

SUMMARY OF THE DOCTORAL DISSERTATION

Topic: „**Functions of the health insurance contribution as the public source of health care system funding**”

Author: **Szymon Moś, MA**

Doctoral supervisor: **prof. dr hab. Jolanta Gliniecka**

The subject of this scientific dissertation are functions of the (public) health insurance contribution. The thesis is a possibility to indicate those functions of the health insurance contribution as public source of health care system funding in legal theory. The theoretical approach is dictated by the objective of the conducted research which is an attempt to present a concept of a universal model of the said functions, not directly connected to specific legal provisions.

Due to the theoretical nature of this dissertation, theoretical method is mainly applied. Also, critical analysis, dogmatic method and the so-called legal modelling are subsidiary applied. As necessary, the theoretical concepts were illustrated with examples of particular regulations and judicature.

The research established that functions of the health insurance contribution are not limited only to fiscal aspects, but also a range of non-fiscal ones, some of them unique compared to other compulsory levies. Following health insurance contribution functions were indicated: provisional (Polish: *zaopatrzeniowa*), interfering (*oddziaływująca*), protective (*opiekuńcza*) and revenue (*dochodowa*).

The dissertation consists of five chapters. First one constitutes the theoretical assumptions as a basis for the research further conducted on each function. The functions are addressed separately in individual chapters.

The first chapter is dedicated to the notions and definitions with necessary theoretical references. The research is on the issues of social security, social policy, health care insurance and health insurance contribution. The concept of contribution in public insurance itself was defined. Said contribution was described and compared to other compulsory levies.

The second chapter is on the provisional function of the health care insurance contribution. This function has no equivalent in terms of other compulsory levies. The provisional function enables to redefine purpose and aim of the health insurance contribution in light of the health needs of those insured, who are not obliged to pay it. Said function

affects commonality of the health insurance and also is a way of enacting voluntarily health insurance.

The third chapter covers the interfering function. This function is related to the functions of that sort of other compulsory levies, sometimes also called as “stimulating” or “interventive”. However, in case of the health insurance contribution it is possible to create said function also by means of its specific features. Those features to some extent also limits the scope of the interference possible.

The protective function is addressed in chapter fourth. The function is connected with conducting public policies of the public authorities. It may allow them to carry out the obligation to guarantee the right to life and health to the individuals. Another manifestation of said function is establishing a secondary, in some way, bond between insured and the social security benefits he or she receives. Namely, coverage of the health insurance contribution by the public authority for the insured individual is conditioned and dependent on granting said insured with the right to particular social benefits.

The fifth chapter features the revenue function. To properly analyze the issue, the fiscal view of the health insurance contribution shall be taken. The role of the contribution as a source of funds for the risk-of-lack-of-health-protecting-fund is particularly relevant. Thus, state compulsion factor and non-reimbursement of the contribution are applicable. Those two underline the public nature of the health insurance contribution as compulsory levy. Specific features of the health insurance contribution may constitute a tool to combine multiple obligations for the insured to pay the contribution – maintaining equal access to the services for all insured. Such a solution improves intensity of the revenue function.