

Promoting the health of women with a migrant background



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Training document The health care system in Austria

Prepared and implemented in the context of **femmesTische** – female migrants in Styria talk about health, daily life and family – a **network project** by the women's and girls' advice centres **innova**, **Novum** and **Frauenservice Graz**.

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The health care system in Austria

The foundations for a public health care system were laid during the Austro-Hungarian Empire between the mid-19th century and the end of the First World War. The legal roots of the Austrian public health service lie in the Imperial Sanitary Act (Reichssanitätsgesetz) of 1870, which is still in force today.

The Austrian health care system (also known as the public health service) aims to make sick people well again and to ensure that healthy people stay healthy through preventive measures. It includes health care, health promotion, and prevention. In Austria, a large part of the money is spent on health care. Health promotion and prevention – defined as all measures to maintain health and avoid illness – are becoming increasingly important.

Who has access to the health care system?

The health care system includes all individuals and institutions involved in maintaining, promoting and restoring the population's health and avoiding illness. These include, for example, hospitals, private GP practices, preventive care and rehabilitation facilities.

A key feature of the Austrian health care system is equal and easy access to the full range of health services for everyone, regardless of age, place of residence, origin and social status.

How is the health care system organised?

Safeguarding health is a public task in Austria, and the health care system is publicly organised. This means that the federal government, provinces, local authorities, social security system and statutory interest groups (e.g. chambers, patient advocacy groups, etc.) are responsible for different subsections of the health care system.

How is the healthcare system financed?

The health care system is financed by a mix of general tax revenues, compulsory social health insurance contributions and private contributions. Private funds include, for example, prescription fees, daily allowances for hospital stays, excesses or private health insurance. Around 60% of spending on health care is financed through income-related social health insurance contributions, while the remaining 40% comes from general tax revenue such as VAT, income tax and tobacco tax, which are collected at the federal government level.

What health services does the statutory health insurance provide?

The health care of the Austrian population is covered by the statutory health insurance. It offers the insured and their jointly insured relatives comprehensive protection in case of illness. Comprehensive services are provided in various areas of the health system to ensure that good health care is available. Health care services are mostly provided at no additional cost to the insured. The insured party sometimes share the cost, which is known as an 'excess'.

Health insurance benefits include, for example:

- ◆ medical assistance (outpatient care) and hospital care (inpatient care)
- ◆ medical rehabilitation
- ◆ medications
- ◆ medical home care
- ◆ treatment by medical technical services (e.g. physiotherapy)
- ◆ services provided by midwives, psychotherapy and clinical-psychological diagnostics
- ◆ mother-child health passport examinations and maternity allowance after giving birth
- ◆ health and preventive health screening
- ◆ travel and transport costs
- ◆ allowances for medical aids and appliances
- ◆ sick pay

Almost 99.9 % of the Austrian population has health insurance. Assignment to an insurance provider is legally based on the place or type of employment (e.g. employee, self-employed, civil servant, railways and mining).

Most people are insured with the Österreichische Gesundheitskasse (ÖGK) – the Austrian National Health Fund – and have an e-card. They are either insured themselves, or insured jointly with relatives. The Austrian National Health Fund pays the costs of examinations, hospitalisation, all necessary treatments and medications. Individuals sometimes have to pay a contribution themselves (excess). Anyone with little money can apply to the Austrian National Health Fund and will not need to pay an excess. However, even individuals who are not insured and do not have an e-card receive medical help.

What is an e-card?

The e-card is the Austrian social security card; it was introduced in 2005. The insured person's name, date of birth and insurance number are saved on the chip card, but no medical data. The e-card must be presented every time you see a doctor, as some doctors otherwise request a deposit. Your deposit will be returned when you produce your e-card. Since 2020, the e-card has included a photo of the insured person.

Health care in Austria

Health care for the Austrian population is provided by:

- ✦ doctors in private practice,
- ✦ pharmacies,
- ✦ hospitals,
- ✦ rehabilitation facilities,
- ✦ emergency and ambulance services,
- ✦ old people's and nursing homes, and
- ✦ health spas.

Because of their high numbers, doctors in private practice play a significant role in the provision of health care. In 2020, there were around 2,500 practising GPs in private practice in Styria. To offer patients even greater service and security, increasing numbers of GPs are joining forces to form group practices or primary care facilities.

What is a primary care facility?

In addition to a team of doctors, other health and social professions, such as qualified nurses, social workers and physiotherapists, also work in a primary care facility. The coordination and communication channels between the professional groups are therefore shorter.

Patients receive several treatments at a single location close to home and with significantly longer practice hours. The range of treatments spans preventive health care and acute care to rehabilitation and nursing care.

What should I do if I feel unwell?

You do not always need to see a doctor. You can treat many minor complaints yourself, or they go away of their own accord. Examples include colds, dizziness, headaches and reddening of the skin if you have been bitten by insects. On average, 9 out of 10 health issues can be resolved by yourself without seeing a doctor.

If you are unsure: the freephone health hotline on 1450 is available 24/7 to answer your questions.

When should I call 1450 – the health hotline?

Following the example of other European countries such as Great Britain, Denmark and Switzerland, the 'Wenn's weh tut! 1450' telephone health advice line was launched Austria-wide in November 2019.

Call 1450 (no area code, from all networks) for telephone advice on what to do if your own or a family member's health suddenly causes concern. This telephone health advice is your personal guide through the health care system, and will steer you to where you can get the best care at that moment.

For anyone affected by toothache during the night, stomach cramps on a Sunday or swelling from an insect bite, it's often difficult to know what to do. Can you treat the pain yourself, should you see a doctor the next day, do you need treatment by a specialist or is calling an emergency ambulance the best option?

Health issues are unsettling, and they don't respect opening hours. Symptoms that suddenly develop in children or older people are particularly concerning.

This service gives you the possibility to call about your health problems 24 hours a day, seven days a week throughout Austria. A specially medically trained qualified nurse will provide you with immediate phone advice on how urgent your concern is and recommend the right course of action for you. This health advice is free of charge – you pay only your network's standard call charges.

The telephone health advice on 1450 is not a substitute for medical treatment and does not constitute a diagnosis. The telephone health advice is the first place to call for new complaints or symptoms that have become acute, but that are not a medical emergency.

When should I see a GP?

General practitioners (GPs) provide medical care to people in all areas of their life, regardless of age, gender or nature of the illness – in particular with regard to the prevention, detection and treatment of health disorders or illnesses of all kinds.

Your GP's surgery is your first point of contact for:

- ✦ acute illnesses that require medical treatment (e.g. infections, skin rashes)
- ✦ persistent complaints (e.g. backache, bronchitis)
- ✦ chronic illnesses (e.g. diabetes)
- ✦ the prescribing of medicines and issue of a prescription
- ✦ referral to a specialist if further examination is required
- ✦ issuing of a sick note

What should you do if your GP isn't available in the evening or on a weekend? You should call the **emergency medical service on 141.**

When should I see a specialist?

A specialist is a doctor who specialises in a certain field. Examples might include ear, nose and throat consultants, gynaecologists and dermatologists. Consultants are considered to be specialists. This service is increasingly being offered as an elective doctor's service. This means that only part of the costs you must pay yourself are covered by your health insurance.

- ✦ Specialists work in their own practice, or in a hospital outpatient clinic.
- ✦ Your GP will have a good idea as to whether you need a specialist. Your GP will refer you to the right place as necessary.
- ✦ You can also see certain specialists without a referral: this applies in particular to gynaecology (gynaecology and obstetrics), orthopaedics, paediatricians and ophthalmologists.
- ✦ You need a doctor's referral for an outpatient appointment at a hospital.

What is a contracted doctor/elective doctor or private doctor?

Contracted doctors are managed by so-called contracted doctors. These are general practitioners and specialists who are contracted to a health insurance provider. Doctors provide contractually agreed services, the costs of which are covered by social security.

Elective doctors' practices are managed by doctors who do not have a contract with a health insurance fund. They are free to set their own fees. Patients have to pay for the medical services themselves. On submission of the invoice to the health care fund, the health care fund will reimburse part of the costs. In addition to the fees they charge, elective doctors can also freely choose the location of their practice, their practice hours and their range of services.

Private practices are managed by doctors who have no right to reimbursement. The fees charged by private practices can be set at any level, with no upper or lower limit.

When do I need to go hospital?

Patients with acute or chronic illnesses sometimes need to be examined, treated and cared for in a hospital. Health care in hospitals is also referred to as in-patient care. It has traditionally been very important in Austria. In Austria, patients are admitted to a hospital more often than in most other European countries. There are just over 260 hospitals in Austria.

What do I do in case of an accident or emergency?

- ♦ The emergency services number is 144. Only call this number for accidents and emergencies! You will otherwise have to pay the costs of emergency services transport yourself.
- ♦ Acute outpatient treatment at the hospital is also available 24/7, especially for emergencies and accidents.

A medical emergency is an acute injury or illness that presents an immediate danger to a person's life, also known as 'life-threatening'. This includes, for example, serious accidents, a suspected stroke or heart attack, heavy loss of blood and similar situations.

First aid is the immediate care provided to injured or ill individuals before the emergency services arrive. In Austria, there is a legal obligation to administer first aid.

What other non-medical health professions are there in Austria?

Therapy play a large part in treating illness. There are specially trained therapists for this. There are contracted therapists who have a contract with a health insurance provider, and elective therapists who do not have a contract. To access a therapist, you will need a referral from a GP or specialist.

Physiotherapists specialise in movement development and control, and have the specialist knowledge to maintain, promote, restore and improve movement and function. Movement therapy is a core aspect of physiotherapy. It treats acute conditions as well as persistent chronic impairments. If you suffer from lower back pain, for example, your family doctor or specialist will refer you to exercise therapy, also known as individual therapeutic gymnastics. Physiotherapists work across all specialist medical areas.

Occupational therapists help people across all age groups with limited ability to act. A person's functions and abilities may be lost, for example, as a result of a stroke or, in the case of children, may not be sufficiently developed due to developmental disorders. The goal of achieving the greatest possible independence in everyday life, at school and at work is pursued by means of various occupational therapy measures.

Speech therapists help people with disorders of speech comprehension, spoken and written language, speaking, breathing, voice, oral functions, swallowing and hearing.

Psychotherapists diagnose and treat mental disorders, provide support in life crises and in changing stressful behavioural patterns and attitudes.

Dieticians are responsible on the basis of a doctor's order for selecting, composing, calculating as well as teaching and monitoring the preparation of special diets for nutrition. For example, they provide care for people with metabolic diseases such as diabetes and elevated blood lipid levels, pathological excess weight (obesity), kidney diseases, diseases of the gastrointestinal tract, food intolerances and even

cancer. Dietitians also work in the field of prevention. This also includes counselling healthy people, e.g. during pregnancy, weight reduction.

Midwives support, advise and care for women planning for pregnancy, during pregnancy, during childbirth, following delivery and during the baby's first year.

The doctor-patient consultation

What should I think about to ensure a good doctor-patient consultation?

You're probably familiar with the situation: when you are sitting in front of your doctor, being asked questions and absorbing new information, you get flustered. You've barely left the treatment room before you've forgotten what the doctor said to you.

Write your questions down at home, and think about the following points during your consultation:

- ✦ make sure you are understood and have understood everything correctly
- ✦ ask questions if there is anything you have not understood
- ✦ no specialist jargon – clear explanations
- ✦ clear, complete information: What does that mean for me?
- ✦ treatment and therapy alternatives should be offered
- ✦ your personal circumstances should be considered (family history, life circumstances, etc.)

How should I behave in a doctor's surgery or outpatient clinic?

- ✦ Be patient, there are waiting times;
- ✦ No noise or disruptive behaviour;
- ✦ Have your e-card and proof of identity to hand;
- ✦ Have your results and list of medications ready;
- ✦ Everyone is equal, and you have no entitlement to be treated by a woman or by a man only.

When should an interpreter service be involved?

Communication difficulties in the area of health present a major risk in terms of patient health. But they also leave health care professionals and institutions open to potential liability risks. Language barriers can mean that medically relevant information is missed or misunderstood. This can result in misunderstandings and errors in treatment in many ways.

Involving an interpreter is the best solution for the benefit of the patient and for the medical professionals. Often, this is the only way to find out about previous medication, level of pain and intolerances or allergies. For the doctor, it is also important to prevent the risk of incorrect treatment and liability due to a lack of or inadequate information.

Public hospitals should never refuse anyone essential medical care. The duty to treat exists, for example, in cases of danger to life, danger of serious damage to health or if childbirth is imminent. However, to be able to determine the obligation to treat at all, it is absolutely necessary to be able to communicate with the patient.

If the person who needs treatment is accompanied by someone with a sufficient command of German, this person can act as interpreter. This is known as a lay interpreter. Such people may add too many interpretations, or not fully understand and pass on everything that is said. It always depends on the situation. If, for example, relatives are called in to interpret, it may happen that not all content is interpreted out of a sense of shame due to the family hierarchy.

Alternatively, it may be possible to call on hospital staff who are familiar with the language, or an interpreting service.

Professional interpreters should ideally be used where there are health-related communication problems. In many institutions, there is also the option to enlist the help of a video interpreter. In this case, the video interpreter is connected via video.

The general rule is: The more time there is until the (planned) treatment and the higher the risk associated with the treatment, the sooner an interpreting service should be appointed.

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