



EHMA 2024.

Shaping and managing
innovative health ecosystems

Ethics vs Economy in Medicine ?

How to avoid rationing by rethinking procurement management.

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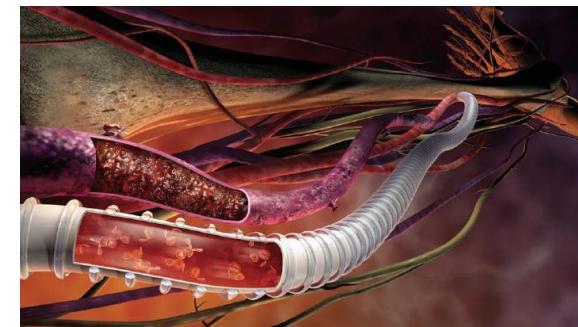
5 - 7 June 2024 - Bucharest, Romania

Politehnica University of Bucharest, Bucharest, Romania

#EHMA2024

Every decision made by hospital managers will produce a bundle of effects: no matter if intended or not !

Managerial Decisions in Procurement



Ethics

Social

Economic

The Study: Importance of ethical criteria in managerial decision-making processes.

Patient outcome, community health
and carbon footprint reduction.



The “Monitoring Study 2023/24”

Sample

- 775 Hospital Managers
- 148 decision-makers from industry, service providers and medical retailers
- 12 representatives from GPOs

Methodology

- Structured Questionnaire
- Interviews

Purpose of the Study

... to identify clinical processes where low-cost medical products with limited functionality are used due to budget restrictions with the consequence of
➤ threatening patient outcome and
➤ jeopardising community health.



Strategy and Procurement Philosophy

Strategically Preferred Areas

Priority 1: 54% Standardization

Priority 2: 53% IT/Procurement

Priority 8: 12%

Priority 17: 1%

Value-Based Procurement and Green Procurement are not represented under the TOP 3 issues on the Strategy agenda!

Decision-making "footprint"

66% unimportant decision-making

32% balanced decision-making (service, functionality, outcome, etc)

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CKM CENTRUM FÜR KRANKENHAUS MANAGEMENT

Wilfried von Eiff <> Oliver Lorenz

CKM-Wegweiser-Studie

MONITORING EINKAUF & LOGISTIK IM KRANKENHAUS | 2023

Lieferketten-Management im Spagath zwischen Resilienz und Wirtschaftlichkeit in Krisenzeiten

Herausgeber:
Centrum für Krankenhaus-Management (Münster) und Wegweiser Research & Strategy GmbH | Münster und Berlin 2023

The Problem

- Calculation of medical products in the reimbursement system is too low
- Calculation is not high enough in order to buy highly functional products with
- added value

Buying cheap products with sufficient but not excellent functionality will increase

- the contribution margin (= counterproductive incentive situation)

A low product price is transparent and saves out-of-pocket money, but process

- cost and benefits for patient and community must be identified by HTA

Hospital is not payed for achieving benefits in the community (e.g. for sickness funds and community health)

Decision-making in Procurement: A balancing act between operating costs and community benefits the hospital gets not payed for.

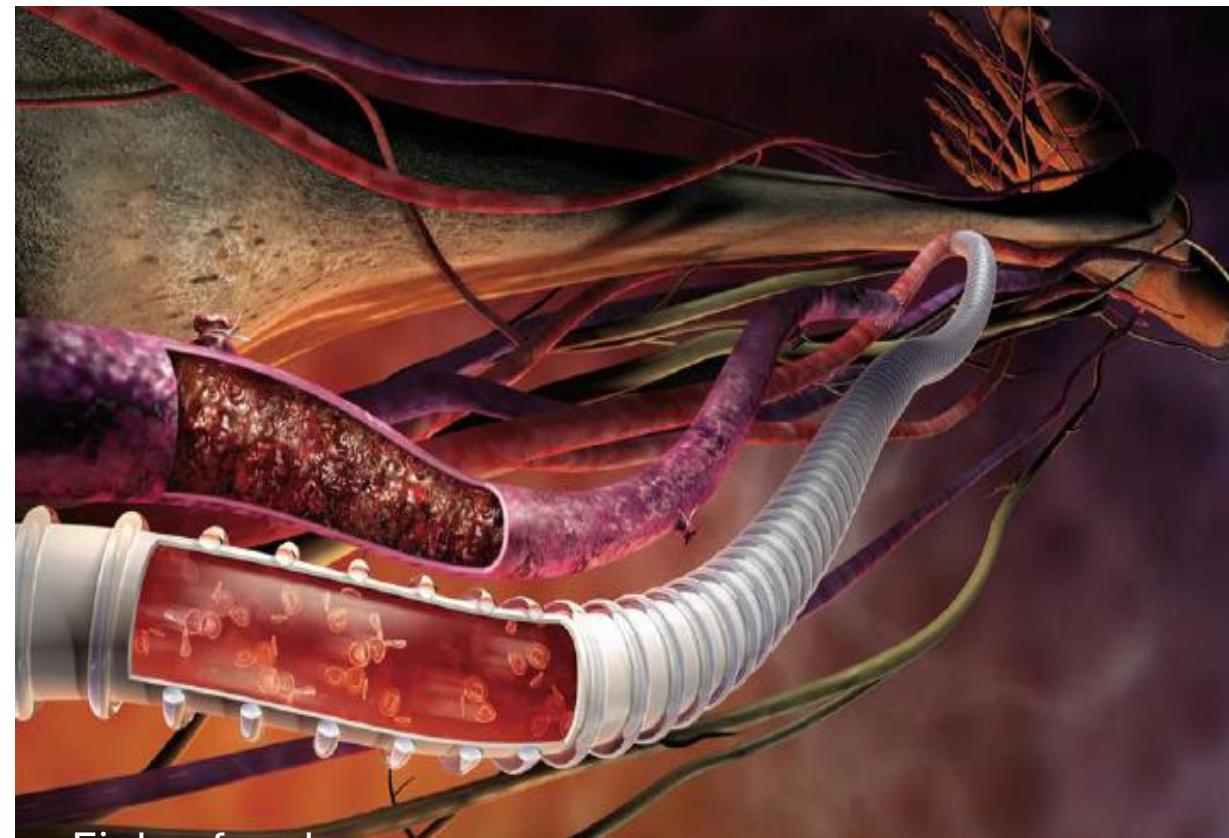
**Infragenual Bypasses with CLI-Patients
(Critical Limb Ischemia)**

G-DRG F08D Reimbursement = 10.548 €

**Vessel Prosthesis with Heparin Surface
(3.800 €)**

versus

**Standard ePTFE Prosthesis
(1.800 €)**



Example for Value-Based Procurement

- **28% less amputations**
- **Major amputation: 25% survival rate after 5 years**
- **Minor amputation: 80% survival rate after 5 years**
 - **Costs per amputation: 90.000 €**
 - **Given 11.000 cases = 880 Mio. savings**



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Managerial Decision



Ethical Dimension

Social Dimension

Economic Dimension

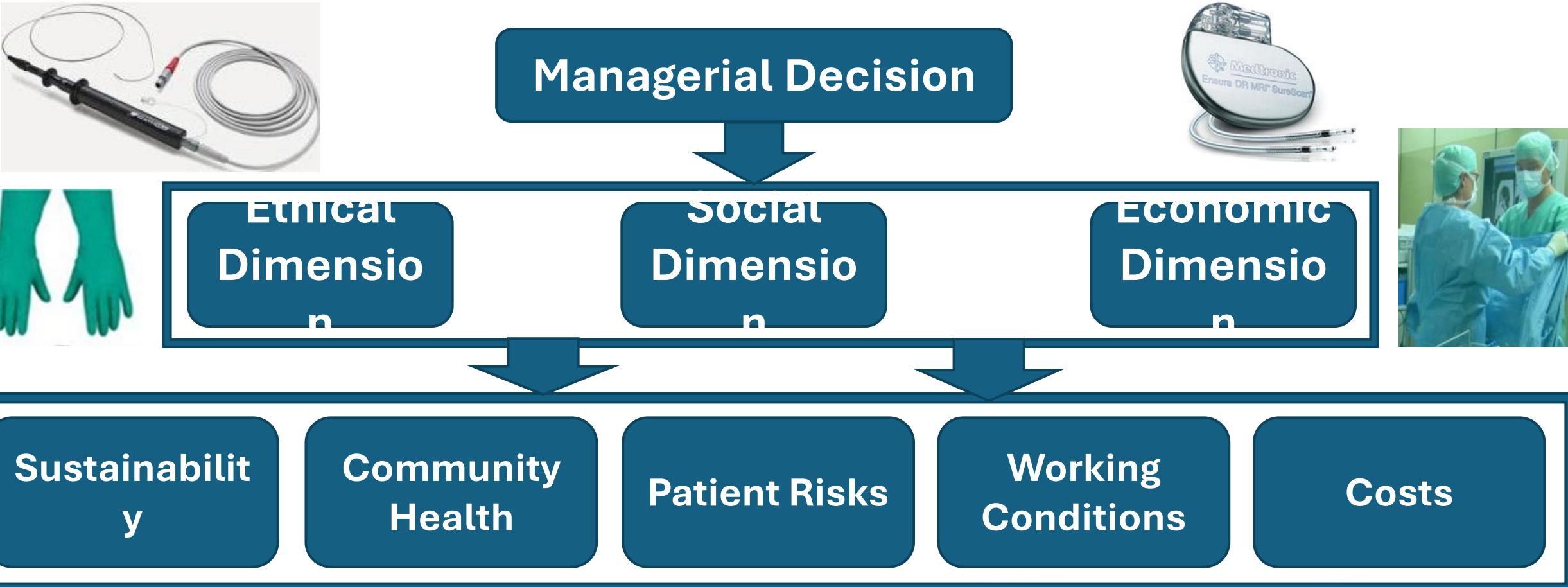
Sustainability

Community Health

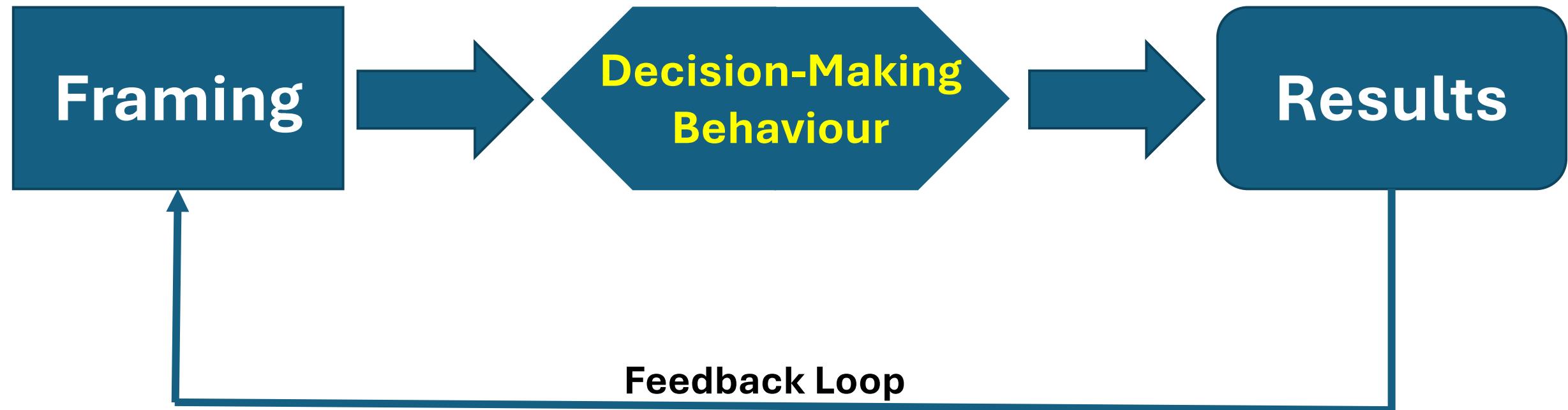
Patient Risks

Working Conditions

Costs



Value-Based Procurement and Decision-Making: Framing determines decision-making and results.



Value-Based Procurement: Fair Prices for Fair Value

How to overcome the reimbursement gap and to fulfil ethical requirements?

- Match between decision-making criteria and incentive system: pay for value pertaining patients, procedures, community health
 - = Reimbursement of Patient Outcome and Community Value
 - Pilot Projects accompanied by HTA
 - HTA-driven prices for selected medical products
 - Agreement on Criteria and Measures
 - List of „value-preferred items“ reimbursed by payers
 - Clinical and epidemiological Evidence
 - Legal regulations for selected High-Cost-High-Impact Devices



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Thank you

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