Time for personal responsibility

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>> Current health policy is responding with unusual determination to the financial shortfall in the statutory health insurance (GKV) system and the looming supply bottlenecks in the healthcare system. In addition to the Statutory Health Insurance Savings Act, a far-reaching structural reform of primary care is expected towards the end of the year. There is certainly room for debate regarding the policy instruments under consideration. At the same time, however, there should be agreement that there is no rational alternative to far-reaching cuts. At least not if the aim is to deploy scarce resources in such a way as to achieve the greatest possible health benefits for the public.

It can no longer be denied that the measures already adopted or still under discussion will result in certain restrictions on access to services and higher financial contributions from patients. For example, through the requirement for a digital initial assessment prior to doctor's appointments and a significant increase in patient co-payments, including for prescribed medicines. A consultation fee for doctor's appointments has also been brought back into the discussion. The latter could encourage people to use limited medical resources judiciously when dealing with minor ailments. In doing so, they would also be taking shared responsibility for those patients who require medical treatment more urgently.

However, the concept of personal responsibility, which springs to mind here, is predominantly viewed in a negative light in the context of health policy considerations in Germany. It is often associated with a lack of solidarity and the antisocial shifting of costs onto patients. The Swiss-Austrian economic philosopher Gerhard Schwarz takes a very different view when he says: "Yet personal responsibility is an expression of solidarity. Anyone who looks after themselves and their loved ones so as not to be a burden on the community is acting in a spirit of solidarity. Anyone who portrays themselves as a victim and demands help for the slightest problem is anti-social. Furthermore, personal responsibility does not preclude social responsibility. These are complementary concepts."

Following this line of thought, perhaps what is often simply lacking is a shared understanding of what personal responsibility actually entails. This is supported, at the very least, by the observation that in our neighbouring countries, a higher degree of personal responsibility is regularly expected of patients, and this is perceived as a matter of course rather than a lack of solidarity.

In Switzerland, for example, patients see their GP on average twice a year, whilst the figure for Germany is many times higher. To this day, there is no evidence that our internationally record-breaking number of doctor's visits is associated with any incremental health benefit or is even cost-effective. It is unlikely that such evidence will be forthcoming in the future either, as a significant proportion of the many visits – particularly to GPs' practices – in this country relate to minor health issues that could, in principle, be managed by the patients themselves.

Many of these visits to the doctor do not arise from medical necessity, but rather from structural conditions. For instance, sick notes are among the main factors driving high patient numbers at doctors' surgeries. This often results from statutory and workplace requirements that mandate a sick note as early as the first or second day of absence from work. Equally common is the motivation to visit a GP's surgery in order to obtain a prescribed medicine cheaply or – in the case of exemption from co-payments – even supposedly 'free of charge'.

Our latest health economic analyses show that by encouraging self-medication, efficiency gains running into the billions can be achieved for the statutory health insurance system and the national economy, whilst also significantly reducing the burden on doctors' practices. However, this requires the targeted removal of existing perverse incentives: The key driver is that, in the case of 'minor ailments' such as colds, the costs of medical treatment borne by the solidarity-based health system are many times higher than the costs of appropriate self-medication with over-the-counter medicines. For patients themselves, however, self-managing health issues that can be treated at home is, on average, no more expensive than a visit to the doctor, as co-payments, travel costs and repeated use of over-the-counter medicines must be factored into the calculation.

From a purely healthcare policy perspective, too, the area of self-manageable health conditions is ideally suited to greater personal responsibility. This is not least because professional medical advice and support for patients is available in pharmacies. Pharmacies enjoy a high level of trust amongst the public and, as a low-threshold point of contact in primary care, can play a central role in self-treatment. Furthermore, pharmacies will be able to make an even greater contribution to prevention and early detection in future – and thus to promoting personal responsibility for one's own health. The expanded remit enabled by the Pharmacy Reform Act with regard to vaccinations, blood sampling, point-of-care (PoC) tests and assisted telemedicine is therefore undoubtedly a step in the right direction. Medical professional bodies are simply mistaken in their fear that pharmacies will become established as competitors to doctors' practices within the healthcare system. Rather, they will take on complementary tasks which, in the long term, are no longer affordable within the medical care system and which, in some cases, would even be classified as over-provision there.

The reorganisation of primary care will serve as a litmus test for whether the German healthcare system can successfully evolve from a culture of utilisation to a culture of responsible patient management. Ideally, this will even succeed in countering the much-cited 'comprehensive cover mentality' in Germany with a culture of personal responsibility based on solidarity in the best sense of the word. <<

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