The two class systems

An essay on the injustice of the German dual health insurance system

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In the following text, I will deal with the German health insurance system, analyse in what way it is unjust, and in what way this injustice is already being fought by legislative decisions.

Our cash register system is, first of all, predicted to be unfair and faulty. The German health care system is based on draft laws for the health insurance of workers dating from 1883, from which our current health care system developed over time. Today, our German health system consists of two different health insurance companies; Private Health Insurance Pati-ents and Statutory Health Insurance Patients. Despite regular adjustments, the health insu-rance system is outdated from today's point of view, because it treats the middle and upper class much better than the low-income earners. Every person with an annual income of more than 60,750 euros is allowed to take out private insurance. Health insurance patients also suffer from particularly long waiting times for special treatments. This is particularly visible in the example of MRI: In 2018, a SHI patient had to wait an average of 48 days for an MRI ap-pointment, while private patients often received MRI appointments within 24 hours¹. It is equally problematic that private patients are treated with more modern methods and treat-ments than patients covered by health insurance, so that there is a clear difference between the quality of treatment of health insurance patients and private patients. For example, private patients are operated on up to 25% more often than patients with health insurance² and are treated with more modern methods than patients with health insurance. For a long time, it has also been shown that most doctors prefer private patients to patients covered by health insurance, as they pay more for treatment³, as doctors can charge 2.5-3 times the rate for private patients. Another problem that our society urgently needs to address is that the statutory health insurance fund serves as a poverty multiplier, which means that a low-income earner is at risk of falling below the poverty line if he or she receives treatment. Conversely, this shows that low earners are in worse health than normal earners. It also shows that in Germany only 15% of all SHI patients were satisfied with the services of their current insu-rance fund. ¹Key figures for the control and optimization of radiological departments and practices - Busch, H.-P

² https://www.sueddeutsche.de/geld/aerzte-kunstfehler-wenn-die-operation-verpfuscht-wird-1.26620 (acces-sed

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In recent years, several parties in Germany have proposed various ways in which the health care system could be reformed. Among other things, the Left Party proposes that in future there should no longer be a distinction between private and statutory health insurance pati-ents, but that both should be combined under one fund.

The SPD is also calling for a renewal of the health care system, in which private and sta-tutory health insurance patients will also be brought together in one fund. They also demand far-reaching changes and renewals in the structure of the health system. Thus, an alliance of CDU, SPD, The Greens, and the Left Party decided in 2018 that from now on, half of the contributions to health insurance will be paid by employers and half by employees. They also decided to introduce a quick and easy arrangement of doctor's appointments with the help of so-called appointment service points. They also decided that doctors who practice in rural and structurally weak areas should receive higher supplements. An independent study by the IGES Institute found that the proposed change, including the merging of the two health insurance funds into a so-called citizens' insurance, was more profitable than continuing the dual system. However, it should be noted that the CDU strictly rejects the socalled citizens' insurance and wants to continue the dual system. The FDP is of the same opinion. The FDP, however, demands that it should be easier to switch between private insurance and statutory insurance.

In my opinion, the abolition of the dual system is long overdue. That is why I support the central citizens' insurance. However, it must be examined to what extent the smooth transi-tion from the dual class system to a central system can be carried out or whether far-reaching changes to the infrastructure and communication between doctors are first neces-sary. For example, interoperability must be strengthened. According to the Duden, the term "social inequality" describes "the unequal distribution of material and immaterial resources in a society. Based on this definition, I conclude that our current health care system is unfair be-cause it favours private patients and reserves health services for patients with health insu-rance.

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https://www.iges.com/kunden/gesundheit/forschungsergebnisse/2020/duales-system/index_ger.html (Called on 23.02)