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## **Health Sector Reform in the Republic of Macedonia**

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**Aim.** To evaluate the results of current reforms in Macedonian health sector.

**Methods.** Description and situation analysis, covering the period 1991-1997, are focused on demographic and vital indicators, morbidity and mortality data, elements of health care system, legislation, health insurance, health care financing, and elements of health care reforms.

**Results.** The Republic of Macedonia experienced changes in the social and economic situation, similar to those in other countries in transition. The growing number of dependents (young and old persons) impact high health expenditures. High priority health problems were infant and premature adult mortality. As an inheritance of the former political system, the development of different parts of health care services was unbalanced and insurance and local network of health facilities were highly decentralized. The reforms addressed health financing and reimbursement, organization and management of health services, and pharmaceutical policies and supply. The legislation was revised, but new revision is needed.

**Conclusions.** Health care reforms were needed in Republic of Macedonia in order to overcome the problems associated with early phase of transition. The disadvantages of the current reforms are: lack of proper political will for the implementation of activities according to the planned schedule, initial over-utilization of hospital care, and no significant changes in financing of the public sector facilities. The advantages are that the health system did not disintegrate, universal access to health services was maintained, free choice of physician was promoted, and public/private mix of services was established and financed by the Health Insurance Fund.

**Key words:** financing, organized; health care reform; health expenditures; health manpower; health services; health status; insurance, health; insurance carriers; legislation; Macedonia (FYR)