

THE RELATIONSHIP BETWEEN CIVIL AND MILITARY HEALTH INSURANCE – A CONDITION FOR MORE EFFICIENT HEALTHCARE

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This paper analyzes the relationship between the Social Insurance Fund for Military Personnel and the Republic Health Insurance Fund through the aspect of more efficient use of health insurance funds. Analyzing the mentioned relationship, the healthcare system in the Republic of Serbia and the health insurance system are essentially considered. Having in mind the specifics of social protection of military personnel, directions for action and improvement of the relationship with civil healthcare system are considered. Only a proactive relationship between military and civil healthcare system and health insurance system is a condition for better healthcare for the insured of both funds, and also for more efficient use of health insurance funds.

Key words: healthcare, health insurance, fund, the insured

The social insurance in the Republic of Serbia

The population healthcare is one of the most important social priorities, so, as such, special attention has to be paid to it. The right of an individual to healthcare, as well as other forms of care, is exercised within social insurance. Social insurance covers almost the entire population. The social insurance system is primarily financed by contributions of employees and pension beneficiaries. The additional sources of funding are national budget funds, donations and other types of revenues. The very functioning of the entire system, and above all healthcare, is

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becoming more complex and expensive, and represents a very important segment of public finances. Precisely due to such a fact, we have to strive for the most rational, and above all more efficient use of the funds at our disposal.

The national healthcare system in Serbia is financed by a combination of revenues from the Republic Health Insurance Fund (RHIF), the Pension and Disability Insurance Fund (PDIF), the Social Insurance Fund for Military Personnel (SIFMP), transfers from the republic budget, expenditures from the citizens' „pockets“, as well as voluntary health insurance. The dominant source of funding is the RHIF.¹

As stated, the healthcare system financing is done from several directions and sources. The relationship between the two funds, i.e. two groups of the insured from the aspect of finding directions for more efficient use of available financial resources, will be of interest for this analysis.

The Republic Health Insurance Fund and the Social Insurance Fund for Military Personnel, as well as the insured, who exercise their rights „through“ one of these two funds, are an essential part of the social insurance in the Republic of Serbia.

The relationship between civil and military healthcare system is a very important segment of the overall social insurance. Bearing in mind that they operate separately and that there are two groups of the insured, it is important for public finances to use funds as efficiently as possible in order to avoid duplication of certain procedures and processes, and to use the capacities of both civil and military institutions in the best way. Table 1 shows the number of healthcare institutions in Serbia in 2013. Although only 3 out of a total of 340 institutions are military institutions, it can be concluded that military personnel can meet most of their healthcare needs in civil healthcare institutions. Specialized services provided in military institutions of the highest level of healthcare are of great importance for the overall healthcare.

Table 1 – *The number of public civil and military healthcare institutions in Serbia in 2013*

Type of institution	Number of institutions
Health centres	141
Pharmacies	40
Institutes	17
General hospitals	24
Special hospitals for short-term specialization	8
Special hospitals for lung diseases	3

¹ Studija „Mogući pravci povećanja efikasnosti zdravstvenog sistema u Republici Srbiji“, Ernest & Young doo Beograd, 2016, p. 35.

Type of institution	Number of institutions
Special hospitals for psychiatric disorders	5
Special hospitals for rehabilitation and extended treatment	24
Medical centres	19
Clinical centres	4
Institutes	11
Clinics	5
Institutes for public health	24
Blood transfusion institutes	3
Forensic Medicine Institute	1
Anti-Rabies Institute	1
Institute for Psychophysiological Disorders and Speech Pathology	1
Serbian Institute of Occupational Health	1
Military Medical Academy	1
Military Medical Centre Novi Sad and Military Hospital Niš	2
Total	340

Source: Study „Mogući pravci povećanja efikasnosti zdravstvenog sistema u Republici Srbiji“, Ernest & Young doo Belgrade, 2016, p. 74

The presented data indicate that these two systems - civil and military can certainly achieve greater efficiency by using common capacities and resources. We should not ignore the fact that both systems are financed from public revenues and that this imposes the need to strive for maximum effects.

Analyzing the functioning of the health insurance and healthcare system in the Republic of Serbia, and also in much more developed countries (France), it can be concluded that there is no best solution for all the challenges that the healthcare system is currently facing. Most countries have increasing problems with the growth of total healthcare costs, which put pressure on national budgets. The expenditures for healthcare in some countries are already above 10% of GDP, which is a great allocation and problem for society as a whole. The increase in the expenditures caused by the ageing population, the growing number of healthcare users and the increase in the price of medical procedures is a constant trend that will have to be continuously overcome by harmonizing the health insurance system.²

² Damir Marković, „Proaktivan odnos obaveznog i dobrovoljnog zdravstvenog osiguranja u Republici Srbiji – faktor veće efikasnosti celokupnog sistema zdravstvenog osiguranja“, *Vojno delo*, Vol. 70, no. 2, 2018, p. 387.

The health insurance of military personnel

Healthcare, and thus the health insurance system of military personnel, has developed in accordance with the specifics of the very military system. Recognizing the full autonomy of the military system, the development of insurance in this field has been conducted in parallel with the changes in the prevailing civil health insurance system. Until 1954, health insurance for all the insured, including the military, was regulated by the Law on Social Insurance of Workers, Employees and their Families.

The Law on Health Insurance of Workers and Employees from 1954 stipulates that military personnel: active non-commissioned officers, civil servants, officers, generals and admirals of the Armed Forces of the Federal People's Republic of Yugoslavia (the military insured) and members of the People's Militia have the right to health insurance according to the provisions of the mentioned Law provided that during temporary incapacity for work due to illness or injury, and the insured - women during absence due to pregnancy and childbirth, do not receive compensation instead of salary according to this Law, but retain the right to regular allowances in compliance with relevant regulations.³ The regulations at that time also defined the possibility that the military insured and members of their families can be treated in public „civil“ institutions and pick up prescribed medicines in public pharmacies if there are no available military facilities in some place. Even then, the relationship between these two systems was clear, both in terms of exercising certain mutual rights of the insured, and in terms of financing the services they provided.

The first law that separately defined the field of the health insurance of the military insured was the Law on Health Insurance of the Military Insured from 1972. Since this Law defines the rights and manner of their exercise, the fact that the insurance system of the military insured was mostly developed and functioned in accordance with the general health insurance system of all residents, respecting all specifics of the military sector, cannot be ignored. The next step in financing was the establishment of the Health Insurance Fund for the Military Insured, which collected contributions from the income of military personnel. Furthermore, the new regulations define, for the first time, the right of the military insured to freely choose between military or civil healthcare institution.

The health insurance system of the military insured is in development and is relatively recent, complete and comprehensive, shaped and properly oriented. Thus established, it is mainly developed and improved according to the movement of the health insurance system of workers, on the main principles that this insurance is based, always taking into account the existing specifics of the military factor, a

³ Bojan Špicar, *Monografija socijalnog osiguranja SFRJ (knjiga prva)*, Savez zajednica zdravstvenog osiguranja i zdravstva Jugoslavije, Beograd, p. 52.

category of the insured, their location and the health culture of beneficiaries and providers of health services.⁴

The Law on the Yugoslav Army from the 1990s, whose provisions related to the health insurance of the military insured, are still in use today. Article 229 defines that the military insured exercise healthcare in military healthcare institutions, and may also exercise it in other healthcare institutions:

- 1) if there is no military healthcare institution in the place of service or residence;
- 2) if military healthcare institution cannot provide appropriate forms of healthcare;
- 3) in emergencies.⁵

The insurance system of the military insured should be adapted as much as possible to changes that accompany the development of the civil healthcare and health insurance system. The fact is that the legal framework and regulations that are the basis for further development of this system are not fully adapted to current development in this field. It is necessary to modernize and change the environment in which the insurance system of the military insured will be developed in a more efficient way, and thus available funds will be used more efficiently.

Public spending for the defence is a part of total public spending, which is in the function of achieving goals for the execution of the defence tasks. Its specifics are reflected in the following:

- most material resources have a special purpose because they serve to meet the needs of the country's defence;
- a great part of material resources is provided through a special organization from production to the place of consumption;
- there is a possibility that a part of the military research will be used for civil purposes;
- the execution of military programs implies a cooperative relationship with civil companies, which gives impetus to the production process.⁶

The Social Insurance Fund for Military Personnel (SIFMP)

The health insurance of the military insured is defined by the Law on the Serbian Armed Forces, i.e. Articles 211 to 230 of the Law on the Yugoslav Army, until the adoption of regulations and acts that will systematically regulate this field. As already mentioned, the field of healthcare and health insurance should receive a new regulatory framework that will enable better use of available capacities, as well as more efficient exercise of the rights of the insured.

⁴ Ibid, p. 102.

⁵ „Zakon o Vojsci Jugoslavije”, „Službeni list SRJ”, br. 43/94, 28/96, 44/99 i 74/99, p. 151.

⁶ Radan Kostić, Milena Knežević, Milan Lepojević, „Struktura rashoda za finansiranje odbrane Republike Srbije”, *Oditor*, Vol. 4, broj 1, 2018, p. 172.

The exercise of the social rights of the military insured, and for the most part the right to healthcare, has been entrusted to the Social Insurance Fund for Military Personnel. In addition to the right to healthcare, as the predominant right that is exercised through the activities of the Fund, the military insured also exercise the right to:

- the reimbursement of costs based on the provision of apartments,
- the reimbursement of a part of the housing cost,
- the use of funds from the housing loan program.

The Fund is a legal entity with the status of an organization for compulsory social insurance in which the rights from the compulsory health insurance of the military insured are exercised and funds are provided for health insurance and material security of beneficiaries in accordance with the law defining the health insurance of the military insured. The Fund is an organizational unit within the Budget and Finance Sector of the Ministry of Defence of the Republic of Serbia.⁷

SIFMP carries out its activity by performing the following tasks:

- provides purposeful and economical use of health insurance funds;
- organizes and provides efficient and rational performance of health insurance activities and legal exercise of rights;
- conducts statistical and other research in the field of the health insurance of the military insured;
- keeps and organizes register of records and controls registration and deregistration of health insurance, validates and cancels health card and health insurance card;
- performs activities related to compensation for damage caused to the Fund on the basis of the abuses related to the exercise of the rights from health insurance and material security;
- concludes contracts with civil healthcare institutions that provide healthcare services in accordance with the law and provides funds for the execution of healthcare;
- keeps records and monitors the collection of contributions and other income of the Fund;
- performs activities related to the management and disposal of movable and immovable property of the Fund;
- provides professional assistance to the insured and beneficiaries of the rights from health insurance and material security;
- provides information to the military insured regarding the exercise of the rights from health insurance and material security;
- performs professional, business and other cooperation and concludes contracts and other legal transactions with national legal and natural persons;
- performs other tasks defined by law, statute and other acts of the Fund.⁸

⁷ „Uredba o nadležnosti, delokrugu, organizaciji i načinu poslovanja Fonda za socijalno osiguranje vojnih osiguranika“, „Službeni glasnik RS“ broj 119 od 30. decembra 2013, p. 14.

⁸ Fond za socijalno osiguranje vojnih osiguranika, „Delatnost fonda“, <http://www.fsovo.mod.gov.rs/Del.html#.Xsy0ezERWVo>, 15/04/2018

The Report on the execution of the financial plan of the Fund for 2016 states that, according to the regulations in the field of the healthcare and health insurance of the military insured, the following are financed from the health insurance contribution funds:

- procurement of medicines, medical supplies and equipment for the needs of military healthcare institutions;
- payment of medical treatment expenses in civil healthcare institutions in the country and abroad, as well as travel expenses related to medical treatment;
- reimbursement of funds for medicines, orthopaedic and other aids purchased in civil sector;
- funeral expenses and funeral allowances for family members of the military insured (insurance holders);
- remuneration to members of the Fund's Management and Supervisory Board, remuneration to members of the Fund's commissions, remuneration to persons on a professional service contract, etc.

Achieving the goals and tasks of the Fund is done through the execution of financial plans adopted for each year. The financial plan defines the revenues and expenditures of the Fund, as well as their execution. The greatest income of the Fund is contributions paid from the salaries of the employed military personnel, as well as from the pensions earned by military personnel. The contributions from these two sources make up more than 80% of the total income collected on the basis of the right to the social insurance of the military insured.

Article 23 of the Decree on the competence, scope, organization and manner of work of the Social Insurance Fund of Employees defines that the contribution for the health insurance of professional military personnel is calculated and paid in accordance with a special law. The Republic Fund for Pension and Disability Insurance calculates and pays to the Fund the contributions for health insurance of pension beneficiaries on the basis of professional military service.

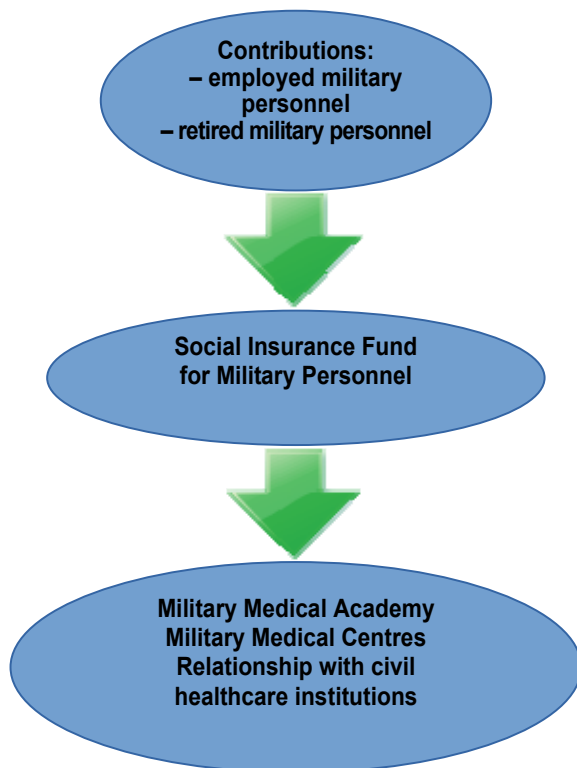
The population healthcare, both civil and military, is becoming more expensive, and this trend will continue in the future. This is primarily influenced by new and more expensive technologies and procedures in healthcare, as well as the extension of the population life expectancy. Therefore, it is necessary to make even greater efforts in order to collect and use financial resources more efficiently, which, above all, refers to contributions.

Various factors affect the amount of income from contributions to SIFMP:

- the number of employed military personnel,
- gross earnings,
- efficiency of contribution collection,
- contribution rate.⁹

⁹ Studija „Mogući pravci povećanja efikasnosti zdravstvenog sistema u Republici Srbiji“, Ernest & Young doo Beograd, 2016, p. 63.

Graph 1 shows the flow of financial resources, which begins mostly with contributions from salaries and pensions of military personnel, continues with the payment of contributions to the Fund and the final execution of these funds in military institutions.



Graph 1 – *Flow of financial resources*

The health insurance of civil insured persons

The healthcare and health insurance system is one of the most important systems in every state. The efficiency and cost-effectiveness of the functioning of this system is a challenge for each national economy. The goal that has to be achieved is to ensure the best possible healthcare for the nation with available funds provided by health insurance.

Article 3 of the Law on Health Insurance defines that compulsory health insurance provides employees and other citizens covered by it with the right to healthcare and the right to financial compensation for cases defined by this law. Compulsory health insurance includes:

- insurance in the event of illness and injury out of work,
- insurance in the event of an injury at work or an occupational disease.¹⁰

Most of the funds used to finance healthcare system come from contributions to the salaries of employees, as well as to the pensions of the Pension and Disability Insurance Fund beneficiaries.

The revenues that finance health insurance come from:

- contributions to salaries and pensions,
- voluntary insurance premium implemented by the Republic Health Insurance Fund,
- property at the disposal of the Republic Health Insurance Fund,
- credit sources of financing,
- other sources of financing.

According to the Report on Financial Operations of the Republic Health Insurance Fund for 2016, the structure of income from health insurance funds by sources of financing is distributed as follows:

- health insurance contributions – 63.89%,
- transfers from compulsory health insurance organizations – 23.68%,
- transfers from the budget – 9.47%,
- other revenues and income – 2.96%.¹¹

As stated in the same report, revenues and income for health insurance per capita for 2016 amount to 29.898 dinars and are higher by 862 dinars compared to 2015. Although revenues increase has been recorded, they are still at a very low level, and the requirement for the most efficient use of available funds is one of the highest priorities, if the functioning of the entire system is to be maintained.

Republic Health Insurance Fund as the health insurance holder in the Republic of Serbia

The compulsory health insurance system in the Republic of Serbia is executed through a single state organization - the Republic Health Insurance Fund.

The Republic Health Insurance Fund performs the tasks defined in Article 212 of the Law on Health Insurance:

- adopts general acts, on the basis of the authorization from this Law, which regulate in more detail the execution of compulsory health insurance;
- plans and provides financial resources for the execution of compulsory health insurance;

¹⁰ „Zakon o zdravstvenom osiguranju”, Službeni glasnik RS, br. 107/2005, 109/2005 – ispravka, 30/2010 – dr. zakon, 57/2011, 110/2012 – US, 119/2012,99/2014, 123/2014, 126/2014 – US, 106/2015., 10/2016. – dr. zakon, p. 2.

¹¹ „Izveštaj o finansijskom poslovanju Republičkog fonda za zdravstveno osiguranje za 2016. godinu”, Republički fond za zdravstveno osiguranje, Beograd, 2017, p. 7.

- within available financial resources, plans and provides conditions for equal execution of compulsory health insurance in the territory of the Republic and provides solidarity funds for the equalization of conditions for providing the rights from compulsory health insurance in the area of branches;
- provides financial and other conditions for exercising the right to use healthcare abroad, i.e. for sending the insured persons to treatment abroad;
- drafts work plan for providing the rights from compulsory health insurance in accordance with work plans of branches;
- adopts financial plan in accordance with the Law;
- concludes contracts with healthcare providers in accordance with this Law, provides funds for the execution of healthcare on the basis of these contracts;
- transfers funds to branches for the execution of compulsory health insurance;
- ensures legal, purposeful and economical use of funds and takes care of increasing funds on economic grounds;
- provides direct, efficient, rational and legal exercise of the rights from health insurance and organizes the performance of activities for its execution;
- organizes the performance of activities for the execution of health insurance, which is directly implemented in the Republic Fund;
- controls the implementation of concluded contracts between branches and healthcare providers, i.e. controls the exercise of rights from compulsory health insurance;
- ensures the implementation of international agreements on compulsory health insurance;
- keeps records and monitors the collection of contributions, exchanges with competent authorities the data on taxpayers for health insurance, as well as other data related to contributions;
- performs centralized public procurement activities in accordance with the law.¹²

In the execution of the goals defined by the law and its acts, the Fund should fulfill the mission of health insurance development as a central institution at the state level. Moreover, it should be an active entity that will initiate a proactive relationship with other entities that will be involved in achieving the goals of health insurance.

The proactive role of the Fund should be implemented through the efforts to achieve the most rational relationship with the system for the healthcare and insurance of the military insured, which will contribute to more efficient use of funds and better healthcare of the entire population.

¹² Zakon o zdravstvenom osiguranju, „Službeni glasnik RS”, br. 107/2005, 109/2005 – ispravka, 30/2010 – dr. zakon, 57/2011, 110/2012 – US, 119/2012,99/2014, 123/2014, 126/2014 – US, 106/2015., 10/2016. – dr. zakon, p. 85.

The financial aspect of the relationship between the Republic Health Insurance Fund and the Social Insurance Fund for Military Personnel

Health insurance and healthcare of civil and military insured persons are two completely separate and independent systems that have many common points, so their mutual cooperation and joint use of resources should lead to positive effects as a whole.

In order to strengthen and formalize the relationship between these two systems, the two funds, in order to make better use of their joint capacities, signed an agreement on mutual cooperation. The Agreement on business and technical cooperation concluded on June 10, 2009 by the Republic Institute (later the Fund) for Health Insurance and the Social Insurance Fund for Military Personnel is a step forward in the development and better use of capacities of both civil and military system. The objective of the agreement was to standardize and improve the quality of healthcare services from compulsory health insurance to the insured of both funds, as well as more rational use of the capacities of healthcare institutions and ensuring the availability of services. The mentioned act defines the ways in which the insured military and civil personnel can use resources in the most efficient way, as well as the payment for services provided at primary, secondary or tertiary level of healthcare. It can be concluded that the agreement is the initial basis of cooperation and that cooperation has to be improved by further steps, both by upgrading and improving the agreement and other acts important for the relationship between these two systems, and better use of financial relationship that will affect more efficient use of service of the insured.

The Republic Health Insurance Fund (RHIF) contracts the provision of healthcare for its insured with the healthcare institutions that are in the network Plan of healthcare institutions.

The network Plan is adopted by the Government of the Republic of Serbia, at the proposal of the Ministry of Health. The Republic Health Insurance Fund may enter into contracts with institutions out of the network Plan, but only for the number and type of healthcare services that cannot be provided within the existing capacities of the healthcare institutions from the network Plan. The network Plan of the Republic Health Insurance Fund includes the Military Medical Academy. Every year a contract on the provision and financing of healthcare services is concluded with this institution. Other institutions from the network Plan include the Military Medical Centre Novi Sad and the Military Hospital Niš.

The estimated funds for healthcare institutions on whose basis the Republic Health Insurance Fund concludes contracts with healthcare service providers, defines the items that funds have been allocated for the Military Medical Academy, and for the provision of services in 2017.¹³

¹³ Republički fond za zdravstveno osiguranje, <https://www.rfzo.rs/index.php/pravilnici>, 10/05/2018.

Table 2 – *The estimated funds of the RHIF for the services of the Military Medical Academy for 2017*

Purpose	Amount in dinars (in 000 dinars)
Salaries and allowances with contributions at the expense of the employer	915.896
Transportation of employees to and from work	35.219
Other indirect costs	427.355
Medicines in a healthcare institution	470.295
Blood and labile blood products	28.440
Sanitary and medical consumables and installation material	590.280
Fee for dialysis material and medicines	53.949
Patient nutrition	89.341
Total fee	2.608.038

Source: Republički fond za zdravstveno osiguranje, www.rfzo.rs,
<https://www.rfzo.rs/index.php/pravilnici>, 4/07/2018

As with the estimated funds for civil healthcare institutions, the same is for the Military Medical Academy, where the greatest part of the compensation refers to the expenses for employees, and the rest of the funds to the costs for the provision of services. Changing this relationship in favour of a greater amount of funds for the improvement of equipment, new technologies, and certainly the treatment conditions will contribute to better healthcare of the entire population. Furthermore, comparing the amount of funds allocated for the provision of services in this military healthcare institution of tertiary level with other institutions of a similar level, it can be seen that there is space for increasing both the volume of services and funds. Of course, assuming the uninterrupted provision of services to the insured of the military fund.

Table 3 – *The estimated RHIF funds for other institutions from the 2017 network Plan*

Name of institution	Medicines and medical supplies (in 000 dinars)
Military Medical Centre Novi Sad	16.814
Military Hospital Niš	40.875
Total	57.689

Source: Republički fond za zdravstveno osiguranje, www.rfzo.rs,
<https://www.rfzo.rs/index.php/pravilnici>, 28/07/2018

As it can be seen from Table 3, which shows the data on the estimated funds for the military healthcare institutions, the Military Medical Centre Novi Sad and the Military Hospital Niš, funds are at a much lower level, so we can talk about the small volume of services provided by these institutions. These two secondary healthcare centres can potentially expand their capacities, so that the insured of both funds can use their services more. The expansion of the network of healthcare institutions that can provide services in the field of healthcare in a high-quality manner creates a synergistic effect of using the capacities of both funds.

For the analysis of the financial relationship between the two health insurance systems, the data on the planned revenues of the Social Insurance Fund for Military Personnel in the period from 2014 to 2017 can also be used. As with the Republic Health Insurance Fund, most of the income comes from contributions to the salaries of the military insured, as well as to the contributions of military pension beneficiaries. An interesting fact is that the contributions of military pension beneficiaries are higher than the contributions to the salaries of actively employed military personnel, which indicates that the military system in the past had a much greater number of employees and a much larger amount of financial resources.

Table 4 – *The planned revenues of the Social Insurance Fund for Military Personnel*

Type of revenue	2014.	2015.	2016.	2017.
Contributions for health insurance at the expense of the employer – military insured	1.164.944	888.236	850.000	950.000
Contributions for health insurance at the expense of the employer – military insured	1.164.944	888.236	850.000	950.000
Contributions for health insurance of pension beneficiaries payed by PDIF	3.038.000	2.200.000	2.290.000	2.215.000
Current transfers from other levels of power to the Fund	0	468.252	439.175	439.175
Transfers between budget users at the same level	511.739	0	0	0
Mixed and indefinite revenues in favour of SIFMP	3.190	2.090.340	25.000	20.000
Other revenues	45.200	257.457	85.000	325.825
Total	5.928.017	6.792.521	4.539.175	4.900.000
Unspent transferred funds	2.981.109	2.077.000	1.000.000	0
Total Fund's resources	8.909.126	8.869.521	5.539.175	4.900.000

Source: The financial plans of the Social Insurance Fund for Military Personnel, <http://www.fsovo.mod.gov.rs/finansijski-plan.html#.Xs4MFTERWVo>, 01/08/2018

In recent years, one can see the trend of equalization of the revenues of SIFMP at the level of about five billion dinars, which were executed during 2015 and 2016. Moreover, the planned revenues of the Fund, contained in the financial plan for 2017, were at the level of 4.9 billion dinars. The stability and consistency of income are certainly one of the conditions for the efficient functioning of this system. An overview of collected revenues is shown in Table 5.

Table 5 – The overview of the structure of collected revenues of SIFMP in 2015 and 2016

	Collected revenues in 2015	%	Collected revenues in 2016	%
Social insurance contributions – employees	1.801.918.306	34.38	1.832.067.566	38,65
Social insurance contributions – pensioners	2.148.004.965	45.47	2.191.308.376	46,23
Transfers from other levels of power	453.346.233	9.66	439.134.554	9,26
Memorandum items for reimbursement of expenses	213.206.162	4.54	224.222.234	4,73
Other revenues	78.627.408	5.95	53.585.229	1,13
Total	4.695.103.074	100	4.740.317.959	100

Source: Execution of the Financial Plan of the Social Insurance Fund for Military Personnel for 2016, <http://www.fsvo.mod.gov.rs/finansijski-izvestaji.html#.Xs4MUzERWVo>, 05/08/2018

Table 6 provides the overview of the executed revenues of SIFMP in 2015 and 2016, which are contained in the report on the Execution of the Fund's financial plan for 2016. The mentioned overview shows that the greatest part of revenues was spent on exercising the rights from the Fund's social insurance and for social security benefits from the budget. It can be noticed that more funds were spent in 2015 than in 2016, with the structure of spent funds at the same level.

Table 6 – The overview of the structure of SIFMP expenditures in 2015 and 2016

	Executed revenues in 2015	%	Executed revenues in 2016	%
Social insurance rights	5.445.549.946	87.26	4.754.425.392	85,62
Social protection benefits from budget	453.441.170	7.27	444.783.176	8,01
Machines and equipment	221.345.049	3.55	225.533.591	4,06
Contract services	90.761.957	1.45	100.915.528	1,82
Other	29.612.838	0.47	27.581.582	0,49
Total	6.240.710.960	100	5.553.239.269	100

Source: Execution of the Financial Plan of the Social Insurance Fund for Military Personnel for 2016, <http://www.fsvo.mod.gov.rs/finansijski-izvestaji.html#.Xs4MUzERWVo>, 05/08/2018

More efficient use of health insurance services through the financial relationship between the RHIF Fund and the SIFMP Fund

A number of factors affect the health insurance and healthcare system. The regulatory framework, capacities and resources of the healthcare system, the health condition and habits of a nation, as well as the population standard are just some of them. The financial aspect, which is particularly reflected through the health insurance system, is one of the most important factors because it directly affects the scope and quality of the entire healthcare system. The healthcare financing in the Republic of Serbia is mostly done through the payment system of health insurance contributions, and these funds are further distributed through the Republic Health Insurance Fund and, to a lesser extent, through the Social Insurance Fund for Military Personnel. The great disproportion between these two funds should not be an obstacle to the more efficient use of funds collected from the insured, whether civil or military personnel.

In recent decades, there are more and more problems that negatively affect the quality of healthcare services, and among the most pronounced ones are waiting lists, and also inefficiency in the supply of medicines and medical supplies due to long, unnecessary and complicated public procurement procedures and compliance with inert legal provisions.¹⁴

In order for the entire healthcare and insurance system to be improved, considering primarily the financial aspect of the relationship between the two funds, some of the directions for more efficient use of healthcare services can be proposed:

- to improve the cooperation and relationship between the two funds by enhancing, above all, the contractual relationship. Furthermore, a new cooperation agreement should be concluded, which would include deeper and broader cooperation on all possible points of cooperation, primarily related to the exercise of the right to healthcare;
- to consider expanding the services provided by military healthcare facilities to civil insured persons. In this regard, contracted fees for rendered services should also be increased;
- to strive for universality, i.e. consider the possibility of maximizing the use of healthcare capacities, regardless of which fund the insured belongs to;
- to reduce double procedures and costs resulting from the legal rules of one fund or the other;
- to use resources more efficiently, primarily with an institution that will provide the maximum effect in treatment in relation to cost, regardless of whether it is military or civil healthcare institution;
- to improve and modernize the system of the Social Insurance Fund for Military Personnel and harmonize legal rules with current developments in the social insurance system.

¹⁴ Ranko Sovilj „Uporednopravna analiza i izazovi regulisanja i finansiranja zdravstvenog osiguranja”, Strani pravni život, broj 3, 2018, p. 150.

The support for the proposed directions of the development of the two funds would certainly be a proactive relationship between the two systems, which could contain certain elements of competitiveness, in order to more efficiently use the financial resources provided for exercising the right to healthcare in the Republic of Serbia.

Conclusion

From the consideration and analysis of the complexity of the mutual relations between the civil and military health and social insurance systems, and consequently the healthcare system, some of the possible proposals for improving one of the most important aspects of every society - the nation's health, have been presented.

Respecting the specifics of both systems, especially the military one, which related its development, above all, to movement and changes in the field of the defence system, there has been intention to find common points with civil system, which certainly exist. The first and very important point is that both health insurance systems are financed from public funds, mostly collected from contributions paid to employees' salaries, i.e. to the pensions of civil and military insured persons. This fact indicates the need to use public funds as efficiently as possible for the benefit of the society as a whole. Therefore, it was important to consider the financial aspect of the relationship between the insurance holders of the Republic Health Insurance Fund and the Social Insurance Fund for Military Personnel.

The first thing that defines this relationship is that the Republic Fund finances a much greater part of the entire healthcare system in Serbia, which is maintained both in terms of funds and capacities that are financed through the civil health insurance system. The existing disproportion should not be an obstacle to cooperation and striving for greater connectedness between civil and military system. The insight into the financial plans of the Social Insurance Fund for Military Personnel shows that income from contributions collected from pensioners is higher than from the active military members. From this data, it can be concluded that the military system had a much greater number of active insured persons in the past. Such a situation provides an opportunity to make most of the healthcare capacities of the military system available to all insured persons. Thus, the resources of the military healthcare system, which was once available to a much greater number of users, would be used more efficiently. A part of the resources of the military healthcare system is already included in the Plan of the healthcare network financed by the Republic Health Insurance Fund, but that level of capacity usage can and should certainly be increased.

The cooperation between the two health insurance and healthcare systems, which was enhanced by signing the Agreement between the two funds in 2009, should be constantly developed. At the same time, specifics and differences should be taken into account, in order to reach new focuses of cooperation that will result in more efficient use of collected public funds and better healthcare of the nation, as the condition for general social progress.

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Однос цивилног и војног здравственог осигурања – услов ефикасније здравствене заштите

Циљ овог рада је да се анализира однос Фонда за социјално осигурање војних осигураника и Републичког фонда за здравствено осигурање кроз аспект ефикаснијег коришћења средстава здравственог осигурања. Анализирајући овај однос, суштински се разматрају систем здравствене заштите у Републици Србији и систем здравственог осигурања. Узимајући у обзир специфичности социјалне заштите војних осигураника, настоји се утврдити правац и унапређење односа са цивилним здравственим системом. Само проактиван однос војног и цивилног здравственог система и система здравственог осигурања услов је боље здравствене заштите осигураника оба фонда, као и ефикаснијег коришћења средстава здравственог осигурања.

Здравствена заштита становништва је један од најважнијих друштвених приоритета и као таквој се мора посветити посебна пажња. Право појединца на здравствену заштиту, али и на друге облике заштите, остварује се у оквиру социјалног осигурања.

Здравствена заштита, а самим тим и систем здравственог осигурања војних осигураника, развијао се у складу са специфичностима везаним за сам војни систем. Поштујући у потпуности аутономију наведеног система, развој осигурања у овој области еволуирао је са променама у преовлађујућем систему цивилног здравственог осигурања.

Систем здравствене заштите и здравственог осигурања је један од најважнијих система у свакој земљи. Ефикасност и исплативост функционисања овог система представља изазов за сваку националну привреду. Циљ који треба постићи је остваривање најбоље здравствене заштите нације путем расположивог здравственог осигурања.

Систем обавезног здравственог осигурања у Републици Србији се спроводи кроз јединствену државну организацију – Републички фонд за здравствено осигурање.

Када је реч о здравственом осигурању и заштити цивилних и војних осигураника, јасно је да је реч о два потпуно одвојена и независна система која имају доста заједничких тачака и чија би међусобна сарадња и заједничко коришћење ресурса требало да доведу до позитивних ефеката као целина.

Финансијски аспект, који се посебно огледа кроз систем здравственог осигурања, један је од најважнијих фактора јер директно утиче на обим и квалитет целокупног система здравствене заштите.

Узимајући у обзир и анализирајући сложеност међусобних односа цивилног и војног здравственог и социјалног система, а самим тим и система здравствене заштите, појавили су се неки од могућих предлога за унапређење једног од најважнијих аспеката сваког друштва – здравља нације.

Кључне речи: *здравствена заштита, здравствено осигурање, фонд, осигураници*