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Key Note

Integration: the story from health economics and health policy perspective with examples from Turkey and Europe

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Prof. Dr. Mehtap Tatar has graduated from Hacettepe University School of Health Administration in 1984 with a B.Sc. degree and completed his MSc from the same university in 1987. She graduated from the M.Sc. in "Health Planning and Finance" program jointly offered by the London School of Economics and London School of Hygiene and Tropical Medicine in 1988. Prof. Tatar has received her Ph.D. from Nottingham University School of Social Studies in 1993 and continued to work as a research assistant at Hacettepe University School of Health Administration until 1994 where she started working as an assistant professor until 1996. She became an associate professor in 1996 and a full time professor in 2002. She worked as the head of the Department of Healthcare Management at Hacettepe University Faculty of Economics and Administrative Sciences between 2007-2011. She has been working as the Secretary General of Hacettepe University Since December 2011. Prof. Tatar is also an adjunct professor at Washington State University Centre for Health Services Research since 2004. Her main areas of interest are health policy, health economics and pharmaco economics.

Abstract

Balancing the primary and secondary care in provision of health care services is a challenge for all health care systems. In recent years, both the pressure from changing demographic and disease patterns and from increasing demand for better health outcomes have urged governments to reconsider integrating these two health care levels. Integration also has an impact from health economics and health policy perspectives. Pressures to control ever increasing health care expenditures and to satisfy the health care needs of populations and achieving this with minimum inputs and maximum outcomes have long been on the agendas of health policy makers. Each country applied its own solutions based on the requirements of their system and expectations from different stakeholders.

The Turkish health care system has also been influenced by the current health economics and health policy trends. The system has undergone a radical reform process since 2003 and after a decade long experiences with the reforms the outcomes have started to be evaluated. The government introduced new measures in financing and provision of health care services, which changed the outlook of the primary and secondary level of care to a great extent. The differences in demographic characteristics of the population and burden of disease have resulted in either introducing distinct policies from other European countries or following the footsteps of these countries.

Keywords:

integration, primary care, secondary care, turkish health care reforms

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