

UNDERSTANDING MIGRATION HEALTH RIGHTS IN ROMANIA

KEYPOINTS

- Universal coverage: All citizens and legal residents have access to health services.
- These services are delivered through a combination of public and private healthcare providers.
- The system offers primary, secondary, and tertiary care.
- The National Health Insurance Fund (CNAS) is responsible for collecting contributions and reimbursing healthcare providers.
- Pharmaceuticals: Some medications may be partially or fully subsidised by the state.
- Family doctors: They represent the first contact for a patient in the health system in Romania.

WHO BENEFITS OF HEALTH INSURANCE?

- Every foreigner with a form of protection has free health insurance* if he/she:
 - is under 18 years old
 - is between 18–26 years old and is a pupil or a student.
 - has a disability and a certificate.
 - is pregnant, and does not have a stable income greater than or equal to the minimum wage in the economy
 - spouse has health insurance, and she/he has no income (is co-insured)



- **For legally employed foreigners**, the employer has the obligation to pay their medical insurance; their health rights are similar to Romanian citizens' rights.
 - **Asylum seekers** can access medical assistance ensured by the medical staff from accommodation centers of IGI (General Inspectorate for Migration).
 - In the case of acute or chronic diseases that put their lives in imminent danger, they benefit from emergency hospital assistance.
 - **Foreigners with a right to residence** in Romania have the right to medical assistance under the same conditions established by law for Romanians.
- * If you are not included in one of the mentioned categories, you must pay for health insurance*

RIGHTS OF A FOREIGNER

Foreigners who have free health insurance have the following rights :

- To access medical services, hygiene materials and medications provided by the Romanian Social Health Insurance system.
- The right to free basic healthcare, emergency care, and treatment for serious and chronic, life-threatening illnesses, prophylactic medical services, including diagnostic and therapeutic procedures through the national emergency medical system and skilled pre-hospital care.
- The right to choose his/her own family doctor.
- The right to decide, after being registered for at least six months, to switch to a different family doctor.

Other specific conditions:

- Ukrainians present in Romania without temporary protection for a period of 90 days are entitled to receive cost-free medical assistance.
- Ukrainian citizens seeking asylum in Romania can receive essential medical services free of charge: primary care, emergency hospital care, and required medical treatments.
- For those with legal residence rights who do not benefit from international protection, access to health care is based on contribution.

WHAT IS A FAMILY DOCTOR?



In the Romanian system, all people with health insurance must register on the list of a family doctor. Family doctors are general practitioners. You can choose your own family doctor (see the list on the other side). You can change the family doctor after 6 months, without being obliged to give an explanation.

The role of the family doctor is to have a general overview of people's health situation. When a person needs medical assistance, he/she is expected to go first to his family doctor (except for emergency, when you go to emergency rooms in hospitals). If the doctor, as a general practitioner, considers you need a specialised examination, he will give you a referral letter ("bilet de trimitere" in Romanian) to a specialist doctor. Based on this referral letter, you will not pay the examination by the specialist, because he is reimbursed by the CNAS.

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<https://tdh.ro/ro/promise-protectia-minorilor-straini-neinsotiti>

You can go to a specialist recommended by the family doctor, or you can choose anyone who has a contract with the CNAS (see the list on the other side).

Some doctors are working in public institutions, others in private networks. Check how many days the referral letter is valid (usually 30 days).

If you consider you have to wait too long to find an available place to the specialist doctors (it might happen that people paying directly to be preferred to those people whose consultations are reimbursed through CNAS), you can choose to pay your consultation by yourself.

Still, consider that having a referral letter to the specialist opens his possibility to recommend you also other subsidised procedures:

- subsidised medicines,
- blood analysis,
- echography,
- or other medical procedures.

In case you paid your visit, this option is not available anymore.

Family doctors can also issue health certificates and other relevant documents if needed. They can provide referral notes for some analysis, but not at the same level as specialised doctors.

They also provide subsidised prescriptions for chronic disease, based on the information letter sent by the specialists.

The people who don't have family doctors can only receive free minimum medical assistance in an urgent case. To access a family doctor, a person has to first make a national health insurance, as explained in the previous part.

IMPORTANT SOURCES OF INFORMATION

To find family doctors or other medical services that are contracted, you can visit this website:



Then you choose the county you need the information for (for example: Timis County, or Bucharest County). With a click, and it sends you to the county's page.

Then, you select the type of service required (for example: "medicina de familie" = family doctors) and you have the most updated list of available doctors.

