately necessary treatments provided for in the respective interstate agreements.

The **European Health Insurance Card** is issued for Hungarian insured persons generally **for one year term**. However, persons younger than 18 and pensioners can benefit from a longer validity period (maximum 3 years). The card is an official certificate giving right to the **defined health care services abroad within its validity period**. The health care provider in another Member State or Contracting State has to accept the card until its expiry without further entitlement check. So, the health care provider has to trust in the valid entitlement of the cardholder and the issuing institution has the responsibility to provide reimbursement for the health care services rendered on grounds of a European Health Insurance Card. An eventually lacking entitlement can not be an obstacle of reimbursement. **European Health Insurance Card (EHIC) does not cover going abroad for medical treatment. The EHIC is for emergency treatment that becomes necessary while the traveller is abroad.**

3./ Medical treatment abroad financed by the state-owned National Health Insurance Fund

According to the regulations of Government Decree 227/2003 Hungarian citizens may apply for state subsidy for medical treatment abroad to the National Health Insurance Fund (NHIF).

The applicant should attach the following documents to the application:

- proposal of National Institute for Quality- and Organizational Development in Healthcare and Medicines (GYEMSZI)
- recipient declaration of the foreign hospital
- calculation of the costs of the treatment the National Health Insurance Fund. may approve the financial

The recipient declaration should involve the following information:

- a name and address of the recipient hospital
- a name of the patient
- date of the beginning and the duration of the treatment
- costs of the treatment
- mode of payment .

Taking consideration to the limited available financial sources of the National Health Insurance Fund applicants are advised to choose European hospital as **overseas treatment** are supported by NHIF very rarely only in unique and well justified case.

The medical treatment abroad is justified provided

- the illness of the patient can be successful treated abroad
- the domestic hospitals are unable to guarantee the conditions of the successful treatment as well as the domestic treatment can not be solved by invitation of foreign expert

The National Health Insurance Fund will declare its decision within 30 days from the day of the lodging of the application.

4. Medical treatment abroad financed by private insurance companies

According our survey the Hungarian health insurance companies which are mainly subsidiaries of large multinational insurance companies like ING, Generali, Allianz, ABN Amro or subsidiaries of leading Hungarian commercial banks like OTP, MKB refuse to issue any health policy for medical treatment outside Hungary.

There are two companies, the MetLife Biztosító Zrt./Metlife Insurance Co.Ltd. and Paszkai and Partners Insurance Brokerage firm, which are local representatives of internationally well-known health insurance companies.

- **Metlife Insurance Co.Ltd** is the subsidiary of **Metropolitan Life Insurance Company, which** is global leader in health insurance industry and serves 90 million customers in over 50 countries.

Hungarian citizens between 18 and 64 years can conclude health insurance contract with Metlife Insurance Co.Ltd. for treatment of the following 32 critical illnesses **with worldwide coverage:**

1. Stroke Motor
2. Neurone Disease
3. Major Cancers
4. Parkinson's Disease
5. First Heart Attack
6. Benign Brain Tumor
7. Serious Coronary Heart Disease
8. Major Head Trauma
9. Heart Valve Replacement
10. Bacterial Meningitis

11. Fulminant Viral Hepatitis
12. Blindness
13. End Stage Liver Failure
14. Coma
15. Pulmonary Arterial Hypertension
16. Major Burns
17. End-stage Lung Disease
18. Multiple Sclerosis
19. Kidney Failure
20. Paralysis
21. Major Organ / Bone Marrow Transplant
22. Poliomyelitis
23. Aplastic Anemia
24. Encephalitis
25. Loss Of Hearing
26. Appalic Syndrome
27. Loss Of Speech
28. HIV due to Blood Transfusion and / occupationally acquired HIV
29. Muscular Dystrophy
30. Progressive Scleroderma
31. Alzheimer's Disease/ Irreversible
32. Systematic Lupus Erthematosus with Lupus

The validity periods of the insurance policy of the 32 critical illnesses can be 1 year; 5 years and 10 years.

Payment: Minimum Euro 5,000 Euro ; maximum Euro 200,000

Contact:

Metlife Biztosító Zrt.

www.metlife.hu

E-mail: info@metlife.hu

- **Paszкаи and Partners Insurance Brokerage**

Pászka és Partnerei Kft. is an insurance broker company servicing both national and international clients.

The complete services offered for companies and individuals, cover all types of insurances as the company operates in every field, in order to be able to optimize each insurance premium and the conditions for its clients.

Paszкаи and Partners Insurance Brokerage (www.paszka.hu/eng.htm) stated that they are local representative of International Medical Group Europe (<http://www.imglobal.com/about-img/about-international-medical-group-europe.aspx>)

Paszкаи brokerage offers for Hungarian clients insurance policies for medical treatment exclusively in Europe, but they are open for negotiations with Thai insurance companies for widening their assortments.

Contact:

Address:

1123 Budapest, Jagelló út. 1-3.

Novotel Congress Budapest

Tel/Fax:

365 - 1970, 365 - 1971,

365 - 1972, 365 - 1973

E-mail:paszka@axelero.hu**5. Conclusion:**

Hungary's healthcare system is financed through the **National Health Insurance Fund**, which is primarily responsible for recurrent health care costs. As regards the medical treatments abroad the present financial policy of the National Health Insurance Fund practically **excludes the possibility of the overseas medical treatment** for Hungarian citizens.

Hungarian citizens having the state - support for their medical treatment basically can visit only the EU countries. As a matter of fact the number of Hungarian citizens who could enjoy this kind state support has drastically decreased in the recent years.

On the other the worsening situation in the Hungarian health care system will create a challenging business opportunities for private insurance companies to offer medical treatment abroad at relatively competitive prices. But we have to admit, that for the time being the market potential is rather small in Hungary. This is the main reason why most of the private health insurance companies exclude from their offer medical treatment opportunities outside Europe.

The modernization process of health systems in Europe seems to be a very hard task for every government. The reform of the Hungarian health care system has been started in 2011, but due to lack of financial resources the reform seems to be not a successful story. If the global or the local health insurance companies will positively consider the competitive offer of their Thai counter-partners, there is a chance to call the attention to the attractive services of Thai hospitals in CE.