

Care integration offers opportunities for AIM members to steer necessary change in health delivery

On 30 June, the International Association for Mutual Benefit Societies organised in Antwerp a seminar on integrated care. This discussion was organised to present what AIM members and other organisations are doing in the field, and also introduce participants to the concept of integrated care. Indeed, AIM members do not only reimburse health services. A lot of them have an influence on the shape of health systems via contracting of healthcare providers and via the management of health centres too.

Mirella Minkman, Professor on long term integrated care in The Netherlands as well as Dr Nick Goodwin, CEO of the International Foundation for Integrated Care (IFIC) provided the conceptual framework, the seamless connection between health services and health professionals. AIM members and other organisations then presented national examples. In Poland a new pilot project on care coordination, the Primary Care Plus initiative, was launched. The initiative is at this stage a pilot and aims at improving health by acting on prevention, chronic diseases management as well as rehabilitation for at least 300 000 patients. In Germany, the Techniker Krankenkasse works with the Pinel health Network, a mental health project that provides in 2017 a comprehensive set of services to smoothen care paths for 10 000 people in Germany with acute mental illnesses.



“ **The way society considers health is changing. It means that we, as health insurers must change the way we see health and the way we deliver health services too.** ”

Christian Zahn, AIM President

The last two presentations focused on projects in Uruguay, where mutuals have put together comprehensive care models for the diabetic patients. These models rely on multidisciplinary care teams but also on patient education and training via workshops. In Sweden, local authorities and regions are at the driving seat to get through integrated care reforms to improve home care for elderly patients.

The meeting confirmed that many AIM members are already using the integrated care concept

to address healthcare needs; to focus on more prevention, more patient-centredness, and more coordination across teams and across settings (home, day clinics or hospitals). It is a very important and exciting challenge to AIM members who, as health payers and as health services organisers, have a unique position and opportunity to make the integrated care change a reality. AIM's long-term care working group will continue discussing how AIM members can further implement integrated care.

AIM is the umbrella organisation of health mutuals and health insurance funds in Europe and in the world. Through its 64 members from 31 countries, AIM provides health coverage to 240 million people in the world and 209 million in Europe through compulsory and/or complementary health insurance and managing health and social facilities. AIM strives to defend the access to healthcare for all through solidarity-based and non-for profit health insurance. Its mission is to provide a platform for members to exchange on common issues and to represent their interests and values in the European and international Institutions.

