

Quality: the key part of the reform

MATRA workshop

Ing. Peter Pažitný, MSc.
MUDr. Tomáš Szalay
MUDr. Rudolf Zajac

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Reform Puzzle

Health Insurance Companies and Surveillance Authority Act

Health Insurance Act

Act on the Scope of Health Care Covered by the Public Health Insurance

Health Care Act

Health Care Providers Act

Emergency Services Act

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Main changes

- Higher responsibility** of the health insurance company for health care purchasing and for insuree's financial protection
- Higher responsibility** of the provider for provided health care
- Higher responsibility** of the patient for his own health

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Patient's Responsibility

(§ 42 of the "Scope" Act)

Formulation of patient's responsibility for prevention and for obeying the treatment regime:

Health Insurance Company is allowed to

- ask the insuree to refund the provided health care, if the health care was necessary to provide in consequence of breaching the treatment regime or in consequence of use of addictive drug,
- reimburse part of the insuree's co-payment if the insuree undergoes preventive examinations, preventive vaccination and leads a healthy lifestyle.

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Patient Management

Patient

Insurance company

Hospital

Ambulatory care

85 % of resources are consumed by 15 % of patients

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Quality of Health Care

- Obligation of minimal standards
- Tool of competition
- Criterion for selective purchasing and contracting (between the provider and the health insurance company)

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§ 9 of the Providers' Act

- Provider is obliged to implement **quality system** for quality-assurance and quality-improvement
- Details on **quality system** assessment will be set in regulation published by the ministry
- Comes into force on January 1st 2007

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Health Insurance Companies Act

- Health Insurance Company is obliged to publish the **criteria** for contracting, related to
 - 1) **personal and technical equipment** of the provider,
 - 2) **quality indicators** for monitoring of selected areas of provided health care,
 - 3) **certification of provider's quality system.**

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Quality indicators - content

- Indicators are elaborated for assessment of the following fields of provided health care:
 - **accessibility** of health care,
 - **cost-effectiveness**,
 - **efficiency and adequacy** of health care,
 - **perception** of provided health care by the patient,
 - **outcomes** of health care.

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Quality indicators – preparation

- **Indicators are elaborated yearly by the ministry of health in co-operation with**
 - health care professionals' associations,
 - health insurance companies,
 - Surveillance Authority.

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Quality indicators - form

Indicators are published in the Government Decree
 (§ 7 par. 7 of Health Insurance Companies and Surveillance Authority Act)

Government Decree's Form:

- type of health care provider assessed by the indicator,
- area of health care assessed by the indicator,
- label of the indicator,
- description of the indicator,
- level of the indicator and acceptable deviation,
- time period for evaluating of the indicator,
- identification of the data-source for processing of the indicator.

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Surveillance Authority

- Main specialists in individual medical disciplines
- 32 affiliated workplaces all over Slovakia (autopsy rooms); autopsy issues are handled both in Health Care Act and in Health Insurance Companies and Surveillance Authority Act

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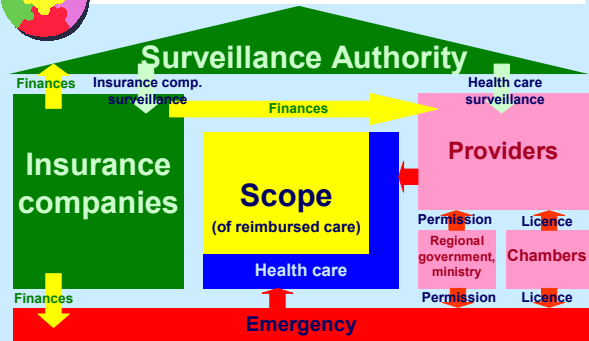


Health Care Act

- Ministry of Health issues **standard diagnostic and therapeutic protocols** (§ 45 letter c).
- **Catalogue of procedures**, which should act as these standard protocols, will have only informative role in relation to the categorization of non-priority diseases.



NEW PLAYERS



Thank you for your attention!

Your comments are welcome
(and more informations are available)
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