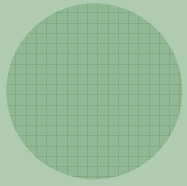


STAKEHOLDERS' OPINION ON FORMAL CO-PAYMENTS FOR HEALTH CARE SERVICES: EVIDENCE FROM SIX CEE COUNTRIES

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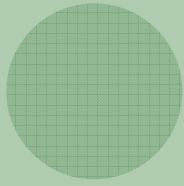
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PATIENT PAYMENTS IN CEE COUNTRIES

- ⊙ Failed attempts to introduced formal payments for services in a basic benefit package due to public and political opposition
- ⊙ Existing payments for services: informal or quasi-formal patient payments, payments for privately purchased health care services due to poor access to public health care



OBJECTIVE

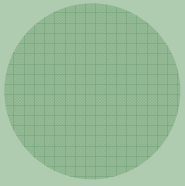
To study the opinion on formal services co-payments among different groups of health care system stakeholders in six CEE countries - Bulgaria, Hungary, Lithuania, Poland, Romania and Ukraine.

Bulgaria - obligatory formal charges since 2000

Hungary - obligatory charges between 2007-2008

Lithuania - general rules, no comprehensive system of formal patient payments

Romania, Ukraine, Poland – discussions or plans



METHODOLOGY

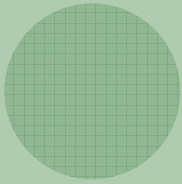
Data collection

- ⦿ Focus group discussions (N= 68) and in-depth interviews (N= 53) (*Qualitative data*)
- ⦿ Self –administered questionnaire (N= 546) (*Quantitative data*)

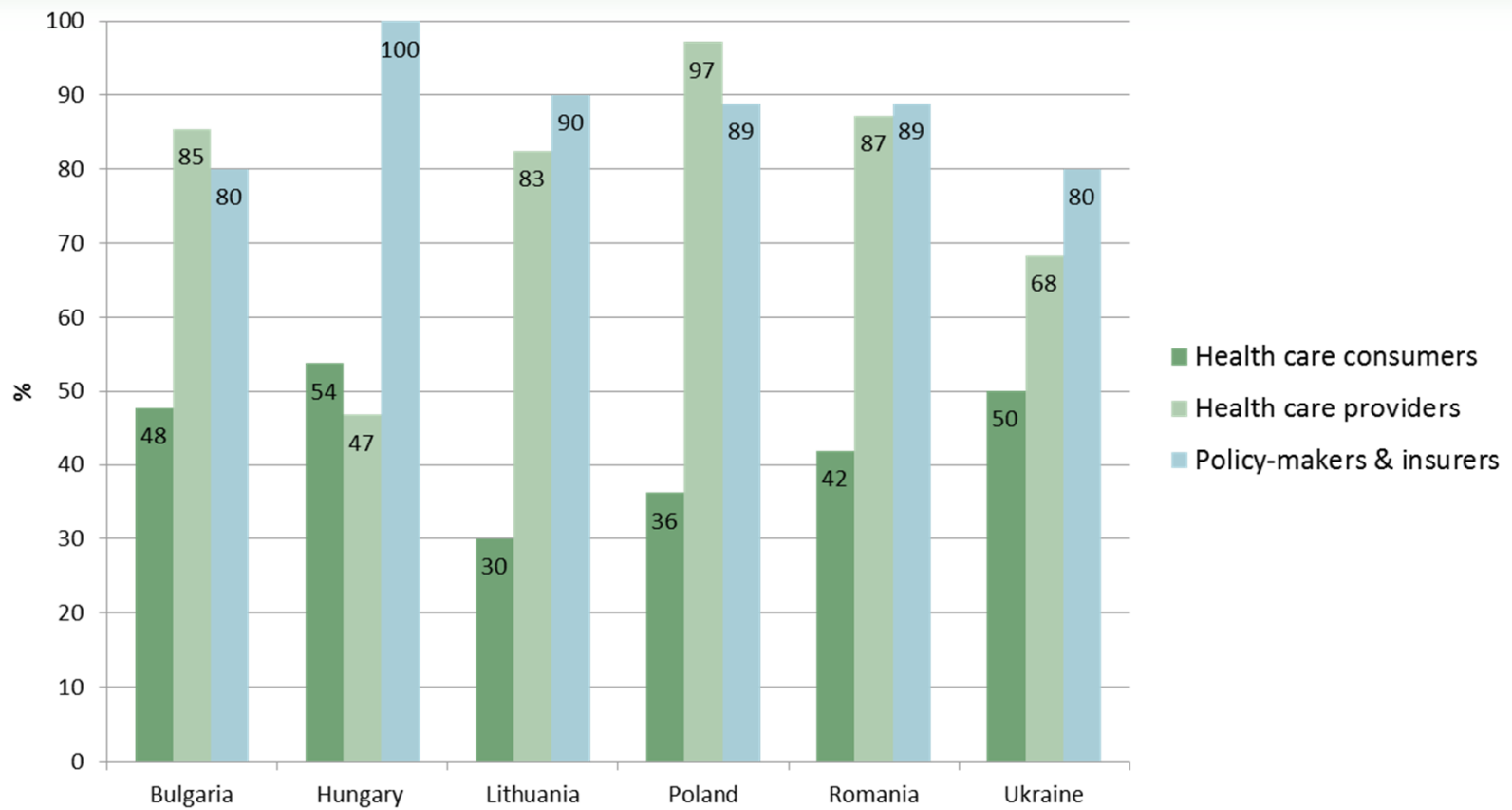
Target groups: health care consumers, health care providers, policy-makers and health insurance representatives

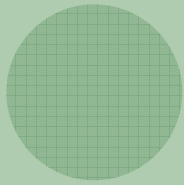
Data analysis

- ⦿ Qualitative data: content analysis of transcript (inductive approach)
- ⦿ Quantitative data: Pearson Chi-square test /Fisher's exact test

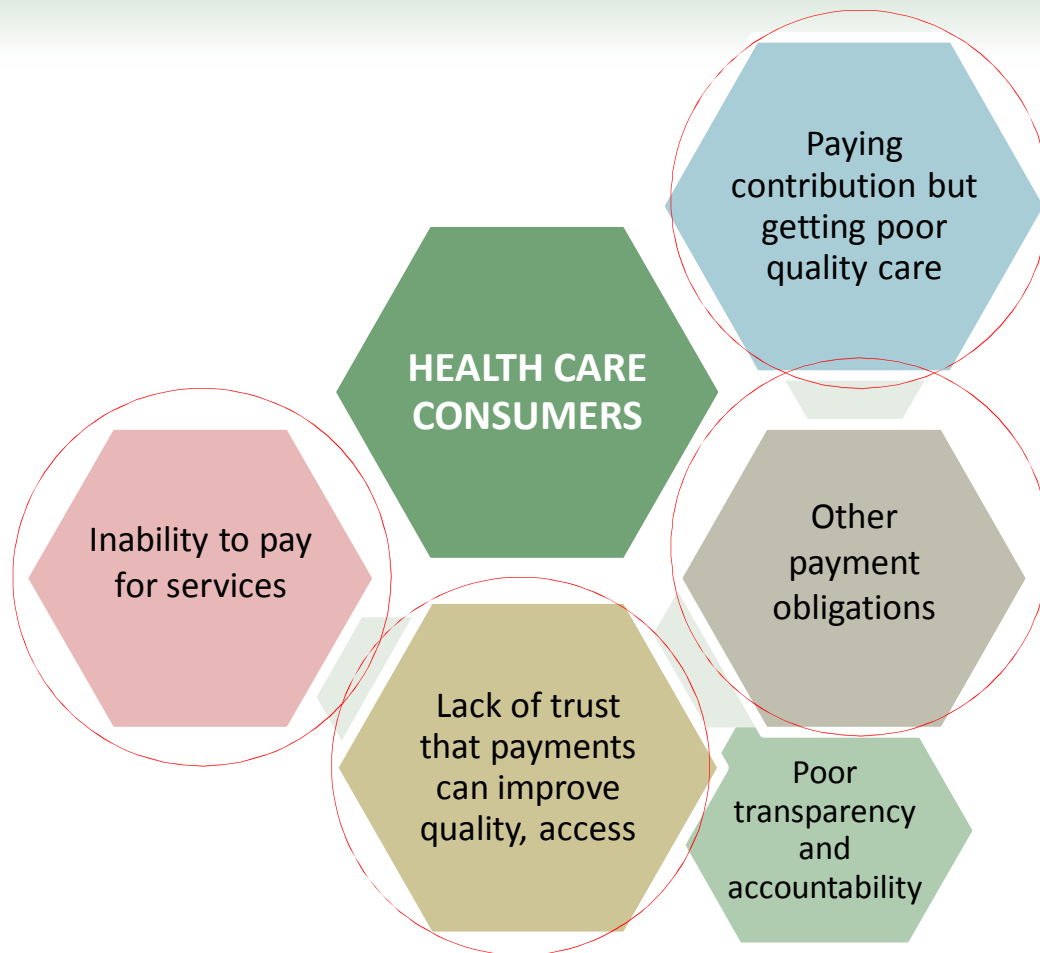


APPROVAL OF PATIENT PAYMENTS





HEALTH CARE CONSUMERS OPPOSITION TOWARDS PAYMENTS



We should not pay extra because we pay insurance contributions. We don't know what happens to this money"

(Consumer, family with children, city, Poland)

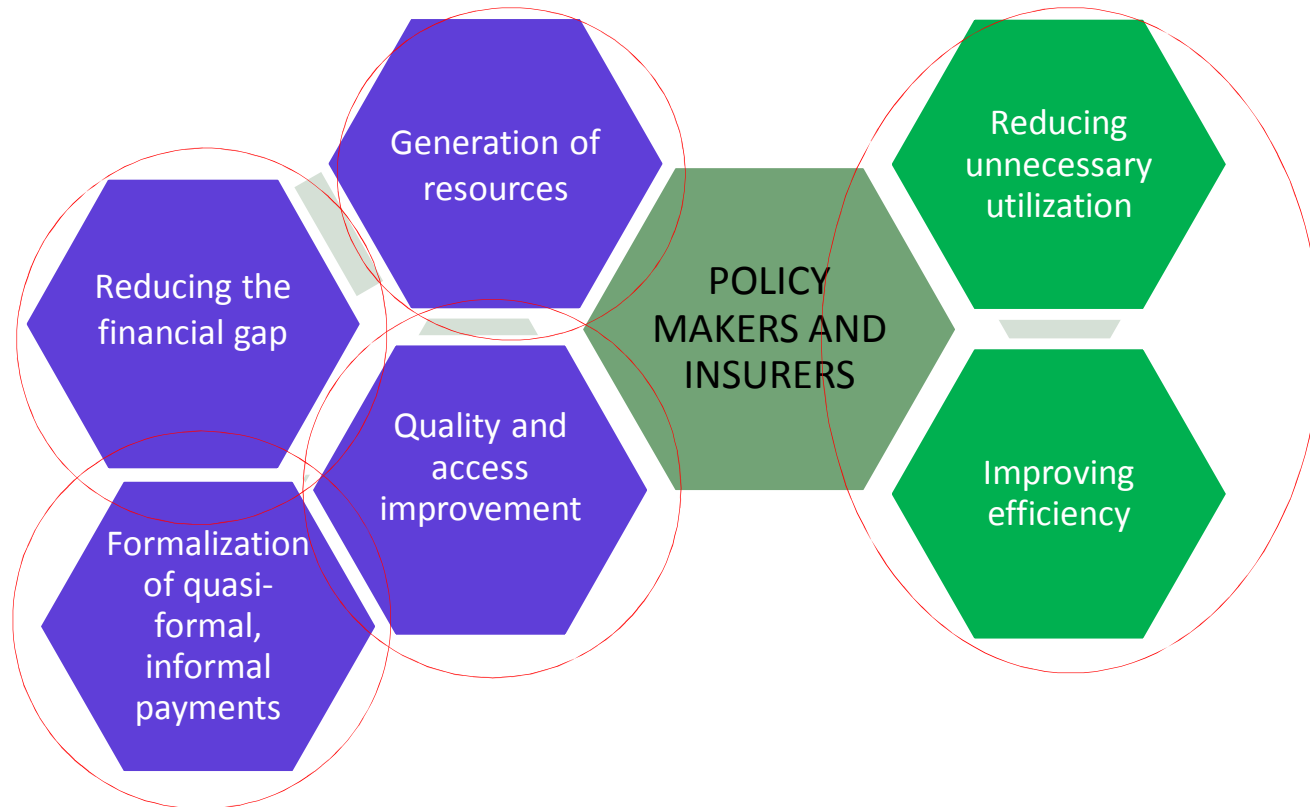
"A lot of money was collected as patient payment, but we, patients didn't see any change."

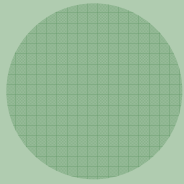
(Consumer, pensioner, Hungary)

"If I have nothing to pay, am I supposed to die?"

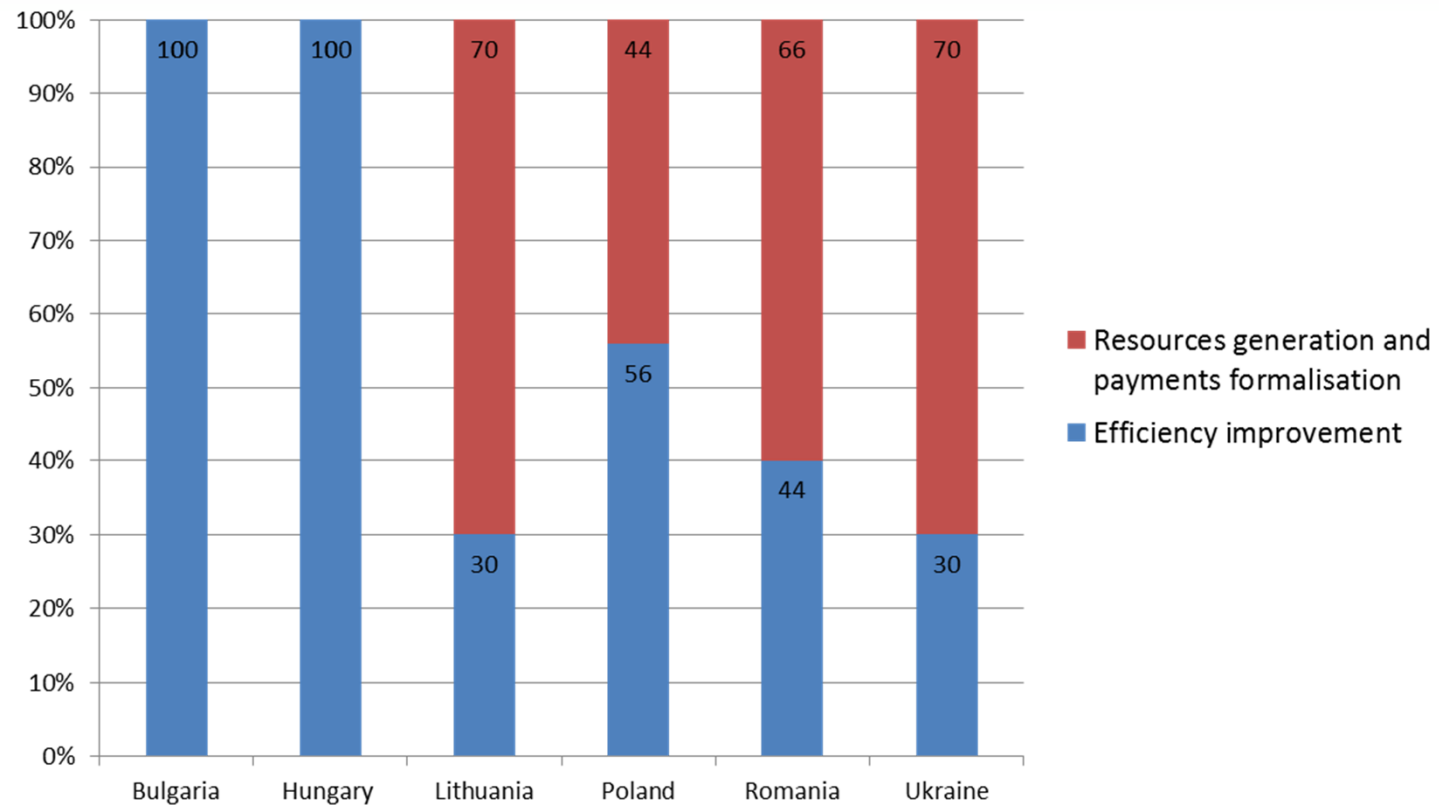
(Consumer, pensioner, Ukraine)

POLICY MAKERS AND INSURERS SUPPORT FOR PAYMENTS

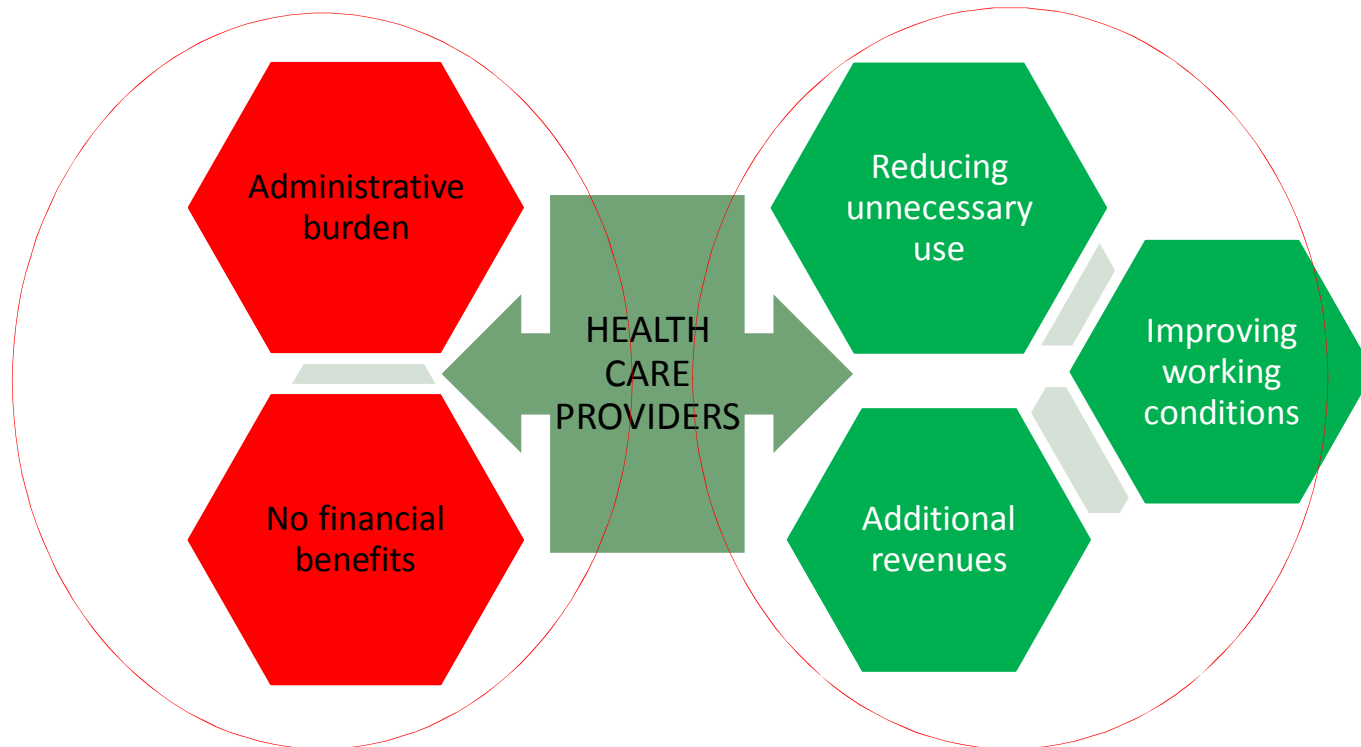




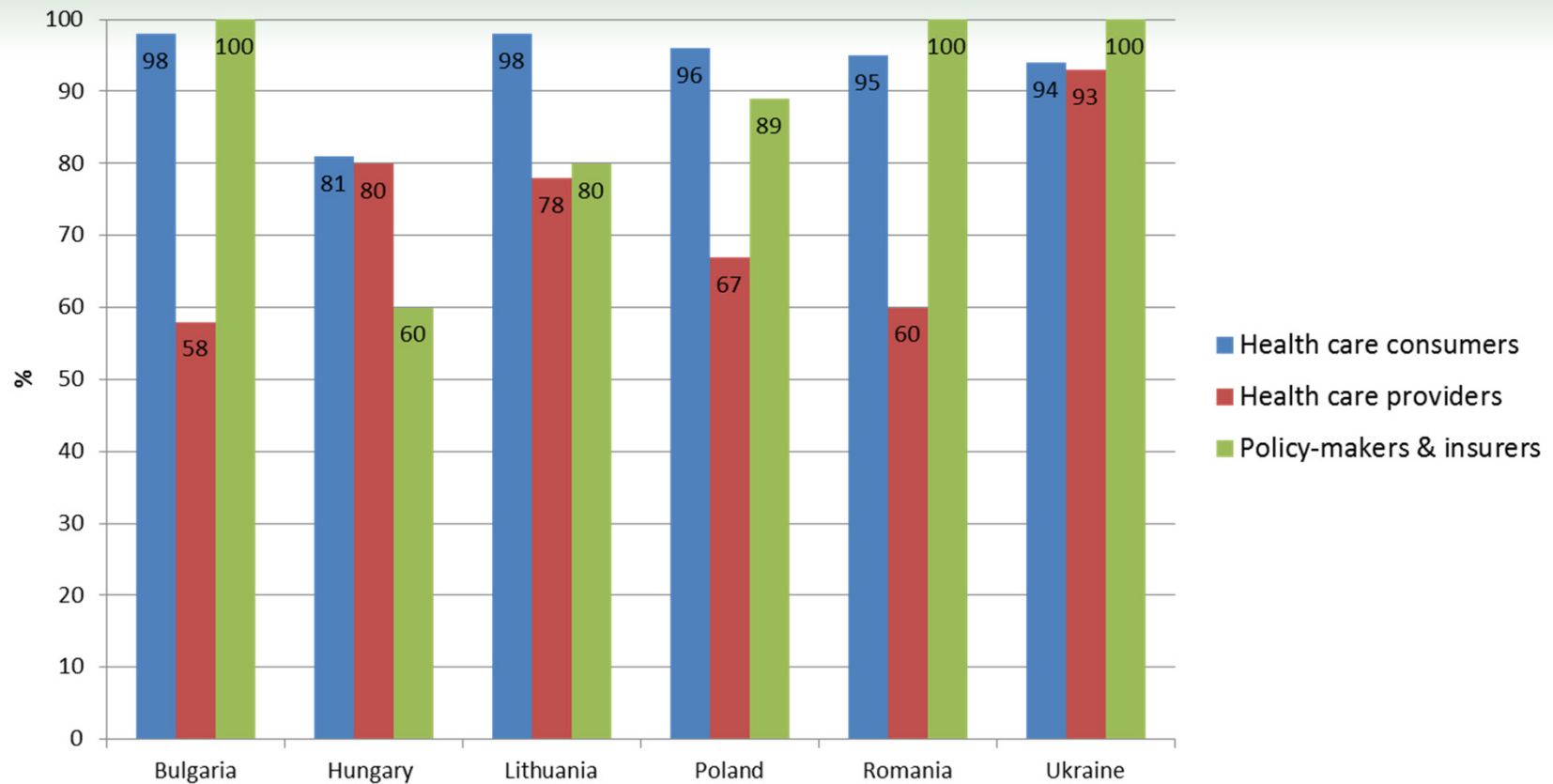
POLICY MAKERS/INSURERS OPINION ON THE MAIN OBJECTIVE OF PATIENT PAYMENTS POLICY

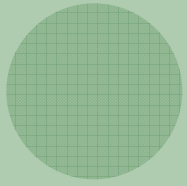


HEALTH CARE PROVIDERS' DIVERSE VIEWS ON PATIENT PAYMENTS



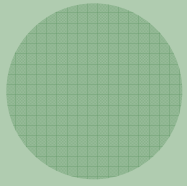
APPROVAL OF PROTECTION MECHANISMS (EXEMPTION/REDUCTION)





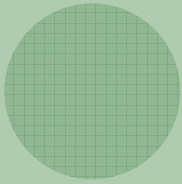
CONCLUSIONS

- ③ Health policy makers and insurers strongly advocate service charges
- ③ Health care providers' support for charges is affected but their financial profits from the system
- ③ Consumers' opposition towards co-payments is due to lack of trust that patient payments can improve poor quality and access and due to their concern about inability to pay



RECOMMENDATIONS

- ⊙ Need for the consensus on patient co-payments for health care services in CEE countries
- ⊙ Increasing health care system responsiveness to patient expectations with regards to quality and access
- ⊙ Improving transparency and accountability
- ⊙ Protecting the most vulnerable groups against adverse equity effects on patient payments
- ⊙ Evaluating administrative costs and fiscal efficiency of co-payment system



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