

**SESSION 6: ABILITY TO PAY FOR HEALTH CARE IN CEE COUNTRIES****PROJECT PRESENTATION:****“INABILITY TO PAY FOR HEALTH CARE IN SIX CEE COUNTRIES”**

Presented by:

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**ABSTRACT:**

Citizens in Central and Eastern European countries are often confronted with payments when using health care services. These payments can be formal (e.g. Bulgaria) but very often also informal or so-called quasi-formal (e.g. Ukraine). The accumulated patient payments may affect the demand for health care services forcing some patients to forego or postpone health care. Patients may also employ other coping strategy such as borrowing money or selling assets to cover payments.

Therefore, in this study, we analyse inability to pay for health care services in six CEE countries: Bulgaria, Hungary, Lithuania, Poland, Romania and Ukraine. Data are collected via representative surveys among health care consumers carried out in the targeted countries in July 2010 as a part of project ASSPRO CEE 2007. In the analysis, two coping strategies were considered i.e. foregoing health care services due to inability to pay and borrowing money/selling assets to cover payments for health care.

The findings show that patients meet financial barriers when using health care services most often in Ukraine and Romania, followed by Bulgaria and Lithuania while this problem is significantly less observed in Hungary and Poland. In case of outpatient physicians' services, foregoing health care services prevails. To cope with hospital payments, patients more often borrow money or sell assets and less often give up hospitalisation. Yet, the number of foregone hospitalisations accounts for a significant share of total demand for these services.

The analysis revealed that some populations groups are significantly at higher risk of inability to pay for health care services e.g. low income groups (Bulgaria and Poland), people in worse health (Romania) or citizens living in rural areas (Ukraine and Hungary). Considering the scale and the importance of the problem, the issue of diminishing financial barriers to health care use in Central and Eastern European countries requires an immediate policy attention.

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