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ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI
DEN EUROPEISKE OVERLEGEFORENING
ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES
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ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE**

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Lack of financial resources in health care system.

The 2010 general elections brought to power a government that is politically more closely aligned with the government of 2002–2006. The manifesto of the new government declared that health insurance companies would again be allowed to make profits, that the halted transformation of hospitals into joint-stock companies would resume, that the independence of the Health Care Surveillance Authority would be increased, that a DRG payment system would be introduced and that market mechanisms in health insurance would be increased. The main sources of revenue in the health system are contributions collected by the health insurance companies, which are profit-making joint-stock companies. The contributions are collected from (1) employees and employers, (2) self-employed people, (3) voluntarily unemployed, and (4) “state-insured” - the group of mostly economically inactive people for whom the state pays contributions (one-third of total resources from social health insurance contributions).

Slovak Government in an attempt to reduce the budget deficit have reduced payment of health insurance for the economically inactive population. This caused a lack of resources in the health system. Hospitals receive at least 10% less in funding compared to 2010. On the other hand requirements for their performance are permanently increasing.

Under these circumstances the Government launched a transformation of some major public hospitals into for-profit joint-stock companies owned by state. It is clear that without a change in financing these hospitals will get into the red numbers very quickly becoming an easy prey to financial groups that already possess some health insurance companies.

Slovak Medical Chamber, Slovak Medical Trade Union together with other health organizations have repeatedly appealed to government to increase health care funding and to stop the transformation of public hospitals into joint-stock companies. It is necessary to introduce at least a DRG system before the transformation of hospitals. Otherwise there is a threat of reduced access to health care for Slovak citizens.

EU funds allow new capital investments in Slovak hospitals

The technical infrastructure of hospitals is outmoded; on average, Slovak hospitals are 34.5 years old. Capital investments from the Ministry of Health budget were abolished in 2003. Instead, these resources were allocated to health insurance companies to include amortization in their payments to providers. The situation is now changing thanks to EU funds. Some state hospitals are already building new departments with new equipment.

Doctors

The total number of doctors in Slovakia registered by the Slovak Medical Chamber is 22 043. 14 146 of them perform medicine as employees mostly in general or specialised hospitals. Recently there was an inspection performed by state authorities regarding working conditions of doctors. The commission found out that especially smaller public or private hospitals are not capable keep in line with EWTD. Working time often exceeds 56 hours/week, on-call time spent in hospital is not fully counted as working time, some doctors are not allowed to take rest after duty. Moreover, salaries in smaller hospitals are lower comparing to those in

big hospitals owned by state – which are btw. also very low ranging from 700 to 1500 € per month as a basic salary.

The Medical Trade Union have already announced campaign similar to the recent Czech one named “Thank you, we are leaving”. Its main aim is setting legislative rules for calculating the basic salaries. Other aims are: working conditions improvement, increasing payments for economically inactive population and hospital transformation halting.

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