

Project acronym: ASSPRO CEE 2007

Project full title: Assessment of patient payment policies and
projection of their efficiency, equity and quality effects:
The case of Central and Eastern Europe

Grant agreement no.: 217431

Project description for external dissemination activities

Related to the start of the project

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The start of ASSPRO CEE 2007

Collaborative focused research project funded by the European Commission under the Socio-economic Sciences and Humanities theme of the Seventh Framework Programme

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Abstract: *ASSPRO CEE 2007* is a research project that is funded to a great extent by the European Commission. The aim of the project is to identify a comprehensive set of tangible evidence-based criteria suitable for the assessment of patient payment policies and to develop a policy projection tool that can be used to analyze the efficiency, equity and quality impacts of these policies. The set of assessment criteria and the policy projection tool that will be developed in this project, will be validated by their application in Central and Eastern European countries. The following Central and Eastern European countries are included in the project: Bulgaria, Hungary, Lithuania, Poland, Romania and Ukraine. The comparison between these countries will help to establish to what extent the country context influences the evaluation of patient payment policies. It is expected that the project results will contribute to the overall progress in research focused on the application of economics and simulation tools to policy evaluation, as well as in research focused on the analysis of the Central and Eastern European health care reforms.

Key words: patient payments, assessment of health care reforms, Central and Eastern Europe

Introduction

ASSPRO CEE 2007 is a research project focused on the analysis of patient payment mechanisms, especially those in Central and Eastern Europe. The project is funded to a great extent by the European Commission (EC). The EC subsidy negotiated for this project is nearly 1.5 million Euro. The project activities started in March 2008 and are expected to continue 5 years. This document presents a short description of the basic research directions and expected project results.

Consortium

The consortium in project *ASSPRO CEE 2007* includes seven research-oriented organizations. The partners are presented in table 1. As it can be seen in the table, three of the partners are universities (*UM*, *MU- Varna* и *UJ CM*), other three partners are small-size research-oriented institutions (*MTVC*, *SOZ* и *CPASF*) related to or associate with universities, and one partner (*SNSPMS*) is a large national research-oriented center in the field of health care.

Table 1: Organizations that comprise the project consortium

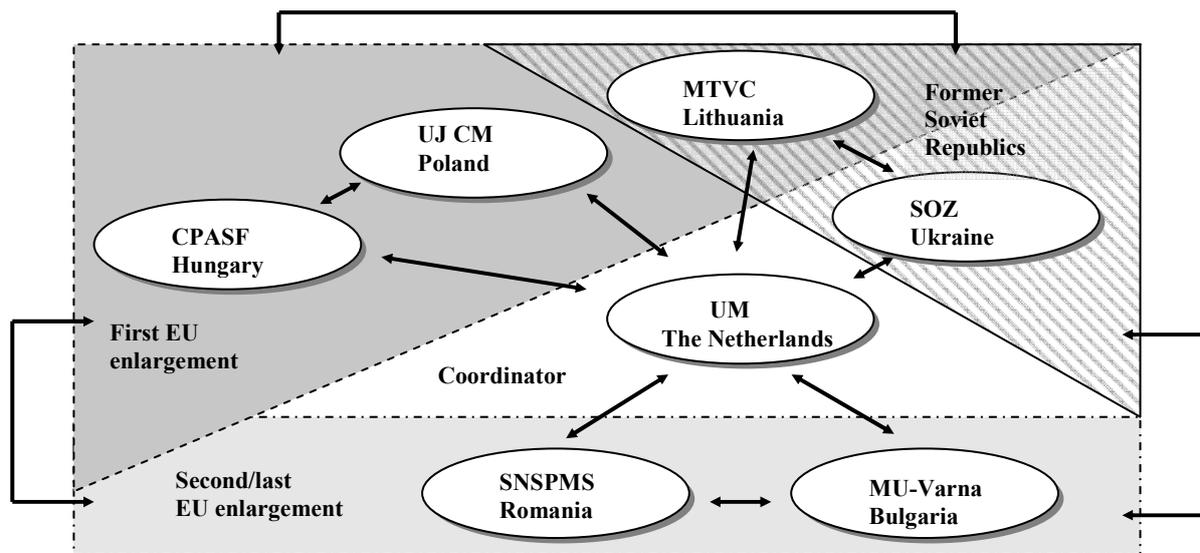
Partner No	Full name of the partner	Abbreviation	Country
Coordinator - 1	Universiteit Maastricht	UM	The Netherlands
Partner 2	Medical University of Varna	MU-Varna	Bulgaria
Partner 3	Public Enterprise “MTVC”	MTVC	Lithuania
Partner 4	Scoala Nationala de Sanatate Publica, Management si Perfectionare in Domeniul Sanitar Bucuresti	SNSPMPDS	Romania
Partner 5	Shkola Ohorony Zdorovia	SOZ	Ukraine
Partner 6	Uniwersytet Jagiellonski Collegium Medicum	UJ CM	Poland
Partner 7	Center for Public Affairs Studies Foundation	CPASF	Hungary

The selection of partners by the coordinating organization is not at random. The overall goal was to have a consortium that is representative for Central and Eastern Europe. Thus, six Central and Eastern European countries participate in the project, namely:

- Central European countries that enter EU with its first enlargement (Hungary and Poland).
- Eastern European countries with its second/last enlargement (Bulgaria and Romania).
- Former Soviet republics in Europe at different stages of development (Lithuania and Ukraine).

The specificities of the structure of the consortium, as well as the relations between the partners are presented in figure 1.

Figure 1: Structure of the consortium



Every partner is represented in the project by specialists in some of the following specialties:

- Health economics, welfare economics, microeconomics and econometrics
- Political sciences, (health care) management, sociology and health psychology
- Computer sciences and computer simulation modeling

This variation in the professional background of the project members is expected to facilitate a comprehensive approach to the analysis of patient payment policy. This is because patient payment policies have both economic and policy-related outcomes but also a variety of social consequences.

Predicaments and directions of the project

The research activities in project *ASSPRO CEE 2007* will follow three main directions:

- Evaluation of patient payment mechanisms (*policy assessment*)
- Forecasting the effects of patient payments (*policy projection*)
- Central and Eastern European health care reforms (*CEE countries*)

These three research objectives also determine the project acronym *ASSPRO CEE 2007*, where 2007 symbolizes the start of the project preparation.

The idea about this project resulted from two main issues discussed broadly in the literature [1,2,3]:

- The lack of systematic research worldwide on the assessment of patient payment policies, which turns the introduction or amendments of patient payment mechanisms into a pure political process rather than a rational decision-making.
- The need to reevaluate the mechanisms of official patient payments in Central and Eastern Europe because they have been implemented in a context of persistent informal payments for health care services, which imposes a double financial burden to consumers.

The personal research interests of the project coordinator and the scientific coordinators of the project also play a role in the definition of project topic. This project is a continuation of their work in the field of patient payment [4,5], as well as in the application of economic and simulation models to the analysis of issues related to health policy [6,7]:

Aim and objectives of the project

The aim of project *ASSPRO CEE 2007* is to identify a comprehensive set of tangible evidence-based criteria suitable for the assessment of patient payment policies and to develop a projection tool that can be used to analyze the efficiency, equity and quality effects of these policies, specifically in Central and Eastern Europe.

Based on the project aim and the specificity of the application area, the research objectives of the project are:

1. To identify a comprehensive set of tangible evidence-based criteria (incl. economic, social, institutional, historical geographical, ethical, cultural, demographic and sector-specific criteria) for the assessment of patient payment policies, and to validate them in an application in Central and Eastern Europe.
2. To develop a reliable and valid research instrument for studying the level and type of informal payments for health care services and to apply this instrument in Central and Eastern European countries to analyze the pattern of informal patient payments, as well as their effect on health care consumption.
3. To develop a model of consumer demand for health care services under official patient payments that accounts for the potential impact of informal payments for health care services, the behavior of health care providers, and consumer preferences, and to validate this model in an application to Central and Eastern European countries for studying the micro-level effects of official patient payments.
4. To develop a projection tool for the analysis of macro-level efficiency, equity and quality effects of patient payment policies using the model of consumer demand for health care services under official patient payments, and to validate this projection tool in an application in Central and Eastern Europe.

In addition to the research objectives, the project activities will also have the additional objectives to assure:

5. Extensive dissemination of project results among policy-makers, care providers and the general public.
6. Effective and efficient project management for the prompt delivery of research results.

The research objectives will be approached using quantitative and qualitative research methods from a broad range of fields related to socio-economic science and humanities. In particular, there will be an attempt to apply quantitative techniques (such as modeling, trend analysis, revealed and stated preference methods) combined with qualitative data to study the micro and macro outcomes of patient payment policies.

The steps that need to be followed to achieve the project objectives are divided into eight work packages. The work packages are presented in table 2. As it is shown in the table, the first six packages concern that concern the research activities in the project, follow the basic

steps of any systematic research: development of conceptual models, preparation of data collection, data collection and data input (divided into first and second wave of data collection), data analysis and interpretation, as well as policy assessment and projections. The last two work packages concern the dissemination of project results and management of project activities. Each of the work packages is then broken down into overall project tasks and subsequently into tasks per partner with a specific work-months and a deadline.

Table 2: Work packages included in the project

Work package No	Name of the work package	Type of activities and relation to project objectives
WP 1	Development of conceptual models	Research activities Project objectives 1÷ 4
WP 2	Preparation of data collection	
WP 3	First wave of data collection and data input	
WP 4	Second wave of data collection and data input	
WP 5	Data analysis and interpretation	
WP 6	Policy assessment and projection	
WP 7	Dissemination of project results	Dissemination activities Project objectives 5
WP 8	Project management activities	Management activities Project objectives 6

The work packages related to research activities will continue about 1 to 1.5 year. The work packages related to the dissemination of project results and management of project activities will last from the start to the end of the project.

Development of the project

The first steps regarding the preparation of project *ASSPRO CEE 2007* were carried out by the coordinator in from March 2007. The work started by the preparation of a project proposal and search for partners. The process of project preparation (from writing the project proposal till signing the contract with the EC) continued more than a year. The entire preparation process can be divided into four main phases:

- Phase 1: Preparation of project proposal
 - March - April 2007: Development of a project proposal
 - May 2007: Submission of the project proposal
- Phase 2: Evaluation of the project proposal by the EC
 - June 2007: Formal acceptance of the project proposal
 - July 2007: Positive evaluation by independent reviewers (13.5 of 15)
 - September 2007: Selection of the project for funding
 - October - November 2007: Negotiations with the EC project officer
- Phase 3: Administrative procedures
 - December 2007: Verification of all partners based on legal documents
 - January 2008: Signature of the Consortium Agreement
 - February 2008: Preparation of the contract
 - March - April 2008: Signature of the contract by UM and EC
- Phase 4: Start of project activities
 - April 2008: The project kick-off meeting
 - May 2008: Pre-financing by the EC
 - June 2008: Start of the research activities

The research under this project starts in June 2008. The first scientific report should be sent to the EC in August 2008 for evaluation and dissemination.

Expected project results

It is expected that project *ASSPRO CEE 2007* will contribute to the development of scientific knowledge in two main directions: adequate evaluation of the health care reforms related to patient payments in Central and Eastern European countries, as well as for the development of methodology for the assessment of patient payment worldwide.

Specifically, the project has the potential to develop new evidence-based framework for the analysis of health policy issues, including development of:

- Methodology for the assessment of patient payment policies
- Demand model to forecast the effects of patient payments at micro level
- Policy simulation tool to forecast the effects of patient payments at macro level

Related to the analysis of health care reforms in Central and Eastern Europe, it is expected that the project can contribute to:

- Comparative analyses related to formal patient payments in Central and Eastern Europe
- Systematic analyses of informal patient payments in Central and Eastern Europe
- Establishment of data-base that contains micro-economic data from the Central and Eastern European health care sectors

Other outcomes related to the objectives of the EC that are expected from the project include:

- Establishment of a new network of researchers in Central and Eastern Europe
- Training of young researchers from Central and Eastern Europe
- Harmonization of the EU health care systems with regard to the free movement of patients
- Participation of women in research projects

The achievement of project objectives will depend to a great extent on the consortium but also on its overall management.

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