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EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE
EUROPESE VERENIGING VAN STAFARTSEN
DEN EUROPÆISKE OVERLÆGEFORENING
ΕΥΡΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΑΤΡΩΝ ΔΙΕΥΘΥΝΤΩΝ
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ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE**

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Ε Λ Λ Η Ν Ι Κ Η Δ Η Μ Ο Κ Ρ Α Τ Ι Α

NATIONAL REPORT OF GREECE TO THE A.E.M.H. PANHELLENIC MEDICAL ASSOCIATION

Vienna, 8 – 9 May 2015

PUBLIC HEALTHCARE SECTOR

The year 2014 had been a very difficult and stifling year for healthcare of citizens in Greece, who have found themselves in the eye of hurricane once again, due to a series of cruel health policies. The previous government, keeping on austerity policies of the previous five years, continued its policy of understaffing and underfunding the NHS, the dissolution of primary healthcare and passed a Law last fall for closed budgets for public and private health expenditure to each prefecture of the country, which shrinks offered public health costs for the country's citizens, raising the out of the pocket payments.

Understaffing and underfunding the NHS have been serious problems during 2014 and faltered the public health system heavily, which however managed to stand. Both Panhellenic Medical Association, and the Federation of Hospital Doctors of Greece estimate that the NHS is currently missing some 15.000 nurses and 5.000 doctors, a vast number for the smooth operation of hospitals. People who are currently working in the system make titanic efforts to be able to fill the gaps by working overtime, getting low salaries, and frequently, at the expense of their own health.

Underfunding public hospitals' budgets is another thorn in the side of the NHS and as if that were not enough, the figures for 2015 are even more reduced, since the budget for the entire NHS is reduced as a whole, by 22,9%, while hospital operating costs for 2015 are decreased by 220 million Euros (1,38 billion Euros in 2015, compared to 1,6 billion Euros in 2014). On the other hand, a public expenditure on medicines amounting to 2 billion euros, compared to 2,3 billion euros in 2013, all bodies in the healthcare field, pharmacists, doctors and patients' associations, estimate that this will cause a huge problem in public health, with humanitarian consequences. Furthermore, it seems that things are indeed extremely severe, since in the amount of 2 billion euros, expenses for the uninsured and vaccines are included. Shortages in basic materials in numerous hospitals of the country is a troublesome issue, which was not only dealt by patients but by doctors, as well.

Another major problem is health coverage of the uninsured citizens and immigrants, amounting to 3 million citizens approximately, and they are a health bomb in the state's foundations, despite the various ministerial decisions issued, which essentially put huge bureaucratic obstacles in their healthcare, with a view to concealing funding lacks for this group of citizens.

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Ε Λ Λ Η Ν Ι Κ Η Δ Η Μ Ο Κ Ρ Α Τ Ι Α

After the change of government in Greece, which resulted from the elections of 25/01/15, the new government announced: direct support of the Public Healthcare System by recruiting staff in Hospitals and Intensive Care Units, establishing primary healthcare and measures for free access in the public healthcare system for all citizens, including the uninsured. Some of these measures have started to get materialized with some delay, given the fiscal crunch that exists in the country due to the ongoing negotiations with the European Union.

Nevertheless, hospital doctors in Greece will continue to ask for:

- Immediate regulation for free access to public healthcare facilities for all citizens without the distinction of insured-uninsured.
- Simplification of procedures in direct recruitments to meet extremely urgent staffing needs, and procurement of necessary materials and equipment.
- Immediate starting procedures for drafting a health chart based on population needs of prevention and treatment, according to which, public health units can be established.
- Joint labor relations, decent working conditions, signature of a new Collective Labour Agreement.
- Give an end to unpaid work and immediate solution to the issue of the medical guards payments.
- Fight against waste of money and corruption, through a state control of supplies, pharmaceuticals and equipment.
- Restoring Democracy in health structures (involvement of social organizations, patients, employees etc.).
- Financing NHS entirely from the State budget.
- Immediate measures to prevent the migration of young doctors abroad.
- Better conditions for education for residents and specialized doctors.

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Ε Λ Λ Η Ν Ι Κ Η Δ Η Μ Ο Κ Ρ Α Τ Ι Α

PRIVATE HEALTHCARE SECTOR

During the recent years, steps have been taken towards rationalization of the hospital budgets, as the introduction of Closed Consolidated Hospital Fees (KEN), with which, patients are allowed to cover a proportion of the costs / expenses for hospitalization, by their insurance fund and the system of DRG (DIAGNOSTIC RELATED GROUPS) and diagnoses based on ICD 10 has been introduced, as well. There have been and still are, of course, reactions on whether these are compatible with the actual potentials.

The course of the Greek National Organisation for Health Care Services Provision (EOPYY), however, as it has been formed at the end of the first quarter (by the end of April 2015), can be described as tragic, in terms of lenience. There are unsettled debts to the insurance funds that joined EOPYY, for the first quarter of 2015 and for previous years, 2012, 2013 and 2014 (when EOPYY began operating), amounting to EUR 1 billion 250 million, approximately.

The financial obligations of the National Organization for Health Care Services Provision (EOPYY) towards healthcare providers, unpaid and overdue, are increasing, and so far the unpaid obligations exceed the amount of 2,2 billion Euros.

The providers fail to meet their own financial obligations due to unreceived reimbursement from the EOPYY.

The difficulties that EOPYY has to fulfill its financial obligations to healthcare providers, lead the providers to terminate their contracts with EOPYY, staff dismissals, and closure of private clinics, laboratories, health centers.

There is a significant reduction in the number of workers in private hospitals, while those who remain at private hospitals are expected to work for longer hours, with lower salaries. Hospitals' financial obligations to associate medical staff get long delays, ranging from three months to two years.

Hospitalisation in private hospitals is a solution for patients suffering from diseases needing certain scheduling in their treatment and who can afford to cover this potential.

Society has been enduring issues of financial coverage of healthcare needs, with disastrous consequences to health care for the insured.

Public Health costs are in a dangerous level (4.5% of GDP while the safety limit is 6%).

The weakening of primary health care and of hospital care, problems in the functioning of EOPYY, but also in private healthcare structures and facilities have greatly affected the citizens' health care, with the consequent deepening of the humanitarian crisis that has hit our country .

Dr. Charalambos Koulas

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