

Remuneration of European General Practitioners/ Family Doctors



Mary McCarthy FRCGP Vice President UEMO
BMA Council International Committee Board of
Science
WMRC Deputy Chair



Funding depends on Health Service Structure

Most states have a mixture of funding

1. State funded – through taxation
2. Salaried service
3. Insurance – public
- private
3. Capitation fee
4. Payment by activity (fee per consultation)
5. Weighted for disease burden
6. Weighted for socio-economic circumstances

State-funded

PRO



- Universal coverage
- Socialist system – from cradle to grave
- Easy access to health care

CON



- Unlimited demand (“all you can eat” buffet)
- Can be, and is, abused
- Expensive for state

Salaried system

- Portugal needs a space of its own to describe its unique funding
- We believe that the U.K. Government is aiming for a similar system
- Funding is about 17% of health budget – (23% of health budget goes to ambulatory providers)

Salaried system in Portugal

PRO



- Cradle to grave coverage
- World-class vaccination service
- Limit to daily hours worked

CON



- Working conditions poor (no part-time work)
- Bureaucracy/mundane tasks
- Unreliable IT
- Lack of GPs

Insurance scheme – public or private (2016)

- Austria
- Czech Rep
- Finland
- France
- Germany
- Ireland (those not qualifying for free care – 55% population)
- Netherlands
- Switzerland

Insurance scheme – public or private (2016)

PRO



- Reasonable coverage
- Mandatory insurance in some states
- Costs allowed for

CON



- Bureaucratic
- Poor may miss out
- Vulnerable groups may be missed

Payment by activity

PRO



- Compensates for time spent
- Work done is paid for
- Liked by doctors

CON



- Bureaucratic
- Not all work valued equally
- Delays in reimbursement

Capitation or weighted payments

PRO



- Allows for complexity
- Deprivation index
- Supports rural areas

CON



- Data may not be accurate
- Difficulty in fair weighting
- Lack of funding

Registered list of patients?

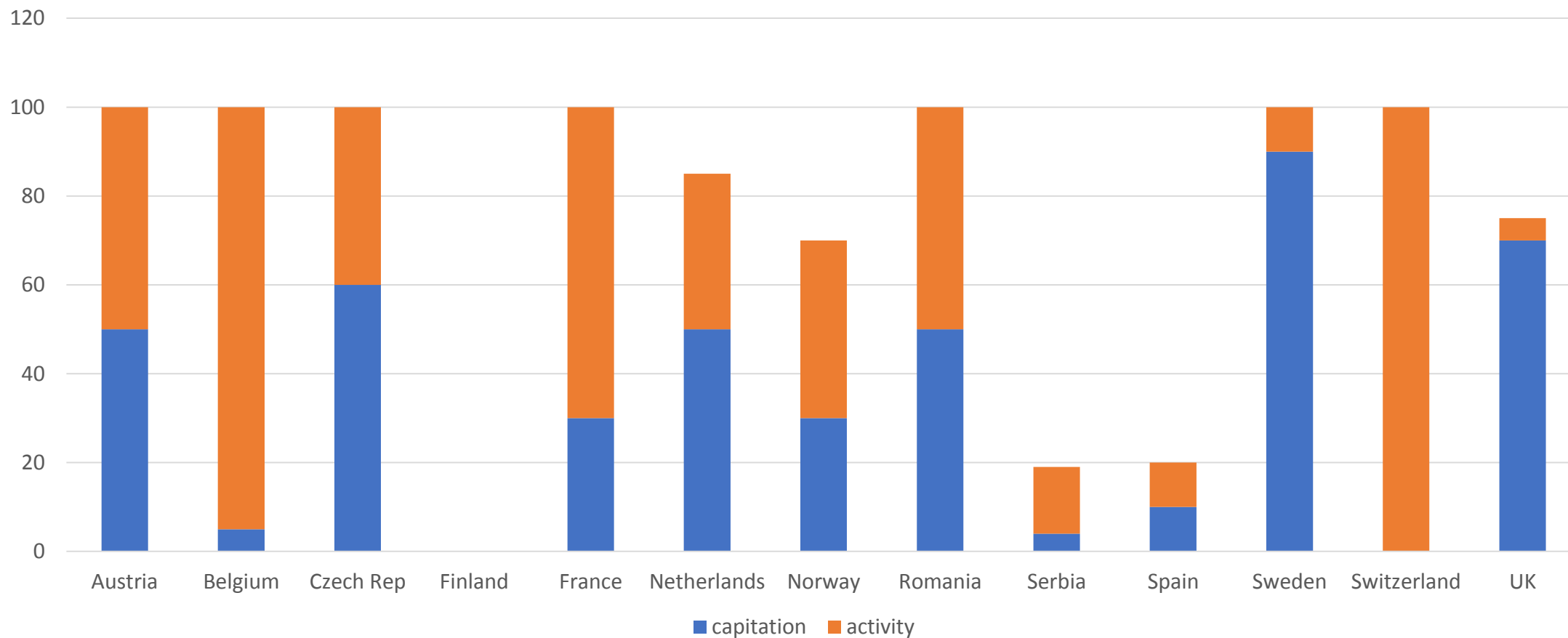
YES

- Czech Rep
- France
- Netherlands
- Norway
- Portugal
- Romania
- Serbia
- Spain
- Sweden
- Switzerland
- U.K.

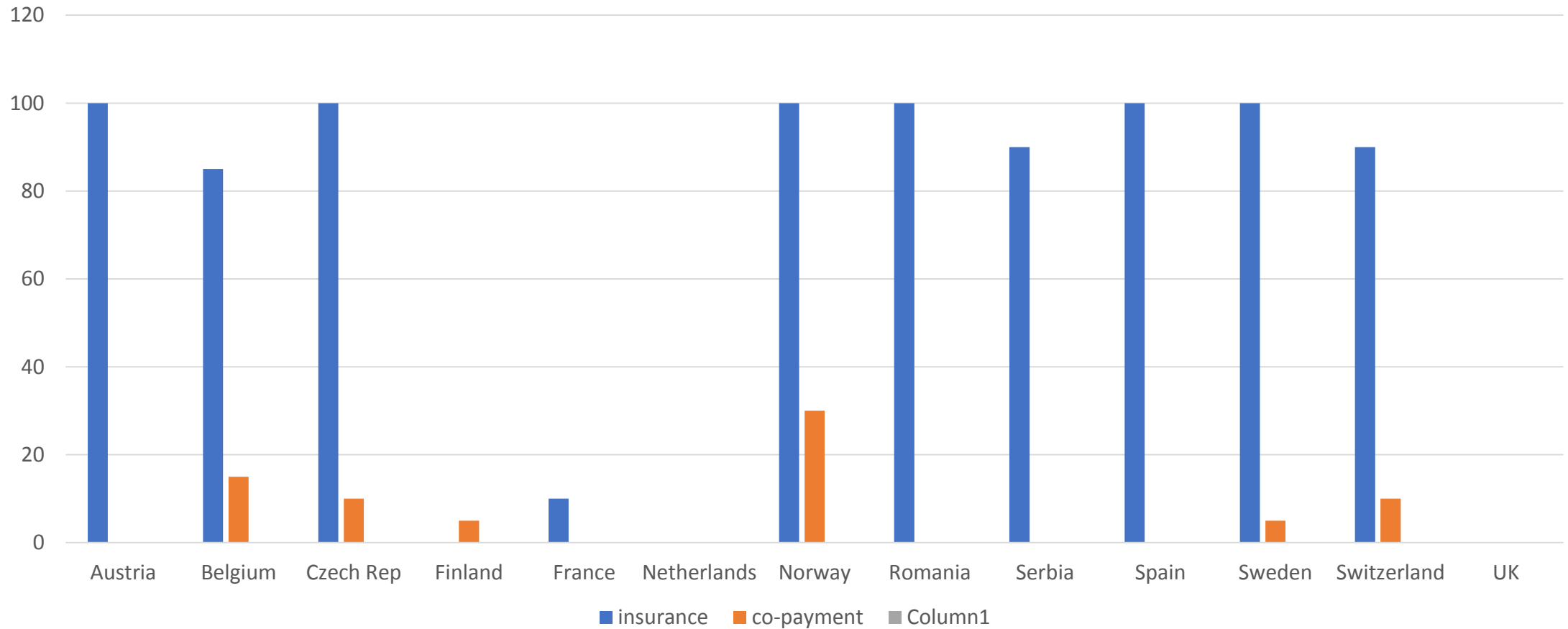
NO

- Austria
- Belgium
- Finland – only minority of systems

Payments - capitation/activity



Insurance and co-payment



Extra payments for patient categories

