

The Health Care Crisis

We could check what we were realizing from our offices or the places where we work that there is something wrong about the medical service in Colombia. We could support this statement, due to the official inspection of SaludCoop, the Colombian biggest health care provider one month ago.

We have observed some irregularities: The users of the system had a lot of difficulties in order to find an appropriate and timely attention, the continuous glosses that in some cases delayed inappropriately the payments to the health care institutions; the difficulties to have an appropriate and equitable hiring process with the health care providers; the vertical integration of the system to the detriment of a healthy competence with the health care institutions; the hiring and the flattering behavior with people and institutions that had several bonds with the health care providers, the maintenances of the rates that had been paid for years (for example the rate of the Social Security Institute 2001 minus the 5% the 10% or more); the traffic of cars from the health care providers through the roads of Colombia during the holidays; and for some health care providers the money diversion to other kind of investments like front companies.

We also have seen some other difficulties due to the beginning of the Law 100 and the relationship of the government with the health care providers, and the Occupational Accident Insurers. Some restrictions were detected in the mental health field: Restrictions inside of the system for the treatment of mental disorder patients; limited psychiatric medicine which is included in the national health plan, and the poor or null medicines list updated included; restriction in the psychotherapy for the prevalent mental disorders management, short time for the attention in the outpatient department, in some cases it reaches the antitherapeutic (15 to 20 minutes); demand for the management of diagnostic outlines for treatment with little scientific evidence and according to what it has been denounced, the recovery to the Guarantee and Solidarity Fund (Fosyga), the favoring for some health care providers and the extra charges for the medicines.

Finally, It has been denounced the way that this situation goes to the detriment of the Colombians health condition with the resurgence of

some illness that were controlled, the lost of the healthy years since the system appeared, the little information in order to make appropriate and timely decisions and the slant of information given to the social protection Ministry among others.

We think that according to the last statements we can take some measurements:

1. To act correctly against the corruption and go until the last consequences.
2. To redefine the role of the health care providers, prohibiting all the vertical integration, establishing the cost and the mediator and restricting its action field for not having incidence in different business but its plan.
3. To try to have a timely payment from the health care providers to the health care institutions and to have an enough income in order to grow and to give a satisfactory service for the system users.
4. To think about an appropriate system that brings a better service for the user according to the economic restrictions.
5. If it is possible to eliminate the intermediary activities and the bureaucracy of the system in order to have these savings for the users.
6. To develop the promotion and prevention and primary attention, demanding the determined standards.
7. To improve the attention plans for the patient with mental disorder in psychiatric and mental health.
8. To favor the information system establishment that let to have first a continuous monitoring and second to take appropriate and timely decisions.
9. To do a continuous monitoring to the system through indicators over the base of the correct information.

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