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Position paper 'Healthcare 2040' of the Virchowbund

Medical Assoc. calls for effective social co-payment

'The economic use of limited resources must become part of the general public's consciousness.' This sentence could have come from Prof Josef Hecken (G-BA), who formulated something similar in his keynote speech at this year's Federal General Assembly of the Virchowbund, but comes from a position paper of the Ärztebund, which raises a voice for the registered medical profession in the run-up to the upcoming federal elections. Its title: 'Healthcare 2040: Key points for good, fair and public welfare-orientated healthcare'.

>> The preamble to the 18-page document (1) rightly states that Germany is facing major demographic, economic, social and political challenges and changes.

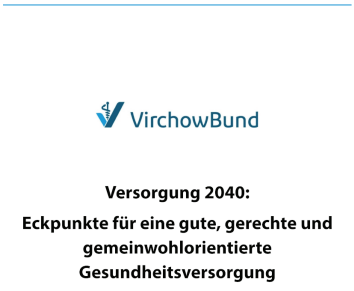
As part of the provision of services of general interest, the healthcare system is an elementary component of our society and the people in this country have great confidence in the functionality of the healthcare system.

The Virchowbund also recognises that a deterioration in care and the associated loss of trust in politics leads to uncertainty, fear and anger, which can threaten democracy as a whole. Reliable healthcare is therefore vital for our coexistence and for the continued existence of the democratic constitutional and welfare state.

However, the healthcare system is undergoing a necessary transformation process; and because everyone is affected and there are a large number of groups involved, changes can only be made in a long-term process.

According to the doctors' lobbyists, it is therefore all the more important to start the necessary discussions for the fundamental changes required today, so that they can be fully implemented in 'two to three legislative periods' and then have their full effect 'in ten to 20 years'.

First and foremost, it is important for the Virchowbund to recognise that patients currently have a free choice of doctor. The restrictive adjective 'currently' is important in this context. This is because, according to the professional association, which represents the interests of more than 12,000 doctors in private practice, those willing to set up in private practice and outpatient doctors of all specialities vis-à-vis politicians, the public, the medical self-administration and other parties involved in the healthcare system at federal and state level: 'Since this unrestricted free choice will no longer be financially viable in the future with limited resources



and uncontrolled use is also medically problematic, the free choice of doctor will have to be modified in a medically sensible way in the future.' However, communicating this to patients and the insured is the 'task of politicians and payers, not of the doctors treating them'. And further: 'In the healthcare sector, the principle of cost-effectiveness rightly applies (Section 12 (1) SGB V). This contrasts with the general promise of benefits made by politicians and health insurance companies, which has led to a 'fully comprehensive insurance' mentality.' However, according to the doctors' lobbyists, the economic use of limited resources must become part of the general public's consciousness; patients are also personally involved in the 'consumption of resources in the healthcare system'.

This statement leads to the demand that, in conjunction with the need for greater control of the patient through the levels of care, it is sensible and necessary to 'introduce elements of co-payment'. As G-BA Chairman Hecken demanded in his keynote speech, this co-payment must be socially acceptable but effective for every utilisation. He continued: 'A blanket exemption for social reasons thwarts any control effect.'

The core demands of the Virchowbund are that, in addition to sufficient funding, the structures must also be fundamentally and sustainably changed in the following areas:

- Existing resources must be used effectively through patient-centredness and patient management. This includes a new distribution of tasks between GPs and specialists in the coordination of patients. Effective management requires social involvement on the part of the patient. This must be felt at every contact. A general exemption from co-payment is counterproductive.
- Practices must be equipped with specialised staff for coordinating services. Delegation to other healthcare professions must be expanded. Patient care professions must be paid significantly more than administrative work.
- Digitalisation must be further developed in a benefit-oriented manner. A standardised, binding initial assessment in emergency and standard care is just as necessary as open interfaces and a standardised case file instead of an optional patient file. Video consultations and video consultations must be expanded.
- There will be a shortage of doctors in the future. This is why more medical school places are needed. The numerus clausus must be abolished. In addition, the training and further education of doctors must be expanded and optimised. Germany needs more doctors.e.

by: MVF Editor-in-Chief Peter Stegmaiermaier

Literature:

1: https://t1p.de/c23yg