

ПРОУЧВАНЕ СРЕД ОБЩОПРАКТИКУВАЩИТЕ ЛЕКАРИ ОТ СТАРОЗАГОРСКИ РЕГИОН, КАСАЕЩО МОДЕЛА НА ФИНАНСИРАНЕ В ПИМП

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SURVEY AMONG GPs FROM STARA ZAGORA REGION, CONCERNING THE FINANCING MODEL OF PRIMARY HEALTH CARE

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ABSTRACT:

Primary health care is defined as the first contact between the patient and the health care system in a new occurred health problem. Organization of primary care is subject to the needs of the patient and the delivery of health services and medical care must meet the following basic principles- accessibility; equity; continuity; quality and efficiency. As a manager and organizer of his practice, family doctor daily deal with a range of responsibilities, urgent obligations and short-term tasks. For a large group of family physicians problems in primary care practice arise on how the organization and financing of health care system, and in particular - the financing model of providers of primary health care.

Key words: financing model, GPs, management

INTRODUCTION:

General practitioner has a leading position in the implementation of primary health care. He is the entrance and the guide of every health insured patient in healthcare system in Bulgaria. With the functions of a manager, family doctor runs his practice, namely- medical staff, patient flow, high contents classified and unclassified information, allocation of time, tasks, material and financial resources. Realizing his activities, the family doctor too often encounter a number of difficulties and problems. For insurance of quality medical services is necessary precisely and responsible organization and management in ambulatory for primary health care according to laws and social, societal and economic factors of the environment.

GOAL:

Survey the attitudes and positions of Family Physicians from Stara Zagora region on the current model of funding for providers of primary medical care.

MATERIAL AND METHODS:

Our team conducted an extensive survey of general practitioners in Stara Zagora Region, Bulgaria, during the period from October 2013 to February 2014. It was applied direct individual questionnaire in strict compliance with the principles of anonymity and voluntariness.

DISCUSSION AND RESULTS:

The study involved 170 GPs from Stara Zagora region - Stara Zagora, Kazanluk, Chirpan, Gurkovo. The highest percentage of respondents are in age group 46-55 years.

The gender distribution is two thirds of women and one third men, is a tendency towards feminization in practices for primary health care. The majority of family physicians work in ambulatory for primary health care from the start of the health reform in 2000, they have experience as a GP for 14 years.

With legal basis in primary care are well aware 74% of surveyed family physicians. GPs accept the entry and operating model of mixed funding in primary care in Bulgaria, but for most of them it is not ripe enough. (Fig.1.)Based on this system of valuation of doctors working in the practice for primary outpatient care, family physicians do not receive adequate remuneration. The actual ratio 60/ 40 – capitation / payment for accomplished medical services on the basis of which is carried out allocation and provision of cash for providers of primary medical care is inappropriate for 54% of participants in the study.(Fig.2)

Fig.1

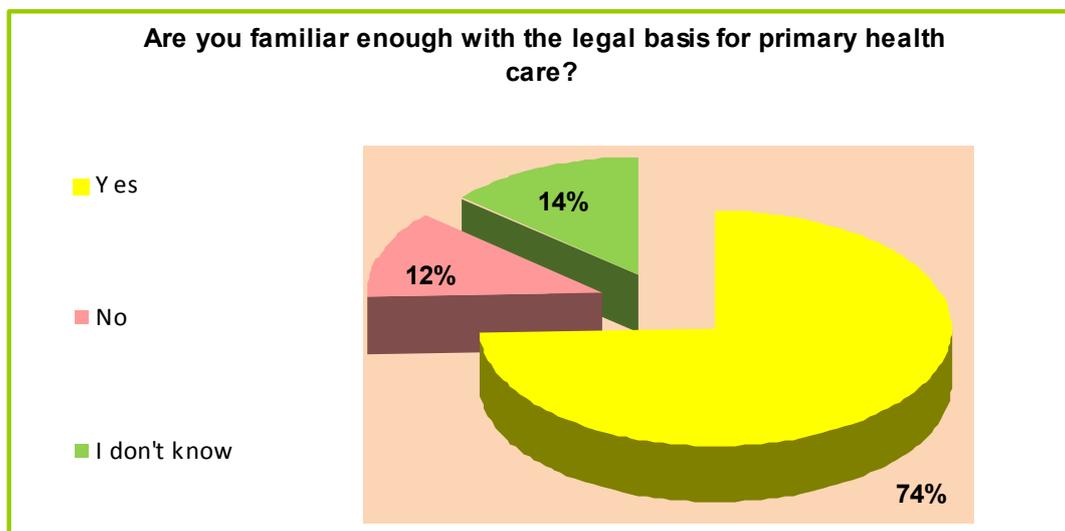
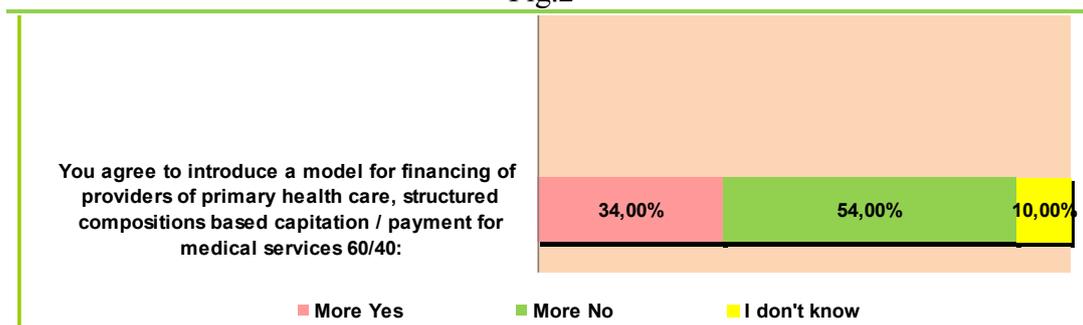


Fig.2

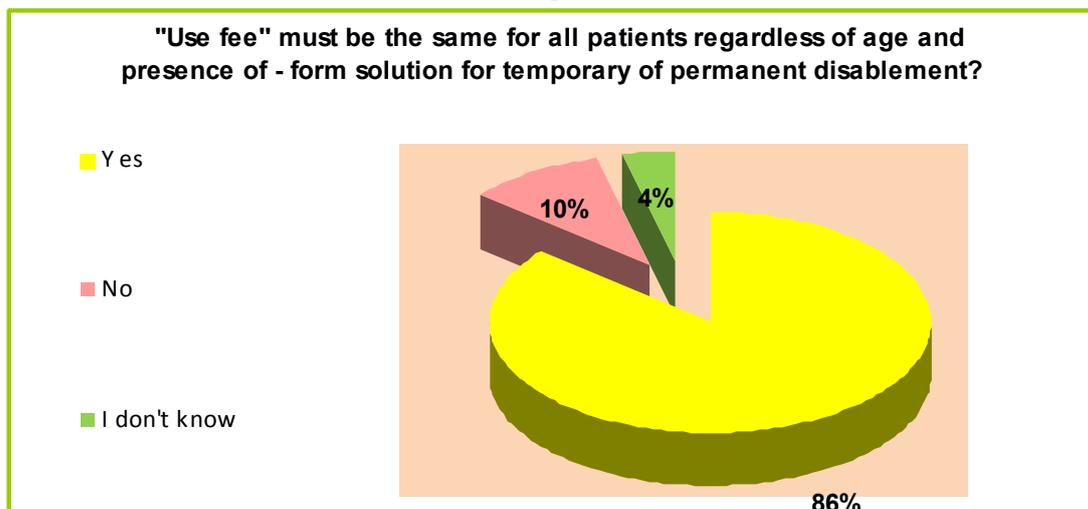


For increasing the financing of component “payment for accomplished health services” said most of the respondents. Principle of capitation, is pay per number of persons, although formed a significant part of the income of GPs is insufficient effective. Family physicians urge in the current model for determining remuneration of general practitioners have considerable influence, the number of examined patients and types of activities /performed medical services/.

There is inadequate funding of the basic package of health services by the contractual partner-National Health Insurance Fund. According to the respondents, health services, such as preventive and promotive activities should not only be a priority under the National Framework Agreement, but also to increase the financial returns for their implementation and expansion of their scope. GPs are convinced of the need to focus on specific preventive service, not at massive promotional strategy compared to existing risk factors at the population level. The cash for diagnostic and treatment activities, as well as dispensary and monitoring of chronically ill patients are also limited by family physicians. This has a significant effect on quality of health care and satisfaction of the patient, who uses of the right to health care in ambulatory for primary health care.

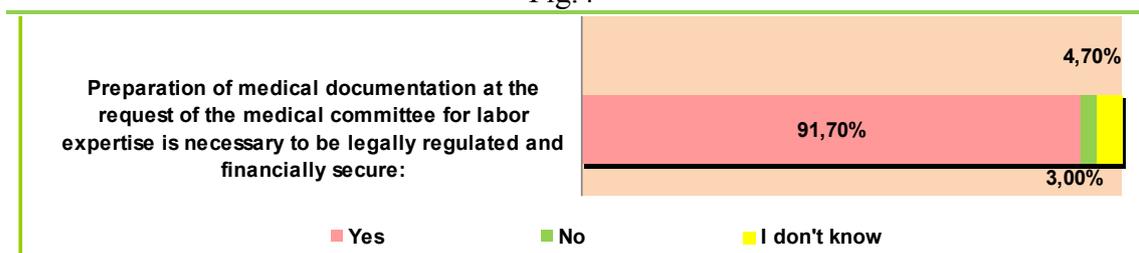
Most of the family doctors said about the need for "user fee" as a deterrent to the unlimited and uncontrolled attending ambulatory for primary health care. The user fee is required and it must be the same for all, regardless of age and presence of solution for temporary or permanent disability. (Fig.3) Many family physicians have expressed dissatisfaction with the high frequency of cases in which it is necessary to serve a large number of patients waiting outside the office of primary health care. The introduction of so-called "list of waiting's patients' with an appointment in advance, according to the respondents will greatly reduce the burden on their daily work and prevent confrontations among patients.

Fig.3



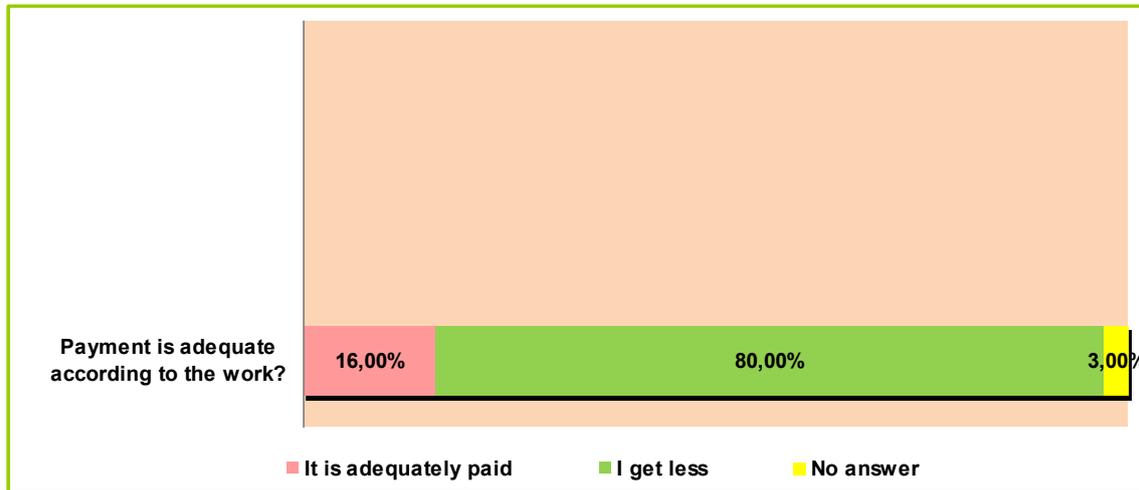
During the interview family physicians expressed their desires for funding of outpatient medical examinations in acute diseases, and in the preparation of medical records, including issuing form for medical research and / or consultations with specialists at the request of the Commission for Labor medical expertise. (Fig.4)

Fig.4



Healthcare system, the ongoing reforms, economic conditions, the inability of physicians to assert their rights are basically the reasons for unsatisfied payment of medical practice. A significant part of family physicians are dissatisfied with their monthly salary. Activities of the family doctor is responsible and predisposes to psycho-emotional tension. Salary does not match the labor input, everyday professional risk and unexpected stressful situations. (Fig.5)

Fig.5



CONCLUSIONS:

Activity of GPs is mainly controlled by the contractual partner in the face of National Health Insurance Fund. The control is expressed in strict monitoring of compliance with numerous requirements, determined by it. The survey shows that the system of primary health care and the model of provision of medical practice according to practitioners of many years GPs have a many problems to solve and to remove. Through this system provide primary health care to nearly 7 million patients around 4500 selfless GPs.

In conclusion, we will quote the words of Prof. Bozhimir Davidov:

Therefore, a solid investment in studying and proposing solutions to the major problems of the family doctor is more than necessary. Have to be made serious scientific study based on the analysis of foreign experience, gained significant amount of information from our system, results from field experiments, etc., etc. If they have sufficient incentives and guarantees that their proposals would be "heard", family doctors will surely make a number of good suggestions. They definitely want to cure us more efficiently.

REFERENCES:

1. Национален рамков договор, 2014
2. Министерство на здравеопазването. Наредба № 41 от 21 декември 2005 г. за утвърждаване на « Медицински стандарти по обща медицинска практика» Държавен вестник бр.01/ 2006.г
3. Давидов Б., Общопрактикуващите лекари- търговци или нашите семейни лекари?, Дневник ,29 Ноември 2013 | 14:24 , <http://www.cross.bg/pomosht-deiinostta-kasata-1385363.html#ixzz2wD8YNH4Q>
4. Годишен отчет на НЗОК за 2012 година
5. www.who.int
6. Zlatanova-Velikova R., Zlatanova T. , Laleva D., General problems of access to primary medical care in Bulgaria, Science & Technologies Volume II, Number 1, 2012 Medicine 174

7. Делчева Е., Икономически параметри на съвременната здравна реформа, Икономически алтернативи, брой 3, 2007
8. Национална здравна стратегия (2014- 2020), Министерство на здравеопазването-България
9. Годишен доклад на министерството по Икономика 2013
10. Годишен доклад на БАН , Икономическо развитие и политики в България: оценки и очаквания, „Политики в здравеопазването- икономически анализ и оценки”, ГорексПрес, София, 2013г.
11. Salchev P. , Georgieva L., Hristov N., Kundurdzhiev T., Dimitrova D., Primary Health Care in Bulgaria – Facts and Analyses, Институт „Отворено общество” – София, 2011, ISBN 978-954-2933-12-0
12. Закон за здравето, Обн. ДВ бр. 70 от 10.08.2004г, в сила от 01.01.2005г,изм. ДВ бр. 60 от 05.08.2011г.
13. Закон за здравното осигуряване, Обн. ДВ бр. 70 от 19.06.1998 г.,..... изм. ДВ бр. 100 от 20.12.2011 г., в сила от 1.01.2012 г.