



**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
EUROPEISKA ÖVERLÄKARFÖRENINGEN
EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVINIKOV
EUROPSKA ASOCIACIA NEMOCNICNÝCH LEKAROV
EUROPSKA UDRUGA BOLNIČKIH LIJEČNIKA**

Document :	AEMH 05/033
Title:	National Report Slovakia
Author :	Dr Buzgó
Purpose :	Information
Distribution :	AEMH Member Delegation, Participants at the 58th AEMH Plenary Meeting
Date :	2 May 2005



National Report Slovakia

(AEMH meeting, Athens, May 2005)

New legislation

The new legislation dealing with the reform of health care system was submitted to the parliament in early 2004. Its main goal was to allow the transformation of health care sector from an integrated tax-based system with a state monopoly in providing care into a pluralistic and decentralized social health insurance system with a combination of private and public providers. Six new acts, that have substantially changed the framework for providing health care in Slovakia (5.4 million inhabitants), were adopted in November 2004. These include:

- the Act on Health Insurance Companies and Health Care Supervision
- the Act on Health Insurance
- the Act on Health Care and Services Related to Health Care
- the Act on the Scope of Health Care Reimbursed from Public Health Insurance
- the Act on Health Care Providers, Health Care Workers, Professional Chambers in Health Care
- the Act on Emergency Health Services.

The acts allowed for instance:

- health insurance companies to become for-profit joint-stock ones
- to establish the independent Office for the Supervision of Health Care with remarkably strong competencies
- to define the procedures for specifying the amounts for health care and related services that would not be fully reimbursed from public health insurance
- to set the rules for transforming state-owned health care providers to for-profit joint-stock companies.

The package of reform bills has raised considerable controversies about balancing equity and efficiency, market orientation and state involvement. The Slovak Medical Chamber declared its objections towards several aspects of the forthcoming reform, but only few of them were taken into consideration. The reform seems to be a great experiment and both citizens and doctors feel uncertainty with respect to its outcome and possible consequences.

Hospitals in Slovakia

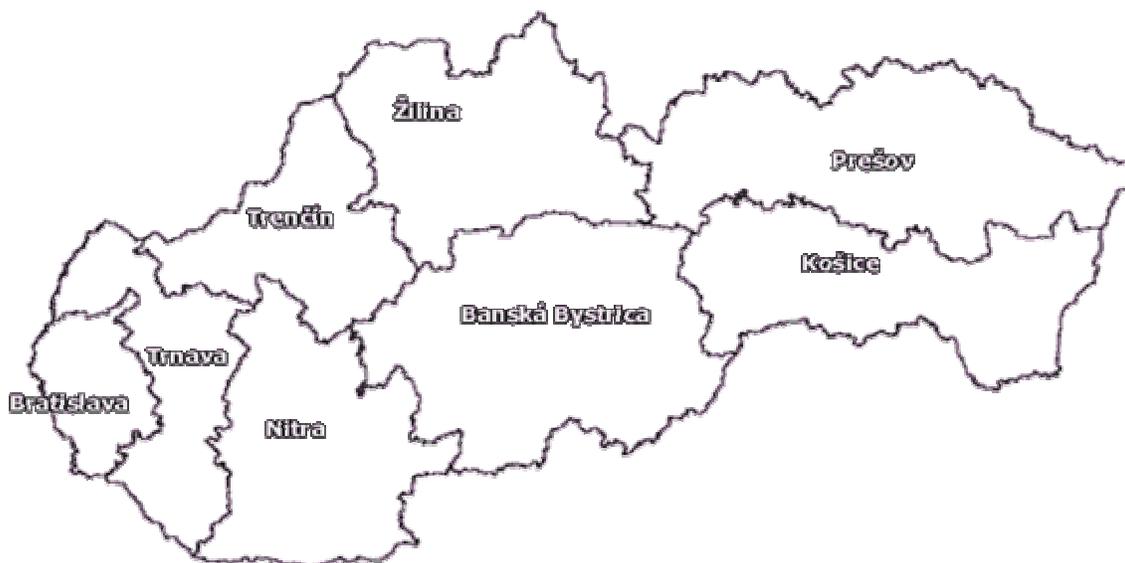
Until 2001 the Ministry of Health owned all but three hospitals (out of 92). Since then, the ownership and the managerial competencies of most hospitals have been devolved to self-governing municipalities and higher territorial units at regional level. Few of them - the better maintained - were sold to private providers or transformed into non-for-profit entities with the public benefit status. Hence, most of the hospital doctors are not state employees anymore.

Most of the hospitals though decentralised are being still poorly managed and producing debts. The year 2005 is supposed to be the breaking one, with regard to planned hospitals transformation into for-profit organizations, that can not afford create any debt. However, there is only little increase in financial resources and 10 -15% reduction of staff is expected. The doctors' salaries in the municipal or regional hospitals have already slightly fallen down. This is one of the reasons of continuing outflow of specialists from Slovakia to other member states of European Union.

Medical organisations

The Slovak Medical Chamber (Slovenská lekárska komora – SLK) is a medical organisation based on voluntary membership of physicians. SLK is the body responsible for registration of all practising doctors, for licensing and for supervision in the field of ethics and professionalism. It speaks for doctors and provides services for its members. It is also involved in the process of continuing medical education, medical training and in the bargaining process with insurance companies. It is not a variety of trade union

Bratislava is the seat of the Headquarters and the Board of SLK. There are eight Regional Medical Chambers in Slovakia with their offices – each in the corresponding higher territorial unit. Regional Chambers are partners to self-governing authorities in the given region.



There were 19102 doctors registered in Slovakia in April 2005. Out of them 18707 were members of the Slovak Medical Chamber and 12380 belonged to hospital doctors.

The Slovak Medical Association (scientific organisation), Doctors' Trade Union, The Association of Private Doctors and The Union of Specialists belong to other medical organisations in Slovakia cooperating more or less closely with SLK. Especially the Slovak Medical Association is involved into process of CME directed at and controlled by SLK. There is not any special medical organisation representing exclusively hospital doctors in Slovakia although Doctors' Trade Union is similar to it. Unfortunately The Union is not very well -organised and its position is too passive at the moment.

Mikuláš Buzgó