

## Measuring efficiency of the German health care system from the population perspective

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### **Background:**

Human and financial resources in health care systems are limited and require efficient use. Efficiency is one of the final

goals of the WHO Health Systems Framework but measuring efficiency and finding room for improvement is complex; a rarely used approach is the assessment from the population perspective. This study aims to analyse, if inefficiencies in the German health care system are present and can be identified by the population.

**Methods:**

In 2018, a survey was conducted with a random sample of 20,000 insured persons of a German private health insurance (PHI) company. Three aspects of efficiency were operationalized in the questionnaire: self-reported duplicate tests, prescription of unnecessary health services, and adequacy of insurance premiums. Results are based on descriptive analyses.

**Results:**

In total, 3,601 respondents (age  $58.9 \pm 14.5$ ; 64.9% male) were included (18.0%) in the analyses. Efficiency was rated as follows: 20% of respondents experienced duplicate tests due to a lack of coordination between physicians. This rate was even higher (38%) among those who perceived (very) poor/fair coordination. Unnecessary services (self-assessed) were prescribed to 22% of all respondents and was 50% among patients who experienced that physicians' consultations and treatments were led by motives other than the patients' wellbeing. A total of 33% rated their premiums as (too) high, 63% as fair and 4% as (very) low with differences according to income, sex and health status.

**Conclusions:**

From a population perspective, the German health care system has the potential to be more efficient e.g. by reducing duplicate tests. Patients with PHI experience unnecessary services and duplicate tests, which put a strain on both, the already limited financial and personnel resources on a macro level, and the level of the individual PHI premium.

**Key messages:**

- Patients perceived tests or services as unnecessary, and hence, can detect inefficiencies of a health care system.
- Efficiency can be improved e.g. by a better coordination of care between health care providers.