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IMPROVING THE ORGANIZATIONAL AND ECONOMIC MECHANISM OF MEDICAL INDUSTRY MANAGEMENT IN UKRAINE

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The purpose of the study. Comparative analysis of the organizational and economic mechanism of the health care system in Ukraine and the developed countries of the world in order to allocate the main goals and objectives of health care industry economic development.

Materials and methods. In the course of the study has been analyzed the status of economic mechanism of medical industry management in Ukraine and in some countries of the world using the bibliographic, statistical and comparative analysis.

Results. Health care is priority issue of national security of Ukraine, one of which objectives is increase of economic management mechanisms efficiency for the purpose of health improvement, to ensure equal access to high quality health services.

The health care system can be effective only under condition of its transformation on the economic and legal principles and on wide application of information technologies. Healthcare management system should be based on medical economy.

Conclusions. The basis for increasing the efficiency of health care system is improvement its organizational and economic mechanism – sets of forms, methods and mechanisms by which the organization of social production of health care sector is carried out and will be coordinated its activity as uniform system is economically expedient. The medical aid market should be coordinated by the state through medical value rates.

Key words: economic mechanism, management, price, efficiency, medical economy.

Introduction

The economic development of any country substantially depends on state of health of its population. For last decades in the political and economic life of Ukraine, there have been significant changes, which have caused necessity of working out and adoption of new concept of health care system development, organisation of medical services and related development programs. In the context of this concept should be displayed and concentrate all social, political, economic and other problems demanding the decision on legal and regulatory, scientific, methodical, organizational and economic levels. Organizational and economic mechanism of development of branch demands improvement for ensure the best results of quality, access of health care, improvement of public health indicators at relatively low costs of resources.

The purpose of this study consists in highlight the main objectives and reference points of the economic mechanism of the health care branch development.

Materials and methods

When writing the article has been used the following methods: bibliographic, statistical and comparative analysis.

Results of research and their discussion

Main directions of improvement organizational and economic mechanism of development of health care of Ukraine outlined in the Program of economic reforms of President of Ukraine for 2010–2014 «Prosperous society, competitive economy, effective state», Law of Ukraine «On Amendments to the Basic Law of Ukraine on health care on improvement of medical care» from 07.07.2011, № 361-VI, National Action Plan to implement the Program of economic reforms of the President of Ukraine for 2010–2014 «Prosperous society, competitive economy, effective state».

Health care is priority issue of national security of Ukraine, one of which objectives is increase of economic management mechanisms efficiency for the purpose of health improvement, to ensure equal access to high quality health services. Most scientists consider economic managerial processes mainly from positions of financing of branch at regional level taking into account both internal and external influences and contradictions. However, in the scientific literature, unfortunately, there are no sustainable economic views on regulatory management of the industry as a whole [7].

Table 1
Sources of health care financing in selected countries (%)

Sources of financing	Germany	Netherlands	Great Britain	USA
Budgetary financing	13	45	85	35
Social insurance	60	35	0	0
Insurance share	16	13	5	30
Payment for services by patients	11	7	10	35

The health care system can be effective only under condition of its transformation on the economic and legal principles and on wide application of information technologies. A key figure in system should become the general practitioner – holder of funds, which together with the patient shall be jointly liability for a state of his health. Healthcare management system should be based on medical economy [3].

Governments of many countries realizing importance of health care system for economy through specific financial tools provide complete coverage by high quality medical care, solidarity principle of financing and equal access to health care. In most European countries due to reforms in the health care sector new standards of treatment are entered, accurate list and volumes of guaranteed free care is defined, control of budget expenditures is strengthened. The essence of such transformations is as much as possible to depart from extensive and in an ideal completely to pass to an intensive way of branch development. Institute of general practitioner / family doctor will help quickly and effectively carry out this transition. However, problems of health care reforming in Ukraine are often come down to necessity of financing increase for the sector. Nevertheless, international experience shows that increased funding without creation effective management mechanisms, rational use of available resources does not give the desirable results. Even in the USA, country with relatively high norm of financing per capita, public opinion polls has shown that 89% of the population is not satisfied by current system of health care organization, insisting on its basic changes and even demanding full reorganisation of system [4].

The essence of pluralism in financing depends on political, social, economic, and national traditions in the countries [5]. Many national health care programs are designed for a certain degree of patients' costs participation including that patient:

- pays part of cost of medical services;
- brings insurance payments in fund of social (medical) insurance;
- receives only partial reimbursement of their expenses.

Personal expenses of patients in most countries ranged within 10-35% from total expenses (table 1) [8].

Certainly, the national health care system needs financing increase, and considerable. However, the sharpness of this subject is determined largely by how effectively used the funds and how the increased cash flow will affect volumes and quality of health care to the population, its availability and final result.

Two principles should be put in a basis of functioning of such system: medical and economic feasibility that is rational distribution of volumes of medical care and expenses on its granting. Only in this case branch additional financing can be effective (providing of best results quality, availability of medical aid and, as result, improvement of public health).

In developed countries every ten years the government increases expenses on medicine on average by 1% of gross national product (GNP). Today in European countries these expenses account about 7–9% of GNP, while in the U.S.A. – about 15%.

Sources of financing of health care system of Ukraine are the following:

- state (public) funds, which include the consolidated budget and social insurance – 56.3% of total health expenditures;
- private funds to households, employers, non-profit organizations – 43.4%;
- means of international donor organisations – 0.3%.

The health care system of Ukraine is funded by the means of state and local budgets. According to the Budgetary Code of Ukraine, means between levels of budgetary system are shared taking into account principle of subsidiarity that is services are close approached to the consumer [2].

Considering the importance of this source of financing it is, unfortunately, unable provide all requirements of health care in full. Therefore, great attention should be paid to other sources of funding, in particular, voluntary medical insurance and charity. Socio-economic value of voluntary health insurance consists that it supplements the guarantees provided in social security and social insurance, to the highest possible standards in modern terms (payment of expensive treatments and diagnostics, application of advanced medical technologies, ensuring of comfortable conditions of treatment, etc.) [2, p. 28].

Table 2 [6]

Expenditures on health care in Ukraine and foreign countries in 2000 and 2011

Country	Expenditures on health care									
	share of government expenditures in total spending on health care		share of government expenditures on health care in general state spending		share of private expenditures in general spending on health care		share of expenses of social providing in state expenses on health care		share of foreign receipts in total expenditures on health care	
	2000	2011	2000	2011	2000	2011	2000	2011	2000	2011
Great Britain	79.3	82.6	14.3	15.1	20.7	17.4	0	0	0	0
Germany	79.8	74.6	18.2	18.0	20.2	22.0	87.3	90.8	0	0
France	79.4	75.9	15.5	16.0	20.6	21.4	94.3	93.1	0	0
USA	43.2	47.8	17.1	18.7	56.8	52.2	33.5	27.8	0	0
Japan	81.3	80.5	16.0	17.9	18.7	18.0	80.9	81.5	0	0
Poland	70.0	67.4	9.4	10.9	30.0	26.0	82.6	89.4	0	0
Russian Federation	59.9	64.3	12.7	9.2	40.1	35.7	40.3	38.7	0,2	0
Ukraine	52.1	55.9	8.4	8.6	47.9	44.1	0	0.8	0.5	0.3

On economic structure of budgetary classification means of consolidated budget of Ukraine for financing health care are distributed as follows: for capital expenses – 7.7%, for operational expenditures – 92.3% (for payment of workers of medical facilities and charges on it – 74, 0%; for medicines and bandages – 10.5%; for foodstuff – 5.3%; for payment of utilities and energy – 10.2%).

One of indicators on which, according to studies by WHO, is spent comparison of health care expenditure is the level of total expenditure on health as percentage of gross national product (GNP). Financing health care at the level of 6.41% of GNP is regarded as the minimum level of funding that can provide «survival» of the health care industry; 3.2% of GNP – as critical level at which one lowers and reduces the amount of care on 1/3; below 1.6% of GNP – as transcendent, which is regarded as the level of complete destruction of the healthcare industry structure [10, p. 12].

In Ukraine this indicator is 7.8% of GNP, that is in order to provide a minimum level of funding. However, in the wider world health care financing is in 1.3 times higher.

Thus, the carried out analysis shows that in Ukraine against insufficient of state financing of health care system available resources are irrationally used. This points in necessity of find the most effective financial and economic model of health care for our country with obligatory health preservation of socially oriented principles.

World practice shows that the highest level of social protection of the population (with comparable maintenance costs) is reached where all the elements of triad (pensions, social insurance, health care) have the state character and are subordinated to one governing body [1].

This is why WHO has developed recommendations to improve the efficiency of health care financing by which the EU countries are guided at policy making on health care [9, p. 28]:

- financial protection (general protection against the financial risks associated with poor health, aims to ensure that people do not become poor as a result of the use of health services);
- principle of social equity in financing (demands of more affluent people pay more for health care, % from income, in comparison with poor);
- equal access to health care (based on need, not on ability to pay);
- increasing transparency and accountability of the health care system (the fight against corruption, monitor the activities of health care facilities and quality assessment of their activities);
- the award for the high quality of medical aid and cost-effective development incentives of health care;
- support for administrative efficiency (reducing duplication in health care financing and cost avoidance, which have been not directed on achievement of the purposes listed above).

According to the data of World Health Organization (WHO), increase for 1000 dollars index of GNP per citizen extends average life expectancy for 0.5 year and increase at 1000 dollars incomes of this citizen contributes life expectancy growth for 1 year.

New approaches to the health care system management of the country should be based on new principles:

1. Institute of general practitioner / family physician who carries out primarily function of the base manager on control funds and volumes of medical care.
2. Health service, which is an economic category, that is has the price and cost and enables thus calculate volumes of care and the cost of providing it.
3. Personification of medical care volumes and costs within regulation per capita for each inhabitant.
4. The organization of medical aid to the population of administrative area within limits of uniform medical, financial and information field.
5. Integration capabilities of health care facilities in the region within the existing fund with allocation of responsibilities (functions) and general liability. Moreover, the priority remains for primary care.
6. Use of medical and social standards and guidelines.
7. Provide to residents the right to choose of family doctor, transfer relationship with him on a contractual basis, with mutual rights and obligations.
8. Changing the system of family doctors payment.
9. Application of modern information and management technologies.

Conclusions

Thus, the basis for increasing the efficiency of health care system is improvement its organizational and economic mechanism – sets of forms, methods and mecha-

nisms by which the organization of social production of health care sector is carried out and will be coordinated its activity as uniform system is economically expedient. One reason for the current stagnation in health care is lack of modern economic regulators in management of system as a whole. Today administration managerial control by branch is observed, appropriate conditions for its effective work on the bases with use of modern information technology are not created. It assumes application of calculation of real cost of medical aid. In formation of tariffs for medical aid defining is a state role. The medical aid market should be coordinated by the state through medical value rates.

Prospects for further development in the given direction

In the reforming of national health care must prevail evolutionary path, which optimizes volumes of medical care, expenses on its granting and sharing features of family doctors and «narrow specialists». The result of these incremental steps will inevitably be qualitative improvements not only function but also the structure of the health system as a whole, and therefore optimize its human resources. The proposed path of reforms is fully consistent with the WHO expert opinion that reform is necessary to conduct a «phased transformation and restructuring of the system rather than shock therapy» [11].

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Удосконалення організаційно-економічного механізму управління медичною галуззю в Україні

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Мета – провести порівняльний аналіз організаційно-економічного механізму управління системою охорони здоров'я в Україні та розвинених країнах світу для виділення основних цілей та орієнтирів економічного розвитку галузі охорони здоров'я.

Матеріали та методи. Проаналізовано стан економічного механізму управління медичною галуззю України і деяких країн світу, використовуючи бібліографічний, статистичний методи і метод порівняльного аналізу.

Результати. Охорона здоров'я – це пріоритетне питання національної безпеки України, одним із завдань якої є підвищення ефективності економічних механізмів управління з метою поліпшення здоров'я населення, забезпечення рівного доступу громадян до медичних високоякісних послуг.

Система охорони здоров'я може бути ефективною лише за умови її трансформації на економічно-правових засадах і на найширшому впровадженні інформаційних технологій. Система управління галуззю має базуватися на медичній економіці.

Висновки. Основою підвищення ефективності системи охорони здоров'я є вдосконалення її організаційно-економічного механізму – сукупності форм, методів і механізмів, за допомогою яких здійснюється організація суспільного виробництва в сфері охорони здоров'я й узгоджується економічно доцільна її діяльність як єдиної системи. Ринок медичної допомоги має координуватися державою саме через величину медичних тарифів.

Ключові слова: економічний механізм, менеджмент, ціна, ефективність, медична економіка.

Совершенствование организационно-экономического механизма управления медицинской отраслью в Украине

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Цель – провести сравнительный анализ организационно-экономического механизма управления системой здравоохранения в Украине и развитых странах мира для выделения основных целей и ориентиров экономического развития отрасли здравоохранения.

Материалы и методы. Проанализировано состояние экономического механизма управления медицинской отраслью Украины и некоторых стран мира, используя библиографический, статистический методы и метод сравнительного анализа.

Результаты. Здравоохранение – это приоритетный вопрос национальной безопасности Украины, одной из задач которой является повышение эффективности экономических механизмов управления с целью улучшения здоровья населения, обеспечение равного доступа граждан к медицинским высококачественным услугам.

Система здравоохранения может быть эффективной только при условии ее трансформации на экономико-правовых принципах и на широком внедрении информационных технологий. Система управления отраслью должна базироваться на медицинской экономике.

Выводы. Основой повышения эффективности системы здравоохранения является совершенствование ее организационно-экономического механизма – совокупности форм, методов и механизмов, с помощью которых осуществляется организация общественного производства в сфере здравоохранения и согласуется ее экономически целесообразная деятельность как единой системы. Рынок медицинской помощи должен координироваться государством именно через величину медицинских тарифов.

Ключевые слова: экономический механизм, менеджмент, цена, эффективность, медицинская экономика.

Відомості про автора

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