**REPUBLIC OF TURKEY**

**MINISTRY OF HEALTH**

**Treatment Services General Directorate**

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| **No**: B-10-0-THG-0-09-00-00**Re**: Health Services to be Provided under Health Tourism and Tourist Health | 13.06.2011/26160 |

**MANDATE**

**2011/41**

As a result of the implementation of Transformation in Health Program, health service provision quality, infrastructure and medical equipment of our hospitals subject to the Ministry of Health has increased and the service web and quality of our emergency health services have risen to very high levels. On the other hand, international emergency patient transfers can now be performed with helicopter ambulances and plane ambulances. Furthermore, the quality of health services will increase with the health campuses to be opened in future years at some regions of Turkey.

In this framework, we have many opportunities to provide health services at many of our hospitals to our citizens abroad and to tourists visiting our country. It has been deemed appropriate and necessary to provide health services to those who demand such health services, under principles outside the scope of Social Insurances and General Health Insurance Law 5510 and international bilateral agreements.

Those who would be provided health services in accordance with this mandate shall be considered under two main groups. First; people from abroad, preferring our country for receiving health services under **Health Tourism**. Second; people who would receive health services under **Tourist Health** for emergency treatments required during the visits of tourists, coming to Turkey for tourism purposes.

The arrangements regarding the operations and transactions in this context are listed below.

**1.** It is essential to plan and organize the services to be provided under this Mandate in a manner not to hinder the routine health services of the institution.

**2.** In provinces where too many patient applications may occur under health tourism or tourist health; if approved by the Ministry of Health, a **Foreign Patient provincial Coordination Center** will be established within a hospital in the province or within provincial health directorates.

**3.** At provinces with potentials for health tourism and tourist health; if approved by the Ministry of Health, **Foreign Patient Units** will be established within hospitals that have medical technical equipments, qualified and specialized health personnel, hotel services and service capacities.

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**4.** Hospitals with foreign patient units or provincial health directorates with foreign patient provincial coordination centers, if they deem necessary, carry out the international promotional activities of these hospitals and health services through their working capital or through purchase of services.

**5.** **Foreign Patient Call Centers** will be formed for applications of foreign patients and tourists on emergency health services and patient rights. These call centers shall be organized under the Ministry headquarters or **Foreign Patient Provincial Coordination Center**.

**6.** Employees who would work in accordance with service purchases procedures under this mandate are not subject to restrictions imposed by mandates issued by Division of Strategy Development on the determination of worker numbers that may be employed under service purchases.

**7.** It is ensured that all personnel in hospitals with foreign patient units would have their foreign language levels established and recorded together with their communication information at personnel division, and that when necessary; head physician would assign members of these personnel at the required number for a short term or invite them on a daily basis.

**8.** At hospitals in provinces without foreign patient units or without foreign patient provincial coordination centers, the operations and transactions of foreign patients shall be carried out by health tourism provincial agents, who are to be assigned by provincial health directorates.

**9.** 10% of the monthly collected amount for health services provided at all hospitals in the province shall be transferred to the working capital of the provincial health directorate until the 10th of the following month.

**10.** **Foreign Patient Unit;**

**a)** 1 assistant health personnel and 1 doctor, who can speak sufficient levels of foreign language, shall be assigned at foreign patient units to be created in hospitals,

**b)** Considering the languages spoken by the tourists visiting the region, at least 3 patient orientation personnel, who can speak advanced levels of the necessary language, shall be employed via purchase of services, and be managed according to shift system,

**c)** Operations and transactions related to the invoicing of all necessary registrations, translations, treatment prices applying this unit, shall be managed from here,

**d)** The first examinations of these patients shall be performed by the doctor of this unit and if necessary, consultation will be requested from other branches,

**e)** Patient orientation personnel, who can speak the language, shall accompany these foreign patients,

**f)** At the end of each month, foreign patient units of the hospital shall provide information to the foreign patient provincial coordination center with Annex-1/Annex-2 forms, or to the Ministry, at the end of each December by the head physician with Annex-1/Annex-2 mandate forms if there is no foreign patient provincial coordination center.

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**g)** Necessary arrangements will be in these units for; providing consultancy, orientation and guidance services by foreign patient units to our citizens living abroad coming to receive health services in accordance with bilateral international agreements, subjecting the operations and transactions to the procedures for our citizens in accordance with Social Insurances and General Health Law 5510 (provision, invoicing, pricing, etc.), and not to accept such people as foreign patients.

**11. at Foreign Patients Provincial Coordination Center;**

**a)** At least 3 assistant health personnel, 2 doctors and 2 data preparation and control operators with sufficient knowledge of foreign language shall be assigned,

**b)** If this center is located inside the hospital, sufficient number of high-quality beds shall be allocated for the in-patient division of the hospital,

**c)** Adequate number of translators with advance levels of foreign language knowledge shall be obtained through service purchases or translation services shall be procured by working capital resources,

**d)** If located inside the hospital, operations and transactions of patients coming from abroad for health tourism or under tourist health, their treatments shall be primarily made at hospitals with coordination centers; if adequate health services can’t be provided here, these health services shall be provided at other hospitals of the Ministry in the relevant province,

**e)** First medical assessment and examinations of the patients admitted to the provincial coordination center shall be made by the doctors in this center, and consultation from specialist doctors will be requested if necessary,

**f)** Patients whose treatments are over and who are released shall be reported by the center regularly to the Ministry with Annex-1/Annex-2 form; approval of provincial coordination centers, not reporting patients at an adequate level in two consecutive years, shall be canceled,

**g)** Although the foreign patient provincial coordination center is located inside the hospital, the personnel working here, including their full employee rights, shall be directly subordinated to provincial health directorates, and the transactions shall be carried out by being subordinated to the assistant manager responsible for hospitalized treatment,

**h)** All urgent patient transportations (Land/Air) presented in this context shall be reported by provincial health directorates with Annex-2 forms to the Ministry of Health.

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**12. at Foreign patient call center;**

**a)** If patients visiting Turkey from other countries and not speaking Turkish, or tourists who require urgent health services call 112 emergency call centers, these calls shall be directed to another foreign patient call center which would be established at foreign patient provincial coordination centers or at the Ministry of Health; additionally, a similar organization shall be made at Alo 184 call center for complaints related to patient rights and foreign language calls shall be directed to foreign patient call center,

**b)** These complaints incoming to the call center shall be transferred to SABİM or patient rights units in accordance with the relevant legislations,

**c)** 2 doctors and 3 assistant health personnel with adequate level of foreign language shall be employed at these call centers and they shall work on a shift basis,

**d)**

Adequate number of translators with advance levels of English, German, Arabic and Russian knowledge shall be obtained through service purchases or translation services shall be procured by working capital resources, especially at summers,

**e)** For complaint calls, patient complaint and communication information shall be taken and they shall be followed-up in line with the relevant legislations in coordination with SABİM and patient rights units,

**f)** The proceeds to be gained from emergency patient transportation under this mandate shall be deposited to the working capital of the provincial health directorate of the province in which the first intervention to the patient is made and the patient is put to the ambulance (land ambulance, helicopter ambulance, plane ambulance).

**13. Establishing the Prices of Health Services Covered by the Mandate:**

A price tariff is set for the prices of health services covered by this Mandate in accordance with Health Services Basic Law 3359, Article 3/c. The established price tariff and its approval for implementation principles are attached.

Hospital head physicians desiring to provide health services under this Mandate and having a foreign patient unit or provincial health directorates with foreign patient provincial coordination centers, execute a service protocol in accordance with the attached sample protocol together with people insured abroad through insurance agencies, travel agencies, assistant institutions, consultancy and intermediary institutions and similar private legal entities, and send a copy of this protocol to the General Directorate.

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In these protocols; in addition to the procedures and principles defined in the mandate annex, issues that have to be observed in accordance with bilateral cooperation agreements or international agreements on price tariffs for patients from abroad shall be taken into account.

Following the entering into effect of this mandate, Mandate 5605 issued by Treatment Services General Directorate of the Ministry of Health dated 07.04.2004 is annulled.

I hereby request the immediate implementation of the aforementioned arrangements as the implementation is communicated to the other institutions related to all health institutions subject to Ministry of Health.

**Signed**

**Prof. Dr. Nihat TOSUN**

**on behalf of the Minister**

**Undersecretary**

APPENDICES:

1. Foreign Patient Unit Report Form;

2. Foreign Patient Emergency Transportation Report Form;

3. Approval on the price tariff to be implemented under this Mandate and implementation principles

4. Sample Protocol

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| DISTRIBUTIONFor necessary action:to 81 Provincial Governors  | CC:-T.R. Ministry of Finance-T.R. Ministry of Foreign Affairs-T.R. Ministry of Culture and Tourism-TÜRSAB-TUROFED-Association of the Insurance and Reinsurance Companies of Turkey - Foreign Insurance Agencies |