

(Des-)Integration der Versorgung im internationalen Vergleich

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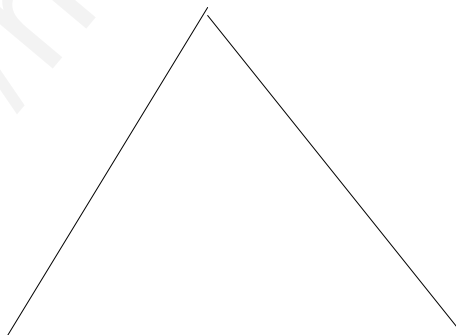
FG Management im Gesundheitswesen, Technische Universität Berlin
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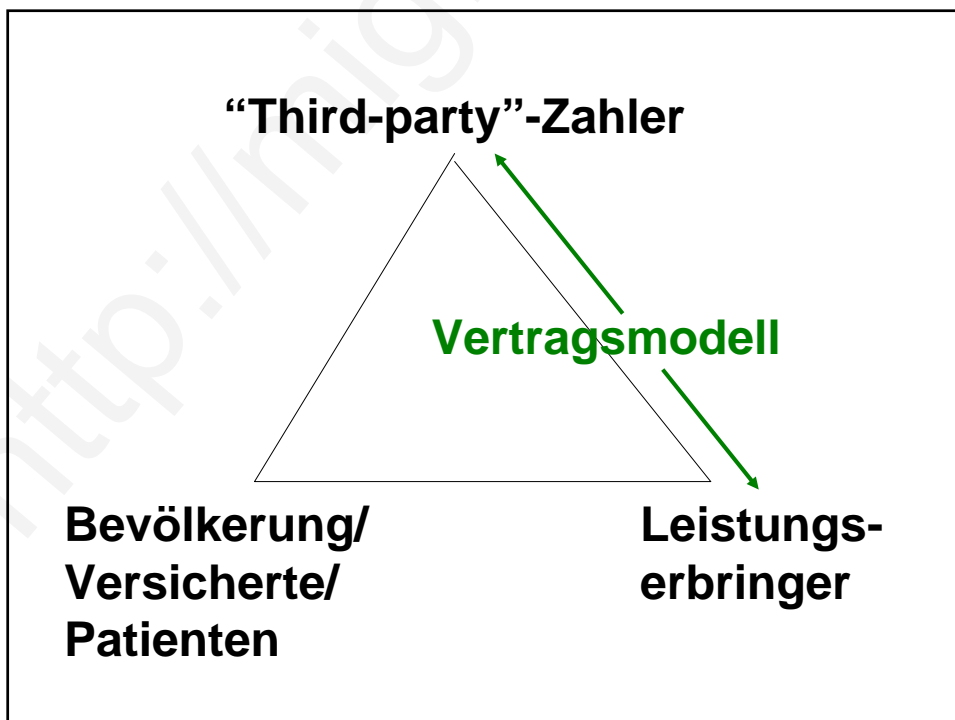
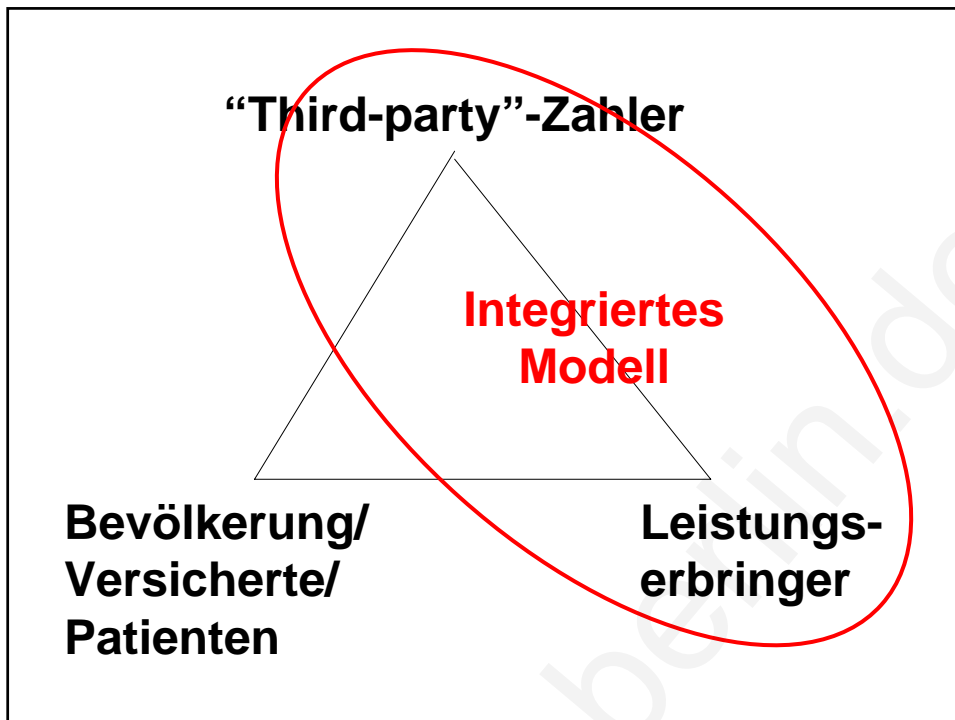


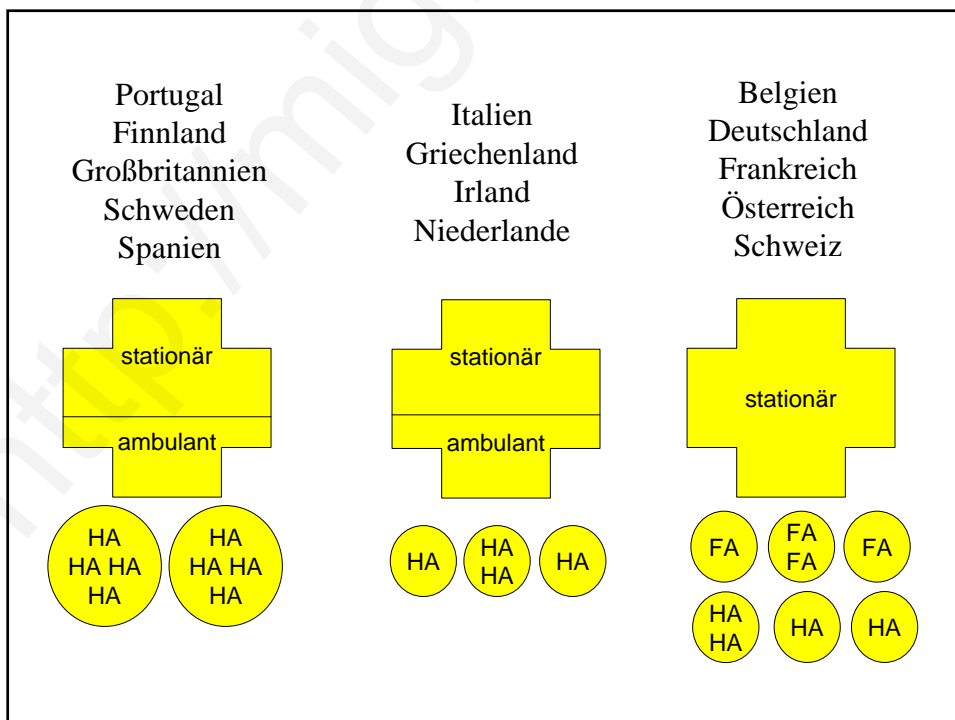
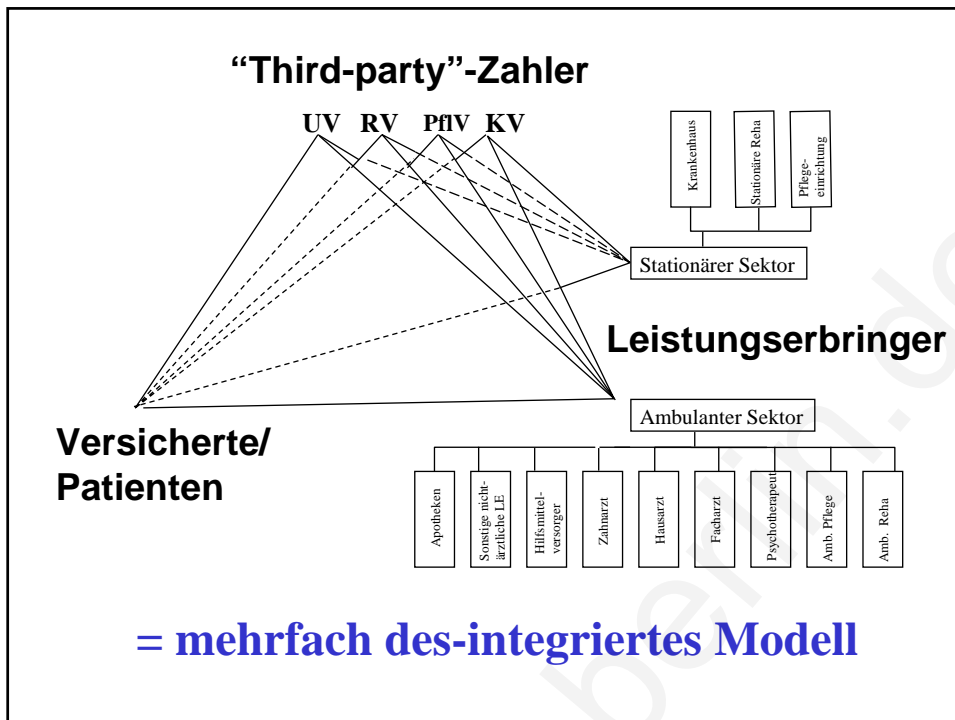
“Third-party”-Zahler

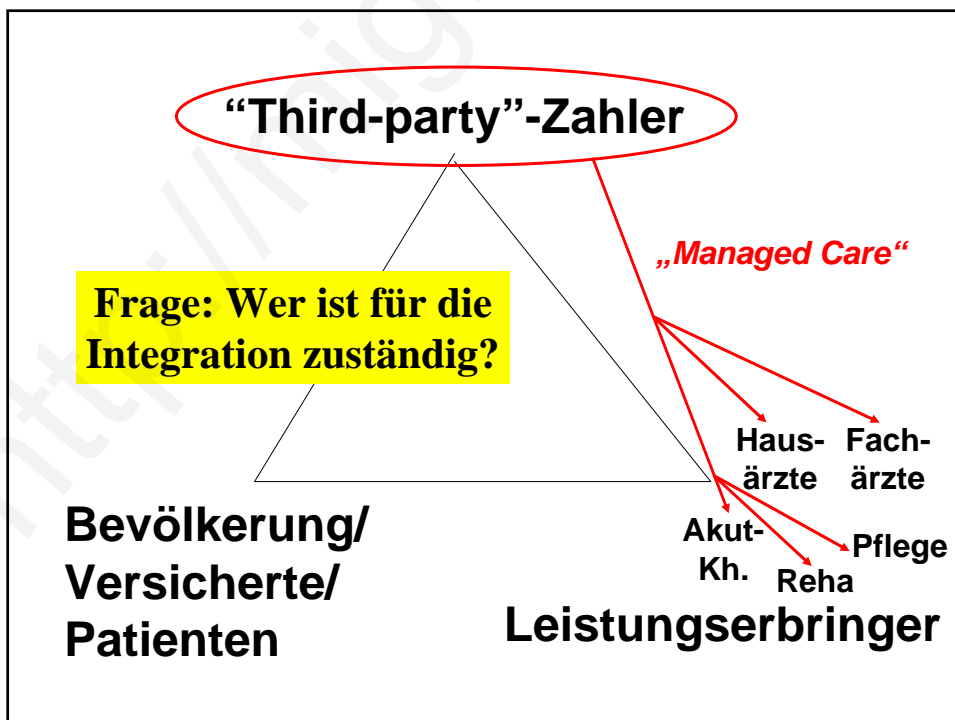
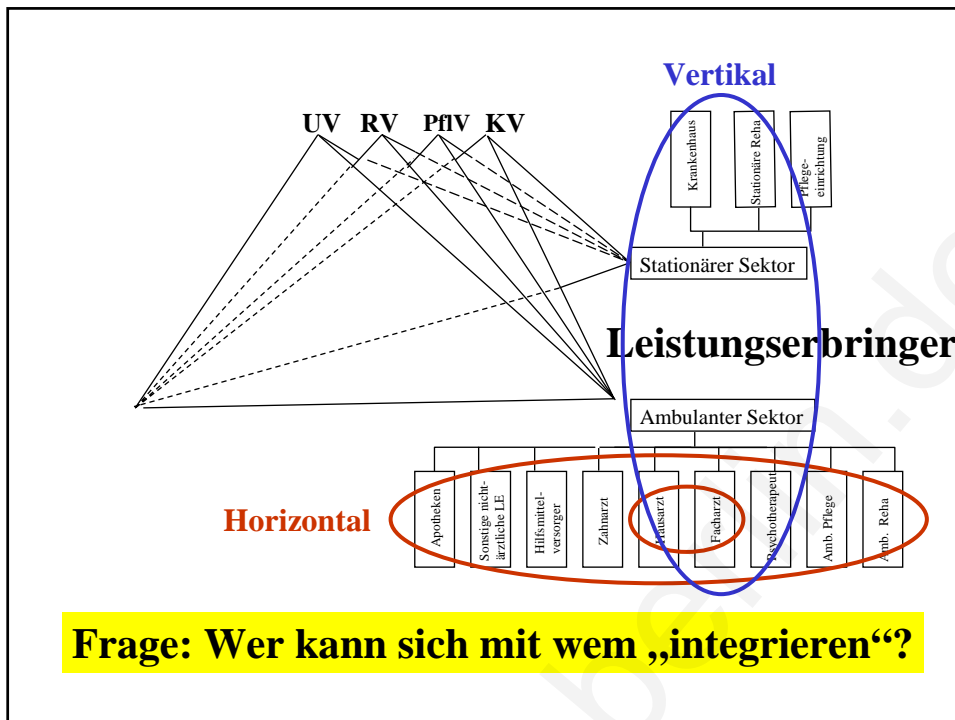


**Bevölkerung/
Versicherte/
Patienten**

**Leistungs-
erbringer**







US evidence on managed care

Performance Dimension	Verdicts				Number of studies	Number of observations
	MCO Better ¹	No difference	MCO Worse ²	Inconclusive ³		
Utilisation					42	101
Hospital admission rate	■					
Hospital length of stay	■					
Hospital days/enrollee	■					
Doctor visits/enrollee				■		
Discretionary services use	■					
Prescription drug use				■		
Charges / expenditures					29	41
Preventive screening & health promotion	■				9	30
Quality of care					23	149
Structure		■	■			
Process				■		
Outcome		■	■			
Enrollee satisfaction			■		4	37
Equity of care					20	147
Children	■					
Low-income women		■	■			
Elderly				■		
Specific conditions						
Cancer	■				11	45
Myocardial infarction	■				4	20
Depression				■	5	21
Chronic disease ⁴	■				16	134

1. MCO stands for managed care organisation. 2. Better defined as: less utilisation, more preventive care, better quality, greater satisfaction. Equity and specific condition assessments amalgamate evidence across the other dimensions to form a judgment of overall performance. 3. In contrast to a finding of no significant difference between MCO and FFS performance, this refers to mixed evidence which precludes drawing conclusions. 4. Includes osteo- and rheumatoid arthritis, diabetes and

“Third-party”-Zahler

Frage: Wer ist für die Integration zuständig?

Bevölkerung/
Versicherte/
Patienten

Management-
gesellschaft

Haus-
ärzte

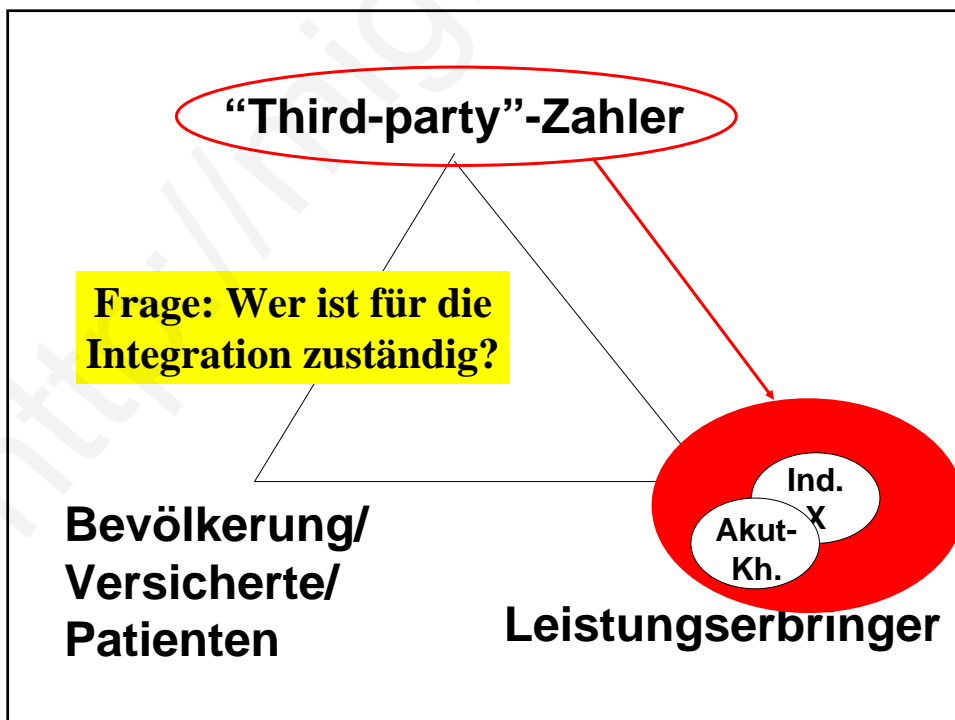
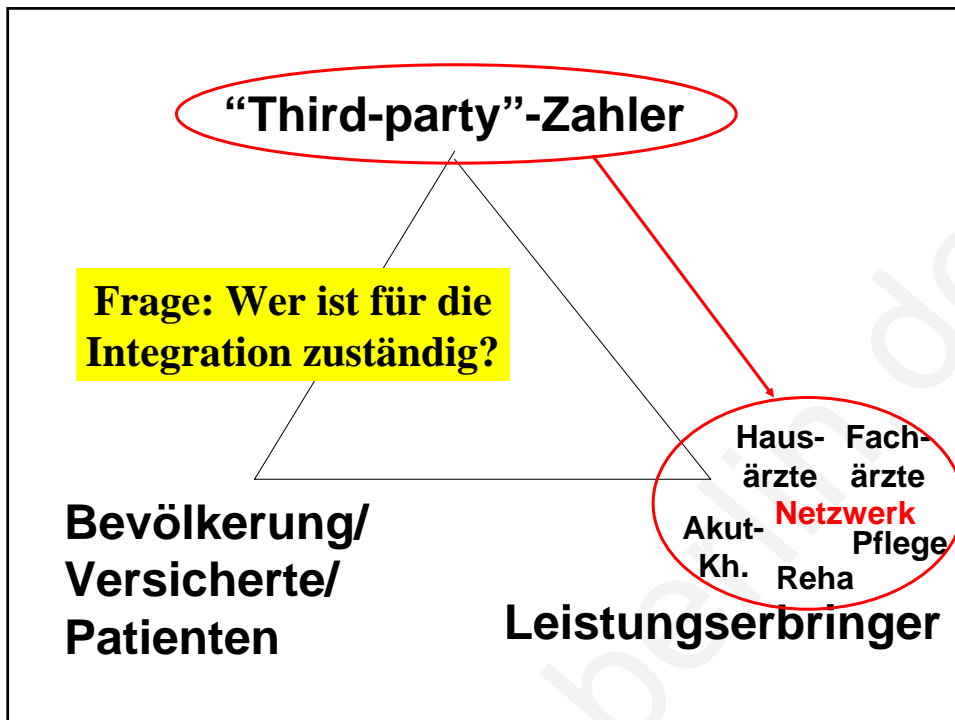
Fach-
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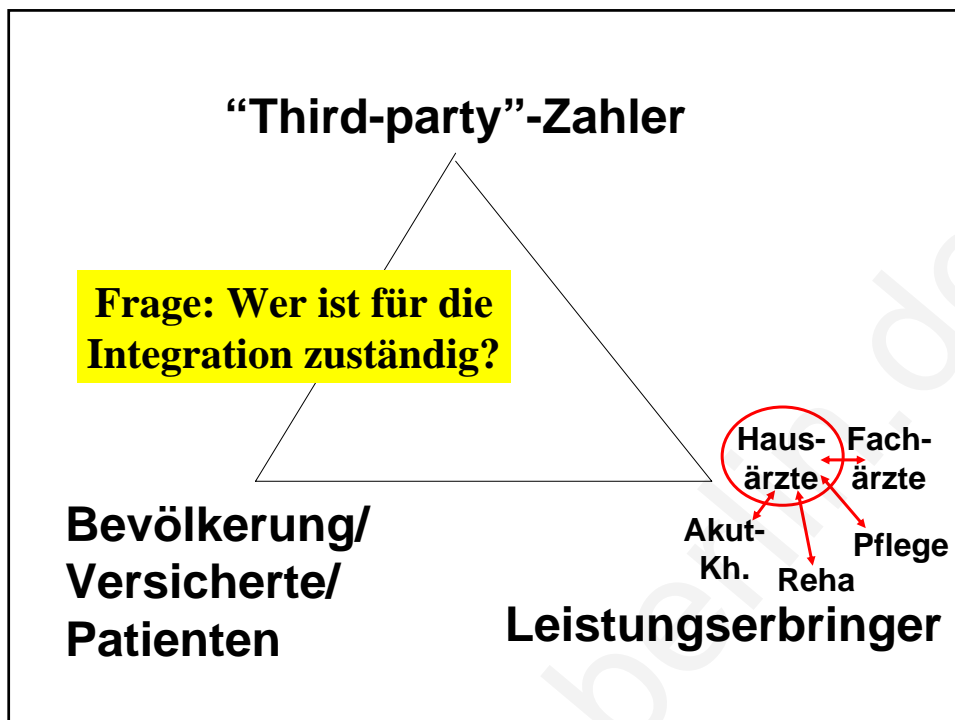
Akut-
Kh.

Reha

Pflege

Leistungserbringer





Versicherte in der Schweiz in Versicherungsformen mit eingeschränkter Wahl der Leistungserbringer (2004)

	Versicherte in Hausarztmodellen in %	Versicherte in HMOs in %	Versicherte dieser Formen in % der Gesamtversicherten
Aargau	13,6	0,5	14,1
Appenzell-Innerrhoden und Ausserrhoden	3,4	-	3,4
Bern	3,3	1,2	4,5
Basel-Land	4,5	-	4,5
Basel-Stadt	7,9	6,5	14,4
Fribourg	0,9	-	0,9
Genf	5,8	0,6	6,4
Graubünden	10,1	-	10,1
Luzern	0,9	3,5	4,4
St.Gallen	13,7	4,2	17,9
Schaffhausen	15,6	-	15,6
Schwyz	1,0	-	1,0
Thurgau	25,4	-	25,4
Vaud	3,4	-	3,4
Zug	-	2,5	2,5
Zürich	4,4	2,8	7,2
Insgesamt 7 Kantone	-	-	-
Schweiz gesamt	5,4	1,3	6,7

Quelle: Bundesamt für Gesundheit der Schweiz. Bestandsaufnahme Managed Care Modelle 2004



Technische Universität Berlin



**Präsentation
und weiteres Material
ist verfügbar auf:**

<http://mig.tu-berlin.de>

www.observatory.dk



Deutschsprachige Artikel
zu Gesundheitssystemen
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www.healthcaresystems.de