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Country Report – Hungary – 2015

The financing of the Hungarian healthcare system has not been successfully improved in the past seven months. Still, according to a principle of leftovers, less than 4 % of the GDP is to be used in this sector. Hospital debts are unstoppable and their distributors are only willing to deliver for cash, therefore there are constant disturbances in healthcare service. Hospitals are forced to manage with the same financing over the past eight years. From 1st April 2015 the management is forced by the law to finance managing their hospitals in a positive balance, which is practically impossible from this amount, and slowing the growth of debt can only be achieved by the reduction of wages. Our trade union is continuously informed about the errors of overtime and on-call duty payments for workers. The mutual employer of hospital managers is the governmental institution called AEEK that started its operation by firing several managers thus threatening their other colleagues.

Still, roughly 1000 physicians, primarily young doctors, leave Hungary every year and a growing number of other healthcare professionals emigrate as well. The number of doctors actually working has been dramatically dropped. According to Eurostat data there are 30.4 doctors for every 10000 people, however the reality is even more crucial, since due to the low wages a number of doctors are forced to work at more workplaces, therefore being calculated with at more hospitals they improved the statistics. The real number is 25 to 10000.

Accordingly, access to healthcare is ponderous, waiting lists are long and healthcare professionals are overloaded with work. The standard of medical higher education is deteriorating, due to the lack of well-trained professors and because of the serious financial difficulties of medical universities. A healthcare pressure group formed in recent years to represent the whole spectrum of healthcare workers are visiting all major hospitals and university



hospitals of Hungary. Having visited two medical universities outside Budapest just verified the above theory.

The improvement of wages started before, was stopped unfortunately and the salaries have been unchanged for two years, which is actually one tenth of Western European wages. Within the national comparison of wages the healthcare is at the last place, here average salaries are way behind the national average. Physicians' wages with on-call duty hardly exceed or just even reach (1.3 times) the national average, nurses often receive the minimal wage and their on-call duty fees are not paid at all or just paid late. Accordingly, the EWTD is continuously violated, since both doctors and nurses have to work at more places to make a living, thus over-straining and exhausting themselves and showing clear signs of the burn-out syndrome.

In terms of General Practitioners who are primarily self-employed, aging is such a crucial problem that the governmental strategy planning until the year 2020 estimates that by the year 2020 three and a half million citizens will be left without a GP if this sector cannot be made more tempting for doctors. Consequently, this is the only area of medical practice that received surplus money this year, 400 EUR per month per GP. According to the plans further influx of support is to be drawn to reach a 3000 EUR income.

Besides these they are planning to further supplement the income of young doctors after being specialized, since now they receive a grant of 300 EUR/month until specialization. This creates a serious tension of wages between older, experienced professionals and young doctors which further increases emigration.

The fight against gratuity money has come to a halt, the government is about to pass a bill which would legalize gratuity money, instead of forbidding it and giving a fair salary in this sector.

The Trade Union is planning a major protest in the streets in May. Before this, in April a number of actions, reaching over ten thousand, are being taken on community sites to highlight attention to our problems. We are trying to involve various civil organisations representing groups of patients and are trying make them understand that it is not a battle of wages what we are doing, but to be attain a healthcare system that is available for everybody.