Swiss Health System

Annual Meeting Vermont «Blueprint of Health»
April, 9th

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Head of Department of the National Prevention Programs
Health Ministry Switzerland
AGENDA

I. Characteristics of the Swiss Health System

II. Public Health: Prevention Programs

III. Summary: Assets & Challenges

IV. Future: Health Agenda 2020 (Integration)

I. Characteristics of the Swiss Health System

Social and economic context

- 4 national languages: german, french, italian, romanish
- Population: 7.7 million (2011)
- Unemployment rate: 3.9 % (2010)
- Life expectancy: 79.8 (men) / 84.6 (women)
Political and Administrative Structure: How is it the health care system organized? What are the governance structures?

- Federal state (26 cantons), unites interests of cantons and country
- Decentralization of power
- Federalism/Subsidiarity principle
- Own constitution, parliament, government and courts
- Historically a highly fragmented care system; no overarching federal framework

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Health Outcomes: Switzerland Compares Well...

**Life expectancy at birth in OECD countries**

- Data refer to year 2007.
- Information on data for Israel: http://dx.doi.org/10.1787/88893235062.

Source: OECD health data, 2010
Swiss People Feel Healthy

1.10.1. Adults' self-reported health status, 2008

But with High Health Expenditures

Source: BHSt, statistics on income and living conditions survey, Swiss health insurance, Swiss Federal Statistics Office.
What is covered and who is eligible?

Mandatory health insurance is private, but not-for-profit:

- **Universal coverage** with an extensive standardized benefit package through privately organized health insurance
- Full mobility between health insurers; obligation to **accept all applicants** (no formal risk selection)
- Implementation of a **risk equalization** scheme
- **Regulated market model**: Combination of private competition and state regulation
- **Subsidies** for low-income people

How is the Swiss Health System financed?

Four Sources of payment

1. **Social insurance**: a) Health insurance law (KVG);
   b) Others (Accident, Old age & Disability, Military insurance)
2. **State**: Government & mainly cantons
3. **Households**: out-of-pocket (cost-sharing, directly)
4. **Private insurance**: Voluntary (supplementary) insurance (LCA)

- Culture of **self-responsibility** (deductibles, co-payment, out of pocket)
- Government **premium subsidies** for people with low income
Who is responsible for Health Services?
Cantons are responsible for delivering all types of health services.

Who owns the hospitals? How are hospitals and specialists paid?
- Public Hospitals are owned and run by Cantons, municipalities or foundations (Emergency: delivered by public hospitals).
- Specialist hospitals are often privately owned.
- Hospital doctors and health professionals are salaried.
- Hospital payments are case-based since 2012 (Diagnosis-related groups (DRGs)). Cantons cover at least 55% of the remuneration.

How is primary care organized?
- Ambulatory care: mainly physicians (single-practices (60%); self-employed; payment: fee-for-service).

Integrated care in Switzerland (= horizontal integration)
- Swiss physician networks = integrated medical groups (IMG) and individual practice associations (IPA).
- Staff model: physicians employed by the insurance company owning the network.
- Group model: physicians owning the network.

All in common: gatekeeping (by GPs, call centers).
### Medical Homes

<table>
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<tr>
<th>Has a regular doctor or place of care . . .</th>
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<td>. . . and helps coordinate your care</td>
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Has a medical home*

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<tr>
<th>Has a medical home*</th>
<th>AUS</th>
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<td>74</td>
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* 1) Has a regular doctor/place; 2) able to get appointment same next day last time sick and/or regular place of care always/often calls back the same day to answer question; 3) someone at regular place of care always/often knows important information about medical history; and 4) regular practice always/often helps coordinate and arrange care from other doctors/places and/or one person responsible for all care received for chronic condition.

Source: 2011 Commonwealth Fund International Health Policy Survey of Sicker Adults in Eleven Countries.
II: Public Health

What is the area of Public Health?

The Public Health Directorate promotes “health literacy and health protection among the Swiss public”

The directorate’s work includes
- Healthy lifestyles
- prevention of non-communicable diseases and addiction
- Monitoring and Combating of communicable diseases, crisis management strategies for pandemics.
- biomedicine and high-end medicine
- legislation & implementation and enforcement.

Department of Prevention Programs

55 Collaborators in 5 Sections:
(1) Research (2) Alcohol (3) Tobacco (4) Physical Activity & Diet, (5) Illegal Drugs
<table>
<thead>
<tr>
<th>Legal foundation</th>
<th>Order of Federal Government or Parliament</th>
<th>Federal and cantonal laws</th>
<th>International Strategies, Frameworks</th>
<th>WHO-Resolution (WHA 58.26)</th>
</tr>
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<tbody>
<tr>
<td><strong>Main goals</strong></td>
<td>Prevention of chronic diseases, addiction disorders and violence/accidents</td>
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<tr>
<td><strong>Tasks</strong></td>
<td>1) Governance</td>
<td>2) National Co-ordination</td>
<td>3) Monitoring</td>
<td>4) Financing &amp; Resources</td>
</tr>
<tr>
<td><strong>Actors</strong></td>
<td>Federal Departments (Economy, Traffic, Education)</td>
<td>Cantons (cities, communities)</td>
<td>NGOs</td>
<td>Industry</td>
</tr>
<tr>
<td><strong>Fields of action</strong></td>
<td>Information / Awareness / Public relations</td>
<td>Health Promotion &amp; Prevention</td>
<td>Early Detection &amp; Harm reduction</td>
<td>Therapy &amp; Counselling</td>
</tr>
<tr>
<td><strong>Target groups/ Settings</strong></td>
<td>Settings (school/work, leisure)</td>
<td>Public</td>
<td>People at risk</td>
<td>Authorities (national, cantonal, communal)</td>
</tr>
<tr>
<td><strong>Outcome/ Metrics</strong></td>
<td>National Monitoring (Substance abuse, physical activity, nutrition/diet), Evaluation of programs, Surveys on indicators in Health, Cost-/Benefit studies, Hospital data etc.</td>
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1. Approach: Health in all policies “Make the healthy choice – the easy choice“
<table>
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<tr>
<th>Behavioural / Individual</th>
<th>Structural / Environmental</th>
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<tbody>
<tr>
<td>• Awareness Campaign</td>
<td>• Bike paths</td>
</tr>
<tr>
<td>• Projects in Schools,</td>
<td>• Food composition</td>
</tr>
<tr>
<td>Workplace, communities</td>
<td>• Healthy food in Cafeterias</td>
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<tr>
<td>• Obesity guidelines</td>
<td>• Tax on cigarettes, alcohol</td>
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<tr>
<td>• Health Coaching</td>
<td>• Smoking ban…</td>
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<tr>
<td>• Smoking cessation</td>
<td>• …</td>
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<td>• Swiss Mobil…</td>
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<td>• …</td>
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Examples: Public-private Partnership

You are:

• Involved in supermarkets and plan to rearrange the shelves in all your subsidiaries to highlight products low in calories or other products derived from local agriculture.

• An institutional player bringing together experts in urban planning working on planning models favouring the movement of individuals.

• A large company which has decided to adopt quality standards for healthy nutrition.

• A well-known maker of sports articles and you are setting up specific actions regardless of the physical condition of the individual.

• A big company in the agro-food industry and are developing a large-scale initiative to reduce the consumption of sugar or salt.

• A public transport company and are launching actions in favour of access of the population to regions for open-air activities.

There are many examples, but the potential is inexhaustible…
Welcome to SwitzerlandMobility, the network for non-motorized traffic

- Hiking in Switzerland
- Cycling in Switzerland
- Mountainbiking in Switzerland
- Skating in Switzerland
- Canoeing in Switzerland
- slowUp

Map

«Alcohol Awareness Campaign»
Week of Dialogue 2013
2. Approach: Integration & Continuum of Care

Comprehensive model of chronic disease prevention and control

<table>
<thead>
<tr>
<th>Stage of disease continuum</th>
<th>Whole population</th>
<th>Early detection</th>
<th>Established disease</th>
<th>Chronic disease management</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level prevention</td>
<td>Primary Prevention</td>
<td>Secondary Prevention</td>
<td>Tertiary Prevention</td>
<td>Quaternary Prevention</td>
</tr>
<tr>
<td>Input of intervention</td>
<td>Public Health</td>
<td>Primary health care</td>
<td>Specialist services</td>
<td>Community care</td>
</tr>
<tr>
<td>Sector services</td>
<td>Health Promotion</td>
<td>Health Promotion</td>
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<td>Health Promotion</td>
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Example: Health Coaching
Example of Integration: Drug Policy

1. **Courage**: readiness to learn - guided as a bottom up process
2. **Change**: Paradigm of acceptance instead of abstinence
3. **Multidisciplinary**: cooperation policing and harm reduction

Public Health: Funding

2010 Public Health Expenditure per Capita
(US$ purchasing power parity-adjusted)

- Cost of illness CH: 97.7%
- Prevention: 2.3%
III: Summary: Assets of the Swiss Health System

- High life expectancy & good health outcomes (worldwide)
- Universal health insurance coverage, access to a broad benefit package
- High patient satisfaction, hardly any wait-time
- No accumulated deficits
- Health is one of the most important economic sectors
- Organization of primary care («horizontal integration») is growing
- Cantons as «experimental lab» & good collaboration structures
- Strong Public Health Programs
...but:

- This success comes with a high financial cost (over 11.4% of GNP)
- Burden for middle-income families!

- Complex health system governance: fragmented responsibility
  
  Makes it difficult to
  - Develop consistent national policies
  - Coordinate
  - Reform!

Further Challenges

- Demographic challenges (aging)
- Increase in chronic diseases prevalence
- Payment reform (FFS persistent) needed
- E-Health just starting
- Scattered and partially lacking data
- Few interprofessional models & dependence on foreign health professionals

→ Integrated Health System («vertical integration») = key!

The four priority areas for policy action

Publication: January 2013

HAPPY TO LEARN FROM YOU HOW TO FLY!

THANK YOU!