

2007

Výročná správa



Health Policy Institute



Health Policy Institute (HPI) is think tank analyzing health policy in Central and Eastern European countries.

Health Policy Institute is civic association registered on January 27th, 2005 at the Ministry of Interior of the Slovak Republic (Nr. VV3/1-900/90-25460).

Founders of Health Policy Institute are Peter Pažitný, Tomáš Szalay, Angelika Szalayová and Henrieta Maďarová.

In 2008 Health Policy Institute did not receive any form of state subsidy, did not participate in projects financed through EU structural funds or similar schemes and did not have any grant support from abroad.

Executive director of Health Policy Institute is Peter Pažitný.



Our vision is to become the most respected health policy think tank in Central and Eastern Europe.

- (1) Against the backdrop of growing medical care costs driven by high expectations of citizens, ageing of the population, changing structure of illnesses and technological advances it is the mission of the Health Policy Institute to:
 - » promote values which support financially sustainable health systems responding flexibly to the needs of the population;
 - » promote innovative solutions at the level of health systems, the level of health insurance companies and the level of providers in order to achieve a higher efficiency in the provision of health services;
 - » promote client-oriented approach to the insured and patients.
- (2) The first assumption to promoting these values is the understanding of health as an individual asset. The Health Policy Institute will promote such health policy which motivates every citizen to improving his or her own health state.
- (3) The second assumption is the highest possible decentralization of decision-making. The Health Policy Institute supports market mechanisms in the health sector wherever they are demonstrably more efficient than state intervention. The Health Policy Institute will therefore promote efficient regulation of the extent of provided health care, flexible setting of the minimum network, and maximum prices which are sufficiently motivating, as basic tools of the health care policy. It will be the task of the private sector to give content to these regulations.
- (4) Solidarity is the third most important value. The Health Policy Institute promotes a system of compulsory public medical insurance which gives every insured the right to equal care at equal needs. Due to the fact that in health care the unlimited desire for immortality meets the strict world of economy, solidarity must have clearly defined boundaries to prevent its abuse and to prevent the wasting of scarce resources for medically ineffective and economically inefficient interventions.
- (5) The Health Policy Institute will therefore advocate such operation of health care systems in Slovakia and elsewhere which promote the responsibility of the patient, responsibility of the provider and responsibility of the health care purchasers.



Year 2007 was extraordinary for various reasons. By the end of spring we moved to roomier and more sunny premises. We became highly involved in forming health policy abroad, whether as advisors to the Hungarian Minister of Health Lajos Molnár or as advisors to the Czech Minister of Health Tomáš Julínek.

We regard as declaration of trust and professional recognition that Angelika Szalayová became member of the drug reimbursement committee in Czech Republic on behalf of the Czech Association of Health Insurance Companies.

Particularly, we were delighted that one of the HPI founders, Henrieta Maďarová, was chosen by the Czech Minister of Health to become member of his reform team. Later, Michal Gajdzica became also an external member of this team.

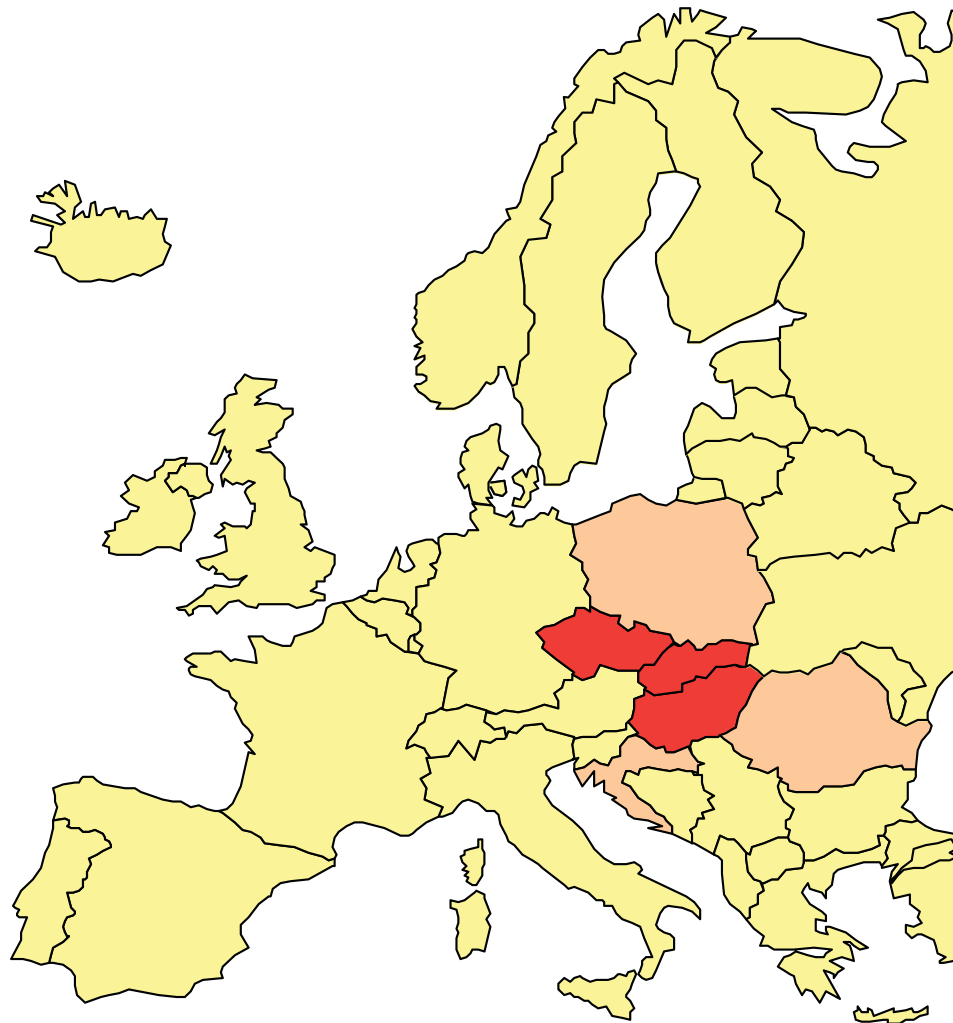
By the end of July we stood to Karol Morvay, who won his fight with malign disease and is fully-fledged member of our team again.

In July Simona Frisová participated on 2-weeks intensive training programme for leaders and managers in healthcare INSEAD in France. Her positive experiences were very helpful at launching and improving the educational programme Health Management Academy (HMA) for physicians and managers in healthcare. We launched HMA with great load of enthusiasm in September.

In November Lucia Lenártová joined our team and shows her talent at organizing HPI conferences.

My special thanks goes to my partners Angelika Szalayová, Henrieta Maďarová and Tomáš Szalay, who form HPI from the very beginning with their values, attitudes and opinions.

Peter Pažitný
Executive Director



Country	Year	Activity	More references provided by
Czech Republic	2007	Advisory group to the Czech reform team on the preparation of health care reform in Czech republic focused on health insurance companies, health insurance scheme, providers market regulation and drug policy measures	Tomáš Julínek Czech Minister of Health Pavel Hroboň deputy Minister of Health
Hungary	2007	Potential Risks of health insurance system reform	Zsombor Kovácsy Chariman of Healthcare Surveillance Authority
Hungary	2006	Advisory Group to health care reform	Lajos Molnár Hungarian Minister of Health
Czech Republic	2006	Categorization committee	Vladimír Kothera President of Association of Health Insurance Companies
Slovakia	2006	Advisors	Ján Gajdoš Chairman of Healthcare Surveillance Authority
Hungary	2006	Methodology and benchmarking of the minimal network of healthcare providers	Gyula Király Director of ESKI
Slovakia	2006	Design of the minimal network of healthcare providers	Rudolf Zajac Slovak Minister of Health
Slovakia	2006	Health Policy Framework 2006 - 2010	Igor Dorčák and Eduard Kováč Association of Health Insurance Companies
Czech Republic	2005	Fiscal study	Mukesh Chawla World Bank
Hungary	2005	Fiscal study	Mukesh Chawla World Bank
Romania	2005	Consultations to the Working Group of Minister of Health on designing the Health Insurance Act	Alan Fairbank
Bulgaria	2005	Health Policy Note	Reema Nayar a Peter Pojarski World Bank
Croatia	2005	Consultations on designing the Basic Benefit Package	Neven Ljubičić Croatian Minister of Health
8 EU countries	2005	Fiscal sustainability	Mukesh Chawla World Bank



January 16th 2007

Bratislava, French-Slovak Chamber of Commerce

Peter Pažitný: General health policy framework for 2007 – 2010

January 25th – 26th januára 2007

Budapest, parliament of Hungarian Republic

Peter Pažitný: Slovak Health Reform in 2004 – Courage to reforms

Also participated at the conference:

Bokros Lajos, CEU

Kornai János

Hans Hoogervorst, AFM

Pavel Hroboň, Czech MoH

Armin Fidler, World Bank

Josep Figueras, WHO

February 7th 2007

Bratislava, Slovakia, conference Steps towards development

Peter Pažitný: General health policy framework for 2007 – 2010

March 27th 2007

Zagreb, Croatia

Peter Pažitný: Drug Policy in Slovakia (the real story)

Peter Pažitný: Intelligent co-payment scheme (the almost real story)

April 18th 2007

Prague, Czech Republic, International Health Summit 2007

Peter Pažitný: Slovak Health Reform - the source of inspiration

April 24th 2007

Prague, Czech Republic, conference Farmako 2007

Peter Pažitný: Healthcare reforms in selected countries

April 27th 2007

Congress of the Czech Medical Chamber

Peter Pažitný: Healthcare reform in Slovakia

May 3rd 2007

Prague – Žofín, Czech Republic, congress of ODS

Peter Pažitný: Healthcare reform

June 12th –13th 2007

Sofia, Bulgaria, Health Round Table

Peter Pažitný: Introducing Competition in Slovak Health Insurance

May 21st – 22nd mája 2007

Ljubljana, Slovenia

Peter Pažitný: How to further improve the competition between Health Insurance Companies in Slovakia

June 11th 2007

Purkersdorf, Austria

Peter Pažitný: Slovak Health Care Outlook 2010

June 14th 2007

Prague, Czech Republic, 4th Annual CEE Pharmaceutical Chalanges

Tomáš Szalay: Characteristics of CEE Region

June 20th 2007

Prague, Czech Republic, Through dialogue to reform – Slovak experience

Henrieta Maďarová: Basic characteristics of the Slovak reform

Angelika Szalayová: Healthcare reform and drug policy

Tomáš Szalay, member of panel discussion

September 18th – 19th 2007

Prague, Czech Republic, conference PULS 2007

Michal Gajdzica: Experiences of selected European countries with development of the basic benefit package

October 11th 2007

Prague, Czech Republic, workshop on insurance

Peter Pažitný: Healthcare reform in Hungary



Consultancy for the Czech Minister of Health Mr. Tomáš Julínek and his reform team

During the year we provided consultancy to the proposals of the reform legislation. Beyond that we conducted three analyses for the Czech Ministry:

- » analysis of regulatory fees (co-payments) in Slovakia and transforming EU countries
- » we started to work on the proposal of accessibility of healthcare regulation in Czech Republic
- » we also started to work on the proposal of HTA implementation in basic benefit package evaluation in Czech Republic

Consultancy for the Hungarian Minister of Health Mr. Lajos Molnár and his team

In February we consulted Hungarian Ministry of Health on operation and results of the Slovak Healthcare Surveillance Authority.

The change of the Minister of Health in March 2007 ended this HPI activity. New Minister Mrs. Ágnes Horváth could not continue in the reform efforts of her predecessor.

In July Ágnes Horváth introduced her trade-off concept of reform we criticized various times in both Slovak and Hungarian media. Our opinion was published in Prof. Péter Mihályi's publication on that topic.



Consultancy for EBF

Hungary is implementing significant transformation of the health insurance system from the monopoly of a sole healthcare insurance company to a plural model with multiple purchasing agents of healthcare. Such health insurance organization model is far more complex with respect to surveillance and regulation and therefore this field clearly calls for adequate attention.

The study for the Hungarian Healthcare Surveillance Authority (EBF) aims at providing EBF with a proposal of a risk assessment model inclusive of risk identification, using which EBF will be able to effectively monitor efficiency of the health insurance system in Hungary.

The study is composed of four parts:

- » the first part summarizes the basic prerequisites of the health insurance reform in Hungary and also provides an overview of the draft act on health insurance companies (government version submitted to the parliament not reflecting the changes made in parliament)
- » the second part focuses on experience in health insurance surveillance from the Netherlands and Slovakia
- » the third part presents a risk assessment model example (based on the NZa pattern)
- » the fourth part identifies potential risks in the health insurance market in Hungary based on the experience from the Netherlands and Slovakia while incorporating specifics of the draft Hungarian legislation



Collective objection to preserve free choice of health insurance company

Four organisations (Conservative Institute of M. R. Štefánik, Institute for economic and social studies, Civic conservative party and Health Policy Institute) organized in February collective public objection to the amendment proposal of Health Insurance Act.

In the course of a few days, more than two thousand citizens have signed a collective objection regarding the amendment, in which the Ministry of Health intends, inter alia, to forcefully transfer a million citizens to state-owned health insurance companies.

According to the draft amendment to the Act, this right of free insurance company selection would cease to apply to insurees who have their premium paid by the state. According to the draft, members of the armed forces, Police Corps, Slovak Information Service (SIS), National Security Office (NBÚ), Prison Guard Service, Railway Police, Fire and Rescue Services and Customs Services should compulsorily be insured in Spoločná zdravotná poisťovňa. State employees, children, dependent students, old-age pensioners, disabled persons, year-round patients placed in social service facilities, a portion of foreign students, persons dependent on social benefits and registered unemployed persons would have to be insured in either Všeobecná zdravotná poisťovňa or in Spoločná zdravotná poisťovňa (state-owned health insurance companies).

The explanatory notes to the draft merely provide the reasoning behind the elimination of the freedom of health insurance company selection in an absolutely general statement that “the state pays a premium for the largest portion of public health insurance scheme participants and therefore it is reasonable for it to have higher control over the finances it places into the system”. This, however, does not explain why the state should rid them of their freedom to select a health insurance company.

Article 40 of the Constitution of the Slovak Republic warrants everyone the right to health protection. People exercise this right and the responsibility for their own health through the free selection of a physician and under conditions of health insurance companies’ plurality additionally through free selection of their health insurance company. By means of the proposed amendment to the Act on Health Insurance and by limiting the freedom of health insurance company selection, the State would deprive wide segments of the population of the right to select the form most suitable to secure their rights to health protection.

The proposed amendment rendered state employees and other persons for whom the premium is paid by the State second-class citizens. While employees in the private sector will select their health insurance company freely, in the case of state-sector employees, this selection would either be

made for them by their employer or their right of choice would be limited to two state-controlled health insurance companies. There is no real reason for such a difference in approaches.

At present, parents select a health insurance company for their children. Pursuant to the draft, this right is to be compromised and that is an unacceptable intervention in their parental rights and in family autonomy. The draft is also discriminatory towards old-age pensioners, disabled persons and other groups. The State-paid premium for selected groups of people is not paid from sources created by it, but rather from the taxes it acquired from working citizens, i.e. also from the parents of minors or from the children and grandchildren of the present old-age pensioners.

The proposed amendment would not provide better healthcare for anyone, nor will it guarantee more efficient resource management in the healthcare sector. Quite to the contrary, we should worry that both the parameters will deteriorate as a result of such a change. The State-controlled insurance companies are less efficient when compared to private ones and they are unable to guarantee a level of healthcare higher than that of private insurance companies.

The forceful transition of large groups of insurees into State insurance companies would have a detrimental effect on private insurance companies to the extent of their elimination, undermine the competitive environment in the health insurance sector, which would be reflected in lowered efficiency of the health system and in longer term probably as well as in the lowered quality of healthcare provided.

The amendment proposal contradicted the Fico Government's manifesto, which states that *"the Government will enforce a legal environment in which all health insurance companies will have equal conditions, regardless of their legal form"*. Enforcement of the obligation for insurees with premiums paid by the State to be insured in State health insurance companies is in direct contradiction with the obligation stated in the Government's Manifesto.

The draft was not justified by any real need, it restricts the freedom of health insurance company selection for a large group of citizens, it undermined the competitive environment in the healthcare sector, it unreasonably discriminated citizens and threatened to aggravate the situation regarding healthcare provision. Therefore, we requested that all provisions that limit the freedom of health insurance company selection be deleted from the draft amendment to the Act on Health Insurance.

Should the Ministry of Health of the Slovak Republic have not accepted the collective objection we requested a discrepancy procedure, with the below-stated public representatives invited to participate in writing.

The following persons were authorised to represent the public in negotiations regarding the objection: Ondrej Dostál, Juraj Petrovič, Peter Gonda, Peter Pažitný, Tomáš Szalay and Juraj Karpiš.

The collective objection was finally successful, the amendment proposal was cancelled later that year.



Tomáš Szalay and Peter Pažitný among experts quoted most by the media

As part of the Slovak Press Watch project, the analyst Gabriel Šípoš and intern Matúš Demko have compiled a chart of the experts most frequently quoted in 2007 in six monitored media (the television stations STV, Markíza, TA3, and Joj, and the daily newspapers Pravda and SME). When it came to the domestic political scene, top of the pile were G. Mesežnikov (cited 192 times), M. Kusý (140) and R. Procházka (126).

Of the economic analysts, first place was taken by Ľ. Drahovský from the market research agency Terno (113), while two of the Health Policy Institute partners came second and fourth – Tomáš Szalay (68) and Peter Pažitný (64). The Health Policy Institute thus confirmed that it ranks among Slovakia's top opinion-forming think tanks.

The charts of experts most quoted by the media in 2007 can be found at spw.blog.sme.sk.

Table: Ten most quoted economical experts in 2007

1	Drahovský Ľubomír	113	retail analyst	Terno, market research agency
2	Mihál Jozef	68	tax and contribution expert	RELIA s.r.o.
2	Szalay Tomáš	68	healthcare analyst	Health Policy Institute
4	Pažitný Peter	64	healthcare analyst	Health Policy Institute
5	Pätoprstý Viliam	63	banking analyst	UniCredit Bank
6	Kárász Pavel	60	economist	Slovenská akadémia vied
7	Tóth Ján	57	banking analyst	ING Bank
8	Đurana Radovan	54	economist	INESS
9	Prega Robert	50	banking analyst	Tatrabanka
10	Chren Martin	46	director	Nadácia F. A. Hayeka

Source: <http://spw.blog.sme.sk/c/131268/Mediami-najcitovanejsi-experti-rebricek-2007.html>

General Health Policy Framework for years 2007 – 2010

Authors: Igor Dorčák, Simona Frisová, Eduard Kováč, Henrieta Maďarová, Karol Morvay, Peter Pažitný, Tomáš Szalay, Angelika Szalayová

General Framework publication is a joint project of both Association of Health Insurance Companies and the Health Policy Institute. The objective of this document is to define the general health policy framework for 2007-2010 in a manner that ensures the financial stability of health system and restricts the push of its financial risks to public finances.

The ambition of this document is:

- » to define the resources available by health insurance companies based on the real economic performance and the approved general government budget for the years 2007 – 2009
- » to propose the expenditures of the health insurance companies based on their anticipated purchasing strategy,
- » to promote the completion of changes in the organisation of the health care sector
- » to define the key regulatory mechanisms
- » to communicate to insurees as well as to providers that the resources available to the health insurance companies are limited. The mission of the health insurance companies is to use these limited resources to purchase the maximum “health gain”.

This document should be viewed as a proposal by the health insurance companies. For the insurees, the objective of the proposal is to improve the quality and safety of healthcare provided. Its objective vis-à-vis the healthcare providers is to set up a framework for the purchasing strategy of the health insurance companies, the outcome of which will entail:

- » proposed volume and structure of expenditures incurred by the health insurance companies across different types of healthcare providers
- » proposed terms and conditions for competition amongst the providers of the in- and out-patient care in the process of contracting “structure” (Phase 1) and subsequent contracting “quality” (Phase 2).

Each chapter is supplemented by a discussion in which we would like to draw attention to current issues and suggest innovative health-policy tools.

Since the first issue of the “Health Policy Framework for 2006 – 2010”, published in May 2006, Slovakia has gone through major changes (parliamentary elections in June 2006 and the formation of a new government) with significant macro-political consequences. While the May issue of the “Framework” presumed the continuation of healthcare reform, this document reflects the sharp turn in health policy. Although the vision and goals of the new health policy have not yet been presented, the tools used thus far indicate its direction in the coming years.





A Global Report on the State of Society – Slovakia 2007

Editors: Martin Bútora, Sergej Mesežnikov, Miroslav Kollár

Chapter Healthcare

Authors: Peter Pažitný, Tomáš Szalay, Angelika Szalayová, Henrieta Maďarová

A unique piece of scholarship, knowledge and insight, Global Report covers 25 areas, including domestic politics, rule of law, public opinion, foreign policy, Slovakia in the EU, external security, economic developments, transparency and corruption, education, social policy, digital literacy, and many others. On more than 700 pages, our fifty authors, with the help of two dozens reviewers, offer their perspective not only on the year 2005, but also on the last electoral period.

Health Policy Institute's Team contributed to the publication with analysis of current events in healthcare sector.



Economy from a perspective

Written and edited: Ľudovít Ódor

Price for immortality

Author: Peter Pažitný



IntoBalance

Newsletter on health policy IntoBalance is unique platform to publish current commentaries and analyses on health policy in Slovakia and neighbouring countries.

First issue of the monthly was published in 2006. Its key authors Peter Pažitný, Tomáš Szalay, Angelika Szalayová, Karol Morvay and Michal Gajdzica. There are 1500 Slovak readers and approximately 500 foreign readers of IntoBalance.

Rating of health insurance companies 2007

The aim of the rating of health insurance companies is to help insurees obtain a better overview of the differences among the individual health insurance companies. The comparison has been prepared on the basis of four blocks:

- Block 1: financial protection of insurees
- Block 2: extra products
- Block 3: client service
- Block 4: relations with providers

The first block evaluates the ability of a health insurance company to protect the insurees from financial risks. This criterion is very important because it represents the basic principle of health insurance companies' operation – to pay for the provided healthcare on behalf of its insurees in a timely and targeted manner. The greater the financial protection, the higher the guarantee that the insuree will also be provided with any financially demanding treatment on time.

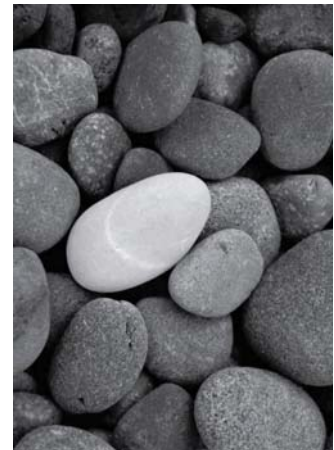
The second block evaluates the health insurance company's products provided beyond its statutory obligations in terms of their benefit for the individual insuree and the size of the target group of insurees. The strongest emphasis is placed on those products that have the potential to improve the health of insurees or to increase the convenience of the service. Less emphasis is placed on discounts for products and services not directly related to public health insurance.

The third block evaluates the client service for insurees in terms of information accessibility, individual communication channels, and support provided to insurees to ensure compliance with their obligations towards the health insurance company. The client service represents an important tool in building a long-term relationship between a health insurance company and insurees.

The fourth block evaluates the relations between a health insurance company and providers. These relations are extremely important, as the health insurance company assumes the role of an agent and represents its insurees before healthcare providers. It is the unequal relations between a physician and the individual health insurance companies that gave rise to the question frequently asked at the first visit of an out-patient facility: "Which health insurance company are you insured with?"

On the basis of evaluation of the monitored categories, the health insurance companies were given the following ratings:

- Health insurance companies rated "A": Union and Dôvera
- Health insurance companies rated "B": Apollo and EZP
- Health insurance companies rated "D": VŠZP and SZP





Mgr. Henrieta Maďarová, MSc. (1978)

Health Policy Institute, Partner

Former Member of Reform Team at the Slovak Ministry of Health

Graduate of the Faculty of Management at the Comenius University, Bratislava (2002). Majors: Financial Management, Banking and Insurance; Final thesis: Financing of Health Care System in Slovakia. One semester (2002) at the Institute Universitaire Professionnalise de Management, Universite C.Bernard, Lyon 1 in France. She participated in various courses (e.g. 3-weeks Flagship Course on Health Sector Reforms and Sustainable Financing, Harvard School of Public Health, Boston and World Bank Institute, USA in 2004, 2-weeks Regional Flagship Course on Health Sector Reforms and Sustainable Financing, Health Service Management Training Centre, Semmelweis University, Budapest and World Bank Institute, Hungary in 2003, 2-weeks Summer School of Liberalism, Liberec, Czech Republic in 2000). Currently she is doing her Masters in Health Policy and Management at the Brandeis University in Boston, USA.

At the Ministry of Health of the Slovak Republic she was Health Care Reform Team Member (X/2002 – VI/2004) responsible for economic analysis of impact of health sector reform steps, health sector budgeting and analysis of health insurance companies budgets, Ministry of Health budgeting, participation on preparation of new health sector legislation in health insurance mainly and she was OECD Delegate.

In 2004 – 2005 she was Local individual consultant/Analyst of health care providers of the World Bank Project - Health Care Sector Modernization Technical Assistance to the Ministry of Health. Objective of her assignment was to develop the system of monitoring of performance and financial indicators of health care providers under the governance of the MoH.

In January 2005 Henrieta Maďarová co-founded the Health Policy Institute, a think-tank which analyzes the health policy in the Central European countries. Currently she works at the Ministry of Health of Czech Republic in the Czech Health Reform Team.



Ing. Peter Pažitný, MSc. (1976)

Health Policy Institute, Partner

Former Principal Advisor to the Minister of Health of the Slovak Republic

Graduate of the University of Economics in Bratislava (1999). Postgraduate MSc. studies at the Semmelweis University in Budapest (2003) with Healthcare management and Health policy as the main fields.

He started as analyst in the think-tank M.E.S.A. 10 (Centre for Economic and Social Analyses) in 1997. Along with macroeconomic development, economic transformation and fiscal policy analyses, he paid attention mostly to the systemic changes and reform process in the healthcare sector.

Together with current Minister of Health Rudolf Zajac, he is the co-author of the publication *Healthcare Reform Strategy – Real Reform for the Citizen* that served as main source for the health care reform implemented in Slovakia in 2004. From October 2002 until December 2004 Peter Pažitný served as the minister's principal advisor. He was fully responsible for the expert part of the health reform, for daily management of the Reform Team and for operative tasks linked to the ministry. In January 2005, together with other members of the Reform Team, he founded Health Policy Institute, an independent think tank which analyzes the health policy in the CEE countries.

Beyond this Peter Pažitný has very specific experience from the neighbouring countries (esp. Hungary and Czech Republic), about their health system, health reforms and reform proposals. Personally, many of the decision and policy makers are his good friends.

In 2005 – 2006 he was member of Board of Directors of hospital in Levoča, Inc.

In 2006-2007 he was member of Advisory Committee to Ján Gajdoš, Chairman of Healthcare Surveillance Authority in Slovakia. Also in 2006 – 2007 Peter Pažitný was advisor to Lajos Molnár, Hungarian MoH.

In 2007 he was consultant to Apollo Health Insurance Company, Inc.

He is consultant to Czech Healthcare Reform Team led by Tomáš Julínek (current Minister of Health) and Pavel Hroboň (current Deputy Minister of Health) since 2005.



MUDr. Tomáš Szalay (1971)

Health Policy Institute, Partner

Former Member of Reform Team at the Slovak Ministry of Health

Graduate of the Faculty of Medicine, Comenius University, Bratislava (1996). Specialization: General Medicine. One semester (1991) Faculty of Medicine, Martin-Luther-Universität, Halle a. d. Saale, Germany. In 2006 - 2008 he studied law at the Bratislava School of Law.

After finishing the studies Tomáš Szalay worked as a journalist and TV anchor in biggest Slovak private broadcasting company TV Markíza (1996 – 2002). He gained managerial skills as managing director of an internet content provider company (2000 – 2001).

He joined the reform team in November 2002 as the spokesperson of the Ministry of Health responsible for the external communication and public relations. Since 2003 he began to prepare and coordinate new health care legislation (definition of the Basic Benefit Package – Treatment Act (Scope of the Health Services Covered by the Public Health Insurance Funds) and contributed to the analysis and modelling of reform impacts. In 2004 – 2005 he was individual World Bank Consultant, responsible for co-ordination of the Quality of Care Component of the World Bank Health Sector Modernization Support Technical Assistance Project at the Slovak Ministry of Health.

In January 2005 Tomáš Szalay with his reform team colleagues co-founded the Health Policy Institute.



MUDr. Angelika Szalayová (1974)

Health Policy Institute, Partner

Former Member of Reform Team at the Slovak Ministry of Health

Graduate of the Faculty of Medicine, Comenius University, Bratislava (2000). Specialization: General Medicine. Studied also Psychology at the Faculty of Arts of Comenius University (1993 – 1995). Postgradual study in Clinical Pharmacology at the Faculty of Medicine of Comenius University (2000 – 2005). Angelika Szalayová participated in many courses and training residences (e.g. 2002 – 2003 Health Outcomes Research, Moduls I., II. and III. – EBM and its applications to Drug Utilization, Pharmacoeconomics, Pharmaceutical pricing and reimbursement, Vienna School of Clinical Research, Austria).

Since 2000 she is assistant professor of the Farmacology Department Faculty of Medicine, Comenius University. She worked in 2003 – 2005 at the Ministry of Health in the Drug Policy Department; she has been head/ deputy of the Drug Reimbursement Committee.

Angelika Szalayová is author and co-author of many publications and scientific reports on pharmacotherapy quality evaluation, especially in the area of cardiovascular diseases, neurology, psychiatry, endocrinology and antimicrobial therapy.

Angelika Szalayová is one of the co-founders of Health Policy Institute (2005). In 2005 and 2006 she was member of the Board of the General Health Insurance Company, Inc.

She is member of the Drug Reimbursement Committee at the Czech Ministry of Health since 2006.



Ing. Simona Frisová (1980)
Health Policy Institute, Senior Analyst

Graduate of the Faculty of Economic Informatics, University of Economics, Bratislava (2003). Specialisation: Quantitative methods in economics and entrepreneurship, Insurance Mathematics.

After finishing the studies Simona Frisová worked as an assistant in commercial department of MORA SLOVAKIA, Ltd. She gained skills about contracting, preparation of promo materials for business partners and calculating price proposals.

She started as assistant of analyst in the think-tank M.E.S.A. 10 (Centre for Economic and Social Analyses) in 2002 during her studies. Afterwards she worked as analytic since 2003 with view on making financial analyses, development policies of municipalities, microeconomic analyses, feasibility and impact studies, commentaries on developments in insurance market and loan applications.

From the January 2006 she worked as a Senior Health Policy Analyst in Health Policy Institute, an independent think-tank which analyzes the health policy in the Central European countries, Bratislava. She specializes in economic and financial analyses, project planning, hospital and health insurance company financial planning, hospital restructuring plans, hospitals evaluation, health care policy analysis, macroeconomic modelling of health sector, feasibility and impact studies, statistics and econometrics analyses.

In July Simona Frisová took part in European Health Leadership Programme at INSEAD in Fontainebleau.



Mgr. Michal Gajdzica (1976)

Health Policy Institute, Senior Analyst

Graduate of the Faculty of Management, Comenius University in Bratislava (2000). Specialisation: financial management. He participated at various courses, as for example (1) Flagship course aimed at poverty, equity and health systems, organized by the Health Services Management Training Center at Semmelweis University in Budapest and the World Bank in 2004; (2) Flagship course aimed at new challenges in healthcare organized by the University in Lausanne and Harvard Medical International in 2006.

Previously he was active in the area of finances and capital markets. In 2001 – 2004 as an external analyst of M.E.S.A. 10 he conducted several studies on financial sector, monetary policy and chosen areas of Slovak economy. He also provided analysis for several companies undertaking in healthcare. In 2002 – 2004 he was World Bank consultant at the project of pension reform.

In 2004 – 2006 Michal Gajdzica was World Bank project leader for the technical assistency at the education of healthcare managers.

In November 2006 Michal Gajdzica started his co-operation with Health Policy Institute on topics of financing, budgeting, accounting, pricing and controlling in healthcare.



Ing. Karol Morvay, PhD. (1973)

Health Policy Institute, Senior Analyst

Karol Morvay is PhD graduate with specialisation on economical policy at the Faculty of National Economics, University of Economics, Bratislava. His dissertation analysed macroeconomic disbalances in post-socialist countries. He participated in internships at the Institute of Economics, Hungarian Academy of Sciences, Budapest and at CERGE- EI in Prague.

He conducts research and analytical work in M.E.S.A. 10, at the Institute of Economics, Slovak Academy of Sciences and since 2006 also as external co-operator of Health Policy Institute. He follows macroeconomic analyses, economical policy and economical theory.

In 2003 and 2004 Karol Morvay was member of the Board of the Slovak Anti-trust Office. In 2001 and 2002 he was chairman of the scientific council at the Institute of Economics, Slovak Academy of Sciences.

He is teaching at the Department of Economic Policy at the Faculty of National Economics, University of Economics. In 2007 he was vice-dean for science and graduants.



PhDr. Lucia Lenártová (1978)

Health Policy Institute, Senior Analyst

Education: 1998-2003 – Trnava University, Faculty of Health and Social Work, Public Health (Master Degree).

In 2004 – 2005 she was project representative and local coordinator, Interaction in Health, The Netherlands, working in the area of quality of health care, guidelines and indicators.

In 2003 – 2005 she was research scholar at the International Neurotrauma Research Organisation in Vienna.

In January 2005 she became executive director of the National Institute for Quality and Innovations.

Between January 2005 and October 2006 she was principal manager of quality in VŠZP health insurance company responsible for ISO implementation.

In the Sanigest Europe company she participated on various international projects in 2006 and 2007 as a consultant in Serbia.

Since November 2007 Lucia Lenártová is part of the Health Policy Institute's Team.

Health Policy Institute (HPI)

HPI is independent think tank analyzing health policy in Central and Eastern European countries.

Founders of HPI: Peter Pažitný, Tomáš Szalay, Angelika Szalayová and Henrieta Maďarová.

Financial results of HPI in thousands SKK:

	2005	2006	2007
Revenues	1 613	1 521	361
Expenses	1 659	1 456	529
Income	-46	65	-167

Health Research & Consulting, Ltd. (HRC)

HRC is a subsidiary company of HPI aimed at business consulting in the healthcare area.

Partners of HRC: Peter Pažitný, Tomáš Szalay, Angelika Szalayová, Henrieta Maďarová and HPI.

Financial results of HRC in thousands SKK:

	2005	2006	2007
Revenues	8 052	15 108	6 872
Expenses	2 061	5 135	5 633
Income	5 991	9 973	1 239

Health Management Academy, Ltd. (HMA)

HMA is affiliated company of HPI dedicated to education of physicians and managers in healthcare.

Partners of HMA: Peter Pažitný, Simona Frisová, Janka Červenáková, Tomáš Szalay, Angelika Szalayová, Karol Morvay and Henrieta Maďarová.

Financial results of HMA in thousands SKK:

	2007
Revenues	1 974
Expenses	2 493
Income	-519

PROREC Slovakia

PROREC Slovakia is affiliated civic company of HPI. It's goal is to summarize data, know-how and trends in the area of electronic health records.

Founders of PROREC Slovakia: Peter Pažitný, Tomáš Szalay and Robert Vincze.

Financial results of PROREC Slovakia in thousands SKK:

	2006	2007
Revenues	50	1
Expenses	28	3
Income	22	-2



Partners

Ing. Peter Pažitný, MSc. (1976)



MUDr. Tomáš Szalay (1971)



MUDr. Angelika Szalayová (1974)



Mgr. Henrieta Maďarová, MSc. (1978)

Senior analysts



Ing. Simona Frisová (1980)



Ing. Karol Morvay, PhD. (1971)



Mgr. Michal Gajdzica (1976)



PhDr. Lucia Lenártová (1978)

Office support



Eva Konečná (1983)

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