



STATE PARTICIPATION IN THE IMPLEMENTATION OF NATIONAL HEALTH POLICY

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Abstract

The present paper examines the status and problems of financing and management of the healthcare system. It is based on a research realized in 2017. The research was conducted among health experts of Ministry of Health, National Health Insurance Fund, executive directors and managers of hospitals and laboratories, university professors of health care management and other experts in the healthcare system. The authors investigate their positions about the changes in healthcare financing in Bulgaria. The study shows that the Ministry of Health have to manage and finance some priority health activities.

Keywords: National health policy, Ministry of Health, healthcare financing

INTRODUCTION

The healthcare system of every country, including Bulgaria, and its organization depend on its funding system. That effects the medical state of the country's population which is a main factor determining its way of life, economic state and prosperity. The main resources of healthcare funds are taxes (state and municipal budget), health insurance funds, direct payments made by patients, non-governmental organizations, charity and others.

Sources of funding effect economy (e.g. heavy taxation), the fairness of the system, financial availability of the universal coverage and reach of the main package that in turn determine the level of financial stability and influence healthcare results and the long-term financial endurance of the system. The Ministry of Health (MH) has a crucial role in the Republic of Bulgaria. It is a state institution which guarantees public healthcare and applies the principles of equal usage of medical services as well as providing accessible and quality health service and contributes to the application of better healthcare to the whole population of the country.

ANALYSIS

For the period May – July 2017 a pilot poll survey was conducted among experts from the MH, National Health Insurance Fund (NHIF), agencies, health managers and university lecturers. The participants were managers of the MH and NHIF departments and agencies, CEOs and administration members of medical centers and laboratories, health management lecturers and individuals with

expert positions in the healthcare system. The poll is anonymous encompasses 73 participants from the whole country. The main body (78.08 %) works in Sofia, which is to be expected bearing in mind the target group of the participants.

Health managers make up the main body of participants. They are almost 45.21% followed by the university lecturers in the area of health politics and management – 24.66%, experts (From MH, NHIF, national centers and agencies) – 23.29%, and in last place people working on other positions – 6.85%. The separation of the questioned individuals matches the general aggregation of every single group, i.e. all potential individuals on that position.

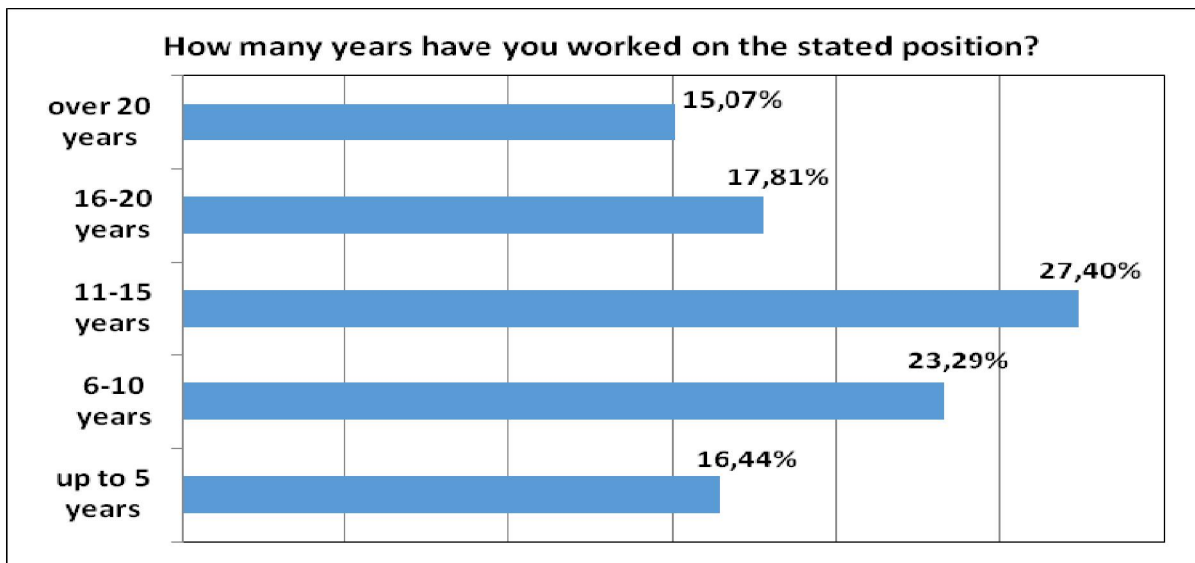


Figure 1: Distribution of poll-takers according to internship

The internship of the poll's participant varies from 2 to 29 years. We separated the participants in five groups respectively ones with internship not exceeding 5 years, from 6 – 10, 11 – 15, 16-20 and over 20 years. As it is shown on Figure 1 the distribution of people in all groups is relatively similar. The smallest groups is that of the ones with internship exceeding 20 years (15.07%), and the most participants have internship varying from 11 to 15 years. Almost 69% from the questioned have between 6 and 20 years of internship on the position they occupy and the main body's total internship in the healthcare system is bigger.

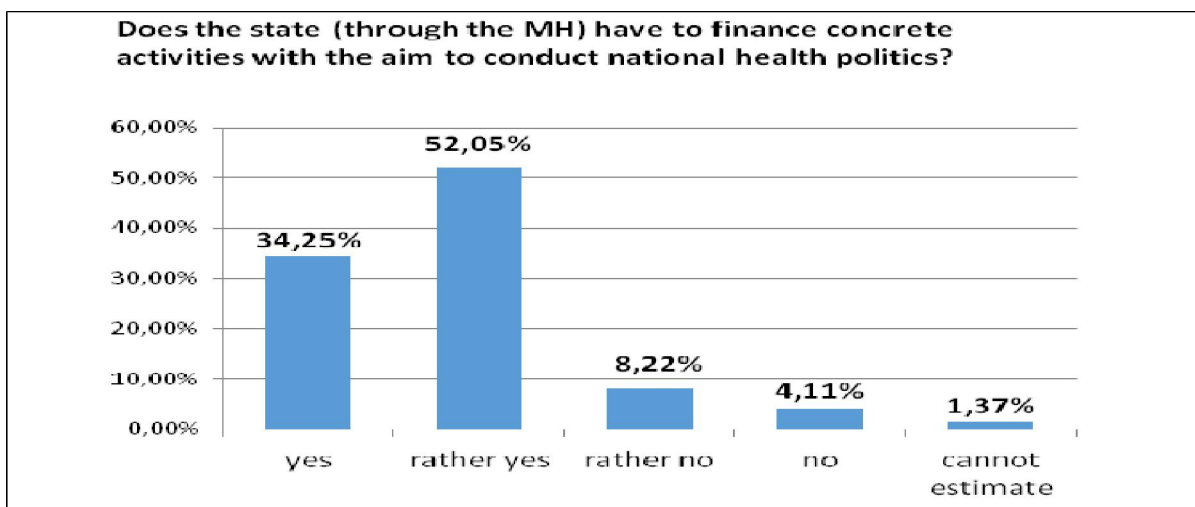


Figure 2: The participants' opinion regarding the financial activity of the country (MH)

The responses "Yes" and "Closer to yes" are given by over 86% of the poll-takers. This is completely logical considering the fact that the government has a significant role in healthcare management and is responsible for the state of society's health. Negative answers were given by a little over 12% of the participants and only one person couldn't estimate (Figure 2). While finalizing the complete poll survey we are to connect the answers to questions such as this one and the position and internship of the poll takers as this will clear our understanding of what types of views have the different groups of participants.

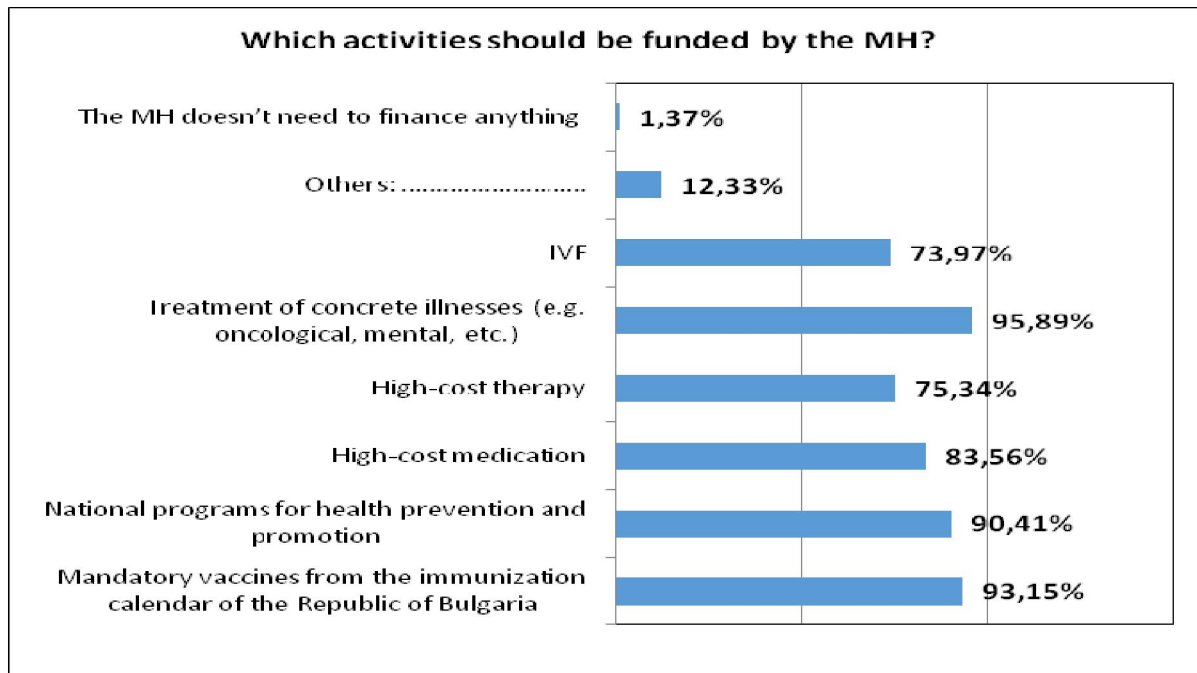


Figure 3: The participants' opinion on the government (MH) funded activities

The biggest share of people who took the poll (95.89%) emphasize the importance of concrete disease funding (oncological, mental and others). Some of these diseases are currently a priority of the state and their treatment is financed. Almost all possible concrete answers are widely supported by the participants. The least people – 73.97% support IVF procedures. That may be due to the different demands for change in the current funding rules and various prejudices. Over 12% indicate other illnesses and a part of them gives concrete examples – Alzheimer's, diabetes, diseases rare in Bulgaria, AIDS, syphilis and heart disease. One participant advocates that the MH doesn't need to fund anything. The answers exceed 100% because the responders were given the opportunity to give more than one answer and most of them did so.

Almost 77% of the participants acknowledge that the MH has lowered its participation in the funding of various activities and medications. That is normal considering that a process of transfer of these obligations to the NHIF is being observed.

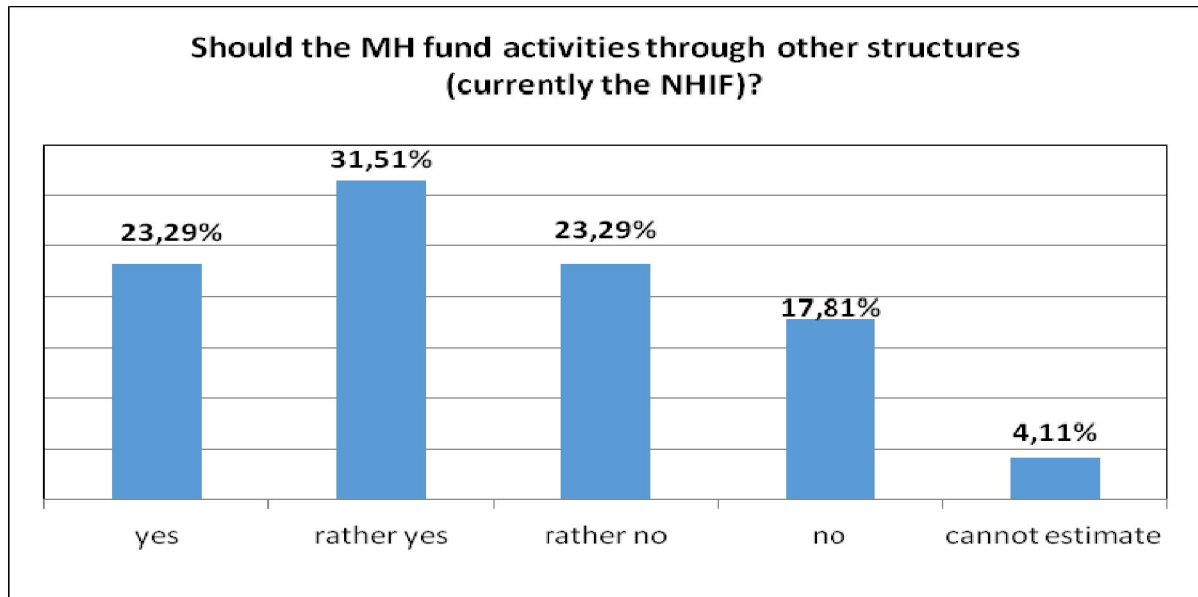


Figure 4: The participants' opinion on MH financing through other institutions

The answers to this question are quite balanced– 55% accept the MH's financing to be made through other structures, while over 41% have the opposite view. The supporters of the idea may support the current practice of financing through the NHIF and the decline in the MH's direct administration. These activities and responsibilities are therefore being taken by the Fund. The ones that don't believe the MH's funding be made by another structure probably don't have confidence in the NHIF's personnel's ability to handle the task. A little over 4% can't answer whether there is such a need.

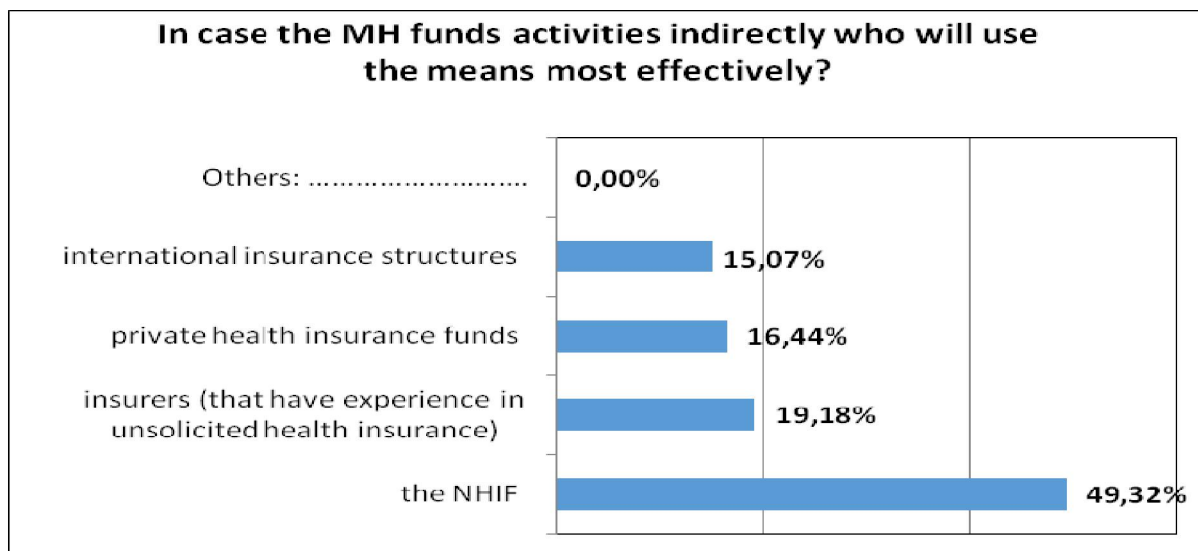


Figure 5: The respondents' opinion on the efficiency of the structures that can take on the MH's responsibilities.

Almost half of the participants (48.32%) acknowledge the NHIF as a structure that will fulfil its tasks the best. The other group has a slight predominance and believes that another structure will be more efficient. 19.18% support insurers (that have experience in unsolicited health insurance), 16.44% support private health insurance funds and 15.07% want international insurance structures to participate in this activity.

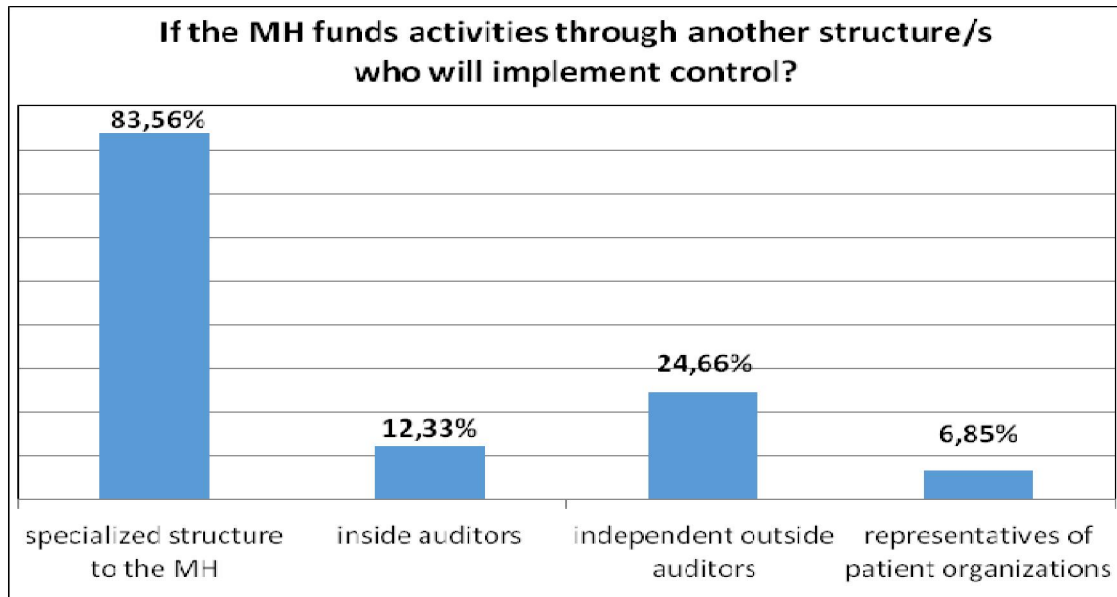


Figure 6: The participants' opinion on performance control over the activities funded by the MH

The biggest share of poll-takers (83.56%) think that if the MH finances activities through another structure or structures the responsibility to oversee how activities are executed and resources are used is in the specialized structure's or an agency's. This obligation may be temporary structure like Executive Agency "Medical Audit" or a new one created specifically for this purpose. The opinion that supervision activity can be given to independent auditors is the second most supported opinion (24.66%). The idea that inside supervision isn't accepted by the majority. It is supported by only 12.33%. The least support is given to representatives of patient organizations – 6.85%. The answers of this question exceed 100% because the responders were given the opportunity to give more than one answer and most of them did so.

CONCLUSION

From the survey it is evident that the government decreases its participation in funding healthcare activities and medication. The experts who participated in the poll share the opinion that the state via the Ministry of Health needs to be the main guarantor of society's health and has to take care of the treatment of concrete illnesses, support high-cost therapy and medicine, vaccines, national prevention and promotion campaigns, IVF procedures, etc. Whether health treatment is financed directly by the Ministry or by other structures the Ministry of Health itself should control the execution of activities. During the last ten years different politicians discuss the necessary healthcare reforms. The opinion that the monopoly of the NHIF needs to be limited or eradicated is very common. Unfortunately, political platforms and programs present only intentions, the model of the healthcare system is unclear, competing health insurance funds are suggested, funds are being awarded, etc. The Ministry of Health always has to be the institution that leads the national healthcare system, realizes the national health policy and takes the responsibility to fund priority healthcare activities in order to guarantee the health of the population of the Republic of Bulgaria.

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