

Groundbreaking Systemic Changes in Primary Health Care in 2022–2026, which Shaped the New Reality in Poland

In recent years, two fundamental changes have been introduced in primary health care (PHC) in Poland: the Coordinated Care (CC) model and the preventive programme *Moje Zdrowie* (My Health). Together they form a coherent framework combining prevention, diagnostics, and chronic disease management. They also strengthen the role of PHC teams in the healthcare system.

The proposed session will cover the evaluation and experience sharing from CC and My Health programs, which may have significant importance in other European countries.

Proposed speakers:

Aleksander Biesiada, MD, PhD, Vice-President of the Polish Society of Family Medicine (PTMR), family medicine specialist

prof. Karolina Kloda, MD, PhD, Member of the Main Board of the PTMR, Special Representative for International Affairs of the PTMR, family medicine specialist

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Background:

Coordinated Care (CC), introduced in October 2022, after a pilot program (supported by World Bank), includes five diagnostic-therapeutic pathways: cardiology, pulmonology, nephrology, endocrinology, and diabetology. They are answering key health challenges in Poland. CC model expanded access to new diagnostic options in PHC facilities. As a result, patients can be diagnosed and treated earlier at the PHC level of the system. That also reduces the risk of complications. An example is the introduction of the UACR test, - performed almost 200 thousand times in the first year of the reforme.

Patient coverage by the CC model of care has been growing dynamically from approximately 602 thousand in 2023 and already 1.64 million in 2024. Coordinated Care is available not only for the adults, but also for children.

The *My Health* programme, implemented on May 2025 in Primary Care, covers every patient over the age of 20, regardless of clinical status. Its aim is not only to assess the current health condition but also to create a starting point for further prevention and early detection of chronic diseases. The patient begins participation by completing the Adult Health Balance Questionnaire, on the basis of which a tailored set of laboratory tests is assigned; this includes a basic and an extended panel (including anti-HCV), determined by the questionnaire results. In addition, individuals aged 20 to 40 have Lp(a) measured to enable a more precise assessment of cardiovascular risk. After completing these tests, the patient attends a summary visit during which the Individual Health Plan (IHP) is developed. The IHP includes tailored health-promoting interventions and a cardiovascular risk assessment performed for every patient. As part of the programme, patients also have

access to two educational or dietary consultations provided by a dietitian within PHC.

As of 28 November 2025, 2 million questionnaires had been completed, demonstrating strong interest in the programme.

The Polish Society of Family Medicine (PTMR) actively engages in the education of PHC teams and plays an important role in the implementation of both changes. Its President serves as the national consultant in family medicine, and members of the Board form expert teams directly involved in carrying out these reforms. Through courses, webinars, and expert support, the PTMR helps PHC teams effectively implement Coordinated Care and the *My Health* programme.

Proposed session plan:

- 1) 0-12 min - CC model - introduction in Polish PHC
- 2) 12-25 min - CC inside-out (about the program and new tools in PHC)
- 3) 25-40 min - My Health basics and outcomes (first year)
- 4) 40-50 min - The role of advocacy in implementing changes in PHC
- 5) 50-60 min - Discussion