Accessing treatment abroad

Governing legislation at a glance

As a resident in the **EU, Iceland, Liechtenstein, or Norway (EU/EEA)** with healthcare coverage, you have the right to medical treatment in any other EU/EEA country. Your country of residence will cover part or all of your medical costs.

Contact your country's National Contact Point to find out about your patient rights and get all the information on the documents and the procedures to be followed.

For more information, see Frequently Asked Questions for outgoing patients. Information about rules for social security coordination with the UK can be found here.

Treatment abroad

OPTION 1		OPTION 2
Regulations (EC) Nos 883/2004 and 987/2009 that coordinate social security systems	GOVERNING LEGISLATION	Directive 2011/24/EU on patients' rights in cross-border healthcare
Public or contracted private healthcare providers	PROVIDER	**Any public or private healthcare providers**
Planned treatment: Prior authorisation (form S2) **Unplanned necessary treatment:** European Health Insurance Card (EHIC)	CONDITIONS OF USE	Applies **only to treatments covered** by the national insurance plan of the home country. **Planned treatment:** May need prior authorisation with a country-specific form (not the S2). **Unplanned necessary treatment:** No EHIC requirement
Mostly covered directly by national health insurance providers. Payment might be requested if this is the normal practice for patients in the treatment country.	PAYMENT	**Patient pays, full payment upfront**
According to the **treatment country's coverage plan** (tariffs, procedures, etc.)	REIMBURSEMENT	According to the **home country's coverage plan** (tariffs, procedures, etc Potential partial or full reimbursement after filing for reimbursement in home country. Estimated expenses (prior notification) provided prior to treatment in some countries
Any EU/EEA Member State and **Switzerland** Different rules in place for the UK	TREATMENT COUNTRIES	Any EU/EEA Member State **(excluding Switzerland)**

See 'Section 1.2. Who is entitled to cross-border healthcare? Which countries are covered?' in the Frequently Asked Questions for outgoing patients for more information on exceptions, or contact your National Contact Point.

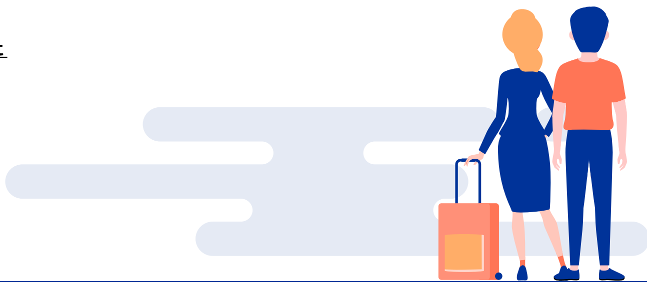
Tariffs and reimbursement

OPTION 1		OPTION 2
Regulations (EC) Nos 883/2004 and 987/2009 that coordinate social security systems	GOVERNING LEGISLATION	Directive 2011/24/EU on patients' rights in cross-border healthcare
Same tariffs as for patients insured in the treatment country **(provided that the treatment is accessed with an S2 form or the EHIC)**	TARIFFS	Same tariffs as for patients insured in the treatment country
Full reimbursement according to the rules and tariffs of the treatment country	REIMBURSEMENT	Reimbursement according to the **home country's coverage plan** and only if: **1.** the treatment is covered by the home country's social security scheme, **2.** prior authorisation was obtained if required, and **3.** all required documents (proof of treatment and costs, etc.) are submitted. In this case, the patient is reimbursed up to the amount they would have been reimbursed for treatment at the home country, or the total costs, whichever is less.
In case of planned treatment **(with S2 form)**, food, accommodation, and travel are only covered if they would have been covered for the same treatment in the home country.	EXTRA COSTS	Food, accommodation, and travel are not covered, although some Member States may reimburse in the case of persons with disabilities.

Useful links

- Your Europe: Health
- European Health Insurance Card
- Manual for Patients on accessing healthcare in any EU/EEA country
- National Contact Points

Please see Section 3.3 of the European Commission's Manual for patients for more details on the pros and cons of both legal frameworks.



Luxembourg: Publications Office of the European Union, 2026

PDF ISBN 978-92-68-34719-5 doi: 10.2875/4632537 EW-01-26-004-EN-N