



Health Card for Refugees in the Free Hanseatic City of Bremen

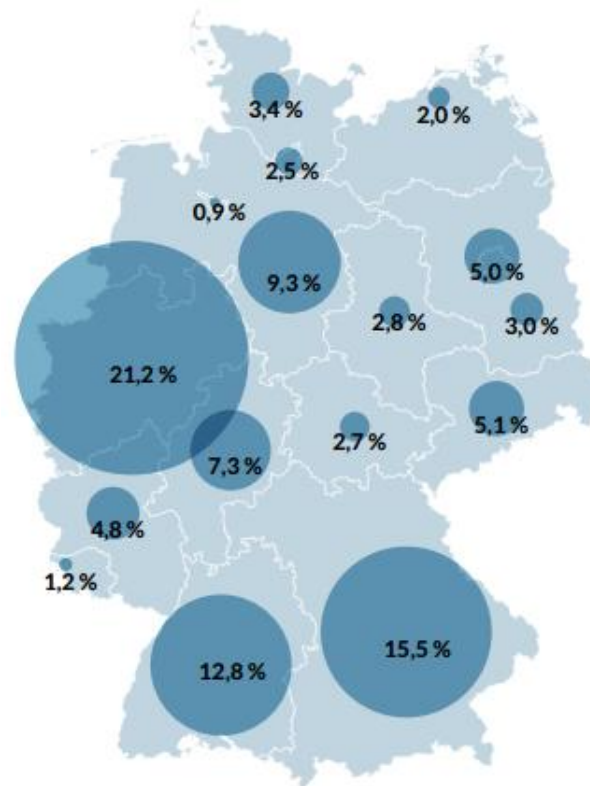
Migration and Health: a contribution of Regional Experiences to international and European Policies,
6 April 2016, Brussels

Basics about Bremen



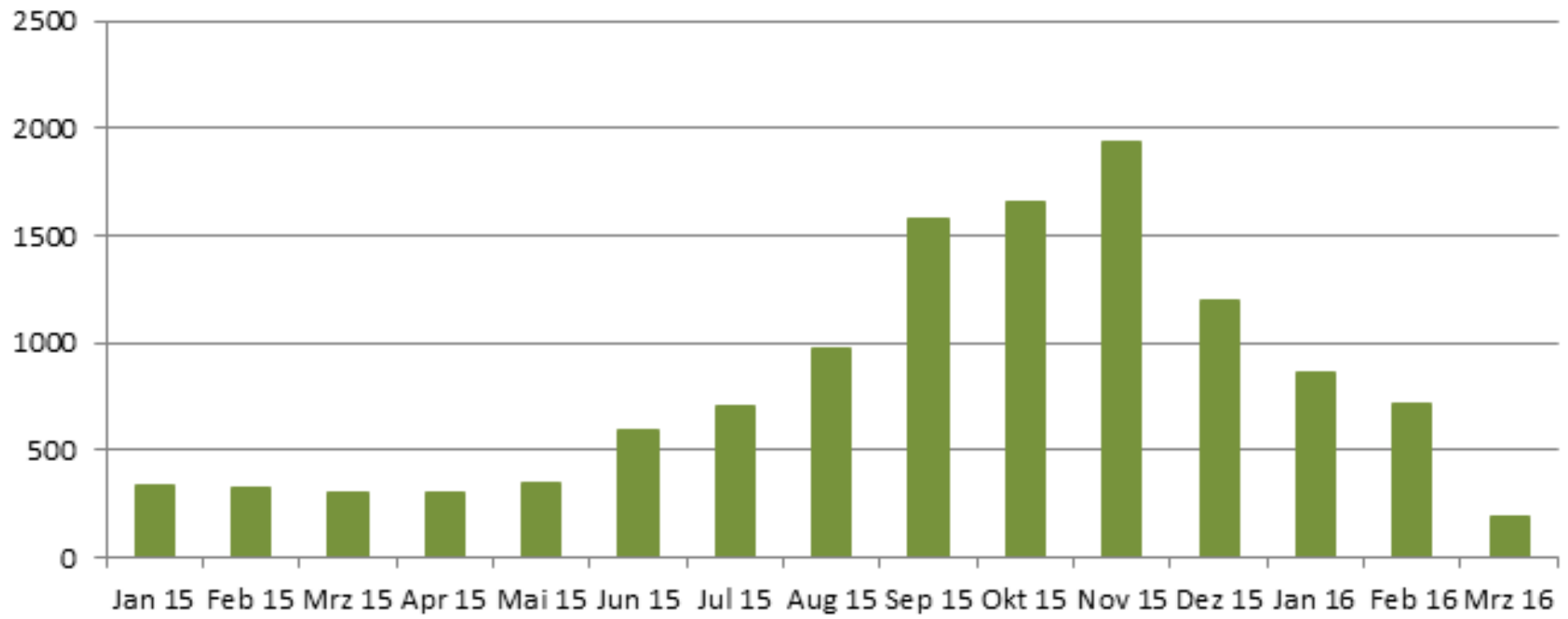
- **2-City-State**
- **Smallest state among the 16 states (Länder)**
- **664.000 inhabitants**
- **10,9 % unemployment rate**

Allocation Rate for Refugees within Germany



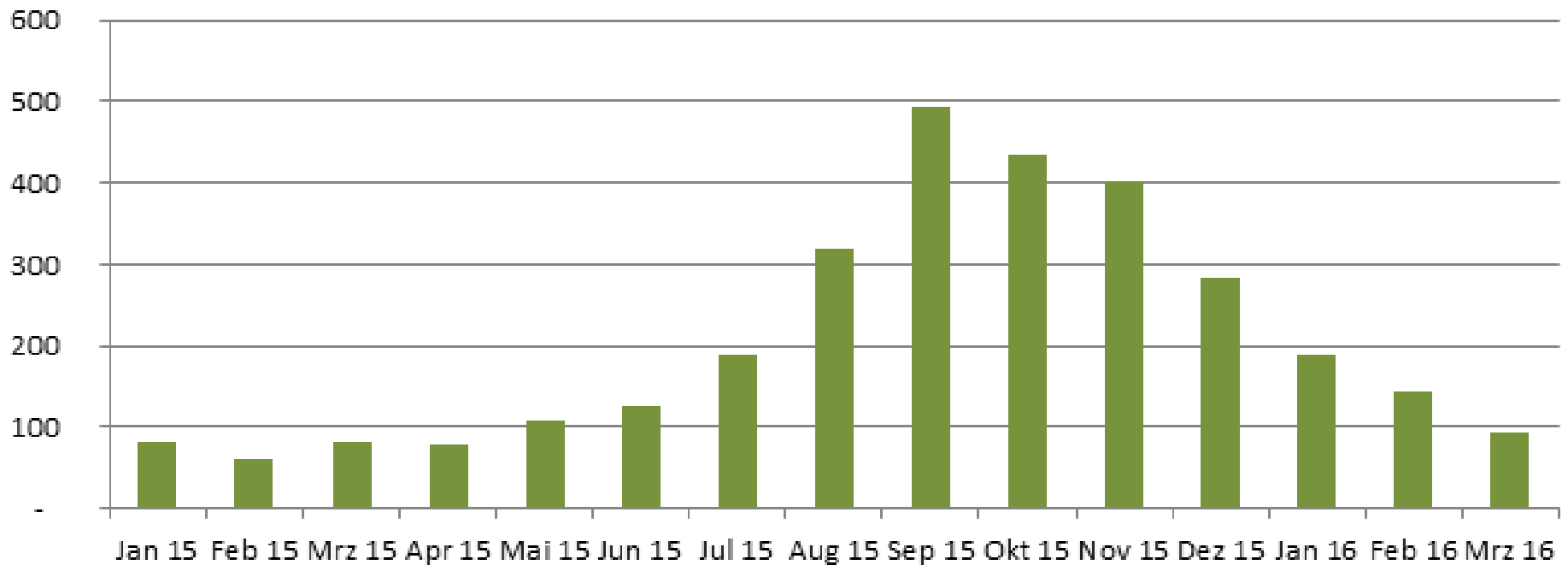
Health Card for Refugees in Bremen

Monthly numbers of refugees (>18 yr., adults and families)



Health Card for Refugees in Bremen

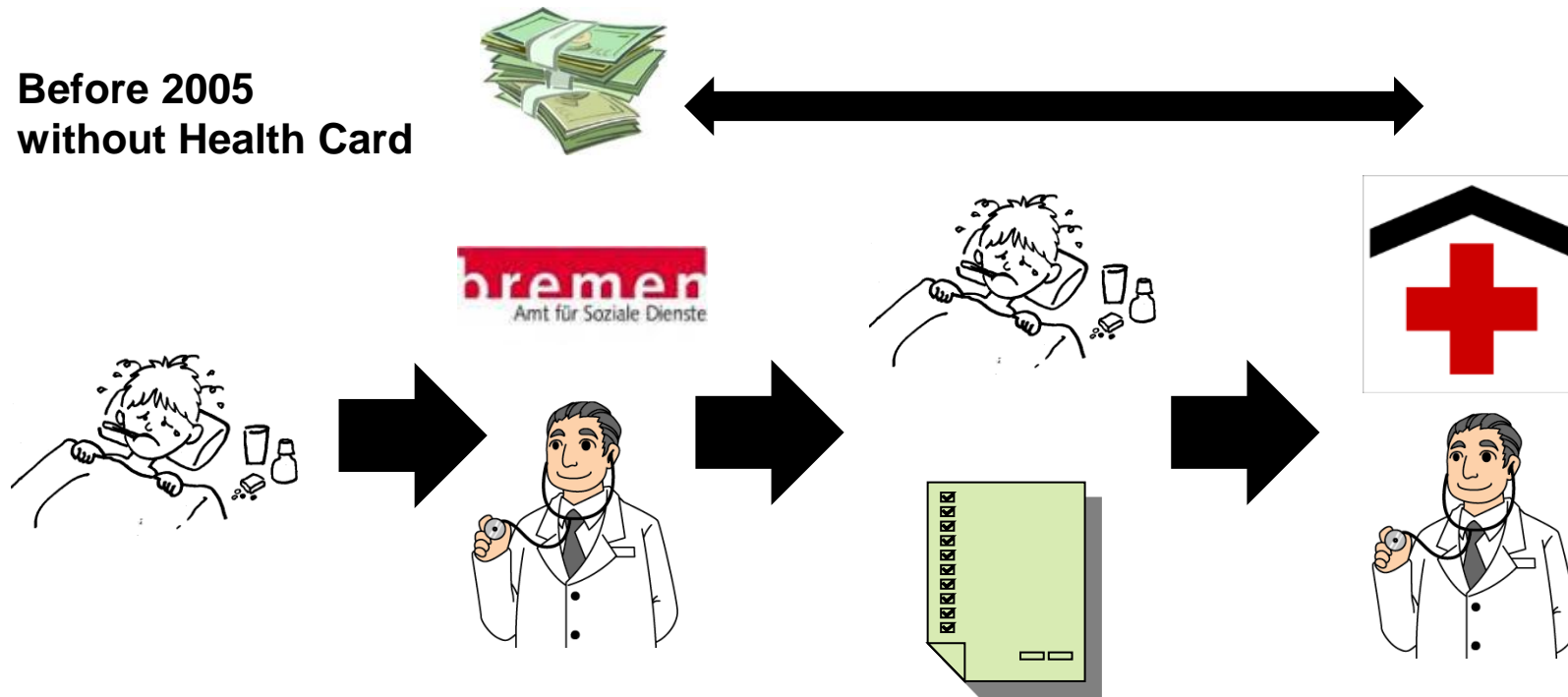
Monthly numbers of minor and unaccompanied refugees (<18 yr.)



Legal Basis: Health Care for Refugees in Germany

- Since 2004: health care costs for uninsured persons are covered by social welfare system (§ 264 Abs. 1 SGB V).
- This includes a certain group of refugees, e.g. more than 15 months in Germany (§ 264 Abs. 2 SGB V)
- **But** still some groups, regarding their asylum status, were not directly covered, e.g. less than 15 months or such as „tolerated“ or „required to leave“ (§§ 1a und 3 AsylbLG)

**Before 2005
without Health Card**



- No health insurance provider involved
- Time consuming for the refugee/patient
- High administrative effort for local authority and social service provider

Health Card for Refugees in Bremen

- Political decision in 2005: health care service to all refugee groups should be delegated to health insurance providers directly
- Creation of a Health Card for refugees
- Agreement between local authority and one health insurance provider was found

since 2005
with Health Card

Die Senatorin für Soziales,
Jugend, Frauen, Integration
und Sport



Vereinbarung zur Umsetzung der Leistungserbringung
nach § 264 Abs. 1 SGB V

zwischen

der Freien Hansestadt Bremen
Senator für Soziales, Kinder,
Jugend und Frauen

der Stadt Bremerhaven,
vertreten durch den Magistrat

nachfolgend – die Träger –

und

der AOK Bremen/Bremerhaven

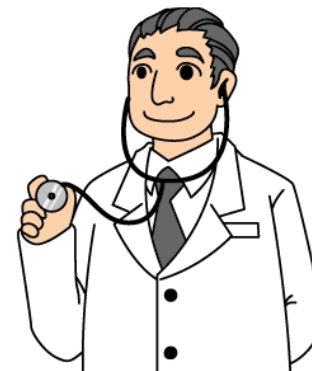
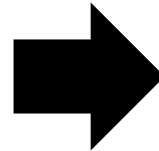
nachfolgend – die AOK

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since 2005
with Health Card



Effects of the Health Card

- Equality between national insured and refugees, no stigma (free access to health care services)
- Simplification for service providers (doctors, hospitals etc.)
- Reduction of administration effort (e.g. administrative instructions or single agreements with several service providers could be dropped)
- Use of health insurance administrations expertise
- Spending could be cut (e.g. accounting software or personnel expenses)
- NO higher costs per person for the social welfare system

Challenges and Outlook

- Since 2012 other German Länder (states) started to copy the “Bremer Modell”, in total seven states so far
- Others are considering to introduce the card as well
- Big states challenge the fact of multi-level negotiations, as there is the state (regional) and local level
- **Political aim:** For Bremen the system is just a temporally solution. Health insurance providers should cover directly all services and costs to all refugees, regardless their migration status

Questions!?

**Die Bevollmächtigte der Freien Hansestadt
Bremen beim Bund und für Europa
Vertretung der Freien Hansestadt Bremen
bei der EU**

Marcel Kreykenbohm
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