

Health Insurance Scheme

April 2023

Project details:

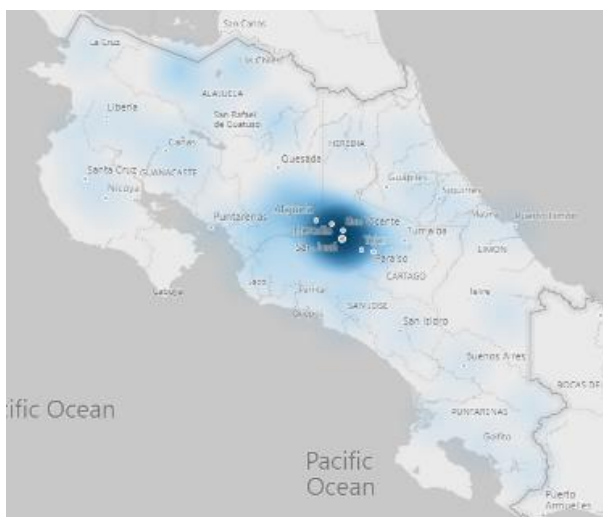
UNHCR and the Costa Rican Social Security Fund (CCSS) signed an agreement to provide 6,000 monthly spaces for health insurance to 6,000 forcibly displaced and stateless people in 2020. The agreement has

enabled UNHCR to support the Government of Costa Rica by providing over USD 7.5 million since 2020 to the CCSS to respond to pressing health needs faced by the most vulnerable asylum-seekers and refugees.

Because of the onset of the COVID-19 pandemic, the agreement was extended by addendum until March 2021. In 2023, a fourth agreement was signed allowing 6,000 monthly insurance spaces throughout the year.

Duration:	January 2020 – December 2023	
Cost:	USD 7.5 million	
Contribution:	CRC 17,156 / USD 227 Monthly insurance cost per individual	
	I Agreement 2020	USD 1.8 million
	II Agreement 2021	USD 2.3 million
	III Agreement 2022	USD 1.5 million
	IV Agreement 2023	USD 1.9 million

Beneficiaries by Department



Health Officer prepares the UNHCR-CCSS identification documents/Austin Ramirez/2023

Background

Although Costa Rica offers free healthcare services for emergency care – including to minors, pregnant and lactating women—many asylum-seekers and refugees face recurrent healthcare needs to address severe or chronic illnesses. Access to healthcare continues to be consistently identified as a critical **need** during participatory assessments.

The UNHCR-CCSS health insurance project responds to the 2019 Inter-Agency Rapid Response Plan (RRP), developed and led by UNHCR and coordinated by the UN Resident Coordinator.

Initially, the RRP foresaw provision of insurance through the national health system to 3,000 people, a figure that rose to 6,000 thanks to a favourable political environment. **The scheme promotes effective access to the right to healthcare and avoids the creation of parallel systems.**



Chronic health and serious vulnerabilities underpin the selection criteria. Potential beneficiaries are assessed and ranked according to the UNHCR scorecard criteria. Selected beneficiaries receive health insurance cards, which grant them access to all public health services throughout the country, except for CCSS benefits such as disability, pension or death insurance. Children (<18), pregnant and lactating women are excluded as they can receive free universal services from the CCSS.

- Registration and/or verification of PoC by UNHCR
- Identification of potential beneficiaries by UNHCR
- Verification of potential beneficiaries by CCSS
- Issuance of insurance numbers by CCSS & notification to UNHCR
- Issuance of insurance cards by UNHCR & delivery to PoC



A prerequisite for inclusion in the selection process is not having debts with the CCSS. However, as some persons can have outstanding debt and cannot repay or cover ongoing expenses

and, in the meantime, their medical condition worsens, UNHCR covers up to a maximum of USD 500 to ensure their re-inclusion in the CCSS insurance scheme under exceptional circumstances. In-person distribution has been reinstated on a limited basis in 2022. UNHCR provides beneficiaries with guidance over the telephone on accessing medical services.



Exit Strategy

The UNHCR-CCSS partnership complements Costa Rica's commitment to integrate asylum-seekers and refugees through the promotion of employment opportunities. Once a person receives a work permit and finds a formal job, the employer by law must provide health insurance. This allows transfer of this benefit to another asylum-seeker. Refugees and asylum-seekers are also unsubscribed from the programme if they become self-employed and require making voluntary insurance coverage payments to the CCSS.

To mitigate the risk of individuals accruing debt in case their employment or documentation situations are not resolved by the end of the project's 12 months, asylum-seekers will be automatically unsubscribed from the health insurance scheme. The Government of Costa Rica and UNHCR are currently seeking additional financial support to continue the insurance scheme and to extend it to other asylum seekers in particularly vulnerable conditions.

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