

# ACCESS TO HEALTH CARE

## 1. WHAT IS THE FOCUS OF HUMAN RIGHTS IN HEALTH?

It is to recognize that every person should be entitled to health care, by the mere fact of being a person, regardless of factors such as nationality, socioeconomic status, cultural identity, immigration status, etc.

Health Policy Immigrant Health Ministry is based on this approach Human Rights, ie understand that migrants are subjects of law and that the State has an obligation to ensure that these rights are respected. Thus, regardless of nationality or the time you take in Chile, you are entitled to receive care health.

In particular, you are entitled to receive medical attention, regardless of nationality and immigration status.

## 2. HOW THE SYSTEM IS ORGANIZED CHILEAN HEALTH?

The health system in Chile is made up of the public health system and private health system:

'In the public system, there is a social health insurance administered by the **National Health Fund (FONASA)**.

-In the private system there is a system of individual insurance, which are administered by the **Health insurance institutions (ISAPRES)**.

Health care for any of the two systems, it is necessary to have Chilean identity card.

The identification number is on the Chilean identity card is called **Unique National Role (RUN)**. all Chileans is granted from the moment of birth, and foreigners who obtained a permit for temporary or permanent residence in Chile. If your child is born in Chile, will be awarded this RUN at the time of registration in the Civil Registry. RUN is the access key to many existing social benefits in Chile, including the insurance contract public or private health.

## 3. WHAT HAPPENS IF I DO NOT HAVE ILLEGAL AND RESOURCES?

Since 2016, migrants who have no Chilean identity card (RUN) and are lacking resources, can also access free of charge to the performance of the public health system on an equal footing with Chilean, leaving FONASA covered under the category Tranche A. this has been possible under Supreme Decree No. 67 of 2015, which incorporates the irregular migrants among people eligible for this benefit, through the signing of a document declares its lack of resources.

## 4. IF I DO NOT HAVE RESOURCES, WHAT ARE THE PUBLIC HEALTH FACILITY TO WHICH CAN ACCESS?

Establishments of Public Health Network, which will have access people who are declared as "lack of resources" or FONASA Tranche A, are those primary health centers, emergency services, health centers and public hospitals (therefore, clinics, medical centers, laboratories and private medical practices) are excluded.

## 5. WHAT SHOULD I DO TO BE SERVED IF I HAVE NO VISA AND RESOURCES I lack?

If you require health care and is in any of these situations:

- not have visa or residence permit, and therefore does not have RUN,
- not beneficiary of any agreement entitling you to health care,
- no has no health insurance (FONASA or ISAPRE, or travel insurance)

**You should contact the public health center closest to your home.**

If you are not registered yet, you must apply for registration and accreditation as "lacking resources" or FONASA Section A. You must fill out a FONASA, which include data such as address, telephone number and signature. The health officer will help with the filling of the form if necessary. In addition, it will prompt any identification document (passport or identity card of their country of origin) and a document verifying your address. Against this background, it will ask FONASA to appoint a temporary identification number whose characteristics are similar to RUN, which will allow you to be treated in the public health network.

The provisional number assigned by FONASA will be reported to the health facility, and he can get quality FONASA beneficiary of the Tranche A -lacking resources- for one year, allowing you to receive health care while managing their migratory regularization .

In addition, the health facility is authorized to provide the care required during the time delay this process. That is, if you need some urgent care or non-urgent primary or secondary care will be provided, even if does not have the number of temporary staff.

You can use this temporary number of health and their respective accreditation as "lacking resources," until you can regularize their immigration status, or even a year after it has been granted. This ID number is valid only Provisorio to access health care, and will not help you to perform other procedures in the country.

## **6. WHAT ARE THE BENEFITS TO WHICH CAN ACCESS?**

- In case of medical emergency that means a risk to your life, you are entitled to care at any public or private health facility, regardless of their immigration status is irregular. Emergency medical care could have a charge, as with domestic patients. However, in the public system can not charge classified as "resource-poor" people.
- The migrants, regardless of whether their immigration status is irregular, are entitled to access to public health services, such as fertility control methods, nutritional checks, vaccinations, mammograms, Pap test, Elisa test application, disease care communicable (TB, HIV / AIDS, sexually transmitted infections), among others.
- All migrant who is dealing with your immigrant visa in Chile, can access the public health system (hospitals and clinics) with a number of temporary identification request at the office nearest FONASA.
- The migrants who have an employment contract or traded independently, and their immediate families-spouse, daughters, children and other persons recognized as familiares- loads, have access to health through FONASA or ISAPRES. Through these health systems, you are entitled to receive care in clinics, hospitals and clinics as any worker or workers to pay their contributions, regardless of nationality.

## **7. WHAT RIGHTS WARRANT THE "LAW OF RIGHTS AND DUTIES OF PATIENTS"?**

- the right to respect and protection of their honor and private life for their health care.
- The right to companionship and spiritual assistance.

- the right to receive information about medical care, procedures and costs; their health status and diagnosis of the disease; treatment options and their risks; the expected prognosis and recovery process.
- The migrants are entitled to workers health institutions to treat them respectfully, deliver them all the information in an understandable way and answer their questions, without discrimination of any kind.

#### **8. What rights do children, adolescents and pregnant women?**

In the public health system, those under 18 years and women during pregnancy, childbirth and up to 12 months after delivery, even if they are in irregular immigration status, are entitled to:

- Access all requiring health benefits, including medical checkups throughout pregnancy, the annual growth control children up to 4 years (known as "well-baby") and all services support program biopsychosocial development and support program newborn.

