



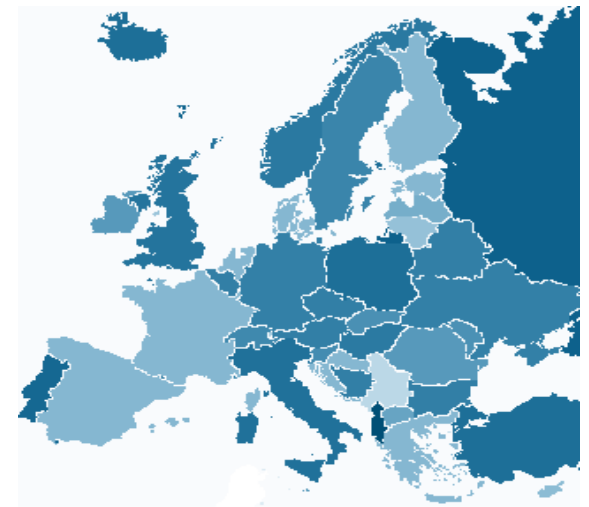
# **EU Patients Rights Day 2015**

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Secretary General  
European Union of Private Hospitals  
(UEHP)**



# Introduction to UEHP

- Today UEHP represents more than 3.500 hospitals with millions of employees from 18 European Associations: France, Italy, Germany, Spain, Poland, Austria, Belgium, Portugal, Bulgaria, Hungary, Lithuania, Ireland, Monaco, Switzerland, Greece, Czech Republic, Serbia and Croatia.
- The majority of UEHP hospitals works in agreement with public health systems: receiving public patients with same conditions and rights.
- The UEHP as a European association aims to promote significant values for both patients and health operators in the European Union, such as:
  - The patient's free choice of the place of his or her treatment (Art 5 of the Chart of Patients Right)
  - The patient's right to quality and safety of healthcare.
  - The equal and fair competition as a factor of effectiveness and quality
  - The financial sustainability of health systems.



# Landscape in EU Private Health Care

## North

- A fair competition between providers

## East

- Access to health care market for private investors

## South

- Late payment by social insurance

## NEW TRENDS IN EU

International hospitals chains

Public Private Partnership (PPP)

**Increasing National Private Cares in National Health delivery**

# Private health care inside EU



| ITALY             | N. hospitals | N. Beds       |
|-------------------|--------------|---------------|
| Public hospitals  | 542          | 149 024       |
| Private hospitals | <b>621</b>   | <b>65 524</b> |
| <b>Total</b>      | 1 163        | 214.548       |

The private sector in Italy treats 20% of all patients. Patients can chose public or private both free, covered by National Social Security card. Private hospitals are in agreement with national public authorities. Tariffs are imposed by the Government and fixed for several years



| FRANCE            | N. hospitals | N. Beds        |
|-------------------|--------------|----------------|
| Public hospitals  | 947          | 258 256        |
| Private hospitals | <b>1 747</b> | <b>156 269</b> |
| <b>Total</b>      | 2 694        | 414 525        |

50% of all French surgery and 50% of all oncology care are provided in private hospitals. Patients can chose public or private both free, covered by National Social Security card. Private hospitals are in agreement with national public authorities. Tariffs are discussed every year with the Government.



| GERMANY           | N. hospitals | N. Beds       |
|-------------------|--------------|---------------|
| Public hospitals  | 529          | 221 500       |
| Private hospitals | <b>572</b>   | <b>76 400</b> |
| <b>Total*)</b>    | 1101         | 297 900       |

Private hospitals not only deliver a significant share of the hospital services but also contribute in large scale to the national economy by yearly paying 100 Mill. € corporate income tax (sourced: RWI, 2009).

# Private health care inside EU



| POLAND            | N. hospitals | N. Beds |
|-------------------|--------------|---------|
| Public hospitals  | 526          | 165 000 |
| Private hospitals | 228          | 18 000  |
| Total             | 754          | 183 000 |

The 60% of health care is covered by public health insurance while the 40% is given by out of pocket . Poland is one of OECD countries where out-of-pocket expenditure is the largest. So private resources are very important to finance health care and there is the absence of a formal private insurance system.



| SPAIN             | N. hospitals | N. Beds |
|-------------------|--------------|---------|
| Public hospitals  | 362          | 109 600 |
| Private hospitals | 449          | 51 820  |
| Total             | 811          | 161 420 |

3 systems due to Regional Federalist lows:

- Public&Private
- Public
- Public managed by Privates

The private system has contributed to reduce the health expenditure, in Madrid Region for example the cost passed by 12% of GDP to 6%.

# The share of private sector is about 20% of all beds

| Beds           | 2003    | 2005    | 2007    | 2009    | 2011    | 2012  | Total            | Public           | % public     | Not profit     | % not profit  | For profit     | % profit     |
|----------------|---------|---------|---------|---------|---------|-------|------------------|------------------|--------------|----------------|---------------|----------------|--------------|
| Bulgarie       | :       | 49 626  | 48 749  | 50 041  | 47 391  | :     | 47 391           | 41 128           | 86,8%        | 0              | 0,0%          | 6 263          | 13,2%        |
| Rép tchèque    | :       | :       | :       | 74 607  | :       | :     | 74 607           | 63 999           | 85,8%        | 465            | 0,6%          | 10 143         | 13,6%        |
| Danemark       | 22 281  | 20 902  | 20 159  | 19 296  | :       | :     | 19 405           | 18 536           | 95,5%        | 468            | 2,4%          | 401            | 2,1%         |
| Allemagne      | 721 690 | 698 303 | 677 799 | 674 830 | 672 573 | :     | 672 573          | 273 382          | 40,6%        | 198 911        | 29,6%         | 200 280        | 29,8%        |
| Estonie        | 7 857   | 7 292   | 7 349   | 7 166   | 7 114   | :     | 7 114            | 6 355            | 89,3%        | 406            | 5,7%          | 353            | 5,0%         |
| Grèce          | 51 762  | 52 511  | 53 888  | 54 704  | :       | :     | 54 704           | 38 115           | 69,7%        | 1 465          | 2,7%          | 15 124         | 27,6%        |
| Espagne        | 144 916 | 145 863 | 146 840 | 146 310 | 142 632 | :     | 142 632          | 98 776           | 69,3%        | 18 132         | 12,7%         | 25 724         | 18,0%        |
| France         | 468 418 | 455 175 | 450 615 | 429 674 | 415 209 | :     | 415 209          | 258 465          | 62,2%        | 58 444         | 14,1%         | 98 300         | 23,7%        |
| Croatie        | :       | :       | :       | :       | 25 487  | :     | 25 487           | 25 344           | 99,4%        | 0              | 0,0%          | 143            | 0,6%         |
| Italie         | 239 566 | 234 375 | 228 286 | 218 264 | 207 947 | :     | 207 947          | 142 390          | 68,5%        | 7 560          | 3,6%          | 57 997         | 27,9%        |
| Chypre         | 3 083   | 2 847   | 2 916   | 3 040   | 2 988   | :     | 2 988            | 1 517            | 50,8%        | 0              | 0,0%          | 1 471          | 49,2%        |
| Lettonie       | 18 169  | 17 677  | 17 233  | 14 434  | 12 111  | :     | 12 111           | 11 061           | 91,3%        | 0              | 0,0%          | 1 050          | 8,7%         |
| Lituanie       | 26 823  | 24 200  | 23 233  | 22 719  | 22 549  | :     | 22 549           | 22 434           | 99,5%        | 0              | 0,0%          | 115            | 0,5%         |
| Hongrie        | 79 368  | 79 226  | 72 260  | 71 600  | 71 669  | :     | 71 669           | 69 427           | 96,9%        | 2 055          | 2,9%          | 187            | 0,3%         |
| Malte          | :       | :       | :       | 1 993   | 1 857   | 2 007 | 2 007            | 1 863            | 95,4%        | 0              | 0,0%          | 144            | 7,2%         |
| Pays-Bas       | 73 011  | 72 698  | 77 680  | 76 980  | :       | :     | 76 980           | 0                | 0,0%         | 76 980         | 100,0%        | 0              | 0,0%         |
| Autriche       | 62 806  | 63 248  | 64 307  | 64 069  | 64 417  | :     | 64 417           | 45 381           | 70,4%        | 11 450         | 17,8%         | 7 586          | 11,8%        |
| Pologne        | :       | :       | 244 877 | 253 815 | 252 281 | :     | 252 281          | 184 549          | 73,2%        | 0              | 0,0%          | 67 732         | 26,8%        |
| Portugal       | 37 459  | 37 372  | 36 220  | 35 635  | 35 671  | :     | 35 671           | 25 898           | 72,6%        | 7 074          | 19,8%         | 2 699          | 7,6%         |
| Roumanie       | 146 620 | 146 529 | 140 889 | 142 203 | 130 970 | :     | 130 970          | 127 109          | 97,1%        | 234            | 0,2%          | 3 627          | 2,8%         |
| Slovénie       | :       | :       | :       | :       | 9 493   | :     | 9 493            | 9 391            | 98,9%        | 0              | 0,0%          | 102            | 1,1%         |
| Finlande       | 37 759  | 37 001  | 35 609  | 33 379  | 29 751  | :     | 29 751           | 28 306           | 95,1%        | 0              | 0,0%          | 1 445          | 4,9%         |
| Royaume-Uni    | 235 506 | 224 879 | 207 789 | 203 387 | 182 104 | :     | 182 104          | 182 104          | 100,0%       | 0              | 0,0%          | 0              | 0,0%         |
| <b>EU "23"</b> |         |         |         |         |         |       | <b>2 560 060</b> | <b>1 675 530</b> | <b>65,4%</b> | <b>383 644</b> | <b>15,00%</b> | <b>500 886</b> | <b>19,6%</b> |

# Evolution in France, 2013 *DREES and ATIH, data 2014*

*One third of all stays, half of surgery, 80% of day care surgery in French Private Sector*



| France | Hospitals |         |       | Beds    |         |         | Stays      |            |           | ALOS |      |
|--------|-----------|---------|-------|---------|---------|---------|------------|------------|-----------|------|------|
|        | public    | private | total | public  | private | total   | total      | public     | private   | pub  | priv |
| 2002   | 1 011     | 2 014   | 3 025 | 338 548 | 178 266 | 516 814 | 15 732 819 | 9 686 407  | 6 046 412 | 4,9  | 3,1  |
| 2003   | 1 008     | 1 978   | 2 986 | 334 308 | 177 280 | 511 588 | 15 930 489 | 9 825 556  | 6 104 933 | 4,8  | 2,9  |
| 2004   | 997       | 1 935   | 2 932 | 329 080 | 176 263 | 505 343 | 16 260 570 | 10 151 763 | 6 108 807 | 4,7  | 2,8  |
| 2005   | 994       | 1 896   | 2 890 | 325 468 | 174 721 | 500 189 | 20 785 158 | 13 461 946 | 7 323 212 | 3,8  | 2,5  |
| 2006   | 987       | 1 867   | 2 854 | 320 104 | 174 301 | 494 405 | 23 821 476 | 14 894 769 | 8 926 707 | 3,2  | 1,8  |
| 2007   | 1 006     | 1 871   | 2 877 | 324 109 | 177 532 | 501 641 | 23 367 314 | 14 798 043 | 8 569 271 | 3,2  | 1,8  |
| 2008   | 1 001     | 1 837   | 2 838 | 323 815 | 177 794 | 501 609 | 23 781 314 | 15 179 730 | 8 601 584 | 3,2  | 1,8  |
| 2009   | 983       | 1 801   | 2 784 | 319 845 | 179 111 | 498 956 | 24 300 476 | 15 588 720 | 8 711 756 | 3,1  | 1,7  |
| 2010   | 966       | 1 785   | 2 751 | 307 455 | 180 551 | 488 006 | 24 709 773 | 15 871 084 | 8 838 689 | 3,1  | 1,6  |
| 2011   | 956       | 1 754   | 2 710 | 298 403 | 181 422 | 479 825 | 25 259 627 | 16 277 741 | 8 981 886 | 3,1  | 1,6  |
| 2012   | 947       | 1 747   | 2 694 | 297 018 | 182 529 | 479 547 | 25 829 535 | 16 634 530 | 9 195 005 | 3,0  | 1,5  |
| 2013   | 931       | 1 729   | 2 660 | 298 290 | 184 599 | 482 889 |            |            |           |      |      |



# Private health care in Agreement with national public health Authorities

➤ Agreements, Quality controls and Tariffs prices are decided

By the National health Service :

- Tariffs for public patients in private hospitals are imposed and lower than in the public hospitals
- 15% of the Health expenditure delivered to the Private sector generates 25% of the Health delivery
- Public Patients have the choice, Private Hospital is completely free
- Competition Public – Private on Quality Innovation and Efficiency





# Increasing National Private Cares in National Social Health delivery

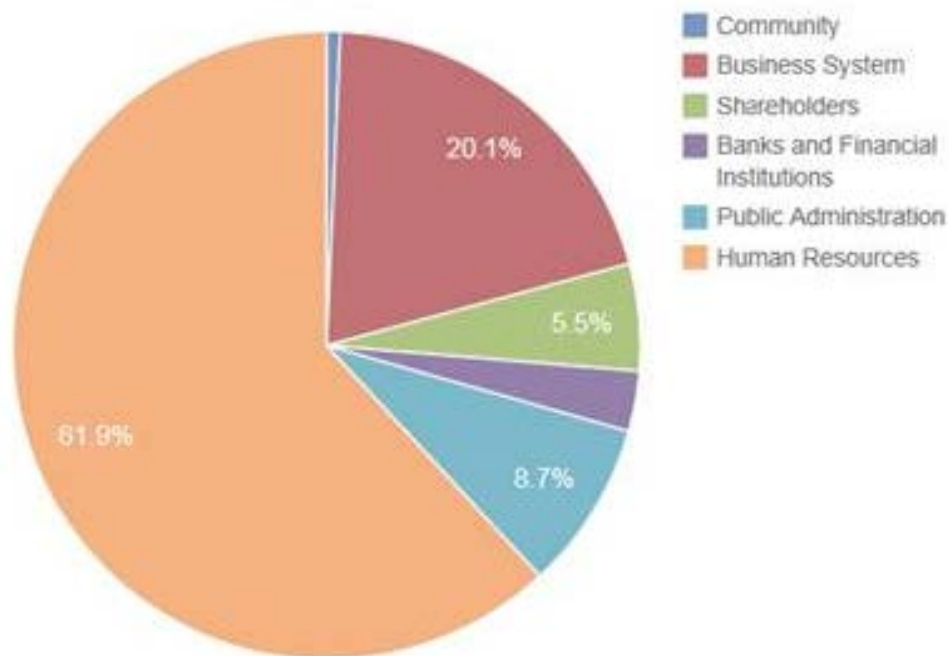
All recent national health reforms across Europe are opening to the private sector  
*i.e. UK: 100 private hospitals commissioned to treat public patients 2012*

## Why?

Long Waiting Lists, high health expenditure, aging population, economic crisis, risk of bankruptcy of welfare systems

The private health sector is a driver for the economy - competition is a driver for innovation: Health is a public mission however the delivery of such health services should be under competition rules

Deloitte and Touche report 2014 of the social health sector says that every euro invested in the private sector has a return of 1.30 euros to the national economy.



| TABLE OF THE ALLOCATION OF ADDED VALUE                  |
|---|
|   |
| TOTAL ADDED VALUE                                       |
| A – Remuneration of personnel:                          |
| Consultants   |
| Employees:  |
| direct remuneration;                                    |
| indirect remuneration;                                  |
| profit-sharing schemes.                                 |
| B – Remuneration of governments and public institution: |
| Direct taxation   |
| Indirect taxation                                       |
| - grants for operating expenses                         |
| C – Remuneration of debt:                               |
| Financial charges on short-term lending                 |
| Financial charges on long-term lending                  |
| D – Remuneration of venture capital                     |
| Dividends (net profit distributed to shareholders)      |
| E – Remuneration of the company                         |
| +/- variations in reserves                              |
| (Amortization/depreciation)                             |
| F – Donations   |
| TOTAL NET ADDED VALUE                                   |



# European Health Expenditure and Welfare

15% of the total expenditure of the EU countries concerns Health  
950 Billions Euros spent in 2012 on Health Services in Europe  
Ageing population and Economic crises are undermining the Welfare  
systems in all Europe, Risk of Welfare Bankruptcy

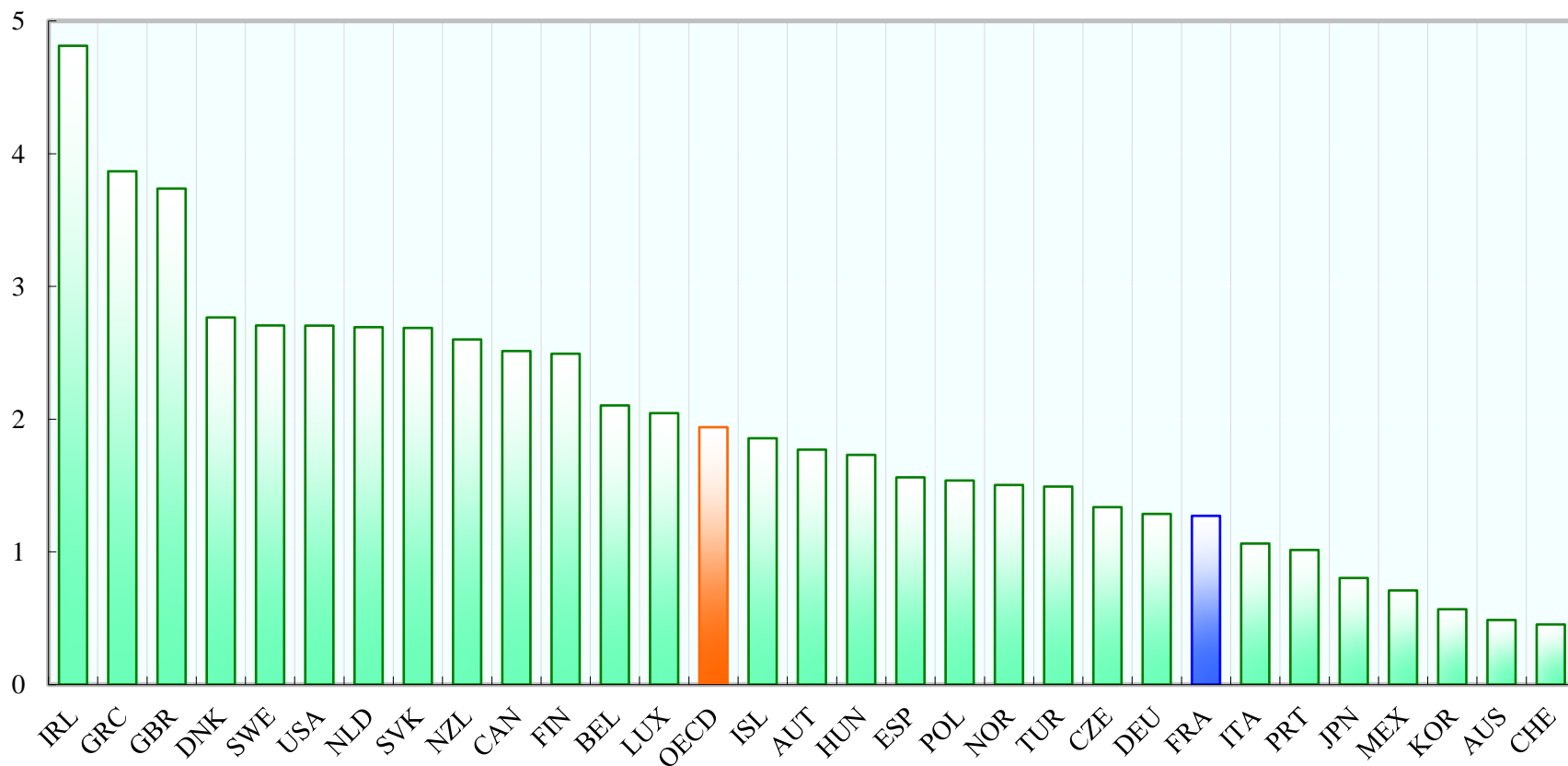
**What we can do in order to Keep Health inside the Welfare?**

**How we can assure the future of long term care (Free Citizen  
Access, Quality and Financial Sustainability)?**

We need to control the waste of money and to start speaking about  
Efficiency . We have to promote efficient hospitals and to close  
the one wasting money paid by citizen taxes.

# Potential savings from greater efficiency in health care spending (in% of GDP) *OECD data, 10 April 2012*

% 2017 GDP





# European Health Expenditure and European Commission

EC DG Sanco edited a document in 2012 called : Investing in Health

EC DG Sanco created the Expert Panel Group on better ways on  
Investing in health

Efficiency, is obtained by strategic investment and optimal management in  
hospitals

On the Contrary all MS decided for linear cuts on Health services, without any  
efficiency promotion :

Thousands of beds cut in all EU

General Reduction of 2% of the Health services in main countries

Country Specific Recommendations : EC should recommend to MS to  
stop with linear cuts of health services for citizen and to start  
promoting Efficiency.



## Prevention, Innovation, E Health, Quality and Cross Border Patients Directive

Prevention is very important for an Healthy Ageing population but it is not enough

EU Prevention policies do not arrive directly to the citizen

You can get a cancer even if you don't smoke

We still need Innovation and new Technologies once we will be treated inside Hospitals

We are facing new medical treatments revolution for Epatite C and melanoma, new cures that could save lives but too much expensive to be covered by the NHS and so not considered due to a lack of Investments in Innovation and Research

E Health should be more implemented (Patients of the Country side have the same rights to be treated in Urban Centers, E Health could help on this)

Cross Border Patients Directive concerns 1% of the Patients population, and is not a risk for the NHS Systems, However it remains difficult pr patients to get the prior authorization and be informed on their rights

Need of an European Quality Label based on hospitals results and basic standards for all EU MS



## Conclusions: Future of Health Sustainability :

- Better access to health care without delay : the question of waiting list is still actual.
- Quality of care is a permanent goal. In a fair competition between providers, and in the contest of the Cross Border Care, Quality of care and information to patients remains necessary ; Need of Implication of Patients and Professionals on Health Standards.

Efficiency has to be obtained by strategic investments and optimazing the hospital Management, without linear cuts of services to patients.

- Innovative Medecines, E Health, Modernisation of Health Systems, could save more lives
- Prevention Campaigns to be supported by MS



# Thank you for your attention!

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