

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 price support contract.

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

Source of medicament data: reports of pharmacies which concluded price support contract (public pharmacies and pharmacies of institutes which have department handling prescription turnover) forwarded to RHIFs, as well as reports of centers' turnover.

Pharmacy: in the tables under the expression "pharmacies" the data of public pharmacies and pharmacies of institutes which have department handling prescription turnover are presented together.

Public pharmacy: institute that provides the sick people with direct and full-scope medicament service.

Pharmacy of institute which have department handling prescription turnover: institutional pharmacy that carries out direct medicament services (Act XCVIII. of 2006, section 3. "r" point).

Ledger data: the expenses accounted financially from 1 January to 31 December of the given year.

Data of prescription turnover: the health insurance expense relating the given year from 1 January to 31 December. In accordance with the price support contract, prescription data may be corrected for 5 years ("the service provider shall be entitled to perform self-revision within 5 years with respect to the previous settlement period"); therefore, there may be discrepancies in data for the previous years due to their correction.

Ledger data of medicament of special procurement and reimbursement due to occupational accident are located in the amount of social insurance subsidy relative to data of prescription turnover, because data of prescription turnover are not available for these items.

Prescription number: prescription numbers reached by counting without the assessment of the legal titles of prescriptions (closest to actual value), and those reached by counting other breaking down [legal title, ISO, micro-regions (according to permanent address and the pharmacy used)] differ from each other, because of the following:

- corrections of giving out prescription products (corrections are accepted for a period of five years);
- in the case of medical devices, multiple products or components may be given out against one prescription which may belong to other ISO group.

This factor must be taken into account when preparing and evaluating reports.

Subsidized turnover: the data calculated at gross consumer price accepted by health insurance.

Subsidized medicament turnover of pharmacies: excluding data of medicament of special procurement as well as reimbursement due to occupational accident.

Social insurance subsidies excluding the amount of subsidy reimbursed by the central and local governmental budget for public health care purposes.

Public health care support: it has been divided into three parts with respect to the data of normative (standard), lifted and enhanced health care support under health care title.

Enhanced category: including the enhanced category turnover (former Eü100%) and the public health card owner's turnover reimbursed at enhanced level.

Lifted category: including the lifted category turnover (former Eü90%) and the public health card owner's turnover reimbursed at enhanced level.

Special legal title

- **Military obligation:** civilian and professional employees (and contract labour) belonging to the organization of Ministry of Defence are entitled to obtain health care service free of charge, if the doctor indicates the legal title ("military obligation") on the prescription.
- **Occupational accident:** according to the Act LXXXIII of 1997, section 54, subsection 1, the insuree, if his/her health impairment is a consequence of an occupational accident or occupational disease, is entitled to utilize 100 percent subsidy on the price of health care services, in case of their subsidy exceeds 0 percent.

Normative subsidies on medicaments: after negotiations with the relevant service providers, the rates of subsidies financed by HIF in the framework of compulsory health insurance are promulgated by the following legal acts from which

no deviation is possible. As regards the turnover of medicinal products, such subsidies cover medicinal products that are subject to payment (medicinal products subsidized at a rate of 90%, 80-85%, 55%, 50%, 25%, and a fixed sum, and medicinal products provided on the basis of normative public health care support).