

The role of university hospitals in the Dutch health care system



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Amsterdam UMC, CEO and Dean



About Amsterdam UMC

- Merger: June 7, 2018
- Merger between AMC (University of Amsterdam) and VUmc (Free University)
- more than 15,000 professionals
- over 350,000 patient contacts per year
- teaching and training of young people to become doctors (n=5000), specialists (n=1200, together with regional network) or nurses
- 250 M euro of new grants per year
- Currently: ~1500 ongoing clinical trails



The role of university hospitals in the Dutch health care system

- Overview of organisation of hospital care in The Netherlands



Some facts of the Dutch health care system



- 17,5 M inhabitants
- One system of health care insurance
- 5 major insurance companies
- 50 % of the costs paid through the insurance system
- 50 % of the costs paid by taxes



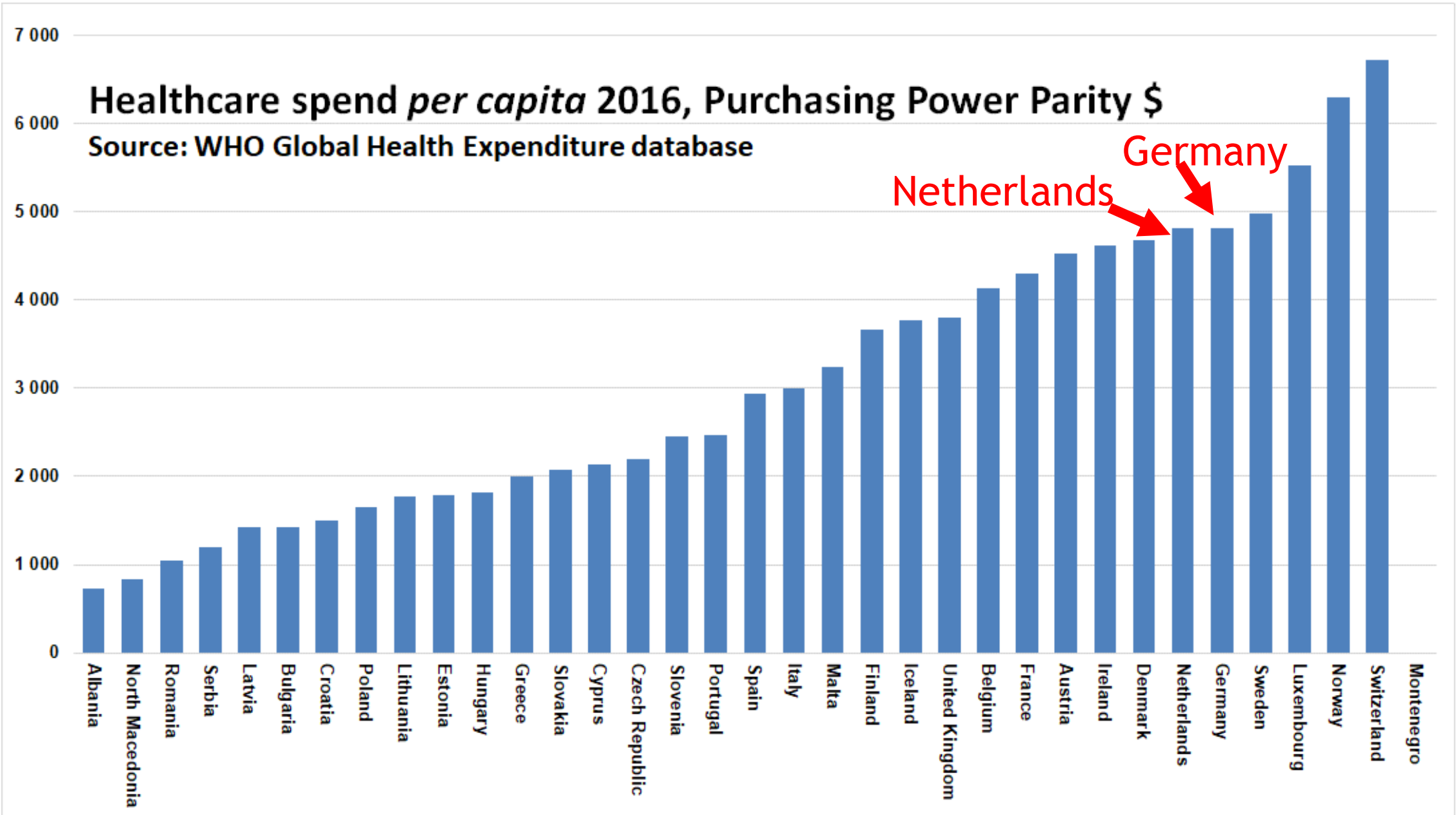
Some facts of the Dutch health care system

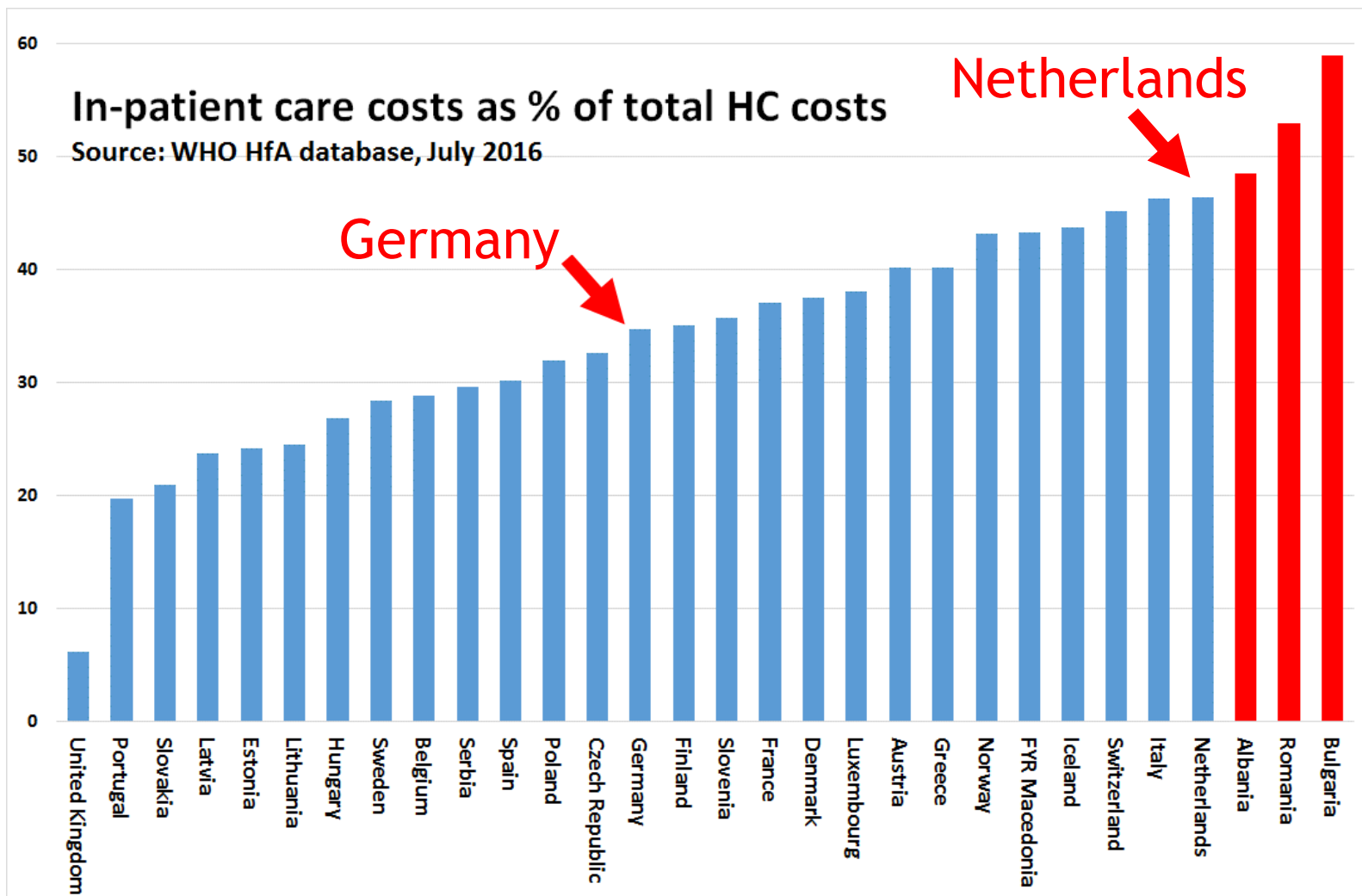


- Contracts between insurance companies and hospitals/focus clinics
- No contracts with individual specialists
- Contract between insurance company and hospital: lumpsum/year, with subsequent calculation of prices per treatment within lumpsum
- No reimbursement of overproduction

Healthcare spend *per capita* 2016, Purchasing Power Parity \$

Source: WHO Global Health Expenditure database







Hospital care in The Netherlands



2018

- 8 university medical centers



Hospital care in The Netherlands

Locaties ziekenhuizen 2018

Academische en algemene ziekenhuizen inclusief buitenpoliklinieken

Soort ziekenhuis

- academisch ziekenhuis
- algemeen ziekenhuis
- buitenpolikliniek
- kinderziekenhuis

— provincies



2018

- 8 university medical centers
- 22 topclinical hospitals
- 41 regular hospitals
- ~220 focus clinics (orthopedics, gynecology, ophthalmology etc.)



The role of university hospitals in the Dutch health care system

- Overview of organisation of hospital care in The Netherlands
- Role of university medical centers in The Netherlands



University Medical Centers

- UMCs are complete mergers:
medical school + university hospital
- Tasks:
 - Patient care
 - Medical School
 - Training of interns, residents, nurses etc
 - Research





University Medical Centers: integrated budgets



1-2 biljon Euro/UMC

- Patient care / insurance companies: 40-50 %
- University / Medical School: 20 %
- Research grants: 10-20 %
- Government: 10-15 %



University medical specialists in The Netherlands

- No private practice
- Fixed salaries
- Uniform salaries
- Unfragmented job structures





The role of university hospitals in the Dutch health care system

- Overview of organisation of hospital care in The Netherlands
- Role of university medical centers in The Netherlands
- Strategy of university medical centers in The Netherlands

Revolution in hospital care in UMC's since 2014

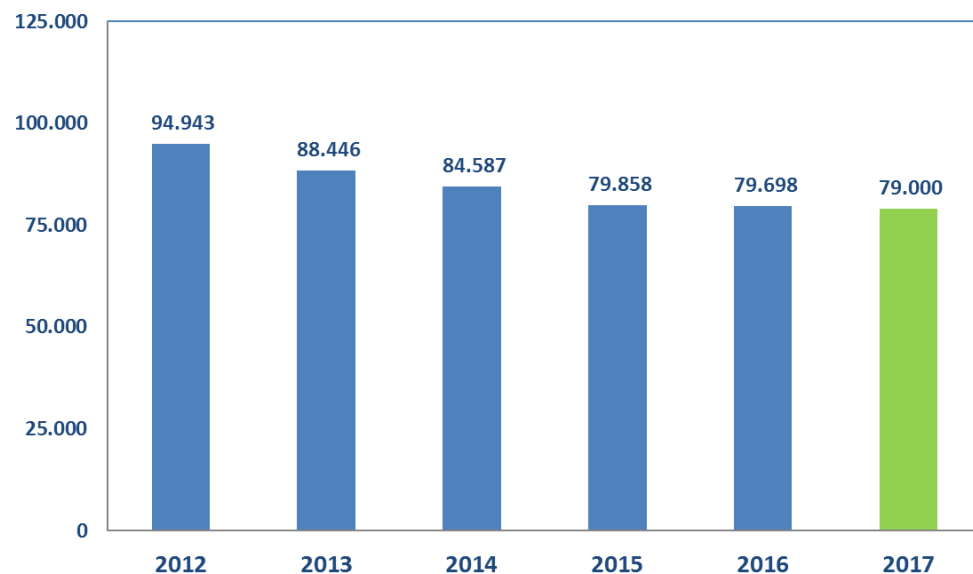
enforced by politicians and insurance companies

- Outsource simple patient care
- Focus on highly complex patient care

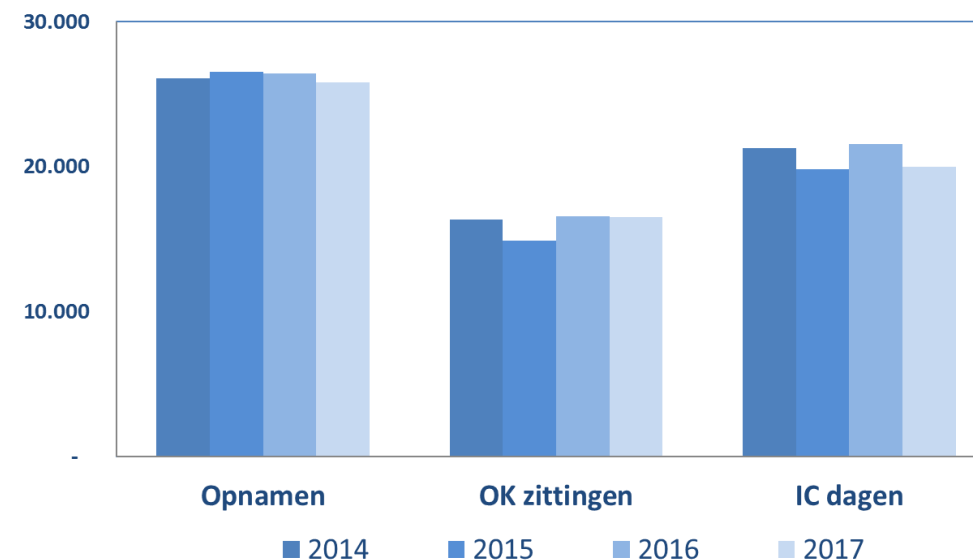


Declining numbers of patients Unchanged number of complex care

Number of admitted patients AMC



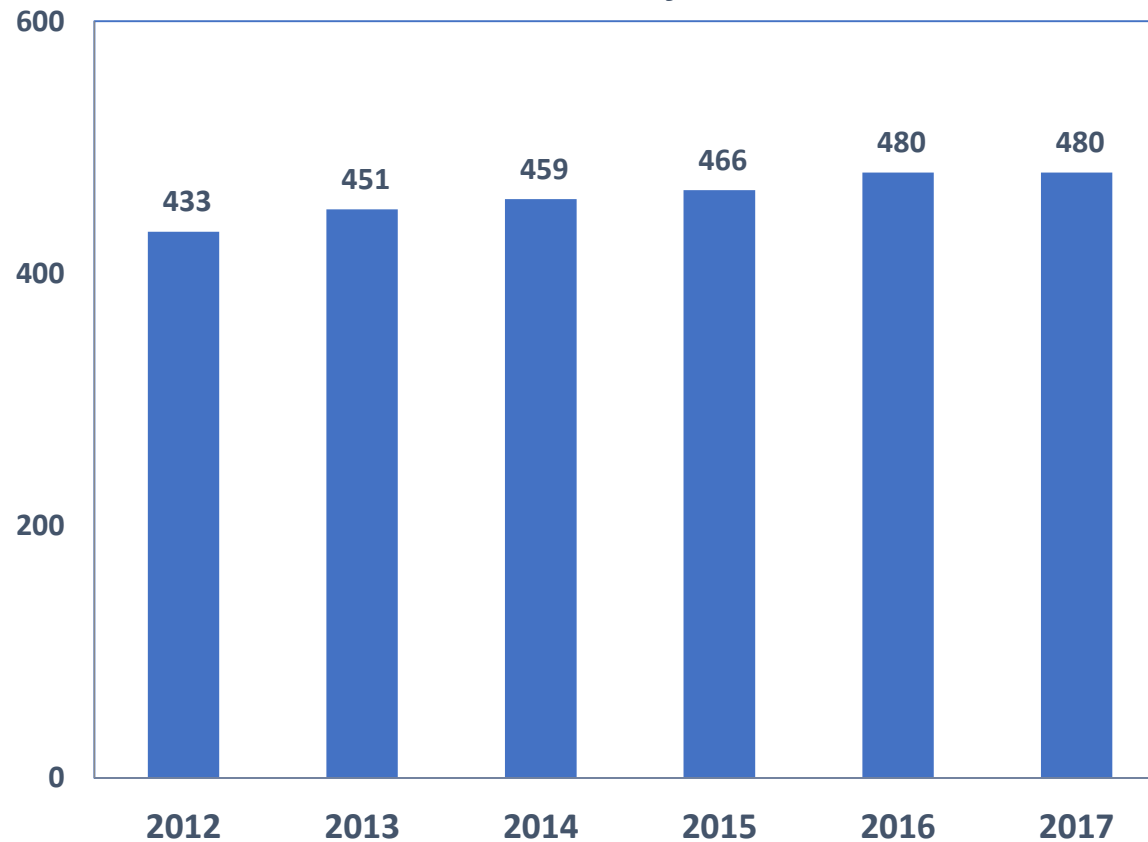
Opnamen, OK-zittingen en IC-dagen *Stabiel in aantallen*



Total budget for patient care was unchanged

**Payments to AMC by insurance
companies**

in millions of euro's



UMCs in The Netherlands

Service reconfiguration by increasing complexity of care



Strategies of UMCs in The Netherlands

1. Stand alone UMC



Strategies of UMCs in The Netherlands

1. Stand alone UMC



General notion:

“Comprehensive complete hospital is old school”

“No hospital is an island”

Strategies of UMCs in The Netherlands

1. Stand alone hospital



2. Partnerships with other

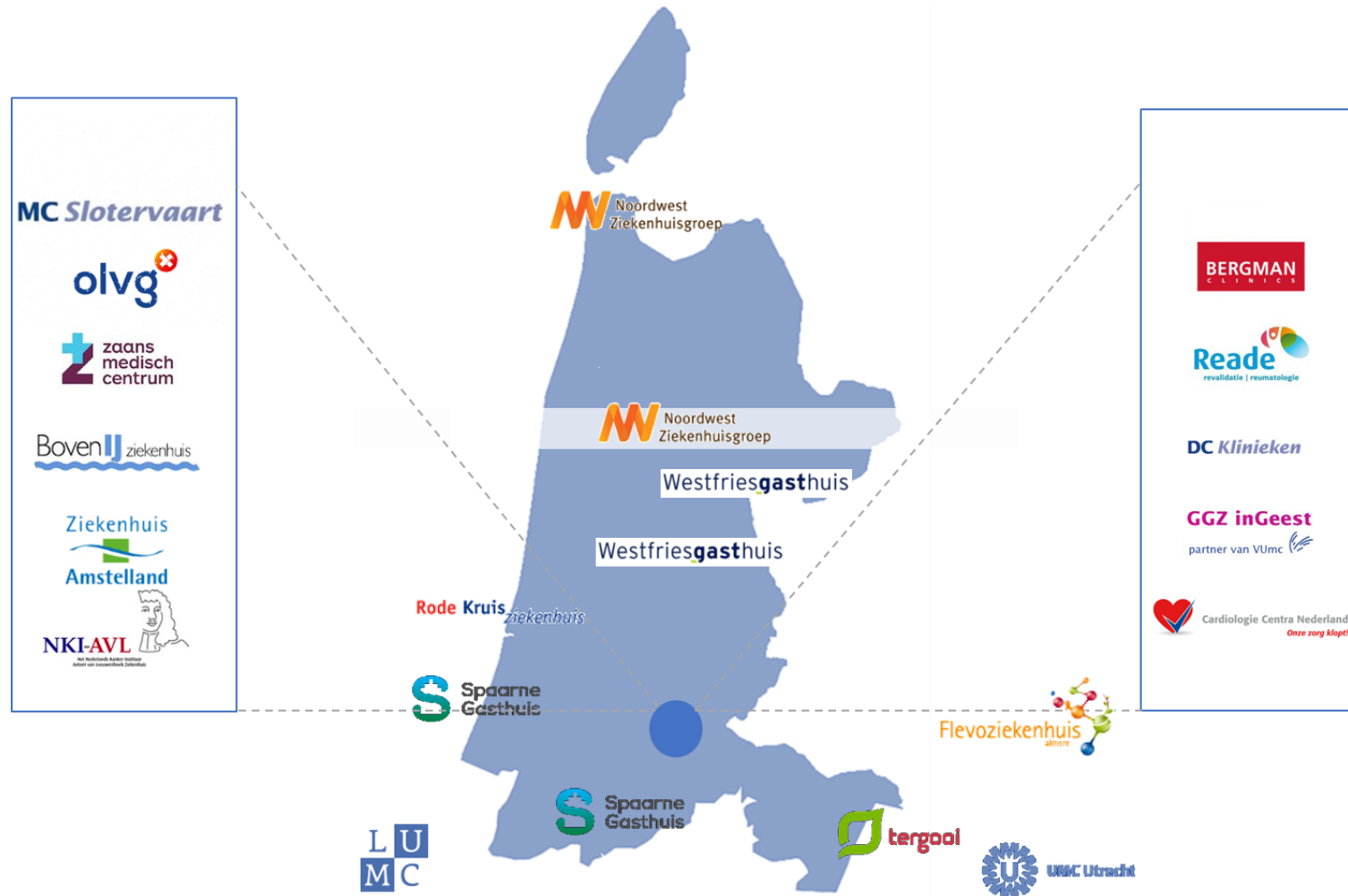
- hospitals
- focus clinics



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Regional partnerships Amsterdam UMC



Strategies of UMCs in The Netherlands

1. Stand alone UMC



2. Partnerships with other hospitals



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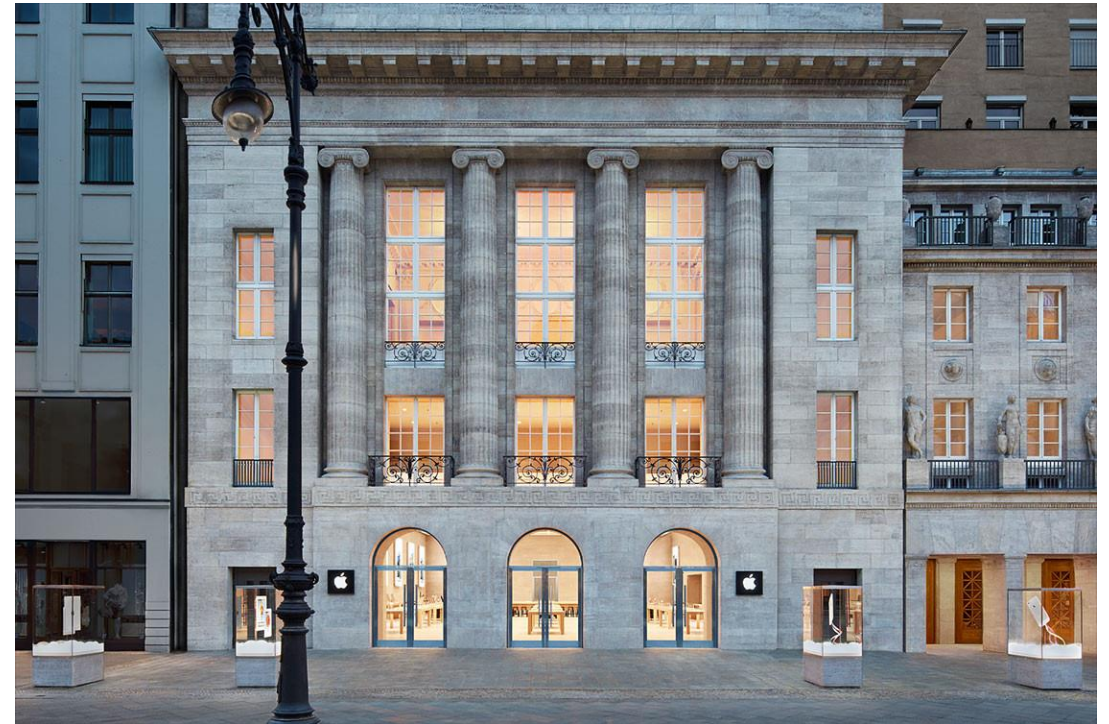
Conditions

- We want the same level of care within the network
- Harmonization of clinical pathways
- Share medical specialists

Apple stores:
same level of service everywhere



Amsterdam



Berlin

Strategies of UMCs in The Netherlands

1. Stand alone UMC



2. Partnerships with focus clinics



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Conditions:

- We own minority shares (49 %)
- Focus clinics have independent contracts with insurance companies
- Our medical specialists work there
- Our residents and interns are trained there
- Our clinical studies are executed there

Strategies of UMCs in The Netherlands

1. Stand alone UMC



2. Partnerships with focus clinics



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Examples

- Eye hospital
- Orthopedics clinic
- Benign gynecology clinic
- Dermatology clinic
- Endoscopy clinic
- Outpatient cardiology clinic

Strategies of UMCs in The Netherlands

1. Stand alone UMC



2. Partnerships with other hospitals



3. Acquisition of other hospitals



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Strategies of UMCs in The Netherlands

1. Stand alone UMC



2. Partnerships with other hospitals



3. Acquisition of other hospitals



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4. Merger between 2 UMCs



+



Strategies of UMCs in The Netherlands

1. Stand alone UMC



2. Partnerships with other hospitals



3. Acquisition of other hospitals



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4. Merger 2 UMCs



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5. Merger 2 UMCs + partner UMC



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Cardiac surgery

Strategies of Amsterdam UMC

1. Stand alone UMC

2. Partnerships with other hospitals

3. Acquisition of other hospitals

4. Merger 2 UMCs

5. Merger 2 UMCs + partner UMC



Cardiac surgery

The role of university hospitals in the Dutch health care system

- Overview of organisation of hospital care in The Netherlands
- Role of university medical centers in hospital care in The Netherlands
- Strategy of university medical centers in The Netherlands
- Reasons for the merger of Amsterdam UMC

Our ultimate goal: improve patient care



Reasons for merger Amsterdam UMC

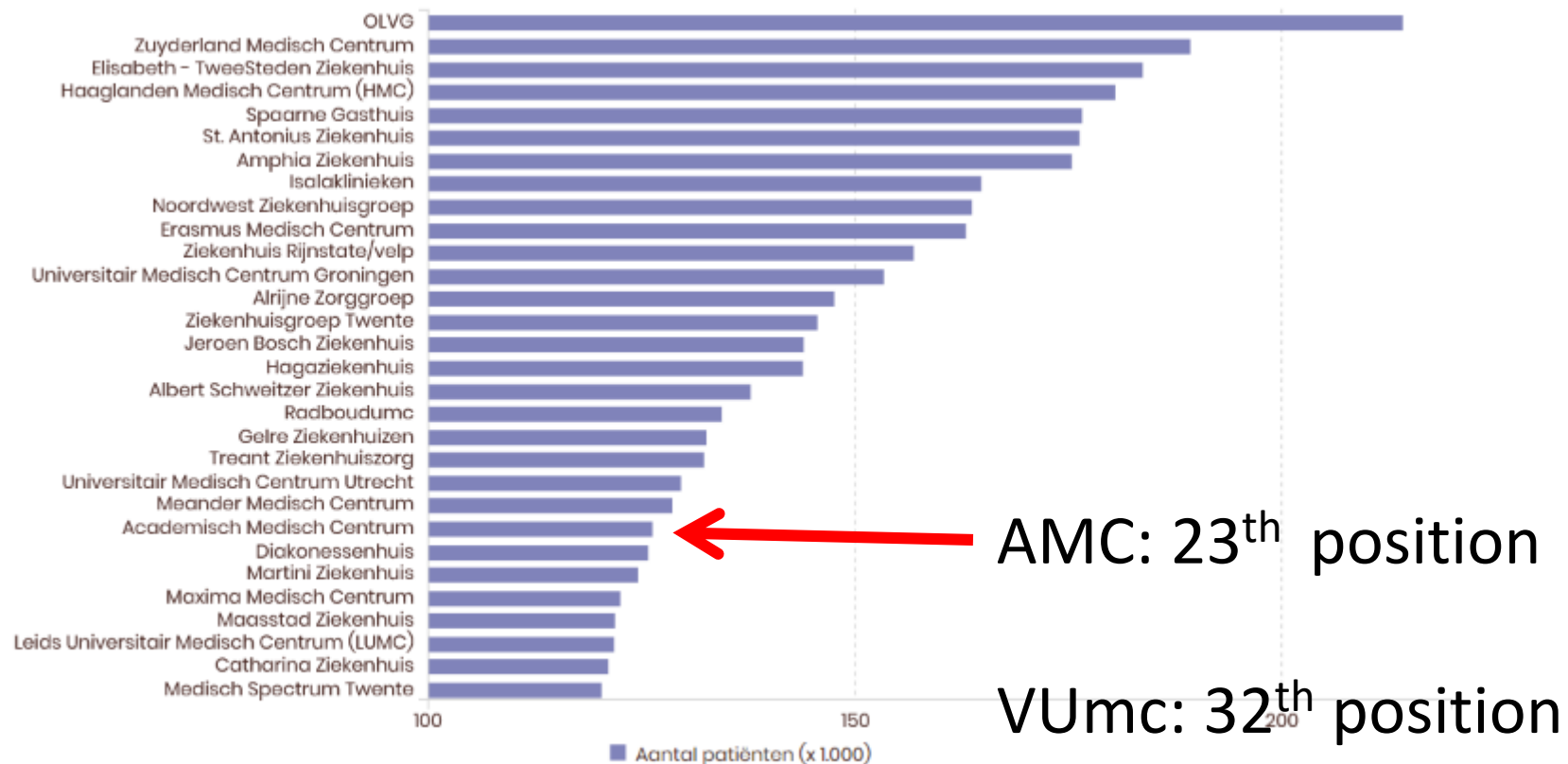
1. Two complete university hospitals only 10 km apart



Reasons for merger Amsterdam UMC

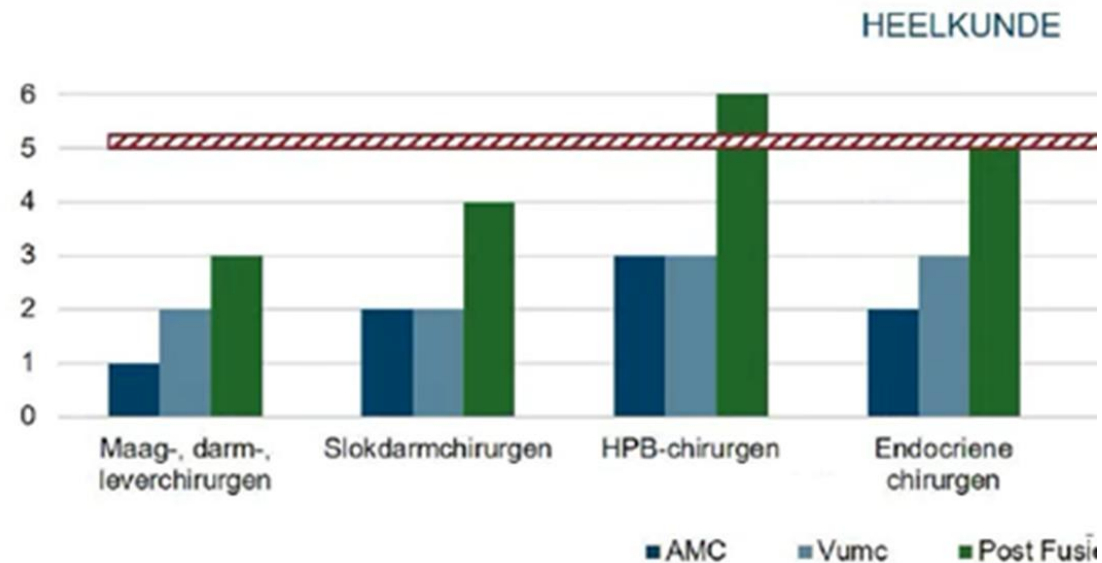
1. Two complete university hospitals only 10 km apart
2. Two relatively small university hospitals

AMC en VUmc are only medium sized hospitals



Reasons for merger Amsterdam UMC

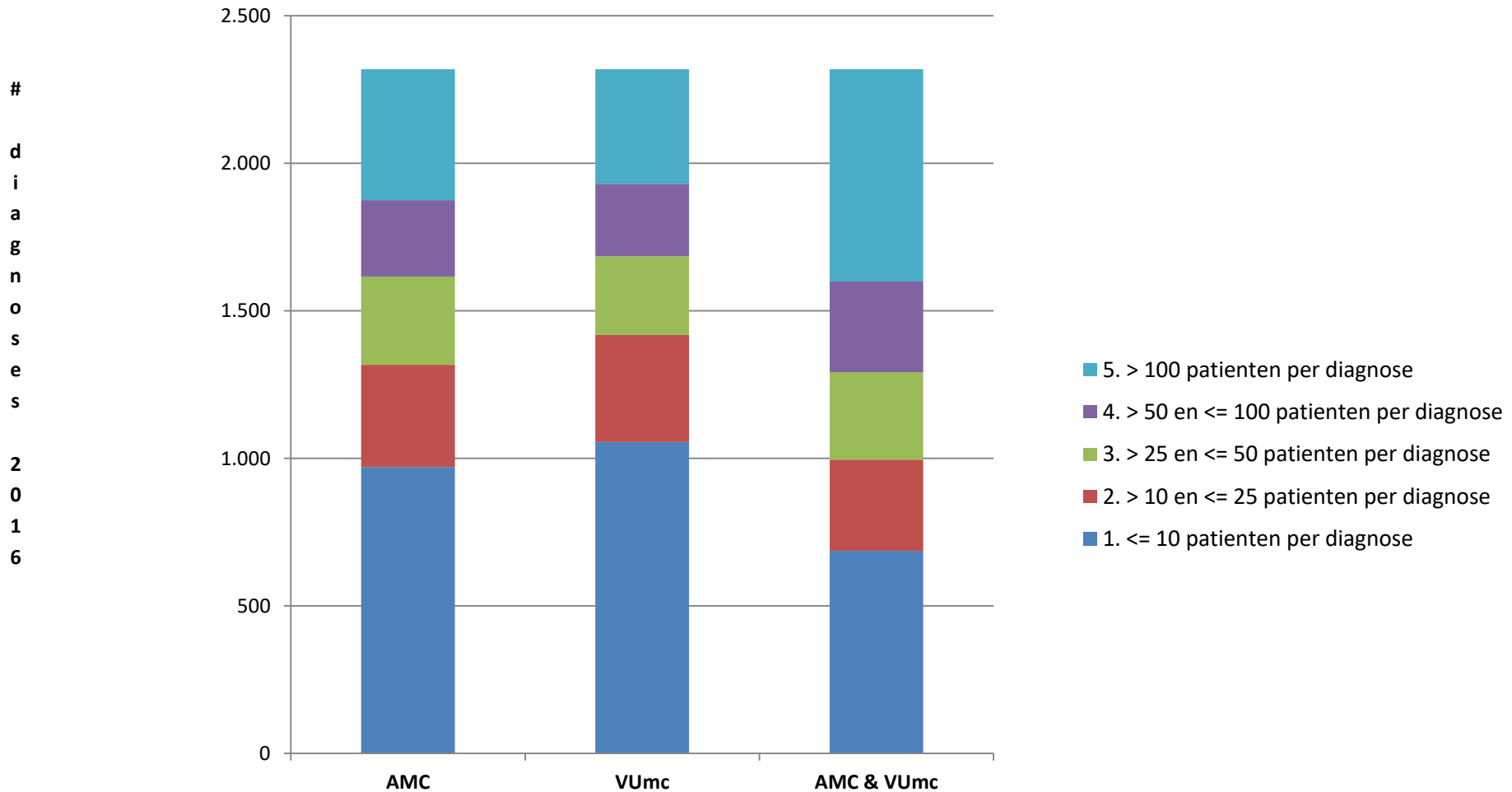
1. Two complete university hospitals only 10 km apart
2. Two relatively small university hospitals
3. Major changes in patient care due to outplacement of simple treatments



Small teams of superspecialists

- Multitrauma patients
- Oncological pulmonary surgery
- Superspecialist units pediatrics
- Superspecialist teams surgery
- Stroke intervention
- Etc ...

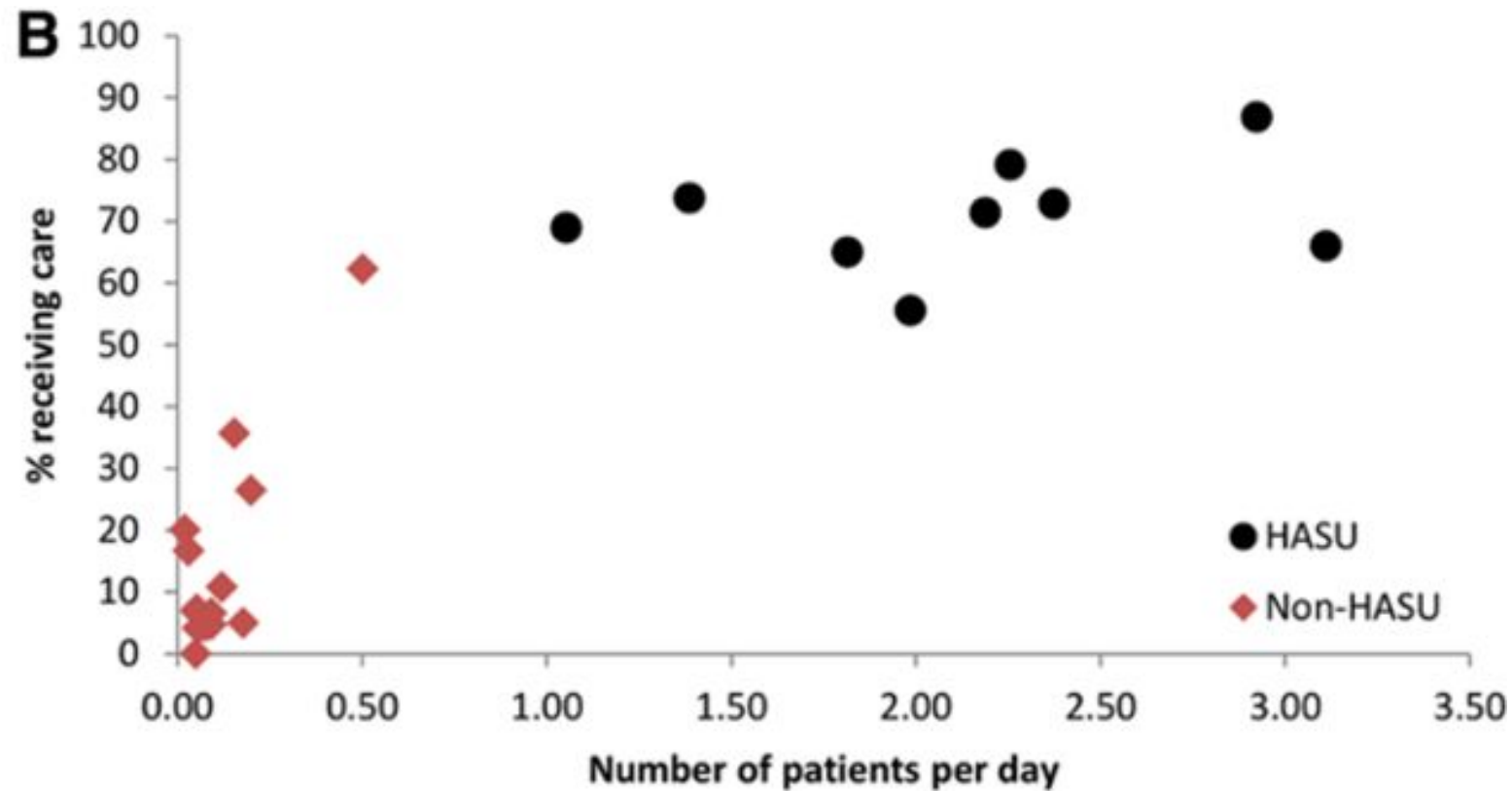
Number of patients per diagnosis



Reasons for merger Amsterdam UMC

1. Two complete university hospitals only 10 km apart
2. Two relatively small university hospitals
3. Major changes in patient care due to outplacement of simple treatments
4. Centralization of treatments on one site to improve outcomes

Centralization of stroke patients in London improves care

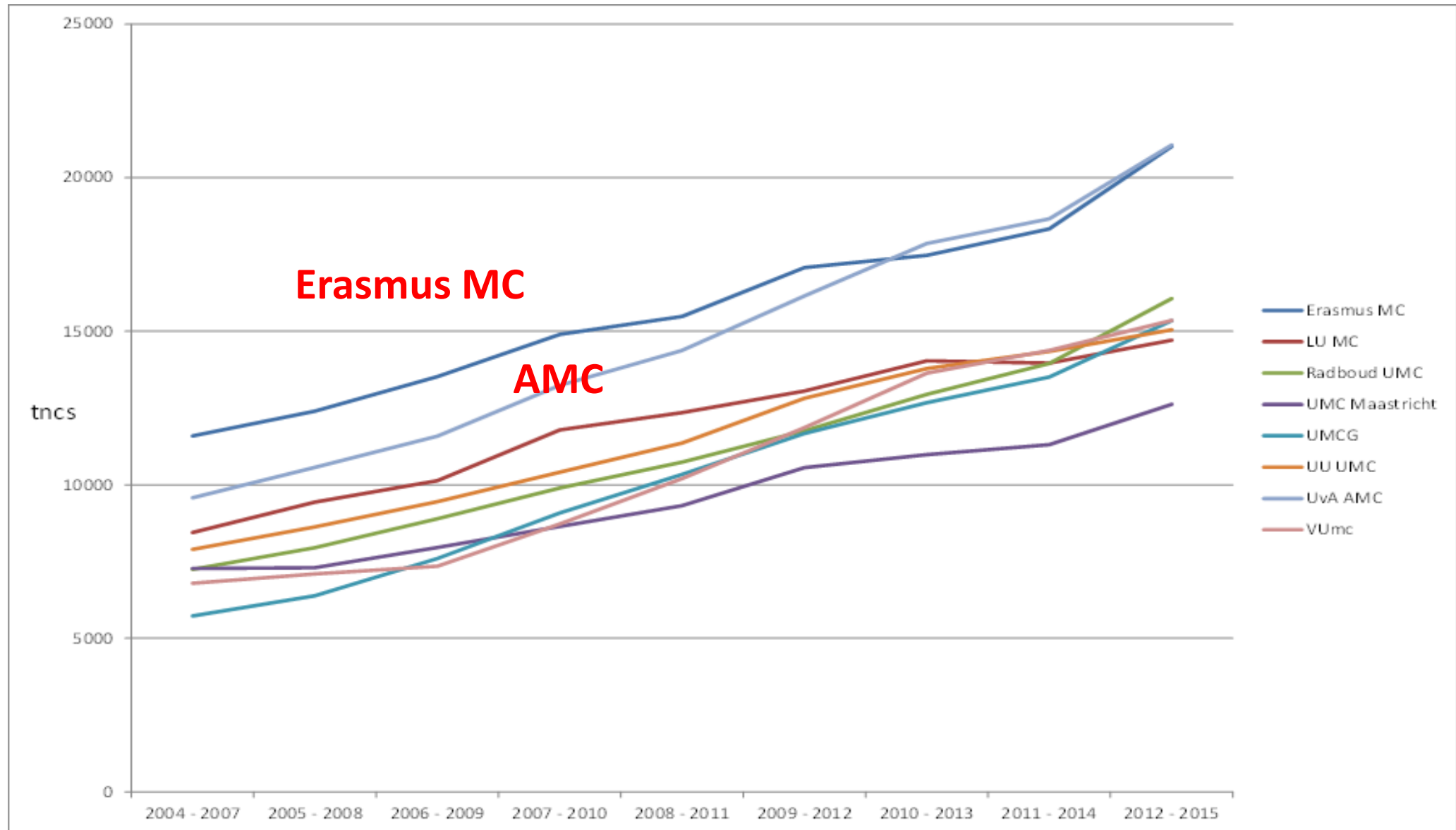


Reasons for merger Amsterdam UMC



















1. Two complete university hospitals only 10 km apart
2. Two relatively small university hospitals
3. Major changes in patient care due to outplacement of simple treatments
4. Centralize treatments to improve outcomes
5. Combine research programs

Publications UMCs: Brute Force Index, 2004-2016

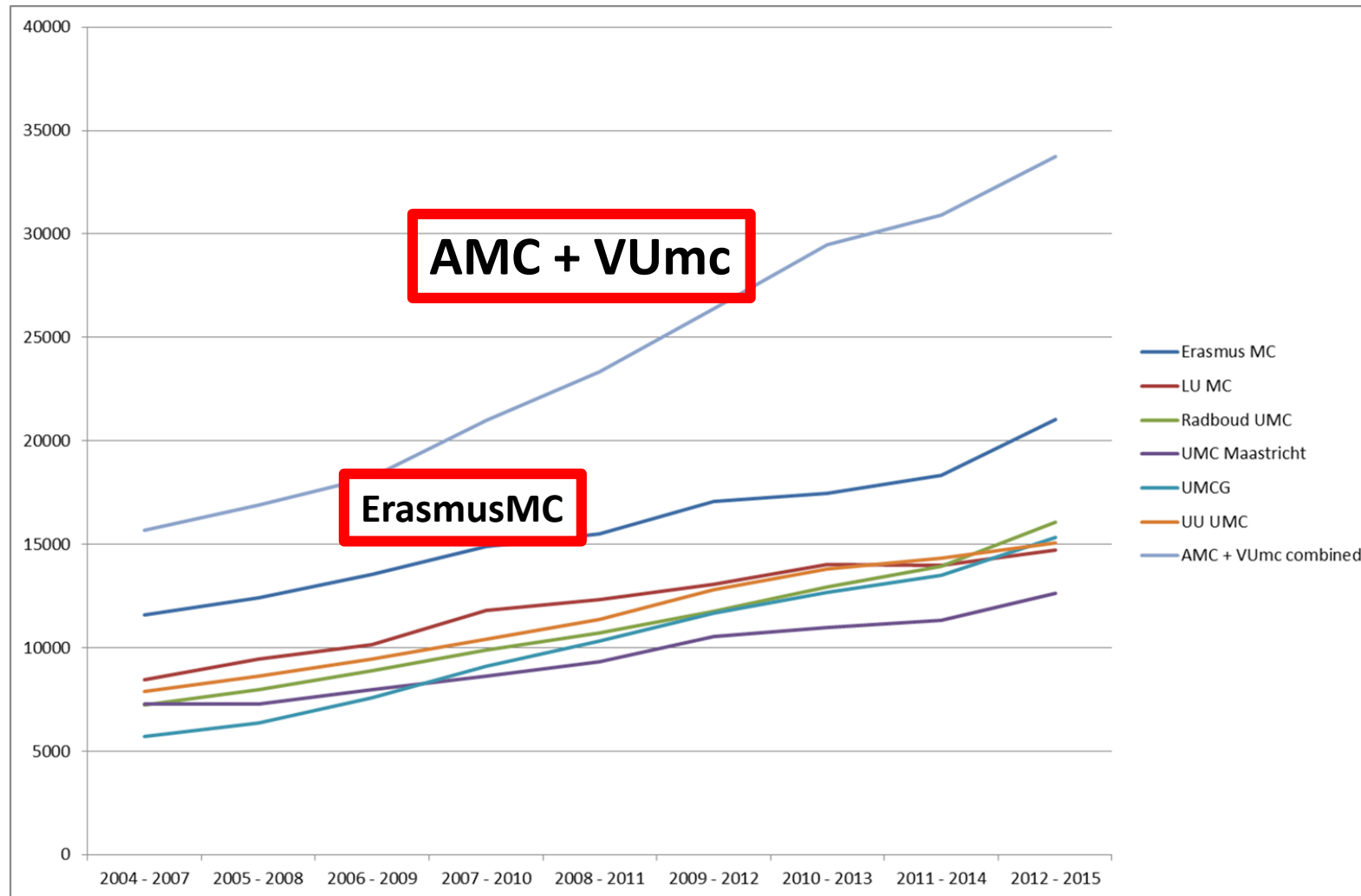
CWTS



QS topuniversities: Medicine

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# RANK	UNIVERSITY	LOCATION	COMPARE	QS STARS™
2017 ▾	University search 🔍	Netherlands ✕	↓	<input type="checkbox"/> Rated only
36	 University of Amsterdam		<input type="checkbox"/>	
41	 Erasmus University Rotterdam		<input type="checkbox"/>	
51-100	 Leiden University		<input type="checkbox"/>	
51-100	 Maastricht University		<input type="checkbox"/>	
51-100	 Utrecht University		<input type="checkbox"/>	
101-150	 Radboud University		<input type="checkbox"/>	
101-150	 University of Groningen		<input type="checkbox"/>	 4★ RATING
151-200	 Vrije Universiteit Amsterdam		<input type="checkbox"/>	 4★ RATING

Brute Force Index, 2004-2016



Reasons for merger Amsterdam UMC

1. Two complete university hospitals only 10 km apart
2. Two relatively small university hospitals
3. Major changes in patient care due to outplacement of simple treatments
4. Centralization of complex treatments to improve outcomes
5. Combine research programs
6. Cost efficiency

Conclusions

- Major changes in health care strategy by UMCs in the Netherlands
- Different strategies in networks to guarantee all components of hospital care
- Transition of complete hospital care by UMC's to focussed incomplete care
- Stand alone University Medical Centers are under pressure



AMC + VUmc

Metamorphosis