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Problems with the treatment of uninsured and homeless people

Problemy związane z leczeniem osób nieubezpieczonych i bezdomnych

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homelessness, insurance, claims, hospitals

Słowa kluczowe

bezdomność, ubezpieczenie, roszczenia, szpitale

Summary

Introduction. Uninsured patients treated in hospitals generate costs, which are huge burden for these institutions in majority of instances. The National Health Fund or the Ministry of Health will not pay hospitals for benefits provided to uninsured or unidentified patients and the obligation to verify patient insurance has been placed on medical facilities. This raises many problems, as the procedures implemented in such a situation do not always produce the expected results.

Aim. The aim of the study is to present the influence of uninsured patients treatment on the financial situation of hospitals.

Material and methods. Statistical data from several institutions of Lublin voivodeship are presented in this article.

Results. The problem in particular affects Hospital Rescue Centers, which are handling emergency situations most often and don't have an option to refuse healthcare. Railway Hospital in Lublin, 2010. Spent nearly 1 million PLN per year. The situation improved when in 2011 Hospital Emergency Department contract was not signed. In case of cancellation, the hospital itself would have to cover the costs of medical treatment and hospitalization. Such actions may be regarded as a violation of public finance discipline, which may result in the directing entity being held liable.

Conclusions. 1. The costs of unpaid patient liabilities for health care services may be a determining factor in significant debt at the facility. 2. The problem in particular affects Hospital Rescue Centers, which are handling emergency situations most often and don't have an option to refuse healthcare. 3. Hospitals have the option of collecting claims from patients and as a last resort search for sources of financing in local government and public institutions.

Streszczenie

Wstęp. Leczenie pacjentów bez ubezpieczenia zdrowotnego jest bardzo kosztowne. Narodowy Fundusz Zdrowia i Ministerstwo Zdrowia nie płać szpitalom za świadczenia realizowane wobec nieubezpieczonych lub niezidentyfikowanych pacjentów, a obowiązek zweryfikowania ubezpieczenia pacjenta spoczywa na placówkach medycznych. Powoduje to wiele problemów, ponieważ wprowadzone procedury w takiej sytuacji nie zawsze pociągają oczekiwane rezultaty.

Cel pracy. Celem pracy jest przedstawienie wpływu leczenia pacjentów nieubezpieczonych na sytuację finansową szpitali.

Materiał i metody. W artykule przedstawiono dane statystyczne kilku szpitali województwa lubelskiego.

Wyniki. Problem dotyczy zwłaszcza Szpitalnych Oddziałów Ratunkowych, które często zajmują się przypadkami nagłymi i nie mają możliwości odmowy świadczenia opieki zdrowotnej. Szpital Kolejowy w Lublinie do 2010 r. ponosił koszty leczenia osób nieubezpieczonych – blisko 1 mln zł rocznie. Sytuacja poprawiła się, gdy kontrakt na SOR w 2011 roku nie został podpisany. W przypadku rezygnacji z dochodzenia roszczeń od osób nieubezpieczonych sam szpital musiałby pokryć koszty leczenia i hospitalizacji. Działania takie można uznać za naruszenie dyscypliny finansów publicznych, co może pociągnąć za sobą odpowiedzialność osób kierujących zakładem opieki.

Wnioski. 1. Koszty niezapłaconych świadczeń z tytułu opieki zdrowotnej mogą stanowić czynnik decydujący o znacznym zadłużeniu szpitali. 2. Problem dotyczy zwłaszcza Szpitalnych Oddziałów Ratunkowych, które często zajmują się sytuacjami awaryjnymi i nie mają możliwości odmowy wykonania świadczeń zdrowotnych. 3. Szpitale mają możliwość dochodzenia roszczeń od pacjentów lub w ostateczności poszukiwania źródeł finansowania w samorządach terytorialnym i instytucjach publicznych.

Conflict of interest

Konflikt interesów

None

Brak konfliktu interesów

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INTRODUCTION

Treatment of patients who do not have health insurance is very expensive. The National Health Fund or the Ministry of Health will not pay hospitals for benefits provided to uninsured or unidentified patients and the obligation to verify patient insurance has been placed on medical facilities. This raises many problems, as the procedures implemented in such a situation do not always produce the expected results. There are various reasons for the lack of insurance: employers not reporting employees to the insurer, parents not reporting their children, homelessness, poverty, and alcoholism. A separate group are people coming for treatment from abroad. While for this group the situation is straightforward, because they are patients who themselves pay for their treatment, for other groups it is not always possible to obtain insurance and in extreme situations the case goes to court. There are opportunities to obtain the right to use publicly-funded health care services for uninsured individuals, but this is subject to income eligibility rules. Persons who have no income are a serious problem. The hospital can go to court, because in such a case the patient or patient's family owes money to the hospital. Statistical data from several institutions of Lublin voivodeship as well as the methods of recovering the treatment costs are presented in this article. Unfortunately, the recovery of charges is in many cases impossible.

AIM

The aim of the study is to present the influence of uninsured patients treatment on the financial situation of hospitals.

MATERIAL AND METHODS

Statistical data from several institutions of Lublin voivodeship are presented in this article.

RESULTS

According to article 15 of the Act on medical activities, the medical practitioner is obliged to provide medical assistance in an emergency (1).

Providing services, also those which save lives, is connected with incurring significant costs that may not always be covered under the contract with the National Health Fund.

Patients not paying for treatment: homeless, unemployed, foreigners, patients giving false information.

Homeless and unemployed

According to article 54 of the Act on publicly-funded health care services, the commune head, the president or the mayor, may decide to grant health insurance to an uninsured person for up to 90 days.

Criteria that need to be met:

- income per person in a family of not more than 458 PLN gross, and per single person – 552 PLN gross,
- Polish citizenship (1).

The group of poor people who do not meet the above-mentioned criteria, i.e. when the income per person in the family slightly exceeds the eligibility value, therefore preventing the benefit payment from being granted, constitutes a serious problem. The homeless people usually know their rights and how to get insurance. On the other hand, the unemployed often do not report to the Employment Agencies because of mere negligence.

There is another group, comprising the people injured in different accidents who are transported to the hospital. They do not have documents confirming their identity and after the medical treatment, they depart from the hospital. Unfortunately, the treatment cost remains unpaid in such a situation.

Foreigners

In our region a large group of people are looking for work in Poland. The most common are the citizens of Bulgaria and Romania. Although both countries are members of the European Union, these individuals rarely have proof of health insurance. Another group are patients from Ukraine coming to Poland for treatment.

Statistics

Medical University of Białystok Clinical Hospital, 2011. Uninsured patients owed 930 thousand PLN for treatment. The highest bill for treatment – 24 thousand PLN issued by the Clinic of Rheumatology and Internal Diseases (2, 3).

Railway Hospital in Lublin, 2010. Spent nearly 1 million PLN per year. The situation improved when in 2011 Hospital Emergency Department contract was not signed (2, 3).

Voivodeship Specialist Hospital in Biała Podlaska, 2011. The invoices issued for treatment of uninsured patients amounted to 233 thousand PLN (2, 3).

The amount of uninsured persons that has been treated in Department of Neurosurgery and Neurosurgery of Children in Lublin from 2012 to 2016 is presented in table 1. The biggest group constitute uninsured people with right to services. The table 2 contain a summary of uninsured people treated in Independent Public Clinical Hospital No. 4 in Lublin from January to June 2017. The majority of such people are treated in hospital emergency department.

Treatment of patients who do not have health insurance is very expensive. The National Health Fund or the Ministry of Health will not pay hospitals for benefits provided to uninsured or unidentified patients and the obligation to verify patient insurance has been placed on medical facilities. This raises many problems, as the procedures implemented in such a situation do not always produce the expected results. There are various reasons for the lack of insurance: employers not reporting employees to the insurer, parents not reporting their children, homelessness, poverty, and alcoholism.

Tab. 1. Homeless and uninsured patients discharged from the Department of Neurosurgery and Paediatric Neurosurgery in Lublin, 2012-2016

Patient category	Number of hospitalizations					Together years 2012-2016
	2012	2013	2014	2015	2016	
Homeless	3	0	0	1	1	5
Uninsured with right to services	8	11	13	10	7	49
Correctional facility	3	0	0	1	2	6
Self paid	5	6	9	3	5	28
MSW	1	0	1	0	1	3
Total	20	17	23	15	16	91

MSW – Ministry of the Interior

Tab. 2. Independent Public Clinical Hospital No. 4 in Lublin – uninsured patients I-VI 2017

	I	II	III	IV	V	VI	Total
Uninsured Hospital Emergency Department	52	40	50	43	42	53	280
Uninsured hospitalized	13	6	11	4	5	9	48
						Sum	328
Paid services	13	14	15	12	24	24	102

A separate group are people coming for treatment from abroad. While for this group the situation is straightforward, because they are patients who themselves pay for their treatment, for other groups it is not always possible to obtain insurance and in extreme situations the case goes to court. There are opportunities to obtain the right to use publicly-funded health care services for uninsured individuals, but this is subject to income eligibility rules. Persons who have no income are a serious problem. The hospital can go to court, because in

such a case the patient or patient's family owes money to the hospital.

Who ensures that money for the treatment of the uninsured are received by hospitals?

These are community nurses and social workers! They organize health insurance for patients.

They are looking for places in ZOL or a Hospice.

They provide homeless people with clothing and place them in shelters.

They help in ordering nursing and business services in social welfare centers.

They also help in preparing and sending applications for disability levels to the committee.

Death of an uninsured patient.

Firstly, the death of the healthcare recipient does not prevent the appropriate authority to pursue confirmation of the right to provide health care services. The service provider applies for such a decision immediately after providing the service.

Can a hospital cancel debt? No! In case of cancellation, the hospital itself would have to cover the costs of medical treatment and hospitalization. Such actions may be regarded as a violation of public finance discipline, which may result in the directing entity being held liable (3).

CONCLUSIONS

1. The costs of unpaid patient liabilities for health care services may be a determining factor in significant debt at the facility.
2. The problem in particular affects Hospital Rescue Centers, which are handling emergency situations most often and don't have an option to refuse healthcare.
3. Hospitals have the option of collecting claims from patients and as a last resort search for sources of financing in local government and public institutions.

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