

National report Switzerland Madrid Nov. 2009

Sine our last meeting in June, the economic pressure accompanied by policy uncertainties has been extremely great on the medical profession. In view of a necessary foreseen increase of health insurance premiums for 2010 by 10%-15% depending on cantons. This is due to cost increase but also for lack of transparency and insufficient reserves on the side of the insurers.

The Minister for health proposed series of measures to control cost, among them an extremely significant decrease in medical office laboratories. This is certainly special to Switzerland, but most GPs and specialists in office practise have their own small laboratory. This allows immediate settlement of a lot of common problems and is extremely practical for both the patient and the medical practitioner. The decrease came into force on the first of July despite massive protest and demonstrations. The medical laboratories are now obviously no more profitable at all and a certain number of colleagues have decided to close them, others plan to do so, and the younger generation will not even start it. This is a major change in the philosophy of medical care with a trend to steadily more and more industrialisation procedures and less and less face to face personal contact.

Other measures are foreseen and still hanging in the Parliament. The now starting winter session should make decisions about them. A pre-payment of part of the fees (CHF 30 per visit) have already been refused. The freezing of insurance contracts for a minimal of three years is supposed to bring the opportunists who choose very high self payment (different stages from a minimum of CHF 300 up to a maximum of CHF 2500) to decrease their premiums in front of their responsibilities. All the insurances are supposed to start on the 1st of January a telephone emergency service to avoid so called "useless" medical visits. The government is supposed to renegotiate prices with the pharmaceutical companies. And finally the Parliament is supposed to make a decision on a reorganisation of out-patient medicine, favouring so called "Managed Care Groups" with different measures to encourage the patients to visit such a group rather than an individual doctor. In this process a wide amount of free choice of the doctor and of therapeutic freedom should be maintained. Managed Care Groups are also supposed to solve the management problem of medical demography and be included as an alternative to the necessity clause forbidding free setting up of a practice initiated in 2002.

The Minister of Health and Social Affairs changed on the first November. A new more flexible and social oriented Minister, Didier Burkhalter, was elected. In a recent declaration in front of representatives of all the health actors he declared to wish solutions negotiated in partnership in the future to stop the pernicious conflictive climate we are living so far. This corresponds to one of our long lasting request and we hope to be able to find satisfactory solutions in the frame of the major changes to come. However major concessions will be necessary from all sides leading adaptation to the health, social, economic

and behavioural needs of our society. In particular medicine is a service which should be reasonably paid, and no more a profitable business.