

## Long Term Care Financing in Germany: Cheap and Comfortable like a VW, yes and no

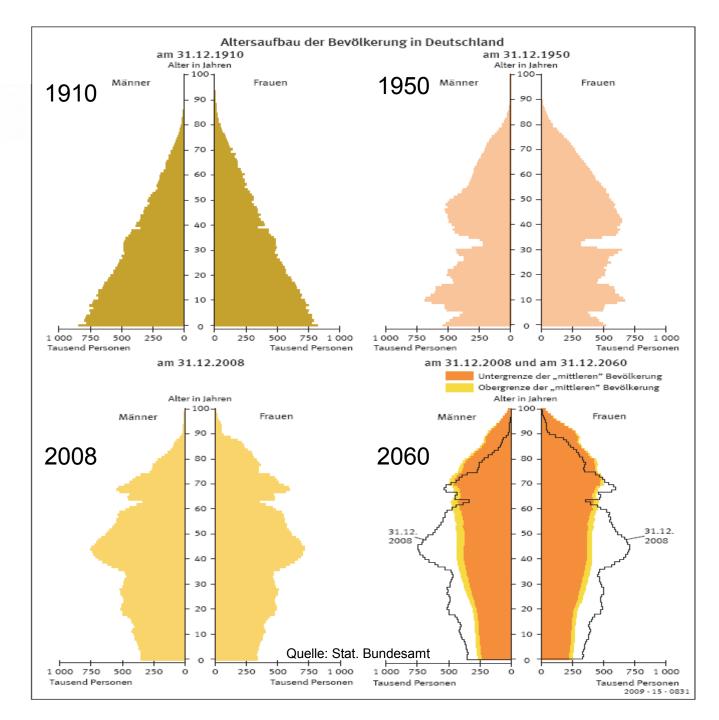
AWBZ Congres,
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**Dr. Christian Berringer**Federal Ministry of Health Berlin



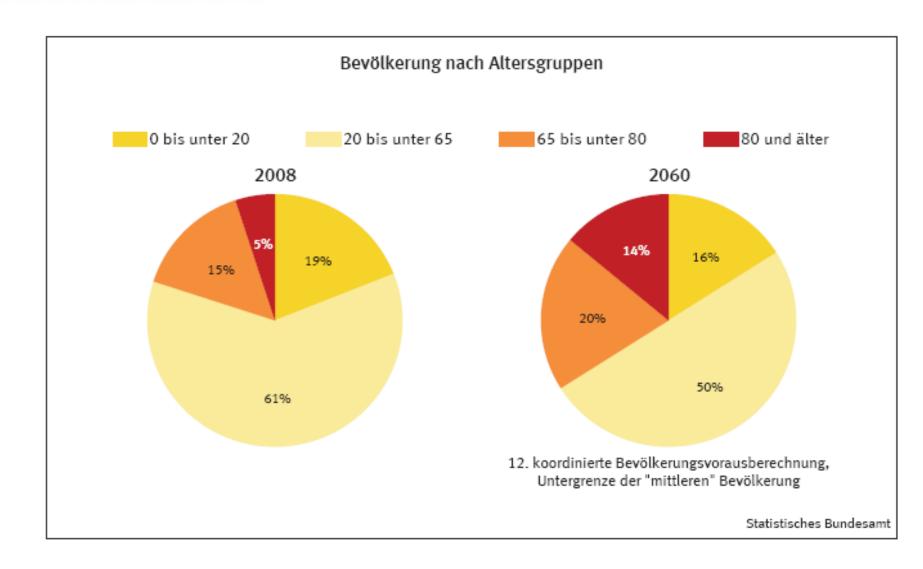
# Demographic Structure in Germany

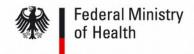
**Development** 1910 - 2060





### Population - Age Groups 2008 / 2060





### People in need of care 2020-2050

## Future development of number of people in need of care

- **→** 2020 2,78 Mio.
- **2030 3,20 Mio.**
- **2040 3,61 Mio.**
- **2050 4,21 Mio.**



## Age Groups and Care Needs

### Risk of being in need of care:

- before the age of 60: ca. 0,5 %
- between age 65 and 70: ca. 2,8 %
- between age 85 and 90: ca. 38,0 %
  In 2008 ca. 4 Mio. people over 80 (5% of pop.); in 2050 more than 10 Mio. people over 80 (13, 5% of pop.).



### The Need for Action

- Demographic Change
  - Rise in Life expectancy
  - Low birth rates
- Consequences
  - Number of people in need of long-term care rises
  - Number of people with dementia rises
  - More carers are needed



## **Long Term Care Insurance since 1994**

#### **Basic features**

- Nationwide compulsory contributory system contrib. rate:

  - 2.05% of gross income;0.25% surcharge for childless insured employees / employers each pay half
  - Organized by LTC insurance funds & private insurance companies (following health insurance system)
- Solidarity and subsidiarity
- Out-patient care before in-patient care
- Self-determination and participation



## Long Term Care Insurance - scope

#### 2.5 million persons in need of care

Persons in need: physical, psychological, mental handicaps,

need help to carry out daily and recurring activities of everyday life over a period of at least 6 months.

- Relevant needs: personal care, nutrition, mobility, housekeeping.
- Assessment to identify level of care needed.
- 3 care levels; benefits do not depend on income.
- Benefits staggered according to degree of care needs.



## **Provision for People in Need of Care**

#### Eckdaten der Pflegestatistik 2011

#### Pflegebedürftige 2011 nach Versorgungsart

2,5 Millionen Pflegebedürftige insgesamt						
zu Hause versorgt 1,76 Millionen (70 %)		in Heimen vollstationär versorgt: 743 000 (30 %)				
durch Angehörige: 1,18 Millionen Pflege bedürftige	zusammen mit/ durch ambulante Pflegedienste: 576 000 Pflegebedürftige					
	durch 12 300 ambulante Pflegedienste mit 291 000 Beschäftigten	in 12 400 Pflegeheimen <sup>1</sup> mit 661 000 Beschäftigten				

1 Einschl, teilstationäre Pflegeheime.



## **Long Term Care Insurance - Benefits**

Benefits *in cash* for home care, benefits *in kind* for home care services, semi-inpatient care, in-patient care

- ↑ 743 000 persons in more than 12 000 residential care homes; more than 50 % persons with dementia.
- Home Care (1.76 Mio. persons): family care / informal caregivers (67%) and 12300 care services (33%).



## LTC ins. benefits 2002-2012

#### Expenditure on benefits of the Social LTCI in billion Euro

	Home care	Institutional care	total
2002	8,3	8,2	16,5
2003	8,2	8,4	16,6
2004	8,2	8,6	16,8
2005	8,2	8,7	16,9
2006	8,2	8,9	17,1
2007	8,4	9,1	17,4
2008	8,9	9,3	18,2
2009	9,6	9,8	19,3
2010	10,2	10,3	20,4
2011	10,4	10,5	20,9
2012	11,1	10,8	21,9



## LTC Expenditure sources 2011

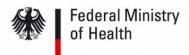
#### Sources of expenditure for long term care in 2011

Source	bn €	as %of public / priv. expenditure	as % of all expenditure
Public expenditure	25,95	100	61,9
Social LTC Insurance	21,92	84,5	52,3
Priv. LTC Insurance	0,72	2,8	1,7
Social assistance	3,10	11,9	7,4
War victim assistance*)	0,21	0,8	0,5
Private expenditure**	15,97	100	38,1
Nursing homes	10,76	67,4	25,7
Home care	5,21	32,6	12,4
Total	41,92		100

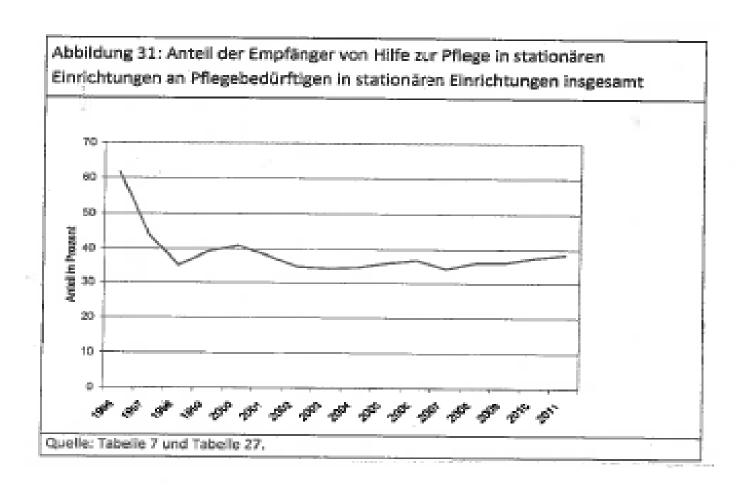
<sup>\*)</sup> average 2010 / 2012.

Source: Rothgang / Müller / Unger: BARMER GEK Pflegereport 2013, November 2013

<sup>\*\*)</sup> estimates



## Receivers of additional social assistance in care homes 1994-2011





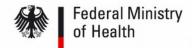
## New Developments – Reform Law 2012

- LTC insurance benefits and care services must be stronger directed to people with dementia
- Care services should be organized more flexible
- Relatives need more support
- Insurance Funds and Medical Services should offer better service
- Less bureaucracy in LTC
- sustainable financial stability
- More private providence



## Reform Plans of the new Government

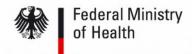
- First step (2014):
  - Rising of contributions (+ 0,3%) and benefits (,,dynamisation");
  - More diversity: social care; respite care; home conversion grants etc.
  - total cost ca. 2.4 bn €
  - Introducing the LTC precaution fund (ca. 1.2 bn € p.a.)



## Reform Plans of the new Government

#### Second step (2015):

- A new method of assessment with better response to needs of care of people with dementia
- adapting structure and levels of benefit
- total cost ca. 2.4 bn € (contrib. rise +0,2%)
- rehabilitation and coordination of services and providers
- quality assurance (outcome orientation)



## Thank you for listening.

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