

Reimbursement of expenses for elective healthcare

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Persons insured in Latvia can have their expenses reimbursed for elective healthcare services received in another Member State of the European Union or the European Economic Area (hereinafter – 'Member State') paid from the person's personal funds.

Elective services received without prior authorisation (Form S2) cannot be reimbursed for treatment received in Switzerland or the United Kingdom as they are not covered by [Directive 2011/24/EU](#) of the European Parliament and of the Council on the application of patients' rights in cross-border healthcare.

In order to be reimbursed for these expenses, the following documents must be submitted to the National Health Service of the Republic of Latvia within a year of being provided with healthcare

[Application;](#)

documents proving payments, which allow identifying the recipient of the services;

documents issued by the healthcare provider indicating the healthcare services provided to the person; the period during which the health services were provided; the prices of the healthcare services provided to the person separately for each service, the payment for the healthcare services provided; the diagnosis on the basis of which the person was provided with the healthcare service;

a prescription or referral from a general practitioner or specialist if the person has received elective healthcare services;

confirmation that the person is not considered insured under another social security system.

Important facts to consider:

reimbursement of expenses is possible only for services that are paid for in Latvia from the State budget funds;

expenses are reimbursed in accordance with the applicable service tariffs in Latvia, which may differ from the amount paid.

<https://www.vmnvd.gov.lv/en/reimbursement-expenses-elective-healthcare>