

COMPETITION IN HEALTH SERVICES

Dr. Martti Virtanen Director

ST. MARTIN CONFERENCE
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HEALTH SERVICES AND THE POTENTIAL FOR COMPETITION

- Health services differ widely from each other as to applying the market mechanism and competition
 - Upstream market and competition
 - Downstream market and competition
 - It is necessary to create a workable market mechanism if competition is to be credibly maintained
 - Product and cost awareness are enhanced
 - Workable competition must be attained in due course



HEALTH SERVICES AND THE POTENTIAL FOR COMPETITION (2)

- Balanced and unbiased incentives and constraints for relevant actors key to successful competition
 - Not only in certain services but in the whole governance system
- Trend in publicly financed health care:
 - Towards increased application of managed markets with an elaborate governance regime



HEALTH SERVICES AND THE POTENTIAL FOR COMPETITION (3)

- Basic health care
 - GP services
 - Downstream competition may be applied, implying free choice for patients under certain constraints
 - Upstream competition may be applied, too
 - Requires a compensation system
 - A capitation-type system: a typical solution
 - In Finland: much concern about maintaining sufficient competition on the upstream level
 - There are only a few major firms
 - Substantial foreign ownership



HEALTH SERVICES AND THE POTENTIAL FOR COMPETITION (4)

- Specialized care
 - Elective care
 - Upstream competition may be applied
 - Downstream competition: recent evidence of successful application if carefully managed
 - Compensation mechanism, information for citizens, competitive incentives and room for strategic decisionmaking for service providers
 - Urgent services
 - Upstream competition possible
 - Provision must be based on insurance
 - Private or government
 - In Finland, the ramifications of free choice in elective services for urgent care are discussed



HEALTH SERVICES AND THE POTENTIAL FOR COMPETITION (5)

- Serious and chronic medical conditions
 - E.g. diabetes
 - Conceivably: specialized producers, free choice
 - In Finland, units of this kind are being developed in the public health care system
- Challenge: workable and neutral competition not only between government-owned producers but between government-owned and private producers, too
 - On public health care markets
 - On private health care markets



COMPETITION AND PUBLIC HEALTH CARE IN FINLAND

- The Finnish health care system is characterized by a large, preponderantly tax-financed and non-market public sector
- Municipalities are obliged to provide their residents with access to medical care services
 - This concerns both primary and specialized health care
 - Heavily subsidized administrative fees
- Basic health care: municipal health care centers
- Specialized care: hospital districts (20)
 - All municipalities are obliged to be a member in one law-designated hospital district



COMPETITION AND PUBLIC HEALTH CARE IN FINLAND (2)

- Some treatments and operations deemed to constitute highly specialized medical care may be centralized on a national level in specific catchment areas
 - There are currently five catchment areas in each of which the area of several hospital districts is included
 - The catchment areas centralize the most demanding treatments or operations to the university hospitals

COMPETITION AND PUBLIC HEALTH CARE IN FINLAND (3)

- The idea of free choice was alien to the Finnish public health care system
- The new Health Care Act (1 May 2011)
 - The new Act introduced free choice between
 - municipal health care centers
 - public hospitals
 - In 2014, free choice will concern all municipal health care centers and public hospitals in Finland
 - The institutional set-up necessary to fully implement free choice is not in place



HEALTH CARE: FCA EXPERIENCE

- Antitrust cases
 - Government-owned producers increasingly active on private health care markets
 - Cross subsidization, competitive neutrality
 - Mergers: private producers
- Important reforms with complicated ramifications are being implemented in many countries, including Finland
 - Competition authorities have much expertise to offer but they have to consider the full governance regime, not only specific services

