

Preface

An integrated health care system as a location factor

When it comes to health care, Austria needs not fear comparison with other countries. Still, there exists a necessity for reforms, in particular at the level of the 'Lander'.

To be clear on this subject, it has to be stressed that the financial difficulties of the public institutions and health insurance funds ought not to be the reason for deviating from the achieved high health standards. A deterioration in health care leads to more sick-leaves, increased health-related early retirements and impaired performance on the job, which in turn is not only a humanitarian problem but also a burden to the economy. The best possible public health care is, therefore, not only an ethical necessity; it is an investment in the business location Austria.

However, this should not lead to the conclusion that reforms and cost-saving measures in the health care system are unnecessary. On the contrary, international studies and experts have concluded that Austria has too many acute care beds in its hospitals. This pronounced imbalance towards hospital care provision is unnecessarily expensive. In the out-patient setting, which is primarily financed through the public health insurance funds; there too exists a wide array of potential improvements in efficiency and effectiveness.

At the moment, the funds for the Austrian health care system, which amount to 27 billion Euros including private spending (approximately 24%), go into different pockets. This causes not only friction between the in-patient and out-patient setting; it also incites unwanted patient behaviour, e.g. the possibility of getting double examinations.

Hence, the funding out of one single pocket of all health care services (prevention, cure, rehabilitation, long-term and palliative care) is vital. This should guarantee a patient-oriented provision of services and strengthen previously neglected areas like prevention.

Currently, two health care systems exist alongside each other, the in-patient and the out-patient setting, which are characterised by a lack of mutual planning and controlling and an abundance of complex and expensive parallel structures. As a consequence, unnecessary additional costs and quality defects incur. The mutual planning, controlling and funding out of a single pocket thus is the answer.

As the capital city, Vienna has a highly developed and structured health care system. In the past 20 years, the Viennese hospital reform has been implemented, introducing the health and hospital plan 1990 and the Association of Viennese Municipal Hospitals and Long-term Care Facilities (Wiener Krankenanstaltenverbund, KAV). Concerning the collaboration with the federal level, however, room for improvement exists. In the current programme of the federal government, pilot regions of integrated care are described to enable the creation of health care models and controlling mechanisms across political districts and 'Lander'. Consequently, this should render the steering and planning of service provision more efficient and improve the quality for patients. Furthermore, this is expected to reduce the present strong fragmentation within the Austrian health care system. However, we will have to make additional steps beyond the ones described. Specifically, an augmented utilisation of modern medical technology and a stronger customer orientation is called for (i.e. the use of e-health).

Only if the health care system is integrated across all sectors and duplicating processes are eliminated can a reduction in health care provision be averted. We need visions and foremost, sustainable and targeted measures, for the trend-setting sector of health. The potential for enhancement exists—one only has to realise it.

Georg Kapsch,
*President, Federation of Austrian Industries,
Regional Group Vienna*