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Abstract in English of the doctoral dissertation on

Treatment planned outside Poland
- therapeutic limitations and trends

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Treatment planned outside Poland - therapeutic limitations and trends

Introduction

Medicine has developed significantly over the past 2-3 decades and the associated treatment options for many diseases appeared. There has been tremendous progress in the field of diagnostics and implementation of new, sometimes breakthrough therapeutic methods. At that time in Poland there was a serious problem with the availability of specialist doctors who, thanks to their knowledge and the capabilities of the medical infrastructure, could diagnose the patient and then implement the appropriate therapy. The lines to highly specialized hospitals where patients waited for the planned treatment were getting longer. In many cases, despite the efforts of doctors, some patients did not have the opportunity to heal in domestic conditions due to deficiencies in the medical infrastructure or the unavailability of a given therapy in Poland. Therefore, Poles increasingly looked for treatment options in another European country and even outside Europe. Due to the existing legal mechanisms the costs of treatment under certain conditions could be reimbursed by the National Health Fund.

Aim

The aim of the study is to indicate changes in the medical procedures used abroad for patients from Poland in the years 2008-2018 and to indicate the procedural limitations conditioning access to the above-mentioned services.

Materials and Methods

For the purposes of the dissertation access to the databases of the National Health Fund concerning the diagnosis or treatment of patients with Polish citizenship abroad, was used. Applications submitted to the President of the National Health Fund regarding the consent to reimburse the treatment of a patient in another country in the years 2008-2018, were analyzed. The above analysis has been supplemented with a discussion on national and European legal acts related to treatment abroad, with an indication to the changes in key legal acts related to the subject of the work. The analyzes of the available numerical and statistical databases in Poland (National Health Fund, Central Statistical Office) and in the European Union (Eurostat) were also carried out. The Pubmed / Medline / Scholar scientific literature databases have been searched towards original and review publications related to the treatment of European Union citizens outside the home country.

To extract data from databases of legal acts and literature and statistical data indicated above and available online, dozens of keywords or their combinations were used depending on the location of the database - in Poland or abroad - in Polish or English. In some cases when the databases were non-English, the keywords used to search these online resources were entered in the languages appropriate for the countries concerned. Qualitative and quantitative changes in the treatment of Polish citizens abroad were corrected according to the internal criteria of the National Health Fund and the ICD-10 codes.

The selection of the obtained literature data and legal acts was carried out independently by two persons: the PhD student and PhD supervisor. Differences in opinions as to the selection of literature data and legal acts, were clarified through discussions.

Results

The research topic was related to:

- in the field of legal acts of the Republic of Poland - 10 acts and 20 ordinances of the Minister of Health;
- in the field of European Union legal acts - 13 legal acts of the European Parliament and the Council of the European Union and 11 judgments of the European Court of Justice;
- in literature databases - 58 articles or book publications related to the research topic that were qualified for further discussion;
- some numerical and statistical data obtained from the National Health Fund, the national or EU statistical office, indicated in the further part of the dissertation.

Discussion

In the Discussion part, historical aspects of treating Poles abroad since 2004 and the first EU system solutions such as the European health insurance card (pol. EKUZ), the cross-border directive and EU regulations for the coordination of social security systems, were among others discussed. On the basis of National Health Fund data target countries for cross-border treatment in 2008-2018 and the costs of planned treatment abroad incurred by the National Health Fund compared to expenditure on health services from public funds, were determined. The activities of non-governmental organizations in Poland supporting the treatment of patients abroad and the media image of the issue of 'planned treatment abroad' were discussed. Due to the changes taking place in the national health care system, the dissertation shows examples of the implementation of new therapies in Poland. Referring to the nature of domestic applications for

treatment abroad, the mechanisms of treatment planned abroad in selected European Union countries were also discussed as well as some issues of the so-called 'medical tourism' in the European Union.

Conclusions

1. Treatment of patients abroad is based on three legal interpretations - the cross-border directive, EU social security coordination rules and national legal acts - which, in response to the changing needs of patients, have significantly evolved over the period studied.
2. Over the analyzed period of 2008-2018, the procedures for applying for treatment abroad have gradually changed, the provisions have become more transparent and a lot of procedural simplifications have been introduced.
3. Due to the increasing interest of patients in treatment outside Poland, the number of non-governmental organizations - associations, foundations - that support patients seeking treatment abroad has gradually increased.
4. In Poland, a policy is provided that favors the implementation of new diagnostic methods and therapies, which have not been available in the country so far.
5. The profile of patients seeking treatment abroad significantly changed in 2008-2018. In the earlier period of time, most of the applications to the president of the National Health Fund concerned diagnostics or therapy in several different fields of medicine. In recent years, most of them related mainly to procedures in the fields of clinical genetics, traumatology and orthopedics, oncological radiotherapy and pediatric surgery.
6. The media are important element in popularizing the idea of treating patients abroad also shaping the public opinion on the condition of Polish healthcare.
7. Facilitations of access to treatment abroad resulted in a significant increase in the financial burden of the National Health Fund with procedures performed outside the country. The above tendency was reversed thanks to the implementation of new diagnostic and therapeutic solutions in reference centers in Poland.
8. With regard to the main research hypothesis, it should be stated on the basis of the above conclusions that in the years 2008-2018 a significant improvement in patients' access to highly specialized medical procedures performed outside the country was observed.
9. Legal and institutional solutions adopted in the last several years in Poland, and especially the relatively efficient adaptation to the changing legal environment of the

European Union may serve as an example for other countries where cross-border medical care is still a marginal phenomenon.