

# The Austrian Health Care Structure Plan (ÖSG) and its Regional Implementation (RSG) - Update

Gerhard Fülöp / Andreas H. Birner Workshop 3, Vienna, 26 March 2018



#### Integrated Health Care Planning in Austria - ÖSG and RSG

#### Fields of Planning

- Inpatient sector
- Outpatient sector
- Rehabilitation
- Interface management to long-term care

#### "Austrian" Level:

Austrian Health Care Structure Plan (ÖSG 2017)

Integrated Health Care Planning – Framework

#### "Länder" (province) Level:

Regional Health Care Structure Plans (RSG)

Integrated Health Care Planning – detailed Regional Masterplans

Gesundheit Österreich

Austrian Health Care Structure Plan – OSG 2017

Gerhard Fülöp Workshop 3, Vienna, 26 March 2018

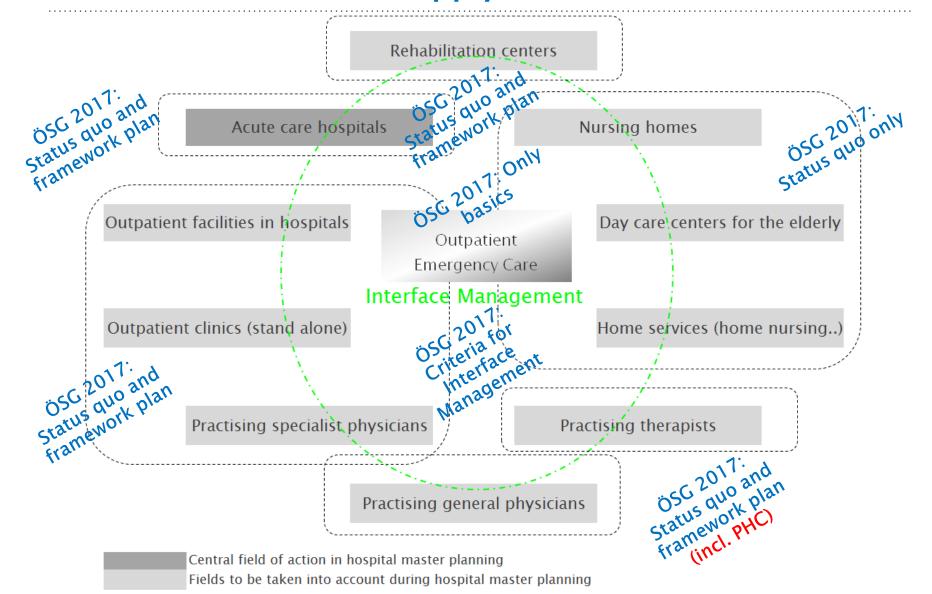


#### **ÖSG 2017 - Goals and Contents**

- ÖSG 2017 is a joint integrative framework plan (MoH, Länder, social insurance funds) for Austria → obligatory basis for integrative detailed planning at state level – "RSG"
- ÖSG 2017 contains planning principles and benchmarks for outpatient/inpatient acute care, for outpatient/inpatient rehabilitation and for biomedical-technical equipment
- $\circ$  ÖSG 2017 contains quality criteria for all areas of supply  $\rightarrow$  ensuring same supply standards all over Austria in all areas
- ÖSG 2017 aims to ensure that health care is distributed evenly and easily accessible throughout Austria and is offered at a high level of quality
- Planning statements and implementation of quality criteria refer to year 2020 (in addition: orientation values for 2025)
- $\circ$  ÖSG 2017 has the "quality of an expert opinion"  $\rightarrow$  selected contents will become binding in a regulation after evaluation

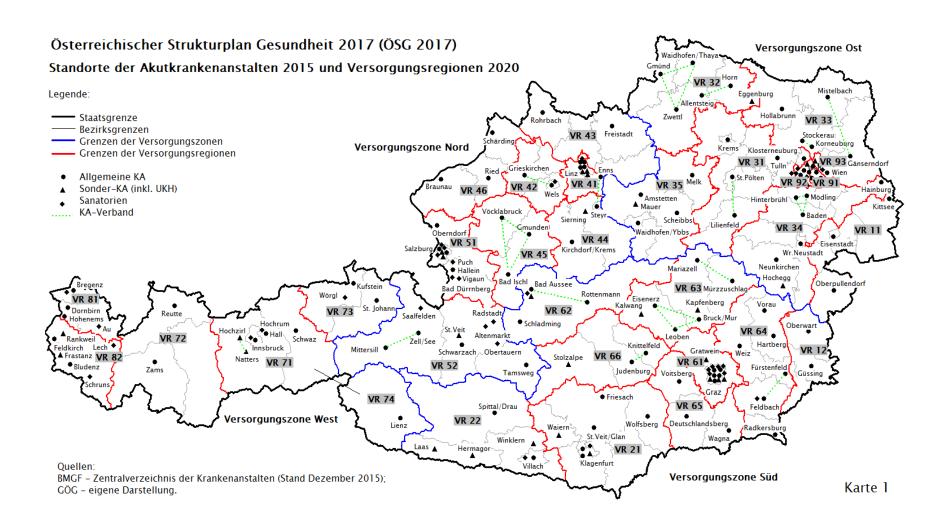


# **ÖSG** 2017 - Areas of Supply





# ÖSG 2017 – 32 Health Care Regions





# **ÖSG 2017 - Planning Benchmarks**

#### Planungsrichtwerte für die Normalpflege- und Intensivbereiche in Akutkrankenanstalten (Planungshorizont 2020)

						<b>A</b> .
Fachbereiche/Versorgungsbereiche	E	Err. (Min.)	BMZmin	BMZmax Catio	os or	00
Intensivbehandlungsbereiche (INT/IS)		60	0,22	410	"iat	,O
Intensivüberwachungsbereiche (INT/UE)		45	0,22	calle	dn,	)
Kinder- und Jugendheilkunde (KIJU)	10.	45	- E (1,	29/10	v63 ···	20
Kinder- und Jugendchirurgie (KJC)	310,051	135	// \je	galio	کانہ	20
Kinder- und Jugendheilkunde (KIJU)  Kinder- und Jugendchirurgie (KJC)  Kinder- und Jugendpsychiatrie (KJP)  Chirurgie (CH)  Neurochirurgie (NCH)  Innere Medizin (IM)	(pe	eed,	5/15	9 11,	0,04	30
Chirurgie (CH)	" WILL	LUIT	J.KIII	J,70	0,73	30
Neurochirurgie (NCH)	N. W.	YC & N	10,	0,08	0,06	30
Innere Medizin (IM)	(beds) (beds) HW n	0,	1,08	1,81	1,58	30
- davon Pulmologie (PUL) / Innere dedizin-Pneumologie			0,07	0,12	0,12	30

#### Planungsrichtwerte für den gesamten ambulanten Bere 🗔 (Planungshorizont 2020)

Fachrichtung/Fachbereich **	Err. (Min.)	VDmin	VDmax	VD2014	nin
Allgemeinmedizin (AM)**  Kinder- und Jugendheilkunde (KIJU)**  Kinder- und Jugendchirurgie (KJC)  Kinder- und Jugendpsychiatrie (KJP)¹  Chirurgie (CH)  Neurochirurgie (NCH)  Innere Medizin (IM)**  - davon Pulmologie (PUL) / Innere  Frauenheilkunde und Geburtshilfe (L  Neurologie (NEU)  Psychiatrie (PSY)  Dermatologie (DER)	10	34,8	64,7	49.9	<u></u>
Kinder- und Jugendheilkunde (KIJU)**	20	4,1	7,7	"10N"	" Nri."
Kinder- und Jugendchirurgie (KJC)	•	•	1.00	Tris 1	Nic.
Kinder- und Jugendheilkunde (KIJU)**  Kinder- und Jugendchirurgie (KJC)  Kinder- und Jugendpsychiatrie (KJP)¹  Chirurgie (CH)  Neurochirurgie (NCH)  Innere Medizin (IM)**  - davon Pulmologie (PUL) / Innere	0/	0,6	1100	act's	1_
Chirurgie (CH)	•	「// `	~***	~_~Qé	•
Neurochirurgie (NCH)	9	5 (	(0),	(1),	•
Innere Medizin (IM)**	, ree!	irly	nce	-4,7	6.800
- davon Pulmologie (PUL) / Innere ogie (IM-PI)	10i, '' N	Y	91,	1,9	54.000
Frauenheilkunde und Geburtshilfe (L	1055\\\	nsui	11,9	9,2	11.000
Neurologie (NEU)	Cial 1	E,	3,5	2,7	37.000
Psychiatrie (PSY)	OC/	2,4	4,4	3,4	30.000
Dermatologie (DER)	30	2,9	5,5	4,2	24.000
Augenheilkunde (AU)	30	4,3	8,0	6,2	16.000
Hals-, Nasen- und Ohrenheilkunde (HNO)	30	2,7	5,0	3,9	26.000

Planungsrichtwerte	
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Gerätegruppe/Verfahren	aiomedicent	Einwohner- richtwert <sup>2</sup>	Großgeräte pro 1 Mio EW <sup>2</sup>
Computertomographie (CT)	Biouiphices)	30.000-50.000	20,0-33,3
Magnetresonanz-Tomographie (MR)	eciden.	70.000-90.000	11,1-14,3
Emissions-Computer-Tomographie (ECT) <sup>3</sup>	45	80.000-100.000	10,0-12,5

#### Tabelle R1: Planungsrichtwerte\* für die stationäre Rehabilitation für Erwachsene

(Alter ab dem 19. Lebensjahr) nach Rehabilitations-Indikationsgruppen, Planungshorizont 2020

Rehabilitations-Indikationsgruppe	BMZ Soll 2020	BMZ 2014
Bewegungs- und Stützapparat sowie Rheumatologie (BSR)	44,7	45,4
Bewegungs- und Stützapparat sowie Rheumatologie (BSR)  Herz-Kreislauf-Erkrankungen (HKE)  Zentrales und peripheres Nervensystem (NEU)  Onkologische Rehabilitation (ONK)  Psychiatrische Rehabilitation (PSY)  Atmungsorgane (PUL)  Stoffwechselsystem und Verdauung.  Zustände nach Unfällen und neurochi.  Spezialbereich Lymphologie (LYMPH)	18,3	18,7
Zentrales und peripheres Nervensystem (NEU)	18,5	18,4
Onkologische Rehabilitation (ONK)	6,5	6,6
Psychiatrische Rehabilitation (PSY)	16,7	13,5
Atmungsorgane (PUL)	5,6	5,8
Stoffwechselsystem und Verdauung	6,9	6,9
Zustände nach Unfällen und neurochi. (CNC)	6,0	6,1
Spezialbereich Lymphologie (LYMPH)	1,2	1,2
gesamt	124,4	122,4

#### Tabelle R5: Bettenbedarf für Kinder und Jugendliche (0-18 Jahre) im Jahr 2020

nach Rehabilitations-Indikationsgruppen

Rehabilitations-Indikationsgruppen (RIG)	Bettenbedarf 2020 (0-18 Jahre)
Krankheiten des Bewegungs- und Stützapparates sowie Rheumatologie (BSR)	22
Krankheiten des Bewegungs- und Stützapparates sowie Rheumatologie (BSR)  Herz-Kreislauf-Erkrankungen (HKE)  Kinderchirurgische Erkrankungen (NEU)  Neurologische Erkrankungen (NEU)  Pulmologische Erkrankungen (PUL)  Krankheiten des Stoffwechselsystems und de.  Rehabilitation nach Krebserkrankungen (ONK)  Kinder- und jugendpsychiatrische Erkrankungen (i	15
Kinderchirurgische Erkrankungen (KJC)	28
Neurologische Erkrankungen (NEU)	95
Neurochirurgie (NC)	5
Pulmologische Erkrankungen (PUL)	30
Krankheiten des Stoffwechselsystems und de.	12
Rehabilitation nach Krebserkrankungen (ONK)	20*
Kinder- und jugendpsychiatrische Erkrankungen (	42
Entwicklungsstörungen und Erkrankungen im Berei. Adiatrischen Versorgung sowie pädiatrische psychosomatische Erkrankungen (ESP)	68
gesamt	343*
Taballa D2: Diagrapariable contact fills diagraphylanta Dababilitation ** file Forces' anno	

#### Tabelle R3: Planungsrichtwerte\* für die ambulante Rehabilitation\*\* für Erwar sene

(Alter ab dem 19. Lebensjahr) nach Rehabilitations-Indikationsgruppen, Pi-

	410.	
Rehabilitations-Indikationsgruppe  Bewegungs- und Stützapparat sowie Rheumatologie (BSR)  Herz-Kreislauf-Erkrankungen (HKE)  Zentrales und peripheres Nervensystem (NEU)  Onkologische Rehabilitation (ONK)  Psychiatrische Rehabilitation (PSY)  Atmungsorgane (PUL)  Stoffwechselsystem und Verdau.  Zustände nach Unfällen und neuro.	itacht 20	ambTP/EW 2014
Bewegungs- und Stützapparat sowie Rheumatologie (BSR)	mer.	4,8
Herz-Kreislauf-Erkrankungen (HKE)		2,1
Zentrales und peripheres Nervensystem (NEU)	,0	0,7
Onkologische Rehabilitation (ONK)	0,5	0,4
Psychiatrische Rehabilitation (PSY)	3,3	1,4
Atmungsorgane (PUL)	0,9	0,6
Stoffwechselsystem und Verdau.	0,8	0,4
Zustände nach Unfällen und neuro (JCNC)	0,0	0,1
Spezialbereich Lymphologie (LYMPH,	0,0	0,0
gesamt	13,8	10,5

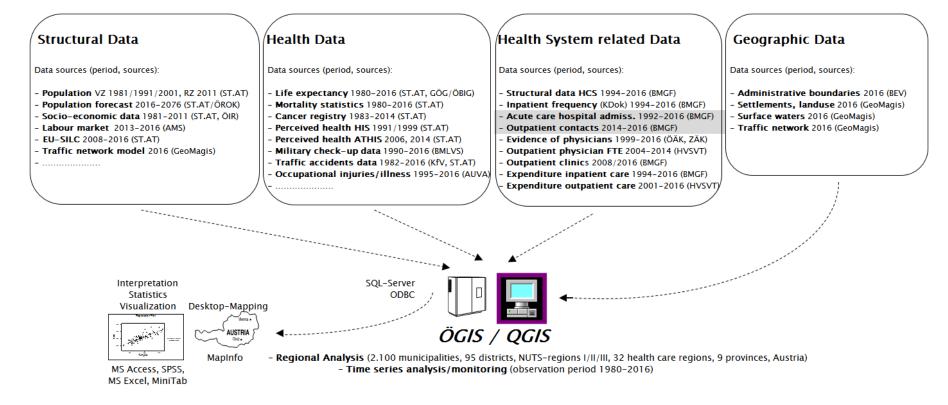


# Austrian Integrated Health Information System - ÖGIS

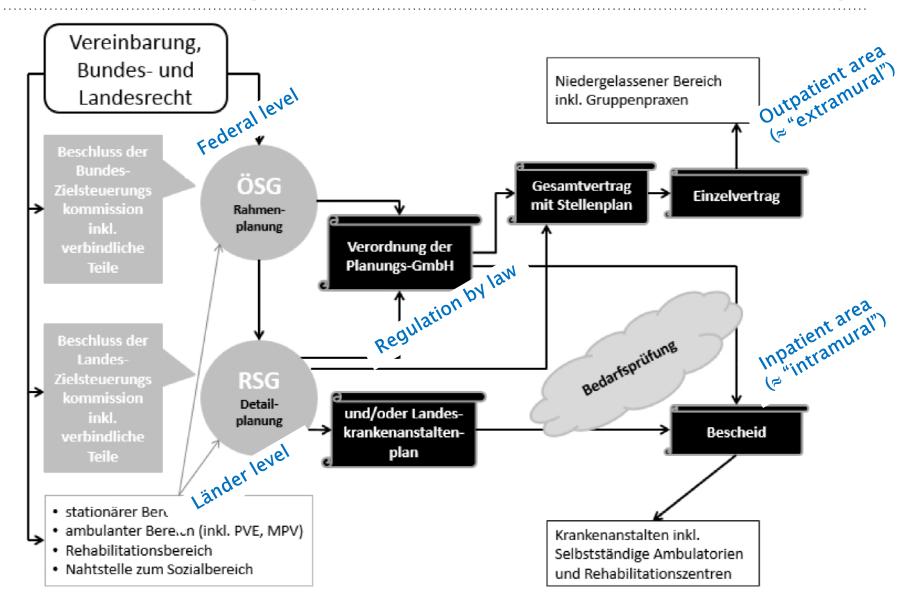
Gesundheit Österreich

#### Austrian Health Information System ÖGIS

(as per September 2017)

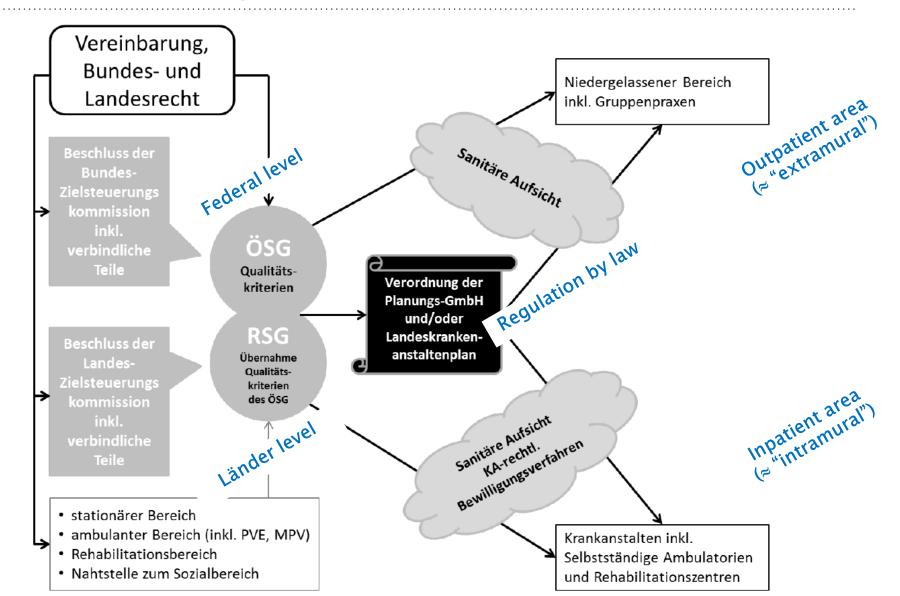


# ÖSG 2017 - Legal Framework / HC Structure Planning





# ÖSG 2017 - Legal Framework / Quality Criteria





# Regional Health Care Structure Plans - RSG

Andreas H. Birner Workshop 3, Vienna, 26 March 2018



# Regional Healthcare Structure Plan - RSG

- » Objectives and Contents
- » Standards and Guidelines given by ÖSG
- » Data Base
- » Analysis and Planning



# **Objectives**

#### RSG - Objectives ("system-driven")

» Provincial governments, public health insurances (and hospital owners, health care providers) have the possibillity to design their regional health care landscape

#### with the intention to realise

- » an integrated planning of the hole health care system in each health region
- » and its obligatory implementation by the institutions, which have direct responsibility for planning, financing, controlling and implementation
- » in the framework of guidelines (ÖSG) for quality and quantity from federal level

#### RSG - Objectives ("care driven")

- » Adaptation of hospital admission rate and hospital day density to the level of medically necessity
- » Shifting of medical treatments to the outpatient sector and reduction of acute hospital beds and strengthening primary health care
- » Improvement of interface/continuity management
- » Regional-wide assurance of a medically and economically sensible health care landscape
  - → treatment at the right time, at the right place, with the adequate resources, state of the art = "best point of service"



#### **Contents**

#### **Analysis of Status Quo**

care density, supply and demand of services and capacities, structure quality

#### Planning (target year)

estimation of needs; planning adequate structures, services and capacities

- » inpatient care (acute care hospitals)
- » outpatient care
  - » hospital-sector
  - » non-hospital sector
  - » primary health care (esp. potential)
- » biomedical equipment
- » rehabilitation
- » care for elderly and disabled persons
- » interface/continuity management

planning hospital locations / landscape by qualitative and quantitative service provision planning

- planning capacities of physicians per region
- planning capacities of equipment
- planning capacities of beds and outpatient accomodations
  - in coordination with the social sector
- measures for improvement



# Regional Healthcare Structure Plan - RSG

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# Standards and Guidelines given by ÖSG (1)

- Framework for Capacity Planning: standard values for inpatient and outpatient sector, rehabilitation sector and biomedical equipment
- Supply-Matrix: frame for the amount of service-bundles in acute care hopsitals per health-region, province ("Land") and healthzone
- Service-Matrix: quality criteria for each single medical procedure in acute care hospitals and outpatient sector (partial, under construction)
- Quality Criteria: guidelines (in general and specific) for different forms of organisation as well as specific care models for disciplines and specific groups of diseases

# Standards and Guidelines given by ÖSG (2)

- Cross-sectoral Quality Criteria: patient-safety, integrated health care, interface/continuity management
- Biomedical Equipment plan: location and capacity plan
- Supraregional Healthcare Planning: nationwide definition of locations for selected seldom and/or high-sophisticated services
- RSG-Planning-Matrix: standard-spreadsheets for the description of the health care-situation per region in total (as well as the interface to the sector of social care)

#### Austrian Health Care Structure Plan (ÖSG 2017) Standard Values for RSG-Planning



#### Planungsrichtwerte für die Normalpflege- und Intensivbereiche in Akutkrankenanstalten (Planungshorizont 2020)

Fachbereiche/Versorgungsbereiche	Err. (Min )	BMZmin	BMZmax	BMZ 2014	MBZ
Intensivbehandlungsbereiche (INT/IS)	1.6	1.22	0.26	0,18	6
Intensivüberwachungsbereiche (INT/UE)	692	.22	0,36	0,10	4
Kinder- und Jugendheilkunde (KIJU)	boll.		0,20	0,16	20
Kinder- und Jugendchirurgie (KJC)	xe.	ر,02	0,03	0,03	20
Intensivbehandlungsbereiche (INT/IS)  Intensivüberwachungsbereiche (INT/UE)  Kinder- und Jugendheilkunde (KIJU)  Kinder- und Jugendchirurgie (KJC)  Kinder- und Jugendpsychiatrie (KJP) 1  Chirurgie (CH)		0,08	0,13	0,04	30
Chirurgie (CH)	2.	0,42	0,70	0,73	30
Neurochirurgie (NCH)	60	0,05	0,08	0,06	30
Innere Medizin (IM)	45	1,08	1,81	1,58	30
- davon Pulmologie (PUL) / Innere Medizin-Pneumologie (IM-PUL)		0,07	0,12	0,12	30

#### Planungsrichtwerte für den gesamten ambulanten Bereich (Planungshorizont 2020)

Fachrichtung/Fachbereich **	Err. (Min.)	VDmin	VDmax	VD2014	BEVmin
Allgemeinmedizin (AM)**	10	34,8	64,7	49,8	2.000
Kinder- und Jugendheilkunde (KIJU)**	20	1	7,7	5,9	17.000
Kinder- und Jugendchirurgie (KJC)	ું જ		•	•	
Kinder- und Jugendpsychiatrie (KJP) <sup>1</sup>	. * 5		1,2	0,4	120.000
Chirurgie (CH)	MICKE	1,1	7,7	5,9	•
Neurochirurgie (NCH)	16 1. K.	•	•	•	•
Innere Medizin (IM)**	dist	10,3	19,1	14,7	6.800
- davon Pulmologie (PUL) / Innere Medizin-Pneumologi	8CC	1,3	2,4	1,9	54.000
Frauenheilkunde und Geburtshilfe (GGH)	30	6,4	11,9	9,2	11.000
Neurologie (NEU)	30	1,9	3,5	2,7	37.000
Psychiatrie (PSY)	30	2,4	4,4	3,4	30.000
Dermatologie (DER)	30	2,9	5,5	4,2	24.000
Kinder- und Jugendchrurgie (KIC)  Kinder- und Jugendpsychiatrie (KJP)¹  Chirurgie (CH)  Neurochirurgie (NCH)  Innere Medizin (IM)** - davon Pulmologie (PUL) / Innere Medizin-Pneumologi  Frauenheilkunde und Geburtshilfe (GGH)  Neurologie (NEU)  Psychiatrie (PSY)  Dermatologie (DER)  Augenheilkunde (AU)	30	4,3	8,0	6,2	16.000
Hals-, Nasen- und Ohrenheilkunde (HNO)	30	2,7	5,0	3,9	26.000

#### Planungsrichtwerte

Gerätegruppe/Verfahren		dical eit	Einwohner- richtwert <sup>2</sup>	Großgeräte pro 1 Mio EW <sup>2</sup>
Computertomographie (CT)	bion	ledicent	30.000-50.000	20,0-33,3
Magnetresonanz-Tomographie (MR)	p/eo	UIP 45	70.000-90.000	11,1–14,3
Emissions-Computer-Tomographie (ECT) <sup>3</sup>		45	80.000-100.000	10,0–12,5
Strahlentheranie (STR) <sup>4</sup>		90	130.000-150.000	6.7-7.7

#### Tabelle R1: Planungsrichtwerte\* für die stationäre Rehabilitation für Erwachsene

(Alter ab dem 19. Lebensjahr) nach Rehabilitations-Indikationsgruppen, Planungshorizont 2020

Rehabilitations-Indikationsgruppe	BMZ Soll 2020	BMZ 2014
Bewegungs- und Stützapparat sowie Rheumatologie (BSR)	44,7	45,4
Herz-Kreislauf-Erkrankungen (HKE)	18,3	18,7
Zentrales und peripheres Nervensystem (NEU)	18,5	18,4
Onkologische Rehabilitation (ONK)	6,5	6,6
Psychiatrische Rehabilitation (PSY)	16,7	13,5
Atmungsorgane (PUL)	5,6	5,8
Stoffwechselsystem und Verdauungsapparat (STV)	`9	6,9
Zustände nach Unfällen und neurochirurgischen Eingriffen (UCNC)	*6	6,1
Spezialbereich Lymphologie (LYMPH)	4,2	1,2
Zustände nach Unfällen und neurochirurgischen Eingriffen (UCNC) Spezialbereich Lymphologie (LYMPH) gesamt	124,4	122,4

Tabelle R5: Bettenbedarf für Kinder und Jugendliche (0-1)

nach Rehabilitations-Indikationsgruppen

Rehabilitations-Indikationsgruppen (RIG)  Krankheiten des Bewegungs- und Stützapparates Herz-Kreislauf-Erkrankungen (HKE)  Kinderchirurgische Erkrankungen (KIC) Neurologische Erkrankungen (NEU)	Bettenbedarf 2020 (0-18 Jahre)
Krankheiten des Bewegungs- und Stützapparates (&SR)	22
Herz-Kreislauf-Erkrankungen (HKE)	15
Kinderchirurgische Erkrankungen (KJC)	28
Neurologische Erkrankungen (NEU)	95
Neurochirurgie (NC)	5
Pulmologische Erkrankung	30
Krankheiten des Stoffwechse.	12
Rehabilitation nach Krebserkran. (ONK)	20*
Kinder- und jugendpsychiatrische Erkrankungen (KJP)	42
Entwicklungsstörungen und Erkrankungen im Bereich der sozialpädiatrischen Versorgung sowie pädiatrische psychosomatische Erkrankungen (ESP)	68
gesamt	343*

#### Tabelle R3: Planungsrichtwerte\* für die ambulante Rehabilitation\*\* für Erwachsene

(Alter ab dem 19. Lebensjahr) nach Rehabilitations-Indikationsgruppen, Planungshorizont 2020

Rehabilitations-Indikationsgruppe	ambTP/EW Soll 2020	ambTP/EW 2014
Bewegungs- und Stützapparat sowie Rheumatologie (BSR)	5,4	4,8
Herz-Kreislauf-Erkrankungen (HKE)	2,1	2,1
Zentrales und peripheres Nervensystem (NEU)	0,6	0,7
Onkologische Rehabilitation (ONK)	0,5	0,4
Psychiatrische Rehabilitation (PSY)	3,3	1,4
Atmungsorgane (PUL)	0,9	0,6
Stoffwechselsystem und Verdauungsapparz Zustände nach Unfällen und neurochirur Spezialbereich Lymphologie (LYMPH) gesamt	0,8	0,4
Zustände nach Unfällen und neurochirur	0,0	0,1
Spezialbereich Lymphologie (LYMPH)	0,0	0,0
gesamt	13,8	10,5

# Regional Healthcare Structure Plan - RSG

- » Objectives and Contents
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#### Data Base for Integrated Health Care Planning

- » Minimum Basic Data Set for each hospital stay in an Austrian acute care hospital (patient-, provider- and service-related data, diagnosis-code)
- » Austrian Hospital Statistics (hospitalbeds, costs, staff in heads and FTE, etc.)
- » Minimum Basic Data Set for each outpatient-contact in Austrian hospital outpatient facilities or physicians in private practice (financed by social insurance) (patient-, provider- and service-related data)
- » Accessibility model for "motorized individual transport" (distance in driving minutes)
- » **Population statistics** and population **forecasts** (diff. gender, 5-years age groups, lowest regional level as possible e.g. municipality)
- Other useful data / informations (epidemiology, health related behavior, topography)

# Data Base for Integrated Health Care Planning Health Professions – Outpatient Short Term Care

#### » Different Sub-Sectors (distribution of capacities of physicians)

- » outpatient departments in hospitals (22 %)
- » health service doctors (70 %) und free doctors (5 %)
- » Independent outpatient departments/medical institutes (3 %)

#### » Other Health Professions (than physicians)

- » psychotherapists, psychologists, other therapists (physio, ergo, logo, massage,..), midwifes, (graduate) nurses, pharmacists, etc.
- » currently insufficient data situation

#### » Physicians

- » list of doctors (Austrian Medical Chamber): headcount only; demography; time series possible
- » "physicians care untis" (PCU; ~ full time equivalents): careeffectiveness; limited compability of the sectors and incomplete coverage (free doctors, not all disciplines); no demography; no time series not possible;
- » Austria: physician-focussed health system

### **Data Availability**

#### "inpatient sector"

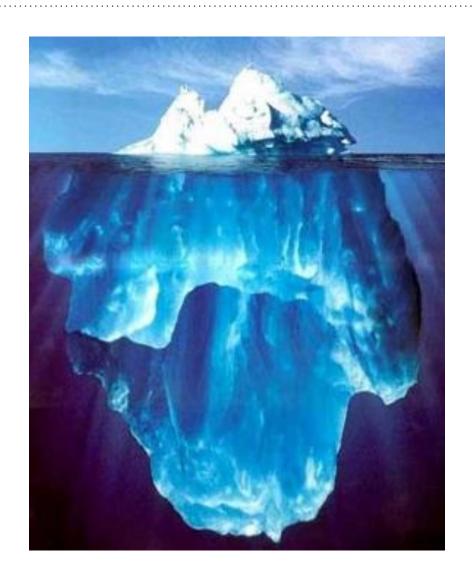
supply and utilisation of capicities and services as well as morbidity



pseudonymized individual identifier (since year 2014)

#### "outpatient sector"

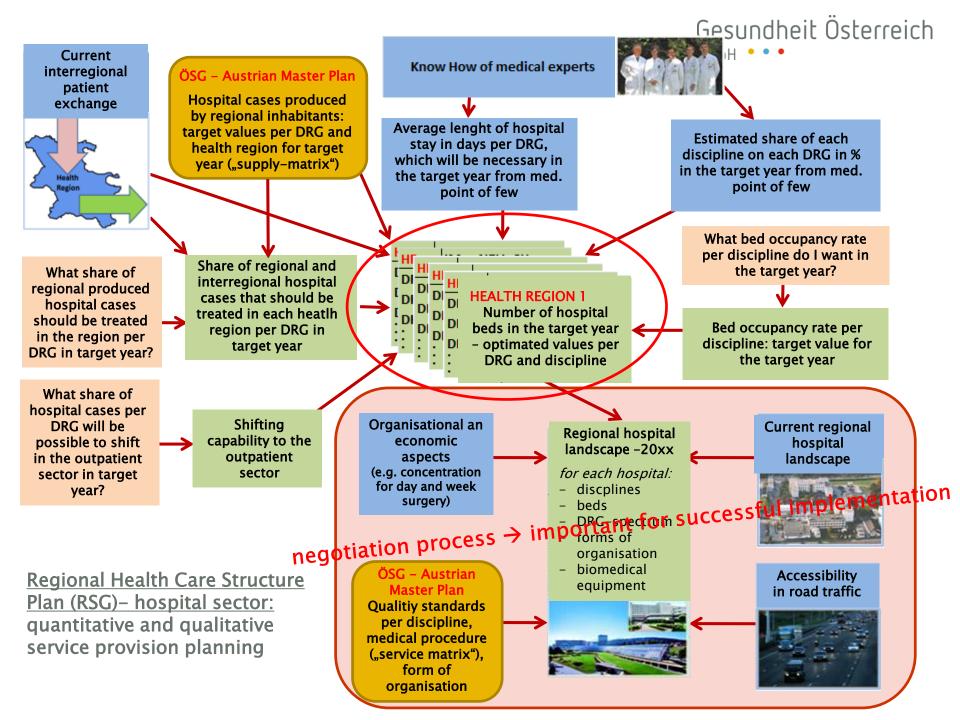
- supply of capacities only
- utilisation of capacities (contacts since year 2014)
- **services** (under construction)
- morbidity?





# Regional Healthcare Structure Plan - RSG

- » Objectives and Contents
- » Standards and Guidelines given by ÖSG
- » Data Base
- » Analysis and Planning
  - » Inpatient Care
  - » Outpatient Care



### Regional Healthcare Structure Plan - RSG

- » Objectives and Contents
- » Standards and Guidelines given by ÖSG
- » Data Base
- » Analysis and Planning
  - » Inpatient Care
  - » Outpatient Care

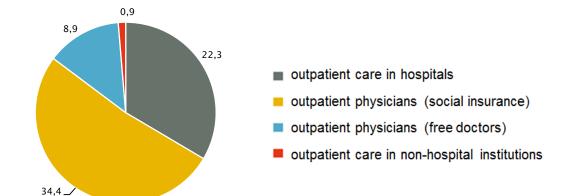


#### **Analysis – Sectoral Distribution**

#### Discipline xy

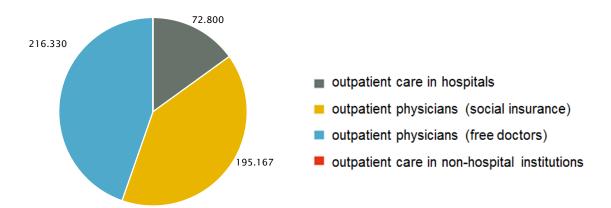
#### Supply:

number of FTE breakdown by sectors



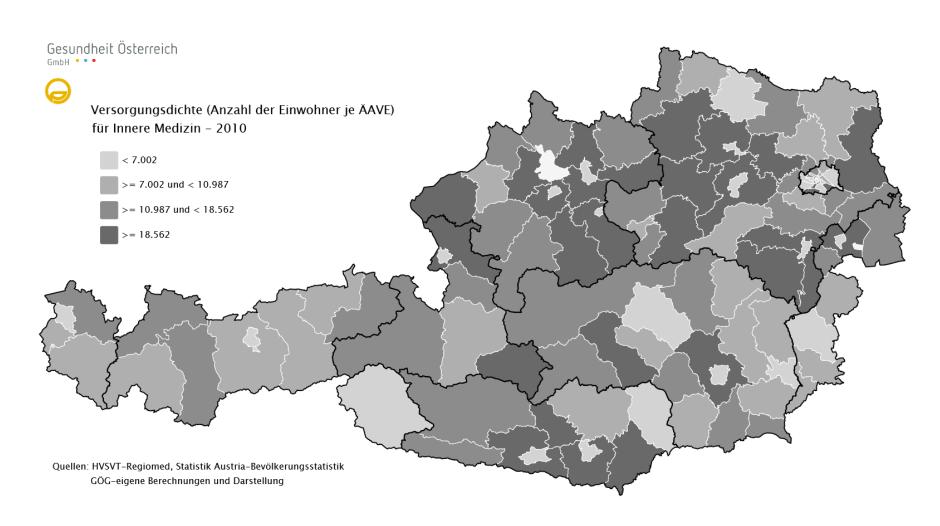
### <u>Utilisation:</u>

number of contacts breakdown by sectors



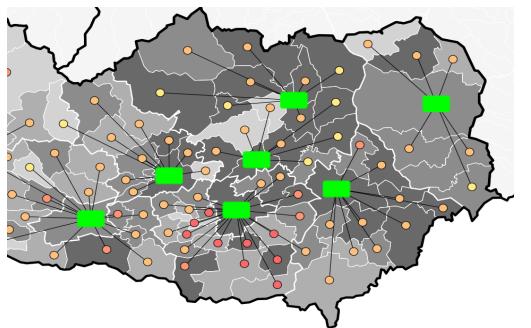


# Analysis: Care Density - Inhabitants per PCU (FTE)



# Analysis: Outpatient Utilisation of Physicians Indicators

- "Source-related" contact rates (contacts/100.000 inh.)
- Display of <u>patient flows</u>
  - <u>source related</u> self provision rate (the higher this rate, the lower the "outcommuting rate" in the region)
  - <u>target related</u> self provision rate (the lower this rate, the higher the "incommuting rate" in the region)



pale = low contact rate dark = high contact rate

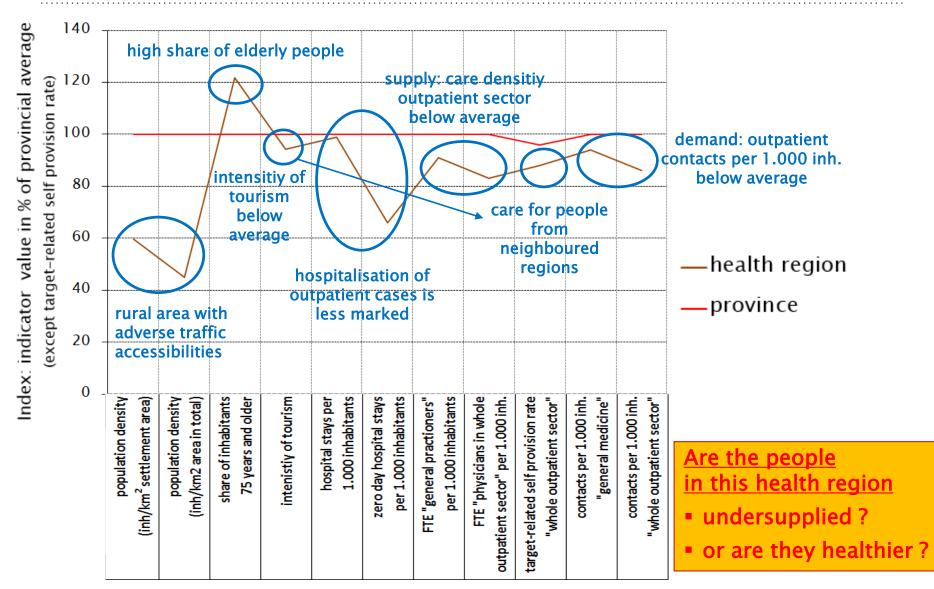
# Further Data - Requirements for Health Care Planning

#### Other useful data / informations

- » Epidemiology and health related behavior
- » Socio economic situation
- » Life expectancy and mortality
- » Geography / Topography / Climate conditions (e.g. alpine regions in winter)



# Regional Analysis - Regional Profiles: Over-, Under- or Inappopriate Supply?





## Regional Analysis – Regional Profiles: Circumstantial Evidence: Undersupplied or Healthier?

#### Live Expectancy at Birth 2002 -2014

#### Expected Life Years - male and female (Index, Austria = 100)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Austria	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0
Province	101,5	101,2	101,6	101,5	101,3	101,5	101,7	101,6	101,4	101,5	101,3	101,5	101,3
Health Region	100,9	101,4	102,1	102,9	101,8	102,1	102,2	102,5	102,1	103,4	101,8	101,2	100,7

#### Expected Life Years - male (Index, Austria = 100)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Austria	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0
Province	101,9	101,9	102,2	101,7	101,5	101,7	102,1	102,0	101,6	102,1	101,8	102,2	101,4
Health Region	102,1	102,6	102,7	104,3	101,8	101,5	102,8	102,9	101,2	104,5	102,3	101,5	100,7

#### Expected Life Years - female (Index, Austria = 100)

	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
Austria	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0	100,0
Province	101,2	100,6	101,1	101,3	101,0	101,4	101,4	101,2	101,2	100,9	100,9	100,8	101,1
Health Region	100,0	100,2	101,8	101,3	101,9	102,8	101,7	102,2	103,0	102,3	101,5	101,1	100,6

Source: ST.AT - Volkszählungen 2001, Bevölkerungsfortschreibung 2002-2014, Todesursachenstatistik 2002 -2014, GÖ FP-eigene Berechnungen



#### Regional Analysis - Regional Profiles: Circumstantial Evidence: Undersupplied or Healthier?

#### Mortality - Main Causes of Death 2003-2014

#### Cases of Death per 100.000 Inhabitants (Index, Austria = 100)

		2003 - 2008							2009 - 2014					
	total	CS	MN	RS	DS	EC	of it Suizid	total	CS	MN	RS	DS	EC	of it Suizid
Austria	100	100	100	100	100	100	100	100	100	100	100	100	100	100
Province	79	75	85	85	69	93	92	81	76	86	89	67	99	98
Health Region	81	79	81	89	62	107	79	85	87	82	93	63	110	62

#### Cases of Death per 100.000 Inhabitants, age standardized (Index, Austria = 100)

		2003 - 2008							2009 - 2014					
	total	CS	MN	RS	DS	EC	of it Suizid	total	CS	MN	RS	DS	EC	of it Suizid
Austria	100	100	100	100	100	100	100	100	100	100	100	100	100	100
Province	89	85	95	98	72	98	96	89	84	93	101	70	104	102
Health Region	84	80	85	95	62	112	88	85	85	83	91	65	112	68

<sup>11</sup> standard population = population of Europe 2013

alle = alle Todesursachen (ICD-10 A00-Y89)

CS = Diseases of the circulatory system (ICD-10 100-199)

MN = Malignant neoplasms - cancer (ICD-10 C00-C97)

RS = Diseases of respiratory system (ICD-10 J00-J99)

DS = Diseases of the digestive system (ICD-10 K00-K93)

EC = External causes of morbidity and mortality (ICD-10 V01-Y89); Suicide (ICD-10 X60-X84)

Source: ST.AT - Volkszählung 2001, Bevölkerungsfortschreibung 2003-2014, Todesursachenstatistik 2003 -2014, GO FP-eigene Berechnungen



## Regional Analysis – Regional Profiles: Circumstantial Evidence: Undersupplied or Healthier?

# Selected Self Reports (inhabitants older than 15 years) Health Behaviour and Selected Chronic Diseases 2014

		Inc	dex, Austria = 100		
Region	self reported health	regular	balanced mixed diet (with fruits,		never or
Kegion	status "very well"	physical	vegetables, few	"normal weight"	former
	and "well"	excercise	meat)	BMI: 18,5 bis < 25	smoker
Austria	100,0	100,0	100,0	100,0	100,0
Province	104,2	99,7	101,6	112,9	96,9
Health Region	104,4	110,7	107,5	108,5	95,0

		Index, Austria = 100												
	Diseases of Heart	Chronic	Diseases of the											
Region	and the Circulatory	Pulmonary	Musculoskeletal											
	System	Disease	System	Diabetes	Allergies	Depression								
Austria	100,0	100,0	100,0	100,0	100,0	100,0								
Province	88,2	112,5	99,3	78,0	92,3	82,0								
Health Region	69,9	57,7	83,9	49,2	46,4	28,1								

Source: ST.AT-ATHIS 2014, "Die Österreichische Gesundheitsbefragung 2014"; GÖ FP-eigene Berechnungen



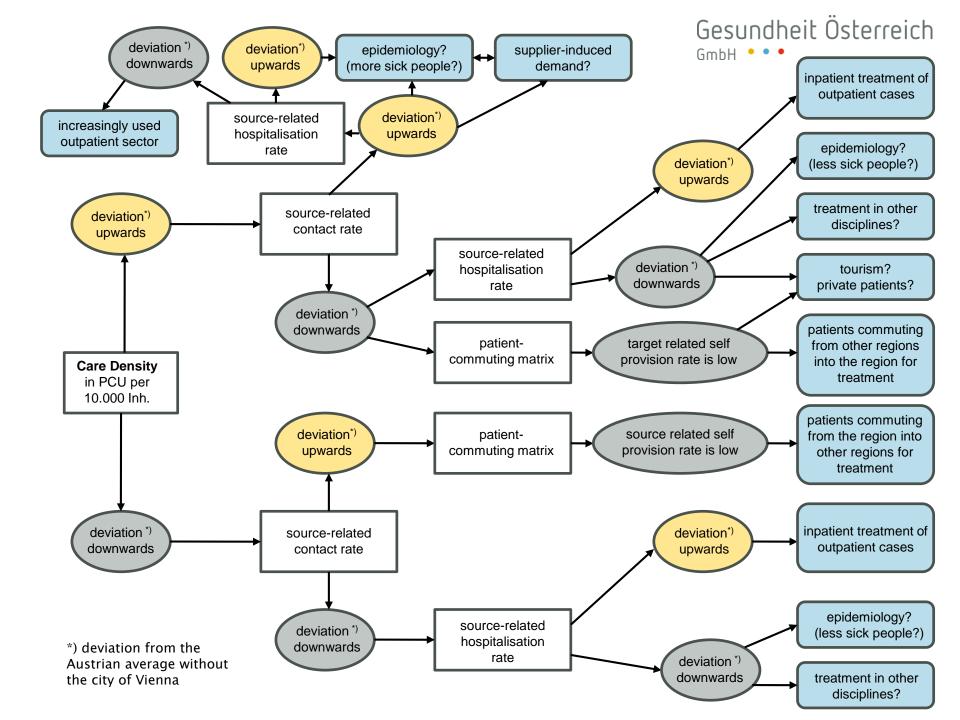
### Regional Analysis – Regional Profiles: Circumstantial Evidence: Undersupplied or Healthier?

#### Are the people in the health region

- undersupplied?
- or are they healthier?

#### Circumstantial evidence indicates that

- in the health region healthier people are living
- and that there is no situation of undersupply





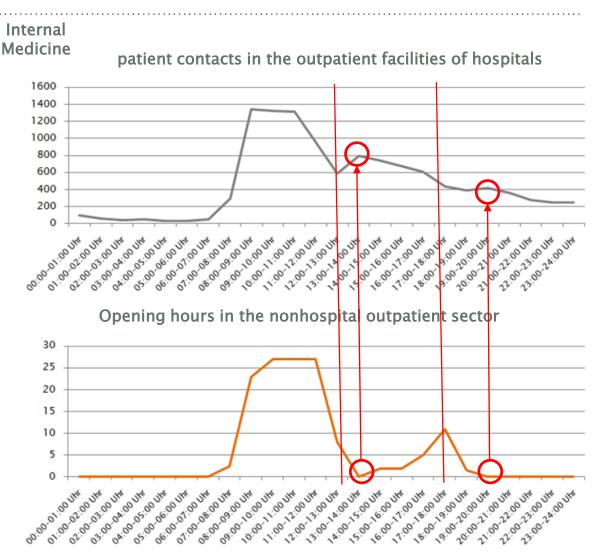
### Data Analysis: Example - Daytime Variations

Comparison (weekdays in total) of

patient contacts in the outpatient facilities of the regional hospital

to

opening hours of physicians of the regional nonhospital outpatient sector



Gesundheit Österreich

#### Planning:

#### Outpatient Short Term Care - Planning Model "Physician Health Care"

Basis (IST):

PCU (~FTE) - actual capacity value

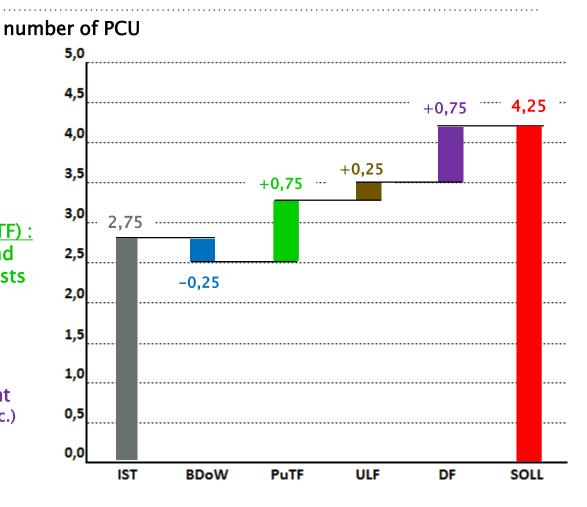


- 1. reference value (BDoW): adjustment to reference value (Austrian avarage without Vienna- BDoW)
- 2. commuting-/tourism-factor (PuTF): adjustment to the number of in- and outcommuters and number of tourists
- 3. shifting factor (ULF): inpatient to outpatient sector
- 4. demography factor (DF): adjustment to demogr. development (incl. epidemiology, patient behaviour, etc.)



ideal typical result (SOLL)
number of FTE
target value 20xx





input for discussion in regional conferences (consideration of regional specifics)

# RSG: Architecture for Planning- and Negotiation Process

(Example)

Provincial Commission on Health System Governance (governing body)

**Decision** 

#### **Steering Committee**

(representatives of province, provincial health fund and social insurances)

#### **Advisory** board

- Hospitals
- Medical chamber
- Economic chamber

#### **Operative Project Management**

(e.g. "neutral" institution)

#### **Core Team**

<u>Core Team - members</u>: experts from provinicial government and social insurances

<u>Tasks</u>: preparing data, harmonization of results on expert level, esp. planning recommendations

Regional Working Groups
Region 1

Region 2

Region 3

Region 4

 $\underline{\textbf{Regional Working Groups (RWG) - Composition:}}$ 

Representatives of the relevant health care institutions in the region and representatives of patients.

<u>Tasks</u>:

RWG is involved in the process of status quo analysis and the process of development of a target concept; in addition the RWG assesses the feasibility

others if necessary

content related project handling (e.g. academic consultant)



# Thank you very much for your attention!

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