# HEALTH CARE SYSTEM IN CROATIA

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### GENERAL/HEALTH DATA

Indicator	Year	Value
Population	2007	4.436 mil
% of population aged 0-14 years	2006	15.71%
% of population aged 65+ years	2006	17.03%
Population density	2007	78,4
Living in urban areas	2003	59%
Important disadvantaged groups		Roma, unemployed, one parent families, old retired people, PTSP
POVERTY (Eurostat)	2003	18%
Total health expenditure as % of GDP	2005	7,9%
Total social expenditure as % of GDP	2005	11,1%
Total social expenditure protection per head	2007	1.062 EUR
Nationality proportion	2006	Croatian 93,3 Serbian 3,6 Others 2,3

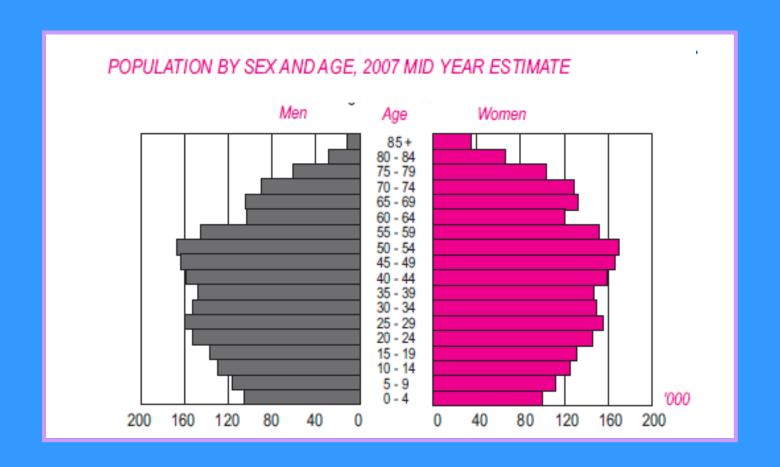
Indicator	Year	Value
Live births per 1000 population	2006	9.33
Mortality rate	2007	11,8%
Life expectancy by gender male Life expectancy by gender female	2007	72,3 total 75,8 79,2
Estimated infant mortality per 1000 live births	2004	6
Infant deaths per 1000 live births	2007	5,6
SDR, diseases of circulatory system, all ages per 100000	2006	417.73
SDR, malignant neoplasms, all ages per 100000	2006	210.24
Tuberculosis incidence per 100000	2007	20.88
Alcohol prevalence	2006	1.500 000 33%
Smoking prevalence	2006	27,4%
Hospital beds per 1000	2007	5,49
Physicians per 100000	2007	259.02
In-patient care admissions per 100	2007	16.47

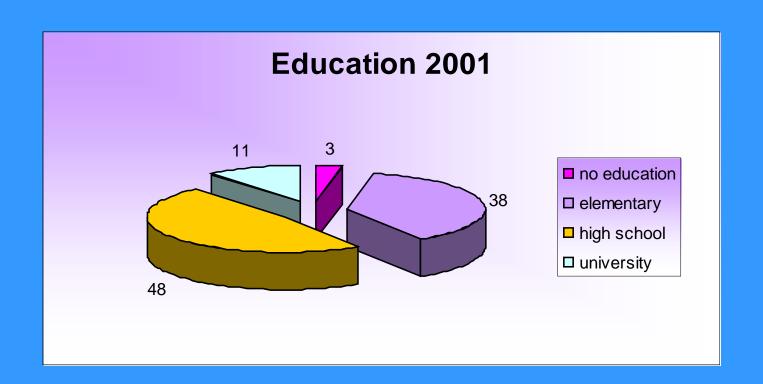
#### Comparative health indicators, 2005

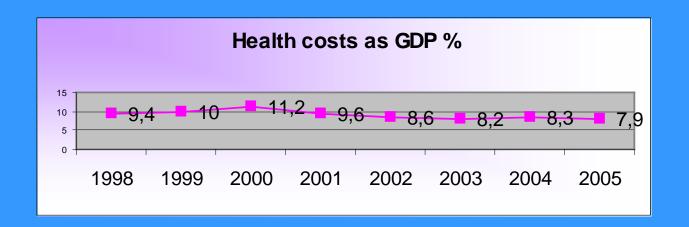
(Croatian Dpt for Public Health)

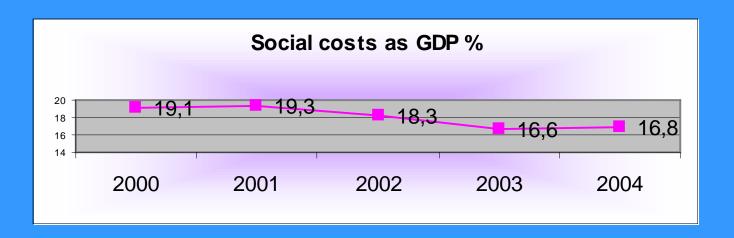
INDICATOR	Croatia	Austria	Czech r.	Slovenia	Hungary	EU 15
Life expectancy	75,44	79,7	76,19	77,58	73,02	78 <i>,</i> 53
Life expectancy M	71,9	76,81	72,97	74,04	68,75	75,41
Life expectancy F	78,92	82,37	79,32	80,93	77,23	81,56
Infant mortality rate	5,7	4,18	3,39	4,15	6,23	4,94
Cardiovascular	438,83	240,2	419,02	288,02	502,43	271,19
Ischaemia	167,93	111,65	177,51	80,2	261,33	102,83
Cancers and similar	212,6	165,81	217,46	196,96	237,44	179,16

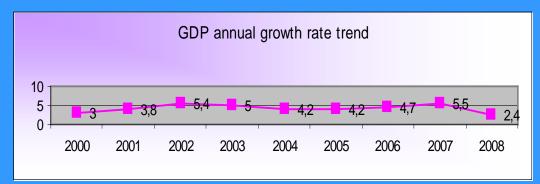
#### POPULATION by sex & age

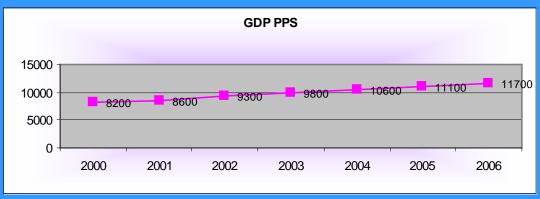


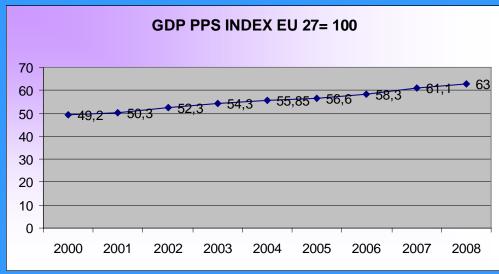




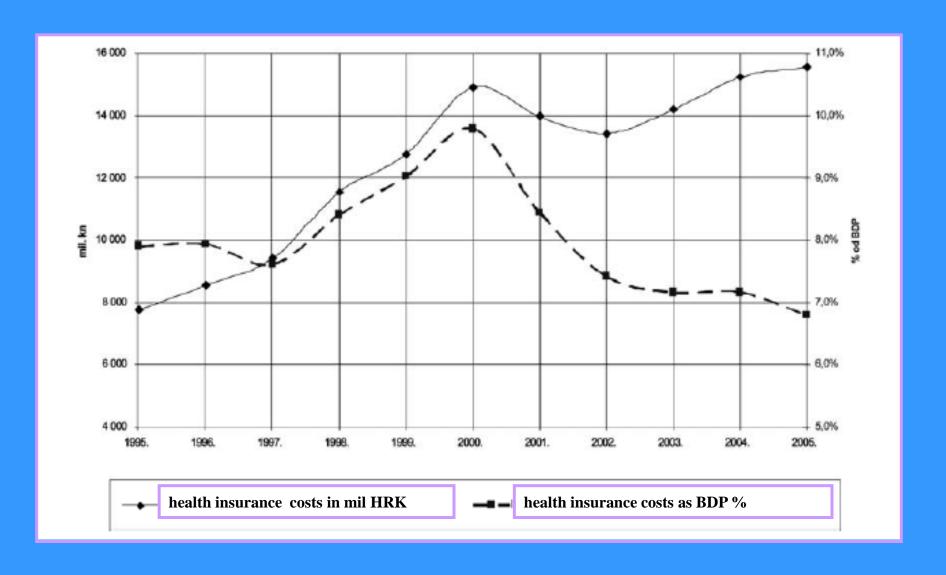




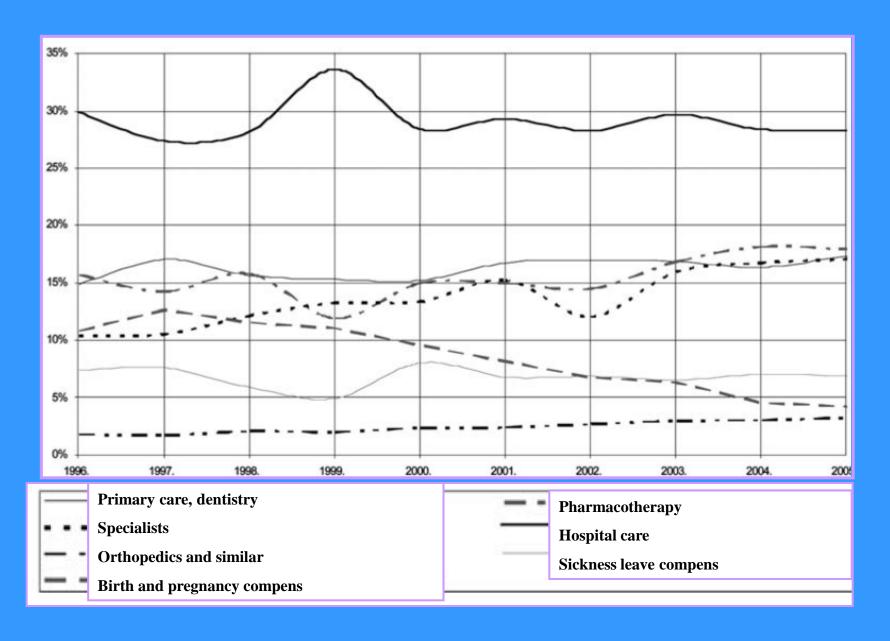




## Absolute (left) and relative (right) costs of basic health insurance 1995-2005



#### Structure of health costs 1996-2005



### Social costs structure

#### (revised BDP, GFS manual 2001)

	2005	2007
Total	19,3	19
Health	5,1	5,5
Social protection	14,2	13,4
Sickness disabled	2	2,3
Old age care	9,1	8,3
Family and children	1,8	1,7
Unemployment	0,4	0,3
Housing	0,01	0,01
Social exclusion	0,2	0,2
R&D	0,007	0,006
Other	0,3	0,4

#### Financial indicators of health systems (as GDP %)

	1998.	1999.	2000.	2001.	2002.	2003.	2004.	2005.
Total health costs	9,4	10	11,2	9,6	8,6	8,2	8,3	7,9
Croatian Health Insurance	8,4	9	9,8	8,4	7,4	7,2	7,2	6,8
CHI costs (without sickness and maternal leave)	6,6	7,2	7,6	6,8	5,7	6	6,1	5,9
Private health cost (survey on household expenditure)	1	1	1,3	1,1	1,2	1,1	1,2	1,1
Proportion of private in total health costs	13,2	13,1	14,7	14,4	17,6	15	16	15,6

#### Poverty and vulnerable groups

- Roma population, make less than 1% of total population yet 13,56% of thema re dependant on social help care
- 2,7% of total population gets social help care, 5-10% are in counties with significant <u>refugee returns</u>
- <u>Long term unemployed</u> more then 3%, for ¼ of them health costs are too high (twice higher than employed=
- One parent families vulnerable groups
- shocking 62% of people <u>older than 65 yrs</u>, do not get pension income and live in poverty, compared to 19% of older than 65 yrs who get the pensions
- 2001. one fifth of population older than 65 yrs (around 131.414 persons) do not receive the full pension.
- 2007. there are 49.187 <u>war veterans</u> with disablement
- Health system is not "youth friendly"

#### Problems in access to health services

#### (% of persons claiming that the problem caused huge access issues)

Problem	4 SE countries	Other 15 EU countries	New EU members	Countries candidates	Croatia
Hospital/doctor distance	9	2	6	26	12
Delay of appointment	19	7	14	27	22
Waiting at dispensary	20	7	15	29	17

#### Problems in access to health services

#### (% of persons claiming that the problem caused huge access issues)

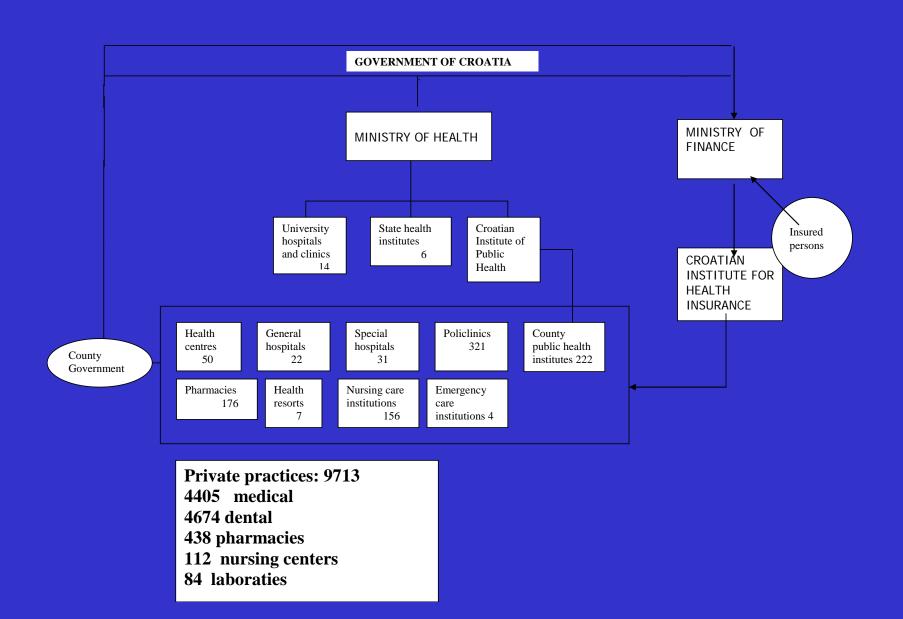
Problem	Total	Income Q1 (lowest)	Income Q4 (highest)	Q1/Q4
Hospital/doctor distance				
EU 15	4,1	5,4	2,3	2,3
New EU members	6,5	9,4	3,8	1,5
Croatia	12,8	26	3,9	6,7
Delay of appointment				
EU 15	11,1	12	7,9	1,5
New EU members	14,3	16,4	12,1	1,4
Croatia	23,3	32,8	20	1,6
Waiting at dispensary				
EU 15	11,3	11,9	8,7	1,4
New EU members	14,7	18,4	12,9	1,4
Croatia	18,3	25,6	15,5	1,7
Costs connected with treatment				
EU 15	8,2	9,9	4,5	2,2
New EU members	15,4	22,1	10,3	2,1
Croatia	20,3	38,1	8,7	4,4

## The Health Care System

#### **KEY ASPECTS**

- Primary health care
- Universal access
- Continuity
- Comprehensive system
- Solidarity-based

#### HEALTH CARE SYSTEM ORGANISATIONAL STRUCTURE 2008



### Health care System

- 2007:
- 5,49 beds per 1000 population
- 11.799 MDs
- 3265 stomatologists
- 2607 pharmacists
- 26,873.507 visits to PHC
- 7, 731.267 visits to specialists
- 636.450 hospitalizations

### HEALTH CARE SYSTEM

#### FINANCING:

- Social health insurance 80%
- General taxation up to 18%
- Out-of pocket payments 2%
- Per capita expenditure USD 651

#### HEALTH CARE SYSTEM

#### PRESENT PROBLEMS:

- Lack of resources
- Increasing co-payments by patients
- Privatisation of services: Two tier system
- Social inequalities in health and health care utilization

# HEALTH CARE SYSTEM REFORM

"Alice in the Wonderland"

- CENTRALIZATION
- PRIVATISATION
- RATIONALIZING
- MARKETISATION

# HEALTH CARE REFORM IN CROATIA

transformation of health services:

# from SOCIAL GOODS to COMMODITIES

/from PUBLIC to MARKET/

#### HEALTH CARE SYSTEM:

#### Health care reform Problems:

- reductions in patient's benefits
- introduction of market mechanisms
- citizens as patients paying more and act as consumers

#### HEALTH CARE SYSTEM

#### **GROUPS AT RISK:**

- Low-income citizens
- Unemployed
- Large families/one parent families
- Elderly
- People living in remote areas

### Policy recommendations:

- a clear national strategy on health !?
- Political independence !?
- Decentralisation !?
- positive discrimination !?
- progressive payment structure !?

- Inequalities in health
- Inequalities in health care utilization
- Inequalities in financing of health care services

# Standardized mortality ratios (25-64) by socio professional group (Yugoslavia/Croatia, 1981)

So	cio professional groups	SMR
•	Executives	16
•	Professionals	75
•	Clerks	53
•	Services workers	60
•	Industrial workers	132
•	Peasants	116

#### Do you agree with the statement that:

'some people in this country have easier access to healthcare services and receive better quality of care than others'?

	YES
1989	65.8%
1994	75.2%
2000	82.3%

## Self-perceived general health status by socioeconomic group (Zagreb health inequalities study 1990, N=433, p<.01)

Social groups/Health	Very Good	Good	Fair	Bad
Executives	17.2	42.9	31.7	2.8
Professionals	25.0	40.0	37.1	3.3
Clerks	17.7	38.8	30.6	12.9
Skilled workers	21.2	23.8	34.6	15.9
Unskilled workers	13.3	16,7	53.3	16.7
Farmers	15.1	18.2	39.4	27.3

#### INEQUITIES IN HEALTH IN CROATIA 1994

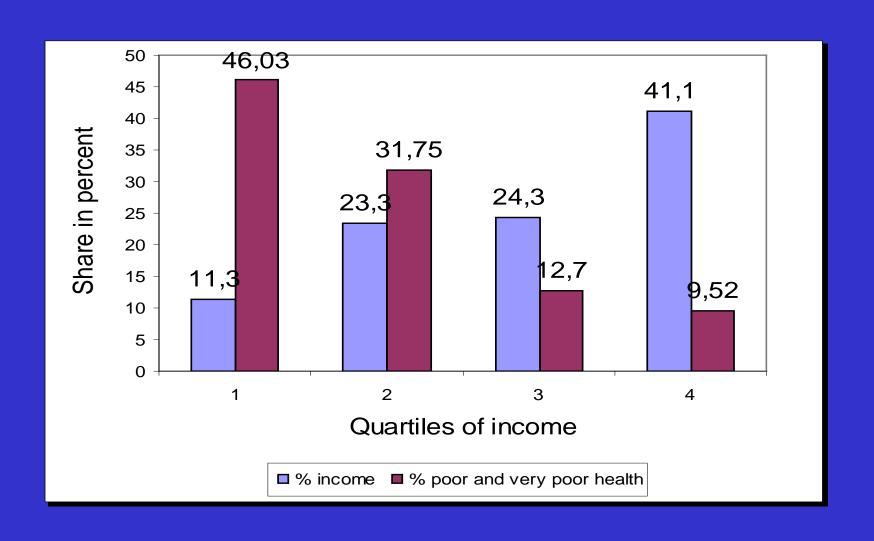
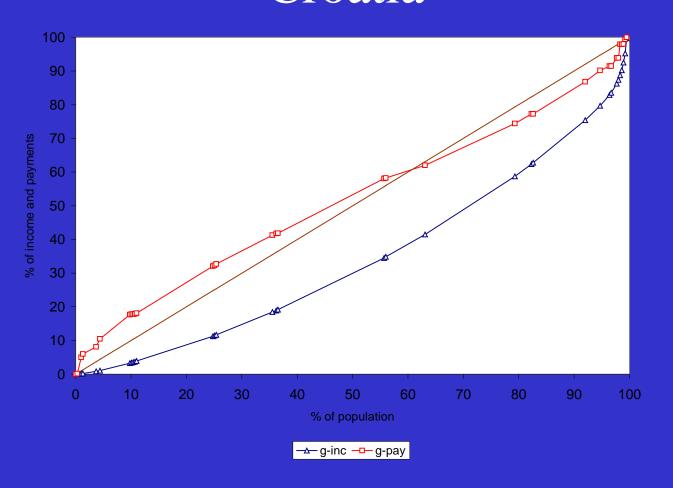


Table. Distribution by quartiles of direct payments for health care Croatia, 1994

		Direct health care payments				
Income quartile	income proportion %	copayments proportion %	other direct payments proportion %	total direct payments proportion %		
Bottom	11.3	37.7	30.3	32.1		
2 <sup>nd</sup>	23.3	22.6	27.1	26.0		
3 <sup>rd</sup>	24.3	18.9	15.5	16.3		
Тор	41.1	20.8	27.2	25.6		
% of total direct payments		24.7	75.3	100		
Gini	0.226					
Concentration		-0.136	-0.052	-0.073		
Kakwani		-0.362	-0.278	-0.299		

# Inequaities in Health care financing in Croatia



Lorenz curve for income (triangles) and the concentration curve of out-of-pocket payments (squares)

## Inequity in h.c. finance

- Increase of co-payments and other direct payments
- considered a significant problem for lower income people

### Inequity in h. c. finance

- Burden of out-of-pocket costs is not equally distributed among income groups – low income group paying about six times larger share of income paid by high income group
- Inequitable pattern of out-of-pocket health care payments
- Regressive health care financing system

# Table. Self-perceived health status by income 2003 Croatian AdultHealth Survey N=1138

		%		
Health/INCOME	low	middle	high	
Excellent	13,8	29	57,3%	
Very good	11,9	28	60,1	
Good	25	33,8	41,2	
Fair	32,7	35,7	31,6	
Bad	51,1	30,8	18,1	

p<0.001

# Table. Self-perceived health status by education 2003Croatian Adult Health Survey N=1138

p<0.001

		%		
Health/Education	low	middle	high	
Excellent	2,4	9,9	12,0	
Very good	5,1	20,5	30,1	
Good	28,4	30,3	30,3	
Fair	35,9	28,6	21.6	
Bad	28.2	10,8	6.1	

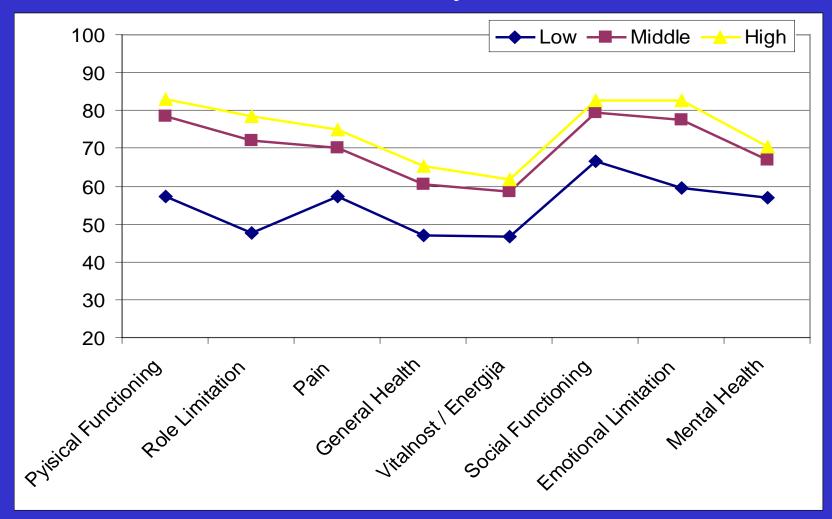
# Visits to specialists, by income groups when controled by health status 2003 Croatian Adult Health Survey N=1138

#### **INCOME**

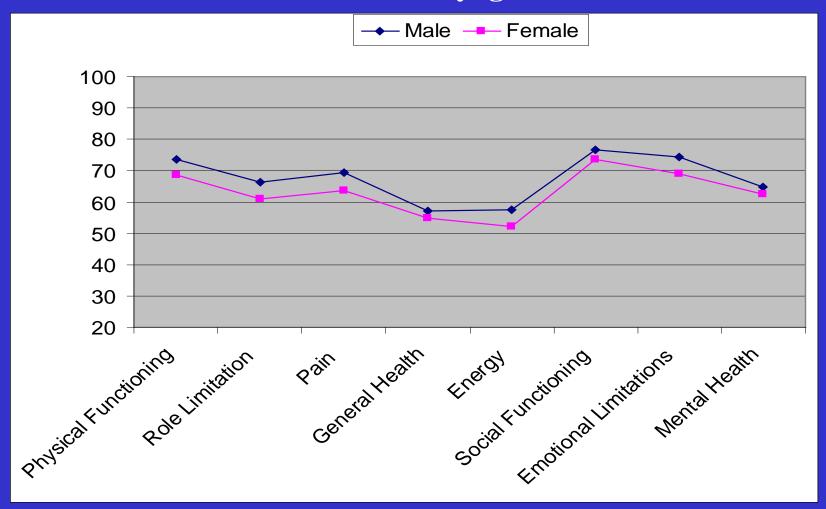
POOR HEALTH	low	middle	high
Not visited	36,5	29,5	26,1
1-2 visits	26,3	22,9	26,1
3-4 visits	17,1	17,7	20,7
5-10 visits	12,7	16,3	13,0
10+ visits	7,4	13,5	14,1

p<0.001

#### Social inequalities in health in Croatia 2003 Croatian Adult Health Survey N=1138 SF36 Dimensions by education



#### Social inequalities in health in Croatia 2003 Croatian Adult Health Survey N=1138 SF36 Dimensions by gender



# Regional inequalities in health in Croatia 2003 Croatian Adult Health Survey N=1138

SF-36 Dimensions	North Croatia	Eastern Croatia	South Croatia	Western Croatia	Middle Croatia	City of Zagreb
	M	M	M	М	M	M
Physical Functioning (PF)	72,2	66,5	73,0	68,2	67,3	70,2
Role limitation due to Physical problems (RP)	65,1	57,8	67,1	69,9	58,2	60,4
Pain (P)	66,2	63,2	68,1	72,6	62,3	61,9
General Health Perception (GH)	58,6	52,3	58,0	59,3	54,1	51,6
Energy/Vitality (EV)	54,7	51,9	55,8	57,5	52,7	52,0
Social Functioning (SF)	74,9	72,0	76,3	77,4	74,3	73,3
Role limitation due to Emotional problems (RE)	73,3	65,0	72,8	76,2	69,86	68,3
Mental Health (MH)	64,7	60,2	64,9	65,6	63,1	61,7