

Romanian government and unions carve up the health system

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The dismantling of public health care in Romania has been one of the main objectives of the austerity programs embarked upon by the European Union and Romanian elites as part of a continentwide attack on jobs and living conditions. The attempt to transform health care into a private, profit-orientated system was the spark that triggered the mass protests against austerity measures last year, which eventually forced the conservative government of Premier Emil Boc to resign.

Although Romania's President Traian Basescu ostensibly withdrew the law following the mass protests, the Romanian bourgeoisie remained determined to push through the reform and entrusted the Social Democratic Party and its junior coalition partner, the National Liberal Party, with containing popular opposition.

The strategy of the new government was outlined in the letter of intent approved by the International Monetary Fund this October for a new stand-by agreement. "Rather than adopting a new framework law, we have decided to pursue a more gradual approach based on modifying existing legislation. This should allow individual initiatives to proceed at different speeds and to be completed without necessarily relying on the success of all other initiatives".

As a result, a project regarding a so-called basic package of medical services and several pilot projects has been placed for public debate on the Ministry's web site from October 1 until November 1. In Romania, the health care system has up until now been provided free of charge with unrestricted access to medical services for all contributors to the National Insurance Company.

The basic package represents a set of restrictions that limit the access of the population to health care. It outlines "a series of main diagnostics" for whose inpatient care the state will no longer provide funds. The government claims that hospitals are squandering resources and that inpatient care is in many cases unnecessary. These patients are to be referred to family doctors and only if absolutely necessary to specialist doctors, but this system will also be restricted. The number of consultations included in this basic package is also strictly specified, according to a series of criteria.

These measures, which the government claims represent a redistribution of funds inside the system, amount in fact to a

huge cost-cutting exercise. Health Minister Eugen Nicolaescu admits that this is the way "in which the citizen is being told the truth, what he can get from the money that Romania has for health care". The basic package is described in the government's letter of intent to the IMF: "[the basic package] will also define the scope of the private health insurance in the health care system in the future (structural benchmark)".

The other government proposals, the so-called pilot projects, can also serve as examples of "structural benchmarks" for private takeover. According to the "law for the implementation of the pilot project regarding the modification of the status of hospitals", 12 hospitals will have the choice to become medical NGOs, autonomous state bodies or commercial companies. The board of directors of these hospitals will run their own budgets and have access to a diverse source of income such as renting out medical spaces and equipment, including the labor of medical personnel, private medical services, additional payments for medical services, loans to be repaid or the issuing of bonds. This project is due to be implemented nationally nine months after its implementation early next year, after having undergone two evaluations.

Beginning on February 1, 2014, the pilot regarding the income of medical personnel, which the government claims will increase the income of doctors and nurses, will be implemented. The law makes a clear differentiation between wage and income, leaving health care workers dependent on the newly introduced performance pay. It also provides for the introduction of private beds in hospitals, ostensibly as an additional source of income for doctors. These "private patients", who could suffer from one of the conditions excluded from impatient care according to the basic package, can only benefit from medical attention after the end of a regular shift, which lasts from 7 am to 3 pm.

All of these measures, which are virtually identical to the ones proposed by the conservatives before they were forced out of office, represent a direct assault on the social gains of the working class and are intended to set back the historical clock by nearly a century. Private health care based on a profit system was abolished in Romania after the Second World War.

The universal health care that existed in Romania was a social gain of the property relations established by the first workers

state, the USSR, even though in Eastern Europe, it took the deformed shape of a Stalinist dictatorship. The basic package, despite the government's claims to the contrary, will deny basic hospital care and access to complex medical attention to millions of people, while at the same time creating huge avenues of profit for the private insurance companies.

It reads as the cynical and arrogant diktat of the rich and their financial advisors and contains detailed lists and tables that arbitrarily confine access to healthcare. "The brightest medical experts" and "statistics" were used to accomplish what the government says is "our strategy that the basic package should be mandatorily accompanied by a supplementary package, supplied by private healthcare insurances."

A vital role in the introduction of this reactionary legislation and in suppressing popular opposition is being played by the health care trade unions. The Coalition of Health Care Professionals was formed in July of this year with the purpose of corraling health care workers behind the legislation and to cover up the extent of the reforms. It was formed by the Romanian College of Physicians, the Romanian College of Dentists, the Romanian College of Pharmacists, the Romanian College of Psychologists, the SANITAS trade union federation, the Federative Chamber of Physicians, and the Ioan Cantacuzino union.

The Coalition drew up a set of demands that not only failed to challenge the proposed legislation, but took it as an accomplished fact. Among its demands are wages specific to the health care sector, the creation of public beds in private hospitals and the consultation of the coalition in the drafting of any laws pertaining to health care. The unions participated in numerous rounds of consultations with the government and without fail came out in agreement.

The Coalition set up a plan of action, in order to "pressure the government", consisting of ten days in which 150 hand-picked union leaders from different counties picketed the ministry's building, without calling on their own members to participate or even informing workers about the actions.

On October 14, the Coalition asked workers to wear the national flag on their arm at work for three days, later announcing that this was going to be an indefinite form of protest, until further notice. On the same day, Vasile Astarastoaie, president of the Romanian College of Physicians and leader of the Coalition, participated in a public debate organized by the Health Ministry and the Mediafax News Agency along with Health Care Minister Nicolaescu and the president of Metropolitan Life Insurance Company, Theodor Alexandrescu. At the end of the debate, Nicolaescu reiterated the complete agreement of all the partners in the debate, apart from one issue. That topic refers to one of the demands that the unions have consistently used to cover up their endorsement of the legislation, the doubling of the wages of junior doctors.

The next day, however, the unions agreed to keep the same wages and to a government handout of scholarships to junior

doctors, without giving further details. These scholarships will likely be tied to additional criteria and will waive the right to any wage increase for the foreseeable future. At the same meeting, it was agreed that the Coalition will delegate representatives to the government workgroups by October 25.

The unions plan a "silent march" on November 2, announcing that around 5,000 members will take part. Participation at the rally will be strictly regulated, people having to register on lists that will close five days before the event. These types of toothless protest actions have already been rewarded by the government, with representatives in the union coalition invited to sit on the board of directors of the pilot hospitals.

The Social Democrats and the trade unions can also rely on the loyal support of various middle class protest groups.

The fake left group CriticAtac, which specializes in providing a left cover to the union bureaucracy, is hosting the demands of the Ioan Cantacuzino union on its web site, and is complicit in the union's operations. In an article on the same web site, Sorin Paveliu, for years an insider on health care system decision-making bodies, attacks the government's basic package from the right. For example, he asks why people would pay the contributions to the basic package, if the uninsured receive the same medical services. In fact, Paveliu was reacting to false information resulting from a communications blunder by the health minister. In reality, the uninsured are not entitled to the same services, and are not even being allowed to have a family doctor.

A fresh struggle is needed to defend public health care. Once again, the bankrupt and treacherous role of the trade unions proves that the attacks on living conditions cannot be opposed on the basis of limited economic demands. All the past gains of the working class are under attack throughout Europe, the US and around the world as a result of the response of the financial elites to the historical crisis of capitalism. Workers can defend even the most basic of social rights only in an international political struggle against all the bourgeois parties and their middle class allies.

Health workers must form independent action committees, composed of nurses, doctors and auxiliary personnel, and take the struggle out of the hands of the corrupt union bureaucrats. They must reach out to patients and to other sections of the working class in a broad popular mobilization against the government's cuts.



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