

Models and forms of health care financing

Great Britain - system of provided care by pharmacists - Provided services by pharmacists

WWHAM protocol

SYLLABUS of 4th LECTURE

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PharmDr. Bc. Dana Mazankova, Ph.D.

Models of health care financing

1. The Beveridge Model

- health care is provided and financed by the **government** through tax payments
- **state budget**
- **National Health Service**
 - medical treatment is a public service
 - many hospitals are owned by the government
 - some doctors are government employees
 - government controls costs as the sole payer
- Great Britain, Spain, most of Scandinavia, Estonia
- New Zealand, Hong Kong
- U.S.A. - Department of Veteran Affairs
- Cuba

2. The Bismarck Model

- healthcare is provided and financed by **insurance system** through **insurance companies**
 - **compulsory public health care insurance**
 - financed by employers and employees - payroll deduction
 - the insurers are called “sickness funds”
 - the plans cover everyone
 - doctors and hospitals are private
 - cost control: regulation of provided medical services and fees
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- Germany, France, Austria, Belgium, Netherlands, Switzerland, Czech Republic, Slovakia, ...
 - Japan
 - Greece
 - Latin America

3. The National Health Insurance Model

- healthcare is provided and financed by **government-run insurance program** that every citizen pays into
 - **compulsory public health care insurance operated by state**
 - **National Health Insurance plans:**
 - providers are private
 - government has considerable market power to negotiate lower prices
 - cost control by:
 - limiting the medical services they will pay for or
 - making patients wait to be treated
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- Canada
 - Taiwan, South Korea

4. The Out-of-Pocket Model

- provided healthcare is financed by:

- direct payments
- private insurance

• USA

- government - selected group of patients:

I. Medicare

II. Medicaid

III. Department of Veteran Affairs

• Belarus

• rural regions of Africa, India, China and South America

- absence of insurance or government plans

- people receive medical care if they can pay the bill out-of-pocket at the time of treatment

Forms of health care financing

Health care financing according to type of payer

Non-direct payments - payments by 3rd side

Direct payments - payments by patient

Health care financing according to structure of health care facility and principle of payment

Payment per capita, capitation

- prospective fixed payment

→ ratio of registered patient according to age

- primary care physicians: general physicians (for children, for adults)

Fee for service

- payment per provided service, retrospective
 - Tarif of Health Services with point valuation
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- secondary care physicians: ambulatory specialists (allergologist, orthopaedist, dermatologist, ophtalmologist, ..)
 - hospitals – only partly

Budget (fixed payment tariff)

- in advance specified (settled) budget for hospital, prospective
- **historical budget**

- **tertiary care: hospitals**

Presently, there is tendency to move to more effective systems of financing hospitals:
DRG system

Diagnosis Related Groups (DRG system)

- financial limits for the diagnosis
- **clinical and economical homogenous groups / cases = Diagnosis Related Groups**
- average duration-of-stay
- MDC (Major Diagnostic Categories)
- **tertiary care: hospitals**

Payment for drugs

- covered drugs
- reimbursement from health insurance company

- non-covered drugs
- direct payments

Pharmacists – **payment for pharmaceutical care** (Fee for service)

Great Britain

- provided health care payed by: **National health Service (NHS)**
- funding for the NHS comes directly from **taxation**

Payments for pharmacists from NHS:

1. Drug reimbursement:
2. Fixed payments:
3. Payments for provided services
- (4. Direct payments from patients)

Provided services by pharmacists in UK

Medicine Use Review (MUR) Service

- pharmacist control of patient's used drugs
- limit: 1 patient / a year

New Medicine Servis

- asthma
- chronic obstructive pulmonary disease (CHOPD)
- type 2 diabets mellitus
- high blood pressure
- people who have been given a new blood-thinning medicine
- limit: 3 appointments (per 10-15 minutes)

Pharmacy First Advice

- treatment of minor ailments
- patient receive pharmacist's consultation and 1 OTC
- limit: 1 patient can receive 1 OTC / indication, maximum 3x per 6 months

Smoking Cessation Service

- limit - within 1 week: 6 appointments, 1 OTC (nicotine gum, patches, ...)

Supplementary and independent prescribing

Flu jab

- Flu vaccination by **injection** (annual injection)
- Flu **nasal spray** vaccination (annual nasal spray)

Exchange needle

Methadon program

- for drug addicted

And many other pharmacist 's services...

WWHAM protocol

- mnemonic used by pharmacists to gather information to help them in diagnosing a patient's presenting complaint

The WWHAM Pathway

01: Listen

02: The way you say it

03: The WWHAM Questions

- **W: Who is the medicine for?**
- **W: What are the symptoms?**
- **H: How long have you had the symptoms?**
- **A: What action has been taken?**
- **M: Are you taking any other medication?**



04: Check your understanding

05: Recommend or Refer?

06: Final words