

Government approves extension of measures on social health insurance system by year-end

The government has approved an emergency ordinance that provides for the extension until the end of the year of measures aimed at the social health insurance system, with a "positive" impact in limiting the spread of the novel coronavirus, as well as the granting of all persons in Romania and the support from the budget of the FNUASS (Single National Fund of Social Health Insurance) budget of medical services and medicines for the treatment of COVID-19 cases and their complications.

According to a press release of the Ministry of Health, it was approved to extend until 31 December 2020 the following measures:

- the granting of all persons on the territory of Romania and the support from the budget of the FNUASS of medical services and medicines for the treatment of COVID-19 cases and their complications;
- contracting by health insurance houses the entire amount allocated by the National Health Insurance House with the purpose of hospital medical services;
- maintaining the monthly settlement modality for sanitary units with beds providing hospital medical services, in continuous hospitalisation, without the need for a regularization of the 2nd, 3rd and 4th quarters;
- the settlement of medical services provided in the health units of primary care and clinical outpatient at the level of the activity actually carried out, but not more than 8 consultations/hour/doctor;
- medical advice provided in primary care and specialized outpatient care, including for some related services necessary for the medical act, may also be provided at a distance, using any means of communication;
- the possibility for family physicians to prescribe for chronic patients restricted medicines from the List of international common names corresponding to the medicines from which they benefit from insurance, with or without personal contribution, on the basis of medical prescription in the social health insurance system, as well as the international common names corresponding to the medicines granted under the national health programmes, approved by Government Decision No. 720/2008, with subsequent amendments and additions;
- settlement at the realized level of the services provided by the specialized units, which provide emergency consultations at home and unassisted sanitary transport, in contractual relationship with the health insurance houses, under conditions in which they exceed the contracted level;
- the possibility of supplementing the amounts contracted with health insurance companies with paraclinical health care providers, for outpatient paraclinical investigations, necessary to monitor patients diagnosed with COVID-19 after discharge from hospital;
- settlement at the achieved level of home health care services and palliative care services at home, provided that they exceed the contracted level;
- settlement of medical services provided by sanatoriums/healthwards in hospitals, carrying out activity, at the level of the indicators achieved within the limit of the contract value, if the expenditure actually incurred is covered or, where appropriate, at the level of expenditure actually incurred, within the limit of the contract value, in the situation where the value of the indicators achieved is less or equal to the level of expenditure actually

incurred, without the need for a regularisation of the 2nd, 3rd and 4th quarters;

- maintaining the validity of referrals for clinical specialities, including those for the specialty of physical medicine and rehabilitation, referral tickets for paraclinical specialties, medical recommendations for medical devices, technologies and assistive devices, as well as approval decisions for the procurement of medical devices, technologies and assistive devices, the validity of which expires until 31 December 2020.