

MEMO FOR CABINETBy the Hon. Minister of HealthMutual Assistance in the Matter of Special MedicalTreatment and Climatic FacilitiesProposed by the Council of Europe

1) In general terms, the aim of the agreement is to create facilities for beneficiaries of certain social security schemes, listed in Article 1, to receive required treatment not available in their own country. In other words, it provides for those beneficiaries who, though entitled to full medical benefits in their own country, are nevertheless unable to obtain certain specialised treatment because it is not available therein.

2) The contribution of the receiving country is to "endeavour to have admitted to medical establishments or spas in its territory which can provide appropriate medical treatment any persons referred to in Article 1, for the medical treatment required which they need but which is not available in the territory of the Contracting Party where they reside". (Article 2)

3) The contribution of the sending country is to pay all the expenses connected with such treatment (para 2 of Article 6).

4) The Malta Government has been providing these facilities for more than 10 years. Patients suffering from T.B., malignant and heart diseases and some other serious conditions are sent to U.K. or to Rome for the required treatment. Expenses of such treatment were invariably paid by the Government. Travelling expenses were also paid by the Government except when the patient was found to be financially in a position to meet this comparatively small expense.

5) Treatment in Rome is given under arrangements with the Knights of Malta at fees which are comparatively low.

6) Before Independence, treatment, in U.K. was arranged direct with the U.K. Ministry of Health. The fees charged were also comparatively low, (although not so low as in Rome) because we were only charged the hospital fees. After Independence, the U.K. Ministry of Health was no longer responsible for the arrangements and we now have to deal direct with the consultants as our patients have become, for all intents and purposes, private patients.

In addition to the hospital fees, therefore, we now have to pay also all the fees of surgeons, consultants, anaesthetists, radiography, pathological examinations etc. The cost has increased considerably especially where surgery is necessary. The cost of a heart or brain operation alone may rise to as much as £600.

7) The principal advantage of participating in the agreement is the opportunity which it affords to have our sponsorship scheme run jointly between this Government and the U.K. Government who is one of the signatories of the agreement.

Under the present system, we are too much at the mercy, so to say, of the consultants, whereas if we succeed in concluding negotiations with the U.K. Government under the provisions of the agreement, the advantages may be financial as well as administrative.

8) There is also, I think, the possibility of reverting back to the pre-Independence arrangements whereby we were charged only the hospital fees. Sub-para 3 of Article 6 seems to indicate this possibility. It reads as follows:-

"The liaison authorities of two or more Contracting Parties may, by negotiation, lay down methods of assessing the amounts to be paid in accordance with the second subparagraph of paragraph 2 above. For this purpose no account can be taken of charges higher than those applicable to persons affiliated to the institution competent for the place of treatment and corresponding to the institution to which the person in question is affiliated; the liaison authorities concerned may, however, jointly agree to waive this rule in special cases".

9) The stipulation in Article 1 would presumably limit the benefits envisaged in the agreement to those persons who qualify for full or partial Institutional Relief under the local National Assistance Act. It is estimated, however, that more than 50% of the patients sent for treatment in U.K. are so qualified.

10) The stipulation in Article 7 calls for the comments of the Director of Social Services. It is understood that cash benefits payable under the National Assistance Act are suspended whilst the person concerned is away from the Island. The Director of Social Services may wish to see whether conformity with this stipulation could be arranged.

11) The remaining articles concern procedure and machinery of consultation and co-ordination which could be discussed if and when it is decided to participate in the agreement.

In view of the above, Hon. Ministers are asked whether Malta should become a party to the agreement.