

OPINION

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13 January 2016

The Belgian healthcare system

It seems like a New Year's gift: in collaboration with the INAMI and the Scientific Institute of Public Health, The Belgian Health Care Knowledge Centre (KCE) has pinpointed some key points of the Belgian healthcare system by publishing the latest report on the subject. Meanwhile, the president of the N-VA Bart De Wever considered it necessary to advocate for additional savings in the social security. Try to understand: on the one hand we need investments in healthcare, on the other we have to make budget cuts...

This is a fact: no less than 78% of Belgians declare themselves to be in good health and also report to be satisfied with their contacts with the health system. Nevertheless, the KCE believes we could do a much better job in several fields...

I am delighted that the KCE reaches the same conclusion than the one proclaimed by the mutual societies for many years: the mutual societies are much more than simple reimbursement bodies that some people consider as unnecessary. However, they defend the interests of patients in the negotiations with healthcare providers, and they help to control the expenses by fighting against abuse and waste. Their contacts with the members and the mass of data they process enable them to have a good overview of the gaps in the public healthcare system.

Based in particular on these data, the KCE has studied the health sector in our country over the period 2008-2013, based on 106 indicators. Moreover, these studies are carried out in different countries of the European Union, allowing a comparison of the results at European level.

Frankly, **our health system is facing major challenges**. Population ageing, which is certainly the result of an increased life expectancy, also means that people will have to rely on health care for a longer period of time. In addition, in our country, more and more powers have been transferred to the Communities in recent decades.

We are also faced with a shortage of certain medical specialists such as geriatricians. That is the reason why I think that all the doctors should be prepared to choose their future practice during their university education rather than only at the end of their studies.

Let's not lose sight of the European and international dimensions. We must take into account more and more European rules, which could constitute a serious threat to solidarity. So a few years ago, the vigilance of the mutual societies in different countries allowed us to exclude the health and social services from the European Services Directive to protect them against commercial enterprises.

The storm had barely calmed down when secret negotiations began in the backrooms of the government on the future Transatlantic Treaty (TTIP: Transatlantic Trade and Investment Partnership) between the European Union and the United States, for the abolition trade barriers. In recent years, these negotiations were conducted in the utmost secrecy, and it is precisely for this reason that the Belgian mutual societies have again sounded the alarm in the beginning of the 2015. They have worked to ensure that health and social services remain outside the negotiations -and so far they have managed to do so.

Mental healthcare

Indeed, it is impossible to go into the details of all the alarms sounded by the KCE, but one of the main concerns is mental healthcare, which is in my opinion the biggest challenge of the 21st century. We are still seeing high numbers of suicides and involuntary admissions in psychiatric hospital units. Both indicators show a lack of accessibility of outpatient mental health centers. This is also an issue that I have been raising for years.

Already in 2000, the Liberal mutual societies were the first to offer victim assistance. A few years later, they were also the first to provide an intervention for the psychological assistance for young people and patients with cancer. We have been calling for much longer for the reimbursement of psychological help by the compulsory insurance, but it is unfortunately still not the case.

We also deeply regret that in November last year, the Minister De Block has challenged the hard-fought agreement on the recognition of psychotherapists which was concluded under the previous government. Although the intention to maintain quality, the number of recognized psychotherapists is thereby unduly limited and the reimbursement by the health insurance is once again put on the back burner.

However, psychological health is inextricably linked to physical health, as confirmed by several studies.

The prevailing climate of unbridled savings risks undermining the foundations of our healthcare system. We keep hammering the mantra that we must "do more with less", so much so that we are turning a blind eye on the moral dilemma posed by the impossibility of delivering quality work while working both faster and at low price. Therefore stop the doom and gloom that healthcare is expensive!

Instead we should refocus on people with chronic illnesses: many diseases, once deadly, such as cancer and diabetes, are now turning into chronic diseases. Furthermore, another trend is confirmed: the older a person is, the more likely he/she is to suffer from several diseases simultaneously, and they therefore need help from several specialists. Our policy should also reflect this trend.

No regionalization of health insurance – a further fragmentation of healthcare?

Whatever may be said, the cost of healthcare is not particularly high in Belgium, with an average of € 2,403 per person in 2014, even falling slightly below the European average of € 2,550.

Internal differences behind these figures are not at the Community level - the average Walloon costs € 2,489 in 2014 compared to € 2,460 for a Fleming and € 2,260 for an inhabitant of Brussels- but at the level of age groups: young people between 10 and 19 cost only € 750 a year, against € 13,319 for people over 90.

The plea to regionalise healthcare in Belgium will not make the health system more effective, on the contrary. This is another message that I have been bringing for years. Not only a regionalization would affect the foundations of solidarity, but also the number of consultation bodies would double and a tangle of complex regulations and still more administration would be needed.

By the way: if 78% of the people indicate they are satisfied with the healthcare system, why should it be split?

Too little attention to prevention

However, figures reveal another sore point at both national and European level. While the annual cost per person for curative healthcare amounts to € 2,550, only € 75 are dedicated to prevention which represents € 0.20 per day!

Health promotion and education (PES) by the mutual societies, prevention, and research on threats to public health and on inequalities in access, are therefore among the core functions of the health policy. I have always advocated that all the mutual societies in this country - even those outside our national borders – should join their forces to defend the important issues relating to prevention. I believe that the best prevention policy is organized at the federal level - or even better, at the European level. Moreover, the mutual societies have already proven in other areas that a collaboration is possible.

Many people are unaware that the mutual societies are held responsible for their functioning. 10% of their operating costs are granted conditionally, insofar as they meet certain quality criteria. One of the criteria in force until 2015 specifically concerns the efforts of the mutual societies in the field of health promotion and education, to prevent people from becoming ill.

It therefore seems incomprehensible that the health promotion and education is no longer taken into account in the new evaluation system introduced this year. In other words, it turns out that the current government doesn't find it necessary to support the mutual societies in their efforts to keep people preventively healthy!

Of course we are aware that a healthy lifestyle does not only depend on what you do or do not do as an individual; but that it also depends on the environment. That is why I took the initiative in 2010 to establish with all the Belgian mutual societies the working group environmental diseases, in the bosom of our international umbrella organization AIM (International Association of Mutual Benefit Societies), another working group at European level.

Our social security concerns us all

Our healthcare system and, by extension, our social security concerns us all. Therefore, they should be integrated into the education curriculum. Thus, as a resident of this country, you will receive from an early age information about your place, your rights and obligations in this system. Indeed, an informed citizen is a citizen capable of defending himself.

Furthermore, it is important that young people know our social security system and learn to develop their own vision of society. The youth of today will indeed contribute to the society of tomorrow, including the challenges.

To be clear: my plea for the preservation of an efficient social security and health insurance does not mean that their functioning should not evolve. The far-reaching computerization of the health insurance creates more and more flows of digital data, and it will lead to the disappearance of medical certificates by 2018. For the mutual societies, this actually means less paperwork and less storage space. However, other tasks will replace those that disappear. As Minister Maggie De Block has recently said – and I agree with her on this point - the "sickness funds" should become "health funds": mutual societies who ensure the prevention of diseases. Their role should be to inform and support such as health coaches to help and advise their members.

I have already advanced this idea of transforming of the mutual society into a health fund in my latest book "Op uw gezondheid" (2015).

In short: for me, the preciousness of the human being comes before healthcare costs.

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Author of the following books:

- Gezondheid is geen koopwaar - La santé n'est pas une marchandise (2009)

- Uitdagingen voor de ziekenfondsen in de 21ste eeuw (2012)
- Gezondheidszorg: meer dan geneeskunde (2013)
- Op uw gezondheid (2015)

The ideas of prevention and mutuality as a healthcare system are treated in those books .