



**ASSOCIATION EUROPÉENNE DES MÉDECINS DES HÔPITAUX  
EUROPEAN ASSOCIATION OF SENIOR HOSPITAL PHYSICIANS  
EUROPÄISCHE VEREINIGUNG DER LEITENDEN KRANKENHAUSÄRZTE  
EUROPESE VERENIGING VAN STAFARTSEN  
DEN EUROPÆISKE OVERLÆGEFORENING  
ΕΥΡΩΠΑΪΚΟΣ ΣΥΛΛΟΓΟΣ ΝΟΣΟΚΟΜΕΙΑΚΩΝ ΙΑΤΡΩΝ ΔΙΕΥΘΥΝΤΩΝ  
ASSOCIAZIONE EUROPEA DEI MEDICI OSPEDALIERI  
DEN EUROPEISKE OVERLEGEFORENING  
ASSOCIAÇÃO EUROPEIA DOS MÉDICOS HOSPITALARES  
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EUROPEISKA ÖVERLÄKARFÖRENINGEN  
EVROPSKO ZDRŽENJE BOLNIŠNIČNIH ZDRAVNIKOV  
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ΕΒΡΟΠΕΪΣΚΑ ΑΣΟΪΙΑΪΙΑ ΗΑ ΣΤΑΡΨΗΤΕ ΒΟΛΗΝΗΧΝΗ ΛΕΚΑΡΗ  
ASOCIATIA EUROPEANA A MEDICILOR DIN SPITALE**

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**Report of the German Delegation to the AEMH Delegates' Assembly  
in Stockholm on 30/31 May 2014**

The German Association of Senior Hospital Physicians (VLK) believes that two issues need to be addressed in relation to the reporting period (May 2013 to April 2014):

- the Health and Healthcare Programme of the new German government, elected in September 2013 and
- target agreements specified in employment contracts for senior physicians

Both areas are briefly explained below.

**1. The Health and Healthcare Programme of the German Conservative / Social Democrat Coalition**

On 22 September 2013 a new Parliament was elected by German citizens. The election results led to a coalition between Conservatives and Social Democrats. In their 185-page coalition agreement the two parties document their political plans for Germany's 18th legislative period. 12 of these 185 pages are about "Health and Healthcare".

The following are some of the measures specified for the hospital sector:

- It will be possible to license hospitals for outpatient treatment in areas with insufficient medical facilities.
- Certain medical services can be delegated to skilled, non-medical health professionals who can then be deployed on a nationwide scale.
- Cross-sectoral quality assurance will be expanded. To do so, an independent facility will be set up to determine the quality of inpatient and outpatient care and thus to provide decision-making criteria for further measures.
- The quality of inpatient care is to be improved. Quality will be enshrined in law as a further criterion for decisions in the planning of hospitals.
- Internal and external quality insurance will be checked in hospitals through unannounced inspections, conducted by the medical services of Germany's statutory health insurance companies.
- Checklists for safety in operations are to become a general standard in quality assurance.
- Any work at a particularly high level of quality will be remunerated in the form of bonus payments. If, on the other hand, quality is below average, the work will incur deductions.
- When giving their indications, it will be mandatory for doctors to inform patients about their right to obtain a second opinion.
- If a hospital uses new a product that belongs to a high-risk category, it will be under an obligation to participate in benefit and safety studies during the phase after the market launch.

- The surcharge factor for hospital fees is to be identified through a benchmark value calculated by the Federal German Statistical Office, based on the specific circumstances applicable to the hospital sector.
- A “Master Plan Medical Degree Course” will be developed, permitting the targeted selection of university applicants, the promotion of practical relevance and a greater emphasis on general medicine during the degree course.

The German Association of Senior Hospital Physicians (VLK) has carefully analysed and comprehensively commented on the governmental health care plans outlined in the coalition agreement. It will provide constructive advice during implementation of the planned measures.

## **2. Target agreements specified in employment contracts for senior hospital physicians**

Set against the background of the so-called “transplantation scandal” in 2012, there was a vehement debate in Germany on the danger that medical decisions may be jeopardised in their independence whenever bonus payments were granted to doctors for certain types of work. As a result, in spring 2013, the German government asked the German Association of Hospitals and the German Medical Association to draw up a joint recommendation. This recommendation is to ensure that hospitals no longer use target agreements that are based on financial incentives for specific work. Any hospitals which still follow such practice must publish the existence of such target agreements in their annual quality reports.

Since this legal provision entered into force VLK has been working with the German Medical Association on analysing the wordings of target agreements and examining them for legal compliance. The results of the consultations will subsequently be published in anonymised form.

The analysis shows that many hospitals have not been observing this regulation.

Following VLK intervention, the German government is therefore likely to amend this regulation in order to safeguard and sustain the independence of medical services.