

# Experiences of the Focus-Group Discussions and In-Depth Interviews in Hungary

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# Content

- Key features of Hungarian Health Care System
- Method
- Results

Focusing on the goals of patient payment

Reflecting on the experiences of “visit fee” 2007-2008

- Improve efficient use of services
  - Opinions
  - Facts
- Generate additional resource
  - Opinions
  - Facts

# Key features of the Hungarian public health care sector

- Insurance-based public health care sector
- The total health expenditure was accounted for 7.4% of GDP in 2007
- Significant role of out-of pocket payments, especially in funding medicine

## **General practitioners**

- Mostly work in private practices
- Reimbursed on a capitation base combined with fee-for-service reimbursement

## **Medical specialists**

- Work either in private practices or in hospital units.
- Paid via fix salary

## **Hospital in-patient care**

- Provided mainly by state hospitals
- Funding is based on diagnose-related groups (DRG)

# Method

- July-September, 2009
- 8 focus group discussion:
  - 5 with **consumers**: working individuals, families with children, pensioners, students, and individuals living in rural areas.
  - 3 with **providers**: GPs, out-patient specialists and physicians in city hospitals.
- 7 in-depth interview:
  - 4 Health insurance representatives
  - 3 Health policy-makers

# Main findings



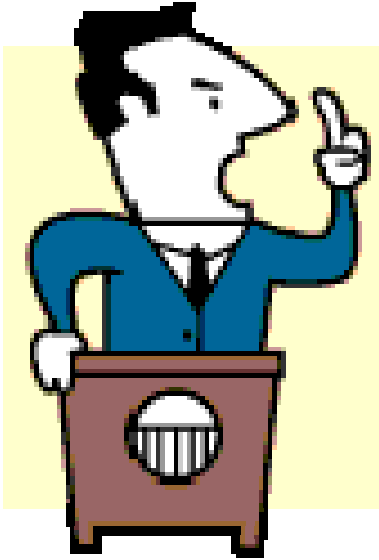
## Policy-makers and health insurance representatives

- Emphasise the necessity of formal patient payment in Hungary.
- See formal patient payments as an adequate instrument for
  - increasing the efficiency of health care utilisation
  - and promote health consciousness among the population.

## Health care consumers and providers

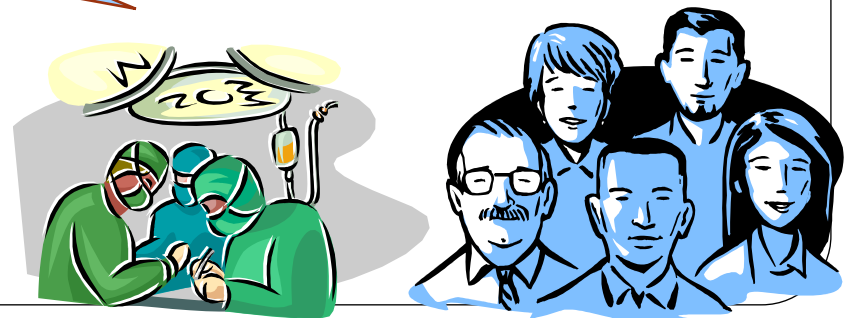


- Doubt the need of official co-payments.
- Mostly consider these payments a resource for health care provision.
- Negative experiences related to the introduction of “visit fee” in 2007.
- Scepticism and disappointment about health care system and health care reforms.



Efficiency,  
unnecessary visits,  
health  
consciousness

Bad quality,  
lack of  
resources...



# Decreasing utilisation – consumers



## Pro

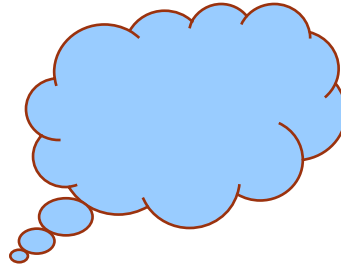
“When the patient payment in 2007 was introduced fewer people went to see the doctor and I supposed that these are the really ill people who needed to be here.”



## Contra

“In my opinion policy makers just gave a name to make visit fee acceptable.”

“I think this explanation is ridiculous because only few people who go to the doctor in unreasonable cases.”



# Decreasing utilisation – physicians



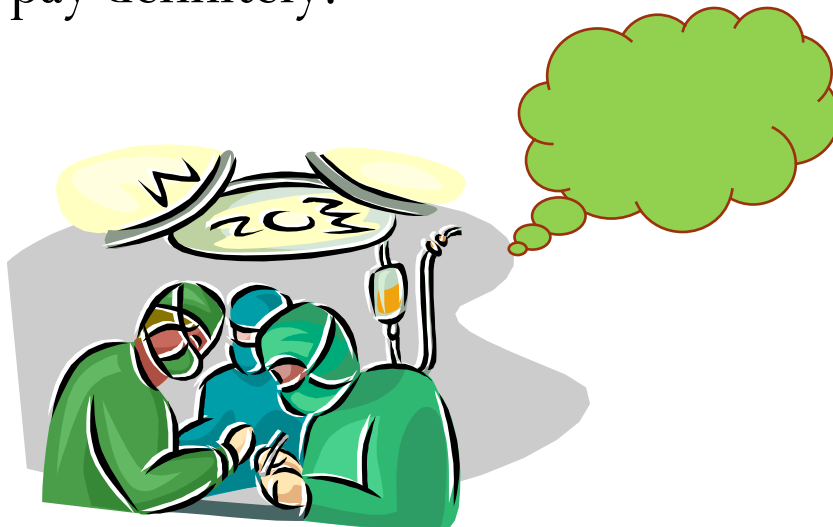
Pro

“Those, who never visit their GPs and go to hospitals and use emergency care first, should pay definitely.”



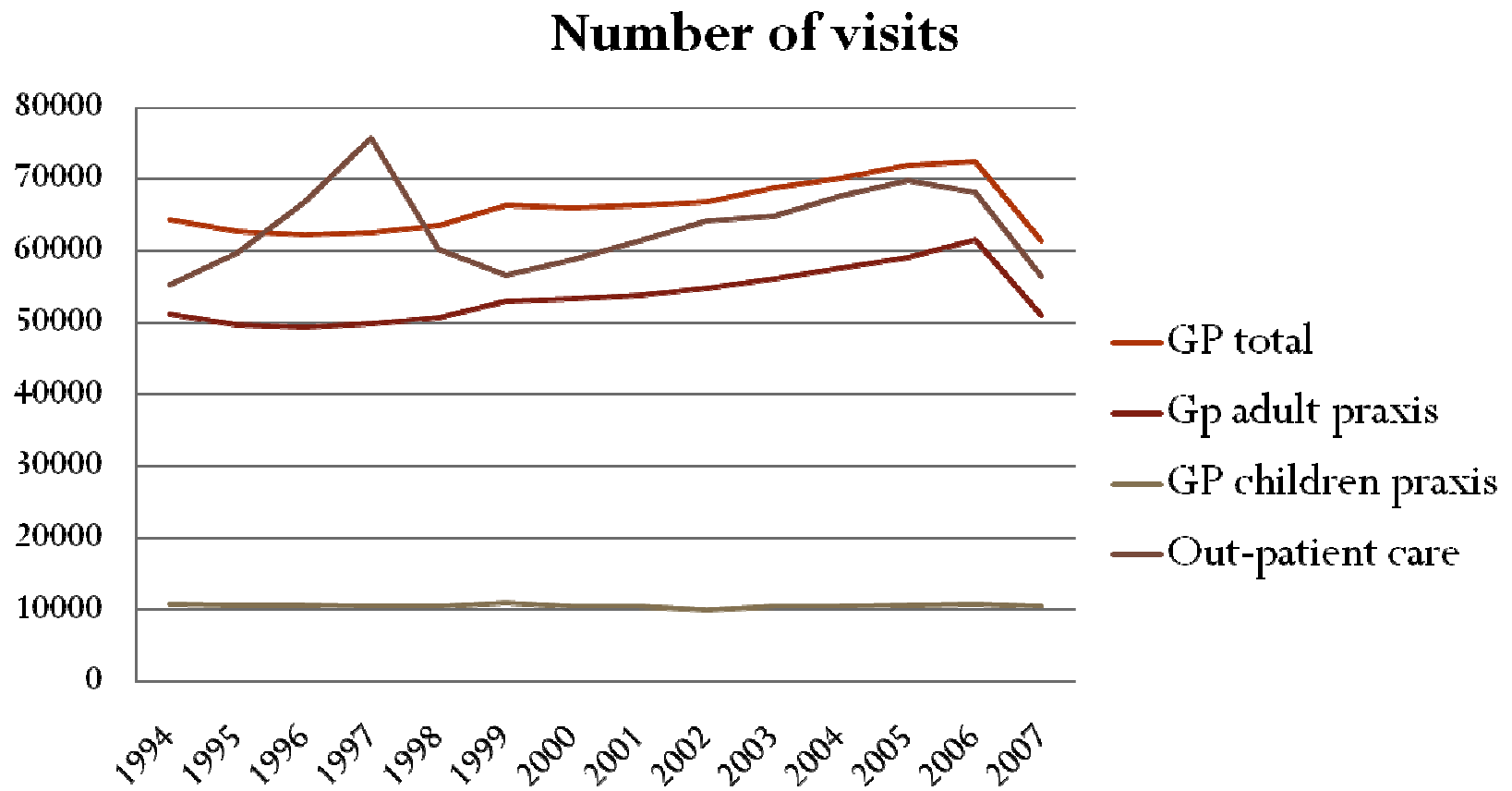
Contra

“I recognised that there were people who cannot access the health care, because they couldn't afford the payment.”





# Decreasing utilisation – Facts



# Generating resources - consumers



More resource is needed...



But visit fee was not the best solution

“This whole system is dying. I was in hospital in the last few months and it was horrible.”

“I am not sure if the collected money went to the place where it was most needed.”

“I would pay patient payment if I got better services.”

“I don't know what that 300 HUF is enough for. Maybe the costs were higher.”



# Generating resources - physicians



More resource is needed...



But visit fee was not the best solution

“The whole health care system is so close to bankruptcy”

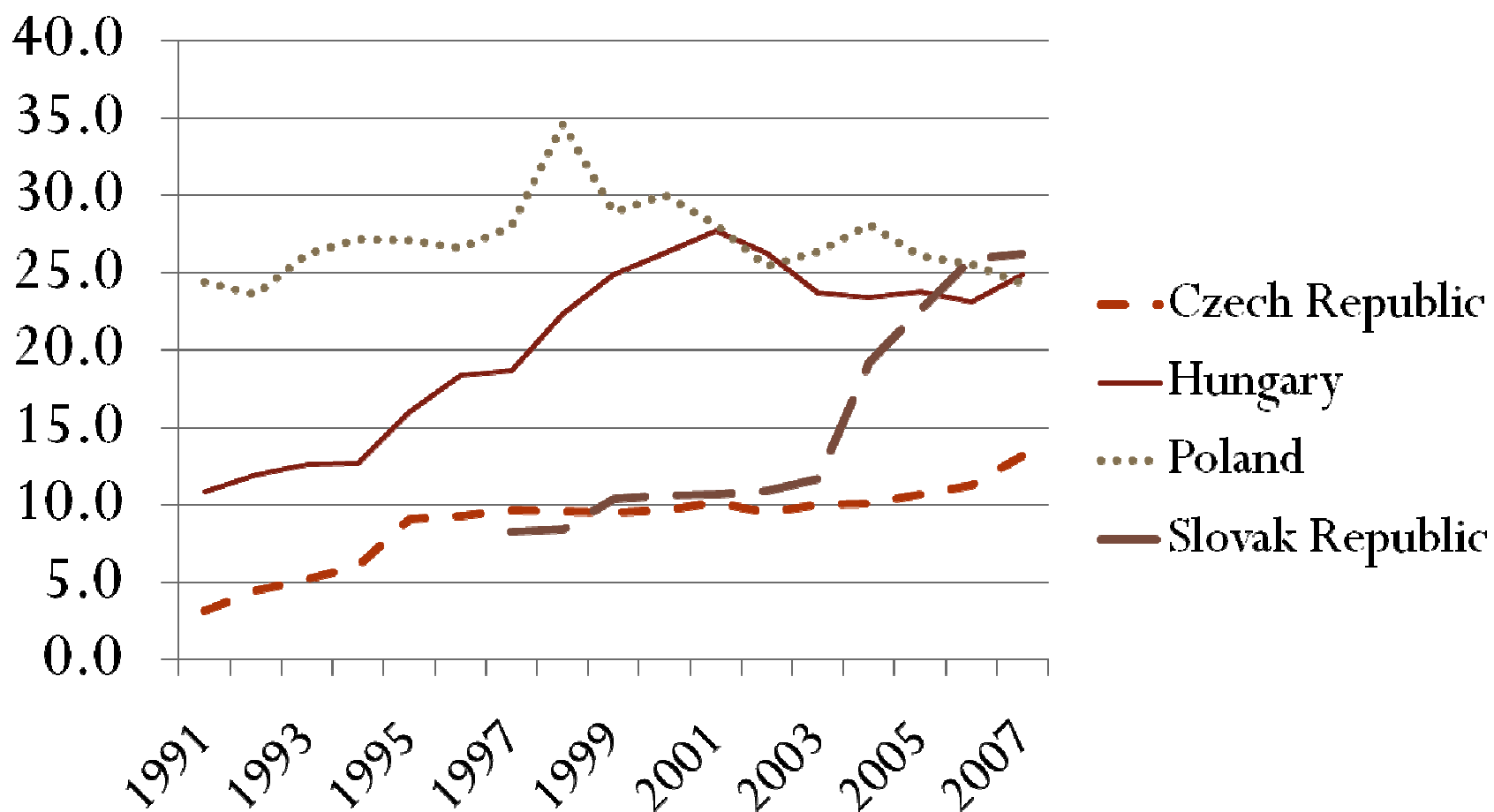
“We have no exact idea about where that incoming amount, has gone.”

“The whole health care is in ruins.”

“We have not got anything from that money”

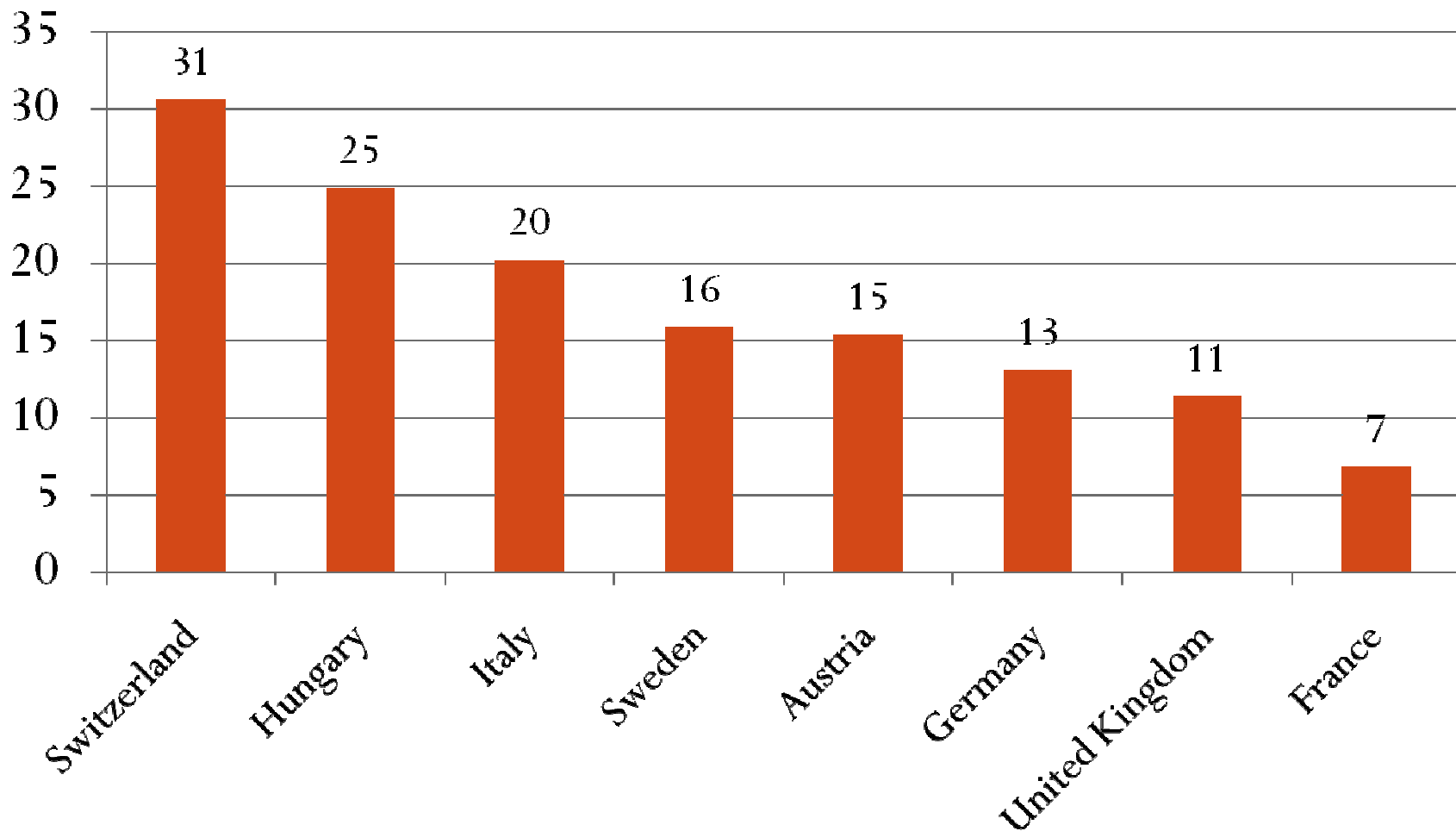


## Out-of pocket payments of the population (% of total health expenditure)



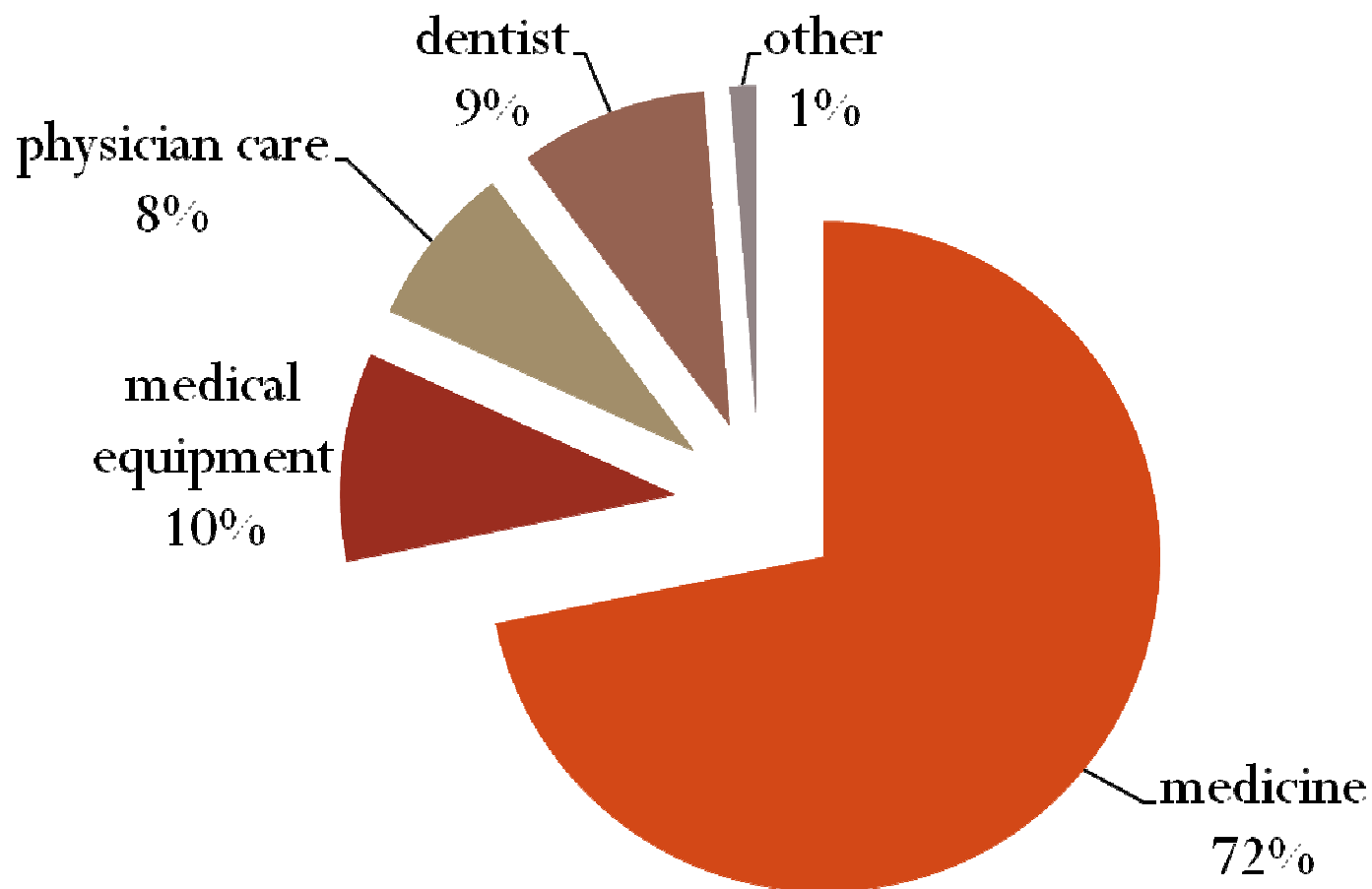
Source: OECD, Health Database, 2009

## Out-of pocket payments of the population (% of total health expenditure, 2007)



Source: OECD, Health Database, 2009

# Repartition of out-of pocket payments of the households (2007)



Source: Central Statistical Office, Hungary

[http://portal.ksh.hu/pls/ksh/docs/hun/xstadat/xstadat\\_eves/tabl2\\_02\\_06i.html](http://portal.ksh.hu/pls/ksh/docs/hun/xstadat/xstadat_eves/tabl2_02_06i.html)

# Summary

- No consensus
- **Policy-makers** see formal patient payments as an adequate instrument for decreasing unnecessary visits and promoting healthier life style.
- **Consumers and providers** call for additional resource
- But “visit fee” was not the adequate solution due to
  - High administrative costs and
  - Abuses

# Campaign of the opposition: Don't let them lamb down you...

**ne hagyd, hogy téged is megkopasszanak!**

**ne légy birka!  
mert a bőrödet is lenyúzzák!**

szociális népszavazás  
2008. március 9.

Igen

FIDESZ

Fidelitas



# Campaign of the government



Thank you for your attention!

