

Fact sheet

Copenhagen and Athens, 12 December 2013

# Reform of the Greek health system: a high-level conference in Athens

On 12–13 December, Athens will host the High-level Conference on the Greek Reforms in the Health Sector: Improving Citizens' Health. It will be attended by all key actors in the reform process from the Greek and international communities, including officials from the Greek Government and regional authorities, and experts from the public and private sectors, the academic community and civil society. The Conference is organized with the collaboration of the WHO Regional Office for Europe.

The Conference signals the kick-off of the implementation the Health in Action initiative, which is supported by the Regional Office and partners. It has three main purposes:

- to provide an opportunity for a policy dialogue on health reform in Greece, the main pillars of which rest of on the principles of European Union (EU) solidarity, in the context of the Regional Office's health-policy framework, Health 2020;
- to highlight the continuing need to ensure adequate financial resources to improve citizens' health; and
- to inform and consult all key stakeholders on the preparatory phase of Health in Action, including the assessment and reform processes, as well as future activities and updates on how the reforms are linked to other reform processes.

The Conference will also be an opportunity to present the health-related priorities that the Greek Government will bring to its six-month EU Presidency, which begins on 1 January 2014.

#### **Conference overview**

The Conference will begin with a high-level policy dialogue on health reform in Greece and across the European Region, with a focus on challenges facing the Greek Ministry of Health, such as establishing a viable safety net for citizens and maintaining a sustainable health system. Key stakeholders attending will include ministers of health from countries across the EU (including Belgium, France, Hungary, Portugal and Sweden), a delegation from Germany (the Domain Leader), the European Commission's health commissioner and the WHO Regional Director for Europe.

The sessions will give participants the chance to present and discuss the planned reforms described in the Greek health policy for 2013–2020. Issues addressed will include:

- ensuring universal access to health services by developing a health safety net
- improving the financial sustainability of the health system
- monitoring the impact of the global economic crisis on the Greek health sector
- increasing efficiency in the allocation of resources
- reinforcing management capacity.

Six parallel seminars will be held on a wide range of issues in reforming health care systems. Their aim is to create a technical dialogue between government officials, public and private health-service providers, academics and civil-society representatives about different parts of the programme to support health reform in 2013–2015.

## Reforms of the Greek health system: background

The Greek health system has been in continuous crisis and needed structural reform for over three decades. Problems include:

- low public expenditure on health
- high out-of-pocket spending on health services by households
- skewed human-resources allocation
- underdeveloped primary care.

Several ambitious reform packages were introduced over the years, but largely failed owing to an array of interrelated economic, political and social factors. For example, three packages in the 1990s were never fully implemented, and sweeping systemic reforms begun in 2000 halted in 2004 following a change of government. In May 2010, however, the spiralling public debt and deficit nearly bankrupted the country and its economy was placed under the supervision of the European Commission, the European Central Bank and the International Monetary Fund (the Troika). The rescue package of loans and their accompanying conditions, outlined in the Memorandum of Understanding between Greece and the Troika, included a series of measures for health-sector reform, which focused particularly on reducing public expenditure. These saw the 2011 health care budget reduced by €1.4 billion. A second Memorandum of Understanding was signed in February 2012, also including health-care-system reforms.

### **Health in Action**

To maintain universal access to high-quality health care within the agreed framework of strict fiscal discipline, Greece has had to investigate concrete ways to contain the costs of inputs to and increase the overall efficiency of the health care system. On 17 September 2012, the Greek Ministry of Health established the Health in Action initiative to plan the needed structural reforms of the Greek National Health Service and monitor their implementation. After a year of intensive planning – aided by the European Commission's Task Force for Greece, the German Ministry of Health, a number of EU Member States and WHO – the

Greek Ministry developed the Health in Action mandate and roadmap, a coherent programme for long-term reform with nine main pillars:

- 1. rationalization and modernization of hospital-management systems;
- 2. development of a robust and sustainable diagnostic-related group (DRG) system;
- 3. development of e-health, including improvements to the e-prescription system;
- 4. development of a modern, transparent and reliable system of pricing and reimbursement of pharmaceuticals, based on EU standards;
- 5. re-engineering of EOPYY (the national health insurance system), to ensure its financial sustainability and improve its operation;
- 6. development of an integrated primary health care network to meet the population's needs and ensure the efficient use of public resources;
- 7. establishment of an efficient system for managing the health sector's human resources, including mapping, assessment, motivation and training;
- 8. development of health tourism or cross-border health care in Greece by ensuring the necessary conditions, including the establishment of a legal and investment framework and a national strategy; and
- 9. development of a public health policy and action plan to promote healthy lifestyles, protect against health threats, prevent long-term physical and mental diseases, and promote well-being.

In addition, a health reform steering committee and nine subcommittees, one for each pillar (action domain) were established. A further pillar was added to cover horizontal action that:

- affects the health sector as a whole: ensuring coordination between projects and teams, controlling the performance of the programme and communicating the reforms; and
- includes evaluating the impact of the economic crisis on health, mapping the volume and distribution of health services, analysing the sources of revenue and developing mechanisms to monitor and control public expenditures.

At the same time, the Greek health policy for 2013–2020 was developed to set out a long-term vision for the Ministry of Health, including the rationale and expected results of the reform process. On 18 July 2013, the Ministry of Health also signed an agreement with WHO/Europe to expand WHO's role in the reform and implementation process.

Based on assessment missions and reports, EU experts, in collaboration with the subcommittees and Greek experts, developed action plans for each of the 9 pillars. The health reform steering committee discussed and adopted all these reports and action plans.

The benefits of Health in Action for Greek health reform include:

- a common vision and the personal commitment of the Minister of Health and all the leaders of the public-health bodies involved in the process;
- active involvement of and cooperation among key actors and stakeholders;
- targeted design of reform, monitoring of implementation and overall picture of the results:
- structured coordination among all public entities involved in the reform process;

- strong civil-service involvement to ensure continuation of reforms;
- cooperation between the nine subcommittees and the health reform steering committee (made up of representatives of Ministry of Health, the National Organization for Medicines (EOF), EOPYY, the Electronic Governance of Social Insurance S.A. (HDIKA S.A.), the Central Health Council (KESY), the Special Service for the Health and Social Security Sector (EYTYKA), the Task Force for Greece, Germany (Domain Leader) and international organizations, health-sector experts and academics);
- deployment of national experts and know-how; and
- targeted use of technical assistance, best practices and international experience.

Further information on the Conference is available from its official website (http://www.healthinaction.gr).

## For more information, please contact:

Liuba Negru Media Relations Officer WHO/Europe

Tel.: +45 45 33 67 89, +45 20 45 92 74 (mobile)

Email: lne@euro.who.int