Cross-border healthcare expert group meeting
11 March 2016

Interrelation between the Directive and waiting lists in Hungary
Highlight of Hungarian Health System

**The number of inhabitants:** 10 million

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

**Number of acute hospitals:** 137
**Number of active beds:** 42,197
**Number of beds for chronic:** 26,786

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

**Total budget for active care:** 1,566 million EURO
**Per capita:** 157 EURO/person/year
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)


Data protection aspects

2013

Assessment of „waiting” problem

Cross check with reimbursement data (DRGs like payment system)

Health policy intervention: extra sources by government 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 authentic information for health policy intervention – actions for strict regulation to achieve good quality of data - penalties
- Taking into consideration cross-border EU directives and relevant other EU regulation
- Reduce a number of patients among the oldest in the queue firstly - Surplus reimbursement for their provision.
- Manage the provision process
Type of list to ensure the prioritization in the waiting queue

**Central waiting list** by National Blood Transfusion Service: 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 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 statistics for NHIF

Országos Egészségbiztosítási Pénztár – Egészség, biztonság!
Types of waiting list obligatory: the same resource’ needs to treated

**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, byexploration
- 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

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

- 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
- Non-coronary diagnosis and intervention
- Open heart surgery
- On-coronary interventions, children
- On-coronary interventions, adult
- Open heart surgery, congenital heart defects, children
- Open heart surgery, adult

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

[www.oep.hu](http://www.oep.hu)
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’s operation mode is on-line/real-time. It is mandatory for providers 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 patient

**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 that: closed with treatment normal mode or urgent mode, closed without treatment patient not wanted it later, etc.)
- Type of last transaction

**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

There are very large deviation in the waiting time

The number of cases waiting more than one year is low: 3 % at average level

The number of cases waiting less than 14 days is very high: 56 % at average level.

There are very large deviation in the waiting time

The number of cases waiting more than one year is low: 3 % at average level

The number of cases waiting less than 14 days is very high: 56 % at average level.
**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.
The special reimbursement regulation

**Conditions**

- Over "the volumen control" if they treated the normal basic/previous year provision
- Reimbursement fee with 10% surplus
- 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
How should one interpret the data about waiting queue?

**Waiting list:**
Procedures require the same capacity and similar resources.

**What is the length of waiting time and what is a relation to the maximum waiting time which is professionally possible?**

**Questions**
How many plus reimbursement is necessary to reduce the waiting time and list?

**Cases registered at starting (July of 2012):** 70.170

**Number of cases in the list**
May of 2013 - January of 2016

![Bar chart showing the number of cases in the list from May 2013 to January 2016.](chart.png)
Changes in the waiting 2013-16
The selected main lists

Reduction of cases in the waiting list

Reduction of planned waiting time

Országos Egészségbiztosítási Pénztár – Egészség, biztonság!
<table>
<thead>
<tr>
<th>Procedure</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cataract surgeries</td>
<td>17%</td>
</tr>
<tr>
<td>Tonsillectomy, adenoids</td>
<td></td>
</tr>
<tr>
<td>Sinuses, Proc. mastoid surgeries</td>
<td>5%</td>
</tr>
<tr>
<td>Stabilizing spine surgery, spinal deformity surgeries</td>
<td>6%</td>
</tr>
<tr>
<td>Spinal surgery</td>
<td>16%</td>
</tr>
<tr>
<td>Gallstones surgery, by exploration</td>
<td>2%</td>
</tr>
<tr>
<td>Gallstones procedures, by laparoscopy</td>
<td>1%</td>
</tr>
<tr>
<td>Abdominal wall, inguinal hernia repair with implants</td>
<td>10%</td>
</tr>
<tr>
<td>Hernia surgery without implants</td>
<td>11%</td>
</tr>
<tr>
<td>Benignus prostatic hyperplasia surgeries (prostatectomy)</td>
<td>10%</td>
</tr>
<tr>
<td>Benignus prostatic hyperplasia surgeries II. (Transurethral)</td>
<td>4%</td>
</tr>
<tr>
<td>Non-malignant gynecological operations</td>
<td>4%</td>
</tr>
<tr>
<td>Knee replacement surgery</td>
<td>3%</td>
</tr>
<tr>
<td>Hip replacement surgery</td>
<td>82%</td>
</tr>
<tr>
<td>Coronary interventions</td>
<td>48%</td>
</tr>
<tr>
<td>Electrophysiological examination of the heart, radiofrequency ablation</td>
<td>3%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>8%</strong></td>
</tr>
</tbody>
</table>
Case per 10,000 habitens: Cataract surgery

2013
- 80205

2015
- 92872

Index %: 115.79
### Cases per 10,000 habitens: Knee replament

<table>
<thead>
<tr>
<th>Year</th>
<th>Cases per 10,000 habitens</th>
<th>Index %</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>6425</td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>9035</td>
<td>140.62</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Country</th>
<th>2007</th>
<th>2010</th>
<th>2014 (or 2013)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Median</td>
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<td></td>
<td></td>
</tr>
</tbody>
</table>


Information on data for Israel: [http://oe.cd/israel-disclaimer](http://oe.cd/israel-disclaimer)
Cases per 10,000 inhabitants: Hip replacement

2013

2015

index % 114.35

2013 11704
2015 13383

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

Thanks for your attention!

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