



Ministério da
Saúde



SEPTEMBER 2012

Brazil is the only country

with over 100 million inhabitants that has taken on the challenge of having a **universal, public free of charge Health system**



Size of SUS

3.2 billion ambulatory procedures/year

500 million medical consultations/year

1 million hospitalizations/month

Biggest number of **public organ transplants** in the world

90% of vaccination market is driven by SUS

30 million cancer related procedures



SUS' great achievements

Maternal Mortality
Death-**21% Reduction**

(1,038 deaths between Jan-Sep 2011, in relation to 1,317 in 2010)

Child Mortality
CMR reduced practically in half
(47%) in the last decade

In 2000, the **national rate was of 29.7/thousand liveborn**, in other words, from every one thousand liveborns, 29.7 would die in their first year. In 2010, the rate had been **reduced to 16.4/thousand liveborns**

Emerging problems

48,5% of the population in Brazilian state capital cities is overweight*
• 260 thousand deaths could be avoided every year with an adequate diet (ABIA)

23.3% have high blood pressure*

30.3% of the population in capital cities report abusive alcohol consumption*

Crack epidemic

**Vigitel 2011*



Emerging Problems

Brazil is 5th in the world in relation to deaths resulting from traffic accidents

Motorbike accidents correspond to 25.5% of deaths

Motorbike
25.5%



Automobile
23.7%



Bicycle
3.5%



Pedestrians
23.2%



Public transport
0.4%



Others
23.7%

Transplants double in ten years



In 2011, for the first time we surpassed the number of **10 donors per million people**

In a decade (23,397 in 2011), we have more than doubled the number of surgeries – **increase was of 124%** in relation to 2001, when 10,428 procedures were conducted

New incentive between 30% and 60% on the SUS Table for hospitals that conduct transplants.



Quality in Primary Care

By **monitoring the healthcare offered by the Health Primary Care Teams**, the MoH **may even double** what it transfers per team, according to the quality of the healthcare



In addition, the Ministry shall support:

the construction of **3 thousand Primary Care Units (UBS)**

Refurbishment of 9 thousand (UBS)

Works for increasing **11 thousand (UBS) in the whole of Brazil**



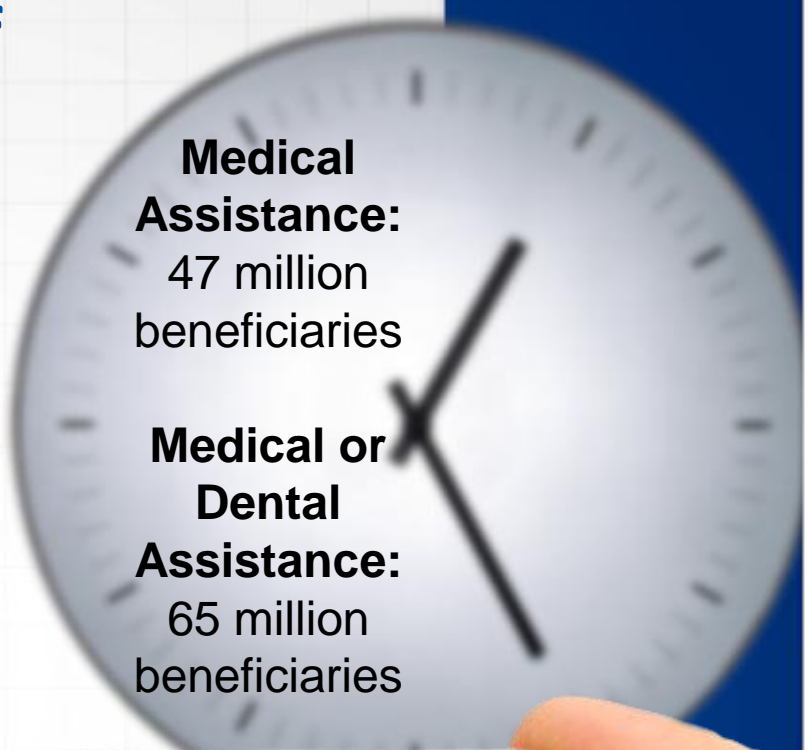
Defense of users and quality of private health insurance

Quality care, within adequate timeframe also for the **65 million health insurance users**

Since 2012, insurance policies have had to comply with the rule of maximum waiting time for the schedule of appointments, tests and surgeries


We have passed a bill **that makes it a crime for a deposit check to be requested before care is given to a person under emergency circumstances**

We suspended **268 health insurance plans from 37 operators** from selling any more policies as they were not complying with the maximum waiting time established by the National Health Agency (ANS) for appointments, tests and surgeries



Medical Assistance:
47 million beneficiaries

Medical or Dental Assistance:
65 million beneficiaries



Tests
(3 days)

Appointments
(7 days)

Surgeries
(21 dias)

More Doctors

There are **1.83 doctors** for every **1,000 inhabitants** in the country



 UK : **2,74***

 Spain: **3,96***

 Portugal: **3,87***

 Argentina: **3,16***

* UN Report

**Global Health Observatory Data Repository (WHO, 2012)



More Doctors

Through partnership with MoE, states and municipalities, MoH increases incentives:

- 1 Discount in FIES related debt for professionals who work where SUS needs
- 2 Incentive, in the residency examination, for those who work in the peripheral areas of big cities and in the states' hinterlands.
- 3 Opening of residency vacancies in most needed states and specializations 4 thousand vacancies until 2014
- 4 Opening of 2.4 thousand new vacancies in medical degree courses at universities until 2013: 1.6 thousand vacancies in public universities and 800 in private institutions. Opening of 0 new medicine courses in 2012.



Care with Women



3.9 million breast cancer screening tests conducted in 2011, a 28% increase in relation to 2010

11.4 million smear tests conducted in 2011

12% increase in the number of chemotherapy procedures and 24% in radiotherapy, in comparison with the 1st quarter of 2012, in relation to the same period in 2010

500 million invested in the opening of 48 new radiotherapy centers and increasing 32 to reduce inequality related to access to cancer treatment

PREVENTION



INFLUENZA

Aim of
vaccinating 80%
of the target-
audience was
reached in 2012:

86.2 %

New vaccines included in the immunization calendar:
inactivated poliovirus and pentavalent

Young people between the ages of 20 and 29 included in
the group of people who may be immunized

New **target-audiences** included (expecting mothers,
children and health professionals) in the **vaccination
campaign**

64% reduction in the **number of deaths** and **44%** in the
serious cases of influenza

Being analyzed: technology transfer for the inclusion of
vaccines against chickenpox, hepatitis A and HPV



PREVENTION



84% reduction in deaths and 91% in serious dengue fever cases **in relation to 2010**

Malaria cases have **dropped in over 50%** in six years (2005 to 2011)

Incidence of **tuberculosis dropped 15.9%** in a decade

Innovation at SUS



34 Public-Private Partnerships
for the production of new
medication, vaccines and equipment
in Brazil

Savings of R\$ 1.2 billion/year (33% of
the R\$ 3.5 billion spent annually)

380% increase in research related
investment the next four years

R\$ 1.5 billion invested
until 2014

Brasil Maior

Sanctioned by the president **Provisional Measure 563** which improves signings where there is transfer of technology strategic products for **SUS**.

Benefits

- Improve technological autonomy
- Provide legal security
- Strength public procurement power

Before	Today
The exemption of public bids was permitted to public labs founded until 1993, when the Federal Procurement Law was sanctioned.	The exemption of public bids covers also public labs founded since 1993.
Technology transfer agreements, between private and public companies, were not foreseeing the acquisition of products.	Specific legal provision foresee the acquisition of products from transfer of technology.

Creation of the **SUS Performance Index** (IDSUS 2012), which assess the level of access and quality of health services in the country

In addition to offering more transparency to the supply of health services, it is a monitoring and assessment instrument for decision making processes



Managers give data on public health



National databases add information



The IDSUS goes from 0 to 10
The SUS access index weighs more than the effectiveness index.



The Ministry gathers the data and analyzes the figures, considering factors such as population, socioeconomic background, child mortality, normal births, among others

IDSUS

Clustering by similar municipalities

ÍNDICES	INDICADORES	PARÂMETROS	PESOS (PCA)
Índice de Desenvolvimento Socioeconômico (IDSE)	PIB municipal <i>per capita</i>	≥ R\$ 32 mil <i>per capita</i>	54,93%
	Proporção de famílias com Bolsa Família	0%	45,07%
Índice de Condições de Saúde (ICS)	Taxa de mortalidade infantil	≤ 8 óbitos por mil nascidos vivos	100%
Índice de estrutura do Sistema de Saúde do Município (IESSM)	Proporção de médicos da atenção básica e profissionais da vigilância em saúde	0,39%	12,24%
	Proporção de procedimentos ambulatoriais de média complexidade realizados para residentes	0,64%	12,31%
	Proporção de procedimentos ambulatoriais de média complexidade realizados para não residentes	0,90%	9,29%
	Proporção de procedimentos ambulatoriais de alta complexidade realizados para residentes	0,85%	11,08%
	Proporção de procedimentos ambulatoriais de alta complexidade realizados para não residentes	1,17%	9,80%
	Proporção de internações de média complexidade realizadas para residentes	0,37%	13,00%
	Proporção de internações de média complexidade realizadas para não residentes	0,72%	11,47%
	Proporção de internações de alta complexidade realizadas para residentes	0,94%	11,16%
	Proporção de internações de alta complexidade realizadas para não residentes	1,14%	9,65%

Fonte: CGMA/Demas/SE/MS, 2012.

IDSUS

Clustering by similar municipalities

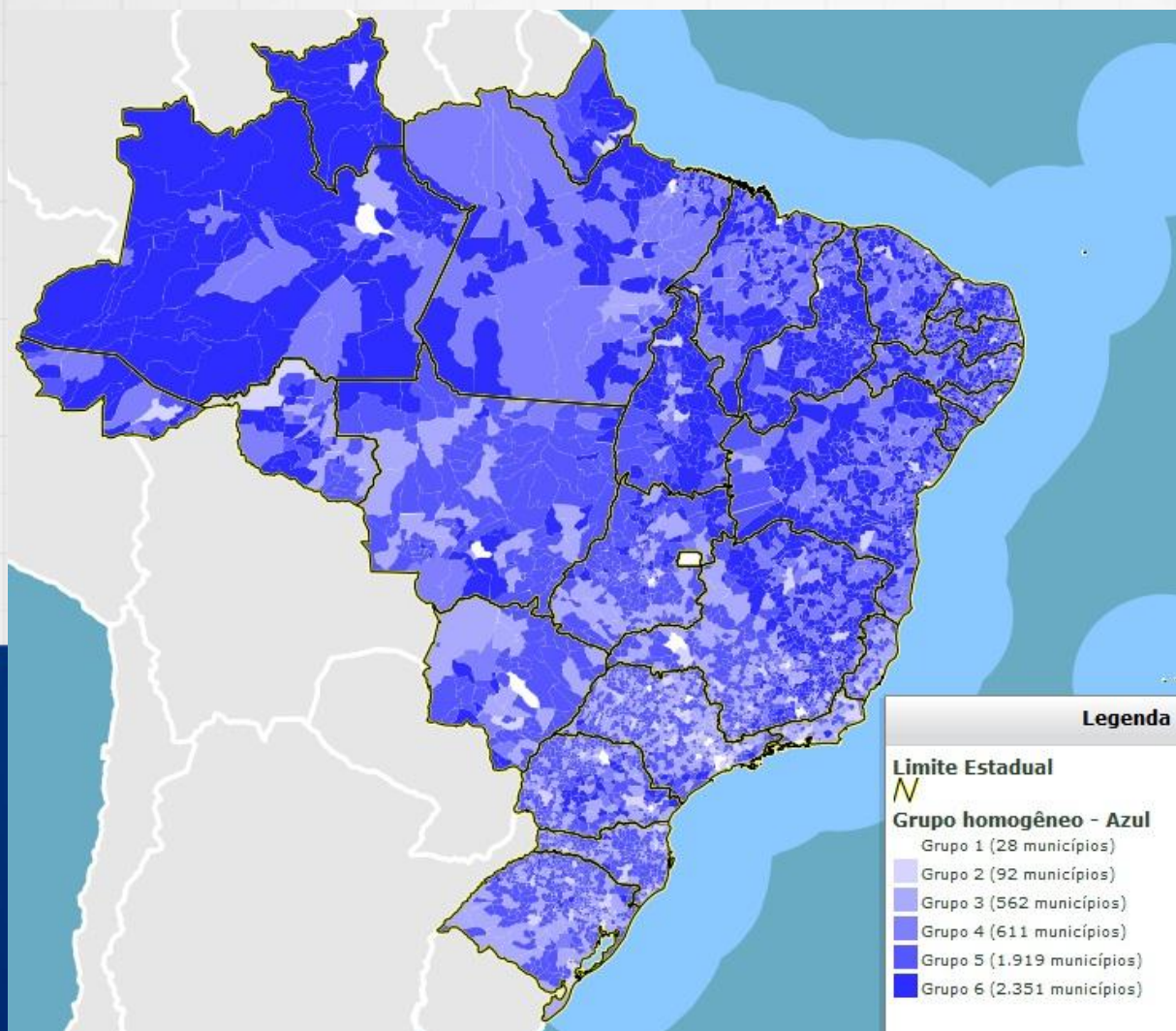
GRUPO	IDSE	ICS	IESSM	QTD MUN
6	Baixo	Baixo	Sem Estrutura MAC *	2.183
5	Médio	Médio	Sem Estrutura MAC *	2.038
4	Baixo	Baixo	Pouca Estrutura MAC *	587
3	Médio	Médio	Pouca Estrutura MAC *	632
2	Alto	Médio	Média Estrutura MAC *	94
1	Alto	Médio	Muita Estrutura MAC *	29

(*) Estrutura MAC: atenção de média complexidade e alta complexidade ou estrutura de atenção especializada, ambulatório e hospitalar.

Fonte: CGMA/Demas/SE/MS, 2012.

IDSUS

6 homogenous groups of municipalities





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