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HEALTH CARE STATISTICS — IMPORTANT TOOL FOR MANAGEMENT OF HEALTH CARE SYSTEM.

ABSTRACT. From the fall of the year 2012, a wide-ranging program of nationwide health insurance has been launched. As a result, it has a positive impact both on health and financial conditions of the population. Most of the Georgian families use the program mentioned above and as the healthcare prices have been quite high, the insurance makes their life easier.
It is important to analyze the statistical data reflecting the healthcare of population, which clearly demonstrates how the number of visits in medical institutions have increased.

KEYWORDS: View of system of health care of Georgia, health care statistics, Management of Health Care System.

Introduction

Considering the political, economic and social crisis of Georgia, creating the nationwide health insurance policy has been a significant challenge. These reasons led to the conversion of the state policy in the field of health care and increasing of the access of the population to it.

From the fall of the year 2012, a wide-ranging program of nationwide health insurance has been launched. As a result, it has a positive impact both on health and financial conditions of the population. Most of the Georgian families use the program mentioned above and as the healthcare prices have been quite high, the insurance makes their life easier.

It is important to analyze the statistical data reflecting the healthcare of population, which clearly demonstrates how the number of visits in medical institutions have increased.

There are some defects in terms of service delivery but they can be improved and the management gaps can be eradicated.

Purpose

At the beginning of 2013, only half of the population of Georgia was insured under the state insurance. Another half had to pay the full cost of the medical care from their own pockets, which led to extremely high expenses, poverty and accumulation of debts. In most cases, these people could not afford medical care and applied to the doctor only in extreme necessity. 70 % of total expenses in healthcare area came from the pockets of our population. However the majority of the population applied to the medical care institution only in emergency cases or when it was too late. Another and not less important challenge that we faced was that management and administration of medical services for 50 % of the population was provided by private insurance companies. And there is nothing wrong with it if not these two problems: first — long-term and large-scale arrears towards the medical institutions. State allocations did not reach the medical service providers creating permanent threats, dissatisfaction of the staff, strikes and suspension of medical processes. The second problem was that the beneficiaries of this insurance did not have a free choice of the medical institution, which is one of the major rights of the patient. Besides, it facilitates competition and increases the quality.

In the shortest period were implemented the reform that would protect the citizens of Georgia from two main factors: first — to avoid death or damage of health condition of the citizen due to the lack of financial resources during accident or health problems; the second — objective was to avoid poverty of the citizen or his/her generation only because they had to pay the medical care cost. Both of these objectives were fulfilled in the first half of 2013.

Health Careis a very important state affairs, one of the directions of the state policy. The country's public health care, it is the nation's future-active action. The priority of this activity even if it is proved that in the Millennium Development indicators particularly place in the health care indicators.

The strategy of the world is focused on the improvement of the population's living conditions and the poverty will eliminate. This is

our country's policy action plan, which is reflected in the improvement of health care accessibility for all groups of population and in all country.

However, it should be noted that the Shroud of private insurance, which is accessible, of course it is possible for everyone.

Results

Analyzing the statistical data reflects the healthcare of population, which clearly demonstrates how the number of visits in medical institutions has increased.

There are some defects in terms of service delivery but they can be improved and the management gaps can be eradicated.

The capacity to successfully manage and regulate the health sector is closely related to the availability and use of health statistical information. One of the ways of examining the use of health information is to look at the extent to which Health programmes are monitored and evaluated using indicators with established targets. The indicator used to assess the use of health information is the percentage of state health programmes with monitoring and evaluation indicators that are being analyzed.

Morbidity with acute and chronic diseases by main disease groups for the first time by the end of 2014, 1923.9 thousands registered patients, against 621.0 thousands in 2005.

Very interesting situation in registered incidence by main disease groups in 2014: diseases of the respiratory system (31.5), diseases of the digestive organs (18.2 %), diseases of the circulatory system (8.6 %), diseases of urogenital system (5.9 %), disease of the eye and adnexa (5.5 %), infectious and parasitic diseases (5.0 %), diseases of endocrine system, digestion disorders, disorders of metabolism and immunity (4.0 %) so on.

In 2014 high ratio prevalence to diseases of the respiratory system (21.3), diseases of the digestive organs (17.1 %), diseases of the circulatory system (15.5 %), diseases of endocrine system, digestion disorders, disorders of metabolism and immunity (6.7 %), diseases of the eye and adnexa (6.5 %), diseases of urogenital system (6.1 %), diseases of the nervous system (4.6 %) so on.

526.2 thousands registered patients or 27.3 % under 14 years old.

The same time it is essential to keep a ratio of the number of nurses to the number of physicians at a proper level. The World Health Organization recommends the ratio of 4:1 (4 nurses per 1 physician). In 2014, in Georgia, this ratio was about 1:1.3 (in hospital sector — 1:1).

In 2014, in Georgia the number of physicians increased by 7.1 % against 2004. In 2014, the numbers of encounters of the population with outpatient and in-patient health facilities have increased. This could be explained by the increased accessibility of health services after the universal healthcare care program implementation. In 2014, the number of encounters, covered by the state universal healthcare program, increased 4-folds: in 2013 — 205,674; in 2014 — 769,412. In 2014 again 2004 number of visits in medical institutions rendering out-patient services to population (including prophylactics) was increasing 2 times.

In 2014 again 2004 the number of emergency calls of an ambulance was increasing 6 times.

Throughout 2014 the 98.4 % of the ambulance care, provided to the population, was covered by the State programs.

According to the submitted statistical reports, the number of hospitals in 2014 is same as in 2004, but the number of hospital beds was decreased by 66 %. Utilization of an one hospital bed, from 8.6 in 2004 decreased by 5.2 days.

Since September 2012, some vertical state health programs were transformed into state insurance programs, the following programs were launched: programs for children under-6, pensioners, students, children with disabilities, and disable population. By the end of 2012, about 1.6 million people enjoyed these health insurance schemes.

Since February 28, 2013, the state universal healthcare program had been launched, which, since April 2014, covered the population living under the poverty line and teachers. Since September programs for under-5 children, pensioners, and students had been transformed into the universal healthcare programs.

In 2013, the state universal healthcare program covered 2.281.105 beneficiaries. By the end of 2014, the whole population of Georgia was secured with the basic health services. By 2015, the State universal healthcare program covers 3.5 million population. After the launch of the program the numbers of encounters with both outpatient and in-patient services have increased. Emergency outpatient contacts constituted the main share of the healthcare services provided to the population.

By November 1, 2014, the number of beneficiaries enrolled in the primary health care centers, has reached 2,882,238; in 2015 the number has increased and reached 3,127,834. In the period of January 1 — November 21, 587,049 ambulatory cases were registered. As an example, the number of elective cardiac surgeries, covered by the State universal healthcare program, has increased 4-fold: in 2013 —

579 operations; in 2014 — 2,270. In 2015, 2,277 elective cardiac surgeries have already been conducted.

In 2011-2014, In Georgia, the gross domestic product per capita increased by 14 %. Last years along with the increase of the share of the government expenditures on the same time there was a decrease of the share of private expenditures on health.

Conclusion

Based on the above analysis, we can conclude that the current health care reform in Georgia is designed to support the improvement of medical care and the real result-oriented. Over the last two years of medical institutions in the referral of such an increase, that's proof.

In addition, it is known to prevent the growth of appeals, further improves the health status of the population and not to this or that disease was revealed. However, there are some gaps in the service delivery point of view, but it is rectifiable and management of the mentioned deficiencies can be eradicated.

No less importance medical information system and institutions working to improve the quality of prophylactic treatment's modern methods. The two-year experience in the general insurance practice, of course, specific recommendations to resolve the afore mentioned problems in the field.

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