

Part of the Slovakia AEMH National report Luxembourg May 2017

Short copy of ministerial material – interview of the Tomas Drucker

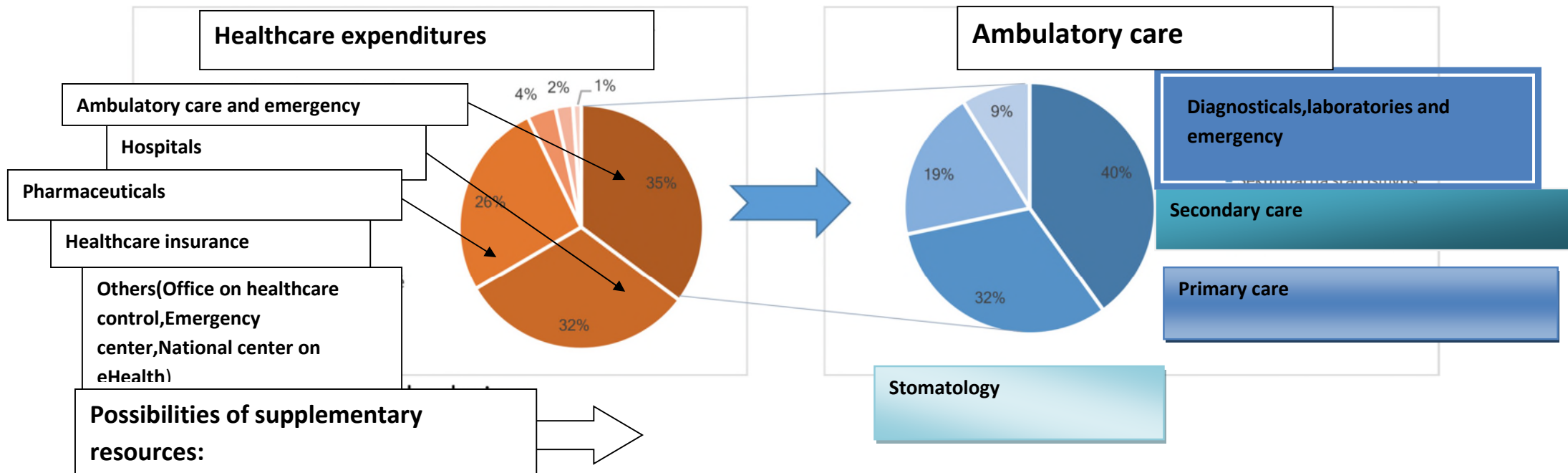
Evaluation of the annual activity of the Ministry of Health SR according statement of the Ministry of Healthcare April 2017



Bratislava April 2017

How much we spend on healthcare ?

- ▶ The Slovak Republic spends about 4.44 billion € in public health care in 2017. (+220 million more versus 2016)
- ▶ Income from the economic active persons is (3.2 bn) and from the state budget (for economic inactive persons) (1.2 bn)
- ▶ Payment from the state budget for the (so called) state insurers is in 2017 compared to 2016 by 200 mil. lower



- Possibilities of supplementary resources:**
- ▶ The possibilities for accessory receipts
 - ▶ Internal redistribution (where to take and where to put)
 - ▶ By financing from the economic active persons , or from the state and thus from the state budget (taxes or the redistribution between the departments)

Slovak health care in numbers

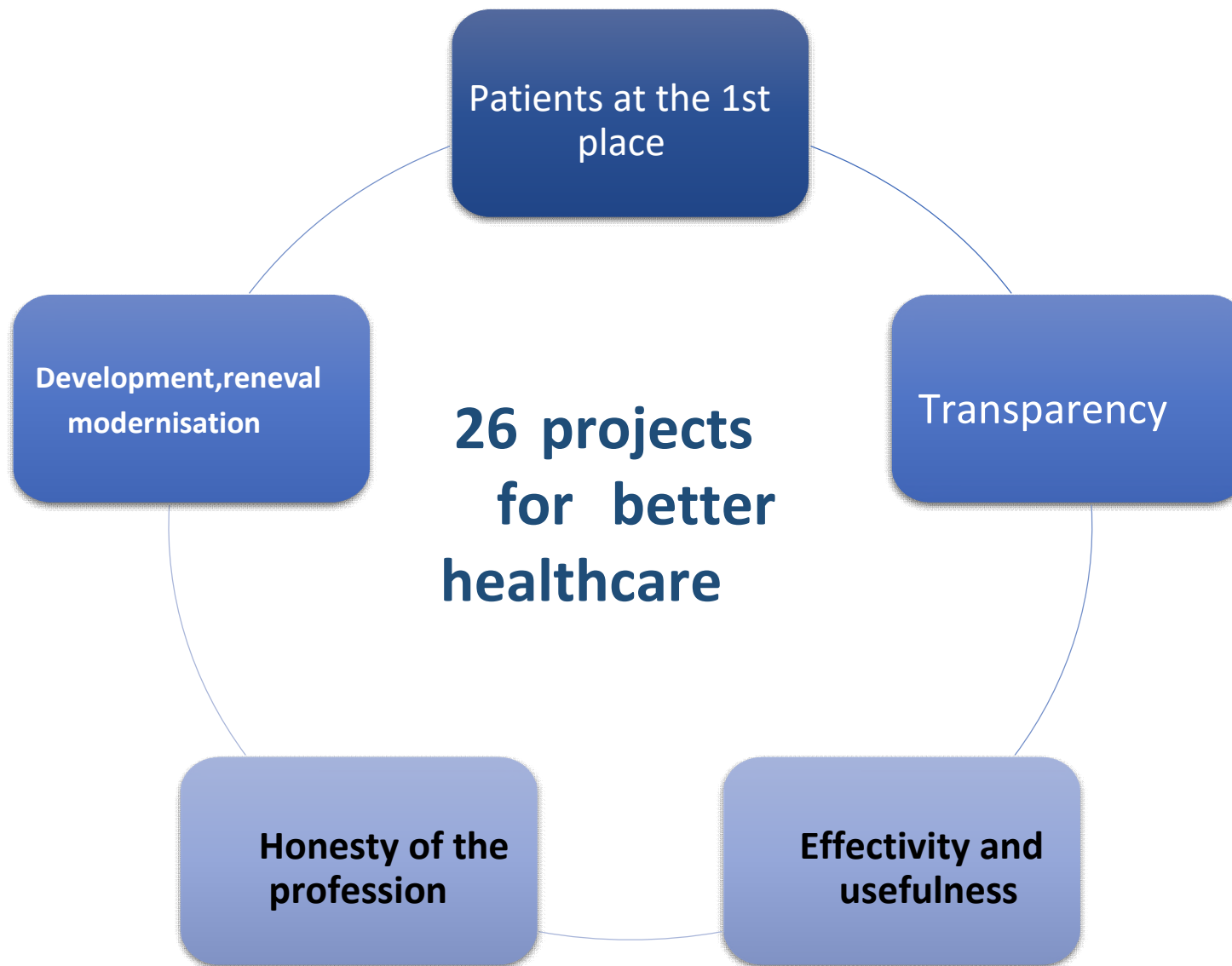
- ▶ 179 hospitals
 - ▶ 1 203 154 hospitalizations
 - ▶ 10 131 outpatients visits
 - ▶ 57 million examinations
 - ▶ 1,883 pharmacies
 - ▶ 214 million recipes
-
- ▶ From public sources, we give about 530 million EUR less (per inhabitant of the SR) than the Czech Republic
 - ▶ According to OECD, our patients donate up to 30% of their resources from private sources
 - ▶ The EU28 average public resource on the IB is 6.25%
 - ▶ Average EU15 public funds on healthcare is 7.78% of GDP
 - ▶ Slovakia offers from public sources on healthcare is 5.3%
 - ▶ In total headage expenditure on pharmaceuticals is Slovakia 4. the world
 - ▶ Slovakia has a 19% more bed capacity than the EU average and a 14% lower usability (67%) than the EU average (78%).

- ▶ In a statistic of amenable mortality within the EU 28 is Slovakia on the 23rd place
- ▶ In the quality of life (HLY) within the EU 28 is Slovakia on the 22nd place of the woman and In the 21st place of men

Program Statement led by the new SLOVAK REPUBLIC government in March 2016 – after the general election

26 projects for better healthcare

PATIENTS IN THE FIRST PLACE, TRANSPARENCY, DEVELOPMENT,
RENOVATION AND MODERNISATION EFFECTIVITY AND USEFULNESS,
HONESTY OF THE HEALTHCARE JOBS



PATIENTS AT THE FIRST PLACE *What was done?*

Drug law - availability of medicines in our pharmacies and reduction of re-export (the first administrative procedure for imposing a fine on the distributor who exported the medicines) - October 2016 - 3986 reports of missing medicines

- April 2017 - 42 reports of missing medicines

*- 95 times fewer reports of missing medicines **ALL DONE***

Setting new urgency places - new patient care processes and minimum standards for personal security and material equipment Identifying 32 cities where EU funding will be spent on hospital and emergency recovery

*Determination of 6 places where traumatic centers will be (they were never defined and planned to that time) **ALL DONE***

New Transplant Law **PREPARED / REALIZED**

New urgency departments and a new stratification of the hospital network for emergency centres (financing from the euro area funds from June this year, about 150 mil EUR) –

- 32 URGENT Type 1 hospitals

- 6 URGENT Type 2 hospitals - TRAUMACENTERS

*- building of stroke centres **READY***

New outpatient emergency services - in each district (current state does not include all districts)

- on working days from 16:00 to 23:00

- weekend from 7:00-23:00

*- Mandatory ordination hours for general practitioners min. 30 hours / week and twice a week until 14:00 - at present, doctors are often unavailable in their outpatient clinics **READY***

*New Medical Consultation Support for Patients through the Operations Center (call 150/112) - Enhancement of a group of specialists to help with medical consultation of the patient (starting estimate mid-2017) **PREPARING***

Building a so called detention facility (for especially dangerous psychiatric persons) in in psychiatric hospital Hronovce. Secured financing, approved by the government. Preparation of procurement.

Support for marginalized groups of the Roma population at basic health education – through a new organization „Healthy regions“. Keeping about 250 people on the ground - one of the most successful projects in the EU **ALL DONE**

*New Innovative Medicines - Categorization of new innovative pharmaceuticals on a biological basis - currently they are only for exceptions and many are not even available. Estimate during the year 2017 for the first pharmaceuticals **PREPARING***

More accessible medicines for rare diseases - change of drug categorization (2017) + national list of centers for expertise on rare diseases and EU involvement **REALIZING**

Reduce waiting times for CT and MR examinations due to lower prices and higher volume

*Standard Diagnostic and Therapeutic Procedures - the basic framework for determining the patient's claim and the diagnostic / therapeutic procedure according to international standards, which will make it clear what diagnostics, medications, medical material the patient should receive and at what time. Then you can talk about the range. The first 13 specializations in 2017, the next in 2018 will come **REALIZING***

National Program for Cancer, Cardiovascular and Respiratory Diseases in Slovakia

*Significantly strengthen preventive programs and reduce the number of avoidable deaths **PREPARING FOR***

*Support for domestic nursing and an integrated health and social system for social service homes **REALIZING A PILOT STUDY***

*Ensuring a smooth transition from the hospital to the home environment that needs nursing care, as well as supporting long-term dependents for nursing and nursing care **REALIZING A PILOT***

EFFICIENCY AND USEFULNESS:

*Measures to reduce disproportionately high margins and return money to the healthcare system - purchases of specialised medical materials, CT / MR examination, **REALIZING***

Central procurement of the framework contract for new CT devices for 3 years approximately 40 devices in different categories (saving about 30-40% - the lowest prices in Europe for the highest quality devices and the full after sale service for 5/8 years) - the international monetary fund has designated us as the best practice **ALL DONE**

Central procurement of X-ray instruments (MR, momograph, angiograph, ...), beds, linear accelerators during the year 2017 **REALIZING**

Central Hospital Management – New „Office for Subordinate Organization Management“ (valid only for the hospitals owned by the state)

- *Establishment of own pharmacies in state hospitals*
- *Organizational assessment - year-on-year slowdown in the growth rate of liabilities overdue*
- *Active comparison of the prices of procured goods and services between state hospital providers*
- *Prepared transformation plans - hospital development plans*
- *Active comparison of hospital drug purchases (estimated savings of € 7.5-8.5 million per year)*
- *Savings through the central purchase of "A" group drugs in 2017, Ministry of Healthcare expects a savings of 6 - 12 mil. EUR for the state insurance company, which is the largest of all.*
- *Unification of contractual agendas (concessions, suppliers - parking, washing, catering, waste management, energy management, ...)*

Occupational health service - reducing the administrative burden on employers and maintaining employee health protection from the negative impact of job performance. **REALIZING**

e-Health - gradually deployed to outpatient clinics - the basic functionality of "electronic health documentation" and "electronic prescription" will be available in 2017. The electronic identification cards of the insured were cancelled and the was linked to the citizen's identity card

- About 100 outpatient ambulances are currently connected to the eHealth system, and 15 hospitals and a polyclinics

- The National Centre of Healthcare Data and Information (NCZI), in cooperation with the state healthcare insurance company (VSZP), has introduced an electronic prescription from February 2017 aimed at eliminating drug prescription fraud

Profit limitation of health insurance companies - there is a conceptual proposal - the Ministry of Finance is preparing the Department of Healthcare and Operational Funds **PREPARING**

ALL DONE

TRANSPARENCY:

*Surveillance authorities in hospitals and rescues centres - Boards of Trustees - **have not yet been credited***

Planned personal composition:

*- 1 representative of the Ministry of Healthcare, 1 representative of employees, 1 expert from the personal tenders **REALIZING***

*Collective Statutory Bodies in Hospitals and Rescuers - **not yet credited***

- joint decision-making of directors and conciliation of at least by 2 of them

- Linking responsibility and division of competences to the supervisory authority –Board of Trustees

*The new Supervisory Board of the State Healthcare Insurance Company (VSZP) Board of Trustees also with the representation of the parliamentary opposition of the Third Sector **ALL DONE***

DRG – as a new payment system – started since 1.1.2017 Until June 30, 2017, all hospitals will be connected to the DRG remittance system, with the different provisions for the hospitals at the beginning, which will automatically be approached annually over the next 5 years.

*- in April 2017, there were more than about 1/3 of hospitals as DRG claimants for. **REALIZING***

*Establishment of Health Technology Assessment (HTA) procedures to assess the effectiveness and efficiency of drug, medical and technology inclusion into categorization in order to halt manipulation and speculation on public resource management. Similar HTAs are in almost all EU countries **ALL DONE***

HONOR OF HEALTHCARE PROFESSION

*Residential Program - Support for Missing Doctors Specialists and General Practitioners and the possibility of Other Specializations for General Practitioners and vice versa for specialists. (Education lasts from 3-5 years, and is funded by the State) + "Simplification" of specialization in General Medicine for a particular groups **REALIZING***

Changing competencies for health workers

- medical assistants will remain in the sector and will be added for some activities to the missing positions of the nurses (abstractions, excercises, medication, ...) - nurses - prepared change of competencies in cooperation with SLOVAK CHAMBER OF NURSES and the medical expert societies

*- Competencies of physiotherapists and medical rescuers, sanitaries are being prepared, a competence model is developed - pharmaceutical laboratory technician, masseur, health care technician - doctors - change is being made in some specialties and general practitioners **All DONE or / REALISIING***

*New supplementary ordination hours separated from regular Ordinary Hours in which outpatient clinicians could provide health care for reimbursement and under strictly defined patient protection conditions **STOPPED***

Non-cash medical dues for practitioners - simplification of non-cash reporting for doctors in case of continuous medical education **READY**

DEVELOPMENT, MODERNIZATION and RENOVATION

Removal of liabilities of state hospitals (500 mil €) through an Electronic Auction System - prepared with the Ministry of Finance (MF) **PREPARING**

Reconstruction of Hospitals in 2017

- Children's faculty hospital with polyclinic in Bratislava (BA) - completion of urgent reception, surgery-intensive pavilion, completion of accommodation for parents, centre of day surgery, replacement of windows and lifts (implementation in 2017 with possible delivery of 2018 and 2019)
- Roosevelt University Hospital in Banska Bystrica (BA - central Slovakia) - complete reconstruction of the heat economy, and indoor space and perimeter cladding (completion 2019)
- University Hospital Bratislava (BA) Kramare - Emergency build-up (implementation in 2017 with eventual delivery of 2018)
- University Hospital Bratislava (BA) Antolska street - construction of urgent income (implementation in 2017 with possible handover in 2018) - University Hospital BA Ružinov quarter- completion of urgent income (implementation in 2017 with possible handover 2018) **PREPARED / REALIZED**

Medical equipment

- Regional public health offices in Bratislava (BA), Banská Bystrica (BB), Košice (KE) and the central Office for Public Health (ÚVZ) - new laboratories
- National (State) Cancer Institute – new Linear Accelerator and New CT Device
- Children's faculty hospital with polyclinic Bratislava (BA) - Wide renovation of medical technology - University Hospital of Zilina (ZA) - CT instrument, RTG, operating microscope, ...
- Faculty hospital of Presov (PO) - CT device

- Rescue Operations Centre - 112 telephone number integration and unification **PREPARED / REALIZED**

Science and research

Creation of competence of the Ministry of Health of the Slovak Republic in Science and Research (not so far). Basic conception of science and research development in the field of pharmacy and biomedicine.

Getting international partners with high credibility in the world who come to Slovakia to start projects. EU funding.

Memorandum with Cuba (biosimilars) **APPROVED / REALIZED**

New University Hospital in Bratislava - completion in the area of Rázsochy (Bratislava,BA), and reconstruction of the hospital in Ruzinov (BA)- 578 active beds in Rázsochy with planned parameters:

- 11 centres of excellence

- 28,995 hospitalizations per year

- 350 mil. EUR without VAT for construction of new University hospital in Rázsochy + Ružinov (both BA) **PREPARING**

Integrated Health Care Centres (Integrated Regional Operational Program founded by EU))

- Building and infrastructure renovation of small medical centres (general practitioners of adults and pediatricians and other specialists) - regional accessibility outside of district and regional cities

What awaits us and the greatest challenges

Financing the sector

- ▶ Funding of 2017 in the legislative pre-proposal, the proposal is expected in May 2017
- ▶ Strengthening the sector - the proposal is expected within a few weeks (?)
- ▶ Preparing the budget for 2018
- ▶ Limit for the payout of health insurance companies (limit for the profit)
- ▶ Defining the scope of health care
- ▶ Standard diagnostic and therapeutic procedures in 2017 and their categorization
- ▶ eHealth
- ▶ Improving the availability of specialized outpatient care
- ▶ New network of specialised ambulances at district level
- ▶ Changing competencies
- ▶ Defining waiting times

What awaits us and the greatest challenges.... continuing...

- ▶ Patient-oriented healthcare
- ▶ Training of healthcare staff for novel approach to patients (from 06/2017)
- ▶ Establishment of a hospital psychologist's position for the needs of both patients and employees (from 06/2017)
- ▶ mandatory labeling of staff with a unified label (from 06/2017)
- ▶ Unified State Hospitals Websites (since 09/2017)
- ▶ Ordering for a medical examination a single ordering system (from 11/2017)
- ▶ wi-fi coverage widening to all chairs and bed rooms (until 12/2018)

- ▶ building incoming reception to guide and facilitate patient navigation (until 12/2018)
- ▶ building of direction and orientation boards (until 12/2017)
- ▶ single patient satisfaction questionnaire (from 07/2017)

Thank you for your attention

