

The new strategic plan in Kosovo to implement a health insurance scheme

Degjoni Rudina

The Compulsory of Health Care Insurance Fund of Albania

Rabishe Kurti Jaha

Owner of OJQF in Prishtine, (Kosovo)

Leunora Brika Haxhiu

Agency of Medical Products and Equipment, Prishtine, (Kosovo)

Abstract

This abstract is to provide a concise description of the new strategy of implementation of social health insurance scheme in Kosovo. The health insurance scheme in Kosovo does not exist yet but in April 2014, the Assembly of the Republic of Kosovo approved the Law on Health Insurance. The purpose of this law is to ensure the universal access of citizens and residents of the Republic of Kosovo to quality health care services, with the aim of improving health indicators and providing financial protection from poverty due to the high costs of health care through establishment and regulation of the public health insurance system. This law regulates the establishment, organization, functioning, and financing of the public health insurance system; as well as the rights and obligations of the parties involved. The fundamental principles of this law will be transparency, sustainability, equality of citizens and residents of Kosovo, accountability, universal access to health services, solidarity, reciprocity, individual responsibility, easy access, efficiency and protection against financial risks. the scheme will have evolved gradually, with different expanding the range of the covered services through shifting from undifferentiated funding to payment for health services packages in Kosovo. From the beginning of the year 2017, the Ministry of Health of Kosovo takes the decisions to start the new strategic plan in Kosovo to implement a health insurance scheme and to change the mechanisms of the health care system in Kosovo and to build a new insurance scheme. The new health insurance scheme will cover the primary health care services, the hospitals services and the list of reimbursable drugs.

This abstract proposes which are the the new strategic plans to implement the principles on which the health insurance scheme will base in Kososvo. Which are all the categories benefiting from the health insurance scheme and which are the amount of compulsory health insurance contribution. In brief, the current situation of health system in Kosovo includes problems and missing of health financing. These proposals in this abstract are ambitious and require detailed implementation of social health insurance scheme and planning for the Kososvo population how to be insured in the health sector of Kosovo.

Keywords: *health insurance scheme of Kosovo, new social implementation, health categories of benefiting.*

Introduction

All people have the right to be treated and it is the responsibility of society to take care of coping with the disaster illness. The illness is associated with the need for medication, while poverty with the lack of financial means to cover the costs. In world history, illness and poverty have been the two main reasons for the birth of health insurance. The world has recognized different health systems and different funding systems. The Bismark system is the health insurance system, which by law was settled in Germany in 1883, was initially voluntary and then forced. Later the Bismarck system spread to England, Austria, France, the Netherlands, Belgium and so on. The Semashko system belongs to the 1920s and is the system of centralized health services, located in the USSR and then in other countries of the power of "real socialism" in Eastern and Southeastern Europe. The Semashko system is the state system, with government budgets, planned, medical staff has a fixed fixed salary and nothing else but is not efficient. However, reforms in the implementation of health insurance in Kosovo need to be supported by appropriate policy analysts with reliable and available information on Kosovo's technical, medical, economic, social and political content Aryee (2000).

1. Advantages of Health Insurance in Kosovo

In April 2014, the Assembly of the Republic of Kosovo adopted the Law on Health Insurance in Kosovo. The law is intended to ensure the universal access of citizens and residents of the Republic of Kosovo to basic healthcare services. The purpose of the implementation of the health insurance scheme in Kosovo is not to improve health care indicators but to ensure the financial protection of the population of Kosovo from poverty. The beginning of the health insurance process in Kosovo will be the creation of a new relationship between the patient and the health services where the patient will be in the focus of health care. The reform challenge in the implementation of health insurance in Kosovo will open the new path towards the alignment of the insurance scheme at all levels of health care. For this, the objectives and the role of the health insurance fund in Kosovo as well as its cooperation with the other health care actors in Kosovo should be clearly structured.

Increased spending on health care is essential to the implementation of the Law on Health Insurance. For the first time in Kosovo, with the implementation of the law, the foundations of organizing, functioning, financing and universal coverage of the population will be carefully taken care of. With the functioning of Kosovo's health insurance, the primary care of the

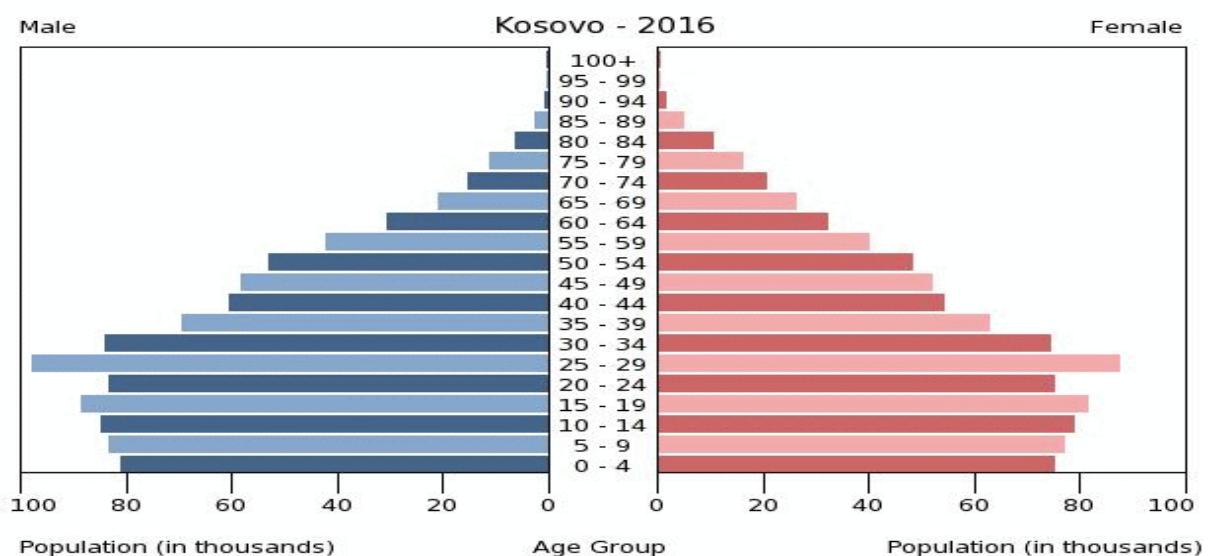
country will be accompanied by increased transparency in the economy, with the right to equality and equality for all residents of the country. Accounting, solidarity, universal coverage and financial autonomy will be part of the implementation of reform in Kosovo's healthcare. The implementation of the national security scheme in Kosovo will ensure the individual people's responsibility in spilling outward contributions, they will benefit from a wider public access to the public sector as well as the private sector. The Health Care Reform in Kosovo will be a reform based on the economic, social reality of the financial possibilities of the population and the state of Kosovo. The collection and channeling of contributions will have to be one of the priorities of the reform of the implementation of health insurance scheme in Kosovo. (ASK, 2017).

Kosovo has an estimated population of {pop}, up from the 2011 census population of 1.734 million and the age structure of the population of Kosovo (Breznik, 2016) consists:

0-14	years: 25.01%	(male	246,281/female	227,718)
15-24	years: 17.22%	(male	170,515/female	155,840)
25-54	years: 42.57%	(male	425,815/female	381,037)
55-64	years: 7.92%	(male	75,964/female	74,170)
65 years and over:	7.28%	(male	57,965/female	79,945)

The population pyramid of Kosovo (fig. 1) illustrates the age and sex structure and provides insights about political and social stability, as well as economic development of the Kosovo.

Figure nr. 1: Kosovo population, World population review



More than 115,000 pensioners received a basic pension in 2013 (average of €60 per month, at the poverty threshold). In 2009, Kosovo introduced financial aid for families taking care of

children with severe and permanent disabilities. Kosovo officially spends a marginal 3% of GDP on healthcare and social safety, which explains the high poverty rate. In the period between 2008 and 2012, social assistance spending for the poorest has been in constant decline. It is estimated that about 40% of all health expenditure is private spending, which results in inequalities in access (BTI, 2016).

The scheme of social assistance benefit of Kosovo, shows that there are 26,117 families with a total of 106,628 members. While, from the scheme for material support to families with children with permanent special needs have benefited 2,761 families and whereas, from the pension schemes, there are 122,716 pension beneficiaries of basic pension age; (ii) 43,300 pension beneficiaries of retirement pension contributions; (iii) 19,481 pension beneficiaries for persons with special needs; (iv) 12,472 pension beneficiaries for families of war martyrs and war invalids; (v) 36,032 pension beneficiaries for war veterans; (vi) 3,232 pension beneficiaries for "Trepça"; (vii) 1,001 pension beneficiaries for the Kosovo Protection Corps; (viii) 288 pension beneficiaries for the Kosovo Security Forces; and (ix) 2, 001 beneficiaries for compensation for blind persons (ASK of Kosovo, 2017).

2. Implementation of the health insurance scheme in Kosovo

There is an increasing number of literature on the technical challenges of applying health insurance to low and middle-income countries (eg Carrin 2003, Carrin and James 2004; Preker 2002) from which Kosovo can consult on implementation of its reform in health. The new way of implementing the financing and management of Kosovar population contributions will significantly increase the rational use of financial resources from the state budget of Kosovo. By that time, Kosovo will spend its transition period of economic care to the emerging market economy. Reforms in the provision of health care in Kosovo should be developed in full compliance with the insurance law and all other by-laws that the Ministry of Health of Kosovo, in cooperation with the Health Insurance Fund, should develop. Existence and examples of developed countries exist, so Kosovo needs to rely on their experience to successfully implement its new health reform. The health insurance fund in Kosovo should focus on the creation of its local structures, in defining functional duties and responsibilities. For this, cooperation and the establishment of new relationships between the structure of the Insurance Fund, the pharmaceutical market in Kosovo, primary care physicians and family physicians should be ensured. This cooperation will work through their contracting with the Health Insurance Fund. For this, the work should be based on the drafting of bilateral type contracts.

The type of contract should be a requirement of the law on health insurance in Kosovo. The insurance fund should design the path of the patient's pathway at all levels of health care in Kosovo by clearly identifying the duties and responsibilities of each health care provider. The compilation of a list of reimbursable medicines, the compilation of a list of reimbursable materials, the compilation of a list of reimbursable tertiary examinations, the compilation of reimbursable health packages, the compilation of the list of tariffs of services by levels should be among the basic priorities of the work of the Health Insurance Fund in Kosovo.

3. Realization of Health Insurance Reform

The new reform of the implementation of health insurance in Kosovo will be realized by taking into account several key elements related to (i) the design of the insurance model, providing a simple model of the population insurance policy (Walt and Gilson 1994); (ii) the clear content of the reform, the actors will involved in the processes of health policy reform, (Grindle and Thomas, 1991); (iii) realization of the statute of the health insurance fund in Kosovo in the role of a pibly, autonomous and self-financing entity; (iv) designing the organizational chart with detailed descriptions of duties and responsibilities for the different fields and functions of the insurance scheme in Kosovo; (v) developing a plan for the necessary staff training; (vi) defining and generating resources for health and social protection in Kosovo; (vii) the financing of primary health care services in Kosovo; (viii) funding of hospital health care services in Kosovo; (ix) establishment of a list of indicators of the indicators of health care levels in Kosovo; (x) establishment of standards for calculating costs in health care in Kosovo; and (xi) the establishment of a register of public and private health care providers at all levels of health care in Kosovo.

4. Recommendation

As Kosovo has decided to implement the new Health Insurance Law in Kosovo, through the implementation of the health financing scheme with a single payer that will be the Kosovo Health Insurance Fund based on the insurance of the Kosovo population it is recommended to follow the steps below:

- Drafting the legal framework of the health care insurance scheme in Kosovo.
- Determining the role and position of the health insurance scheme in Kosovo.
- Development of indicators of performance of health care levels.
- Planning for the establishment of a health insurance fund in Kosovo.

- Planning of health services funded by the Fund according to the level of health care in Kosovo.
- Determination of reimbursable medicines and their inclusion in the reimbursement list according to health care levels.
- Identification of health materials and inclusion in the list of hospital care reimbursements by hospital category.
- Inclusion in the health insurance scheme of defined population categories and their level of health coverage.
- Inclusion in the health insurance scheme of the coverage of services according to the level of health care.

References

- Breznik D., The population of Kosovo, 2016: 30 (4): 3-28.
- Bekteshi, Xh., Budgeting process in the Municipality of Prishtina, 2014.
- BTI Project, Reports, Prishtine, Kosovo, 2016.
- Constitution of Kosovo
- Law No. 03/L-048 on Public Financial Management and Accountability art. 20, para. 20.2;
- Low on Health. Law No. 2004/4. 2004 Feb 19;
- aw on Kosovo Consolidated Budget. 2009 Nr 03/N-105.
- Low on the Rights and Responsibilities of the Citizens in the Health Care, 2004/38. UNMIK PISG Kosovo, Kosovo Assembly. 2004
- Low on Local Self Government. 2008.Law Nr. 03/L-40. Kosovo Republic. Kosovo Assembly
- Low on Kosovo Consolidated Budget. 2009 Nr.03/N-105.
- Ministry of Health 2014 draft Law on health Insurance
- Health and Welfare Parliamentary commission. Monitoring Report on Implementation of Health Low. 2006
- Kosovo Government. Budget books: 2001,2002,2003,2004,2005,2006,2007,2008. 2009
- Kosovo Government Ministry of Economy and Finance. Medium Term Budget Framework 2010-2013. 2010
- Prishtina: Kosovo Health Strategy, Department of Health; 1999. UNMIK.
- UNMIK. Health Strategy. 2001
- Health Strategy for Kosovo. 2010-2014
- Kosovo Development Plan-Health Sector 2007-2013. Prishtina: Draft WG Paper; 2006. PISGK.
- Administrative Instruction on establishment of Family Health Centers. 15/2000.
- National Institute of Public Health. Analysis people's health in Kosovo in 2010. Annual report Qosaj, Berisha Transition in Health and Health Care in Kosovo. 2010