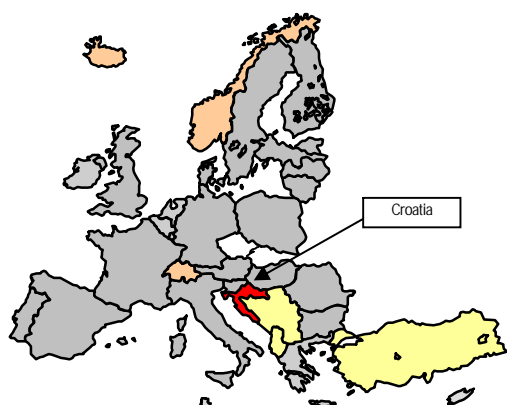


Croatia



Date of last revision: 1st October 2008

In the EU/EEA	expected	2009
Population	(2008)	4,435,383
GDP PPP per capita	(2007)	€13,230
Currency	Croatian Kuna (HRK)	
	7.26 HRK = €1.00 (2008)	
Main languages	Croatian	
Healthcare is funded through general taxation and an additional "health contribution" which is paid by everyone receiving any kind of wage, compensation or pension.		
Number of dentists:	4,137	
Population to (active) dentist ratio:	1,267	
Members of Dental Chamber:	100%	
The use of specialists is widespread but there has been no development of dental auxiliaries.		
Continuing education for dentists is mandatory.		

Government and healthcare in Croatia

Croatia is located in South-eastern Europe, bordering the Adriatic Sea (and Italy), between Bosnia and Herzegovina, Slovenia, Hungary, Montenegro and Serbia. The land area is 56,542 sq km. The capital is Zagreb.

The lands that today comprise Croatia were part of the Austro-Hungarian Empire until the close of World War I. In 1918, the Croats, Serbs, and Slovenes formed a kingdom known after 1929 as Yugoslavia. Following World War II, Yugoslavia became a federal independent Communist state under Marshal Tito. Although Croatia declared its independence from Yugoslavia in 1991, it took four years before the occupying Yugoslav army was mostly cleared from Croatian lands. Under UN supervision, the last YU army-held enclave in eastern Slavonia was returned to Croatia in 1998.

The political system is a parliamentary democracy. The chief of state is the President and the head of government is the Prime Minister. The cabinet is the Council of Ministers, named by the prime minister and approved by the parliamentary Assembly. There is a unicameral Assembly or Hrvatski Sabor (152 seats; members elected from party lists by popular vote to serve four-year terms).

Elections: the President is elected by popular vote for a five-year term (eligible for a second term); the leader of the majority party or the leader of the majority coalition is usually appointed Prime Minister by the President and then approved by the Assembly.

The minimum age for voting and standing for election is currently 18.

Administratively Croatia is split into 21 counties (zupanije, zupanija - singular) among which is a capital - city (grad - singular).

A few Basic Laws are the regulatory frame of Croatian healthcare system (Law of healthcare protection, Law of obligatory healthcare insurance, Law of voluntary healthcare protection, Law of dentistry). The system is basically social and a basic range of medical, dental, radiology, laboratory services are free and available for all citizens of Republic of Croatia.

In Croatia healthcare is funded through general taxation and an additional "health insurance contribution" which is paid by everyone receiving any kind of wage, compensation or pension.

	Year	Source
% GDP spent on health	7.7% 2004	OECD
% of this spent by governm't	81.0% 2004	OECD

Oral healthcare

The Croatian healthcare system (including dental healthcare) is contribution based (similar to taxation) and financed from the State Budget.

The responsibility for planning oral healthcare lies with the Ministry of Health, which through the state owned insurance agency the Hrvatski Zavod za zdravstveno osiguranje (HZZO) finances and provides all services in paying for healthcare under the strategic direction of the Ministry. The agency is self-regulating and ultimately under the supervision of the Croatian Parliament (Hrvatski Sabor).

		Year	Source
% GDP spent on oral health	No data	2007	Chamber
% OH expenditure private	No data	2007	Chamber

At the time of publication there was no available data for this table.

Branches of the HZZO are in the municipalities.

The dental services are delivered through the network of dental offices throughout the state. Some of the offices are private but about half have contracts with the HZZO. The network of dental services is defined and a ratio of 2,200 patients per dentist is the prescribed standard. A small proportion of offices remain in former public health centres and work for the HZZO. A proportion of dental care is delivered by totally private dental offices. The patients may be covered by private dental insurance for reimbursement.

Formally and practically all citizens of Croatia have the right to elect their doctor of dental medicine – a contractor of the HZZO and receive dental care. However, not all citizens use this right, despite the fact that they are paying for it through their contributions. They have made a decision to receive care from privately run dental offices.

State and private companies often offer their employees the additional benefit to their salaries of a contract with private health insurance companies for the delivery of private care.

The basic package of dental services provided by the state through HZZO ensures almost all basic dental procedures (restorative, endodontic, basic periodontal, oral surgery, oral diseases, orthodontics up to 18 years, prosthodontics partially) and emergency dental care are available and have to be provided immediately when requested. If the contractor is not able to perform the required procedure he

has the right to direct the patient to a specialist, who is again a contractor with the HZZO.

There is no available data about what proportion of the population receive oral healthcare regularly (in a two-year period) and how often oral examinations would normally be undertaken.

The Quality of Care

The state authorities provide rules about the space, equipment and the qualifications needed to provide dental care. The state insurance company (HZZO) provides a list of services, contents and worth of each service provided by the state. The Croatian Dental Chamber (see later) describes the standards needed to perform these services. All services are listed. Billing is actively checked by HZZO to ensure that bills reflect the amount of work done.

Radiology, laboratories and their equipment are strictly monitored by the authorities.

Patient rights are protected by the Patient Rights Protection Law (2004).

The Croatian Chamber (see later) has an expert committee with a system to supervise the quality of the clinical dentistry provided, whether in the private sector or through the HZZO.

Patient complaints should be managed initially by the dentist. Patients' rights are protected by law and if dissatisfied they can complain to the Chamber. Proven complaints are reimbursed by the insurance company having a contract with the Chamber. This reimbursement covers all treatments in both sectors.

Health Data

		Year	Source
DMFT at age 12	3.03	2002	OECD
DMFT zero at age 12	No data		
Edentulous at age 65	No data		

"DMFT zero at age 12" refers to the number of 12 years old children with a zero DMFT. "Edentulous at age 65" refers to the numbers of over 64s with no natural teeth

Fluoridation

There are no mass fluoridation schemes (such as water, milk or salt) but dentists routinely undertake fluoride treatments of deciduous and permanent teeth in children.

Education, Training and Registration

Undergraduate Training and Qualification

To enter dental school a student has to have completed secondary school (cca. age 18). There is an entrance examination which consists of scoring from secondary school grades, scoring from a written exam and scoring from a manual skills exam.

Year of data:	2008
Number of schools	3
Student intake	160
Number of graduates	80
Percentage female	67%

The undergraduate course lasts for 5 (Split and Rijeka) or 6 years (Zagreb), depending on which school is chosen.

The oldest dental school is in Zagreb, founded in 1962; the school in Rijeka was founded 1973. The dental school of Split was founded in 2006 and is privately funded. By 2008 there had been no graduates.

All curricula are tailored according to the *Bologna Declaration*.

Quality assurance for the dental schools is provided by the Ministry of Education.

Qualification and Vocational Training

Primary dental qualification

The primary degree which is included in the register is:

doktor stomatologije (dr.stom.) or
Doctor of Dental Medicine (DMD) in English

Vocational Training (VT)

There is no post-qualification VT, other than as below.

Registration

To register in Croatia, a dentist must have a recognised degree or diploma awarded by the university and have completed one year of mandatory training or "residence," under the supervision of experienced dentists. At least 6 months of this training must be undertaken in dental school and 6 months in one of the experienced private or contractor dental offices. There is practical and theoretical training. The trainees are salaried as non-dentists, without a licence with maximum salaries of €7000 (gross) a year.

After that the trainee dentist must pass the state exam held at the Ministry of Health and organised by the staff of the school of dentistry and Ministry. After this exam has been passed, the dentist obtains a Licence from the Croatian Dental Chamber.

Only then a dentist is licensed to work independently.

Language Requirements

There is a formal need to understand and speak the Croatian language to register.

Further Postgraduate and Specialist Training

Continuing education









Continuing education is mandatory and the rules are set in law. The requirement is 7 hours of formal training each year. CE is organised by the Chamber (the number of courses and standards). Courses are given by dental school staff and private organisers.

Specialist Training

Specialist training is organised by the dental schools of Zagreb and Rijeka. Training lasts for 3 years and includes a University examination and written specialist thesis.

Specialist education leads also to a degree, for example: *"Specialist in Endodontics"*

There is training in 8 main specialties:

-  Pedodontics
-  Endodontics and Restorative dentistry
-  Family dentistry
-  Oral surgery
-  Oral medicine
-  Orthodontics
-  Periodontics
-  Prosthetics

There is also a medical specialty of Oral Maxillo-facial surgery.

The specialist title is issued by the competent authority - the Ministry of Health but a list that the public may consult is not kept.

Workforce

Dentists

Year of data:	2008
Total Registered	4,137
In active practice	3,500
Dentist to population ratio*	1,267
Percentage female	65%
Qualified overseas	No data

* this refers to the population per active dentist

There is an increase in workforce as demand rises. However, the dentist unemployment rate is reported by the Chamber as "high" (315 unemployed and registered at the Croatian employment service on Jan. 31st, 2008). There are some overseas qualified dentists working in Croatia but the actual numbers are unknown.

Movement of dentists across borders

In 2008, the Chamber reported: "There is an increased interest to come to Croatia and work as dentist".

Until Croatia becomes a member of the EU the unemployed dentists may not be able to go overseas to find employment.

Specialists

A patient has the right to go to a specialist but has to be referred by his contracted dentist. Patients can also go without referral, but then this is fully private and the patient has to pay for the service.

Year of data:	2008
Orthodontics	160
Oral Surgery	98
Endo & Restorative	93
Paedodontics	145
Periodontics	94
Prosthodontics	145
Oral Medicine	81
OMFS	30
Family Dental Medicine	2

Family Dental Medicine is unique to Croatia. It is an amalgam of dentistry focused on all dental problems related to family from birth to death – "Family dental doctor".

Auxiliaries

There is no system of use of dental auxiliaries in Croatia other than dental technicians. Medical auxiliaries are used by some dentists as Chairside Assistants but training is strictly informal and there is no qualification or registration. There is no guide to numbers.

Year of data:	2008
Hygienists	0
Technicians*	1200
Denturists	0
Assistants	No data
Therapists	0
Other	0

* there are an unknown number of unregistered technicians

Dental Technicians

Dental technicians train for 4 years in respective secondary schools (6 schools in Croatia), and they receive a diploma on qualification, for dental technicians. All dental technicians have to undertake one-year of vocational training after secondary school, after which they have to pass state examination of the Ministry of Health, in order to be free to work.

Technicians are not obliged to register, although most of them are registered with one of two existing Dental Technicians Associations in Croatia. By 2008 there was some activity towards the organisation of unique organisation, which could become a "Chamber for Dental Technicians", but details were not yet available. The numbers registered have been identified by how many receive the professional journal, but because registration is not mandatory it is concluded that there may be many unregistered but working.

It is not compulsory to undertake continuing education, but most technicians do, due to competition and demands in everyday practice, especially those in private sector.

Technicians normally work in independent commercial laboratories or laboratories within national health service institutions, or in the laboratories which are part of private polyclinics. Nobody knows exactly, but it is thought that most are employed within the private sector. They are not able to treat patients at all directly.

Practice in Croatia

Oral health services are provided mainly in General Practice, both in the public and private sectors with about half of dentists in each sector.

Year of data:	2008
General practice (owners)	2,512
General practice (employees)	419
Public dental service	446
University/Hospital	137
Hospital	No data
Armed Forces	No data
Others	33
General Practice as a proportion is:	85%

"Others" refers to dentists working in incorporated dental offices. The number is included in the final row, "General Practice as a proportion of all dentists".

In Croatia the hospital dentists are also academics, hence the combined total. Also, many dentists practise in more than one sphere of practice.

In 2008, just over half of general practitioners were in purely private practice and just under half were in mixed practice (private and HZZO).

Working in General Practice

In Croatia, dentists who practice on their own, or as group practice, or in so called "polyclinic" institutions or incorporated dental practice are said to be in "private practice". The numbers working this way include contractors with HZZO who are providing primary public oral health care but also have the right to provide private services not included in the package of primary dental care.

Most doctors of dental medicine in practices are self-employed but additionally there were over 400 employees of private dental offices in 2008.

Most dentists in private practice earn their living through charging fees for treatments. Patients pay for the service when it exceeds their right given by the state included in the package (in offices having a contract with HZZO).

Patients without any contract with insurance companies pay for the full service in offices.

Fee scales

There are two levels of insurance: *obligatory* oral healthcare and *additional* oral healthcare. However, from 2008 additional healthcare is also obligatory but still has the name of additional and will depend on a person's salary/income.

The package of obligatory oral healthcare includes paedodontics, restorative dentistry, endodontics, oral diseases, (partially) periodontics, minor oral surgery and prosthetics, orthodontics (until the age of 18). For anything not included the patient pays a bill.

Additional oral healthcare includes what is not included in basic package and it is the remainder of periodontics, major oral surgery and advanced prosthetics. Not included in the additional oral healthcare is most of fixed prosthetics and orthodontics after 18.

The Dental Chamber recommends fees but these are not obligatory for their members.

Joining or establishing a practice

There is a book of regulations that regulates the size of dental practices, what should be included in the practice, the size of entrance door, the entrance for disabled persons etc. The same applies to group practices, polyclinic institutions and other practices.

Regarding location, a private practice can be established wherever the entrepreneur – dental doctor - finds appropriate space that suits the requirements of an Act about the minimum office space conditions (about 40 sq. m, requiring dental chair office, waiting room, two restrooms, and an entrance for disabled persons). But, most contractors who rent formerly state owned dental offices, situated in state buildings - "Public health homes" – are said (by the Chamber) not to have working conditions that answer the requirements of the "Act".

To start the dental practice a location permit is needed first from the municipality. After that several documents are needed in order to proceed:

1. Degree certificate;
2. State exam certificate;
3. Croatian residency;
4. Confirmation of not being prosecuted.

After submitting all requested documents the Ministry of Health asks the Chamber for their opinion, included in the letter of confirmation. When the dental office is ready to function a three member commission from the Ministry checks it from the legal and clinical point of view and formally approves the start. Only after that a permit to start the dental practice (or joint dental practice, or polyclinic) is issued.

Working in the Public Dental Service

A small number of offices remain in former public health centres and work only for the HZZO.

Children (until 15 years of age) have to be registered to a dentist contracted with the HZZO if they want free service. Disabled and bed ridden persons also have to be registered to the contracted dental office to receive primary dental care.

Working in Hospitals

Those dentists working in hospitals also work for the Dental Schools of Zagreb or Rijeka, so they are numbered in the University group. Indeed, almost all dentists teaching in

these dental schools are at the same time members of hospital clinics at the University hospital clinical centres of Zagreb and Rijeka.

There are restrictions on these dentists seeing other patients outside hospital. It is obligatory for the staff member to obtain the permit to work outside hospital, from the Director of the Clinical institution and additionally amounting to no more than 20% of working time.

Patients requiring oral surgery would either receive it from an oral surgeon in a primary care setting (in a general practice) or for more serious procedures would go to the hospitals in the bigger cities.

The complaints procedures are the same as those for dentists working in other settings.

Working in Universities and Dental Faculties

Dentists working in dental schools are salaried employees of the University (and University Clinics). Until the early 2000s they were not allowed to work elsewhere but now

they have that possibility – but only after the Director's permit (see above).

The academic titles are: Assistant, Assistant Professor, Associate Professor and Professor.

To become an Assistant Professor or higher one must obtain first the Ph.D. level and also finish a specialist clinical training.

The quality of clinical care, teaching and research in dental faculties is performed by its staff and through students working in teams under the direction of experienced teaching and academic staff.

Epidemiological surveying in Croatia would normally be done by academic dentists.

The complaints procedures are the same as those for dentists working in other settings.

Working in the Armed Forces

There are dentists working in the Armed forces but data are not obtainable.

Professional Matters

Professional associations

The Croatian Dental Chamber is an independent, professional, non-political association, founded in 1995 in Zagreb as an organisation of doctors of dental medicine. It is a legal entity empowered to represent the rights and professional common interest of dentists, as well as to care about reputation and advancement of the dental profession in the Republic of Croatia.

	Number	Year	Source
Dental Chamber	4,137	2008	Chamber
Dental Society	1,748	2008	FDI

Membership of the Chamber is obligatory by Statute. There are full-time staff based in Zagreb and also regional offices without full-time staff. The Chamber organises Continuing Education and is responsible for monitoring its uptake by dentists.

Patient complaints which have not been satisfied by the individual dental practice's complaints procedure are investigated and settled by the Chamber.

Ethics and Regulation

Doctors of dental medicine have to swear to Hippocrates' Oath, follow all medical and human standards and, above all, rightful action towards patients and colleagues. This includes using scientifically based and proven techniques and materials; this also includes a protection of patients' rights (which are also protected by the Law).

Fitness to Practise/Disciplinary Matters

Supervision of the practise of dentistry is by the Dental Chamber and by the Ministry of Health. There were about 17 complaints made against dentists in 2007.

Based on the decision of the Chamber's Committee for a misdemeanour or proven mistake, the Committee can impose an Admonition, a Public Admonition, a Financial Penalty, Amending damages, and temporary or permanent withdrawal of the licence to practise.

Data Protection

There is a Data Protection Law which ensures that no data can be issued or printed without the patient's and/or an employer's consent.

Advertising

Advertising is permitted only when a doctor opens an office, or when moving from one address to another, otherwise no advertising is permitted.

Website promotion is permitted and not under any control.

Insurance and professional indemnity

Patient indemnity insurance is not compulsory for doctors of dental medicine, but voluntary. However, the Croatian Dental Chamber includes in its annual subscription professional indemnity insurance. This provides coverage for all patient injuries caused during dental care, up to a limit of €1,500.

The compensation covers medical and dental treatment expenses, other necessary expenses caused by the injury, loss of income, pain and suffering, permanent functional defect and permanent cosmetic injuries. Claims for compensation have to be presented to the Dental Chamber's Committee.

In theory the insurance should cover for work done by Croatian dentists outside Croatia, but there is no information available about whether this has actually applied.

Corporate Dentistry

Doctors of Dental Medicine can own other non-dentist companies and non-dentists can own or part own incorporated companies and share in any profits.

Tooth Whitening

Tooth whitening in Croatia comes under the Cosmetic Directive.

Health and Safety at Work

Employees are protected by the "Law of Safety at Work". Hepatitis B vaccination is mandatory (with rare medically documented exclusions).

Regulations for Health and Safety

<i>For</i>	<i>Administered by</i>
Ionising radiation	Ministry of Health
Electrical installations	Ministry of Health
Infection control	Ministry of Health
Medical devices	Ministry of Health
Waste disposal	Ministry of Environment Protection

Ionising Radiation

There are specific regulations about radiation protection. Training in radiation protection is mandatory for the competent person in each practice – in Croatia, the dentist. The dentist must undergo continuing training, within the general requirements for continuing education.

Hazardous Waste

The EU Hazardous Waste Directive is incorporated into law and actively enforced. Amalgam separators are legally required.

Financial Matters

Retirement pensions and Healthcare

The national obligatory pension income contribution is:

- a) I pillar : 15% of gross earnings
- b) II pillar: 5 % of gross earnings.

The national voluntary income pension contribution is:

III pillar (voluntary amount)

Retirement pensions in Croatia are 60% of all working time average to a maximum of €900 per month. The official retirement age in Croatia is 65 – male, 60 – female.

Taxes

There is a national income tax (dependent on salary), a municipal tax (which varies according to municipality: in capital Zagreb 18%)

National income tax:

National income tax: 15%; 25%; 35% and 45% (on a monthly gross income over €6,000)

In addition to taxes there are retirement and health insurance contributions.

VAT/sales tax

There is a value added tax payable at a rate of 22% on purchases. Dental and medical services are excluded.

Various Financial Comparators:

No data available

Other Useful Information

<i>Main national associations and Information Centre:</i>	
<p>Hrvatska stomatološka komora Kurelceva 3, 10000 Zagreb Tel: +3851 488 6710 Fax: +3851 481 6540 Website: hsk@hsk.hr</p>	<p><i>Specialist associations and societies:</i> Dentists' scientific organisation:</p> <p>Hrvatsko stomatološko društvo Hrvatski liječnički zbor, Šubiceva 9, 10000 Zagreb Avenija Gojka Suška 6, 10040 Zagreb Tel: +385 1290 3067 Fax: +385 1286 4250 Website: hsd@kdb.hr</p>
<i>Competent Authority:</i>	<i>Publications:</i>
<p>Ministry of Health and Social Care Ksaver 200a, 10 000 Zagreb</p> <ul style="list-style-type: none"> Tel: +385 1 4607 555 Tel: +385 1 4677 005 Tel: +385 1 4698 300 <p>Prisavlje 14, 10 000 Zagreb</p> <ul style="list-style-type: none"> Tel: +385 1 6169 111 Web : http://www.mzss.hr 	<p>Hrvatski stomatološki vjesnik</p>

Dental Schools:

<p>Zagreb</p> <p>Stomatološki fakultet Sveučilišta u Zagrebu Gundulićeva 5, 10000 Zagreb Tel: +385 1480 2111 Fax: +385 1480 2158 Web: sfzg@sfzg.hr</p> <p>Dentists graduating each year: 60 Number of students: 450</p>	<p>Rijeka</p> <p>Stomatološki fakultet Sveučilišta u Rijeci Brace Branchetta 20 + 51 000 Rijeka Tel: + 385 5165 1111 Fax: + 385 5167 5806 Web: www.medri.hr/studiji/stomatologija</p> <p>Dentists graduating each year: 20 Number of students: 150</p>
<p>Split</p> <p>Stomatološki fakultet u Splitu Benkovacka 10/a - Split Tel: +385 2150 2600; 502 491 Fax: +385 2150 2490; 501 141 Mob. +385 9111 11455 www.dentalcentarmarusic.com E-mail: dental.marusic@dentalcentarmarusic.com</p> <p>Number of students: 120 (the School was only founded in 2006, so by 2008 there were no graduates)</p>	

