



**ASSOCIATION EUROPÉENNE DES MÉDECINS DES HÔPITAUX
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
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ΕΒΡΟΠΕΪΣΚΑ ΑΣΟΪΙΑΪΙΑ ΝΑ ΣΤΑΡΣΗΤΕ ΒΟΛΝΗΧΝΗ ΛΕΚΑΡΗ
ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE**

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BULGARIAN NATIONAL REPORT

The evaluation of the current Bulgarian situation in Healthcare is no different from the last year one we made at the previous FEMS meeting in Istanbul in October – in other words, it was characterized by the

LACK OF RESOLUTE MEASURES TO OPTIMIZE THE SYSTEM.

Though during the last months the new healthcare minister's team widely propagandizes the introduction of Diagnosis Related Groups as a method for a fair evaluation and pricing of medical activities, and elimination of the clinical pathways funding system, yet in practice even the first steps haven't been made. The current way of funding exacerbates the revenue imbalance in certain specialty fields and distorts the healthcare integrity in some hospitals as well as in whole regions. Differences in revenue may reach up some tens of times, and some therapeutic medical spheres remain unattractive and gradually decline due to the unjust system which has already existed for 8 years.

EXCESSIVE ADMINISTRATIVE REGULATION

A definite tendency to limit the market forces and the competition opportunities in healthcare arises. A parallel trend towards consolidation and centralization of activities and finances is observed which lead to doubts in hospital managers as well as ordinary doctors with regard to their expectations for good future results. And, if the problems of the public hospitals managers are solved by their replacement, then the doctors' problems are solved by work abroad. The number of the doctors who left Bulgaria during the last year comprises 2% of all the Bulgarian doctors and is increased by 20 % in comparison with the previous year.

THE PROBLEMS IN THE CONTINUING MEDICAL EDUCATION AND QUALIFICATION AS WELL AS IN THE POLICY IN HOSPITAL CARE EMPLOYEE INCOME ARE EXACERBATING

One of the main factors for aggravation of the healthcare crisis is the lack of adequate policy in the field of the continuing medical training and the postgraduate qualification. The number of specialists in certain specialty fields throughout the whole country is already a two-digit figure; and their average age is about 60, at that.

Many junior doctors orientate towards foreign countries also because of the low income – revenue of the municipal hospitals was decreased by about 50%. Some 2500 doctors working in specialized and multi-specialty hospitals with municipal ownership receive a salary of about EUR 400 per month. The remuneration of the employees in the hospitals with state ownership is a little bit higher (about EUR 600 per month) but frozen at the last year level.

INSUFFICIENT COORDINATION AMONG THE INSTITUTIONS RESPONSIBLE FOR THE EFFECTIVE FUNCTIONING OF THE SYSTEM

Due to the efforts and teamwork of the BgMA experts, some though slight increases in the funding of some medical activities were agreed upon as well as lots of optimized work algorithms. Despite this, however, the last year was one of the worst in terms of inter-institutional activity. The unsuccessful attempts of the Ministry of Finance to “economize” in health expenditure were particularly impressive. At the beginning of the year guidelines for evaluation of the medical activities in healthcare made by the financial experts only, was adopted, but at the end of 2010 it already became clear to everyone that this could not happen without the leadership and participation of the healthcare experts and the Bulgarian Medical Association. The restrictions introduced in the form of “delegated budgets of the medical establishments” in the beginning of the last year were mitigated a bit in 2011 due to the purposeful efforts of the BgMA. At the end of the last year we also witnessed something unique for the Bulgarian reality – a nationalization of the savings in the National Healthcare Fund. This government decision was followed by long debates conducted by the national Syndicates, employers’ organizations and economical analysts which so far are still ongoing, and the assessment of this act tends to be negative.

In conclusion, we can summarize the position of the BgMA Management Body that a more effective expert level dialogue is needed between the institutions which are responsible for the healthcare system balance and the protection of professional and social values acquired during the years of democratic development of Bulgaria.