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<th>AEMH 04/027</th>
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<td>Reply from Italy to the Questionnaire “Management and Budgetisation”</td>
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<td>Author :</td>
<td>Dr Reginato</td>
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MANAGEMENT AND BUDGETISATION

Economical and budgetary role of the doctor

The situation in your country: ITALY

1. Status of the hospital doctors

Are doctors employees?

YES

If YES, describe the terms of the contract (the fundamental parts).

Presently hospital doctors, who were already in hospitals before 1999, can make a choice between exclusive or non-exclusive work. (after 1999 exclusive contract is compulsory)
Exclusive doctors receive a higher salary, they cannot make private activity outside hospitals (temporarily they can be allowed to keep a clinic outside the hospital, but payment must be made through hospital invoices).
Non-exclusive doctors can have their private activity outside hospital, but they cannot be directors of hospital structures. Working time is 34+4 hours/week for both groups.

Do hospital doctors have also an ambulatory activity?

YES

If YES, privately, or as part of the accreditation contract?

privately | contract

Look at the previous answer for private practice.
In hospitals there is also institutional outpatient activity, where the patient pays only an access ticket

What about private patients?
Or do they benefit from an agreement according to the fee for service principle?

[ ] NO

If YES, what are the agreement conditions?

Or is there a combination of both depending on whether the patient is public or private or other criteria?

Are hospital doctors associated to the elaboration of national public hospital budgets?

[ ] NO

Or do only salaried doctors get involved and is the self-employed professional excluded?

[ ] NO

If YES, in which way can doctors in self-employed practice get the possibility to express their opinion?

Are public hospital budgets submitted for approval to your professional association?

If YES, are your remarks taken into consideration?

If NO? Why?

2. The role of hospital doctors in the hospital economic policy.

Are doctors associated to the elaboration of regional hospital budgets?

[ ] NO

If YES, does this mean that they are not at a the national level?
Are the colleagues committed to this task salaried heads of departments?


Do they carry an outpatient medical practice beside it?


Or are they civil servants of the public health services of the state?

Can they be self-employed professionals with an accreditation contract?


Are these regional hospital budgets submitted for approval to your professional association?

YES


If YES, are your remarks taken into consideration?

SOMETIMES


If NO? Why?

Are other health professionals associated to the establishment of the economic policy of the hospital?

YES


If YES, who and to which extent?

Biologists, in a limited extent

3. Training

Is training financed exclusively by the ministry of social affairs and health?

NO

or is the ministry for national education also involved?

NO
Are the interlocutors from the government medical doctors?

If NO, what are their qualifications?

Is the budget for education separate from the operational budget of the hospital?

If NO, is education taken into consideration in the establishment of the budget and how?

Is the hospital chief medical staff associated?

How?

There are hospital commissions, that include doctors’ representatives

In one case or the other are professional associations consulted in the establishment of the education budget?

4. Role of hospital doctors - heads of departments

Are doctors heads of departments participating in the establishment of the budget of the hospital where they practice?

Through the dean of the college?

Individually for each service?

Do self-employed professionals with an accreditation contract participate?
Is the budget of each department imposed by the administrative direction of the hospital?

<table>
<thead>
<tr>
<th>Staff recruitment</th>
<th>Purchase of technical infrastructure</th>
</tr>
</thead>
<tbody>
<tr>
<td>NO</td>
<td>YES</td>
</tr>
</tbody>
</table>

Are they responsible for the management of their department, e.g.

Do they share the responsibility for the management of their department with the administration?

How?
5. Financing conditions

Is the hospital financing based on fixed amount or on DRG?

<table>
<thead>
<tr>
<th>Fixed amount</th>
<th>DRG</th>
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<tbody>
<tr>
<td>NO</td>
<td>YES</td>
</tr>
</tbody>
</table>

Do doctors participate in the establishment of the classification of the patients?

| NO |

Do they participate in the establishment of cost weights and the valuation of fixed amounts in monetary units?

| NO |

Are the doctors involved heads of departments?

| NO |

Do they keep an individual practice in beside this task?

|     |

Or are they civil servants of the public health department of the state?

Is the valuation of the fixed amounts nation wide or specified for each hospital?

<table>
<thead>
<tr>
<th>National</th>
<th>individual</th>
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<tbody>
<tr>
<td>YES</td>
<td></td>
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</table>

If the valuation is specified for each hospital, do the doctors-heads of department participate in the establishment of the valuation into monetary units?

Through the dean of the college?

|     |     |     |     |
Separately for each department?

[ ] [ ] [ ]

Do self-employed professionals with an accreditation contract participate in the calculation?

[ ] [ ] [ ]

How is dealt with an eventual deficit?

<table>
<thead>
<tr>
<th>Carried forward to the next year</th>
<th>Adaptation of the fixed amount/DRG of the next year</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
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</table>

In case of a deficit do doctors get penalized?

[ ] [ ] NO [ ]

If YES, how?

Has the method of fixed amount or DRG modified medical practice?

YES [ ] [ ] [ ]

Have hospital stays become shorter?

YES [ ] [ ] [ ]

Did it lead to an indirect selection of patients?

[ ] [ ] SOME TIMES [ ] [ ]

Are complicated pathologies transferred to another specialised hospitals?

YES [ ] [ ] [ ]

Does the financing of these specialised hospitals obey to the same fixed amounts rules?

YES [ ] [ ] [ ]

If NO, how are they financed?
Are other health professionals associated to the financing modalities of your hospital unit or department?

If YES, who and in which respect?