

Abstract

Payment of health services otherwise not covered by health insurance

The rigorous work focuses on the institution of extraordinary reimbursement for health services not typically covered by health insurance, as outlined in § 16 of the Public Health Insurance Act. This study not only situates this institution within the broader public health insurance system but also provides a detailed analysis of the substantive and procedural conditions for reimbursing such health services. Additionally, it examines relevant jurisprudence and the historical evolution leading to the current legal framework.

The first chapter introduces the public health insurance system in the Czech Republic, outlining its foundational principles and legal framework. It also addresses the scope of the insured's right to reimbursement for health services under public health insurance, and discusses issues related to such reimbursements, thereby situating the institution of extraordinary reimbursement within the broader domestic health care reimbursement system.

The second chapter provides a detailed analysis of the substantive legal conditions for reimbursing health services that are otherwise not covered by health insurance. It examines the concept of non-reimbursed health services, the necessity of these services based on the insured's health status, and the criterion of exceptionality as interpreted by health insurance companies and administrative courts. This chapter also explores related issues such as setting reimbursements for treatments of rare diseases, cross-border reimbursement, and the amounts for otherwise unreimbursed health services. The chapter concludes with an evaluation of current regulations and suggestions for future legal reforms.

The third chapter addresses procedural issues related to decisions on extraordinary payments from public health insurance. It analyzes the current legal situation, including its historical development, from the perspectives of decision-making by health insurance companies and judicial protection against such decisions. It highlights problematic areas such as delayed justice and procedural issues related to legal succession. The chapter concludes with an evaluation of current adjustments and suggestions for future legal reforms regarding the decision-making process.

The fourth chapter discusses the impact of policyholders' decisions to pay for otherwise uncovered health services from their own resources on the decision-making of health insurance companies. It includes a review of recent jurisprudence that allows for the reimbursement of such costs when incurred after a valid negative decision by the health insurance company.

The result of this work is a comprehensive analysis of the institute of reimbursement for health services not typically covered by health insurance, emphasizing the decision-making practices of the courts and addressing various problematic aspects related to this institute. The thesis also includes suggestions for legislative changes in this area. It is anticipated that some of the conclusions presented may be refined or revised through future judicial activities or informed discussions among professionals involved in the provision and reimbursement of health services in the Czech Republic.

Keywords

public health insurance, health services otherwise not covered by health insurance, extraordinary payment of medicinal products