# **ASSIGNMENT 1:**

# French and Finnish Health care systems.

## I- French and Finnish populations

	FRANCE	FINLAND
official total population (2018)	67 795 000 (1)	5 517 887 (2)
number of doctors	3,34/1000 residents (3)	2,9/1000 residents (4)
Life expectancy at birth (years)	Male: 78,9 Female: 85 (5)(6)	Male : 78 Female : 84 (7)
main death causes (16)	<ul> <li>cancer (pulmonary, breast, colon)</li> <li>diseases of circulatory system.</li> <li>diseases of respiratory system.</li> </ul>	<ul> <li>diseases of circulatory system.</li> <li>cancer (pulmonary, breast, colon)</li> <li>diseases of the nervous system</li> </ul>

Some of main causes of death in France can be related to the environment (UV, pollution) and to high-risk behaviours. For example, in France about a third of population aged between 15 and 75 years old smoke. Tabac is responsible for more than 78 000 premature death per year and 90% of pulmonary cancer. (8)

The French lifestyle evolution led to an increase of excess weight and obesity, indeed in France in 2015, 17% of the population were obese and excess weight concerned around half of the population.(9)

Wine is a tradition in France, French people drink 2,7 glasses per day. Alcohol is a main factor of cancer and diseases of circulatory system and causes a lot of premature death. (10)

In Finland, contrary to France, most notable problems are excess weight and diabet. These problems have known a big increase with the lifestyle's evolution.

There are two types of diabetes, one (type II) is very common in the rest of Europe, the other one (type I) is more rare. According to Ministry of social affairs and health (4) «Type 1 diabetes is considerably more common in Finland than anywhere else in the world». Concerning substance abuse, Finland is facing a problem of alcohol consumption and around 400 000 persons are considered as high-risk alcohol users. (4)

# **II-** Health care systems

« Patients have the right to good care and treatment in public and private health care. Their human dignity, convictions and right to privacy must be respected. » (4)

#### 1. France

Social security was created in 1945 in order to protecting French people threw differents services (spending) :

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- health insurance ⇒ health care services
- retirement pension
- work accident
- family ⇒ child birth/child cares/accommodation...

French social security is mainly funded by social security contribution (tax) paid by workers and employers. The amount of this tax is based on the income of each person to respect the social security's principle of solidarity.

However, with the evolution of the living standard, lifetime increased thus the social security spent more for retirement pension and health care and it created an imbalance of the system. (11)

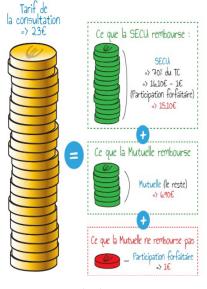
The social security establish a base price (=TC) for each medical services and a reimbursement rates on the previous TC:

- 100 % for hospitalisation
- 70 % for medical consultations and X-ray examination
- from 65 % to 15 % for medicines
- 60 % for nursing, physiotherapy and biological analysis.

To complete the reimbursement, French people have to subscribe a supplementary health insurance called a "mutuelle".

To explain concretely this system we are going to take the example of a normal doctor's appointment (15):

Remboursement SECU + MUTUELLE :



In this example the appointment cost chosen by the doctor  $(23 \in)$  is the same as the TC.

The rate reimbursement is 70% so it's 16,10 $\in$  of 23 $\in$  (less 1 $\in$  for mandatory participation).

So Social security reimburses 15,10€

then the "mutuelle" will reimburse  $23 \in -15, 10 \in =6,90 \in$  (in order to be at least at 100% of the TC)

Sometimes doctors imposes higher prices: fees. That's why it's important to subscribe to a good "mutuelle" which can reimburse most of extra cost.

So if a doctor imposes a price of  $50 \in$ , TC and reimbursement rate don't change, thus the social security still repay the same (=15,10 $\in$ ). The extra cost is  $50\in$  - 15,10 $\in$  = 34,90 $\in$  which can be repaid by your "mutuelle". It's more than 100% of the TC, that's why people have to take a "mutuelle" at 200% or 300% of the TC to reimburse the extra.

(15)

Every children depend on their parent's social security. At 16 years old, every teenager receive his own security social card called "carte vitale" which is still related to their parents security social number. This card allows people to get reimbursed for health cares for their whole lives and to get registered for retirement pension. (11)

When you become a 20 years old student you have to subscribe to a student social security and concerning the "mutuelle" either you choose to stay related to your parent's "mutuelle" or to subscribe your own one.(11)

When you become a worker, you get taxed on your income to benefit from social security. Concerning the "mutuelle" it's mandatory when your are an employee and most of the time you can get one from your company. If you are independent or unemployed you should subscribe one. (11)

When you go into retirement, you get a pension. (11)

	social security	"mutuelle"
children	parents one (tax)	parents one (charged)
students	subscribe a student social security (charged)	chosen: parents one or your own (charged)
adults	tax	with company or private (charged)

In case of sick leave, social security doesn't refund the three first days but then you get daily allowance paid either by social security or by the company. (11)

In case you are abroad:

In European countries: you have to ask social security for the European health insurance card to be insured if you need some health care.

In non-European countries: you are insured only for emergencies. (11)

#### 2. Finland

The Finnish social security, Kela, was created in 1937 for the same purpose as in France, to protect Finnish people threw different services which differ according to the person status:

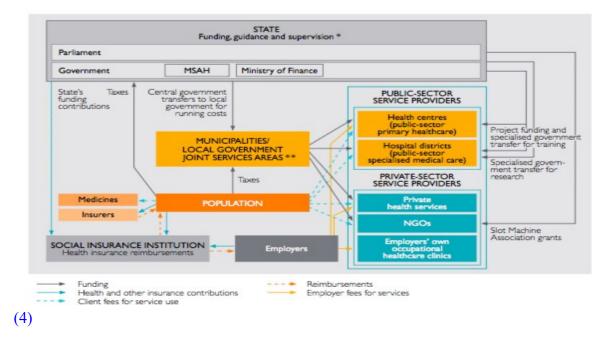
resident person rights	workers rights	
<ul> <li>national pension (universal pension)</li> <li>health-care</li> <li>family</li> </ul>	<ul> <li>national pension (universal pension)</li> <li>health-care</li> <li>family</li> <li>mandatory professional pension (TyEL)</li> <li>sick leave</li> <li>work accident</li> <li>unemployment</li> </ul>	

Kela is funded by the government (68 %), by the contribution of health insurance of workers and employers (25 %) and municipality through taxes (6 %). (4) (13)

Municipalities are in charge to organise the provision of social welfare and health care services.

If needed, the provision can be outscore as long as the municipality manages to offer all services which must be available in each municipality according to the law.

Also Finland is divided in 20 hospital districts for special care services and each municipality must belong to a hospital district. (4)



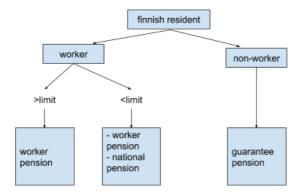
As in France the Ministry of Social Affairs and Health establishes for every care services a base price and a reimbursement rate. Then patients have to pay the extra cost. Contrary to France, when the sum of all these extra cost is over a specific annual limit established by municipality, health care are free of charge. (4) (13)

In Finland just few Finnish people use a supplementary health insurance to be reimbursed. When you are under 18 years old, student health care are free of charge.(4)

When you become a student every prevention services are free and you are covered by the Finnish Student Health Service related to your municipality. (4) (14)

When you become a worker, as in France, you get taxed on your income to benefit from social security.

When you go into retirement, you get pensions based on your status. (13)



In case of sick leave, as in France, you can receive daily allowance which start 9 days after the first absence day for illness. (13)

Abroad rules are the same as in France: in European countries you have to ask for the European health insurance card to be insured if you need some health care. (4)

#### **BIBLIOGRAPHY**

- 1. Wikipédia l'encyclopédie libre. *France*. https://fr.wikipedia.org/wiki/France
- 2. Wikipédia l'encyclopédie libre. *Finland*. https://en.wikipedia.org/wiki/Finland
- 3. Gouvernement.fr. *Lutte contre les déserts médicaux : ce qu'il faut savoir*. Updated on 09/18.
  - https://www.gouvernement.fr/lutte-contre-les-deserts-medicaux-ce-qu-il-faut-savoir
- 4. Ministry of Social Affairs and Health, Finland. Health care in Finland. 2013
- 5. INVS Santé Publique France. *Etat de sante global population*. 2017 <a href="http://invs.santepubliquefrance.fr/publications/etat\_sante\_2017/ESP2017\_Etat\_de\_sante\_global\_population.pdf">http://invs.santepubliquefrance.fr/publications/etat\_sante\_2017/ESP2017\_Etat\_de\_sante\_global\_population.pdf</a>
- 6. Santé publique France. *Etat de santé de la population en France : rapport 2017*. <a href="https://www.santepubliquefrance.fr/Actualites/Etat-de-sante-de-la-population-en-France-rapport-2017">https://www.santepubliquefrance.fr/Actualites/Etat-de-sante-de-la-population-en-France-rapport-2017</a>
- 7. World Health Organization. *Finland-Data and Statistics*. <a href="http://www.euro.who.int/en/countries/finland/data-and-statistics">http://www.euro.who.int/en/countries/finland/data-and-statistics</a>
- 8. Nicorette. *Les chiffres du tabagisme en France*. <a href="https://www.nicorette.fr/comprendre-le-tabagisme/le-tabac-en-chiffres">https://www.nicorette.fr/comprendre-le-tabagisme/le-tabac-en-chiffres</a>
- 9. Santé publique France. Etude ESTEBAN 2014-2016 Chapitre corpulence : stabilisation du surpoids et de l'obésité chez l'enfant et l'adulte. 06/17. <a href="https://www.santepubliquefrance.fr/Actualites/Etude-ESTEBAN-2014-2016-Chapitre-corpulence-stabilisation-du-surpoids-et-de-l-obesite-chez-l-enfant-et-l-adulte">https://www.santepubliquefrance.fr/Actualites/Etude-ESTEBAN-2014-2016-Chapitre-corpulence-stabilisation-du-surpoids-et-de-l-obesite-chez-l-enfant-et-l-adulte</a>
- 10. Santé le figaro. *Alcool les chiffres*. http://sante.lefigaro.fr/mieux-etre/tabac-alcool-drogues/alcool/chiffres
- 11. Sécurité sociale. *Pour mieux comprendre la sécu*. 2015

  <a href="http://communication-securite-sociale.fr/les-jeunes-et-la-secu/mieux-comprendre-la-secu/">http://communication-securite-sociale.fr/les-jeunes-et-la-secu/mieux-comprendre-la-secu/</a>
- 12. INVS Santé publique France. *Principales causes de décès et de morbidité*. 2017. <a href="http://invs.santepubliquefrance.fr/publications/etat\_sante\_2017/ESP2017\_Principales\_causes de deces morbidite.pdf">http://invs.santepubliquefrance.fr/publications/etat\_sante\_2017/ESP2017\_Principales\_causes de deces morbidite.pdf</a>
- 13. CLEISS. *La sécurité sociale des salariés en Finlande*. https://www.cleiss.fr/docs/regimes/regime\_finlande\_s.html#montantijmaladie
- 14. International student insurance. *Health insurance in Finland*. <a href="https://www.internationalstudentinsurance.com/finland-student-insurance/health-insurance-in-finland.php">https://www.internationalstudentinsurance.com/finland-student-insurance/health-insurance-in-finland.php</a>
- 15. Mutuelle Conseil. *Comprendre le remboursement sécurité sociale et mutuelle santé*. <a href="https://www.mutuelle-conseil.com/choisir-complementaire-sante/fiches-pratiques/comprendre-les-remboursements">https://www.mutuelle-conseil.com/choisir-complementaire-sante/fiches-pratiques/comprendre-les-remboursements</a>
- 16. Eurostat. Causes of death standardised death rate 2014.

  <a href="https://ec.europa.eu/eurostat/statistics-explained/index.php?">https://ec.europa.eu/eurostat/statistics-explained/index.php?</a>

  <a href="mailto:title=File:Causes\_of\_death\_—">title=File:Causes\_of\_death\_—</a>

  standardised death rate, 2014 (per 100 000 inhabitants) YB17-fr.png