



Title	Contours of the Basic Health Care Benefit Package
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Aim

As part of the planned reform of the health insurance system (a new system is expected to be introduced in the Netherlands in 2006), the Minister of Health, Welfare, and Sport has requested the Health Council of the Netherlands to 'formulate an opinion with regard to the workable, scientifically based criteria for identifying which services should be included in a basic package'. The Health Council gives an account of its findings in this advisory report.

Conclusions and results

Two sets of criteria have been designated, distinguishing a 'solidarity package' from compulsory insurance. The individual 'disease burden' combined with 'cost-effectiveness' forms a good basis upon which to define a basic package that, in accordance with the principle of solidarity (rich with poor, young with old, and healthy with sick) will be accessible to all. These criteria have been applied in several situations. For a compulsory package, additional criteria are required (eg, to protect individuals from their own decisions that may prove to have adverse consequences in the longer term, or to protect individuals against unfavorable decisions made by others): the costs of treatment, nursing care (possibly in relation to the insured's income level); the extent to which the disorder to be prevented or treated may afflict other people; the preventive nature of services; and the impact that service utilization has on the efficiency of health care as a whole. The two sets of criteria may result in a single basic package, but a 'solidarity' and a 'compulsory' basic package need not necessarily coincide. Based on the analytical distinction drawn by the Council, it is, in principle, feasible to identify a smaller 'compulsory' package within the 'solidarity' package. Considerations such as actuarial feasibility may have a bearing on the governmental decisions in the matter.

Recommendations

Before a new health insurance system is introduced, government should establish a national framework that

supports rational decision making. This framework will need to accommodate transparent procedures for defining the package since applying the criteria will require a qualified approach.

Methods

A comprehensive review of the literature on priority setting in health care and the legal/social/ethical aspects. Expert committee. Peer review of draft report.

Further research/reviews required

Research is needed in cases where data on individual disease burden or cost effectiveness are missing or incomplete. Furthermore, there is a need for research that contributes to effective decision making on rationing issues.