

**Workshop Biotechnologie im Partnerland Polen**  
Centre for Functional Genomics Berlin-Brandenburg  
Max-Planck-Institut für Molekulare Genetik  
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## Grundlagen des polnischen Gesundheitssystems

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### Short history of health reforms

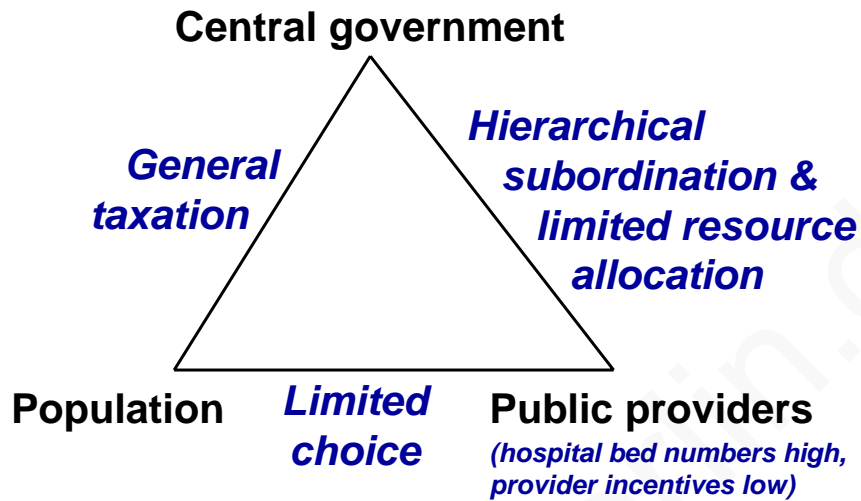
Background

Health care delivery

Health care financing

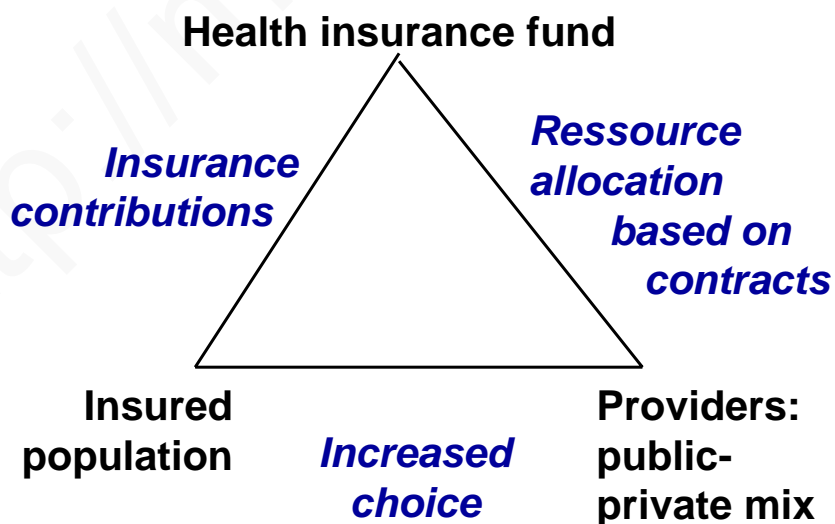
Key issues

## CEE health care systems in 1990



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## CEE health care systems in 2005



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### Short history of health reforms 1

- 1989 Round Table Discussion - change of political and economic system including adoption of „Directions in organization and financing of health care” to improve population health
- 1991 Decentralisation of management and ownership of health care units
  - Equal status of private and public sectors in contracting for public finances
  - Introduction of primary health care (family medicine)

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### Short history of health reforms 2

- 1997 Act to introduce social health insurance (2 years of vacatio legis)
- 1999 Introduction of 17 Sickness funds: contribution rate of 7.5% in time of economic crisis and high unemployment
- 2002 National Health Fund (NHF) created
- 2003 NHF Act ruled unconstitutional
- 2004 Revised NHF Act:
  - Strengthened role of MoH
  - Consumer and provider involvement
  - Official waiting lists established
  - Contribution rate now at 8.0%

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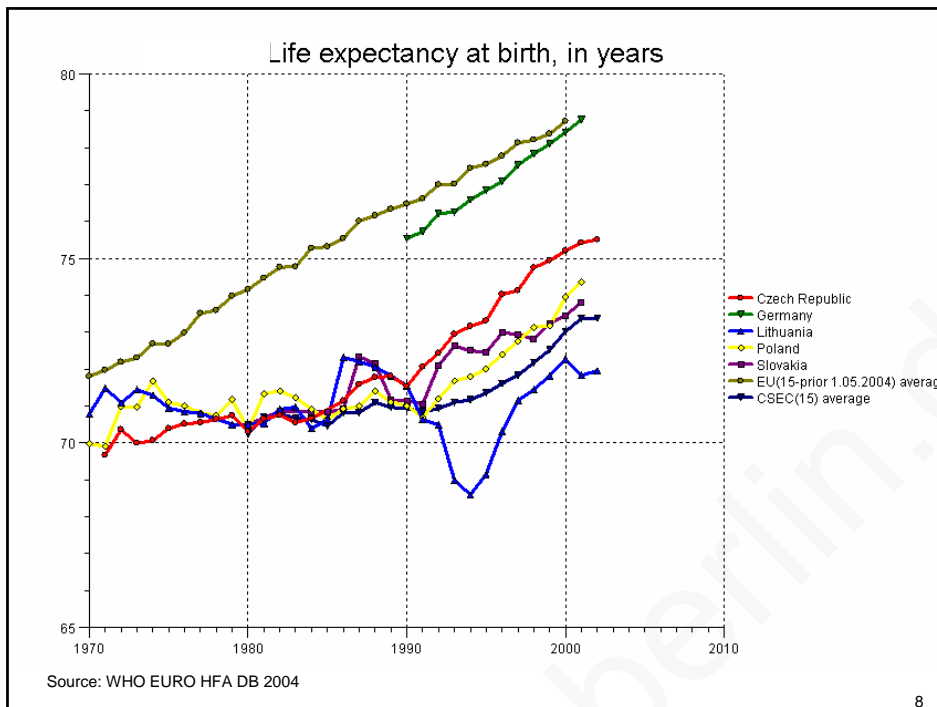
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## Macro-economic indicators

Indicators	1991	1992	1995	1996	1998	1999	2000	2001	2002	2003
GDP growth rate (%change)	-7.0	2.6	7.0	6.0	4.8	4.1	4	2	1.3	-
Annual inflation rate	70.3	43.0	27.8	19.9	11.8	7.3	10.1	5.5	1.7	-
Real GDP per capita PPP US\$	4500	4994	7003	7383	8472	8989	9529	9450	10800	11350
Annual index of real wages (1989 base=100)	75.4	73.3	73.7	77.9	85.2	109.3	110.8	114.3	-	-
Registered unemployment	11.8	13.6	15.2	13.2	10.4	13.0	15.1	17.4	18.1	

Source: UNICEF TransMONEE database ; WHO Regional Office for Europe health for all database 2005.

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## Changes in health care delivery

- Number of hospital beds decreased by 25%
- Staff decreased from ~800,000 to ~650,000
- Increase of number of hospitalizations
- Increased consumption of innovative drugs (reimbursement growth 11.5 to 19%) – **but lack of control mechanisms**
- Introduction of contracting procedures replacing budgets

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## Decentralisation and market mechanisms

- 1991 Service providers – change of legal status from central governmental to local government
- 1996 Introduction of contracting mechanism for health services
- 1997 Contracting with private entities allowed
- 1999 Contracts with Sickness Funds

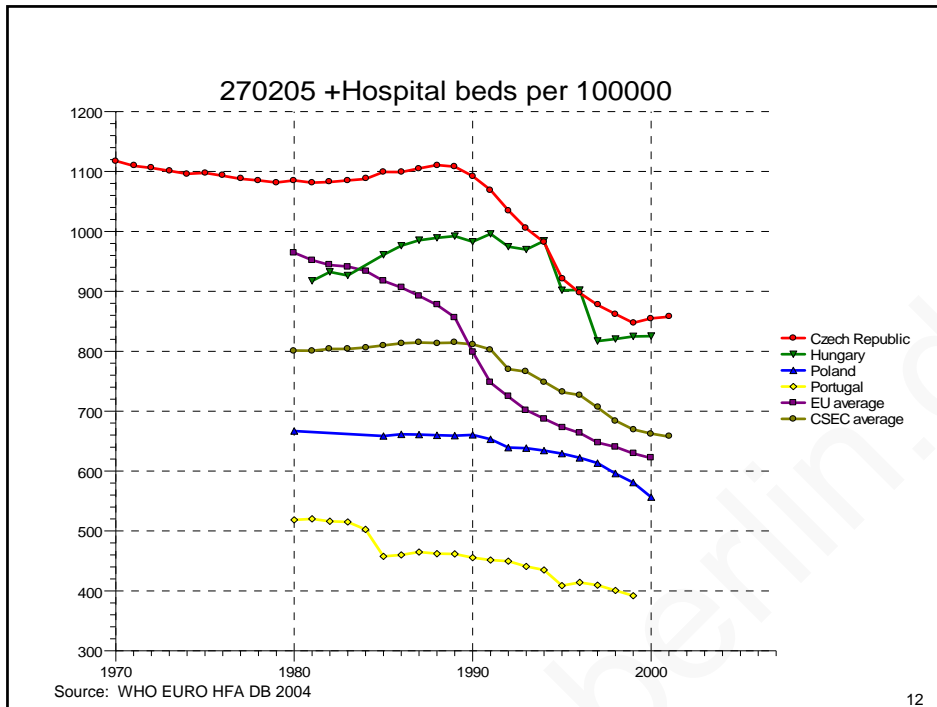
*In parallel:*

- 1995-1997 Development of electronic programme for Medical Services Registration, interrupted in 1998

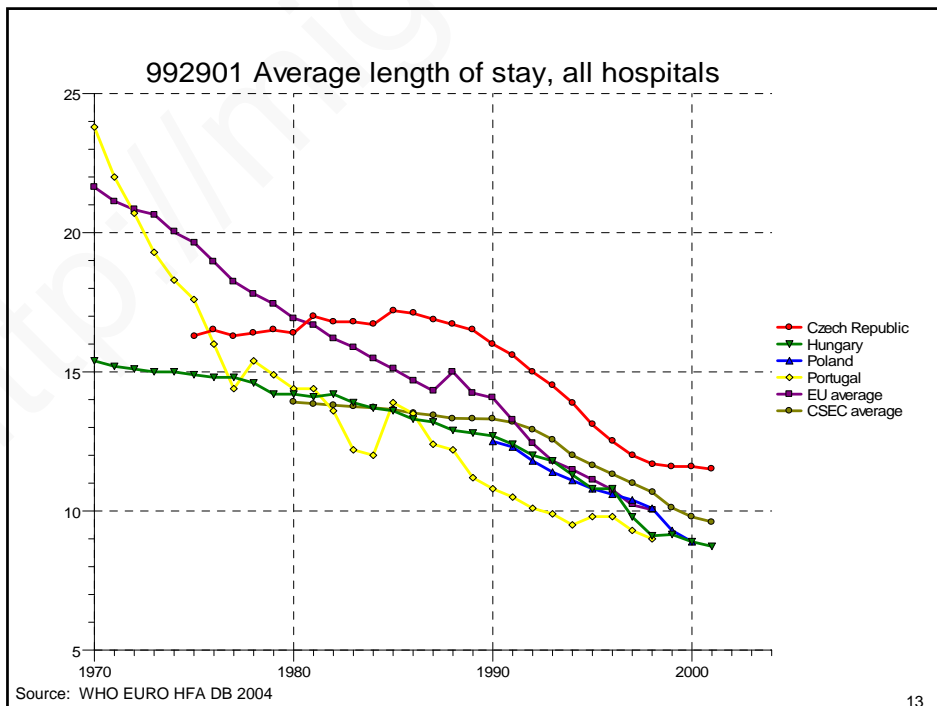


**National Health Fund: horse or carriage?**

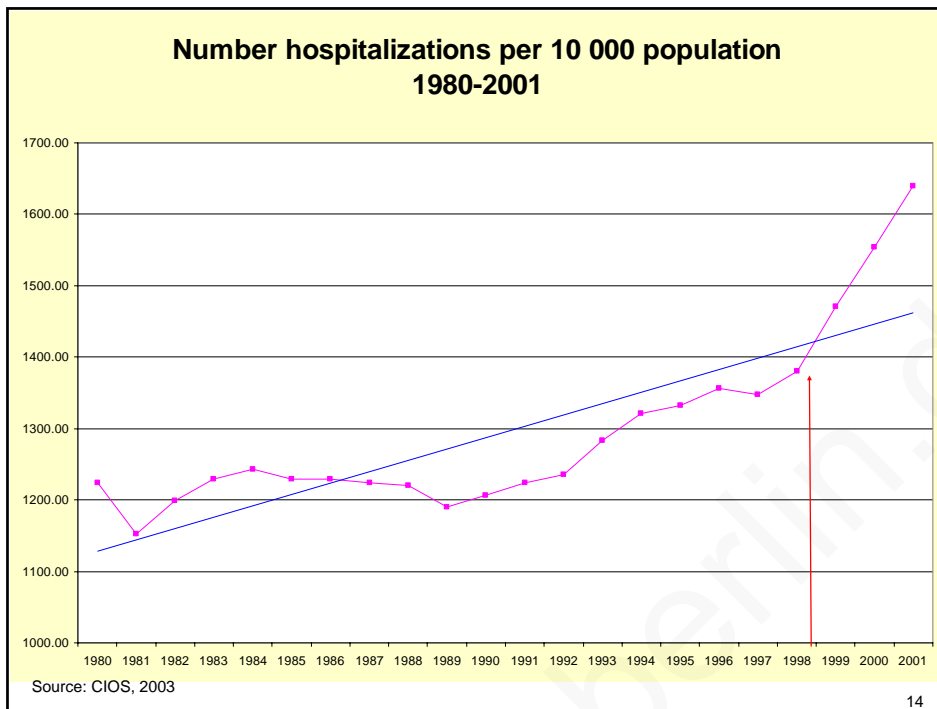
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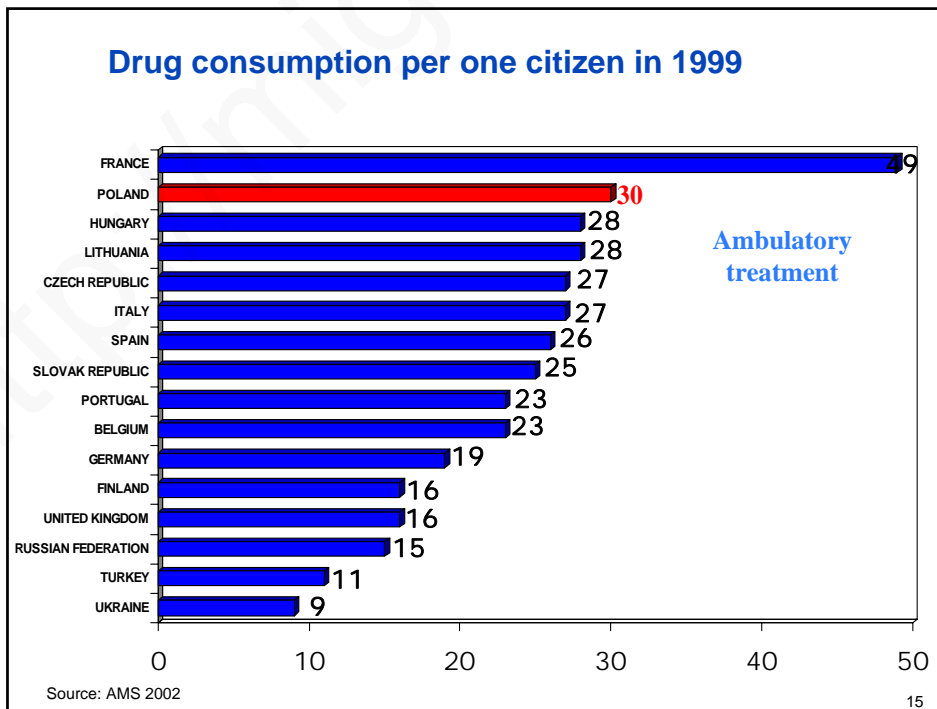
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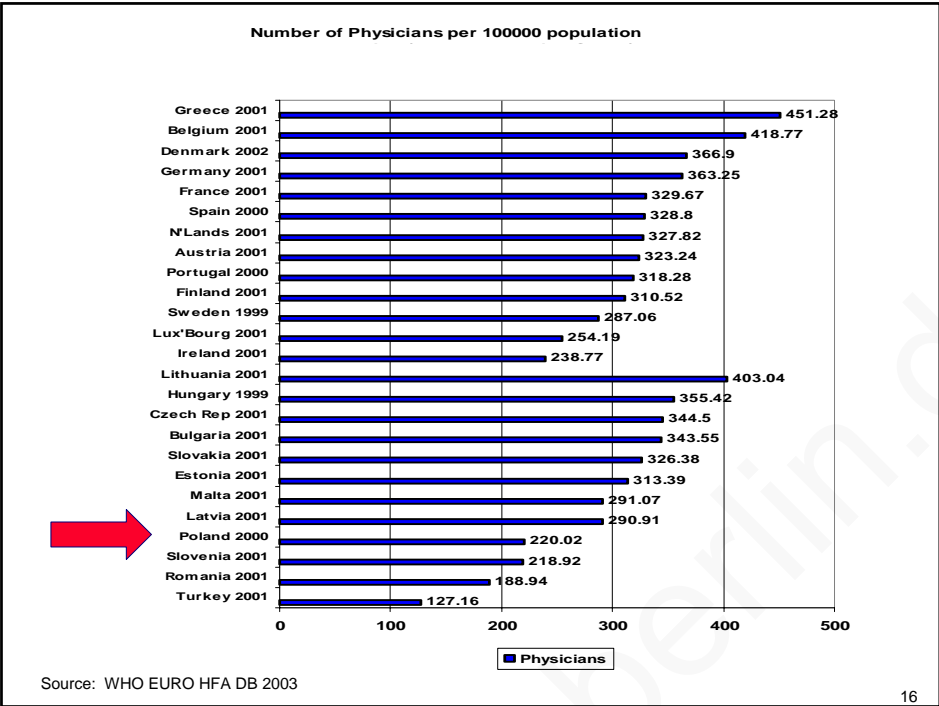


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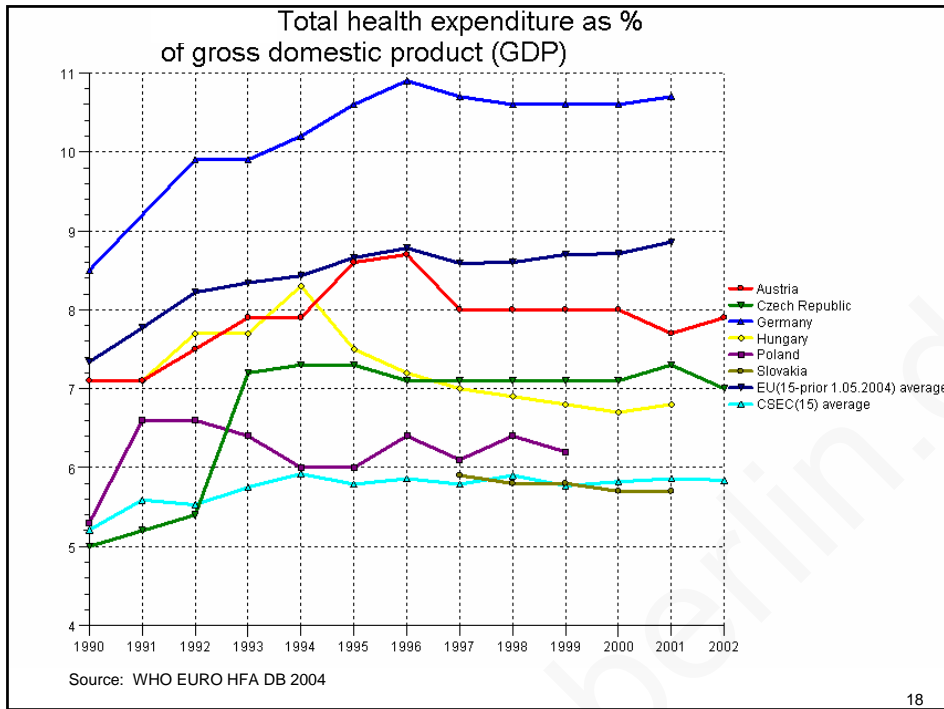


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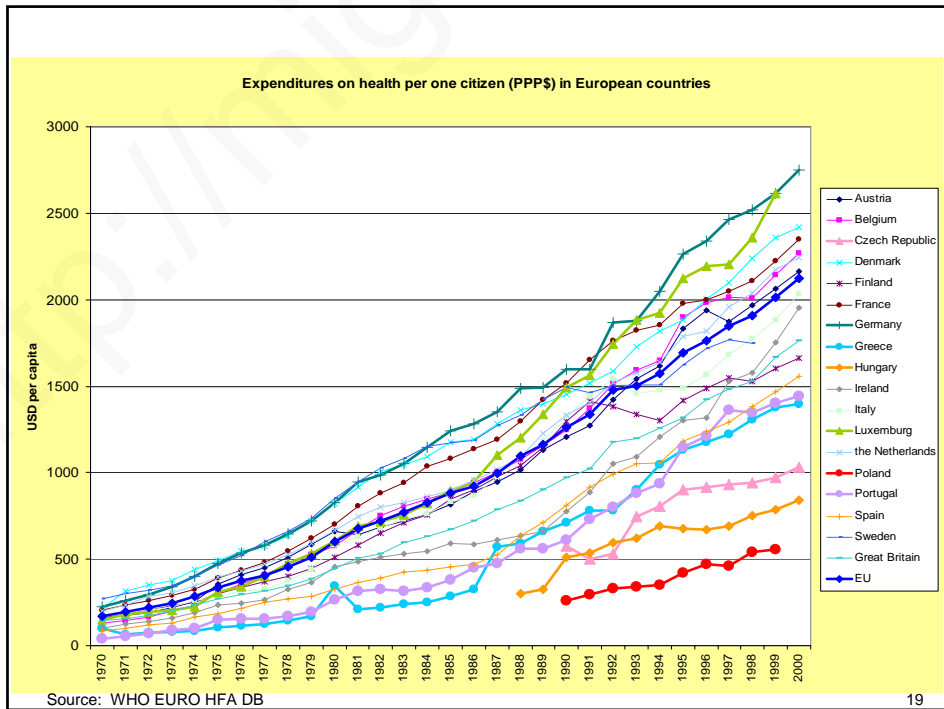




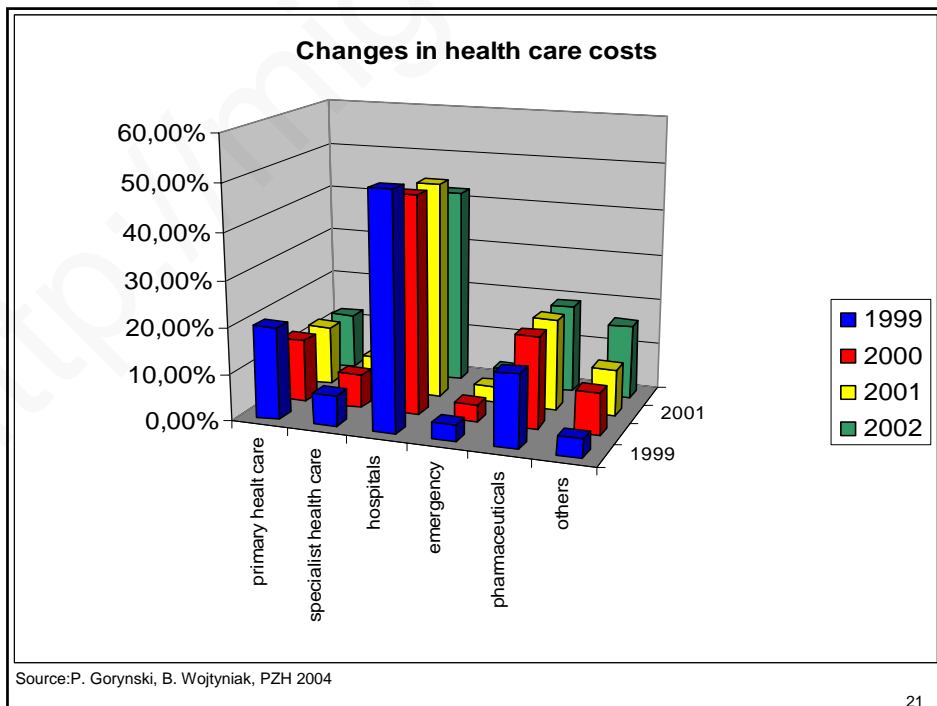
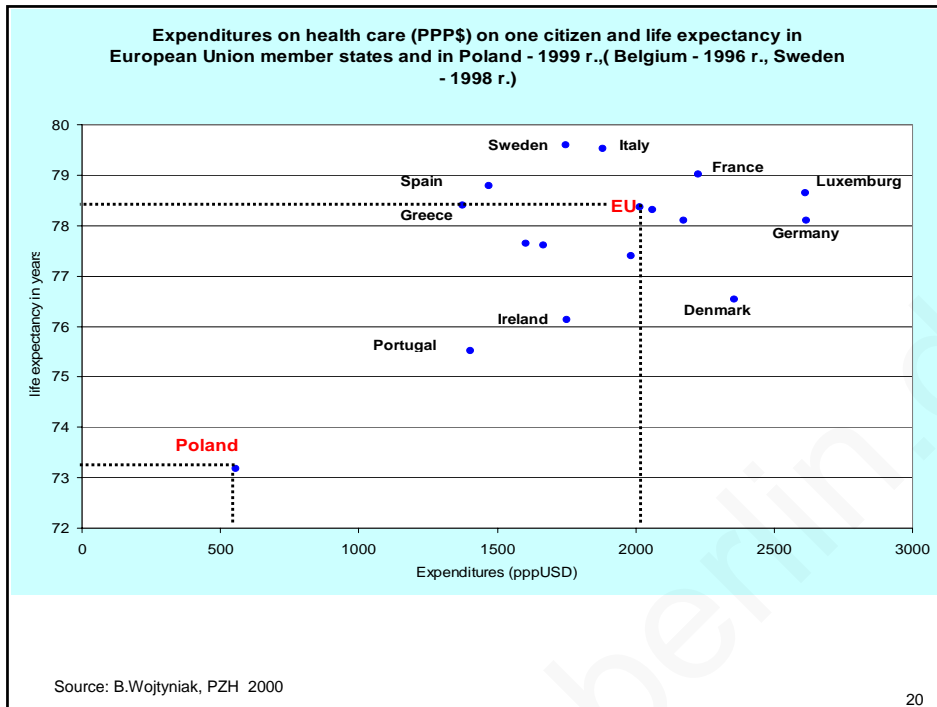
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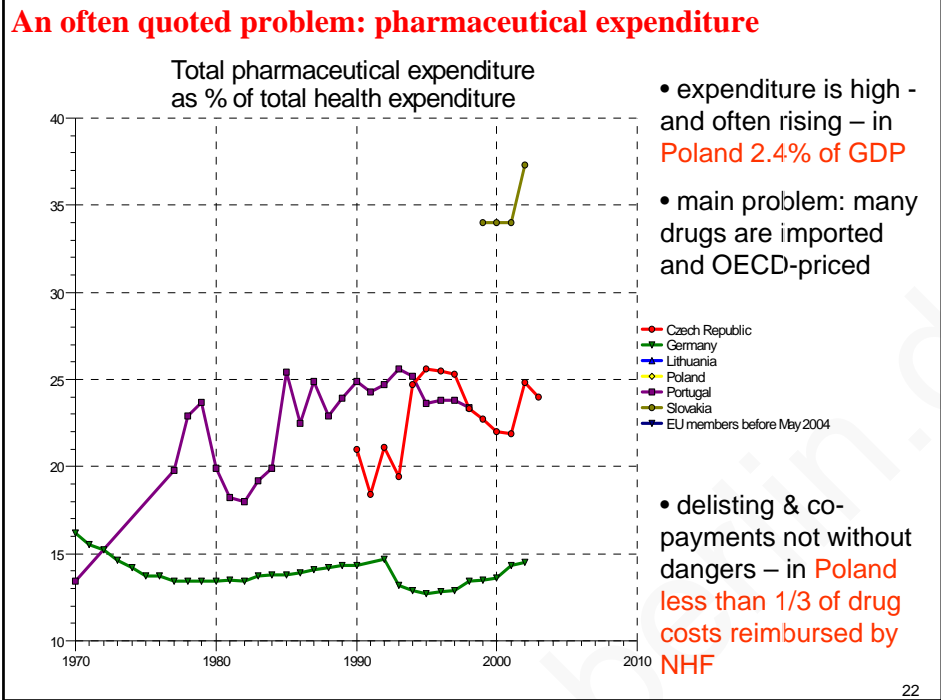


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**Key question: Why were 17 Sickness Funds merged in one National Health Fund in 2002 ?**

- Public dissatisfaction after introducing sickness funds
- Political agenda
- Centralization of health system
- „Strengthening” control functions of Minister of Health on health politics and financing
- Opportunity to introduce new people to the Health Fund management

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**Key issues**

- Levels of public funding for health care have not kept pace with GDP growth, falling slightly as a proportion of GDP since 1995
- Private expenditures account for 30 - 40% of total expenditures on health care
- Majority of private spending goes on drugs and medical devices, which are only partially covered by the NHF benefits package
- Informal payments are widespread

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## Current developments

### Parliamentary elections in October 2005

- The two coalition parties have very different ideas about health reforms:
- Majority party (PiS) wants to return to tax-based financing, budgetary resource allocation and a strong MoH
- Coalition partner (PO) favours privatization....

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## Weiterführende Literatur

Kuszewski K, Gericke C. In: Gericke C, Busse R, editors. Health Systems in Transition – Poland. Copenhagen: WHO Regional Office for Europe on behalf of the European Observatory on Health Systems and Policies, 2005 (in press)

demnächst auch als pdf auf:

[www.observatory.dk](http://www.observatory.dk) oder <http://mig.tu-berlin.de>

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