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ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI
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EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVINIKOV
EURÓPSKA ASOCIÁCIA NEMOCNICNÝCH LEKÁROV**

Document :	AEMH 03/031
Title:	National Report Austria
Author :	Prof. Spath
Purpose :	Information
Distribution :	AEMH Member Delegations, Participants in the 56th AEMH Plenary Meeting
Date :	August 2003

Referring to the national report of 2002, this report will point out the significant changes since. After the last elections a dedicated ministry of health was re-installed, headed by Mrs RAUCH KALLAT as minister and Prof Dr. WANECK as state secretary of health remaining in office in order to obtain continuity.

Physicians: As mentioned in last year's report, more than 51% of all practising physicians are working on a salaried basis, the majority working in hospitals. According to a survey, the doctors in Austrian hospitals complain about the overload of paperwork and bureaucracy. More than 1/3 of the time has to be spent on administrative tasks. Only 63% of the time remains for Patient care. The reduction of the average length of stay in hospital and at the same time more intense diagnostic work-up and therapeutical care on one hand and permanent economical pressure on the other hand has led to an overcharge of hospital-physicians.

The legal regulations concerning the working hours in hospitals can hardly be obeyed. In many hospitals drastic violations occur. In certain field of medicine the average- and maximum weekly working hours constantly exceed the legal limits of 60 resp. 72 hours/week. The most charged groups are the surgeons (83 hrs) and gynaecologists (79) followed by anaesthesiologists (76) and doctors working in internal medicine (74). The average for all hospital doctors is 66 hours/week.

In most of the Austrian counties the majority of hospital-doctors are on duty for 6-8 nights per month. According to the legal regulations there will be a maximum of 6 night shifts per month from 2004. This will not be possible without an increase of the number of doctors. The three Austrian university hospitals alone will require an additional 300 M.D.s.

Hospitals: A new health-plan is put forward in order to lower hospital's costs. The patient's contribution /payment for the health voucher and for outpatient care in hospitals was abandoned because of the too costly administration.

There are great expectations on cost-reductions of drug therapy. The introduction of a directive for economical prescription is planned which will be compulsory for all Austrian hospitals, public and private ones. The use of less costly generic drugs should be favoured. There would also be a great economical potential in lowering VAT on drugs by 10%. A reduction of the number of acute care beds by 6000 is planned as well as the conversion of another 10.000 bed for rehabilitation, geriatric and chronic care until 2006. An additional plan of health care services in the public and private hospital sector as well as in the extramural sector is foreseen taking into consideration over-capacities and shortages. Considerable savings are expected by the new health plan by increasing of health insurance fees, restrictions of refunding and self-contributions of patients.