





Policy Research Alert

FROM FLASH-IT, A DISSEMINATION PROJECT RELATING EUROPEAN POLICY PRIORITIES TO EU-FUNDED RESEARCH IN SOCIO-ECONOMIC SCIENCES AND HUMANITIES

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Researchers find major health system problems in Central and Eastern Europe (CEE)

Health care costs for private households in CEE countries are having a 'catastrophic and impoverishing effect', an EU-funded research project has found¹. Low-income groups in particular are being burdened by a non-transparent system of charges for medical services. The researchers conclude that healthcare reforms already implemented in CEE countries cannot succeed until such problems are resolved.

Examining patient payment policies in Bulgaria, Hungary, Lithuania, Poland, Romania and Ukraine, the ASSPRO research project² found that health care costs in the CEE region are being shifted from the state to the consumer. The shift is intended to produce a more efficient health care system and provide incentives for healthier lifestyles. But the evidence shows that out-of-pocket payments (formal, informal and indirect) for medical services place 'considerable financial burden' on consumers, often having a negative impact on both their health and their socio-economic well-being. The researchers say 'immediate policy attention' is needed to address this situation.

One factor hampering success of health care reforms in CEE countries is the persistence of the informal payment phenomenon (payment for services that are supposed to be provided at no charge). The portion of patients paying informally for physician visits ranges from around 7% in Poland to 36% in Ukraine. Nearly half of all patients in Lithuania and Romania pay informally for hospital admission; in Poland the figure is over 16%.

Through representative surveys conducted in the six target countries, ASSPRO discovered that between 25 and 49 per cent of consumers are reporting serious difficulties paying for medical services. For the purpose of the survey, 'difficulty' is defined as having to either borrow money, sell assets or forego treatment as a consequence of payment pressure.

Reflecting on the implications of their findings, the researchers recommend a number of concrete measures for the countries concerned, including:

- Offer exemptions and reductions to those who cannot afford to pay medical costs
- Develop strategies to eliminate informal patient payments
- Launch public information campaigns to make official patient charges more transparent
- Reinvest revenue from health system to improve access to and quality of medical care

¹ http://ec.europa.eu/research/social-sciences/pdf/policy-briefs-asspro-cee-2007_en.pdf

² ASSPRO CEE 2007 - Assessment of patient payment policies and projection of their efficiency, equity and quality effects. The case of Central and Eastern Europe. (www.assprocee2007.com)