Medical Organisations in Germany

Stefan Post

Chirurgische Klinik
Germany is a federal republic

- 16 States
  - Education
  - Culture
  - Health planning

- 17 State Chambers of Physicians
17 State Chambers of Physicians

- Statutory corporations
- Self-administration of physicians
- Compulsory membership
  - (even for non-practicing doctors)
- Responsible for
  - Registration of Medical professionals
  - Postgraduate training / medical specialisation / examinations
  - Arbitration board for patient complaints
  - ...
Postgraduate education /medical specialisation

- Regulated by state chambers of physicians
- Framework by national assembly of physicians
- Implementation (with differences) by state chambers
- No funding! Very many teaching institutions
  - Byproduct of paid work as junior doctor
- Very little structure, no supervision
  - No compulsory courses, not even for skills
- Poor exit exam
Background: German Health Insurance System

- World's oldest national social health insurance system [Bismarck 1883]
- Mandatory for anyone living in Germany
- 87.5% in the public system, 12.5% private
- The statutory health insurance is compulsory for employees with income below ≈ € 50,000
- Fees in public system connected to one's personal income by a fixed percentage
- All insured fundamentally have same benefits
Players in Public Health System (1)
(providing healthcare for 70 million Germans)

✦ Federal parliament: Laws (framework)
  • unable to refuse members, money from employers, employees, municipalities for social welfare beneficiaries
✦ 2000 hospitals
  • public, charity, private ownership
✦ Outpatient care: Registered doctors/specialists with a “seat”, organized at state level by KV, self-governed physicians' associations (safeguarding, no strikes)
Players in Public Health System (2)
(providing healthcare for 70 million Germans)

- Provider payment negotiated in complex corporatist social bargaining
- Hospitals get budget from funds, charge DRGs
- Outpatient doctors get payment only indirectly through KV (capped budgets)
- Federal Joint Committee (GBA) authorized to make binding regulations
Patient’s perspective

- Universal coverage
- Free choice of primary care doctor
- Direct and free access to specialists
- Free choice of hospitals
  - Care provided by different specialists
- Minimal waiting times
Doctor’s perspective (1)

- Undergraduate at state university
- National State Examination
- Licensed by state authorities
  - At this stage allowed to practice privately
- Compulsory member of chamber
- Postgraduate training in hospitals
- Recognized as specialist by chamber

- Choice between two professional worlds: inpatient or outpatient
Doctor’s perspective (2)

-Outpatient world:
  - Try to get a „seat“ (or stay in private system)
    - compulsory KV member
    - entrepreneur

-Inpatient world:
  - Hospital career
    - Employee, join the doctor‘s union (114,000/163,000)

-Both:
  - Join scientific societies (charities)
  - Join a professional board
  - CME by societies, board, industry, chamber
Conclusions

- German healthcare is extremely complicated, highly regulated
  - Too many players with no common interest
  - Unreformable
  - Politicians just may lose

- As a doctor in Germany
  - Members of many different organisations
  - ... some of which you do not like
Thank you!