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Healthcare in Slovakia

Until 1990, the Slovak healthcare worked as a centralised public system, organised as the National Healthcare System independent from the Czech Healthcare system in federal Czechoslovakia. It was financed from central resources (federal state budget), distributed in the three regions of Slovakia (western, central and eastern).

After 1990, the process of decentralisation, de-etatisation, privatisation and the change of health system financing from state financing to the health insurance system combined with public financing (investment) began. This process is still ongoing. Problems occur in connection with transformation of all public sectors.

In Slovakia there are 147 in-patient health institutions (some combined with social care facilities) with 35,520 beds (31 December 2009). These numbers are changeable due to the continued transformation of the healthcare system (reduction of the number of hospital beds, transfer of acute beds into chronic beds, reduction of the hospital care and transformation into one day surgery or into ambulatory and homecare). Many hospitals cannot be defined as acute or chronic hospitals or beds because they are mixed together and also with social beds. Most hospitals owned by the state.

In 2002 new legislation related to transformation of hospitals into non-profit or non-government organisations was introduced. Hospitals can become private, regional or district and municipal hospitals. A large number of hospitals were transferred from state ownership to regional ownership. For more than five years primary care has been completely privatised, except for some polyclinics and specialists that are partly employees of state or regional hospitals and partly with private practices.

Undergraduate medical education is provided at the Medical Faculty of the Comenius University in Bratislava (the capital), Martin (Central Slovakia) and Medical Faculty of the Šafarik University in Košice (Eastern Slovakia). There are five College Hospitals (three in Bratislava, one in Martin and two in Košice). Postgraduate education for the medical and nursing specialists is provided by the Postgraduate University in Bratislava. Undergraduate nursing education is provided at medical college, at other Universities and some at college hospitals.

Financing

Financing of the Slovak healthcare system is performed completely through the health insurance system, but the budget for investments (buildings, expensive equipment) for state hospitals is financed from the state budget. Health insurance in Slovakia is compulsory. There are three health insurance companies, one public and two private. The Slovak Government is at the present time considering merging all health insurance companies into one state owned Health Insurance Company.

Services Provided

Healthcare can be divided into three main categories: Ambulatory (outpatient), inpatient and other.

Ambulatory care includes general first point of care outpatient departments, direct contact and specialised care outpatient departments.

Inpatient healthcare is predominantly provided by hospitals (local, regional, central and specialised hospitals). There are also specialised professional institutions, professional medical institutions and specialised sanatoriums, palliative care organisations and spas and health resorts that provide inpatient care.

Other healthcare services include the emergency medical services, the home nursing agency and dialysis centres.

Current Challenges

- The current considerations of changing the pluralistic healthcare insurance system into a single state owned insurance company;
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- Recently implemented wage increases from 1 April 2012 and for Doctors from 1 January 2012 and 1 July 2012;
- Personnel stabilisation in the healthcare department. Wage levels for all healthcare employees is a complex issue;
- The economic stabilisation of the healthcare system by increasing payments for public policy holders for 2013;
- Equal position of healthcare institutions within the system; fair inter-sector division; and
- Current government policy on medicines.

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