

New healthcare governance - new program

As described in our previous (April 2008) issue, the national referendum held on 9 March rejected the visit fee and the hospital daily fee in Hungary. The health insurance reform has been in the crossfire of constant professional and political controversies, and with the support of the opposition, sufficient signatures have been collected for a new referendum aimed to prevent the restructuring of the insurance system. All this put into doubt the implementation of the new health insurance act and also created uncertainty among potential investors. As a consequence, on 30 April 2008 the Prime Minister initiated the acquittal of the Minister of Health, Ágnes Horváth. Due to the acquittal of the Minister and the uncertainties about further healthcare reform, the junior coalition party (which delegated the Minister) left the coalition. The party also recalled

its ministers and state secretaries from the whole government, including Gyula Kincses, Secretary of State of the Ministry of Health, former Director General of ESKI. The joint governance thus ended on 30 April 2008.

From May 2008 the Hungarian Socialist Party rules as a minority government. The new **Minister of Health** in the restructured government is **Dr. Tamás Székely**, former Deputy Director General, then Director General of the National Health Insurance Fund. The new **Secretary of State** is **Dr. Mária Vojnik**, member of the Health Committee and the Occupational and Employment Committee of the Parliament. Mária Vojnik had already served as Secretary of State at the Ministry between 2003 and 2006.

The new Minister of Health promotes his new program in the spirit of security and partnership. He intends to restore the confidence of insured persons in healthcare and to improve the

professional prestige of health workers. To achieve this, he promises to create exact and unequivocal regulations, sustainable health financing, and the unity of prevention, treatment and rehabilitation.

The emphasis will be shifted from the reform of insurance to the improvement of the quality of care, or in general, to the improvement of health status. The Minister mentions among his most important tasks the continuation and strengthening of major public health programs in Hungary (cardiovascular diseases, cancer, youth health, emergency care), thereby the improvement of the health and the quality of life of the population. Equally important role will be given to the prevention and to the improvement of the quality and safety of care.

Besides strengthening national programs, the Minister considers it an important task to improve the situation of general practitioners. As a first step in this process, he successfully concluded an

agreement with the Hungarian Medical Association a few days before his appointment as Minister of Health, entrusted by the Prime Minister as a negotiator. The agreement was meant to relieve the financial problems that fell on primary care practices as a result of abolishing visit fee payments to general practitioners. According to the agreement, the fixed practice fees will be increased, the checking of health insurance eligibility will be rewarded, extra fees will be granted to general practitioners for additional specialist examination and for the employment of additional health professionals. Annually this would mean a total of HUF 7.1 billion, which is a 12 % increase of revenues in primary care.

As a way to improve the health insurance system, the Minister sees best to revoke the act on health insurance approved in February 2008.

According to the proposal of the Minister of Health presented to the Parliament on 9 May, the Act No I of 2008 on Health Insurance Management Funds is to be annulled. The justification for introducing the bill of annulment is

that the health insurance model in the approved Act includes solutions and regulates instruments whose judgement and reception have failed to bring political, social and professional consensus. The proposed bill initiates the repeal of these elements, while recommends to retain provisions that have already become part of healthcare legislation, as their abolishment would entail lack of regulation in certain areas (e.g. regulation of waiting lists, management of healthcare data). The proposal is supported by the Healthcare Committee of the Parliament as well.

On its session of 14 May 2008 the government adopted a resolution that the Minister of Health shall reconsider the statutory health insurance system until 30 June and in accordance with it shall prepare a health insurance policy conception and a plan of coordinated measures necessary for the changes. The main objectives of the health insurance conception involves the increasing of the efficiency of the system, the financing of quality healthcare, and the creation of safer patient care. The details and the final

proposal will be worked out jointly with professional organisations, and the new legislation may be submitted to the Parliament by mid-September.

The goals of development include the equalisation of regional inequalities, the creation of conditions for flexible and responsible financing of service providers, and the strengthening of the insurance function. The latter means that the National Health Insurance Fund would have more freedom to determine which providers to make or break contract with, and would have more rights and means for performing inspection.

There has been a change in the leadership of our institute as well: after his mandate as Secretary of State expired, Dr. Gyula Kincses is again the Director General of ESKI. In the future we plan to publish our newsletter more frequently, following important news and events more closely.

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Major public health programs in Hungary

National program for the prevention and treatment of cardiovascular diseases

A long-term strategic program, in harmony with the principles of the EU's Health Council, for the reduction of the risk of cardiovascular diseases, their effective prevention, early recognition and efficient treatment. The health promotion, therapeutic and rehabilitation activities in cardiovascular diseases have close ties with current and future programs of public health.

Program for the development of emergency care

The goal of the program is to create an equitable, patient-centered and efficient emergency care, where the interconnected emergency units operate in a regional system. The program also includes the

development of ambulance services with a maximum waiting time of 15 minutes.

National infant and child health program

The program intends to direct attention to the health of children and the healthcare system of infants and children, since it has a significant impact on the health culture of the next generation. The long-term program is built on the principle that the period from conception to age 18 is critical for the physical and intellectual performance of later ages.

National cancer control program

The goal of the program is to reduce the morbidity and mortality of cancer, and to increase the quality of life of patients and their relatives. The program is expected to create a healthier environment and a well-equipped care system enabling state-of-the-art diagnostics and efficient treatment modalities.

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