

Performance Based Supplementary Payment System (PBSPS) in Health Care Businesses and Its Effects on Costs: The Case of Ankara Dışkapı Yıldırım Beyazıt Training and Research Hospital

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Extensive Summary

Introduction

The performance based supplementary payment system, which is being implemented in all the health facilities of MoH, is the one that sets out the rates, procedures and principles of the supplementary payments to be made from the revolving fund revenues to the personnel in charge, in order to improve the health services and provide the promotion of quality and efficient service, also considering the conditions and criteria for service providing determined by the Ministry. Preliminary studies about the system were launched in 2003, with the realization of the “Transformation Program in Health”. The system began to be put into practice from the beginning of 2004 in all the facilities of the MoH, was developed over time and it survived up to now.

The performance based supplementary payment system (performance based revolving fund premium system), was influenced by the law with no. 5947 and dated 21.01.2010, also known as the “Full-Time Law” in the public. The Full-Time Law with no. 5947 and dated 21.01.2010 refers to the academic members in the universities and doctors in the public sector who will not be able to work in the private health organisations or in their own clinics and to the same whose supplementary payments shall be improved in the event that prefer to work on the public side. The effect of the Full-Time Law on the supplementary payment amounts of the health personnel and the total costs matters in this regard. The amounts of supplementary payment and total costs of MoH Dışkapı Yıldırım Beyazıt Training and Research Hospital, dated to 2009-2015 were examined in this study, as well. Additionally, the strengths and weaknesses of PBSPS were discussed.

Objective

The objective of the study is to examine the effect of the Law no. 5947 “Full-Time Working of the University and Health Personnel and on Making Amendments in Certain Laws”, namely the Full-Time Law, which was accepted in 21.01.2010 on the amounts of supplementary payment and total costs of MoH Dışkapı Yıldırım Beyazıt Training and Research Hospital dating to between 2009-2015. Following the enactment of the Full-Time Law, the change in the amounts of supplementary payment of the hospital and this change impact on the costs forms the main purpose of the study.

Methods

Data of research has been obtained to get necessary permissions from said hospital. The self-obtained financial data has been compared and the change has been interpreted in reference to the base year. In the mentioned comparison, the amounts of supplementary payment and total costs that belong to dates 2009-2015 were adjusted pursuant to the domestic PPI. The adjustment was made according to the monetary value of year 2015. Also, the amounts relating to the adjusted amounts of supplementary payment and total costs were analysed through the application of trend percentages. 2009 was taken as the base year for the trend analysis.

Conclusions

In the study, the financial data (including 2009-2015) of MoH Dışkapı Yıldırım Beyazıt Training and Research Hospital was used.

In the analysis made it was understood the amounts of supplementary payment which were not adjusted to the domestic PPI increased each year, also total costs increased to except year 2011. The ratio of the amounts of supplementary payment in the total cost increased except year 2011.

After the adjustment made for the domestic PPI, it was understood that the amounts of supplementary payment with respect to base year of 2009, decreased in 2010, 2011 and 2012, increased in 2013, 2014 and 2015. It is remarkable that the incrementation in the amounts of supplementary payment moves upward from 2013, after the enactment of the Full-Time Law in 21.01.2010. It is thought that the fixed supplementary payments to the non-doctor personnel under the Statutory Decree no.375 from July 2012 onwards, increases in the number of the personnel and promotions in the doctor, non-doctor personnel’s additional indicators and gradations are among the reasons of such a boom. Also, the total costs diminished each year according to 2009.

After adjustment made according to the domestic PPI, it was understood that the trend percentage of the amounts of supplementary payment per annum was greater than that of the total costs. It is thought that arise from to amongst the reasons that the increase in the amount of total cost is not the one which is anticipated are owed to the Service Production Cost which falls out of the supplementary payment cost item, within the total cost, other items such as the Overhead Expenses, other items pertinent to the Expenditures and Losses that belong to Other Activities and the patients’ short average length of stay in hospital.

This study; performance based supplementary payment is a study limited to the its effects on costs in an example hospital. In addition to the performance based supplementary system increase costs, is expected to increase efficiency. Therefore, it can be said that in the continuity of this study, there is a need for studies that measure

the effects of the supplementary payment system on the efficiency of the hospitals, and such studies will also contribute to the field.

Consequently, the performance based supplementary payment system need to be assessed as a whole, the strenghts and weaknesses of its functioning should be corrected and it should be supported with the applications that will ensure the satisfaction of the health personnel and society.