

Health Insurance Scheme

September 2022

Project Details

UNHCR and the Costa Rican Social Security Fund (CCSS) signed an agreement to provide health insurance to 6,000 people of concern in 2020. The agreement has enabled UNHCR to support the Government of Costa Rica by providing USD1.8 million 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. During 2021, another agreement was signed expanding insurance coverage to 10,000 people of concern through to February 2022. The agreement outlined UNHCR support to the Government of Costa Rica, providing USD 2.2 million to the CCSS for the monthly payment for each individual included. As of March 2022, another agreement was signed thanks to the availability of funds, continuing the insurance of 6,000 vulnerable people of concern. This last agreement had a cost of USD1.5 million to cover monthly insurance.

Duration:	March-December 2022		
Cost:	USD 1.5 million		
Target Beneficiaries:	6,000 asylum seekers and refugees		
Contribution:	CRC 16,091 / USD 25 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

Background: Despite the Costa Rican Government's efforts to address the needs of this population, the high number of claims severely strains the asylum system, particularly due to the rapid increase of Nicaraguan asylum claims upon the opening of land borders in April 2021. By the end of last year, Costa Rica was the world's 4th largest recipient of new individual asylum claims.

This rise in numbers caused substantial delays in the Refugee Status Determination (RSD) process. Currently, eligibility interviews require a 5 year wait. These waiting periods increase vulnerability for the population of concern by limiting their access to services and depleting what few savings they have. This situation coincides with an unemployment rate of 14.4% (as of January 2022), that has gradually been recovering since the start of the pandemic, when unemployment rates had soared to an unprecedented 24.4%.

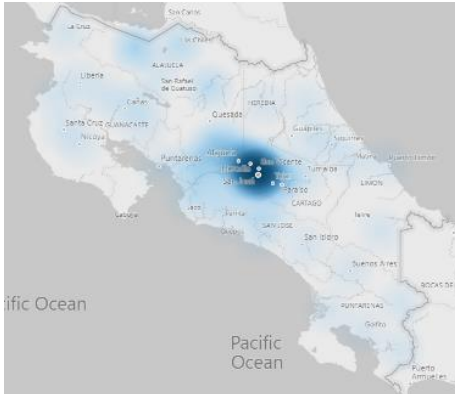
Although Costa Rica offers free healthcare services for emergency care – including to minors, pregnant and lactating

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. The RRP sought USD 5 million to cover various immediate needs of 10,000 highly vulnerable Nicaraguan asylum seekers, following the results of a socio-economic evaluation conducted in June and July 2019 which revealed that 29% of 3,555 surveyed households suffered from severe or chronic medical conditions.

Initially, the RRP foresaw provision of insurance through the national health system to 3,000 people of concern, 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.

Geographical distribution of insurance



The Insurance Scheme: Between 2007 and 2019, UNHCR could only provide health insurance to a limited number of asylum seekers (less than 100) through a partner agency. The new UNHCR-CCSS alliance initially granted medical insurance to 6,000 people of concern for twelve months and later, during 2021, another agreement was signed expanding insurance coverage to 10,000 people of concern up to February 2022. A third agreement was signed to extend coverage until December 2022. This represents a considerable progress in the provision of health services to the vulnerable population of concern located throughout Costa Rica's provinces.

Selection: 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 CCSS universal services.

Steps of selection process

- 1. Registration and/or verification of PoC by UNHCR
- 2. Identification of potential beneficiaries by UNHCR
- 3. Verification of potential beneficiaries by CCSS
- 4. Issuance of insurance numbers by CCSS & notification to UNHCR
- 5. Issuance of insurance cards by UNHCR & delivery to PoC

Implementation: A prerequisite for inclusion in the selection process (summarised on the left) includes not having debt with 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. Due to the COVID-19 pandemic and the temporary suspension of in-person distribution of insurance cards at its premises, UNHCR entered into an agreement with the Costa Rican Postal Service for card delivery. 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 Strategies: 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. People of concern are also unsubscribed from the programme if asylum seekers become self-employed and required to make 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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