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# Description of the public health care system

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## WHAT

In Germany, health care is based on a decentralized and self-governing system run by a number of different players. The German health care system is divided into three main areas: outpatient care, inpatient care (the hospital sector), and rehabilitation facilities. The institutions responsible for running the health care system include the associations and representatives of various providers and professions, health insurers, regulatory bodies and the Federal Ministry of Health.

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## HOW

The health care system in Germany is based on four basic principles:

(1) Compulsory insurance: People generally must have statutory health insurance (gesetzliche Krankenversicherung – GKV) – provided that their gross earnings are under a fixed threshold (Versicherungspflichtgrenze). Anyone who earns more can choose to have private insurance (private Krankenversicherung – PKV).

(2) Funding from premiums: Health care is financed mostly from the premiums paid by insured employees and their employers.

(3) Principle of solidarity: In the German health care system, statutory health insurance members mutually carry the individual risks of loss of earnings and the costs of medical care in the event of illness. Everyone covered by statutory insurance has an equal right to receive care – regardless of their income and premium level. Premiums are based solely on income.

(4) Principle of self-governance: While the state sets the conditions for medical care, the further specific setup, organization and financing of individual medical services is the responsibility of the legally designated self-governing bodies within the health care system. They are made up of members representing doctors and dentists, psychotherapists, hospitals, insurers and the insured people.

The Federal Joint Committee <http://www.english.g-ba.de/> (Gemeinsamer Bundesausschuss G-BA) is the highest entity of self-governance within the statutory health insurance system.



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## GOOD TO KNOW

If you have to stay overnight in a hospital for treatment, it is referred to as “inpatient treatment.” Additional fees are charged for accommodation and meals that are not covered by statutory insurers. These fees are stipulated in a “contract” between the patient and the hospital before the treatment is carried out.

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## WHERE

In Germany, outpatient care is mainly provided by self-employed doctors, dentists, psychotherapists and other health care professionals in their own practices. Most doctors and dentists have a “Kassenzulassung” (statutory health insurance accreditation), enabling them to treat anyone with statutory health insurance. When they are ill or have other health problems, most people go to see their family doctor (Hausarzt) first. In Germany, general practitioners, internists and paediatricians are considered to be family doctors. These doctors can refer you to the right kind of specialist – like a dermatologist or gynaecologist – for particular medical problems. It is also possible to go straight to specialists without a referral.

Inpatient care: Most hospitals in Germany treat all patients regardless of whether they have statutory or private health insurance. Large hospitals usually are financed by the state or municipality. Charity-run or church-run hospitals are operated by organizations like the Red Cross or religious groups. There are also many privately-run hospitals, some of which will only see patients who are privately insured. These hospitals are typically smaller and more likely to be specialized.