

Formal and informal patient payments for public health care services in Bulgaria

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STELLINGEN

Behorende bij het proefschrift

Formal and informal patient payments for public health care services in Bulgaria

door

Elka Atanasova

1. Although some efficiency improvements in health care have been made during the 10 years of health insurance reform in Bulgaria, the overall social benefits of these reforms are less than expected. (Chapter 2; Thesis.)
2. Informal payments for health care services continue to exist in Bulgaria even 10 years after the implementation of official co-payments for publicly funded health care services. (Chapter 2, 4, 5; Thesis).
3. Most health care consumers in Bulgaria are against informal payments in cash. However, gifts in kind are still largely accepted by the population. (Chapter 2, 3, 4; Thesis).
4. The burden of out-of-pocket patient payments is considerable in Bulgaria and moreover, these payments are unevenly distributed among socio-demographic groups. (Chapter 3; Thesis).
5. In order to sustain equitable additional financing of the health care system, policy-makers in Bulgaria need to retain and possibly reconsider the exemption mechanism that accompanies formal co-payments and address the informal payments. (Chapter 5; Thesis).
6. Preferences among Bulgarians to pay for services with good quality and quick access have not changed much during the past 10 years. (Chapter 6; Thesis).
7. Education is an admirable thing, but it is well to remember from time to time that nothing that is worth knowing can be taught. (Oscar Wilde).
8. Mathematics is a language but a shorthand one, rather than an engine of enquiry (Alfred Marshall).
9. Action is the key to success but the opportunity costs differ by achievement.
10. Writing a PhD thesis resembles an Olympic cycle. They both take four years and reward winners.