

PATIENT PAYMENTS IN CENTRAL AND EASTERN EUROPEAN COUNTRIES
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Policy paper Bulgaria: Patients' payments and the problems in medical services provision in Bulgaria

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Abstract:

Bulgarian patients are required to pay co-payments (flat-rate fees) for each visit to general practitioner and medical specialist, and for the first 10 days hospitalisation per year. There is a wide range of exemptions and fee reductions for certain population groups. There is also evidence on widely spread informal patient payments in the country.

The results of focus group discussions and in-depth interviews indicate that formal patient payments are seen by all groups as an additional source of health care financing though of no decisive significance. According to health care providers, official patient charges restrict health care demand but the direct collection of these payments by physicians is inappropriate and is insulting to their profession. Consumers are divided in their attitudes toward formal patient payments depending on their age, social activity and economic status. The opinions of policy-makers and insurers vary considerably. One common point, even though expressed only by few, is the suggestion for deductibles instead of co-payments.

Overall policy recommendations: (1) the legislation on patient payments in Bulgaria need to be carefully revised and the application of these payments should be specified; (2) the collection and use of patient payments should be administratively regulated by creating a pool for that purpose; (3) patient payments need to differentiate based on patients' health status, demographics, socio-economic status, service type and patients' route; (4) a strategy should be worked out against the informal payments

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