

Έχει θέση η συμπληρωματική ασφάλιση υγείας στην ανάπτυξη του συστήματος υγείας;

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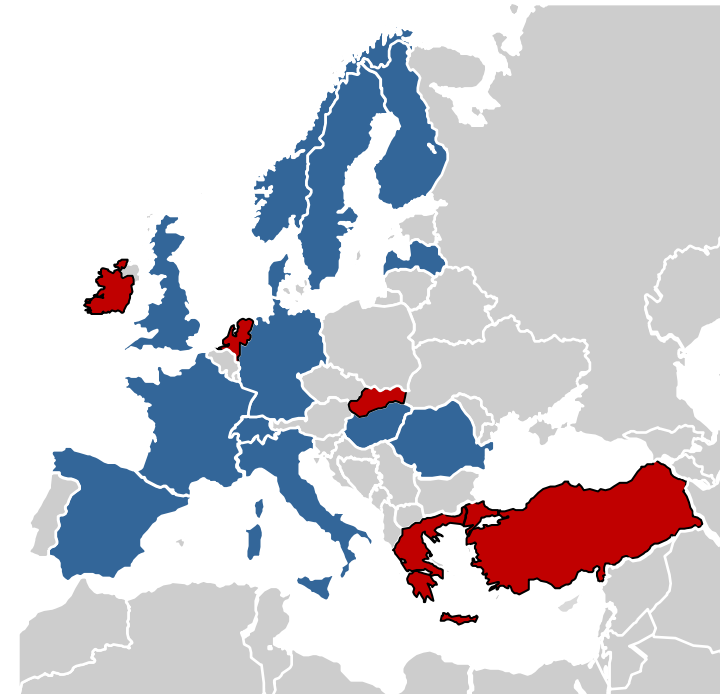
INTERAMERICAN is part of an European Organization



- **Gross Written Premiums: € 20 bn**
- **Cooperative roots with 200+ years of history**
- **Graded by Standard and Poor's with A**
- **Solvency ratio: 210%**



- **€ 53,2 bn. premiums**
- **40,2 mill. insured (1 in 10 Europeans)**
- **The largest Health insurance entity in Europe**



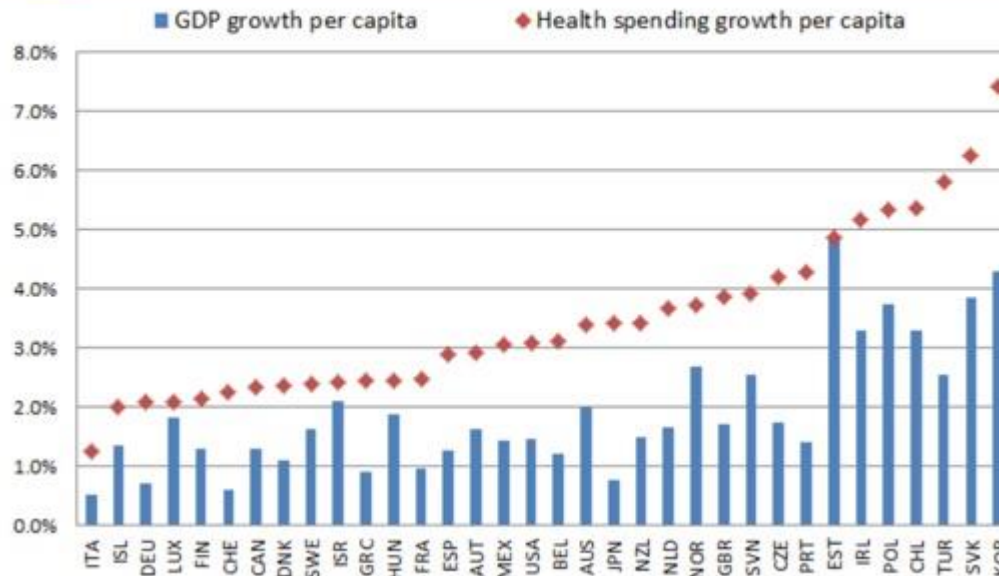
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Healthcare costs unsustainable in advanced economies without reform

Health spending has outpaced economic growth
Average growth rate of health spending and GDP per capita, 1990-2012



by mid-century without reforms, according to a new OECD

budget on health spending remains endemic in most countries, but major reforms that will require health and finance

on health and long-term care in OECD countries is set to rise, as governments can contain costs, according to OECD

ts or ceilings for health spending, but these are not enough. Other factors, rather than health-specific factors. Moreover, health spending may not always reach finance ministries in time taken.

is faster than economic growth in all OECD countries. Public funds still account for around three-quarters of health spending in most countries, which remain heavily reliant on payroll taxes, which are aging.

Upward pressure on health spending comes from new technology in medical services, rising incomes driving higher expectations, and the growing needs of

Social welfare: Different systems – Common problems

The goals

- Pension
- Health
- Disability

The Beveridge welfare state

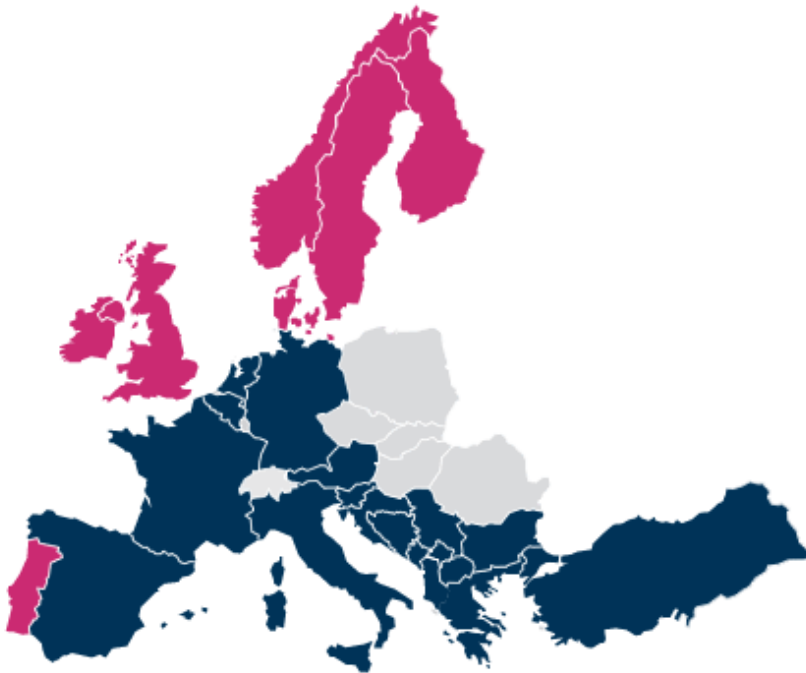
- Universal welfare rights
- Each individual has a right to social and health protection
- Funded by taxes
- Disconnected from professional status

The Bismarck welfare state

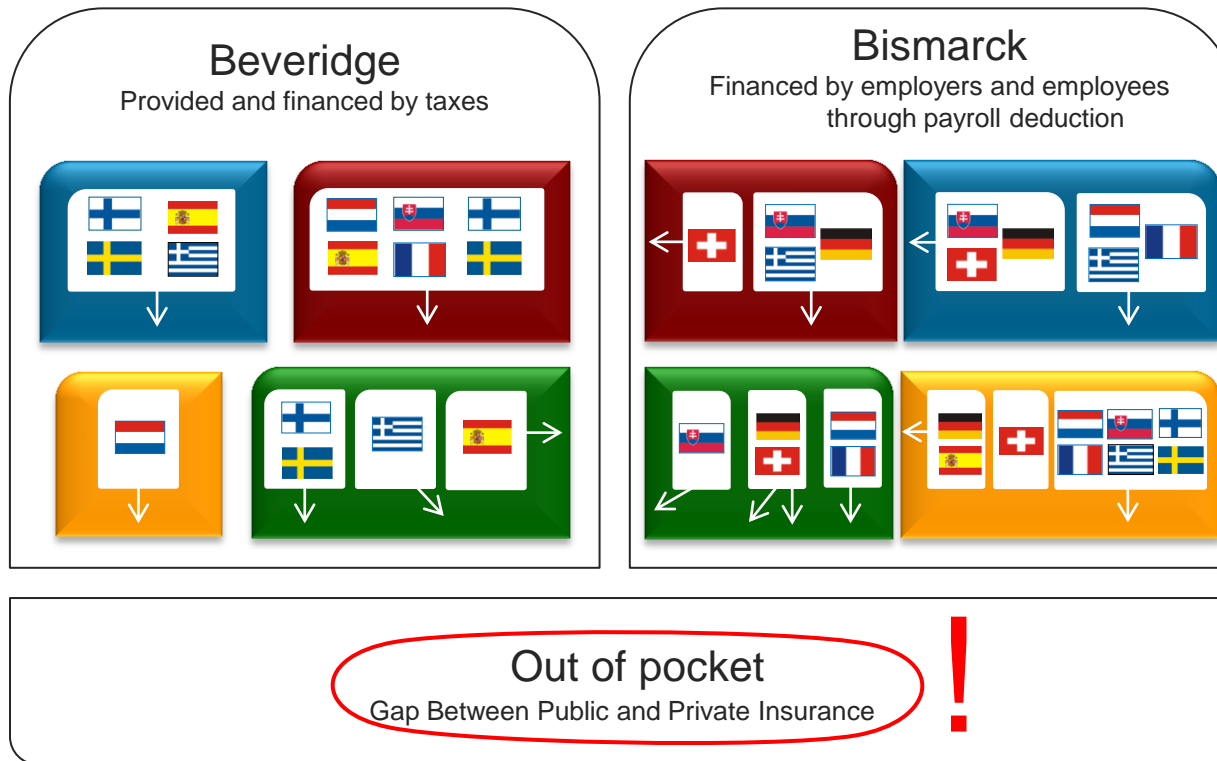
- Social protection rights are awarded to those who work and their families
- Funded by employer and employee contributions

The Common Problem

- Welfare systems have been designed for ages up to 60
- Today people live up to 80



Mixed Social Welfare Models

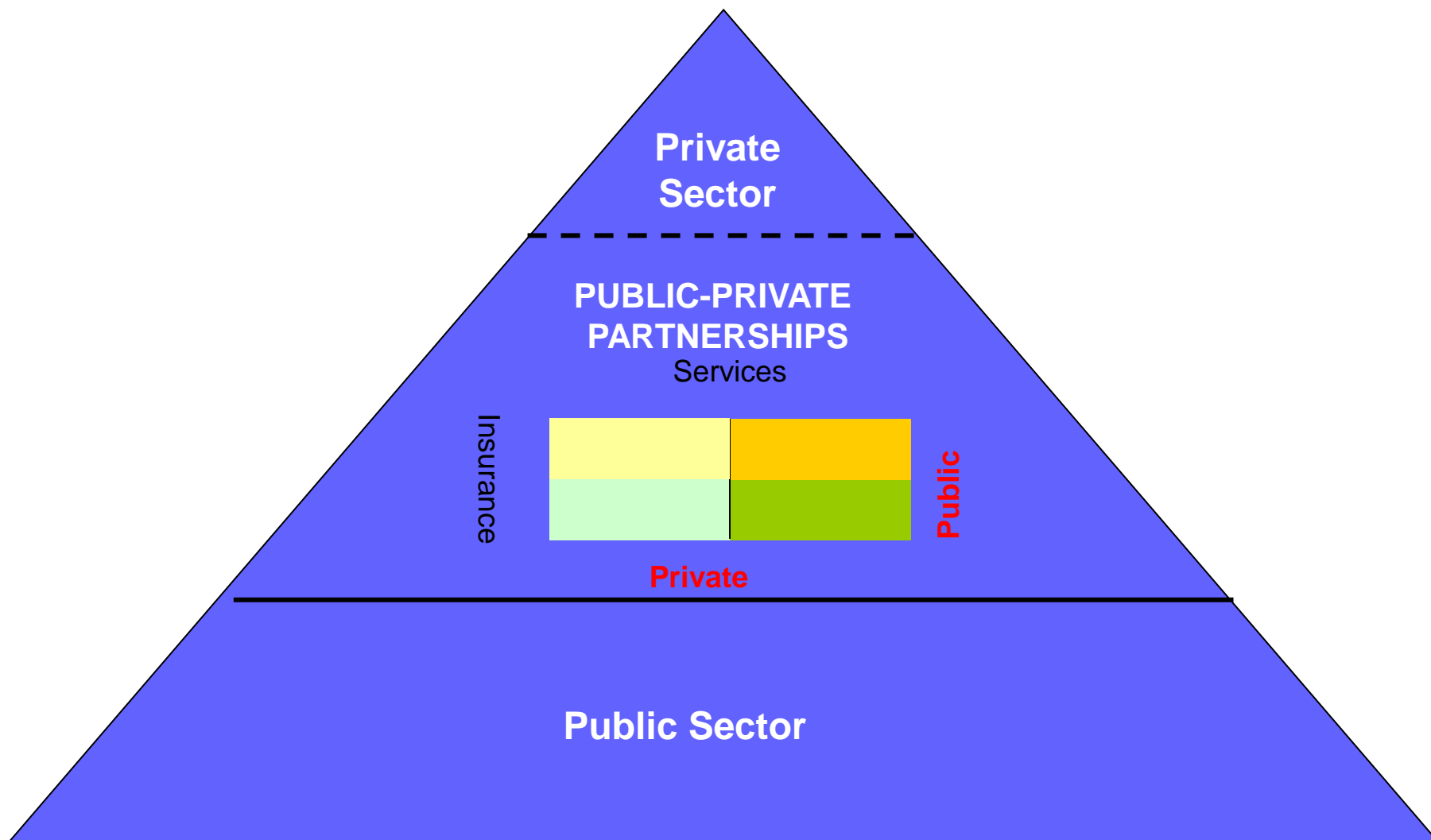


- Finland
- France
- Germany
- Greece
- Netherlands
- Slovakia
- Sweden
- Switzerland
- Spain

Health Care Long Term Care

Pensions General Welfare State

Emerging Health Model



Successful examples



Healthcare landscape in Greece

- **Hospital / specialist centered**
- **Underdeveloped primary healthcare**
- **Oversupply of doctors and undersupply of nursing personnel**
- **High costs in private sector**
- **Fragmented healthcare - discontinuity of medical supervision**
- **Duplication between Public & Private sectors**



The way forward

- Collaboration – Public Private Partnerships
- Enabling regulatory framework
 - Basic package
 - Tax incentives
- Efficient management
 - Coding
 - IT systems
 - Measurement of outcomes
 - Quality
 - Cost



Thank you!