MEDICAL ADVISORY SERVICES IN THE GERMAN SOCIAL HEALTH INSURANCE

Organization Structure | Role And Impact In Health Care

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image: Techniker Krankenkasse
STATUTORY HEALTH INSURANCE

population with health insurance in Germany (2016)

N = 80,271,838

- Statutory health insurance: 71,449,138; 89%
- Private health insurance: 8,772,700; 11%

own medical advisory service

MEDICAL ADVISORY SERVICES IN GERMAN SOCIAL HEALTH INSURANCE

source: www.gbe-bund.de
PHYSICIANS IN GERMANY (2016)
N = 496,240

- 151,989 ambulatory care
- 194,401 inpatient care
- 117,633 authorities/social insurance
- 22,482 others
- 9,735 without medical activity

source: Ärztestatistik, Bundesärztekammer
PHYSICIANS IN GERMANY
Those With Additional Designation In
‘Social Medicine‘ (time series)

source: www.gbe-bund.de
2 TYPES OF MEDICAL ADVISORY SERVICES
In The German Social Health Insurance

MDS on the federal level

15 autonomous MDK in 16 regions

image: from www.mdk.de
STAFF IN 15 MDK AND MDS (2017)

N = 9,369

- **physicians**: 2,299
- **care specialist staff / nurses**: 745
- **non medical health professionals**: 2,612
- **coders**: 371
- **other staff in medical section**: 48
- **administrative staff**: 74
- **other staff**: 371

source: MDS, Berichtswesen
→ gives medical advice at the regional level
  - 110 statutory health insurance funds

→ carried out 5.778.000 individual case assessments in 2017

source: MDS, Berichtswesen
MEDICAL ADVISORY SERVICES
In The Regions

→ gives medical and nursing advice at the regional level
  – 110 long term care insurance funds
→ carried out 1.886.000 individual care assessments in 2017

source: MDS, Berichtswesen
MEDICAL ADVISORY SERVICE
On The Federal Level

gives medical advice at the federal level
  – National Association of the Statutory Health Insurance and Long-Term Care Insurance Funds

provides system consultancy*
  – long term care insurance
  – quality of long term care services
  – evidence based medicine / HTA
  – quality improvement
  – medical error and patient safety
  – medical devices / medical aids
  – ambulatory care / rehabilitation
  – others

* with great support and cooperation by MDK
MEDICAL ADVISORY SERVICE
On The Federal Level

MEDICAL ADVISORY SERVICES IN GERMAN SOCIAL HEALTH INSURANCE

- system consultancy in the Federal Joint Committee (G-BA)
  - highest decision-making body of the joint self-government
  - specifies the concrete services to which patients and persons insured under SHI are guaranteed access to by law
  - quality assurance of medical care in clinics and doctors’ practices

figure: from www.g-ba.de
MEDICAL ADVISORY SERVICE
On The Federal Level

→ coordination
  - uniform assessment procedures
  - assessment guidelines
  - knowledge management
  - interest representation
  - public relations
  - reporting / statistics
  - others
MEDICAL ADVISORY SERVICES
Range Of Tasks For The Medical Doctors

→ doing jobs on behalf of
  – 110 statutory health insurance funds
  – National Association of the Statutory Health Insurance and Long Term Care Insurance Funds

→ create written products
  – individual case assessments
  – critical appraisal and reports (system consultancy)

→ support work of bodies in statutory health insurance system

→ carry out quality assessments in long term care facilities and hospitals
MEDICAL ADVISORY SERVICES
Mission And Claims

→ independence of the assessment
  - threefold guaranteed:
    - by law (social code book: SGB V)
    - by physicians order of the medical association
    - by financing structure

→ help making decisions in health care according to medical justifications

→ contribution to the improvement of the health care system
  - just, fair, social, solidarity, orientated economical
  - patient orientation
  - quality improvement, patient safety
MEDICAL ADVISORY SERVICES
Future Prospects

→ ongoing increase of tasks and services
  – e. g. quality and reimbursement of hospital services

→ reinforcement of independence from social health insurance funds
  – current political objective

→ need of continuous advances in social acceptance
  – turning away from paternalistic attitudes in favor of more patient orientation, participation and transparency

→ looking beyond borders, i. e.
  – patient safety issues
  – medical rehabilitation for people in need of care
  – joining EUMASS...?
any questions?