The patients involvement in healthcare financing in Norway

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A quick preview

• Health insurance in Norway - historical view
• The Norwegian healthcare system - overview
• Coverage in the Norwegian health insurance
• Co-payment (Patient fees)
• Exceptions from the obligation to make co-payments
• The Healthcare exemption card
• A real life example
• Co-payments influence on patients choice of healthcare services
The historical view

• The first law that concerns health insurance is from 1909

• Exemption card 1 was first used in 1984

• Exemption card 2 was introduced in 2003

• A reform in 2010 removed co-payments for adolescents between the age of 12 and 16 for certain health services

• In 2010 and from the 1st of January 2017 the exemption cards are issued to the patient automatically when the patient has paid a certain amount in co-payments
Norwegian Healthcare system – for whom

All members of the Norwegian health insurance scheme are fully insured

• Everyone that permanently resides in Norway
  – Norwegian citizens who work abroad in official service for the Norwegian State or on military operations
  – Norwegian citizens who work in a Norwegian airline company or on a ship registered in Norway
  – Norwegian citizens who study abroad
  – Some foreign employees in the oil business
  – Some other groups can apply for membership, this can be granted under certain conditions
How does it work

The Norwegian healthcare system is mainly divided into primary (general) healthcare and specialized healthcare

- The primary healthcare is within the responsibility of the municipality
  - General practitioners and others
  - Acute healthcare
  - Long term care
  The financing is regulated in the Norwegian Insurance Act, and combines founding with co-payment

- The specialized healthcare is within the responsibility of the four health regions
  - Hospital admission
  - Severe acute healthcare
  This is financed through basic founding and activity-based founding

To get access to specialized healthcare patients have to get a doctors referral from their general practitioner or another doctor in the primary healthcare
What is in the Norwegian “basket of care”

Hospital admission
- Financed merely through basic founding and activity-based founding

Other Healthcare services – financed partly by co-payments
- Doctor examinations and treatments that do not require hospital admission
- Tests and examinations in private laboratories and radiology institutes
- Dental care related to certain predefined conditions
What is in the Norwegian “basket of care” - continues

− Examination and treatment from a psychologist
− Physiotherapy
− Chiropractic
− Speech therapy
− Examinations and treatments at an Orthoptist
− Examinations done by a midwife as a part of pregnancy controls
− Certain pharmaceuticals and some medical equipment
− Work related injuries and diseases
Co-payment

– Most of the health services, except hospital admission, that are included in the Norwegian “basket of care”, have some sort of co-payment

– The co-payment is always a part of the medical bill, and is usually payed immediately after a consultation

– The co-payment rates varies a lot between the different healthcare services, the rates are defined in regulations connected to the Norwegian Insurance Act
Co-payment

- The co-payment rates can be adjusted every year
- The rates are available to the public
- Nearly all the expenses are covered through the health insurance and for most treatments the part which is self financed is relatively small

  *Standard consultation with a GP 152 NOK (approx. 15 euro)*
  *Standard consultation with a specialist 350 NOK (approx. 35 euro)*
  *Standard ex-ray 245 NOK (approx. 24 euro)*

- To prevent the patients from having large medical expenses, the most commonly used healthcare services gives a right to an health exemption card
The Health exemption card

– When a patient has payed a specific amount for healthcare, he or she will not have to make co-payments for the rest of that calendar year

– When a patient makes a co-payment for certain health services, the healthcare provider is obliged to register it in a national electronic co-payment system

– Several healthcare services are registered on the same card, and the patient’s expenses are added up

– Patients receive an exemption card in the mail, he or she can show it to healthcare providers to attest that he or she is not supposed to make further co-payments
The health exemption card

- There are two different exemption cards: Exemption card 1 and 2

- The two exemption cards covers different health services and are independent of each other

- 1,2 million Norwegian patients received exemption card 1 and 45 000 received the exemption card 2 in 2016

- 300 000 is expected to receive exemption card 2 in 2017
Which services do they cover

– Exemption card 1: Co-payments from doctors, psychologist, radiology, polyclinics, patients travels and certain pharmaceuticals and some medical equipment.
  • The co-payment should not extend 2205 NOK for one year (approx. 220 euro).

– Exemption card 2: Co-payments for physiotherapy, dental care, some rehabilitation and some patient travels for treatment abroad.
  • The co-payment should not extend 1990 NOK for one year (approx. 200 euro).
An example

– A patient experiences symptoms of the flu and decides to go to his general practitioner to have an examination

– The doctor performs a regular examination and does several blood tests

– The patient has to make a co-payment both for the regular examination and for the blood tests

– When the patient pay at the doctors office, he only makes the co-payment. His bill will specify which rates he has payed.

– The doctor will then register this in the national electronic co-payment database.

– This information will reach Helfo (Health Economic Administration) who distributes the exemption cards.
An example - continues

– If the patient has not had any large expenses prior to this one, the amount which he has payed will be registered in the national database, waiting for more expenses to come.

– If the patient by paying this treatment reaches the sum which is set for the exemption card, he will receive a card in the mail within a few days.

– If he by paying this treatment extends the sum which is set for the exemption card, the excessive amount will be refunded.
Dispensation for co-payments

• The exemption card scheme makes it less important to have dispensations for paying patient-fees.

• Still there are some groups who have a dispensation:
  – Children: Children under the age of 16 do not pay patient fees.
  – Pensioners: Most pensioners make co-payments. Only those with the lowest pension rate have a dispensation for co-payment on some pharmaceuticals.
  – Patients with an occupational disease or injury, and patients with war pensions.
Dispensation for co-payments

• Furthermore:
  – Consultation concerning pregnancy and child birth
  – Prison inmates
  – Consultations concerning communicable diseases
  – First consultation in connection with abuse
Does co-payments influence patients choice of healthcare services?

- Co-payment as a tool for priority of healthcare: with significant differences in co-payment rates, patients are likely to choose a particular treatment
  - The regulation connected to the Norwegian Insurance Act has a list of which medicaments a patient can receive, which are partly reimbursed and count for the exemption card 1. This will affect which medications are preferably used.
  - The public healthcare provider is obliged to determine if the healthcare is necessary

- Only some of the healthcare services are included in the exemption cards
  - It will be more expensive for the patients to choose other healthcare services
Does co-payments influence patients choice of healthcare services?

• Studies performed from 2000-2005 by SSB states that some patients feel they have to refrain from using certain health services due to the cost

• It is claimed that low or no co-payment results in an excessive use of healthcare

• The reform that removed co-payments for adolescents in 2010 resulted in an increase of doctors consultations of 13% for boys and 18 % for girls between 12 and 15 years of age.
Sources

• Study on the expenses for health- and social services made by SSB (Norwegian Statistical Bureau) for the Norwegian Ministry of Health (SSB 2000).

• «Do co-payments for adolescents affect the number of visits to the physician?» Tidsskrift for velferdssforskning (01/2016) by Camilla Beck Olsen og Hans Olav Melberg