

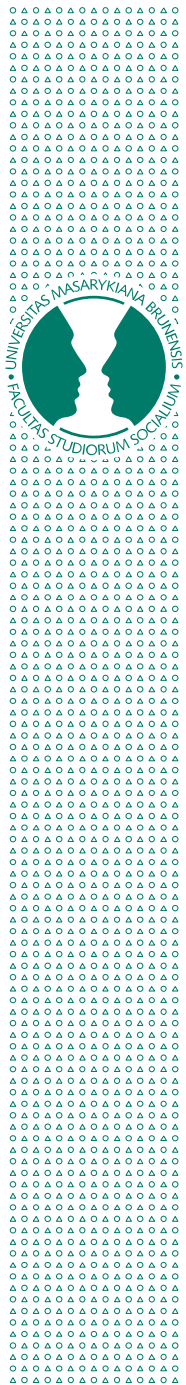
ELDERLY AND LONG-TERM CARE

Josef Horňáček

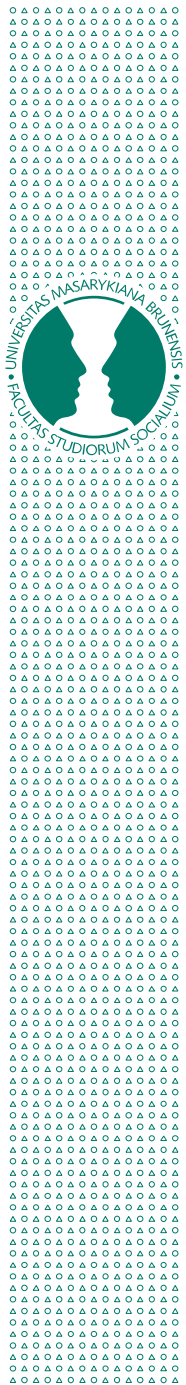
Kick-off Meeting, Oslo, 03/12/2014

Content

- Retirement age
- Elderly/LTC legislation
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Retirement Age 2014

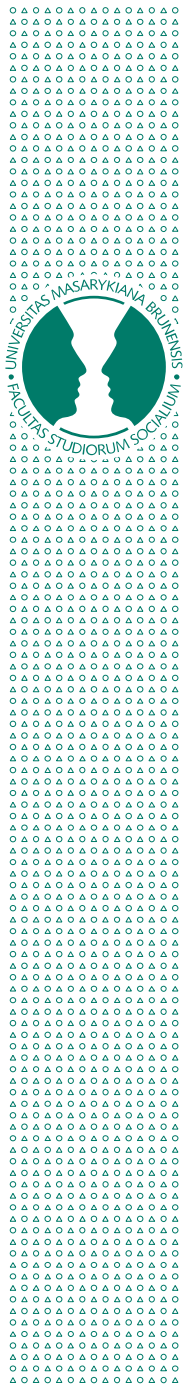


- Men 62 years + 8 months
- Women, no child 61 y. + 8 m.; Women, 1 child 60 y + 8 m Women, 2 children 59 y + 8 m.
- Increasing of retirement age (not limited).

Year of Birth	RETIREMENT AGE			Women, 2 children
	Men	Women, no child	Women, 1 child	
1955	63+4	62+8	61+4	60
1956	63+6	63+2	61+8	60+4
1957	63+8	63+8	62+2	60+8
1958	63+10	63+10	62+8	61+2
1959	64	64	63+2	61+8
1960	64+2	64+2	63+8	62+2
1961	64+4	64+4	64+2	62+8
1962	64+6	64+6	64+6	63+2
1963	64+8	64+8	64+8	63+8
1964	64+10	64+10	64+10	64+2
1965	65	65	65	64+8
1966	65+2	65+2	65+2	65+2

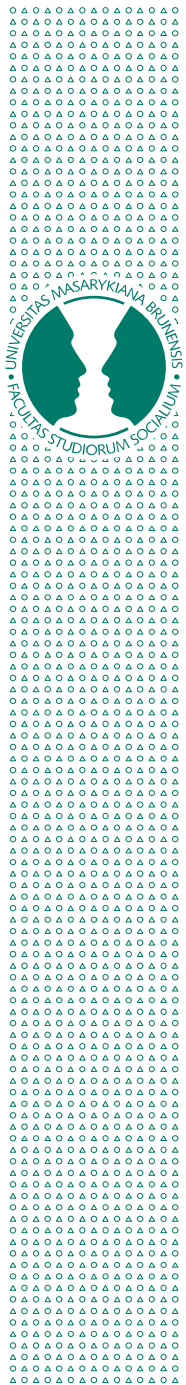
Old-age pensions 1,723,250 (796,838 men, 926,412 women).

Elderly/LTC Legislation



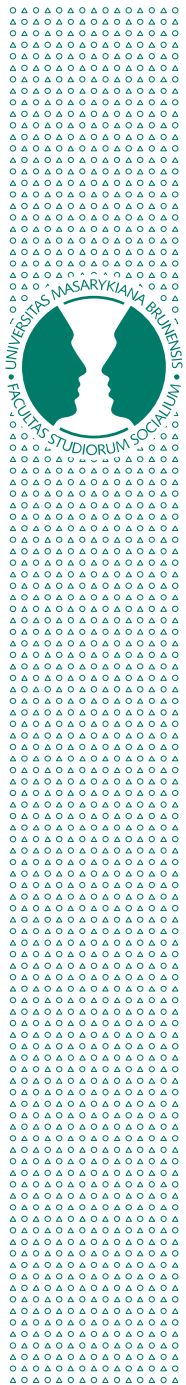
- **Devided between two sectors: Health Care and Social Services.**
- **Health sector (Ministry of Health):** The General Health Insurance Act (1991) introducing health insurance for health services, including aftercare and LTC provided within health sector. Pensioners are participants in the insurance, but do not pay any fees.
- The Law on Private Health Care Facilities (1992) that sets out regulation for the existence of hospitals, LTC and home health care services.
- **Social sector (Ministry of Labour and Social Affairs):** The Law on Social Services (2006) regulating the provisions of home care, access to cash benefits for individuals with limitations in activities of daily living and diferent types of residential care, including care for seniors.
- **Regional and local govenments** are responsible for the management of many health and social services organisations (hospitals, pensioner homes, LTC centers, etc.).
- **Employment office (regional branch)** is responsible for distributing cash benefits for individuals with limitations.

Eligible Persons



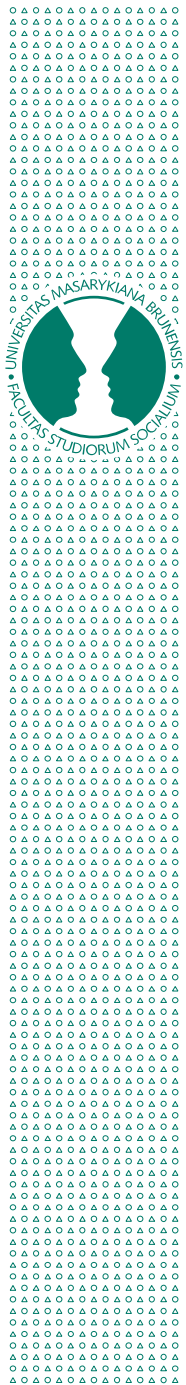
- Right to services in the case of poor health and limitations in activities.
- **Eligibility of health care services** is based on health insurance coverage. The provision of care is depending on the need of the illness, as assessed by the medical doctor.
- **Eligibility for social services** is based on citizenship. The need of social services is assessed by a social worker.
- Exception is care allowance granted to any person who is not self-sufficient and is dependent on the assistance of another person. The state of health and limitations is assessed by the medical doctor.
- Four levels of dependency: light (allowance 800 CZK/month), medium (4,000 CZK), heavy (8,000 CZK), very heavy (12,000 CZK).
- People with higher level of dependency have better chance for living in facilities of residential services as pensioner homes.

Institutional Care

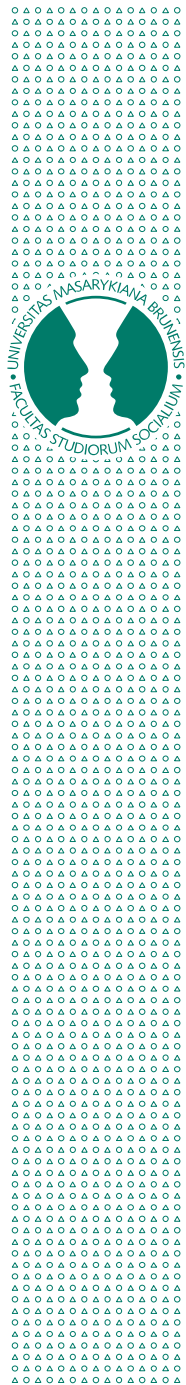


- Aftercare in hospital departments (nursing and rehabilitation services).
- LTC facilities (so called LTC homes) for serious ill patients located near the public hospitals and managed by private institutions.
- **Pensioner homes** providing care to the elderly who have suffered a permanent change in their health condition and cannot be self-sufficient. Managed both by public (communities, regional) institutions and private institutions.
- **Weekly and daily care centers.** This type of care is intended for individuals with limited capabilities in the household care. Not very often, the Ministry of Labour plans to develop and promote this type of care.

Home Care



- **Services in kind:** Personal assistance (social services in clients' home environment, shopping, cooking, washing, paying bills, etc.). The service is provided without a time limitation and depends upon individual request. Provided by private organisations. Similar community care services are provided by municipalities within a given timeframe.
- **Benefits in cash** are granted to individuals who are provided with personal, full-time care by a person close to them, typically a family member. The allowance takes the form of a personal budget benefit and can be used to cover the costs of arranging assistance for the dependent. 67% of recipients are aged 65+.
- **Providers of social services (2008):** 3% Private, 19% Regional authorities, 38% NGOs, 40% Municipality



**Thank you very much
for your attention**

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