



Access to health care and treatment for adult undocumented migrants according to applicable national legislation

Colour code

NO ACCESS
ACCESS FULL PAYMENT
ACCESS CO-PAID
ACCESS FREE OF CHARGE
NO LEGAL PROVISION

	ACCESS TO HEALTH CARE					ACCESS TO TREATMENT		
	Primary	Secondary (outpatient)	Hospitalisation (inpatient)	Emergency	Ante-post natal	Medicines	HIV	Other infectious diseases
BELGIUM	If entitled and obtain the <i>AMU</i> (thus i) spot investigation of address and lack of resources; and ii) "urgent" character)	If entitled and obtain the <i>AMU</i> (thus i) spot investigation of address and lack of resources; and ii) "urgent" character)	If entitled and obtain the <i>AMU</i> (thus i) spot investigation of address and lack of resources; and ii) "urgent" character)		If entitled and obtain the <i>AMU</i> (thus i) spot investigation of address and lack of resources; and ii) "urgent" character)	If entitled and obtain the <i>AMU</i> (thus i) spot investigation of address and lack of resources; and ii) "urgent" character)	If entitled and obtain the <i>AMU</i> (thus i) spot investigation of address and lack of resources; and ii) "urgent" character)	If entitled and obtain the <i>AMU</i> (thus i) spot investigation of address and lack of resources; and ii) "urgent" character)
CYPRUS ²				If hospitalisation is not needed ³ .				
CZECH R.						⁵	⁶	
FRANCE	If entitled and obtain the <i>AME</i> (thus i) proved residence of more than three months; and ii) proved lack of enough resources)	If entitled and obtain the <i>AME</i> (thus i) proved residence of more than three months; and ii) proved lack of enough resources)	If entitled and obtain the <i>AME</i> (thus i) proved residence of more than three months; and ii) proved lack of enough resources)		If entitled and obtain the <i>AME</i> (thus i) proved residence of more than three months; and ii) proved lack of enough resources) ⁷	If entitled and obtain the <i>AME</i> (thus i) proved residence of more than three months; and ii) proved lack of enough resources)	If entitled and obtain the <i>AME</i> (thus i) proved residence of more than three months; and ii) proved lack of enough resources) ⁸	If entitled and obtain the <i>AME</i> (thus i) proved residence of more than three months; and ii) proved lack of enough resources) ⁹
GERMANY	No access due to the existence of the duty to denounce undocumented migrants that completely override entitlements			¹⁰	No access due to the existence of the duty to denounce undocumented migrants that completely override entitlements			
GREECE	The law prohibits (at the risk of penalty) public entities, centres or hospitals, to provide these services to undocumented migrants.				The law prohibits (at the risk of penalty) public entities, centres or hospitals, to provide these services to undocumented migrants.			
ITALY ¹¹	However, they are not allowed to have a family doctor					¹²		
MALTA	No legal provisions, only a non legally-binding policy document applying to undocumented migrants and asylum seekers in detention centres ¹³							

1. The term "urgent" is interpreted very widely as to cover most of curative and preventive health care.
2. There are not specific laws regarding access to health care for undocumented migrants but only some general provisions and a Circular from the Ministry of Health stating that "the Regulations should be implemented so as to allow access to emergency care free of charge for any person as far as they do not need hospitalisation".
3. There are only ministerial circulars referring to this.
4. They however cannot be denied this care if they cannot pay.
5. Ibid.
6. Ibid.
7. Nonetheless, undocumented migrants who do not comply with these conditions can have free-of-charge access through the "*Permanences d'accès aux soins de santé*" (*PASS*) and in which are in place only in some hospitals or through emergency department.
8. Ibid.
9. Ibid.
10. In September 2009, the new implementing regulation (formally adopted by the German Parliament) has excluded the social welfare centres (competent on health administration issues) from the duty to denounce in cases where they are asked for reimbursement by health care providers in emergency situations.
11. The system is organized through an anonymous code flexibly provided to undocumented migrants ("*STP code*"). Note also that the copayment ("*ticket*") by undocumented migrants is very symbolic in Italy and sometimes they are exempted.
12. Access free of charge or co-paid depending on the category of medicines.
13. According to this policy document, undocumented migrants are entitled to "free state medical care and services".

	ACCESS TO HEALTH CARE					ACCESS TO TREATMENT		
	Primary	Secondary (outpatient)	Hospitalisation (inpatient)	Emergency	Ante-post natal	Medicines	HIV	Other infectious diseases
NETHERLANDS	If "medically necessary" and proved lack of resources to pay	If "medically necessary" and proved lack of resources to pay	If "medically necessary" and proved lack of resources to pay	If "medically necessary" and proved lack of resources to pay	If "medically necessary" (always considered in practice) and proved lack of resources to pay	If "medically necessary" and proved lack of resources to pay	If "medically necessary" (always considered in practice) and proved lack of resources to pay	If "medically necessary" (always considered in practice) and proved lack of resources to pay
POLAND				Only care provided by rescue teams outside hospitals ¹⁴ .			¹⁵	If included in list of diseases that require mandatory treatment.
PORTUGAL ¹⁶	If proved residence for more than 90 days and proved lack of resources	If proved residence for more than 90 days and proved lack of resources	If proved residence for more than 90 days and proved lack of resources	If proved residence for more than 90 days and proved lack of resources		If proved residence for more than 90 days and proved lack of resources ¹⁷		
ROMANIA								If potential epidemic disease.
SLOVENIA								If needed to prevent the spread of an infection that could lead to a septic state.
SPAIN ¹⁸	If obtain «em-padronamiento» and thus the «health card».	If obtain «em-padronamiento» and thus the «health card».	If obtain «em-padronamiento» and thus the «health card».			If obtain «em-padronamiento» and thus the «health card».	If obtain «em-padronamiento» and thus the «health card».	If obtain «em-padronamiento» and thus the «health card».
SWEDEN			¹⁹				²⁰	
UK	If included in a NHS list by a general practitioner				²¹	If included in a NHS list by a general practitioner		If it is one of the 35 specified diseases and if included in a NHS list by a general practitioner ²²

14. Health care providers are obliged to provide care in cases of immediate danger to life or health but undocumented migrants bear the cost of the services received in the emergency units of hospitals. 15. They however have free access to postexposure anti-viral treatment. 16. Note also that the copayment (moderating fee) to be done by asylum seekers and nationals is very symbolic in Portugal. Undocumented migrants are usually exempted if they get the certificate of precarious economic situation. 17. Access free of charge or co-paid depending on the category of medicine. 18. This information refers to the situation in the majority of Spanish regions. There are however some of them which have eliminated all administrative conditions to obtain the health card. 19. However, access cannot be denied because the law obliges to provide emergency care. 20. The general legislation on contagious diseases seems to be applied to everyone through the specialised clinics for sexually transmitted diseases. 21. They can however access some pregnancy care provided by midwives in the community. Even if delivery care is chargeable, it is always accessible. 22. Some treatment is however provided through designated sexual health clinics upon no conditions.