

Comparison of the European Health Insurance Card (EHIC), the Cross Border Directive (CBD) and the Treatment Abroad Scheme (TAS).

The TAS, the EHIC and the CBD are specific to the provision of healthcare in the EU/EEA and Switzerland.

EHIC

- The EHIC is used for instances where you are travelling to another EU State. If you fall ill or injured during such a trip your EHIC will cover any necessary care you might need.
- Irish residents should apply for an EHIC in advance of any such travel and keep it with him/herself whilst travelling.
- If you need to attend a GP or a hospital for necessary care when in another EEU/EEA country or Switzerland you simply present the EHIC and you will not be charged.
- The EHIC can only be used for necessary healthcare in the public system of any EU/EEA country or Switzerland. It cannot be used to cover urgent or planned care.

CBD

- The CBD entitles persons ordinarily resident in Ireland who have an appropriate referral for public healthcare to opt to avail of that healthcare in another EU/EEA country or Switzerland.
- Unlike the EHIC or TAS, healthcare accessed under the CBD can be accessed in either the public or the private healthcare system of the country abroad.
- The patient pays for the healthcare and then seeks reimbursement for that care upon his/her return to Ireland.
- The healthcare that can be availed of under the CBD is any healthcare that a public patient would have been entitled to in Ireland. However, there are some exceptions e.g. Organ transplantation, long term care etc. Details of the exemptions are specified in the Directive.
- Prior authorisation may be required from the HSE for certain healthcare so patients intending to access care under the CBD should check with the HSE in advance of travelling.
- There is an application form and process.
- The HSE will reimburse the patient for care which meets the terms of the CBD in line with the Directive.
- All other costs associated with accessing care abroad under the CBD are a matter for the patient and will not be reimbursable by the HSE.
- Referral for care under the CBD can be made by a GP, a hospital consultant and certain other HSE clinicians. In general the rule is that if the referral the patient has entitles him/her to access public healthcare in Ireland then they can simply opt to avail of that treatment in the EU/EEA or Switzerland.

TAS

- The TAS provides for the referral of patient's to another EU/EEA country or Switzerland for a treatment that is not available in Ireland.
- There are strict qualifying criteria to access this Scheme which are set out in EU Regulations and Department of Health and Children Guidelines.
- There is no charge to the patient for treatment availed of under the TAS. Treatment availed of under the TAS is authorised and paid for by way of the issuing of an E112 (IE) by the Irish government (HSE) to the government of the country where the treatment is being provided. Payment is made from government to government.
- The TAS covers the cost of the patient's air or sea fares to the service abroad.
- Eligibility for and treatment under the TAS is restricted to public healthcare. Private patients may not access funding under the TAS. Public patient's referred abroad for treatment under the TAS may not access that treatment in the private sector abroad.
- Authorisation for treatment under the TAS must be sought and granted prior to availing of the treatment otherwise the patient is liable for the costs. There are some exceptions to this in specific emergency situation e.g. when an organ becomes available in another country for a patient.
- Referral for care under the TAS is restricted to referral by an Irish based consultant who is treating the patient in a public capacity.