Cross-border healthcare expert group meeting 11 March 2016

Interrelation between the Directive and waiting lists in Hungary

Type of scheme: National Health Social Insurance with one institution, compulsory attendance

Number of acut hospitals: 137 Number of active beds: 42197 Number of beds for chronic : 26786

The number of inhabitants: 10 million

Reimbursement of acut hospitals: DRGs like, activity based payment (HBCs) with volumen control at year level, extra payment for cost-outliers, fee for service payment for very expensive health technologies

Total budget for active care: 1566 million EURO Per capita: 157 EURO/person/year

Highlight of Hungarian Health System









Milestones – towards online waiting list





2007:

- Start a legal responsibility to record waiting list at provider level
- Statistical report to National Health Insurance'Fund Administration

2011

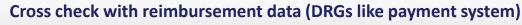
• The implementation of central real-time system: migration implementation – control – first assessment Cross check with reimbursement data (DRGs like payment system)

2011 (2013) Directive 2011/24/EU

Data protection aspects

2013

Assessment of "waiting" problem



Health policy intervention: extra sources by goverment for the knee and hip replacement surgeries those patients who wait since the oldest time in the queue at national level

Nationwide waiting list , on-line, accessible







The first target of health policy considering waiting

Reduced the waiting time

Up-to-date autentic information for health policy intervention – actions for strick regulation to achive good quality of data - penalties

Taking into consideration cross-border EU directives and relavant other EU regulation

Reduce a number of patients among the oldest in the queue firstly - <u>Suplus reimbursement for their provision</u>.

Manage the provision process



Type of list to ensure the prioritization in the waiting queue

Országos Vérellátó Szolgálat Szervkoordínációs Iroda 42

Central waiting list by National Blood Transfusion Sevice: transplantation, Gamma knife, PET-CT

Waiting list of hospitals by NHIF: mandatory list on the real time system, providers keep the records

Appointment list of hospitals by NHIF: mandatory list on the real time system, providers keep the records Patients asked the date later than is is possible at registration's moment

Patient's reception list of out-patient's unit by providers: mandatory list, providers keep the records in own system, monthly statistcs for NHIF









Obligatory waiting list for all provider: 18

Cataract surgeries Tonsillectomy, adenoids Sinuses, Proc. mastoid surgeries Stabilizing spine surgery, spinal deformity surgeries Spinal surgery Gallstones surgery, by exploration Gallstones procedures, by laparoscopy Abdominal wall, inguinal hernia repair with implants Hernia surgery without implants Benignus prostatic hyperplasia surgeries (prostatectomy) Benignus prostatic hyperplasia surgeries II. (Transurethral) Non-malignant gynecological operations Knee replacement surgery, traumatology profession Knee replacement surgery, orthopedic profession Hip replacement surgery, traumatology profession Hip replacement surgery, orthopedic profession **Coronary interventions**

Electrophysiological examination of the heart, radiofrequency ablation

Definition of Waiting List is centralized. It is definited by Diagnosis (ICD-10) and procedures codes in accordance with Hungarian DRGs rules.

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Obligatory waiting list for those procedures and hospitals where the waiting time more than 60 days:

28

Breast surgeries non-malignant diseases
Adrenal laparoscopic interventions of non-malignant processes
Thyroid surgery, not malignant processes
Intestinal surgeries non-malignant processes, minor
Intestinal surgeries for non-malignant processes, major
Abdominal vascular surgeries
Peripheral nervous system, routine surgeries
Hand surgery, minor
Gynecological surgery, non-malignant processes, minor
Gynecological laparoscopic procedures, non-malignant processes
Ear, nose, mouth major operation non-malignant processes
Corneal surgery
Ophthalmic surgery, connective tissue
Arthroscopic surgery
Orthopedic surgerie, minor
Orthopedic surgery, major, except replacement
Urological surgery, minor
PTA procedures
Bypasses, reconstructive vascular surgery by explaration
Varix surgery
Pacemaker, ICD implantation
AV fistula, Cimino surgery
on-coronary diagnosis and intervention
pen heart surgery
on-coronary interventions, children
lon-coronary interventions, adult
pen heart surgery, congenital heart defects, children
Jpen heart surgery, adult

The most important features of Waiting Register (named SOR-REND = Order in the Waiting Queue)

The system is managed by National Health Insurance Fund (NHIF or OEP).

The record keeping is provider's function.

The system' operation mode is **on-line/real-time.** It is madatory for providers is to register on the list the new cases or close the cases after it was treated immediately (the maximum time window is 72 hours in urgent cases).

The registration' obligation is expanded for all cases were treated by those procedures which are involved in the list, including urgent cases.



Data of the Waiting Register



ID:

- •Person ID for NHIF, Person ID for waiting, Address, Nationality, other relevant document for EU citizen
- Date of registration
- •Providers ID: providers transferring,
- •Code of physision who registered and examined a patient
- Provider's for planned treatment, code of physision



Data for planned treatment

- Code of type of waiting list
- Code of diagnosis, code of procedure
- Date of planned admission
- Maximum waiting time by physisions who registered atient

Data for status

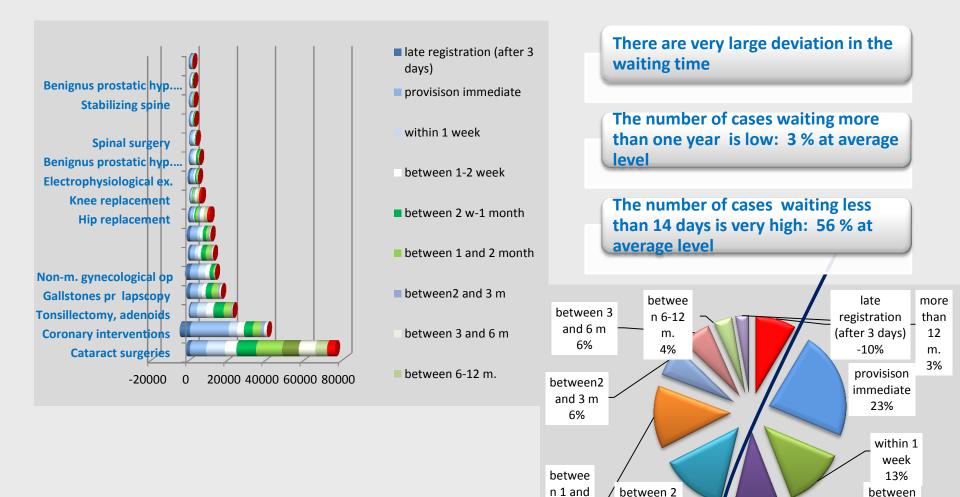
- Type of planned date: variable or fix
- •Type of queue: waiting list or appointment list
- Type of registration item: active or closed (with exact definition of thar: closed with treatment normal mode or urgent mode, closed withouft treatment patient not wanted it later, etc.l
- Type of last tranzaction

Data for closing of registration

- Code of procedure treated
- Organization in hospital which treated it
- Date of treatment



What was a situation at starting – focus on the real waiting presently



2

month

w-1 month

14%

1-2 week

10%

Action: Surplus budget for knee and hip replacement in 2014 above 17.000 yerly cases.

Selecting a patients who are waiting the oldest at national level.

The methods was coordinated with Medical Professional College.

In these cases the providers have been consulted with patients and controlling their health status.

It was suprising finally that in total only 37 % of selected patient were ready for treatment earlier.

Ŷ	The special reimbursement regulation	
	Conditions	
•	Over "the volumen control" if they treated the normal basic/previous year provision	
Ð	Reimbursement fee with 10 % surplus	
Ŧ	Additional resources for out-patient's treatment related to that cases for pre-examination	



Reimbursement for travelling cost if the patient treated other hospitals than hospital with territorial provision obligation one



It was possible that hospitals treated patients from list of others when they have capacity

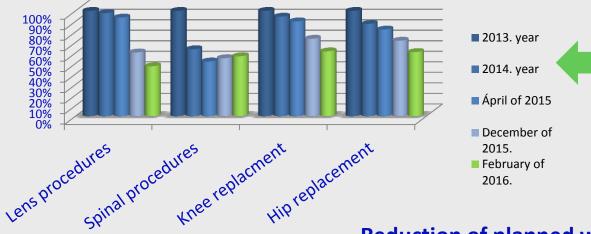


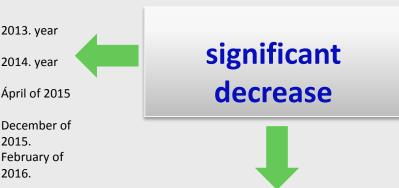


What is the leght of Waiting list: waiting time and what is a procedures require **Cases registered at starting** relation to the maximum the same capacity and waiting time which is (July of 2012): 70.170 simular resources professionally possible Questions How many plus reimbursement is Number of cases in the list necessary to reduce May of 2013 - January of 2016 the waiting time and list 70000 60000 50000 40000 30000 20000 Appointment 10000 n 2015.3011511.5. 2014. Bruar I... 2013. maius 115111.5. najus 1. juius 1. juis 1. ju Waiting

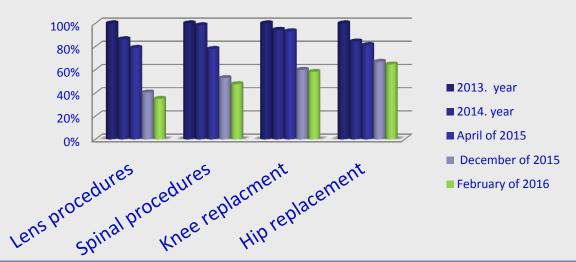
Changes in the waiting 2013-16 The selected main lists

Reduction of cases in the waiting list





Reduction of planned waiting time

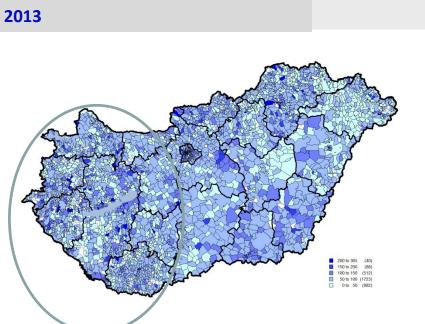


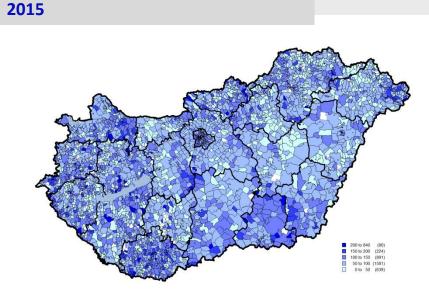
Actual percentage of cases in waiting list of cases/year



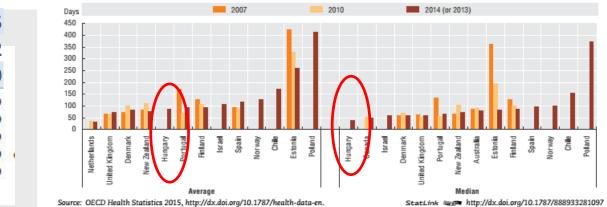
	Percentage	
Cataract surgeries	17%	
Tonsillectomy, adenoids		
Sinuses, Proc. mastoid surgeries	5%	
Stabilizing spine surgery, spinal deformity surgeries	6%	
Spinal surgery	16%	
Gallstones surgery, by exploration	2%	
Gallstones procedures, by laparoscopy	1%	
Abdominal wall, inguinal hernia repair with implants	10%	
Hernia surgery without implants	11%	
	10%	
Benignus prostatic hyperplasia surgeries (prostatectomy)	40/	
Benignus prostatic hyperplasia surgeries II. (Transurethral)	4%	
Non-malignant gynecological operations	4%	
	3%	
Knee replacement surgery		
Hip replacement surgery	82% Critica	l
Coronary interventions	48%	
Electrophysiological examination of the heart, radiofrequency ablation	3%	
Total	8%	

Case per 10.000 habitens: Cataract surgery









 2013
 80205

 2015
 92872

 index %
 115,79

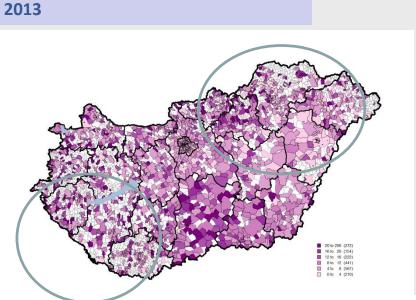
 150 to 200
 100 to 150

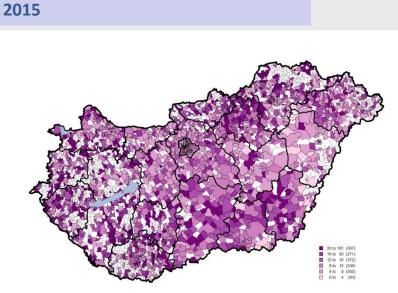
 50 to 100
 50 to 100

 0 to 50
 0 to 50

Cases per 10.000 habitens: Knee replament

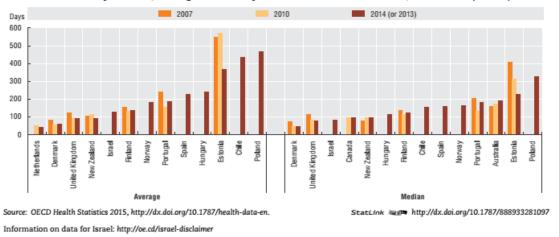






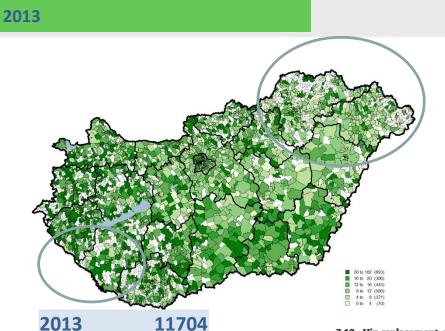


7.13. Knee replacement, waiting times from specialist assessment to treatment, 2007 to 2014 (or 2013)



Cases per 10.000 inhabitens: Hip replacement





13383

114,35

20

16

12

8

4

20 to 182

16 to

8 to

4 to

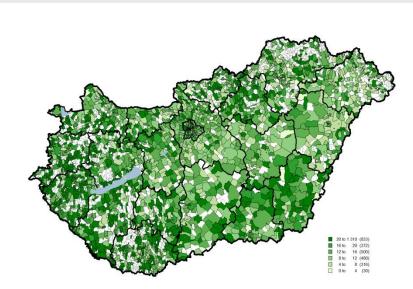
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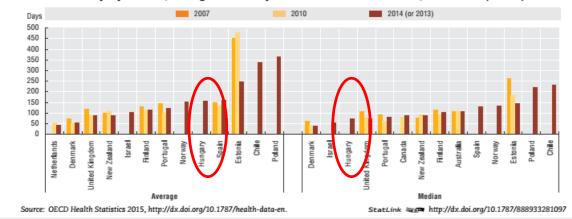
2015

index %

2015



7.12. Hip replacement, waiting times from specialist assessment to treatment, 2007 to 2014 (or 2013)



Thanks for your attention!

Dr. Éva Lukács Gellérné Ph.D CBC member Hungary Ministry of Human Capacities eva.lukacs.gellerne@emmi.gov.hu