

Methodological remarks, concepts, definitions

The scope of health services is included in the Act LXXXIII of 1997 on the benefits of the compulsory health insurance and the Government Order 217/1997 (XII.1.) regulating the implementation of this act.

This chapter presents the data of those concluded financing contract.

Financing contract: is concluded between the financing institute (NHIFA, RHIF) and the service provider for health service.

To define the indicators regarding financed services (per services, station), we count their average number per month.

General practitioners' care

Source of data: monthly change report and report of occasionally care of the general practitioner's service, which are forwarded to the Regional Health Insurance Funds.

Service providing regional care: has to give the same care to entitled people living in the same district but having chosen other general practitioner like those, who registered at this service, if they can not visit the doctor they have chosen.

Mixed care: service, providing care for adults as well as children.

Financial support as entrepreneurial flat rate for basic care: Government Decree No. 229/2001. (XII. 5.) on the financial support of general practitioners, family paediatricians and dentists providing basic cares, which made it possible for the providers to claim financial assistance at buying equipment and real estates for the use of providing services, was repealed on 1 January 2006. – Decree No. 329/2005. (XII. 29.) – however the rules of the Government Decree above should be still applied for valid and updated contract made before 2006.