

## The performance of the Swiss health system: good results but high costs

Wilm Quentin

C de Pietro<sup>1</sup>, P Camenzind<sup>2</sup>, I Sturny<sup>2</sup>, L Crivelli<sup>1</sup>, S Edwards-Garavoglia<sup>3</sup>, A Spranger<sup>3</sup>, F Wittenbeche<sup>3</sup>, W Quentin<sup>3</sup>

<sup>1</sup>University of Applied Sciences and Arts of Southern Switzerland (SUPSI), Switzerland

<sup>2</sup>Swiss Health Observatory (Obsan), Neuchâtel, Switzerland

<sup>3</sup>Department of Health Care Management, Berlin University, Berlin, Germany

Contact: [wilm.quentin@tu-berlin.de](mailto:wilm.quentin@tu-berlin.de)

### Background

The Swiss health system is characterized by a particularly complex institutional set-up with decision-making power shared between different levels of government, corporatist actors, and the people who can veto or demand reform. All residents are insured by Mandatory Health Insurance, which provides coverage to a comprehensive benefits package. Health expenditures per capita were US\$ 6,062 in 2012 - the second highest in Europe after Luxembourg.

### Methods

The assessment builds on the extensive country monitoring by the European Observatory on Health Systems and Policies through its Health Systems in Transition (HiT) health system reviews. Monitoring is carried out using a standardized questionnaire that collects data on financial protection and equity in financing; user experience and equity of access to health care; health outcomes, health service outcomes and quality of care; health system efficiency; and transparency and accountability.

### Results

Life expectancy in Switzerland is the highest in Europe after Iceland, and healthy life expectancy is several years above the EU average. Patients are highly satisfied with the health system, perceive quality to be good or very good, and there are virtually no waiting times. Financial protection of Swiss households from the costs of medical care is good but more limited than, for example, in Austria, Germany, or the Netherlands. Low income households contribute a greater share of their income to the financing of the health system than higher income households. Flawed financial incentives exist at different levels of the health system, potentially distorting the allocation of resources to different providers.

### Conclusion

The Swiss health system is highly valued by patients and scores very well on a broad range of indicators. However, a great challenge for Swiss policy makers remains controlling the high and rising costs of the health system.