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EUROPEAN ASSOCIATION OF SENIOR HOSPITAL PHYSICIANS
EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE
EUROPESE VERENIGING VAN STAFARTSEN
DEN EUROPÆISKE OVERLÆGEFORENING
ΕΥΡΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΑΤΡΩΝ ΔΙΕΥΘΥΝΤΩΝ
ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI
DEN EUROPEISKE OVERLEGEFORENING
ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES
ASOCIACIÓN EUROPEA DE MÉDICOS DE HOSPITALES
EUROPEISKA ÖVERLÄKARFÖRENINGEN
EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVINIKOV
EUROPSKA ASOCIACIA NEMOCNICNÝCH LEKAROV
EUROPSKA UDRUGA BOLNIČKIH LIJEČNIKA**

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MANAGEMENT AND BUDGETISATION

Economical and budgetary role of the doctor

The situation in your country : Croatia

1. Status of the hospital doctors

Are doctors employees ?

YES	+	NO	
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If YES, describe the terms of the contract (the fundamental parts).

All hospital doctors are employed on the indefinite-term basis. Doctors in training have definite-term contracts and a hospital has no obligation to offer them a post after the training is over and they become specialists.

All the benefits and duties arising from the contract are negotiated between the Physicians trade union and the Ministry of Health and are unique for the whole country.

Do hospital doctors have also an ambulatory activity ?

YES	+	NO	
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If YES, privately, or as part of the accreditation contract ?

privately		contract	+
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What about private patients ?

Or do they benefit from an agreement according to the fee for service principle?

YES	+	NO	
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If YES, what are the agreement conditions ?

Every hospital doctor can negotiate an ambulatory activity with the hospital. Ambulatory activity is allowed in the same hospital after the working hours.

The fee payed by the patient is divided between the hospital (est 35 %) the physician (est 50 %) and the nurse (est 15 %).

Or is there a combination of both depending on whether the patient is public or private or other criteria ?

Are hospital doctors associated to the elaboration of national public hospital budgets ?

YES		NO	+
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Or do only salaried doctors get involved and is the self-employed professional excluded ?

YES		NO	+
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If YES, in which way can doctors in self-employed practice get the possibility to express their opinion ?

Are public hospital budgets submitted for approval to your professional association ?

YES		NO	+
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The National Health Insurance Fund submits every year only the proposed contract for the self-employed private practitioners to the Croatian Medical Chamber. This happens prior to the process of closing contracts. The Chambers remarks are taken into consideration but very exceptionally accepted because of the lack of money.

If YES, are your remarks taken into consideration ?

YES		NO	
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If NO? Why ?

2. The role of hospital doctors in the hospital economic policy.

Are doctors associated to the elaboration of regional hospital budgets ?

YES		NO	+
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If YES, does this mean that they are not at a the national level ?

YES		NO	
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All the hospitals are owned and run by the state and there are no regional hospital budgets. Every hospital signs a contract with the National Health Insurance Fund and gets a monthly budget based on the amount of work done in the previous period of time and the pressure of work at present. The amount of the work done has to be well documented. The invoices exceeding the contract are not payed if not otherwise agreed.

Are the colleagues committed to this task salaried heads of departments ?

YES		NO	+
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Hospital budgets are elaborated and calculated by the Insurance Fund experts.

Do they carry an outpatient medical practice beside it?

YES		NO	

Or are they civil servants of the public health services of the state ?

Can they be self-employed professionals with an accreditation contract?

YES	+	NO	
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Only general practitioners and dentists.

Are these regional hospital budgets submitted for approval to your professional association ?

YES		NO	+
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If YES, are your remarks taken into consideration ?

YES		NO	
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If NO? Why ?

Are other health professionals associated to the establishment of the economic policy of the hospital ?

YES		NO	+
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If YES, who and to which extent ?

3. Training

Is training financed exclusively by the ministry of social affairs and health ?

YES	+	NO	
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Specialist training is financed by the ministry of health.

CPD and CME are not financed in any way (doctors themselves, pharma industry, hospitals). There is an obligation for recertification by the medical chamber every 6 years. To renew/prolong your working license you have to collect 120 credit points from CME/CPD.

or is the ministry for national education also involved ?

YES		NO	
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Are the interlocutors from the government medical doctors ?

YES		NO	+
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If NO, what are their qualifications ?

Is the budget for education separate from the operational budget of the hospital ?

YES		NO	+
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If NO, is education taken into consideration in the establishment of the budget and how ?

The need for education is well described by the health act. The way it should be financed is not. It depends on the financial status of the hospital and the awareness of the hospital director. In some hospitals (especially university clinical hospitals) a lot of attention is paid on the education plans, for the doctors and nurses as well.

Is the hospital chief medical staff associated ?

YES	+	NO	
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How ?

In one case or the other are professional associations consulted in the establishment of the education budget ?

YES		NO	+
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4. Role of hospital doctors - heads of departments

Are doctors heads of departments participating in the establishment of the budget of the hospital where they practice ?

YES		NO	+
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They are informed about the part of the budget they can count on.

Through the dean of the college ?

YES		NO	+
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Individually for each service ?

YES	+	NO	
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Do self-employed professionals with an accreditation contract participate ?

YES		NO	
-----	--	----	--

Is the budget of each department imposed by the administrative direction of the hospital ?

YES	+	NO	
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Are they responsible for the management of their department, e.g.

Staff recruitment				Purchase of technical infrastructure			
YES	+	NO		YES	+	NO	

Do they share the responsibility for the management of their department with the administration?

YES	+	NO	
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How?

Doctors heads of the departments have a 4-year contract for that position.

They submit written report to the hospital administration at the end of the year.

In the case their report is not approved they can lose their position and continue to work as a specialist in the same department.

5. Financing conditions

Is the hospital financing based on fixed amount or on DRG ?

Fixed amount					DRG partly			
YES	+	NO			YES	+	NO	

Do doctors participate in the establishment of the classification of the patients ?

YES	+	NO	
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Do they participate in the establishment of cost weights and the valuation of fixed amounts in monetary units ?

YES		NO	+
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Are the doctors involved heads of departments ?

YES	+	NO	
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Do they keep an individual practice in beside this task ?

YES	+	NO	
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Or are they civil servants of the public health department of the state ?

Is the valuation of the fixed amounts nation wide or specified for each hospital ?

National					individual			
	+							

If the valuation is specified for each hospital, do the doctors-heads of department participate in the establishment of the valuation into monetary units ?

YES		NO	
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Through the dean of the college ?

YES		NO	+
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Separately for each department ?

YES		NO	+
-----	--	----	---

Do self-employed professionals with an accreditation contract participate in the calculation?

YES		NO	
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How is dealt with an eventual deficit ?

Carried forward to the next year				Adaptation of the fixed amount/DRG of the next year			
YES	+	NO		YES	+	NO	

In case of a deficit do doctors get penalized ?

YES		NO	+
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If YES, how ?

Some hospital directors have lost their positions because of the deficit they were responsible for. The deficit appeared as a consequence of the construction of the new hospital buildings and equipment purchased.

Has the method of fixed amount or DRG modified medical practice ?

YES	+	NO	
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Have hospital stays become shorter ?

YES	+	NO	
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Did it lead to an indirect selection of patients ?

YES		NO	+
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Are complicated pathologies transferred to another specialised hospitals ?

YES		NO	+
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Does the financing of these specialised hospitals obey to the same fixed amounts rules?

YES	+	NO	
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If NO, how are they financed ?

Financing of the very expensive procedures is negotiated individually with the Health Insurance Fund and is payed extra (transplantation medicine, smart drugs e.t.c)

Are other health professionals associated to the financing modalities of your hospital unit or department?

YES		NO	+
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If YES, who and in which respect?