

Healthcare in Finland

Is it Free and Universal?

Facts and myths or something different

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Use the toggle box in the upper left corner to open the comments to each slide



The pretest: Facts and myths or something different

1. What politician is frequently in the media touting the benefits of the healthcare system in Finland?
2. True or False. **Healthcare is free in Finland**
3. Our healthcare system is a hybrid system of public and private insurance. True or False. **There is no market for this type of system in Finland**
4. True or False. **It is not possible to make cost and price comparisons when it comes to healthcare**
5. True or False. **DRGs for prospective payment are different between Finland & US**



Aalto University



Productivity Comparisons in Healthcare. A Benchmarking Collaborative between Finland and United States

Teemu Malmi, PhD
Kiimo Matilla, MD
David Derichs, PhD

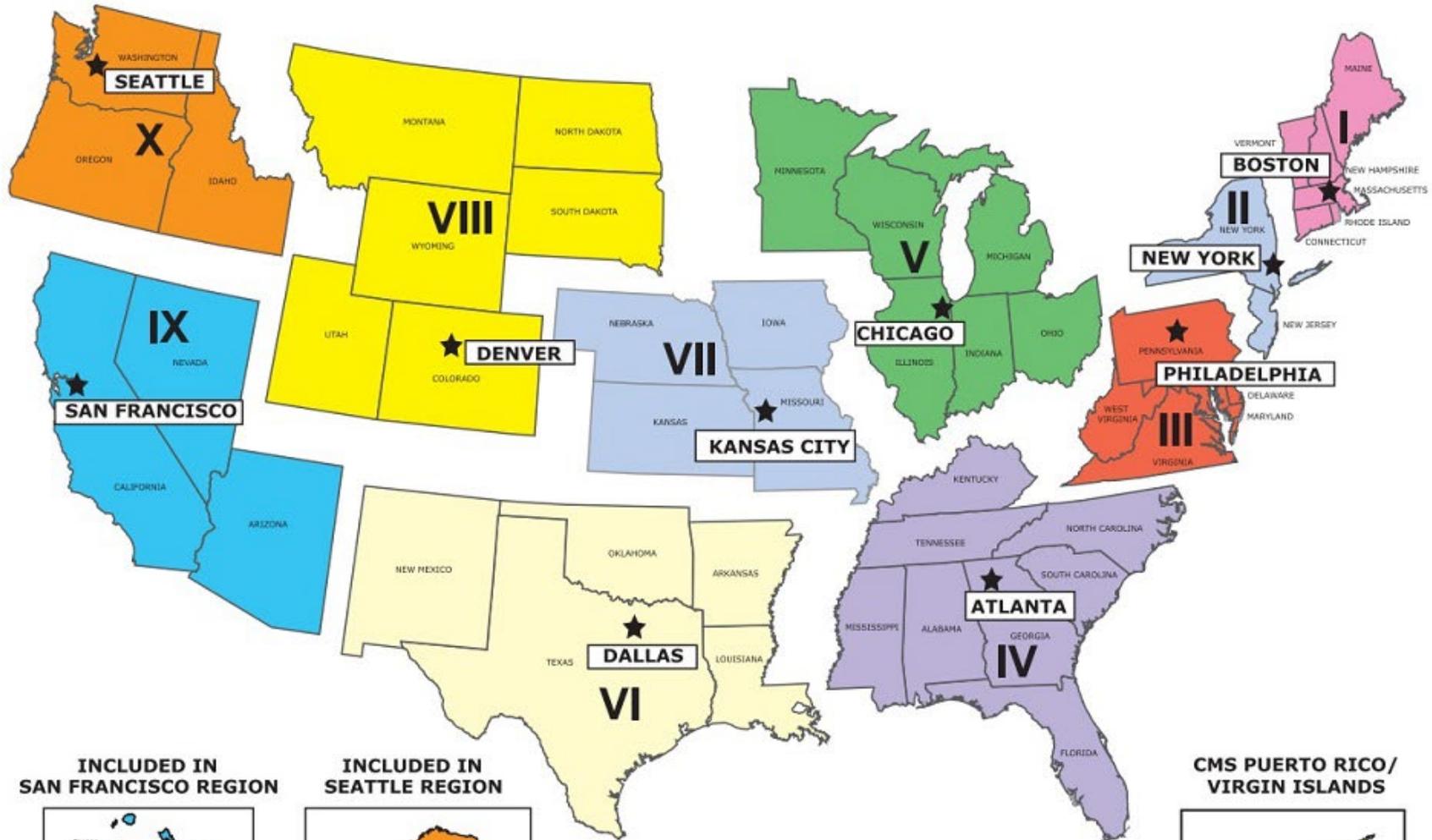


Varsha Eidnanim, MBA-HCA
Finance Department



CMS Regional Locations

CENTERS FOR MEDICARE & MEDICAID SERVICES



INCLUDED IN SAN FRANCISCO REGION

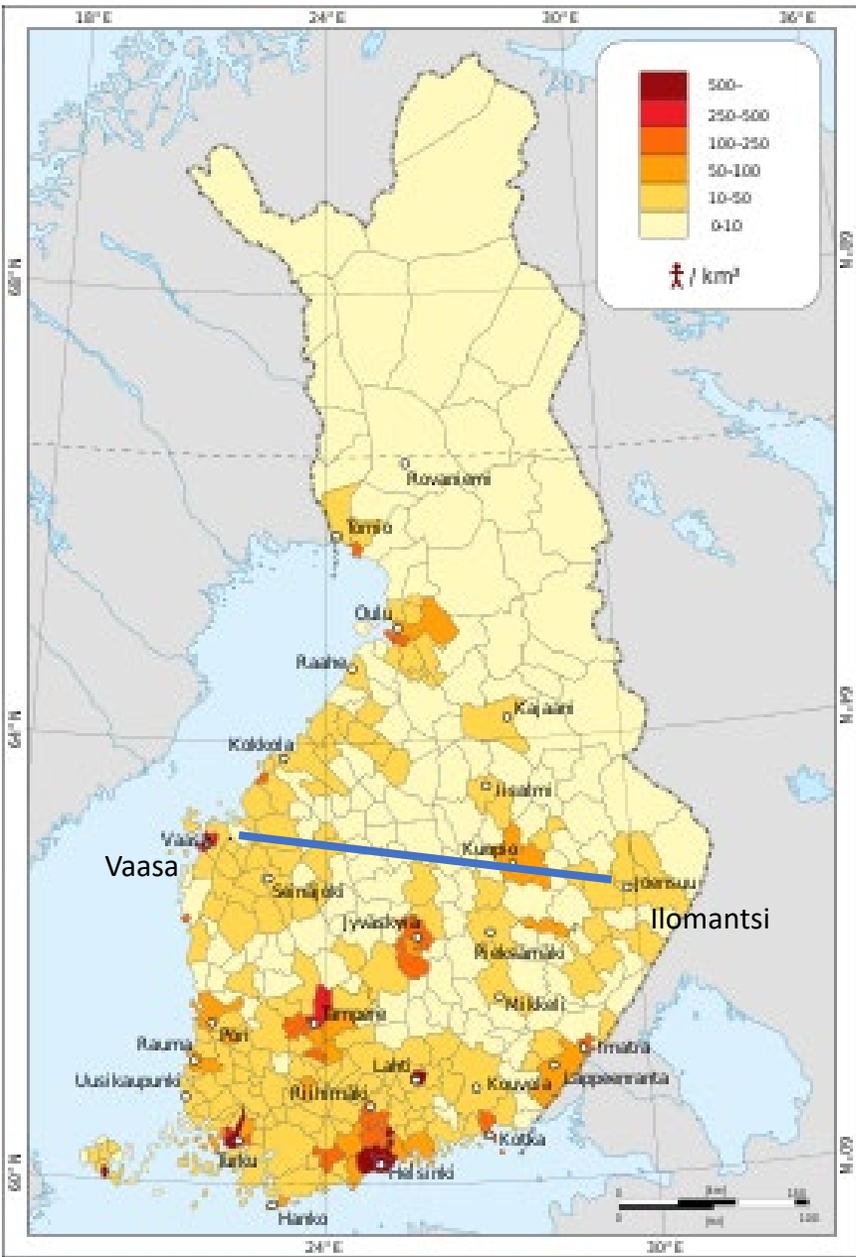


INCLUDED IN SEATTLE REGION



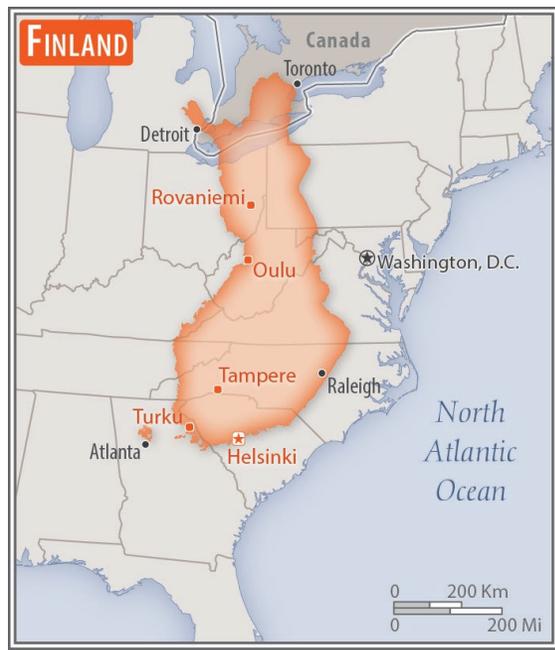
CMS PUERTO RICO/ VIRGIN ISLANDS



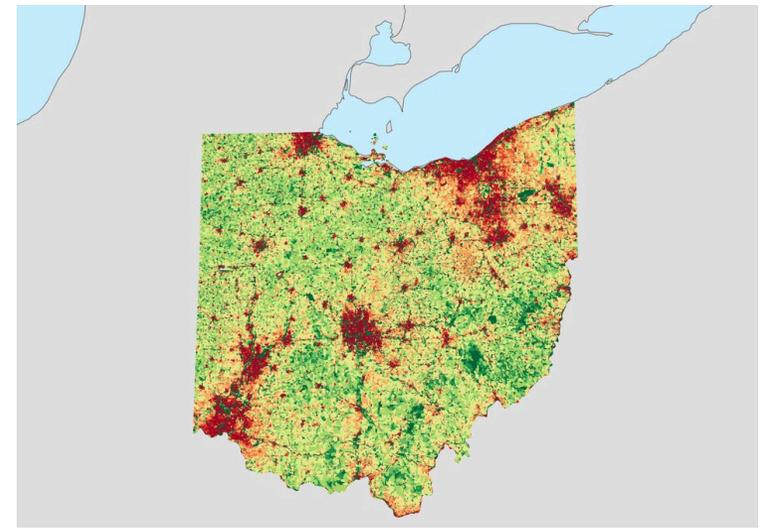


130,678 Sq Miles
 5.6 million Inhabitants
 10.8% poverty (2020)*
 27.7 GINI index (2019)†?

41,222 Sq Miles
 11.8 million Inhabitants
 11.4% poverty (2020)*
 41.5 GINI index (2019)†?

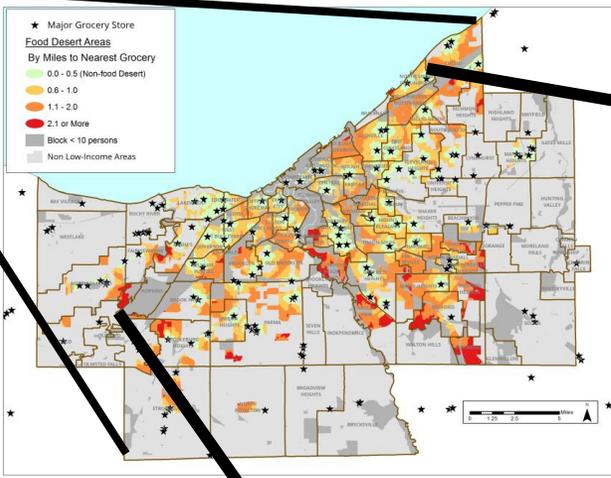
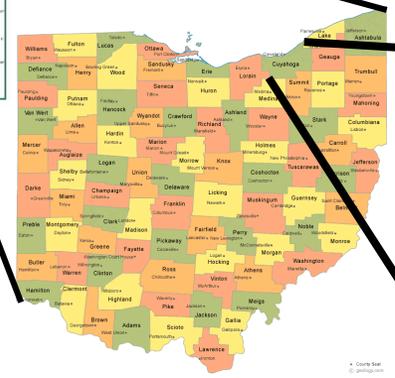


<https://cyprusandaxi.com/finland-vs-ohio-comparison/>

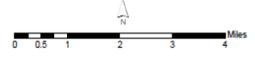
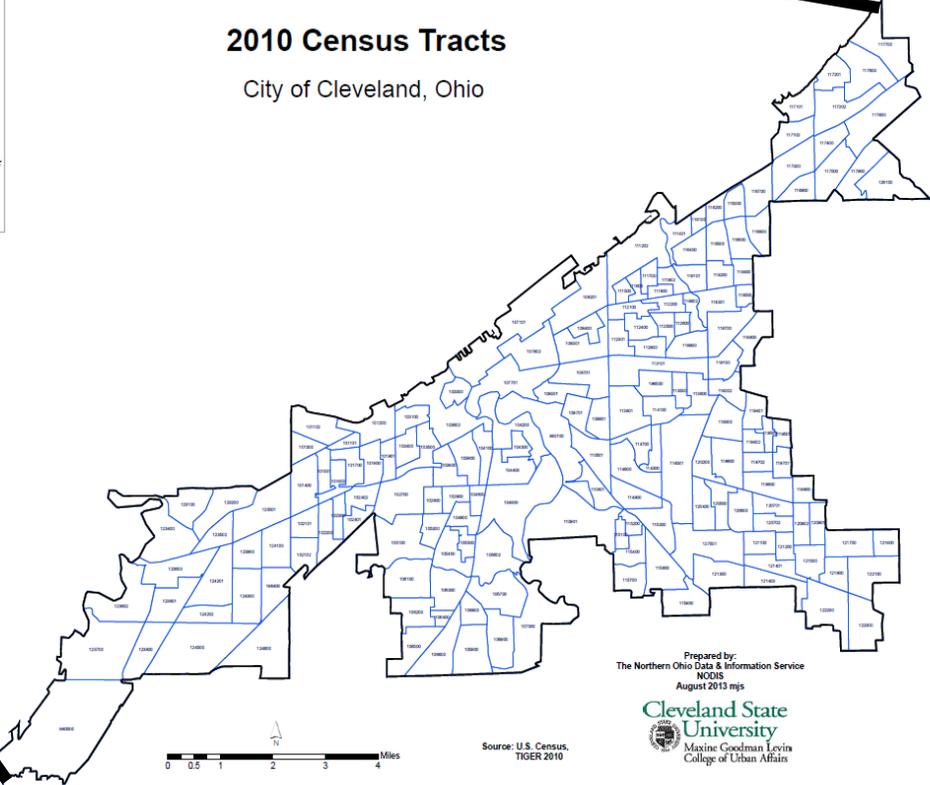


Human development index
 Health, Knowledge, Standard of Living
 USA—0.9198
 Finland—0.938

* <https://www.census.gov/library/publications/2021/demo/p60-273.html>
 † <https://data.worldbank.org/indicator/SI.POV.GINI?end=2019&locations=US-FI&start=1997>
 ? Per member; ?OECD ? Square root member income—benchmark household income



2010 Census Tracts City of Cleveland, Ohio



Source: U.S. Census, TIGER 2010

Prepared by:
The Northern Ohio Data & Information Service
NOIS
August 2013 mjs





Yleisradio Oy
(Public Radio, Finland)

Care homes and hospitals suffer from staff shortage
According to an April [report \(siirryt toiseen palveluun\)](#) released by the Ministry of Economic Affairs and Employment, the nursing sector is experiencing Finland's most severe labour shortage, reporting 3,378 open positions for less than six-month fixed-term contracts. June 16, 2022

<https://yle.fi/a/312497112#:~:text=The%20nursing%20sector%20in%20Finland,country's%20most%20acute%20labour%20shortage.&text=Some%20care%20homes%20and%20hospital,of%20the%20country's%20nursing%20shortage>.

THL: Longer waits for care in all Finnish hospital districts this year

The national health institute blames the pandemic for the increasingly long waits for specialised medical care. June 16, 2022

<https://yle.fi/a/3-12496673>



Terveyden ja hyvinvoinnin laitos

THL: People in Finland increasingly dissatisfied with healthcare services

The difficulty of accessing services was one of the main complaints made by clients of healthcare centres. November 18, 2022

<https://yle.fi/a/74-20009335>

Finland saves as some drug prices drop 98%

Can cheaper medicine help Finland hire more nurses? Most people in Finland don't pay full price for their medicine. Benefits agency Kela's ceiling for out-of-pocket medicines is around 600 euros annually. This means taxpayers foot the bill for the rest, which is why the lapsing of drug patents makes a sizable difference in the state's drug outlays. June 3, 2022

<https://yle.fi/a/3-12475090>



[Kansaneläkelaitos](#) (Social Insurance Institution of Finland)



Yleisradio Oy
(Public Radio, Finland)

Income inequality in Finland grows to highest level since 2007

The share of low-income earners in the population increased last year, returning to pre-pandemic levels.

<https://yle.fi/a/74-20009360>

Last year, some 718,700 people were classed as low-income earners, which is 40,000 more than in 2020 but roughly the same as in 2019.

Low-income is defined by Eurostat as up to 60 percent of the median income. Last year, this figure was some **1,350 euros** per month.

Statistics Finland further found that a total of 421,600 people in Finland were classed as long-term low income earners in 2021, meaning that their income had remained below the median figure for the past consecutive four years.



Strategic planning in Healthcare Reform



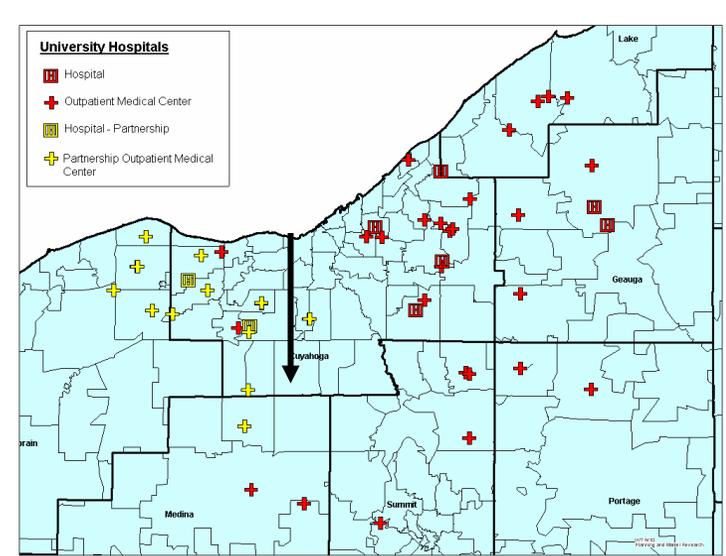
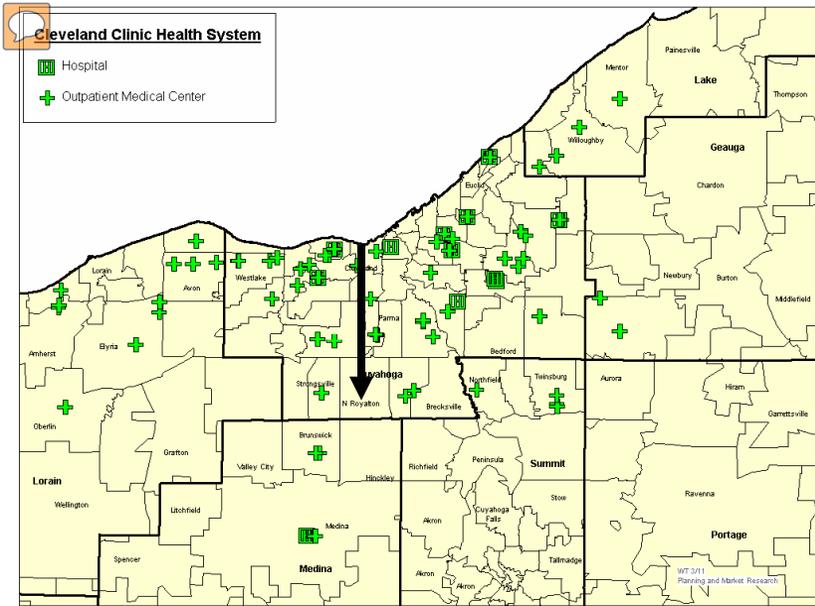
<https://www.eu-healthcare.fi/healthcare-in-finland/healthcare-system-in-finland/>

<https://www.hhs.gov/about/strategic-plan/2022-2026/goal-1/index.html>

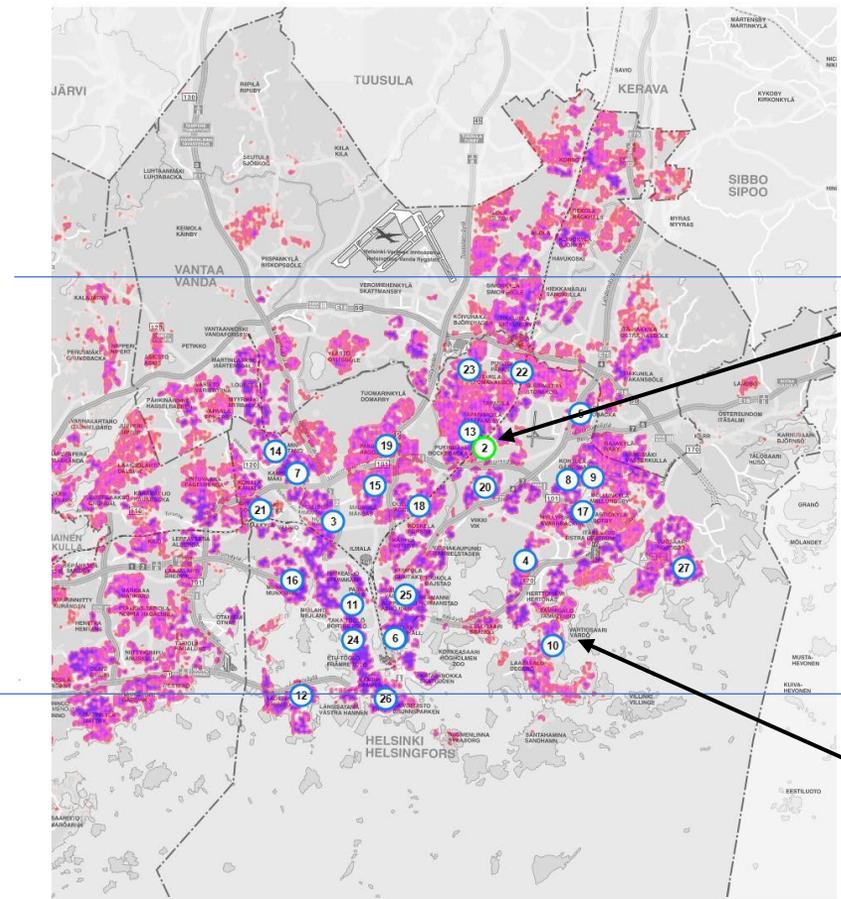
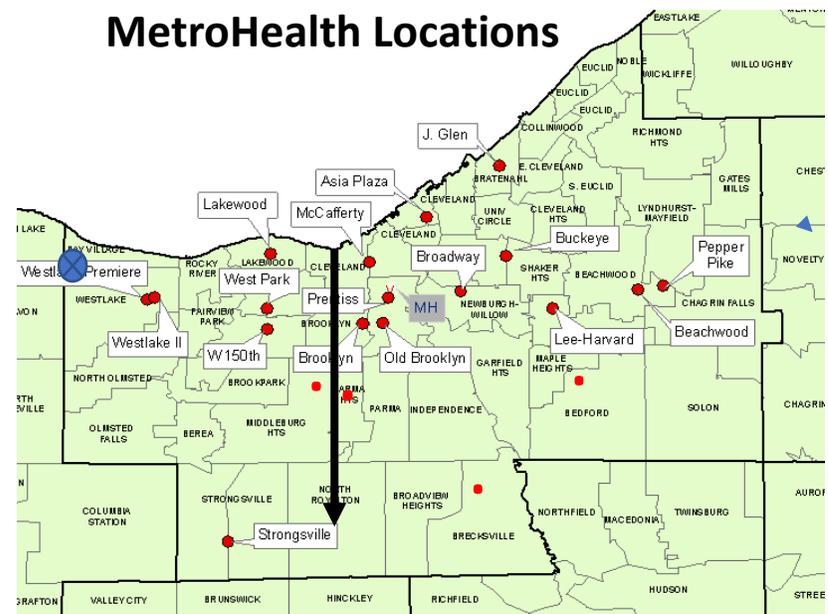
- Reducing inequalities in health and wellbeing
- Safeguarding equal and quality health, social and rescue services for all
- Improving the availability and accessibility of services, especially primary services
- Ensuring the availability of skilled labour
- Responding to the challenges of changes in society
- Curbing the growth of costs
- Improving security

- **Strategic Objective 1.1: Increase choice, affordability, and enrollment in high-quality healthcare coverage**
- **Strategic Objective 1.2: Reduce costs, improve quality of healthcare services, and ensure access to safe medical devices and drugs**
- **Strategic Objective 1.3: Expand equitable access to comprehensive, community-based, innovative, and culturally-competent healthcare services while addressing social determinants of health**
- **Strategic Objective 1.4: Drive the integration of behavioral health into the healthcare system to strengthen and expand access to mental health and substance use disorder treatment and recovery services for individuals and families**
- **Strategic Objective 1.5: Bolster the health workforce to ensure delivery of quality services and care**





MetroHealth Locations



Kannelmaki Health Station

11 miles

Cuyahoga county—28 Hospitals
Helsinki & Uusimma—21 hospitals

Laajasalo Health Station



Laajasalo Health Station



Kannelmaki Health Station

https://www.theseus.fi/bitstream/handle/10024/140823/Suokas_Pia_Talliniemi_Viveka.pdf;jsessionid=DD41848F2414A306C7F0B9A79AA8F192?sequence=1

Pia Suokas & Viveka Talliniemi

Community Project at Kannelmäki D-station

Wellbeing - Experienced by the Visitors





Lets make an appointment to see the doctor

MetroHealth



- Access guaranteed by insurance
- Registration is required
- Appointment triaged by MOA
- Freedom to choose another healthcare system
- Missed appointment—no charge
- Invoice to insurance carrier
- Insurance plan covers Pharmaceuticals (Part D. Private Plan)

Kannelmaki Health station



- Access guaranteed with KELA Card
- Registration is required
- Appointment triaged by a nurse
- Health center determined by municipality of residence
- Missed appointment--50€
- Invoice to the municipality
- Pharmaceuticals—present KELA card (Government invoiced for cost)

Make an appointment on line?



Manage Your Health and Social Care Anywhere, Anytime
Communicate with health and social care professionals, fill in medical history and self assessment questionnaires or act on behalf of someone else. Book an Appointment Book your next appointment or view your past or future appointment details. View Test Results View your lab and imaging results. Request a Prescription Renewal Access My Kanta Pages with a single sign-on. Contact Social Services Submit a social care application or contact social services. Frequently Asked Questions Find answers to Frequently Asked Questions about Maisa. In case of acute health issues, contact your health centre. If the health centre is closed, call the free of-charge medical helpline (Päivystysapu), tel. 116 117. In case of emergency, call 112.





Sote-uudistus

Health and social services reform

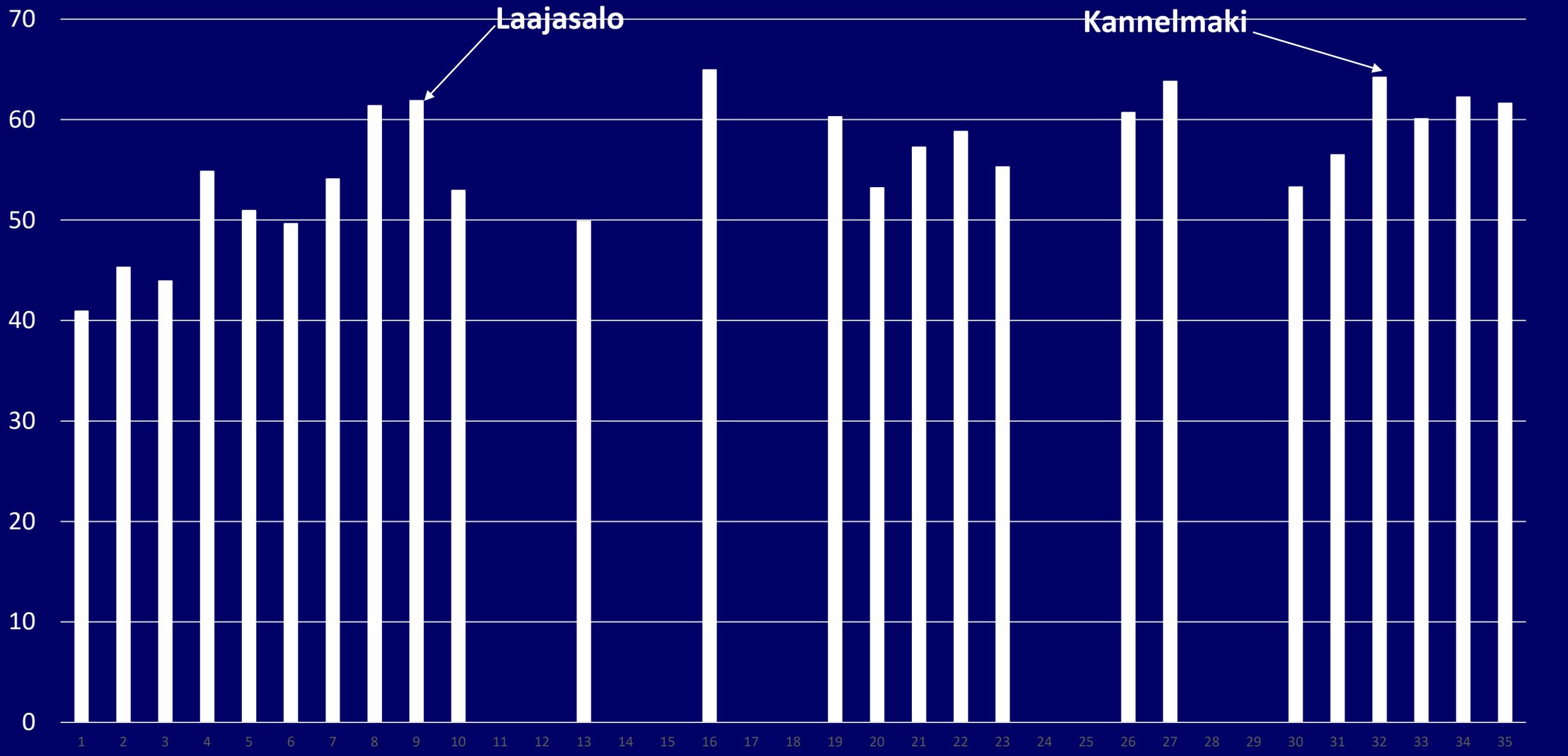
Laajasalo Health Station



Kannelmaki Health Station

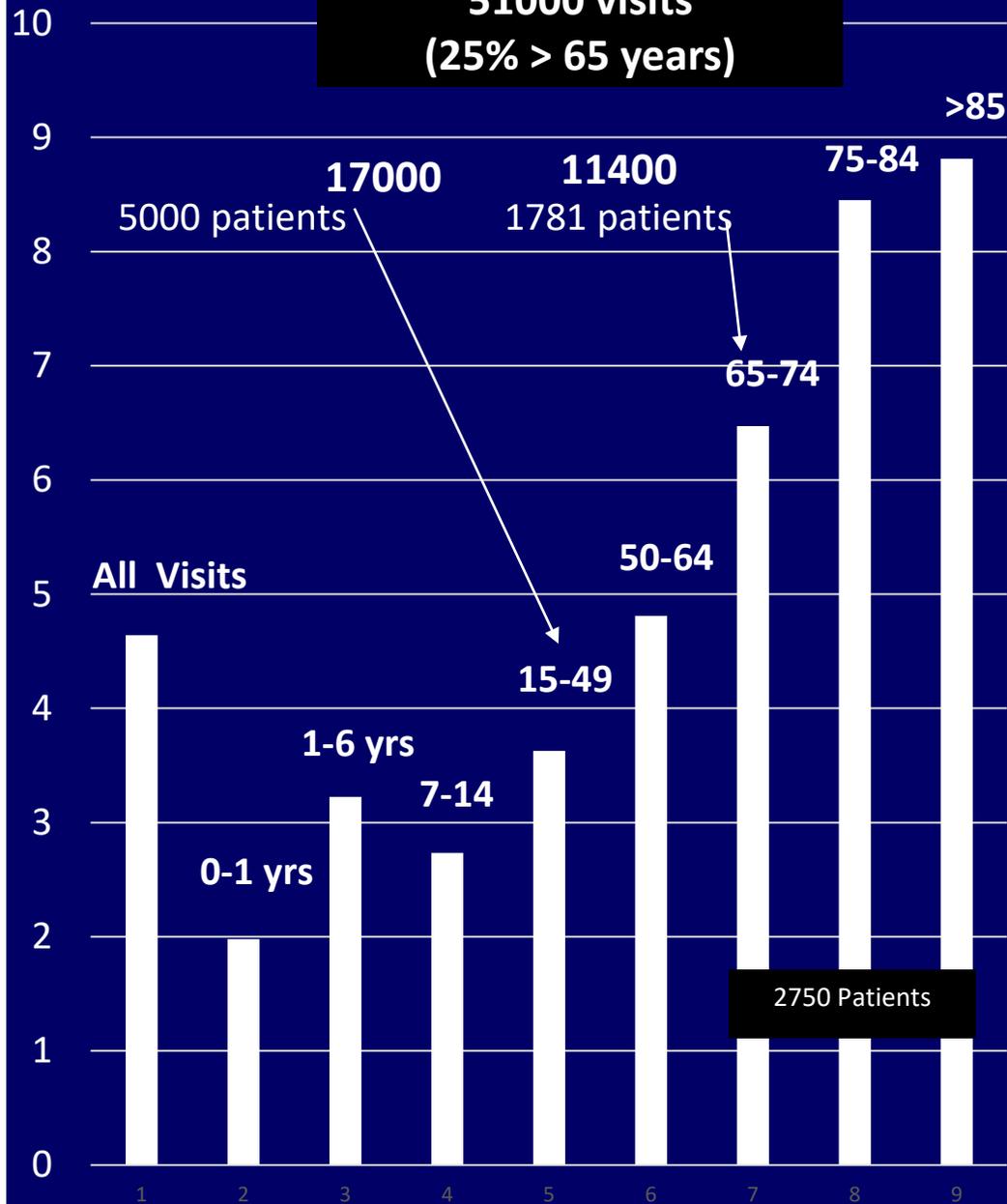


% of Population using Health Stations By District

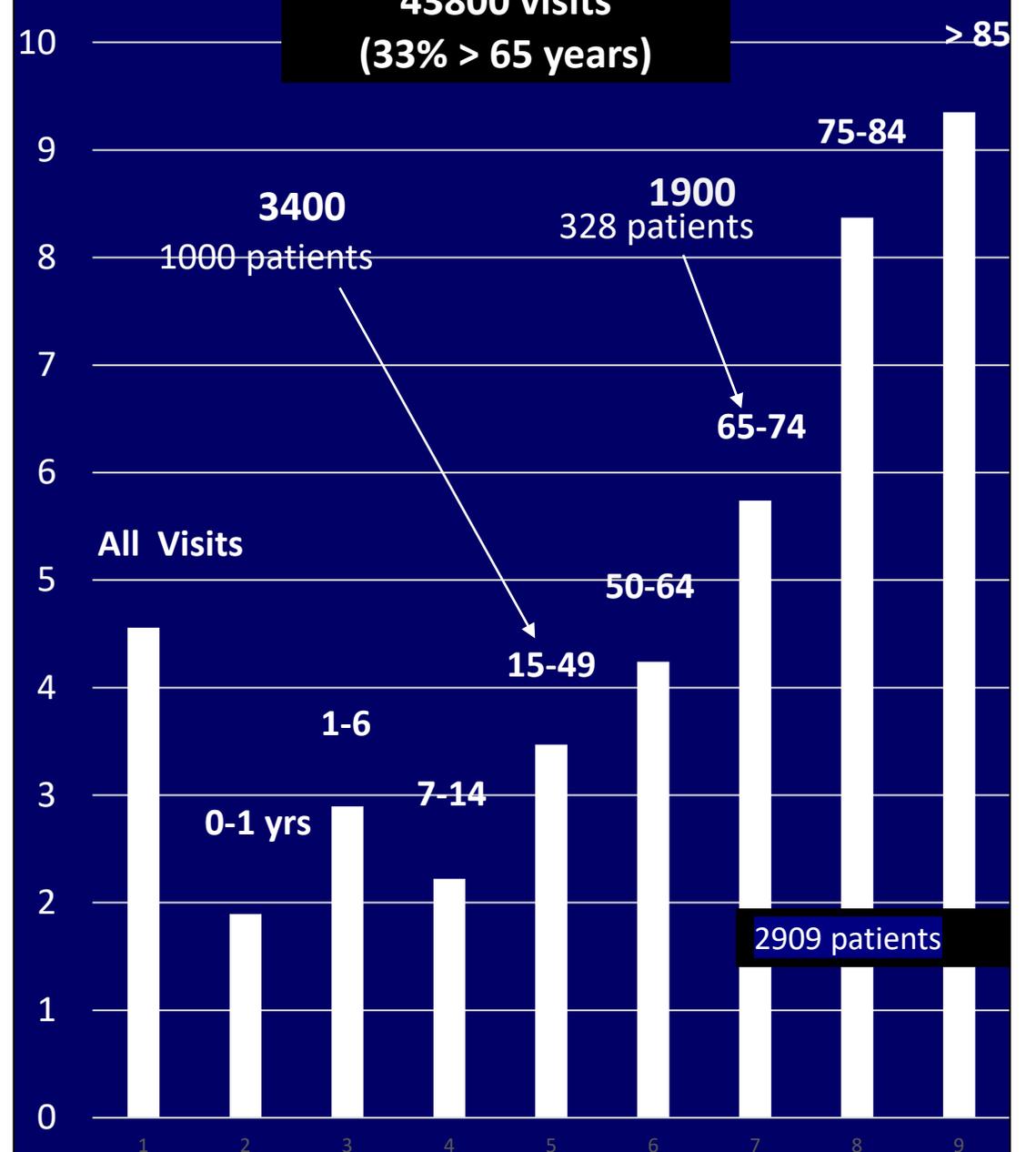




Kannelmaki Health Station
11000 Unique patients
51000 visits
(25% > 65 years)



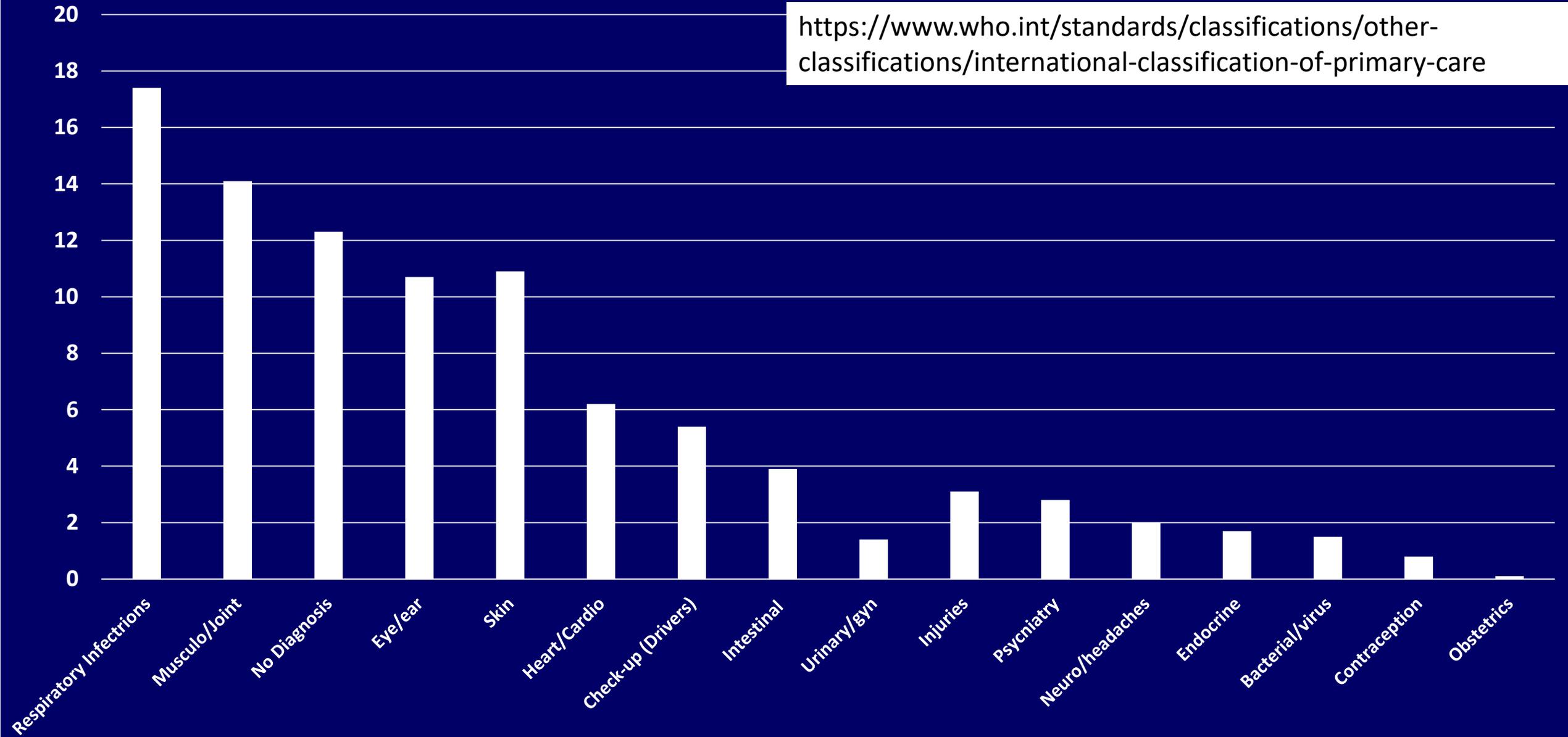
Laajasalo Health Station
9600 Unique patients
43800 visits
(33% > 65 years)





Percent of total visits per ICPC
January 2016
Laajasalo Health Station

<https://www.who.int/standards/classifications/other-classifications/international-classification-of-primary-care>





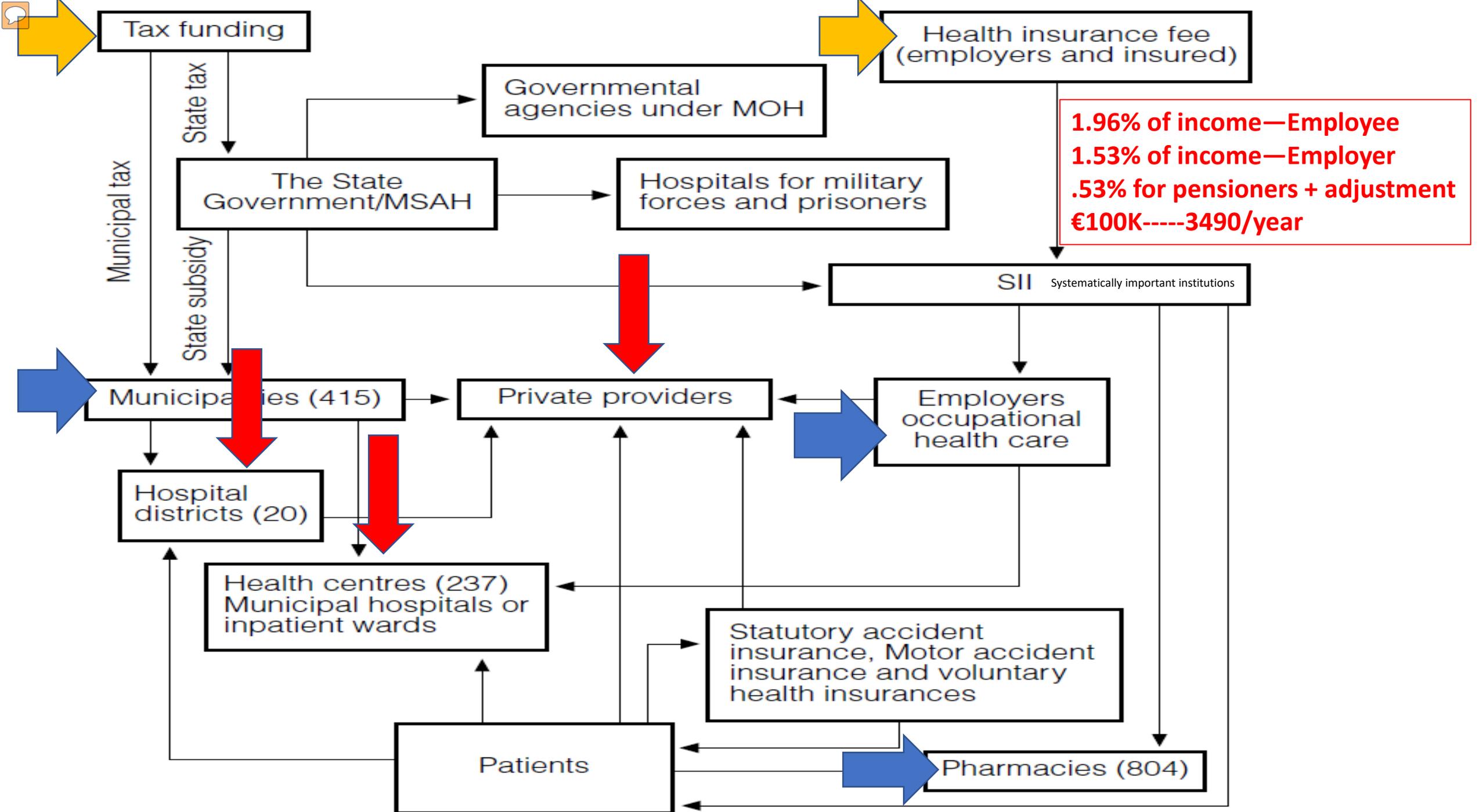
How are services coded (billed)

Kannelmaki—diagnostic categories ICPC

- Easy, Medium, Difficult (20, 40, 60 minutes)
- Complexity of coding guarantees next year's budget to the center
- 50% base salary + volume incentive (Base \$76,000-\$88,000)
- Double booking preferred by some providers. Some providers upset when there are "No shows"

Metrohealth—visits coded by ICD-10

- Cpt codes 99213, 99214, 99215 (20, 40, 60 minutes)
- Comprehensive coding encouraged to maximize revenue
- Physicians receive base salary + RVU incentive above 90th percentile
- Ask your provider about this!





Citation: Blomgren J, Virta LJ (2020) Socioeconomic differences in use of public, occupational and private health care: A register linkage study of a working-age population in Finland. PLoS ONE 15(4): e0231792. <https://doi.org/10.1371/journal.pone.023179>

Locations to receive primary healthcare services

Occupational Health Services (Required by law)

Public Clinics
Primary & Dental care
Municipal Clinics

Private

Contracted or cooperated

Funded by employer +
Government supplement

Funded by individual

Funded by tax payers
Central Government &
Municipality

- Reduce musculoskeletal injury
- Reduce work related stress
- Reduce cardiovascular disease
- Improve mental health
- Reduce accidents

Partial government
reimbursement

Worked related
Scheme now includes Primary care

Stronger gate keeping
Specialist care requires referral

More flexible
Some specialist care may be in private clinic

Most flexible

Bronze

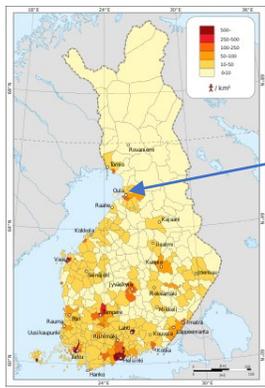


Silver and Gold



Platinum





Citation: Blomgren J, Virta LJ (2020) Socioeconomic differences in use of public, occupational and private health care: A register-linkage study of a working-age population in Finland. PLoS ONE 15(4): e0231792. <https://doi.org/10.1371/journal.pone.0231792>

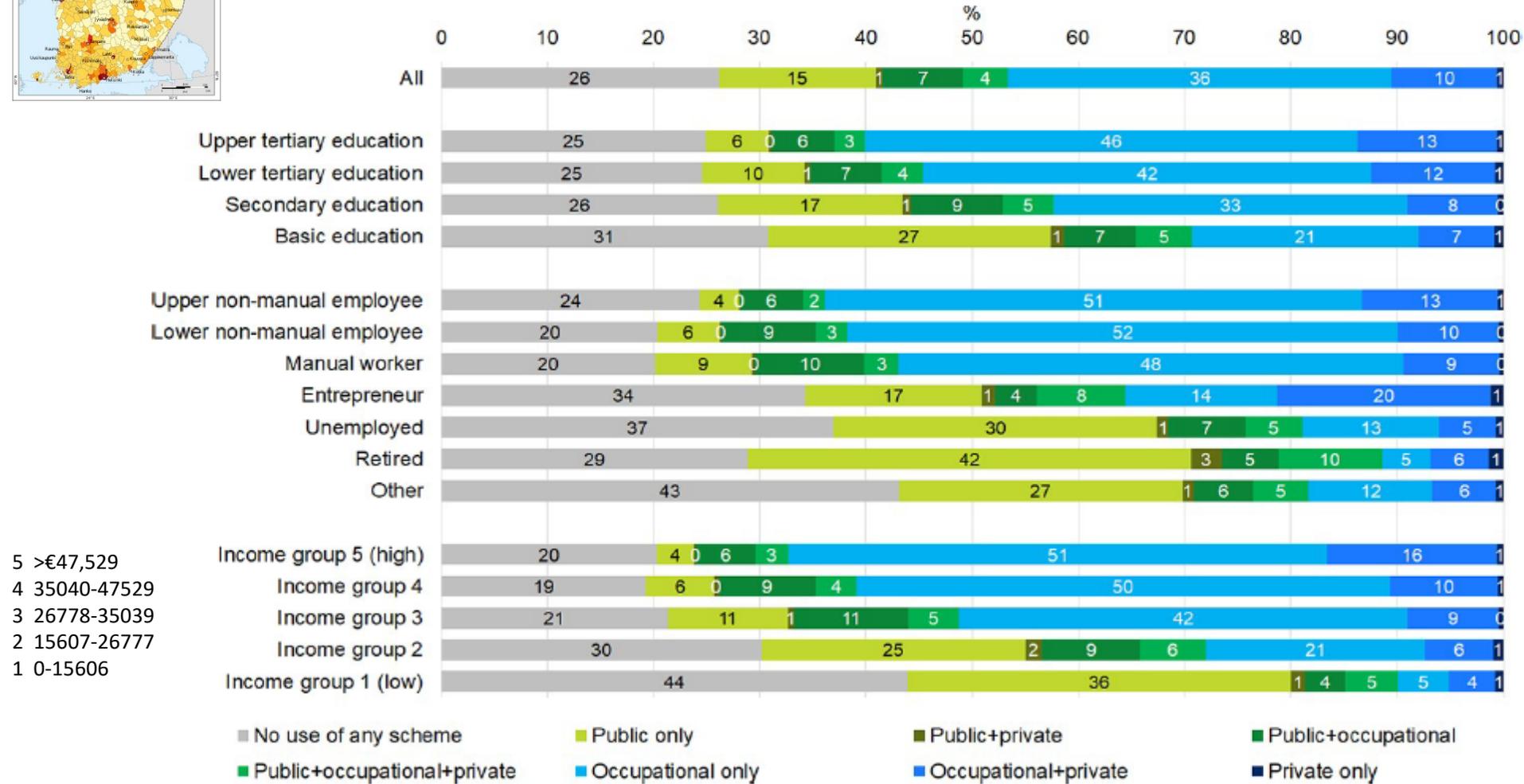


Fig 1. Unadjusted proportions of users of primary outpatient health care schemes during year 2013 among men according to socioeconomic variables. Residents of Oulu, Finland, men aged 25–64 in 2013 (N = 47 024).



Private Healthcare Providers

Finland's main private medical and occupational healthcare providers include:

- **Aava *Fi, En, Sw*: Finland-wide:** Medical centres and specialty clinics offering a full range of medical services and occupational healthcare. Appointments with *general practitioners* and *specialists* can be made online or by phone, and telephone consultations (click *Remote Appointment*) are available. Specialists are available in virtually all fields - [see list](#).
Phone: 010 380 3838
www.aava.fi/en
- **Eira Medical Centre *Fi, En, Sw*: Helsinki:** Private hospital and medical centre **Phone: 09 1620 570**
- **Pihlajalinna *Fi*: Tampere:** Private health centres in **Hervanta: 03 455 1183** and **Kehräsaari: 03 455 1125**
- **Terveystalo *Fi, En, Sw*: Finland-wide:** Primary, secondary, and occupational healthcare in 150+ clinics in over 60 cities **Phone: 030 6000*** *Charges apply
- **Mehiläinen** Clinics Finland-wide

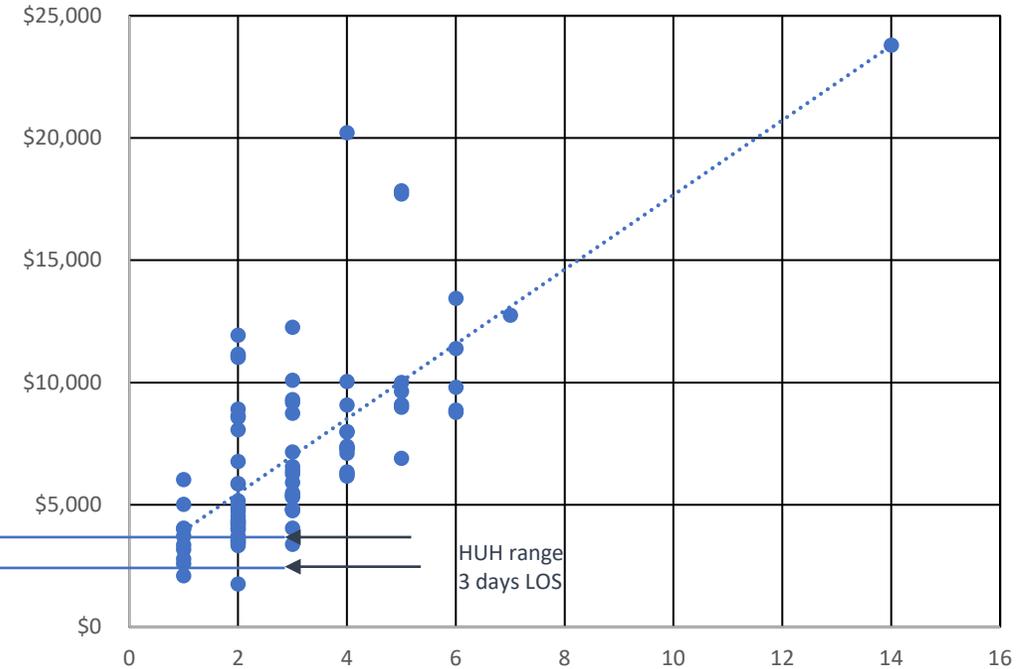
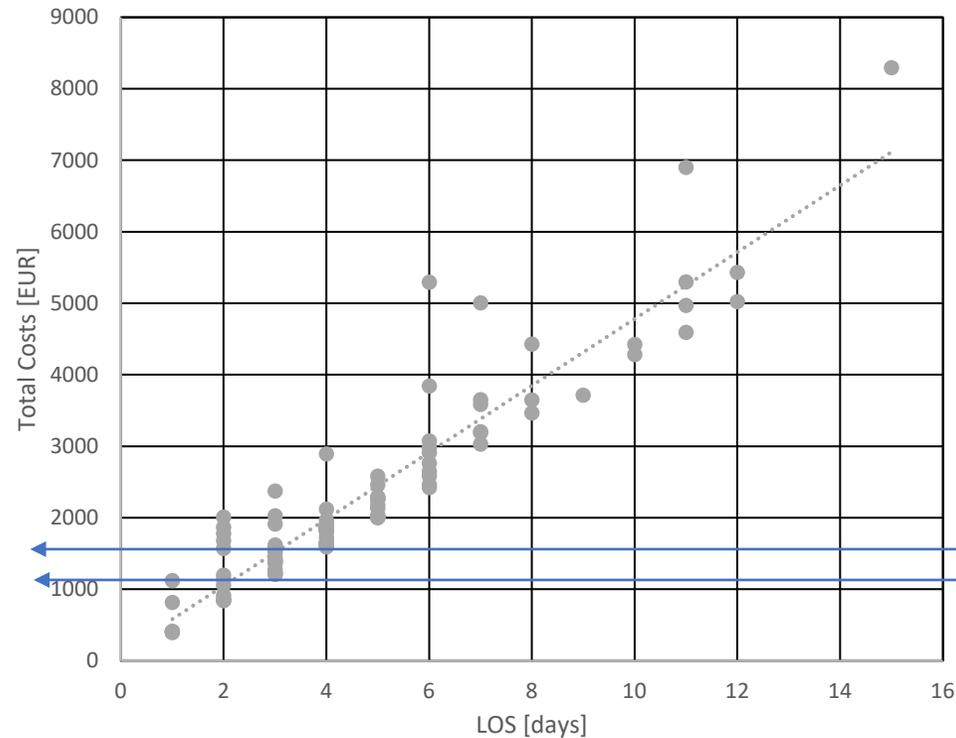
Total costs by LOS—Simple pneumonia/pleurisy w/cc

DRG 89/194 (Discharged home without regular services), 2015

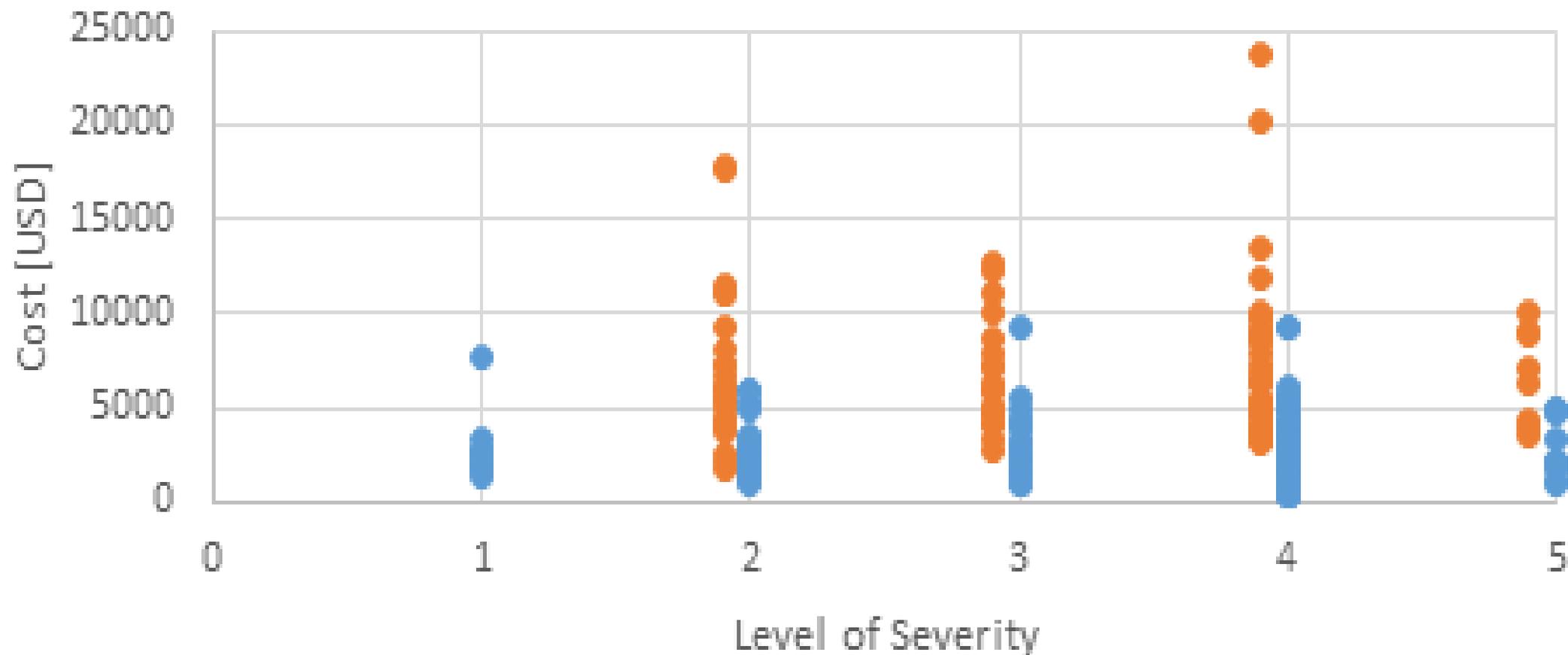
HUH (DRG 89, n = 94)



MetroHealth (DRG 194, n = 88)



Simple pneumonia & pleurisy w/comorbid conditions (FIN DRG 89; US DRG 194)



HUS

HUH METRO

MetroHealth



Coxa Excellence Hospital for Joint Replacement Pricings:

Leading Excellence Center
for Joint Replacement in EUROPE

<https://www.placidway.com/profile/2155/Coxa-Excellence-Hospital-for-Joint-Replacement>

| Sports Medicine Procedure | Details | Price in USD |
|--|--|----------------|
| Knee Replacement Total or Partial | One knee \$14,300/ both knees - \$25,300/ Complicated primary knee replacement - \$23,100 | \$14300 |
| Shoulder Surgery | Shoulder replacement | \$15000 |
| Hip Replacement Surgery Partial or Total | Primary hip replacement - \$15,069/ Both-sided primary hip replacement - \$27,700 / Complicated hip replacement - \$24,400 / Hip replacement using minimally invasive techniques - \$19,900 | \$15069 |



| Joint replacement surgery | Minimum price | Estimated LOS |
|--------------------------------------|-----------------|---------------|
| Prosthetic hip replacement | 12 420 € | 2* |
| Bilateral prosthetic hip replacement | 21 942 € | 4* |
| Prosthetic knee joint replacement | 12 834 € | 3* |

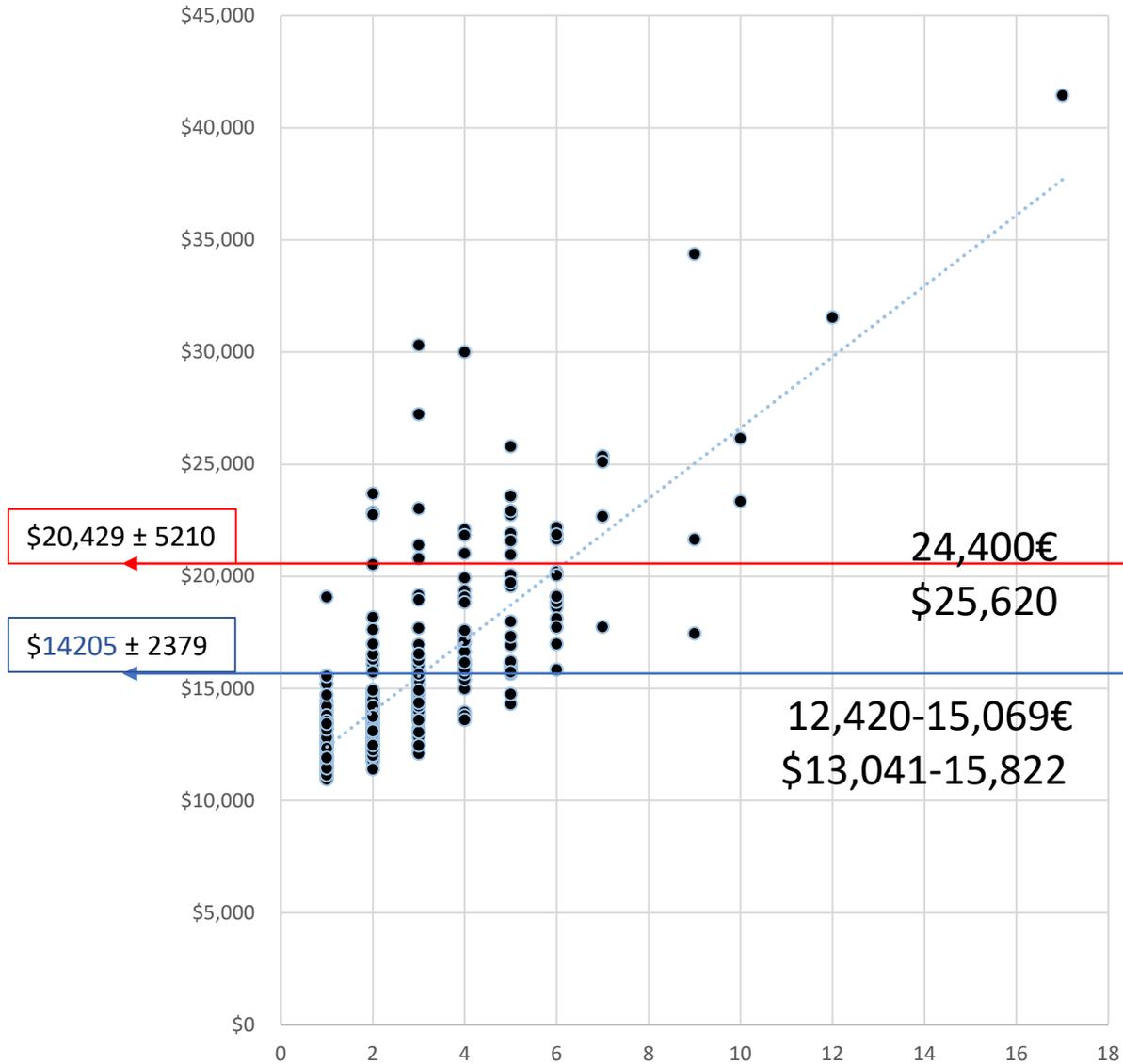
December 7, 2020

The merger with HYKS means that Orton can now offer appointment, examination and operation services in cooperation with HUS Helsinki University Hospital. Examples of the new service areas include cancer, neurosurgery, dermatology, urology, ear, nose and throat as well Voice Clinic's services. The experienced HUS specialists offer their services in HUS hospitals during time, when there is are no public patient services available.

<https://www.businessfinland.fi/en/companies/o/orton-oy>



2019. N = 298



Cost Drivers (Fracture group greater) (Variables not controlled)

- Age 70 ± 16 vs 62 ± 10 ($p = .002$)
- LOS 5 ± 3 days vs 2 ± 2 days ($p < .002$)
- BMI 27 ± 7 vs 30 ± 5 ($p = .004$)
- OR time 174 ± 52 min vs 147 ± 31 min ($p < .001$)
- PACU time 147 ± 79 min vs 240 ± 140 min ($p < .001$)
- ASA class 2.84 vs 2.69 (NS)

Multilinear regression (cost drivers)(Fracture group)

- LOS
- Procedure time (OR time)
- Number of implants

Non-predictive

- Approach
- PACU time
- Time to OR
- Age, BMI, Sex and ASA

Multilinear regression (cost drivers)(Elective Group)

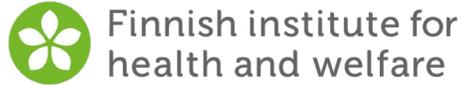
- LOS
- Procedure time
- ASA class
- Number of implants
- Sex

Non-predictive

- Approach
- PACU times
- Age, BMI



<https://thl.fi/en/web/health-and-welfare-inequalities>



The average health status in the Finnish population has improved in many respects over the last few decades. At the same time, socio-economic inequalities have largely remained unchanged and in some areas they have grown

<https://thl.fi/en/web/thlfi-en/research-and-development/research-and-projects/climate-change-and-health-adapting-to-mental-physical-and-societal-challenges-champs->



The main focus of the promotion of health equality is on preventable health inequalities, many of which are due to living conditions and lifestyle factors

<https://thl.fi/en/web/management-of-health-and-wellbeing-promotion>



(A view looking west from Lovisa, Finland)

esivak@metrohealth.org

<https://www.fulbright.fi/>

Kiitos paljon huomiostanne.

[POLITICS](#)

Bernie Sanders in line to chair influential Senate committee on health, education and labor

By [Lola Duffort](#)

[Nov 17 2022](#)

<https://vtdigger.org/2022/11/17/bernie-sanders-in-line-to-chair-influential-senate-committee-on-health-education-and-labor/#:~:text=NEWS%20SPONSORED%20BY%3A-,POLITICS,Nov%2017%202022,-Share>



U.S. Sen. Bernie Sanders, I-Vt., is expected to take over as chair of one of the chamber's most influential policy committees. The current chair of the Senate Committee on Health, Education, Labor and Pensions, U.S. Sen. Patty Murray, D-Wash., is leaving her post to take over the powerful Senate Committee on Appropriations — a job currently held by U.S. Sen. Patrick Leahy, D-Vt., who is retiring at the end of his term in January.

Per Senate custom, Sanders' seniority puts him next in line to chair what's often called the HELP committee. His office confirmed on Thursday that he wants the job.

“As chairman of the committee, he will focus on universal health care, lowering the cost of prescription drugs, increasing access to higher education, and protecting workers' rights on the job,” Mike Casca, a spokesperson for Sanders, said in a statement



The pretest: Facts and myths or something different

1. What politician is frequently in the media touting the benefits of the healthcare system in Finland?
2. True or **False. Healthcare is free in Finland (Slide 19)**
3. Our healthcare system is a hybrid system of public and private insurance. True or **False. There is no market for this type of system in Finland (Slides 20, 21,22)**
4. True of False. **It is not possible to make cost and price comparisons when it comes to healthcare (Slides -23-25)**
5. True of False. **DRGs for prospective payment are different between Finland & US (Slides 23-25)**



Finnish institute for health and welfare

<https://thl.fi/en/web/thlfi-en>

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Social welfare & health reform



Knowledge base

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Alerts about appointments, received messages, new test results etc.