

ORGANIZING THE SYSTEM OF COMPULSORY HEALTH INSURANCE

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The process of forming medical health insurance system in Russia is considered. The factors of effective functioning of public health service is defined. Main problems of compulsory medical insurance were found and some recommendations in reforming public healthcare service were suggested.

There was a national system of public health service in the USSR that in the West was called “Semashko model”. The idea was in providing equal access to health services for all people. You should pay only for medicine if it is got out of hospital.

Soviet health professionals have achieved considerable results in developing public health service, at the same time the public health service system had a number of disadvantages and problems and therefore there was a need in reforms.

The reforms of the system of public health service were started in the framework of the process of reforming Soviet economy. The new model of budget medicine was suggested - the new economic mechanism in public health service. The model provided the stability of bud-

get financing of the branch and at the same time enlarging the possibilities of medical administrative officials to use the government funds. Budget capabilities of the country were limited in the 90s, and in order to protect their interests the bodies of public health service management were for more radical reforms of the system of public health service financing. The choice was made in favor of medical insurance that was the most suitable system for market economy and became the method of creating market environment for the work of medical institution.

In June 1991 the law “About medical insurance of the citizens of Russian Federation” was approved. The changes concerning public health service financing were the following:

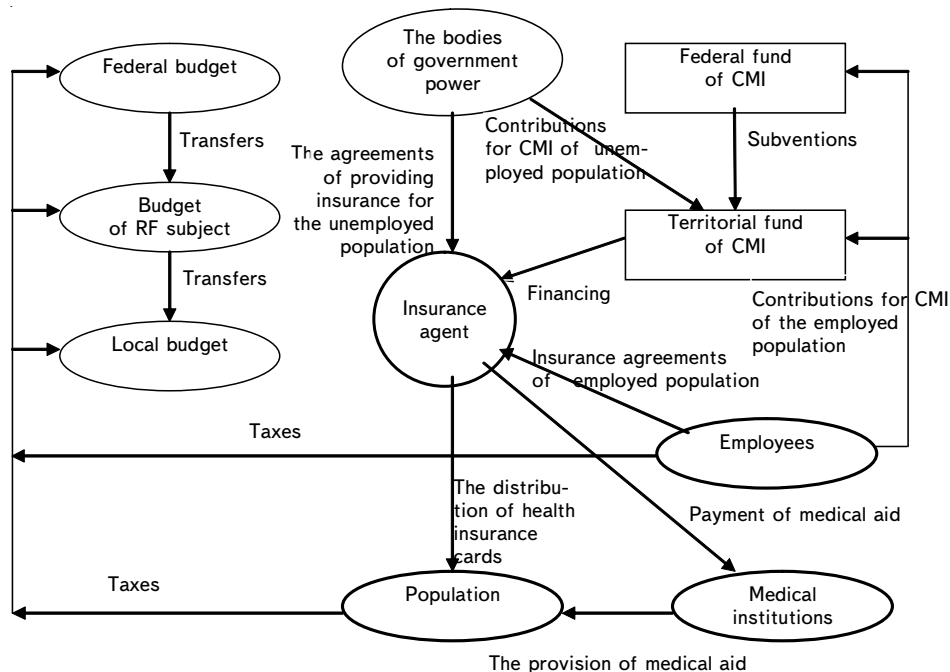


Fig. The model of the system of compulsory medical insurance of RF (developed by the authors)

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◆ Companies make insurance contributions for compulsory medical insurance of its employees (the contributions are taxable);

◆ Insurance contributions for insuring the unemployed citizens is made by the bodies of government management at the cost of budget funds;

◆ The amount and conditions of providing free of charge medical aid in the frameworks of the program of compulsory medical insurance (CMI) are defined by the basic program of CMI approved by the Government and territorial programs that are established on the base of the basic one by local power bodies.

Compulsory medical insurance is the part of national social insurance and gives equal opportunities to all the citizens of Russian Federation for acquiring medical aid at the cost of compulsory medical insurance.

At present time CMI system comes across a great number of problems. The main problems of implementing the government guarantees for providing free of charge medical aid to the citizens of Russian Federation are: insufficient financial support of the rights of the citizens of Russian Federation and the subdivision of the sources of medical aid financing that makes it impossible to introduce the system of compulsory health insurance to the full extent.

As the aim of modernizing CMI system is to create the stable financial base for the provi-

sion of free medical aid to the population, to our mind it is necessary to solve the following problems:

◆ Provide the balance of CMI system profit and its responsibilities on distributing the guaranteed medical aid to people having insurance;

◆ Providing effective mechanisms of purpose and rational use of assets by all the subjects of CMI system;

◆ Adjusting the main regulations of the Law of RF "About medical insurance of the citizens in RF" to Civil, Tax and Budget Codes of RF approved later.

Therefore, the public health service reform that took place in Russia, the introduction of compulsory medical insurance and the modernization of public health service system all together should provide the limited investment transformation of the branch targeted at increasing the economic and clinical efficiency of its functioning, improving the quality of medical aid and providing the constitutional rights of RF population for the certain amount and quality of medical aid guaranteed by the government.

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