



The specificities of the various European countries in the following areas:

- ***Typology of the Health System***
- ***Level of resources and investment in Health System***
- ***Hospital management model(s)***
- ***Healthcare managers professionalization***

LITHUANIA

I. Typology of the Health System

Country identification: Lithuania

Number of inhabitants: 2.794 million

Health System Model characterization: Bismarck, Beveridge, Other?

Lithuania has a healthcare system funded through a national health insurance scheme. Healthcare in Lithuania is divided into three levels. Primary healthcare services are provided through medical stations, general practitioner's institution, mental health centers, dentists. General practitioners refer patients to secondary level consultations, and, if there is a need, secondary level specialists (cardiologists, neurologists, etc.) refer to tertiary level specialized university clinics. In addition, a network of inpatient personal healthcare institutions, i.e. district, regional and university hospitals, is developed throughout the country. There are also nursing care clinics. Public health centers are established to provide services fostering healthy lifestyle. Their structure is regional and they actively cooperate with public health offices in each municipality, and the latter - with personal healthcare institutions.



Health System Funding:

The National Health Insurance Fund and five territorial health insurance funds under the Ministry of Health conclude agreements with public and private personal healthcare institutions. The State Tax Inspectorate administers the collection of taxes from insured persons and transfers funds to the Compulsory Health Insurance Fund. Primary personal healthcare institutions receive funding per capita and for services provided (state prevention programmes, incentive services, etc.); the secondary level specialized outpatient institutions receive funding for every fourth service provided; and inpatient facilities - for a bed day.

II. Level of resources and investment in Health System

GDP per capita: 4015 Eur

Average Life Expectancy: 75,9

Doctors per 1.000 inhabitants: 4,5

Nurses per 1.000 inhabitants: 7,43



Level of allocation of family doctor:

The distribution of general practitioners is uneven throughout the country. There is a huge shortage of medical specialists and nurses in the periphery.

III. Hospital Management Model(s)

Describe the hospital management model in your country:

Public personal healthcare institutions are managed by the Director together with administration (Deputy Directors for Medicine, General Affairs and Finance) and Heads of Departments. The Director is accountable to the founder of the institution - either the Ministry of Health or the municipality. The founders of university hospitals are the university and the Ministry of Health.

Describe the model of hiring / appointment of Healthcare managers / Hospital directors / CEOs:

The Head of a personal healthcare institution is elected through a public competition for 5 years, and the relevant requirements that are set for him/her depend on the level of the institution.



Composition and model of appointment of the Board of Directors:

There is no Board of Directors. Founders' Council is established comprising 5 members who represent community, public organizations, trade unions and persons appointed by the founder. Founders' Council is accountable to the founder.

IV. Healthcare managers professionalization

Do you have a formal recognition of the hospital/healthcare manager profession in your country? No, we do not have.

Do you have a certification competency model in your country?



There is a State Healthcare Accreditation Agency under the Ministry of Health.

Do you have a mandatory training model in your country? No, we do not have.