

Practical Information for Foreigners on Estonia's Healthcare Services

- ▶ Estonia's Healthcare System
- ▶ Opportunities to Acquire Health Insurance in Estonia
- ▶ Medical Care in Estonia
- ▶ Prescriptions and Pharmacies
- ▶ Dental Care
- ▶ Useful Tips and Contact Information

Getting Answers About Your Health Concerns Starts With Your Family Doctor

- ▶ A family doctor can diagnose and treat most illnesses
- ▶ A family doctor will consult with a specialist and make a referral if needed
- ▶ A family doctor can write a medical excuse
- ▶ A family doctor can issue a prescription
- ▶ Many questions can also be answered using the family doctor counselling line, which is open 24/7 with service in Estonian or Russian

Terviseamet – Estonian Health Board

(registration of health care professionals, oversight of health care)

Haigekassa – Estonian Health Insurance Fund, also EHIF (manages health insurance)

Sotsiaalkindlustusamet – Social Insurance Board

(state pensions, aids, and benefits, identification of severity of disability and permanent incapacity for work, victim support and conciliation service)

Perearst – family doctor, family physician, general practitioner

Töötukassa – Estonian Unemployment Insurance Fund

(manages unemployment insurance)

Maksu- ja Tolliamet – Tax and Customs Board

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Estonia's Healthcare System

In Estonia, medical care is divided into three levels:

- ▶ primary or family medical care,
- ▶ specialised medical care and
- ▶ nursing care.

As a rule, the first place to turn for medical care is the general practitioner (family doctor), with whom patients are guaranteed a quick consultation, necessary examinations, and treatments, and, if needed, a referral to the next level of care.

In case of a need for emergency medical treatment, one may go to the emergency room or call an ambulance.

It is very important to make sure that you have health insurance!

If you qualify for Estonian health insurance, you do not need to buy private health insurance at the time of applying for a residence permit.

If you do not qualify for health insurance, you are required to purchase a health Insurance policy from a private insurance provider.

This needs to be done before applying for a residence permit.

What does the Health Insurance Fund cover?

EHIF will only pay for services which have been found necessary by a doctor and are included in the list of services of the health insurance fund.

1. Partial or complete payment for medical services to the health care institution, including:
 - ▶ visiting a doctor or nurse (see also service fees)
 - ▶ diagnostic analyses
 - ▶ medical procedures
 - ▶ preventive measures
 - ▶ surgeries, etc.
2. Provision of discounted medication for insured people.
3. Compensation for medical devices (e.g. glucose meter test strips).
4. Financial compensation for insured people (e.g. compensation for temporary inability to work).
5. Health promotion (e.g. funding cancer prevention check-ups).

EHIF covers healthcare services offered only by contract partners.

More specific information on the contract partners can be found at www.haigekassa.ee/en »
For the individual » Health Care Services

1. Unified Healthcare

Estonia has unified national health insurance, which ensures quality medical care for every insured person. Thus, access to medical care does not depend on one's age, income, or place of residence

1.1. How Does Estonia's Health Insurance Work?

Funding for Estonia's unified health insurance comes from the 13% insurance tax which is paid on the income of workforce. In addition to the working people, health insurance covers many others who are not themselves employed – children, pensioners, seniors, and others. Everyone covered by health insurance in Estonia has the right to receive quality health care, regardless of whether they themselves pay the insurance tax or not.

By its very nature, health insurance is similar to any other type of insurance. In the case of home or motor insurance, a person pays an insurance premium, so that in the event of an accident, he or she would be covered financially against unexpected and often considerable expenses.

Health insurance works similarly but with the difference that the person's contribution to the system does not depend on his or her assessed health risk but on whether he or she will pay social security contributions and the size of his or her income.

1.2. Opportunities to Acquire Health Insurance

The medical expenses of an insured person are paid by the EHIF. Without insurance, people would also not be able to receive a discount on medicinal products, or financial compensation and payment for medical services, which can be very expensive.

Every permanent resident of Estonia as well as everybody who stay here on the basis of a temporary residence permit or right of residence have the right for health insurance if the social tax is paid for them.

Working Adults

Health insurance is available to all persons who are officially working, whose employment has been registered by the employer at the Tax and Customs Board, and for whom the employer is paying social tax. The working person must receive at least the Estonian minimum salary to be eligible for the coverage.

More specifically:

- ▶ persons employed on the basis of a contract of employment;
- ▶ recipients of remuneration or service fees on the basis of the agreement under the Law of Obligations Act;
- ▶ members of the directing and controlling bodies of a legal entity;
- ▶ sole proprietors and their spouses participating in their activities.

Employees with a contract employment of over one month are legally entitled to health insurance. The employer is required to register the working data (the beginning, suspension, and termination of employment) of all of their employees at the Tax and Customs Board. Data for the health insurance of employees or for the termination of insurance will be forwarded to the EHIF by the Tax and Customs Board.

However, it may happen that in the event of changing jobs, the employer forgets to communicate the information of the employee to the register. The fact that the employer has failed to submit the necessary data to the insurance fund may become evident unexpectedly, for instance at the doctor's office when refilling one's usual prescription. Thus, when taking up a new position, you should **check the validity of your new insurance**.

This can be done in the state portal at www.eesti.ee or by contacting the EHIF.

Health insurance is valid for two months after the termination of the contract of employment.

Children

All children up to 19 years of age whose address is registered in Estonia have health insurance. The insurance is valid until the day of their nineteenth birthday.

Students

Health insurance is provided by the state to the following persons during their studies:

- ▶ students acquiring basic education;
- ▶ students acquiring general secondary education;
- ▶ students carrying out formal vocational training;
- ▶ students who are permanent residents of Estonia e.g., doctoral students receiving the support of doctoral studies.

Beginning and Termination of Health Insurance

Details of students are submitted to the EHIF by the Ministry of Education and Research, which is responsible for the accuracy and timely reporting

of the data submitted.

- ▶ The insurance coverage of the student obtaining basic education expires three months after the completion of the educational institution (except students up to 19 years old).
- ▶ The insurance coverage of the student obtaining general secondary education expires three months after the completion of the educational institution. However, if the student has been expelled from an educational institution within three years after commencing their studies without completion of their studies, the insurance cover terminates one month thereafter (except students up to 19 years old).
- ▶ The health insurance of students and persons obtaining vocational education ends three months after the graduation from the educational institution. If the student has not graduated from the educational institution one year after the end of the standard period of the curriculum or has been expelled or dismissed from the educational institution, his or her health insurance ends one month thereafter. Health insurance is suspended during academic leave, except in the case when the leave has been taken for medical reasons (again, except students up to 19 years old).

Students who study abroad must, in order for the Estonian health insurance to remain valid, submit a document certifying the studies abroad to the EHIF.

On that basis, health insurance is formalised for up to 12 months. Thus, the certificate of studies should be delivered to the EHIF for each academic year abroad.

Unemployed

All unemployed people registered in the Estonian Unemployment Insurance Fund also have health insurance:

- ▶ those receiving unemployment benefits are covered from the first day they register themselves in Estonian Unemployment Insurance Fund;
- ▶ those who do not receive unemployment benefits are covered from the 31st day after they register themselves;
- ▶ unemployed people who participate in practical training, work practice, or employment training (at least 80 hours) and do not receive unemployment support are covered as of the first day of participation.

If the registration period in the Estonian Unemployment Insurance Fund has ended, the health insurance is valid for another month, except for recipients of the unemployment benefit, whose health insurance expires after two months.

Information on registering as unemployed, on unemployment allowances and benefits, and on applications and necessary forms can be found at the website of the Unemployment Insurance Fund.

Pregnant Women

If a pregnant woman does not have health insurance, she has to submit an application to EHIF and add a document issued by a doctor or midwife that proves the pregnancy.

The insurance ends three months after the child is born.

Raising children

Parents or legal guardians raising children have health insurance:

- ▶ a person on parental leave raising a child who is less than three years of age (parents or legal guardian);
- ▶ one non-working parent living in Estonia who is raising three or more children under the age of 19, of whom at least one is under 8 years of age;
- ▶ one parent, guardian, or caregiver who lives in Estonia with whom a contract for caring for a family has been concluded and who raises seven or more children under 19 years of age living in Estonia.

The data for obtaining health insurance shall be submitted to the EHIF by the Estonian Social Insurance Board. So to receive coverage as a parent, you should turn to the Social Insurance Board either in person or submit a digitally signed application to request health insurance.

Dependent Spouses Who Have Less Than 5 Years Until the Retirement Age

The dependent spouse of a legally married insured person who has less than five years until pension age has a right for state health insurance. For obtaining the insurance, it is necessary to submit an application to the EHIF.

The insurance ends when the dependent reaches the pension age, gets divorced, or the insurance of the support provider ends. If the dependent reaches the pension age, generally, the insurance continues as elderly pensioner's insurance.

Dependent Spouses Who Are Raising Children

Health insurance can be received if one parent is working and is insured through their work. The other parent, if legally married, can receive national health insurance when staying at home and raising:

- ▶ at least one child under 8 years old or until finishing first grade;
- ▶ at least three children under 16 years old.

To get access to health insurance as a dependant spouse raising children, you should submit an application to the Social Insurance Board, who will forward the necessary data to EHIF.

Pensioners

All recipients of state pension receive health insurance automatically.

Social Insurance Board will forward necessary data for obtaining health insurance to EHIF.

Caregivers of Disabled People

Caregivers of disabled persons to whom a local municipality or city government pays support for caring for a disabled person and who do not work or receive a state pension also receive health insurance.

Local municipality who pays the social tax will forward the necessary data for obtaining health insurance to EHIF.

Voluntary Insurance

If the person does not belong to any of the above groups, it is possible to enter a voluntary health insurance contract with the EHIF. Upon entry into the contract, premiums shall be paid to the Health Insurance Fund.

Following persons are entitled to enter into the contract with EHIF:

1. The contract can be entered into by permanent residents of Estonia and persons residing in Estonia on the basis of a temporary residence permit or the right of temporary residence who have been insured for at least 12 months in the two years preceding the conclusion of the contract:
 - ▶ by the employer
 - ▶ by the state
 - ▶ as a student
 - ▶ as a self-employed person, a notary registered with the Tax and Customs Board, a sworn translator or a bailiff
 - ▶ or as a spouse of a self-employed person.

The aforementioned insured persons can also enter into a voluntary insurance contract for the benefit of their dependants. The dependant must be a permanent resident of Estonia or a person residing in Estonia on the basis of a temporary residence permit or the right of temporary residence.

2. In the calendar year preceding the conclusion of the contract, the insured person has paid social tax or social tax has been paid for them
3. Voluntary insurance is also available to persons receiving a foreign pension (unless otherwise provided by international agreements).

1.3. What If I Don't Have Health Insurance?

There are two types of health insurance in Estonia: EHIF coverage and private insurance.

All people living in Estonia with a temporary residence permit must be covered by insurance during their entire stay. If you are not eligible for EHIF state or voluntary insurance, you must purchase it from a private provider.

For example from:

INGES: www.inges.ee/en/

ERGO: www.ergo.ee/en

Salva: <https://www.salva.ee/en>

Or from international providers:

Swisscare: www.swisscare.com

Cigna: www.cignaglobal.com

for the express purpose of obtaining medical treatment,

- ▶ does not guarantee free services. As each country's healthcare system is different, services that cost nothing at home might not be free in another country.

When you move your **primary residence** to another country, you should register with the S1 form and deregister from the previous health system instead of using the EHIF to receive medical care in your new country of habitual residence.

1.4. Medical Care on the Basis of European Health Insurance

The European Health Insurance Card is a free card that gives the citizens of European Union Member States access to medically necessary, state-provided healthcare during a temporary stay in any of the 28 EU countries, Iceland, Liechtenstein, Norway and Switzerland, under the same conditions and at the same cost (free in some countries) as people insured in that country.

Cards are issued by your national health insurance provider. Learn more how to apply for a card: <http://ec.europa.eu/social/main.jsp?catId=563&langId=en#nationalinfo>.

The European Health Insurance Card:

- ▶ is not an alternative to travel insurance. It does not cover any private healthcare or costs, such as a return flight to your home country or lost/stolen property,
- ▶ does not cover your costs if you are travelling

2. Medical Care

2.1. Primary Healthcare

The first point of contact for a person with health concerns is their family doctor, who in cooperation with a family nurse diagnoses and treats most illnesses.

The primary value of the **family doctor** is monitoring a person's health as a whole. Along with a family nurse, the family doctor also monitors the development of children and chronic illnesses. In addition, the family doctor can undertake minor surgical procedures, directs a patient to testing and takes samples for analysis, vaccinates, bandages wounds, removes stitches, and makes house calls if needed.

The family doctor advises patients on all their medical needs, injuries or in the event of poisoning and also gives advice for preventing illnesses. If needed, the family doctor can issue a referral for the patient to see a specialist.

The family nurse also has an important role, independently taking visits with patients to advise and direct regarding health questions and monitoring those with chronic conditions. If needed, the nurse consults with the doctor or directs the patient to a visit with the doctor.

If you need to see a specialist doctor, the referral from your family doctor is mostly required (**except** psychiatrist, gynaecologist, dermatologist, dentist, ophthalmologist, if you have a major trauma). **You will be referred to a specialist only if your family doctor decides that your health concern requires the involvement of a more specialised doctor.**

The family doctor will issue a digital referral, which is a referral letter sent to the specialist through the health care information system. This ensures that the referral letter does not get lost or left at

the patient's home, and out of the many different options available, the patient can get just the right specialist that they need.

Once you have received a referral, **you should make an appointment** with the specialist. You may choose the hospital or specialised clinic where to turn. P.S. Please make sure that they are a contractual partner of the Estonian Health Insurance Fund.

Usually you can get an appointment with a specialist at a major hospital:

1 Tallinn

East Tallinn Central Hospital (Ida-Tallinna Keskhaigla)
West Tallinn Central Hospital (Lääne-Tallinna Keskhaigla)
North Estonia Medical Centre (Põhja-Eesti Regionaalhaigla)
Tallinn Children's Hospital (Tallinna Lastehaigla)

2 Tartu

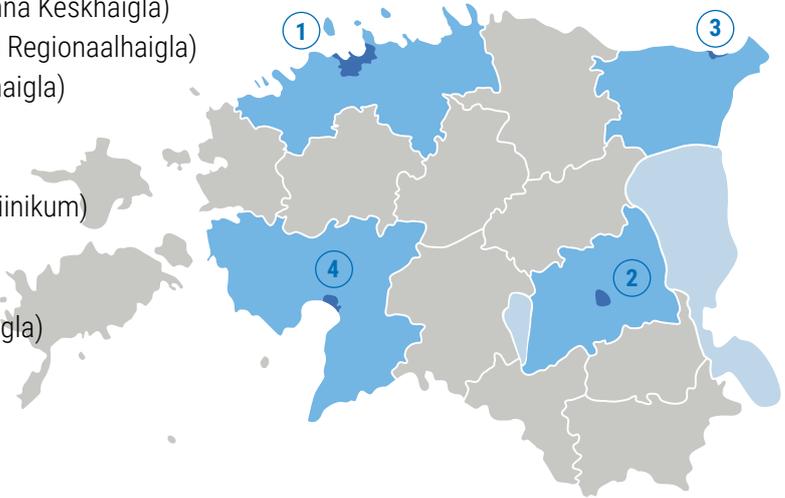
Tartu University Hospital (Tartu Ülikooli Kliinikum)

3 Kohtla-Järve

Ida-Viru Central Hospital (Ida-Viru Keskhaigla)

4 Pärnu

Pärnu Hospital (Pärnu Haigla)



If you wish to turn to a specialist without a referral from your family doctor or outside the regular waiting list, there are private specialists available for a fee. Details can be found at the clinic you wish to visit.

In cases of unexpected or minor health issues, you can also ask for advice from the Estonian family doctors state-wide advisory line by calling **634 6630**. The service is accessible 24 hours a day, 7 days a week, **assistance is provided in Estonian and Russian**.

How to Find a Family doctor?

All Estonian citizens and foreigners legally residing in Estonia on the basis of a residence permit / right of residence have to be entered into the registry of a family physician. All newborns are automatically registered with their parent's family doctor. A separate application must only be made if you wish your child to be registered with a different family doctor than your own. Usually, the need to change a family doctor arises in cases of change in the place of residence.

To register or change your family doctor, you must submit a signed application (Estonian: Avaldus perearsti nimistusse registreerimiseks) to the family doctor that you have chosen. **The application must be submitted in Estonian**, but you can use

the English translation of the form as a guide: <https://www.workinestonia.com/wp-content/uploads/2017/08/Application-for-registering-with-a-family-physician.rtf>.

The application will be reviewed within 7 days, after which the selected family doctor will let you know if you have been accepted to the doctor's list. After the doctor has confirmed accepting you, you are officially registered with the clinic starting from the first date of the following month.

What Happens When the Doctor Declines Your Application?

A family doctor may decline your request if his or her directory is full or if the applicant does not live in the doctor's service area (the service area is determined by your registered address). In that case, you must choose another doctor. If you cannot find a family doctor on your own, you can contact Estonian Health Board for assistance.

Family Doctors and Foreign Languages

The selection of a family doctor is based on the patient's registered address in the National Registry. Being able to speak English is not a requirement for family doctors to practice in Estonia, so you should not assume that all family doctors will be able to communicate with you in any other language than in Estonian. However, it is possible if the doctor and patient mutually agree to it. You can also visit the doctor with a interpreter or a support person. Most private practices have service available in other languages.

NB!

- ▶ A patient with an acute illness must be seen by a family doctor or nurse on the same day.
- ▶ Chronic or other non-urgent concerns will be addressed by the family doctor within five working days.
- ▶ A visit to the family doctor is free for an insured patient.
- ▶ For a home visit, the family doctor may ask a fee up to five euros, regardless of the number of patients.
- ▶ Home visits for pregnant women and children under two years of age are free of charge.
- ▶ You may check the name of your family doctor at the national web portal www.eesti.ee/en (Topics » Health and care » Health and Medical care

Additional information on finding a family doctor can be found on the webpage of Estonian Health Board.

2.2. Private Hospitals and Clinics

The advantage of private healthcare lies in shorter waiting times. In private hospitals and clinics, you have to pay for the services yourself. If you have private insurance, you should check whether your private insurance might cover some of the fees.

To find a suitable private clinic, ask for recommendations from your friends and your family doctor or search online. Some clinics with websites in English:

- ▶ Fertilitas – www.fertilitas.ee
- ▶ Qvalitas – www.qvalitas.ee
- ▶ Elite – www.elitekliinik.ee
- ▶ Valvekliinik – www.valvekliinik.ee
- ▶ Sinu Arst – www.sinuarst.ee
- ▶ Confido – www.confido.ee

2.3. Family Doctor or Emergency Room (ER)?

Everyone wants to know where to turn for the quickest help in the event of an unexpected health problem. The initial care needed can be given by a family doctor or nurse at your own family clinic. The emergency room (ER) at a hospital offers unavoidable care, which is medical care that must be given immediately to avoid permanent injury or death.

Family Doctor	Emergency Room (ER)
Pain	
Moderate and/or chronic pain	Strong, sudden pain
<ul style="list-style-type: none">- Headache- Joint pain- Lower back pain- Earache- Sore throat- Stomach-ache	<ul style="list-style-type: none">- Dull squeezing, pressing or oppressive chest pain- Sudden strong and unbearable headache, which may include vomiting and trouble with balance- Unbearable stomach-ache with repeated vomiting<ul style="list-style-type: none">- Unbearable pain that is unaffected by oral painkillers
<p>NB! Pain in the extremities, lower back pain, and pain in the face, including toothache without a high fever are not life-threatening and do not require an ER visit! For such pains consult your family doctor or ask the family doctor advice line at 634 6630.</p>	
Trauma/Accident	
Minor trauma or accident	Trauma/accident
<ul style="list-style-type: none">- Trauma that does not entail major swelling, deformation or limited movement of the affected body part- Minor trauma- Bug bites, incl. tick bites	<ul style="list-style-type: none">- Fresh trauma, major swelling, deformation or limited movement of the injured body part, wounds, burns, corrosive burns, electrical burns, poisoning, etc.- Foreign objects in the airways, digestive tract, or other places- Animal bites (dog, cat, etc.)

Bleeding

Bleeding

- Blood in excrement
- Blood streaks in phlegm
- Frequent nosebleeds

Severe bleeding

- Persistent bleeding in the digestive tract
- Urinary tract/genital bleeding
- Severe nosebleeds
- Severe bloody cough

Severe Conditions

Conditions of minor illnesses

- Coming down with a cold (stuffy nose, cough, throat/ ear/ headache)
- Catching a stomach virus or digestive complaints (nausea, vomiting, heartburn, stomach-ache, diarrhea, etc)
- Allergy symptoms (dermatitis or skin rash, asthma, hay fever, swelling of the tongue or throat)
- Heart rhythm issues that are more than 48 hours old and do not include shortness of breath or chest pain and the patient is not using anticoagulants (blood thinners)
- Frequent urination, discomfort or feelings of pressure with urination, difficulty urinating, genital seepage, suspicion of sexually transmitted diseases
- Loss of visual acuity, secretion from the eye, eye infection
- Loss of hearing, ringing/noise in the ear, secretion from the ear
- Worsening of chronic illness (elevated blood pressure, etc)

Trauma/accident

- Suspicion of a stroke – sudden speech impediment and paralysis, weakness or numbness in half of the body (i.e. one corner of the mouth starts drooping) sudden loss of balance or dizziness, memory loss or loss of consciousness
- Extreme weakness, fatigue
- Persistent fever over 38.5 degrees C which does not respond to fever reducers, high fever in elderly patients
- Panting, shortness of breath, severe asthma attack (difficulty breathing with whistling exhalation)
- Severe allergic reaction, accompanied with difficulty breathing, extensive full-body rash, swelling of the tongue, difficulty swallowing, etc
- Urinary retention
- Heart rhythm irregularities starting up to 48 hours ago or having lasted more than 48 hours and accompanied by shortness of breath and chest pain.
- Suspicion of thrombosis – sudden pain and swelling of the limbs, mostly in the thighs; chilling of the limbs and pale or reddish-purple coloration

Family Doctor

Emergency Room (ER)

Skin Infections

Skin infections

- Subdermal abscesses (swelling, blain, etc)
- Skin infection – rash may appear as spots, blotches, itching, stinging, scaling, etc)
 - Chronic wounds
 - Herpes

Severe skin infections

- Widespread abscesses accompanied by fever and pain
- Infected wound with fever and swiftly (within hours) spreading swelling (widespread swelling)

Psychiatric and Mood Disorders

Mood disorders

- Depression (low spirits, despair, apathy)
 - Anxiety and sleep disorders
- Behavioural and addiction problems

Psychiatric disorders where the patient is a threat to himself or herself or those around him or her

- Severe psychosis (delusions, hallucinations, paranoia)
 - Confusion
- Attempted suicide

2.4. Specialised Healthcare

A person needs specialised care if the family doctor determines that their health concern requires the involvement of a more specialised doctor.

A referral issued by the family doctor is needed to turn to a specialist. No referral is needed to turn to a(n):

- ▶ ophthalmologist;
- ▶ dermatologist or venereologist;
- ▶ gynaecologist;
- ▶ pulmonologist in case of tuberculosis;
- ▶ dentist;
- ▶ psychiatrist.

The insured person has the right to choose the specialist that is suitable to him or her and an appointment time in any health care institution which is under contract with EHIF. The fund's contract partners serve all insured individuals, regardless of their place of residence.

Specialised healthcare is divided into three:

- ▶ ambulatory care;
- ▶ day care
- ▶ stationary care.

Ambulatory care means a doctor visit, in the course of which a person is examined, some procedures are done (blood test, EKG, etc.), and if needed, further treatment is determined. The patient does not remain in the hospital.

Day care is a healthcare service for patients in need of assessment or treatment in a hospital bed during the day; the patient will not stay overnight.

Stationary care is given at a hospital and the patient must stay overnight or even longer.

When visiting a specialist, treatment facilities have the right to charge a patient up to 5 euros for a visit fee.

Except for:

- ▶ pregnant women,
- ▶ children under two,
- ▶ if the patient is to be referred to another doctor at the same facility,
- ▶ emergency care if it is followed by hospitalisation.

During a hospital stay, a patient is charged €2.50 per day for their room, up to a maximum of €25 per hospital stay.

Waiting Lists for Care

Those in need of specialised care are placed on a waiting list according to the seriousness of their condition. If a person has a very serious illness, the family doctor and the specialist work together to adjust the waiting list so that care can be given more quickly. Others whose health concern is less critical will receive care in a time frame so that their condition does not worsen, but the waiting list can be up to 2–3 months.

Most health concerns do not require the intervention of a specialist, as they can be quickly treated by a family doctor. A family doctor can also use the e-consultation service to consult with a specialist to confirm the patient's diagnosis and determine treatment.

It is possible for people to choose their preferred medical institution and doctor. The length of waiting lists may vary in different medical institutions and for different doctors. Even if the family physician has written the name of a particular doctor or medical institution on your referral, you should always ask about the reception hours of other hospitals and doctors that may have a shorter waiting list.

NB! If you do not have access to a doctor with a reasonable waiting time or you have not received the necessary medical attention, it is important to contact the Health Insurance Fund.

3. Benefits

The Estonian Health Insurance Fund pays several benefits to insured persons.

Benefit for temporary incapacity for work is paid to an insured person who is working on the basis of a disability certificate and who, due to temporary incapacity for work, loses income that is taxable by social tax.

If an employed person is taken ill and must be absent from work, a doctor will issue an electronic certificate of incapacity for work. On the basis of the certificate, the employer and the Health Insurance Fund will pay sickness benefit to the person. The benefit is not paid for the first three days of sickness (however, the employer can do so if they wish).

From the fourth to the eighth day of absence, the employer pays the sickness benefit based on the average wage of the employee. The employer calculates the sickness benefit based on the six months' average salary of the employee; the benefit amount is 70% of the average salary of the employee.

From the ninth day, the Health Insurance Fund will pay the sickness benefit based on the daily income of the employee. The calculation is based on the data received from the Tax and Customs Board on social tax calculated or paid in the calendar year preceding the commencement of the work leave, which is indicated on the person's certificate for sick leave.

An insured person has the right to receive benefits up to 182 days in a row (240 days for tuberculosis). A doctor may issue a medical excuse for a longer period, but no benefit will be paid in that case.

EHIF receives information on the social tax from the Tax and Custom Board. You can check your data on the national portal at www.eesti.ee.

Additional information about benefits can be found at EHIF.

4. Prescriptions and Pharmacies

4.1. Pharmacies

Pharmacies are usually open from around 9 a.m. to 6 p.m. Pharmacies in shopping centres are open until the closing time of the shopping centre (often at 9 p.m.). Some are open 24/7:

In Tallinn

- ▶ Tõnismägi 5
- ▶ Vikerlase 19

In Tartu

- ▶ Town Hall Square – Town Hall

Medications available in a pharmacies are divided in two categories – over-the-counter and prescription medications. Everyone can buy over-the-counter medication in unlimited amounts similarly to any other consumer goods (for example, painkillers or vitamins).

You need a prescription from a doctor to buy prescription medication (for example antibiotics).

4.2. Digital Prescriptions

Digital prescription is an electronic prescription for medication that the doctor writes for the patient online. A digital prescription is not printed on paper and is sent from the doctor directly to the prescription centre. The prescription centre is an electronic database established for the issuing and processing of prescriptions.

A person purchasing prescription medication must have an identity document with him or her in the pharmacy which includes a picture and ID-code, for instance an ID card, driver's licence, or passport. The pharmacist can easily find all the information he or she needs from the prescription centre by using the patient's ID code.

A prescription can be purchased by any person who knows the patient's ID code. If the patient has multiple active prescriptions, one must also know the name or active ingredient of the medication. The purchaser must present his or her document, so that the ID-code can be registered at the prescription centre.

Digital prescriptions cannot be used to buy prescription medication outside Estonia. A paper prescription will be issued by a doctor to a patient who is planning to spend time outside the country and wishes to buy prescription medication there.

A digital prescription can be used in every pharmacy in Estonia.

5. E-Health

You can see your own health information at the patient portal www.digilugu.ee. All health care providers are required to transmit their patients' health information to the health information system. All the most important medical data describing your health is gathered there.

By logging in with your ID-card or Mobile-ID, you can:

- ▶ View your own health information, i.e. medical documents compiled by doctors (i.e. case histories, analysis results, referrals);
- ▶ Designate representatives for various functions;
- ▶ Present declarations of will;
- ▶ Check when your information has been viewed and by whom;
- ▶ View prescriptions and when they have been purchased;
- ▶ Notify all medical institutions at once of changes to your contact information;
- ▶ Set up reminders for appointments with doctors.

6. Dental Care

Dental care in Estonia is subject to a fee for adults; however, dental care costs for all adults with health insurance can be reimbursed by up to 40 euros per year, but the recipient's own contribution is 50% of the expenditure.

For example:

Your dental bill: 60 euros

50% paid by the patient: 30 eur

50% paid by the Health Insurance Fund: 30 euros

*10 euros left to use for the same year

The benefit can be used only with dentists who are contracted for financing medical treatment with EHIF. The benefit applies to essential dental care services and will be calculated automatically by the dentist.

Pregnant women and mothers of children under one year of age receive dental benefits of up to 85 euros per year. The patient must pay at least 15% of the bill herself.

Recipients of pension, partially or completely disabled persons, and senior citizens over the age of 63 receive dental benefits of up to 85 euros per year. The patient must pay at least 15% of the bill himself or herself.

Free dental care is available for:

- ▶ children and youths of up to 19 years of age;
- ▶ people who need emergency care when postponing aid or not providing aid may cause the death or permanent injury to the patient. Whether or not a particular case calls for emergency care is decided by the dentist.
- ▶ persons with a severe physical or mental disability who are unable to take care of their oral hygiene.

Free dental care is only available by dentists listed by the EHIF website.

If you need dental care, contact a dentist of your choice and book an appointment. In major cities, dentists generally speak Russian or English, but it always pays to check whether the doctor of your choice speaks a language that you can understand.

Dental Care for Children

With proper oral care habits and visits to a dentist, it is possible to avoid dental problems as an adult.

When you wash your toddler's teeth, make sure to examine the teeth. If you notice discoloration, spot(s) that cannot be washed off, etc., make an appointment with a dentist. Even if everything is fine, you must still go to the dentist before the child reaches the age of three.

The first visit to the dentist should be pleasant for the child. During the initial visit, the dentist examines the child's teeth and the child is introduced to the dentist, the dental office, and the dental chair so that future cooperation with the dentist would not be scary. It is necessary to avoid the situation where the first visit to the dentist is due to tooth decay or toothache.

A schoolchild must visit the dentist at least once a year. This way, the child will form the habit of visiting the dentist regularly to prevent problems.

If necessary, the dentist will refer the child to an orthodontist.

Dental care requires parental consent.

7. Paediatric Health

It is very important to monitor the health of children. For that purpose, Estonia has developed health check guidelines.

Children's health check is a programme developed by family doctors, paediatricians, and other doctors by which a child's growth and development, hearing, sight, and speech are monitored; information is given regarding illnesses that can be prevented with vaccines, the development of healthy eating and movement habits are supported, and advice is given to parents.

During the first week of an infant's life, all children born in Estonia can be tested for twenty different congenital diseases (thyroid dysfunction, different hereditary metabolic diseases, hearing disorders). To determine the presence of congenital diseases, all children born in Estonia are screened right away in the maternity ward or at a children's hospital in the neonatal or intensive care units.

A healthy child gets a check-up once a month during their first year of life. A one-week-old child's check-up is very important, and the parent should make an appointment for it with the family nurse. At visits with the family nurse, the child is measured and weighed. Additionally, it is the family nurse's job to teach the parents about the child's eating, hygiene, care, avoiding accidents, etc. Visiting a paediatrician is not necessary for a healthy infant. If needed, the family doctor can refer the child to a specialist, such as a neurologist or orthopaedic doctor.

Before going to school, a child should visit their family doctor and a dentist. A 6 to 7-year-old child should see a family doctor for a pre-school check-up. The doctor will assess the child's development and check if he or she is ready for school. Among other things, the child's vision, hearing, and speech development are checked. In

the event of differences or changes in the child's health, the family doctor may direct the child to additional testing, to a speech pathologist, or an ophthalmologist.

This check-up should be done in spring before school so that there is time to address any possible problems, for instance, order glasses.

Health Care at School

To be accepted into a school, an abstract of the child's health-card must be submitted, listing important information about previous vaccinations, chronic illnesses, any medicines that are in regular use, and allergies. This information is essential to monitoring the child's health at school.

When sending a child to school, a parent's permission will be asked for providing health care by the school. For school-age children, the school nurse will perform a check-up for children in the first, third, seventh, and eleventh grade. The family doctor should do a check-up in the second, fifth, and ninth grade. **NB! It is the responsibility of parents to make these appointments!**

Before every vaccination, the school nurse must have the parent's written permission.

Sick children are not treated at school. If a child falls ill at school or has had a trauma, the school nurse must give him or her first aid and notify the parents. In the event of illness, see the family doctor.

8. Vaccinations

Science and technology have given us an efficient tool for protecting ourselves from many contagious diseases. Vaccines guarantee people's health both today and in the distant future. By vaccinating, you protect both yourself and everybody else from dangerous contagious diseases.

Modern high-quality vaccines with high immunogenicity ensure very good protection of the vaccinated person. It is sufficient for forming herd immunity in the population and restricting or even terminating the spread of pathogens.

Although the value of immunisation at the level of society and population is very high, we cannot fail to take into account the unique properties of the organism of the vaccinated person, especially in case of a child, as well as their age and overall condition of the immune system. A vaccine is a biologically active preparation, the general response patterns to the administration of which are well known, but individual characteristics are always possible. This causes the need to consider individual contra-indications of immunisation. As vaccines that are used in practice have undergone long-term and multi-stage clinical tests, these are usually of high quality and immunogenicity, and cause few adverse reactions. That is why there are few contraindications to immunisation.

If a child that arrives in Estonia has documents concerning vaccination in a foreign country, the previous vaccinations of the child are compared to the Estonian vaccination plan and the lacking vaccinations are performed or the vaccination series are completed.

In addition to the planned immunisation of children and youths, adults need to be vaccinated as well, especially due to epidemiological indications. The most significant factors causing the need to vaccinate adults are as follows:

- ▶ epidemiological risk situation (spread of a dangerous contagious disease),
- ▶ belonging in a risk group of infection (based on professional activity, specific behaviour, travelling, underlying or concomitant illness, belonging in communal communities)

Additional information is available from your family doctor and from the website www.vaktsineeri.ee.

9. Useful Tips and Contact Information

- ▶ In case of emergency, call 112!
- ▶ If you have health concern which does not need emergency care, always contact your family doctor.
- ▶ For minor illnesses, a family nurse can also be of assistance.
- ▶ If in doubt where to turn to, check here: <https://alustaperearstist.ee/en/perearstemo/>
- ▶ If you have a health concern but your family doctor is not available, calling the family doctor counselling line can be helpful.
- ▶ Before going to see a specialist, make sure whether a referral is necessary.
- ▶ If you cannot make it to a doctor's appointment, always cancel it so that others who need care can get it more quickly!
- ▶ Make regular visits to the dentist and have your teeth checked once a year.
- ▶ Always turn to the EHIF if you have questions about medical care or health insurance.
- ▶ Turn to the Health Board with questions regarding registration with or change of family doctors.

The client service offices of the Health Insurance Fund (EST, ENG, RUS)

Department & address:

- ▶ Tallinn, Lastekodu 48, 10144
- ▶ Pärnu, Lai 14, 80010
- ▶ Jõhvi, Nooruse 5, 41597
- ▶ Tartu, Põllu 1a, 50303

Open:

- ▶ Monday 8 a.m. – 6 p.m.;
- ▶ Tuesday, Wednesday, Thursday 8.30 a.m. – 4.30 p.m.;
- ▶ Friday 8.30 a.m. – 1 p.m.

Client information telephone **(+372) 669 6630** and e-mail: info@haigekassa.ee will answer to questions: Monday 8.30 a.m. – 6 p.m.; Tuesday, Wednesday, Thursday 8.30 a.m. – 4.30 p.m.; Friday 8.30 a.m. – 2 p.m.

EHIF e-services at the national portal:

- ▶ www.eesti.ee/eng > Topics > Health and care > Health and Medical Care

EHIF webpage about health insurance, benefits, health care services, digital prescriptions, health prevention, e-health: <https://www.haigekassa.ee/en/people> (EST, ENG, RUS)

Family doctor counselling line:

- ▶ www.haigekassa.ee/1220 (EST, RUS)
- ▶ +372 634 6630 (EST, RUS)

Arranging for primary care, incl. family doctors:

- ▶ www.terviseamet.ee (EST, RUS, partially ENG)
- ▶ Health Board's healthcare services department
(tel. +372 650 9843; e-mail: kesk@terviseamet.ee)
- ▶ 81 Paldiski Road, 10617 Tallinn

Treatment and patient guide:

- ▶ www.ravijuhend.ee (EST, RUS)

Patient's health information at the e-health patient portal:

- ▶ www.digilugu.ee (EST, ENG, RUS)
- ▶ +372 694 3943

Dental care:

- ▶ www.suukool.ee (EST, RUS)
- ▶ info@suukool.ee