

INTERNATIONAL GENEVA WELCOME CENTRE

CAGI SERVICES





HEALTH & MEDICINE

Practical information on health system in Switzerland on CAGI website

Health & Medicine

Access the full section





Health insurance



NEXT EVENTS & CONFERENCES

Tuesday, 15 October	Conference: Housing online information session
Saturday, 19 October	Excursion: Visit Lausanne and the Olympic Museum
Tuesday 29 October	Conference: Spouses/partners of employees of International Geneva - How to succeed with your job search



HELATHCARE NETWORKS IN GENEVA

MR. GIOVANNI PIZZINI CHIEF, MEDICAL INSURANCE SECTION, UNOG AND EXECUTIVE SECRETARY OF THE UNITED NATIONS STAFF MUTUAL INSURANCE SOCIETY (UNSMIS)

MS KARINE MARTINEZ, EXTERNAL AFFAIRS DEPUTY DIRECTOR, GENEVA UNIVERSITY HOSPITAL (HUG)

MR. PIERRE-VINCENT HEYRAUD, PR MANAGER (HÔPITAL DE LA TOUR)

HEALTH INSURANCE

Presented by: Giovanni Pizzini

Chief, Medical Insurance Section, UNOG and Executive Secretary of the United Nations Staff Mutual Insurance Society (UNSMIS)

DOMAINS OF SOCIAL INSURANCE PROTECTION

Health/Maternity

Accidents related to work

Pensions

Disability/Invalidity

Death

Unemployment

WHAT IS HEALTH INSURANCE ?

A risk transfer mechanism whose objectives are to:

- provide adequate care at affordable prices by pooling risk;
- prevent people from having to pay the full cost of health services;
- established enrollment processes that dictate when, where, and how someone joins;
- defined benefits package .

WHAT IS HEALTH INSURANCE ?

Governments can promote higher uptake of health insurance by helping to bring down the cost of premiums by;

- subsidizing the premiums directly or by ;
- grouping large pools of the insured to reduce <u>"fragmentation"</u> (e.g., consolidating multiple schemes covering small segments of the total population).

<u>Cross-subsidization</u> is more likely to occur the larger the pool. Generally, the wealthier and healthier subsidize the costs borne by the poorer and sicker. In such a large group, there will be a mix of those who have a predisposition and higher risk for costly illnesses and those who are at lower risk.

TYPES OF HEALTH INSURANCE SCHEMES

There are 4 main types of systems: (Health Insurance | FP Financing Roadmap)

Social Health Insurance

- Public and private formal sector employees
- Limited coverage (<25%) in most developing countries
- Financed by payroll tax on employers and/or employees

Private Health Insurance

- Private formal sector employees, usually limited to large firms
- Individuals/families can enroll but often face high premiums
- Extremely low coverage in most developing countries (<5%)

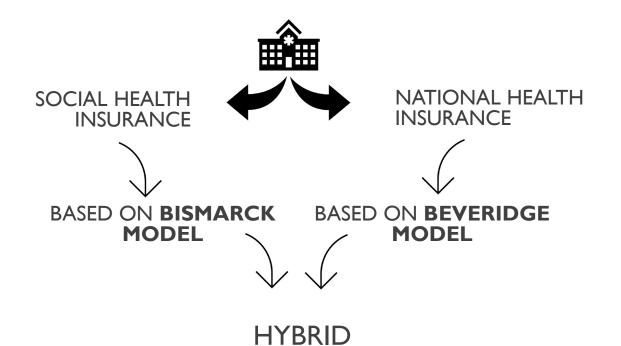
National and Other Government-supported Insurance

- Aims to offer coverage for the entire population, with eligibility based on citizenship or residency status
- Typically funded from general tax revenues
- Often targets poor with subsidized coverage, although there is difficulty in identification
- Informal sector workers may have voluntary enrollment with set premiums

Community-based Health Insurance

- Usually rural, informal sector workers and households
- Often has a more limited benefits package
- Limited cross-subsidization due to homogeneity of risk pool (poor)

GOVERNMENT HEALTH INSURANCE SCHEMES



TYPES OF HEALTH INSURANCE SCHEMES

How Universal Health Care Works

Single Payer Free government-provided health care paid for by income tax revenue



Every citizen has the same access to government-owned services (Example: The United Kingdom)

the balance

Mandatory Insurance Government-run health insurance fund financed by payroll tax on employers and/or employees



Private doctors and hospitals provide services (Example: Germany) National Health Insurance

Every citizen pays into a national plan provided by a single insurance company



Publicly funded and privately delivered (Example: Canada)

SOCIAL HEALTH INSURANCE IN SWITZERLAND

- In 1890 the people of Swiss Confederation and the Cantons accept article 34bis of the federal constitution (article 117 of the current constitution) entrusting the confederation to regulate, by legislation, universal health care for illness and accident
- The current law governing mandatory health insurance in Switzerland is known as LAMal and became effective on 1 January 1996
- The system is hybrid: base legal coverage is mandated by LAMal, provision of coverage is via private health insurance providers.
- Individuals are free to purchase additional top up coverage in the private health insurance market.

LAMAL

For more detailed information please refer to the OFSP website:

https://www.bag.admin.ch/bag/en/home/versicherungen/krankenversicherung/krankenversicherung-das-wichtigste-in-kuerze.html



COMPLEMENTARY HEALTH INSURANCE COVERAGE

- Fully private
- Insurers can deny coverage and/or apply pre-exisitng conditions
- Usually covers what is not covered by LAMal
 - Private room supplement
 - Dental
 - Optical

There are many different options, with different benefits at different cost -Good website to compare coverage is <u>www.comparis.ch</u>

TYPES PRIVATE HEALTH INSURANCE

- PRIMARY (FIRST DOLLAR) COVERAGE
- COMPLEMENTARY INSURANCE TO COVER OUT OF POCKET EXPENSES
- SUPPLEMENTARY INSURANCE, TO COVER WHAT IS NOT COVERED BY PUBLIC SCHEME
- ACCESS TO PRIVATE MARKET COVERAGE, SUBSTITUTABLE

SOCIAL INSURANCE WITHIN THE UN COMMON SYSTEM

Responsibility of the international organization as employer to provide pension and health insurance.

- A single common pension fund, UNJSPF, to which all UN common system entities contribute towards
- Over 27 different health insurance plans
 - Different risk pools
 - Different requirements by geographic area
 - Different contractual agreements (locally v internationally recruited)

HEALTH INSURANCE IN THE UN COMMON SYSTEM

HEALTH INSURANCE IS ONE OF VARIOUS COMPONENTS OF SOCIAL PROTECTION EXTENDED BY INTERNATIONAL ORGANIZATIONS TO ITS EMPLOYEES

- THERE IS A SINGLE PENSION PLAN FOR ALL UN COMMON SYSTEM AGENCIES
- THERE ARE OVER 27 HEALTH INSURANCE PLANS ACROSS THE UN COMMON SYSTEM DUE TO DIFFERENT RISK POOL AND LOCAL REQUIREMENTS

HEALTH INSURANCE IS ONE OF VARIOUS COMPONENTS OF SOCIAL PROTECTION EXTENDED BY INTERNATIONAL ORGANIZATIONS TO ITS EMPLOYEES

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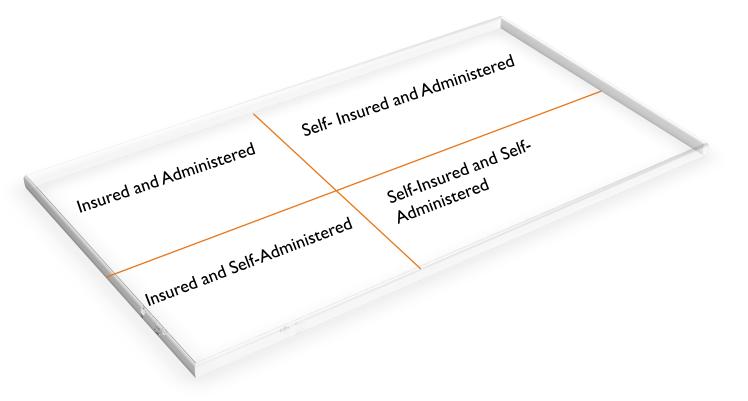
- Staff members and family members of International Organizations are exempted from LAMal (not consultants)
 - Exemptions applies to Carte de legitimation:
 - B, C, D, E, G, L, P
 - Carte de legitimation H is not exempted.

Should you have any doubts please contact the Service de l'assurance maladie (SAM)

https://www.ge.ch/assurance-maladie-frontaliersresidant-france/contacter-service-assurance-maladie

INTERNATIONAL ORGANIZATION

4 MAIN TYPES OF HEALTH INSURANCE WITHIN UN-COMMON SYSTEM



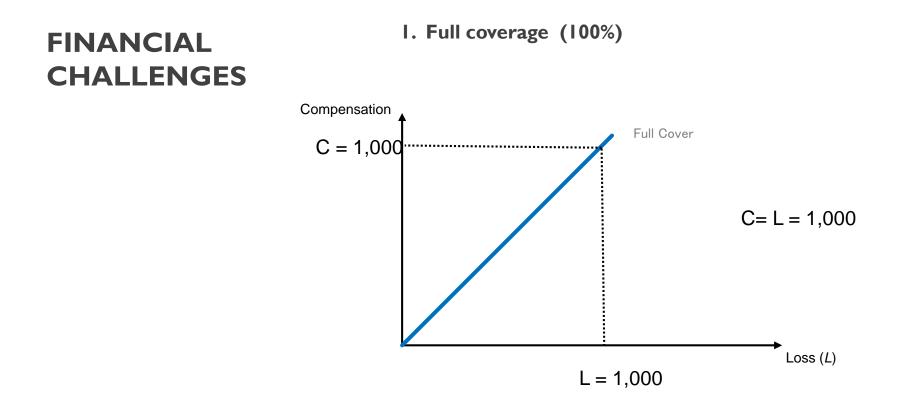
HEALTH INSURANCE RISK AND ADMINISTRATION

	Self-inured and self-administered:	Self insured and administered by a TPA:
	UNSMIS (UNOG, WMO, ITU, UNICEF locally recruited GVA,UNHCR)	UN Secretariat plans that cover various other entities.
j	Insured and self-administered	Insured and administered by a TPA:
		FAO, WFP, IFAD

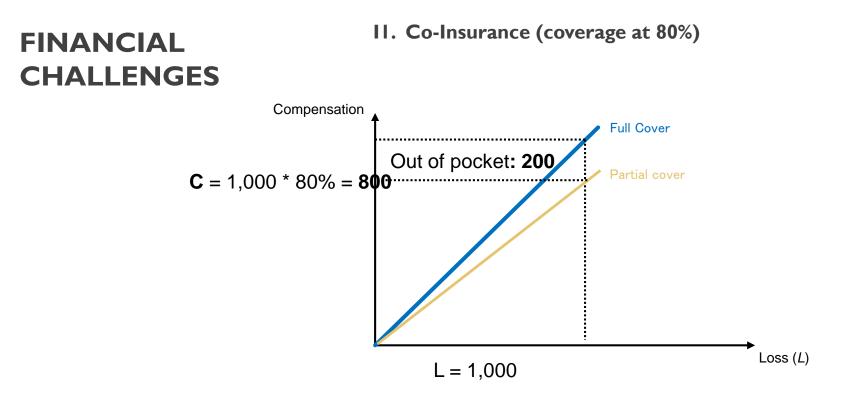
COST CONTROL TOOLS IN INSURANCE

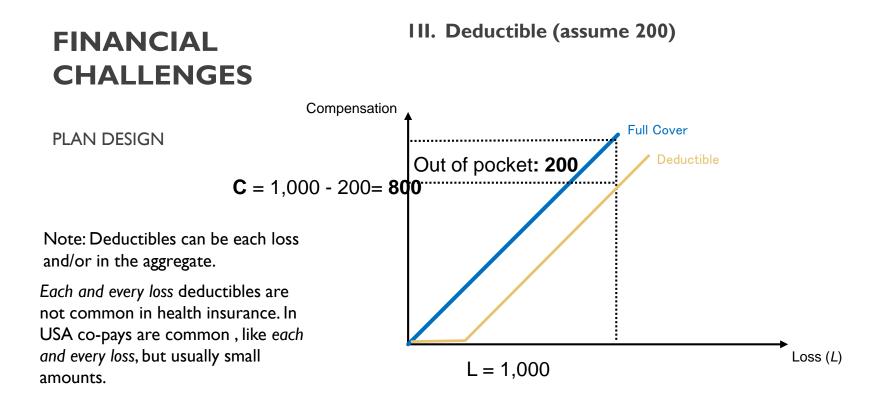
PLAN DESIGN – critical tool to contain cost and assess pricing

- Benefits
- Co-insurance
- Deductibles (aggregate or per case)
- Co-payments
- Franchise
- Threshold value
- Waiting Periods
- Stop Loss (Limit or Reinsurance)
- Networks



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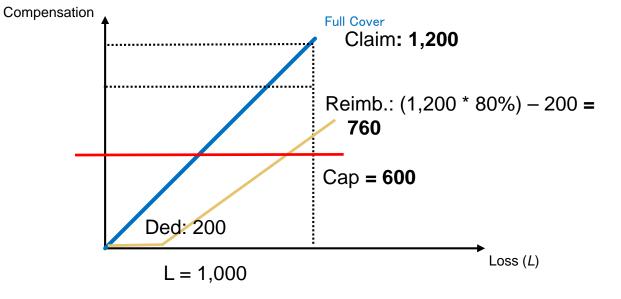




IV. Hybrid, Deductible, co-insurance and monetary ceiling/cap

PLAN DESIGN

C = 1,200 Reimbursement 80% Deductible: 200 Annual Cap: 600



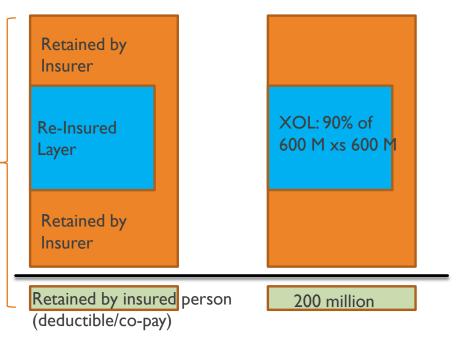
V. Looking at the bigger picture

Total annual medical expenses 2 billion

PLAN DESIGN

UNSMIS does not purchase any form of risk transfer mechanism. Prudent management over the years has allowed for the creation of different provisions and reserves:

- IBNR provision
- Currency fluctuation reserve
- Catastrophic risks Reserve
- Actuarial reserve for long term risks
- Accumulated Surplus (reserve fund)



Pricing the risk

Demographics

- Trends (i.e. changes in patterns of mental health treatment, diabetes, etc....)
- Changes in medical landscape (i.e. improved surgeries, fewer readmissions but more expensive quipment, «super drugs», etc...)
- Medical inflation

20 to 25 year horizon

- Geographic distribution and differing
- Pandemics

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Budgetary stability

• Try and ensure premiums do not increase to often to allow for budgetary stability on pay as you go for Organization and staff member who is insured

Similar hurdles in health insurance as with any other type of insurance,

• asymmetrical information: the person purchasing the insurance will always have more information than the insurer.

but there are certain factors that are key to health insurance:

- Expected Loss unknown: health insurance relies on morbidity tables, but impossible to tell what a final hospital bill may come up to in advance. In property insurance the value of the property is known in advance.
- Health risk is closely linked to behavior of policyholders (i.e. smokers, dangerous sports, etc...), no other insurance risk has such a high correlation between the behavior of policy holders and the losses, if we exclude negligence.
- A health insurance plan/system based on solidarity cannot classify insured subcategories (female v male, smoker v non-smoker,m etc...)
- Moral hazard (both ex-ante and ex-post) as well as simple overconsumption can increase as the level of benefits improves.

Pricing the risk

Health insurance is also highly sensible to both static and dynamic risks

Static Risk	Dynamic Risk
Most static risks are pure risks	They are mainly speculative risks.
They are easily predictable	They are not easily predictable
The society derives no benefit or gain from static risk. Static risks are always harmful.	The society derives some benefits from dynamic risk.
Static risks are present in an unchanging economy.	Dynamic risks are only present in a changing economy
Static risks affect only individuals or very few individuals.	Dynamic risk affect large number of Individuals.

Static losses appear periodically and are generally predictable. Because of this predictability static risks are easier addressed through insurance.

Pricing the risk

OBLIGATIONS

Contractual Benefit package foresees Insurance for life for sposue of a deceased staff member as well as after service health insurance coverage subject to specific conditions being met.

This creates liabilities for the employer that according to IPSAS must be calculated and disclosed.

These laibilities belong to the organization, not the health insurance plan: nonetheless any change in benefits, plan design, premia has a direct impact on the value of these obligations.

OPERATIONAL CHALLENGES

Receive invoices from all over the world

All types of languages

Access to healthcare in certain geographic regions

- Automation : data formats vary by country
- Operators need to be aware of different procedures and requirements in different countries.
- Medications with same active molecule have different names in different countries.
- Some geographic areas have limited access to healthcare





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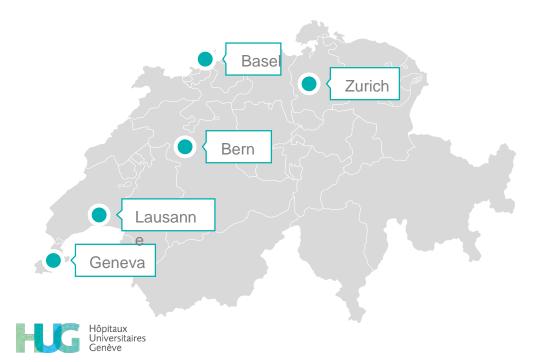
The **Swiss** health system

The Swiss health system





5 University Hospitals in Switzerland



HUG-CHUV collaboration

The Association Vaud-Genève is constituted of the 2 University Hospitals as well as the 2 Universities of Geneva and Lausanne. The Association set up the Western Switzerland University Medical Centers (CURs) in order to guarantee a high level of expertise – especially in the field of Highly Specialised Medicine (HSM).

Financing of the health system





Switzerland's most important hospital*

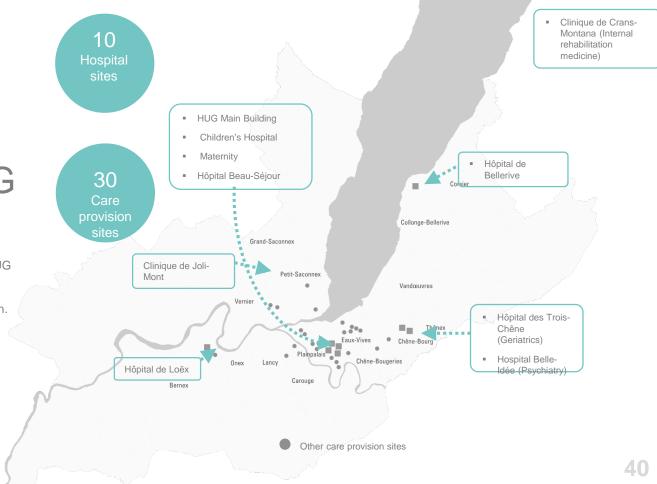
*in terms of volume of activity

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The **networks** of the HUG

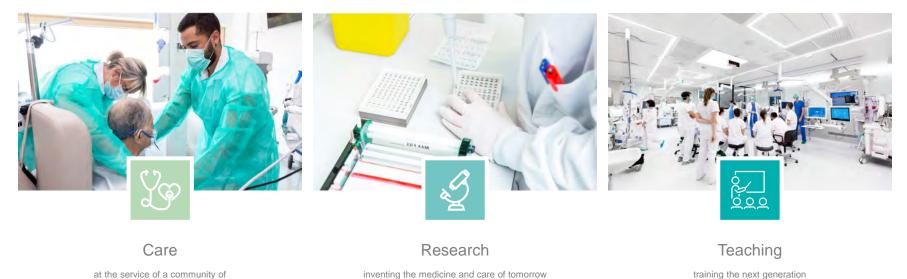
The activity networks of the HUG cover all medical specialties, from acute care to rehabilitation.







The missions of the HUG



at the service of a community of

500,000 people

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Care

The HUG has taken on the progressive establishment of centers specialized in one organ or one pathology:

- Hepatobiliary and Pancreatic Disorders
- Oncology
- Cardiovascular diseases
- Patient Therapeutic Education
- Medical Genomics
- Emerging Viral Diseases
- Aging
- Musculoskeletal and Sports Medicine
- Primary Care Medicine
- Clinical Research
- Neuro Center
- Vaccinology







Research



Budget of

CHF +180 million



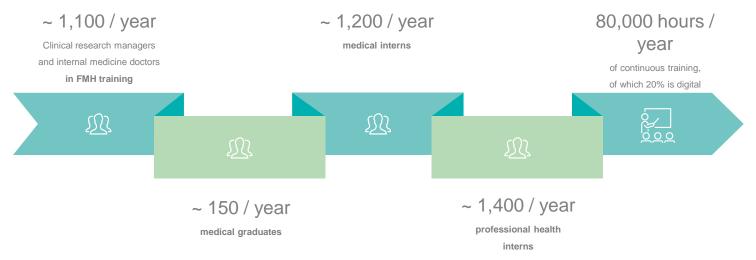
~ 230 research groups

850 - 1,250

articles per year published in journals with editorial policies

Teaching

Training the next generation







Hospitalizations

280,000 60,000 25,000 6.8 +130 +4,000 People treated Hospitalization cases Births Surgical Organ Days (reception capacity 2,109 operations transplants (the biggest obstetrics division (average length of stay beds) in Switzerland) in acute care) 0 C

Smart Hospital

The HUG are the first University hospital in Switzerland to receive the label *Smart Hospital,* awarded by the

> smarter medicine Choosing Wisely Switzerland



+1,200,000

Outpatient consultations



~ 250,000

1 emergency every 2 minutes

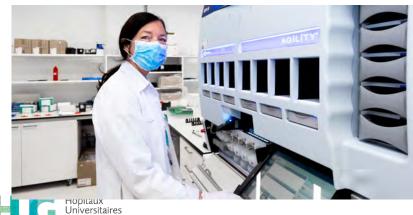
OUTPATIENTS





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Genève



- 3 surgical robots
- 6 interventional angiology rooms, including 1 hybrid
- 6 MRI scanners
- 1 cyclotron for medical use
- 1 PET-MRI device
- 1 hyperbaric chamber
- 6 multiple detection scanners
- 3 particle accelerators
- 5 PET-CT & SPECT-CT devices
- 1 interventional block imaging system
- 2 gamma cameras
- 2 EOS2 systems

Laboratory and research building (BATLab)

This includes 30 laboratories + 1 centralized reception for samples.

> 6.5 million analyses per year, or about 5,500 tests per day.

The only high-security diagnostic laboratory within a Swiss hospital.

Reference centers:

- National Reference Center for Influenza (CNRI)
- National Reference Center for Emerging Viral Infections (CRIVE)
- National Center for Meningococci
- Transplant Immunology Unit and the National Reference Laboratory for Histocompatibility (IUT/LNRH)

Other organizations:

 Foundation for new surgical technologies: the Swiss Foundation for Innovation and Training in Surgery (SFITS)







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Genève

Innovation Center

Platform for exchange and collective intelligence:

A platform for gathering, evaluating and identifying the best ideas **Vision:** Every individual can make a difference

Objectives: To stimulate the creation and generation of ideas, rapid prototyping and the conversion of ideas into projects (events, activities and training)

Technology transfer (with UNITEC): Promotion of projects, business development, creation of start-ups, co-development of new solutions with external partners.

Each year:

- ~ 80 projects initiated
- +10 inventions announced
- patents filed
- Few start-ups launched
- +1,000 people took part in events



Recent innovations

GIBOR (Groupe IRM Bloc Opératoire et Rythmologie): An interventional platform equipped with an MRI scanner connected to an operating room (neurosurgery)

and a rhythmology room for cardiology and neuroradiology activities.



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Recent major projects

Renovation and reorganization

of Adult Emergencies –

Construction of the Childhood and Adolescence House

es – launched in 2023



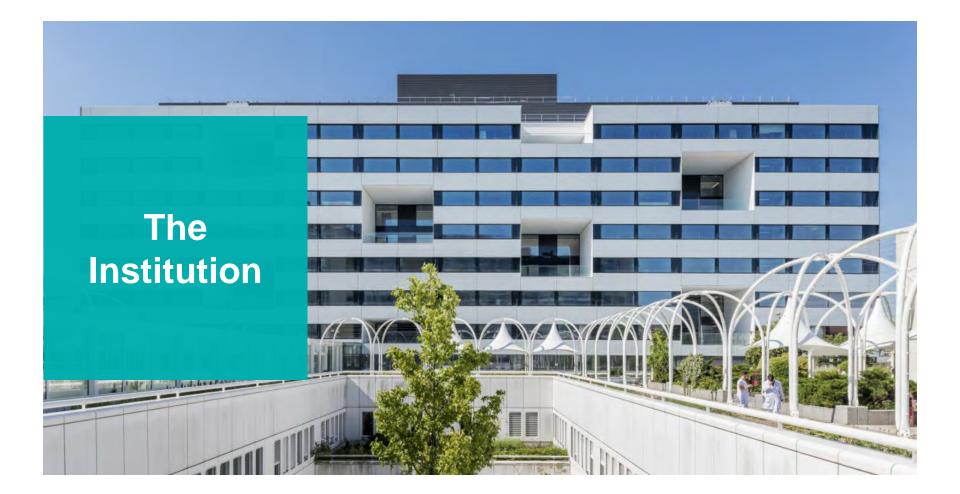
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Major Projects in progress

Construction of a building at 22-24 Avenue de Beau-Séjour comprising a HUG-Hirslanden Outpatient Surgery Center as well as the HUG Ophthalmology Department and surgery consultations







Human Resources

~70% ~30% Women Men

~13,000 Employees

160

+10,500 _{FTE}

43 years Average age









Geneva: the world's health **capital**



The HUG are leading the WHO collaborating centers in the following fields :





International organizations

In addition to the **WHO**, the HUG collaborate actively with the following international organizations:

- > CERN (European Organization for Nuclear Research)
- > **UNOG** (United Nations Office at Geneva)
- > WBG (World Bank Group)
- > **IOM** (International Organization for Migration)
- > ICRC (International Committee of the Red Cross)
- > Terre des hommes
- > **MSF** (Médecins sans frontières)

and associations such as:

> **IHF** (International Hospital Federation).











Humanitarian commitment and co-operation

30 years in international humanitarian and cooperation partnerships and development aid.

Humanitarian commitment

- Ad hoc medical interventions
- Provision of HUG staff members

Co-operation projects

- Teaching, transfer of expertise (medical, care) in partner hospitals
- Hosting of doctors and nurses at the HUG for training
- Operational research
- Evaluations of health systems and training needs
- Sharing of expertise

Pool HUG: emergency medical aid in collaboration with the SDC (Swiss Agency for Development and Cooperation) for natural disasters or serious health crises

How to get...

A Consultation at the GENERAL INTERNAL MEDICINE AMBULATORY CONSULTATION UNIT (UCAMIG) Adress: Rue Gabrielle-Perret-Gentil 4

1205 Geneva

Tél : +41 22 372 96 77 / +41 22 372 95 49

https://www.hug.ch/medecine-premier-recours/unite-consultation-ambulatoire-medecine-interne-generale-ucamig

Consultation times: 8 a.m. to 12:30 p.m. and 1:30 p.m. to 6 p.m. every day except Wednesday morning <u>Telephone hours</u>: 9:00 a.m. to 12:00 p.m. and 2:00 p.m. to 4:00 p.m. except Wednesday morning

Public transport Bus 1 (rue Sautter), Bus 5 and 7 (rue Lombard)

This Primary care unit offers **general internal medicine consultations**, as well as **joint consultations with specialists** in rheumatology, cardiology, psychiatry and diabetology. The interdisciplinary team includes internal medicine residents and chief residents, senior attending physicians, nurses and dieticians.

Its role is also to be the focal point to coordinate health care and treatments with other health care partners in Geneva.

Who can benefit from the services of this Unit:

- people domiciled in the canton of Geneva and eligible for healthcare benefits
- >>• people whose long-term follow-up can be improved by the intervention of other health professionals (dietitians, nurses) in coordination with medical follow-up



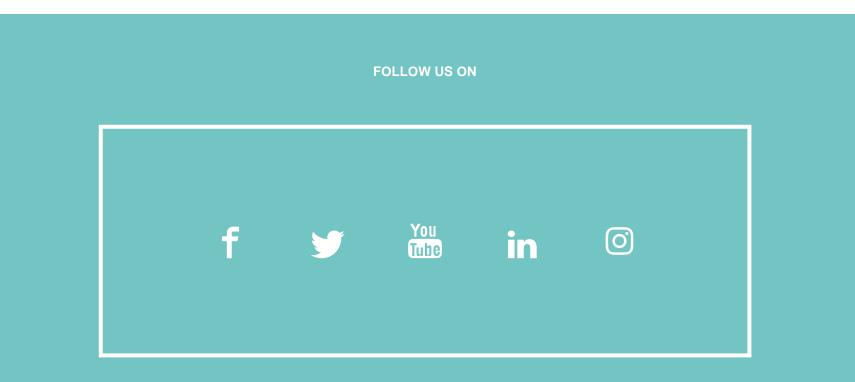
>>• people experiencing difficulty in their medical care

«What to do» cases

- □ In case of minor injuries and common illnesses
- You go to the closest Walk in clinic in the neighborhood (called «Permanence médicale»), which is a healthcare facility that provides convenient and basic medical care
- Or you call **«SOS Médecins»** : Doctors on call at home 24/24 Tél : +41 22 748 49 50
- □ In case of <u>emergency</u>
- Check the App InfoMed and go to the Emergency health service of your choice (either in one of the private clinics part of the network or in HUG)
- > Or you dial 144 (or 112) to call an ambulance
- □ <u>All-night pharmacy</u>
- > Pharma24, Boulevard de la Cluse 38, Tel: +41 22 808 00 18
- Or check the all-night pharmacy in your close neighborhood on <u>www.apo24ch</u>







For any question you may have:



Access to private healthcare in Geneva

Pierre-Vincent Heyraud PR Manager

October 10, 2024





Agenda

1 Geneva Private Cliniques Association

2 Strengths and benefits of a Private Institution

3 FAQ for new Swiss residents

Geneva Private Cliniques Association

Genève-Cliniques Members



8 members:

Hôpital de La Tour Clinique Générale-Beaulieu Hirslanden Clinique des Grangettes Hirslanden Clinique La Colline

Clinique Belmont Clinique

Les Hauts d'Anières

Clinique de la Plaine

Clinique de Maisonneuve



Proven experience in centres of excellence:

- Mother and child
- Oncology
- Cardiology
- Orthopedics and sports medicine
- Specialised surgery
- Addiction treatment
- Rehabilition

www.geneve-cliniques.ch

Genève-Cliniques Map



www.geneve-cliniques.ch



Hôpital de La Tour



Hirslanden Clinique des Grangettes Hôpitaux Universitaires Genève



Clinique Les Hauts d'Anières



Clinique Générale Beaulieu



Emergency Units in Geneva



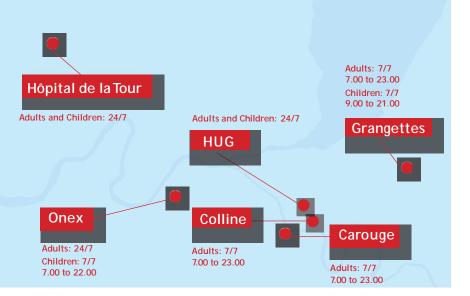
www.geneve-cliniques.ch

General Emergency number 144

- First assessment by telephone
- An ambulance is not always provided
- Use only in absolute need (waiting list)
- Know where the closet EU is from you (App)
- Adults vs Children emergency

24/7 at home doctor's consultation





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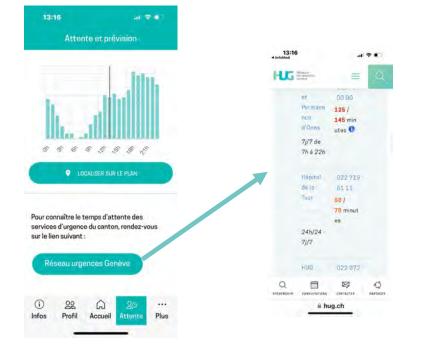
Emergency Services Ap





www.geneve-cliniques.ch





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Our Strengths and Benefits (1)

- Fundamental freedom of choice of patient
 - Free to choose the physician
 - Free to choose the hospital
 - Free to choose the level of comfort
- No waiting list
- Personalized treatment
- Strong Confidentiality
- All medical specialties provided
- High level hospitality services





Our Strengths and Benefits (2)

- Private hospitals meet and exceed international healthcare standards
- Doctors and specialists involved in international research and development projects
- High patient satisfaction rate
- Aligning consistent quality management and cost efficiency (VBHC)







Tips to make your access to medical care easier

How to find a doctor in Geneva?

https://www.la-tour.ch/en/consult-specialist



>How to get a doctor's consultation at home?

Sos médecins 022 7 48 49 50

>How does pharmacy works in Switzerland ?

- Working days: usual working hours (08h00 19h00)
- Nights/weekends/public holidays : Pharmacy on duty 0848 848 110

or www.apo24.ch

>Do I have to provide advance payment for my medical care?

- Depending on your health assurance contract terms

>Out of pocket expenses

- Health insurance contract including monthly settlements
- Insurance deductible system





Caring for you as we would for ourselves





CONTACT

La Pastorale, Maison de Maître Route de Ferney 106 1202 Genève Mo-Fr : 9 a.m. - 4:30 p.m.

+41 (0)22 546 14 00

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