



NATIONAL INSTITUTE FOR HEALTH AND WELFARE

Integrated services to reduce health inequalities



Why is the reform needed?

- Dependency ratio: Growing need for services especially among the ageing population and less money to finance them.
- Inequality: Access to and availability of services varies in different parts of the country.
- Significant difficulties in organising and producing services in small and financially weak municipalities.



Goals of the reform

- To reduce inequities in wellbeing and health between people.
- To ensure equal access to services..
- To achieve horizontal and vertical integration of social and health services.
- To ensure more freedom of choice for customers.
- To cut the growth of costs in a long term (from 2019 to 2029) from estimated 2,4 % to 0,9 %.



Why integration?

- 10 % of population uses 80 % of social and health care costs
- 5 % of population who uses only health care services → 23 % of health care costs
- 5 % of population who uses social and health care services → 57 % of social and health care costs
- Integration of services would serve the needs of these population groups.



What integration?

- **Integration of organisation:** One strong organiser is responsible for the steering and structure of provision, cost-effectiveness and quality of health care and social services
- **Integration of funding:** All funding is channeled via the provider, who has an overall picture of the funding system
- **Integration of information:** between different service providers through national registers and fully interoperable information systems
- **Integration of service chains:** through structured referral agreements and integration of individual service providers' measures into integrated entities
- **Integration of production:** through a network structure consisting of several service providers. Integration of production



What will happen to integration?

- Integration of organisation does not guarantee integrated services or better co-ordination of services from the patient/user perspective.
- Combining integration and freedom of choice in a model where services are provided by a number of public, private and third-sector operators is challenging.
- The draft legislation contains tools for guaranteeing integration in services, but will the organisers be able to use these tools?
- There is a risk that the systems remains fragmented at the level of services – and that the reform fails its promises to those who would benefit from the integrated services the most.



Will the aims be achieved?

- The increased size of the organisers and the strengthening of their economic capacity may lead to reduced inequalities in health and wellbeing.
- Some of the counties have poor organisational competence and will be weakly resourced right from the outset of the reform.
- The development of information management systems is substantial, but will last for over a decade.
- The law provides an opportunity to slow down the increase in expenditure, but no guarantees that the savings target.

