

## NATIONAL REPORT

### HUNGARY

#### FINANCING

According to the memorandum from 9th March 2008, the copayment (visit-fee) was cancelled from 1st of April. Since the copayment made a monthly average 600 € income for the GP practices, was lost. So that the Government decided to compensate that income by:

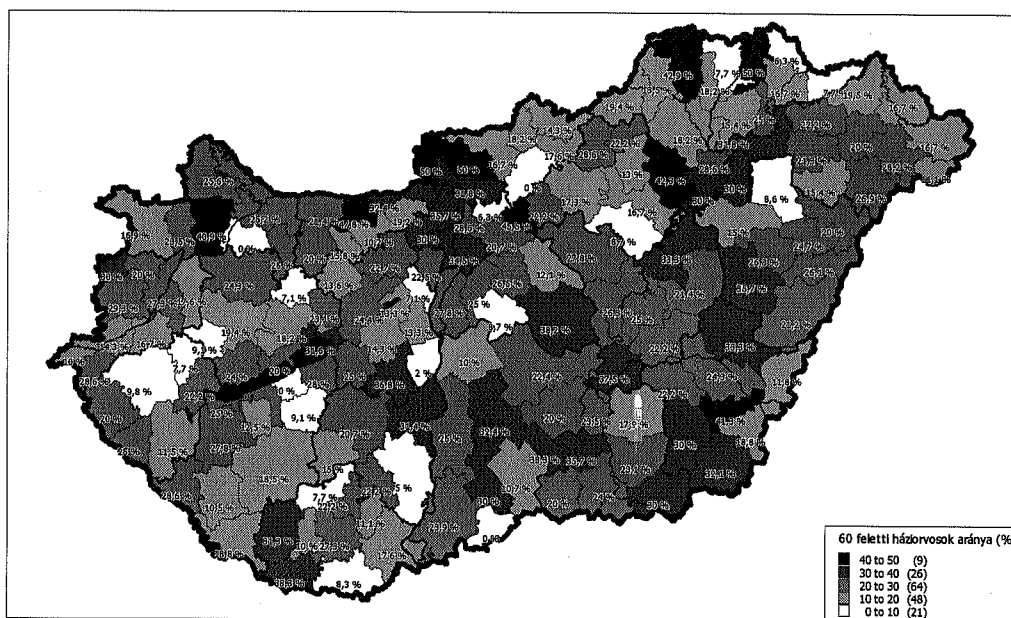
- paying for each visit 0,2 € if the insurance coverage status of the patient is checked;
- increase the so called multiplication factor with 0,1 according to specialty
- increase the fix part of the practice payments
- less degression for big practices in case of supplementary employee.

By all these measures, the budget for family doctors increased by 20% in 2008 vs 2007. The average income of the whole practice is 3100 EUR/month for adult practices and 3500 EUR/month for the classic family providing ones.

#### HUMAN RESOURCES

One of the major problems which affects and is going to affect more in the future the whole primary health care is the continuous ageing of the family doctors. In the past 12 years only 20% of the practices got a new family doctor. The average age is 53 years. There are 6.6x more practicing GPs over 60 years old than under 35 years old. The problem appears more emphasized in the less developed parts of Hungary.

Ratio of the ageing GPs by microregions (> 60 y)



3.000

There are 148 districts without family doctor. The practice size (list length of potential pts) can be often a limiting factor, influencing the income. As mentioned in previous reports, the National Institute of Primary Health Care has a special program for the practices deprived of a GP for more than 6 months time. It offers a solution for the local authority providing care for the inhabitants and at the same time a special vocational training scheme for applicant freshman physician. At this moment we have 40 practices in this project.

## PREVENTION PROGRAM

In the frame of the National Public Health Program a series of local screenings were organized. The screening refers to the cardiovascular risk factors, as obesity, smoking, blood pressure, cholesterol, diabetes. We have started planning the process to introduce the screening of the occult fecal blood test with strips, by family doctors.

## DRUG PRESCRIPTION

The drawback (penalty) system for those doctors who used more than the national average insurance contribution seems to be cancelled after one year of postponing. The planned new system is to control the activity of the doctors as to how is their prescribing (as a whole) compared to reference amount set each quarter of the year upon country average. Those 5% of physicians whose prescription is much over the average, are going to be obliged to attend special CME course on rational drug therapy.

28<sup>th</sup> November 2008

DRG