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THE POPULATION AGING - A CHALLENGE FOR THE SUSTAINABILITY OF THE ROMANIAN SOCIAL HEALTH INSURANCE SYSTEM

Abstract:

Global population ageing in Romania is a challenge for ensuring the sustainability, and for maintaining the bioethical principle of distributive justice for the social health insurance system. This study aims to examine and to highlight the theoretical influence and the practical impact of the current demographic evolution on the Romanian health system financial sustainability.

Along with the presentation of a demographic forecasting for the demographic quota of working age and after the age of 65 years by 2025, using the age specific fertility and mortality model for Romania 2014, the potential consequences regarding the sustainability and ethics of this demographic development are compared and analyzed, taking into account the source of financing for the Romanian health system. Also, an analysis of the health status of the population over 65 years is performed, using health status and health interventions indicators.

In 2013, Romanian population coverage with health insurance was 83.8%. Only 47% of the health insured persons have financially contributed to the system, 76% of the contributors being employees. Thus, given that 66% of the Unique National Health Insurance Fund's income are based on the contribution of employers and employees, the decreasing by more than 1 million people from working age quota and the rising with approximately 50 000 persons of the population over 65 years, can cause major disruptions in the functionality of the social health insurance system. Meantime, the health status of the over 65 population is characterized by indicators that are worsening.

There are two possibilities of future evolution, cost restraints situation, in which the sustainability of the health insurance system is preserved, or negative situation of inability to cover the costs associated with the disease burden of an older population. The health system sustainability can be ensured, only if the onset for the first disability (in the length of life) may be delayed as much as possible towards the time of death, for the entire population. That means to upgrade and to enhance public health as a major policy for sustainability of the healthcare system.

Keywords:

population aging, health system sustainability, distributive justice

JEL Classification: I14, I18

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