

Subsidying Local Health Policy Programs as a Public Management Tool in the Polish Health Care System

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Abstract : Due to the highly centralized model of financing health care in Poland, local self-government rarely undertook their own initiatives in the field of public health, particularly health promotion. However, since 2017 the possibility of applying for a subsidy to health policy programs has been allowed, with the additional resources to be retrieved from the National Health Fund, which is the dominant payer in the health system. The amount of subsidy depends on the number of inhabitants in a given unit and ranges about 40% of the total cost of the program. The aim of this paper is to assess the impact of newly implemented solutions in financing health policy on the management of public finances, as well as on the activity provided by local self-government in health promotion. An effort to estimate the amount of expenses that both local governments, and the National Health Fund, spent on local health policy programs while implementing the new solutions. The research method is the analysis of financial data obtained from the National Health Fund and from local government units, as well as reports published by the Agency for Health Technology Assessment and Pricing, which holds substantive control over the health policy programs, and releases permission for their implementation. The study was based on a comparative analysis of expenditures on the implementation of health programs in Poland in years 2010-2018. The presentation of the results includes the inclusion of average annual expenditures of local government units per 1 inhabitant, the total number of positively evaluated applications and the percentage share in total expenditures of local governments (16 voivodships areas). The most essential purpose is to determine whether the assumptions of the subsidy program are working correctly in practice, and what are the real effects of introducing legislative changes into local government levels in the context of public health tasks. The assumption of the study was that the use of a new motivation tool in the field of public management would result in multiplication of resources invested in the provision of health policy programs. Preliminary conclusions show that financial expenditures changed significantly after the introduction of public funding at the level of 40%, obtaining an increase in funding from own funds of local governments at the level of 80 to 90%.

Keywords : health care system, health policy programs, local self-governments, public health management

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