

SYSTEM CHECK:
STATUTORY OR PRIVATE HEALTH INSURANCE?

For a clear insight into choosing the right health insurance



Press articles on statutory and private health insurance

In the press, both statutory and private health insurance are regularly subject to critique. What is the source of this critique, and which of the concerns expressed are valid? Which are nothing more than poorly thought-out preconceptions? And which stand up to an objective examination?

zdf_heute

Without countermeasures, there is the looming threat of massive premium increases in 2024 and 2025.

4/24/2024

Wirtschafts **Woche**

In 2025, nursing care contributions could increase even more sharply than previously forecast.

4/29/2024

FOCUS MONEY

Mix of statutory and private health insurance proves its worth in the pandemic 2022

aerzteblatt.de

With additional benefits amounting to over 2.8 billion euros since the start of the pandemic, private health insurance has contributed to ensuring medical care during the coronavirus crisis.

2/22/2022

FOCUS MONEY

Retirees pay up to 150 euros more for statutory health insurance.

3/09/2023

versicherungs magazin

Private health insurance proves its worth: Dual healthcare system is resilient in the face of crisis.

9/04/2020



Verband der Privaten
Krankenversicherung

This is how private health insurance strengthens medical care in rural areas.

7/04/2023



Is private health insurance the right system for you?

On the following pages, you will find information on key questions that will help you to make the right decision.

What differentiates private and statutory health insurance?	4
What benefits are ensured?	6
How reliable are premium calculations?	8
What about premiums during retirement?	12
What is the best way to insure my family?	14
What about nursing care insurance?	16
What is the importance of private health insurance in the German healthcare system?	18

Basic differences between private and statutory health insurance



Statutory health insurance

- No reserves in pay-as-you-go system
- Standard benefit volumes
- Rationing of medications

The premium situation in statutory health insurance

Demographic change is one of the biggest problems Germany is facing.

Statutory health insurance is a pay-as-you-go system where funds received are used directly for giving out benefits; no reserves for old age are created. Because of this, the higher costs incurred by older payers must be co-financed by younger ones. No precautions are taken to manage demographic change.

In statutory health insurance, premiums are based on income. Statutory health insurance companies are organized as corporations under public law. As of 2010, they can also go bankrupt.

Under statutory health insurance, physicians are subject to budgetary provisions

Often, persons with statutory health insurance find that their doctor's office isn't taking new appointments at the end of the quarter – except in case of an emergency. Often, this is because the physicians working there have only received a capped total budget to work with from the health insurance companies, and must divide it amongst themselves.

There is a “standard benefit volume” for each practice, consisting of a type of standard compensation per patient and a maximum number of patients – no matter how many times an individual patient received treatment. Only a portion of the normal compensation is paid out for any further services. Only some services, like breast cancer treatments, are excepted from this rule.

The volumes of drugs and remedies are also stipulated and budgeted for annually. If prescriptions are more than 25 % over the budget without this being justified by the specific features of the practice, then physicians must pay the difference themselves from the second time they exceed the limit.

Statutory health insurance: Services based on the “efficiency principle”

§ 12 Social Code (SGB) V

(1) Services must be sufficient, appropriate and economical; they may not exceed the necessary level.

- No freedom of choice: In most cases, legislators determine the scope of services.
- By law, they must be “sufficient, appropriate, and economical”.
- Additional medical services are available only through private supplementary insurance.



Private health insurance

- Capital cover system
- Mutual insurance
- Freedom in issuing prescriptions
- Freedom in choosing treatments

Private health insurance creates reserves for its policyholders

In private health insurance, each generation provides for the higher costs it will face in old age, since premiums are calculated according to the capital cover system. The costs expected throughout the entire term of insurance are already taken into account in the premium. Because of this, policyholders build up old-age reserves when they are younger, which are then used to finance higher expenses as they age. The premium amount for the selected tariff is determined by both age and health status at the commencement of coverage.

Private health insurance companies in Germany are either managed as joint stock companies or mutual insurance companies – like Hallesche. Mutual insurance as a legal form is focused specifically on the interests of policyholders, since they are the owners of the company and since profits are not distributed to shareholders, but rather used for the good of members.

Private health insurance: Services based on “best practices”

§ 1 para. 2 Medical Fee Schedule (GOÄ) The physician may only charge for services that are necessary for essential medical care based on best practices in the healthcare field.

- Freedom of choice: You determine the scope of services yourself.
- You secure services for yourself based on “best medical practice” ...
- ... meaning you can receive a higher level of care.

Private health insurance offers physicians freedom in choosing treatments and issuing prescriptions

All physician’s fees for your treatment as a private patient are regulated in the Medical Fee Schedule (GOÄ) and Dental Fee Schedule (GOZ). A higher fee may be billed depending on the severity, time required, and circumstances of your individual treatment. Therefore, it is able to address your personal illness, your needs, and your requests, for instance.

“Are you well-protected by your current health-insurance? Is your insurance coverage sufficient, or are there areas where you feel you are not sufficiently protected?”

I feel well protected

Beneficiaries of statutory health insurance

64 %

Beneficiaries of private health insurance

90 %

Basis: Federal Republic of Germany, population under 18 years of age
Source: MLP Health report 2022

Comparison of benefits



Statutory health insurance

- Restricted benefits

Private health insurance

- Contractually guaranteed benefits
- Freely selectable tariff

Health insurance premiums are increasing in both systems, partially due to medical advancements and partially due to increasing life expectancies. At the same time, deductibles for policyholders under statutory health insurance have been increased successively due to numerous reform laws. These increases apply in particular in old age, a time when chronic illnesses tend to increase.

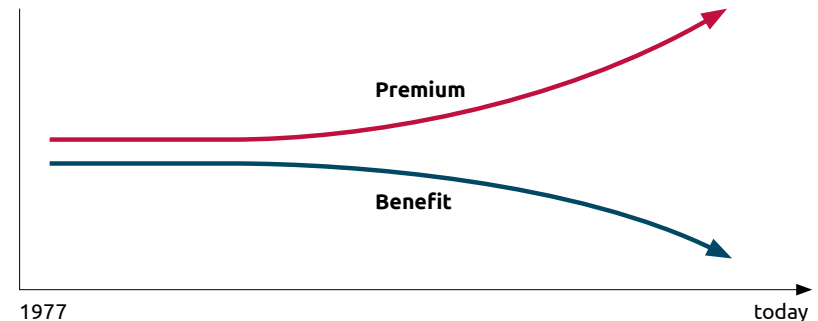
Benefits in private health insurance are guaranteed to individuals by contract

As a beneficiary of private health insurance, you can precisely align your insurance coverage to your needs by choosing the right tariff. You determine the benefits you want or need: From private medical treatment in the hospital to visual aids, treatment by an alternative practitioner, and much more. **These benefits are guaranteed by contract. They cannot be reduced arbitrarily by the insurer.**

In general, you can choose freely from any public or private hospital, as well as panel or private physicians. Since the reimbursement principle applies in private health insurance, you will receive an invoice for all services, which you can review and which serves as the basis for the benefits paid out by your health insurance. This means you interact with your doctor on a level playing field – and have more autonomy and independence.

Benefits available under statutory health insurance are determined by the legislature

20 years ago, persons with statutory insurance still received vision benefits covering glasses, for instance. Things look different today, and the statutory system offers no contractually guaranteed benefits. Benefits are determined by the legislature, and are often changed under reform laws.



Over time, benefits under statutory health insurance have been greatly reduced.



How the benefits offered by private and statutory health insurance differ.

In the hospital:	Statutory health insurance	Private health insurance
Hospital services	Treatment without additional cost only in one of the two closest approved hospitals	Freely selectable depending on the tariff, generally free choice from among all hospitals
	Treatment by general practitioner at the hospital or physician on duty	Depending on tariff, free choice of physicians (including specialists/private physicians)
	Generally multi-bed room	Depending on tariff single, double, or multi-bed room
	Additional payment of € 10/day up to max. 28 days/year	No additional payment
At the doctor:	Statutory health insurance	Private health insurance
Out-patient physician treatment	Treatment only by physicians approved by the insurance company	Free choice of physicians
Rides to the physician	Only in medically necessary cases, only with approval; additional payment 10%, min. € 5 up to max. € 10	Depending on tariff, e.g. also if you are unable to walk
Check-up examinations	Restricted to legally defined medical check-ups (including in old age)	Depending on tariff, including outside of statutory programs
Medicaments and dressings	If not excluded from prescription; additional payment 10%, min. € 5, max. € 10	Reimbursement based on selected tariff
Medical aids	Additional payment of 10%, min. € 5, max. € 10; medical aids for consumption: 10%, max. € 10 for monthly supply	Depending on tariff, generally if medically necessary without restriction to a narrow catalog of medical aids
Visual aids	No benefits; exception: Persons with severe visual impairments and children	Co-insured in the amount selected by tariff
Laser eye surgery	No benefits for laser treatments	Co-insured depending on tariff
Alternative practitioners	No benefits	Co-insured depending on tariff
At the dentist:	Statutory health insurance	Private health insurance
Dental treatment	Simple care, such as amalgam, synthetic fillings in front teeth	No restriction to simple care
Dentures	Fixed contributions based on diagnosis (60 % to 75 % of the simplest form of care) prior approval of treatment and cost plans by the agency	No restriction to simple care; reimbursement based on selected tariff
Further benefits:	Statutory health insurance	Private health insurance
Global insurance protection	No benefits; exception: EU countries and countries with social security conventions; higher deductibles in some cases	Freely selectable depending on tariff, e.g. global insurance coverage for a temporary stay
Return transport from abroad	No benefits	Freely selectable depending on tariff, e.g. additional travel expenses reimbursable, including transport and burial abroad
Daily benefits	Daily benefits do not close protection gap fully, end after 78 weeks	Individual protection of monthly income possible
Additional payments / deductibles	Additional payments up to 2 % of the household's annual gross income possible; For chronic illnesses up to 1 %; from 1972 this applies only with regular preventive examinations	Individually selectable depending on tariff
Premium refunds	Only under specialized optional tariffs	If no benefits received premium refunds up to multiple monthly premiums possible

Premiums

In statutory health insurance: Additional earnings equal additional premiums

In statutory health insurance, premiums are determined based on income. Until the maximum premium threshold is reached, the higher your income is, the higher your insurance premiums will be. This amount is not related to the scope of insured benefits.

In private health insurance: Individual premiums, with reserves for old age

In private health insurance, premiums are determined based on your insured benefits and your age and state of health at the commencement of coverage.





Statutory health insurance

- Increasing premiums:
In 2024, for the first time ever, more than € 1,000.

In general, the (average) maximum premium continues to increase under statutory health insurance, since the premium limit changes on a yearly basis depending on average wage trends. In 2024, the limit with an average additional premium of 1.7 %, including compulsory nursing care insurance is **€ 1,019.48** for persons with children, or **€ 1,050.53** for persons without children.

The premium amount under statutory health insurance increases automatically for:

- Each wage or salary increase, if the beneficiary's income is below the income threshold.
- Income thresholds are increased at the start of the year.
- Premium rates and individual additional company premiums increased.

Statutory health insurance: Increasing financing challenges

The income side is dependent on:

- The number of employees obligated to carry insurance (demographic development).
- General wage trends (economic development).
- The amounts of state tax subsidies (political decisions).
- The amounts of premium rates and additional premiums (individual decisions by insurance companies).

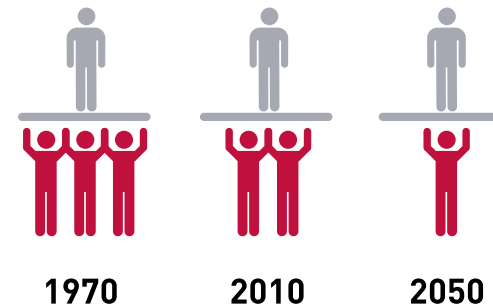
The expenditures side is dependent on:

- The scope of benefits under statutory health insurance (political decision).
- The number of sick people, which will increase greatly as the population ages.
- Medical and technical advancements and increasing costs.

Statutory health insurance is also supported by a tax subsidy. This amount is dependent on the political and budgetary situation. Based on current plans, the federal government will transfer € 16.5 billion annually to the health fund.

How many workers it takes to support one retiree

German population



Source: Statistisches Bundesamt and PKV-Verband

Our tip:

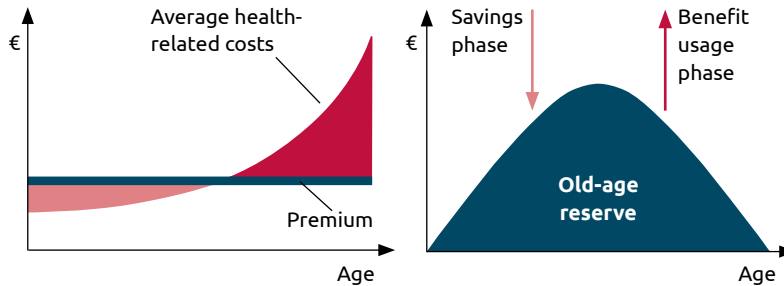
When funds from the health fund are insufficient, health insurance companies charge an additional premium. This is dependent on income. If your health insurance company charges a high additional premium, switching to a less expensive insurance company can often pay off. You can use the savings to finance private additional insurance.



Private health insurance

- Almost € 330 billion in old-age reserves
- Increasing benefits based on medical advancements

In private health insurance, your premiums are calculated from the start with a savings component, called the old-age reserve. This means your premiums are initially higher than would be necessary to cover your health expenses. The part of the premium you do not use initially forms an old-age reserve.



As you age, you will likely use more benefits than the premium paid; the difference is compensated through the reserve.

At the end of 2023, the total amount of old-age reserves built up by private health insurance companies was around € 328 billion. You can view the current amount at www.zukunftsuhr.de.

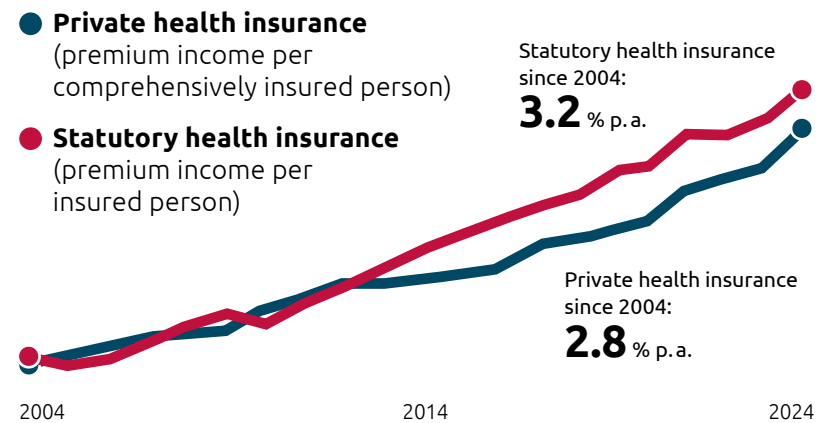
Private health insurance: Insurance protection grows with you automatically

Of course, premium calculations under private health insurance are based on current cost contexts in the healthcare system. Future developments cannot be predicted precisely – even with all due care – and cannot be determined statistically. Due to medical and technical advancements, many people can be identified and treated today who would not have been able to receive treatment in the past.


Because of this, private health insurance premiums must be adjusted to maintain the balance between insurance benefits and premiums over the long-term. These secure your insurance coverage, which can grow as medical treatments and care options continue to improve.

To provide for the resulting increase in costs during retirement, the premium includes an allowance of 10 % right from the outset. This is saved as a reserve to respond to medical progress.

Premium development of statutory and private health insurance in comparison



Original starting age for NK2 tariff in 1990: 33 years incl. nursing care insurance from 1995



Despite the need to adjust premiums, the Hallesche premium has remained significantly below the maximum statutory health insurance premium over the decades.

Insured in old age

Premiums increase even for retirees under statutory health insurance

Since statutory health insurance does not form reserves for its older beneficiaries, and since their higher health-related costs are always financed by younger beneficiaries, it is no wonder that premiums for retirees with statutory health insurance have continued to increase. One reason for this is the inclusion of more and more “types of income” in premium calculations.

Statutory health insurance reduces your pension earnings

One other major reason for this is that the bases for assessment have continued to expand under statutory health insurance for retired beneficiaries. Not only current pension amounts, but as of 2004 other pension earnings and one-time capital payments have been included in premium calculations as well, up to the contribution assessment ceiling.

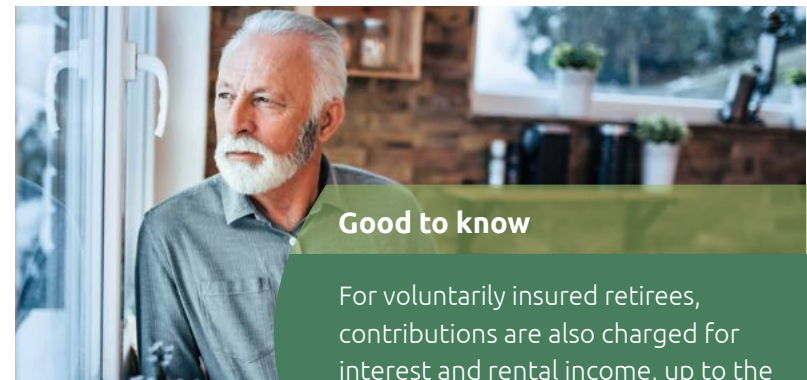
Capital payments, such as payouts from direct insurance, are distributed evenly over ten years and allowed for at the full premium amount.

Premiums as a retiree with mandatory statutory health insurance – an example:

	Income	Premium (19.6%)*
Statutory pension	€ 2,500	€ 492.50
Company pension	€ 500	
Direct insurance (one-time payment € 50,000 distributed over 120 months)	€ 416.67	
Amount subject to insurance contributions**	€ 740.42	€ 145.86
Freelance work	€ 200	€ 39.40
Monthly premium		€ 677.76
Pension insurance allowance	8.15 % of € 2,500	€ -203.75
Retiree contribution		€ 474.01

As of 07/2023

- * 14.6% general contribution rate, 1.7% additional health insurance premium and 3.4% for compulsory nursing care insurance. In addition, childless retirees born after 1/1/1940 receive an allowance of 0.6%.
- ** There is an allowance amount of 1/20 of the monthly reference value for benefits from company pension schemes (company pensions or capital benefits from company pension schemes). No contributions to statutory health insurance are charged for these amounts. Anyone who was insured for 90% of the second half of their working life under statutory health insurance is subject to mandatory insurance.



Good to know

For voluntarily insured retirees, contributions are also charged for interest and rental income, up to the max. contribution of € 1007.48 monthly.

Under private health insurance, pension earnings are not subject to charges

Under private health insurance, your pension earnings generally play no role in calculating your premiums. Ensuring premiums are affordable in old age is a very important goal for private health insurance.

Premium stability in old age

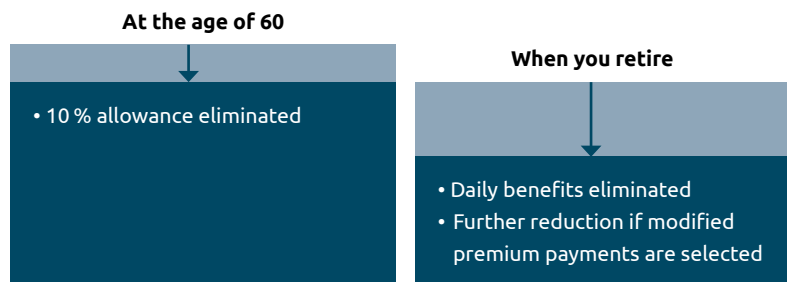
Old-age reserves are formed to ensure pensions will not increase simply because you age. In addition, there are funds specially used to **stabilize premiums after the age of 65**:

- Additional savings due to a statutory allowance of 10 %. This is paid in addition to the premium between the ages of 21 and 60.
- Profits generated from creating old-age reserves.

Premium reductions in old age

- The 10 % allowance is eliminated when you turn 60.
- The contribution for daily benefits is eliminated when you retire.
- Many insurers also offer the option of modified premium payments. Hallesche does so with MBZ.flex: Pay a little more today, but significantly less in old age.

You receive the same pension insurance allowance as under statutory health insurance, amounting to 8.15 % of your statutory pension (if applicable limited to half of the payment amount).



Example premium for a 73-year-old retiree, insured for many years by Hallesche:

NK 1 tariff	€ 493.83
PVN tariff	€ 138.63
MBZ contribution	€ 103.14
MBZ discount	€ -196.95
Monthly premium	€ 538.65
Pension insurance allowance	€ -203.75
Retiree contribution	€ 334.90

Want to go back to statutory health insurance?

You can't – but you also don't need to!

It is only possible to go back from private health insurance to statutory health insurance in certain cases, for instance if you lose your job, and only until the age of 55. However, it is possible to switch within private health insurance to a tariff with a higher deductible or another range of benefits, or to the basic tariff.

The basic tariff: Statutory health insurance in private health insurance

You never pay more than the maximum contribution under statutory health insurance – with corresponding benefits. If you have financial difficulties and a verified need for assistance, your premiums are cut in half. If this still isn't sufficient, the responsible social insurance authority pays your premium directly to the insurer. This means you stay on the safe side with private health insurance, even when you retire.

The best insurance for your family



Statutory health insurance

- Defined catalog of benefits

With a few exceptions, the catalog of benefits for statutory health insurance is uniform for children as well. Better protection for your child is available only with supplementary private insurance.

Do you have statutory health insurance and have a spouse, a family, or are planning to have children?

Then “premium-free family insurance” from statutory health insurance companies might seem like a good idea. Things become more complicated, however, if you look closer: Additional payments and treatments paid for out-of-pocket can add up over the years. Added security for everyone – beyond the restricted catalog of benefits under statutory insurance – is available only at an added cost.

Requirements for premium-free co-insurance under the statutory health insurance

“Premium-free family insurance” under statutory health insurance is available under the following conditions:

- Children: Up to 18 years in general, up to 23 if children are not employed, up to 25 if they are still in school or vocational training.
- If one parent is privately insured and earns more than the mandatory insurance limit, children are only co-insured premium-free if the parent with statutory health insurance has a higher income.
- One spouse is co-insured premium-free if they have no or only a minimal income (generally for minor employment up to a max. of € 520).

Important additional consideration for your children under statutory health insurance: Supplementary in-patient insurance

Ensure your children can freely choose their own specialists at the hospital. Higher quality supplementary insurance provides the following benefits:

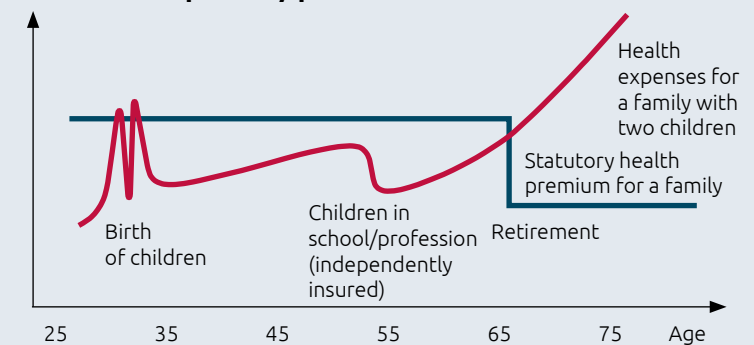
- One or two-bed room, including benefits for rooming in.
- Private medical treatment even beyond the maximum rates in the fee schedule.

Did you know? Despite “premium-free co-insurance,” families pay more than the amount they generate in costs.



A family with an average income and three children will pay more in premiums before they retire than they will generate in costs. This means that families also have to help finance the health expenses of retirees. In private health insurance, in contrast, old-age reserves ensure the next generation isn't charged for the care of the current one.

Healthcare expenses / premiums



Simplified representation from a study by the Bertelsmann Foundation “Family fiscal equalization under statutory health insurance” 2013, p. 54. Data basis: Premiums and expenses of all beneficiaries under statutory health insurance.



Private health insurance

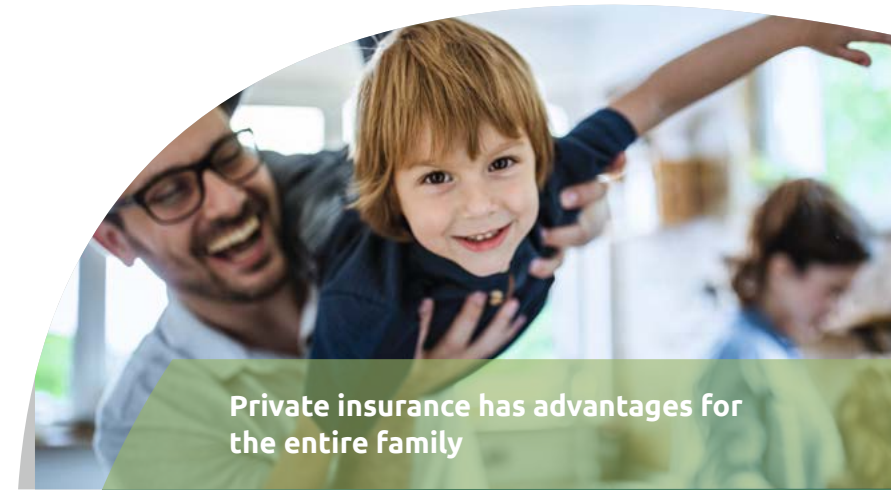
- Children can be co-insured with affordable premiums from birth without a risk assessment.

Private co-insurance is the optimal choice

As a beneficiary of private insurance, you can co-insure your children from birth **without a risk assessment** – securing optimal treatment and care for your children right from the start, with the high level of benefits offered under private insurance. Premiums are significantly lower than for adults, since no old-age reserves are formed for children. This is the case only after the age of 21. Although each family member has their own premium under private health insurance, employees receive their employer subsidies for the entire contract. The allowance is 50 % of the premium up to the maximum contribution the employer would have to pay to statutory health insurance.

Private health insurance stands up to the competition

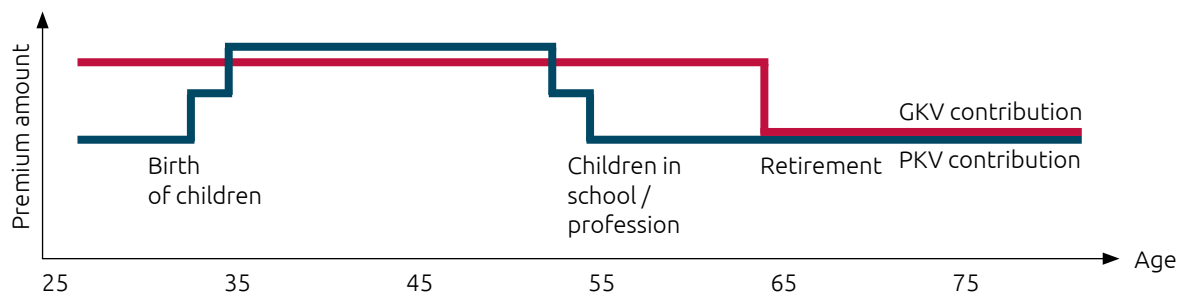
If you compare statutory health insurance premiums and premiums under comparable private insurance coverage over the beneficiary's lifetime, one thing is clear: Premiums under private health insurance – including premiums for children – are frequently actually lower than under statutory health insurance, particularly if both spouses are continuously employed. This means that private insurance coverage is a real alternative for your family.



Private insurance has advantages for the entire family

- Co-insure your children from birth, without a health assessment.
- The same optimal quality of treatment and care.
- Maximum protection, for minimal "child premiums".
- Full employer subsidy for the entire contract, up to the maximum contribution.
- Co-insured children pay no premium for compulsory nursing care insurance.

Diagram of potential premium trends over time with two children, spouse with mandatory statutory health insurance, without considering premium adjustments under private/statutory health insurance



Anyone can find themselves in need of care



One half of men and three quarters of women will require nursing care during their lifetime.



People may need nursing care for many reasons, regardless of their age. Anyone can find themselves in need of care, due to a serious accident, a severe illness, or even a moment of carelessness in everyday life. One in four persons in need of nursing care is under 65. Over 80 % of persons needing nursing care receive that care at home; on average, the need for care lasts 7 years.

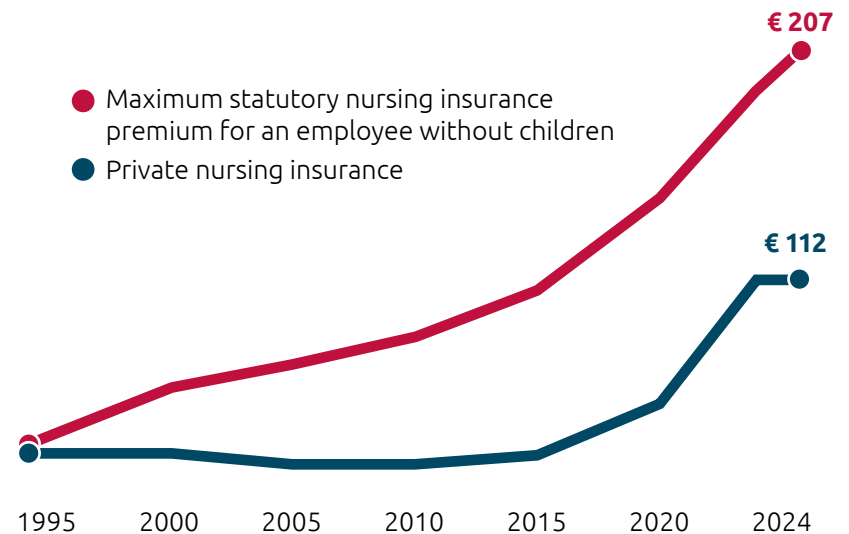
When you decide on health insurance, you are automatically choosing your compulsory nursing care insurance system

This was introduced in two forms in 1996 – social nursing insurance and private compulsory nursing care insurance. Benefits under both systems are the same. They are graduated into five care degrees.

Sustainable financing under private health insurance pays off

While social nursing insurance is financed on a pay-as-you-go principle under statutory health insurance, with few reserves, beneficiaries under private compulsory nursing insurance provide for their own future nursing costs. This model has proven successful: Premium developments under private compulsory nursing care insurance are significantly more stable.

Private nursing insurance: Premium for an employee who was 35 years of age in 1995 when nursing care insurance began

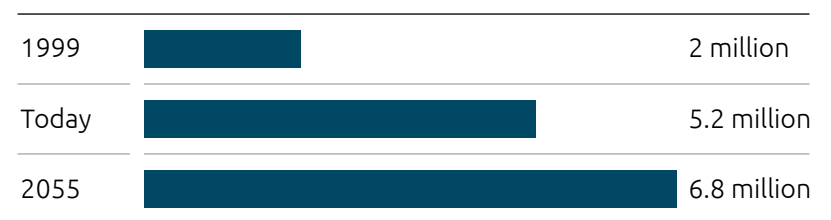


Source: PKV-Verband

The number of persons requiring nursing care is growing

The number of persons requiring nursing care has doubled since compulsory nursing care insurance was introduced. Experts believe the need for nursing care will continue to increase.

Increase in persons requiring nursing care in Germany

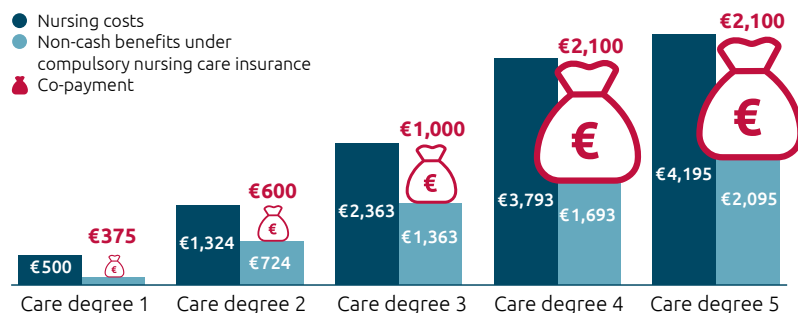


Sources: Statistisches Bundesamt and Bundesministerium für Gesundheit

Nursing care faces financial gap

The co-payment for nursing costs in nursing homes is the same for care degrees 2 to 5. However, it can differ depending on the nursing home. Additional costs also apply, for instance for lodging and meals. **Despite the allowance, the average co-payment is over € 2,800 per month.***

Financial gap for domestic care, monthly



Source: Assekurata, April 2024.

Children liable for their parents

Benefits under nursing care insurance cover only part of the costs if nursing care is required. Any gaps must be financed from income and assets. If these aren't sufficient, spouses and even children or parents may be liable to pay for care.

* Source: PKV-Verband



Close the gap with private supplementary nursing insurance

- Access is available even without a health assessment under state subsidized tariffs.
- There are tariffs with a very affordable entry-level premium – meaning you can fully protect yourself, even as a young person.

Private health insurance: Supporting pillar of the German healthcare system

Two insurance systems, one care structure

One thing is clear: Statutory and private health insurance together secure the quality of the system of care available in Germany. The “two pillar system,” which has proven itself for over 100 years, guarantees all beneficiaries access to a full range of physicians, dentists, and hospitals. Because of this, our medical care is considered some of the best in the world.



Private health insurance – good for everyone

The beneficiaries of private insurance support the German healthcare system with over € 37 billion per year. If they were instead insured under statutory insurance, the system would lose over € 11 billion. This would result in the closures of doctors’ practices and a loss of medical personnel. Private health insurance premiums make investments possible that secure a high standard of medical care for all.

All countries with a uniform system suffer from two classes of medical care

Everywhere that healthcare is organized under a single, uniform system, benefits are subject to more rationing. This results in two classes of medical care: In these countries, only people who can afford it have access to top medical care – outside of the uniform care system.

Great Britain
Over 5 million patients are on waiting lists. Often receive a doctor’s appointment only after months of waiting. Some benefits are denied for cost reasons.
Netherlands
General practitioner must decide on access to specialists.
France
Each individual pays an average of 25 % of their own healthcare costs.
Spain and Denmark
No free choice of general practitioners or specialists.
Switzerland
Hurdles to access due to high obligatory additional payments of up to 1,000 franks (around € 900).

Source: PKV-Verband

Ideas about uniform insurance which have been discussed for years now might seem good at first glance. However, there is a significant danger that overhauling the health insurance system would result in greater paternalism by the state, a restricted catalog of benefits, and less competition.

Secure your opportunity to receive private health insurance now

No matter what happens in the future: Today, you have a better choice available. Ultimately, the concepts promoted by political parties calling for this kind of uniform insurance system provide options for switching from private health insurance to the uniform insurance system – but not vice versa.



What's the next step? You have a choice!

Statutory health insurance + supplemental insurance

Would you like to retain your statutory health insurance?
Close the gap with smart supplementary insurance.

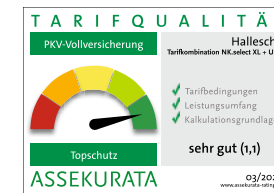
Comprehensive private health insurance

Secure all of the advantages of private health insurance!

Good reasons for a partnership with Hallesche

- Optimal price-performance ratio
- Comprehensive, modern health management
- Multi-award winning for excellent premium stability
- Premium refund in the event of no benefits being paid in comprehensive health insurance coverage
- Optimal health insurance, for every stage of life
- Reliable premiums – even in your senior years
- Check-up examinations without age limit
- Over 85 years of experience

Simply excellent!



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