

Tariff system for outpatient medical services (TARMED)

Audit of the implementation of recommendations

Key facts

The tariff system for outpatient medical services (TARMED) applies to all services of this type provided in Switzerland. The financial volume of services invoiced in 2014 was approximately CHF 10 billion. Already in 2010, the Swiss Federal Audit Office (SFAO) had published an evaluation of TARMED, which included important recommendations. Five years later, this audit has found that the vast majority of the recommendations are still outstanding¹. Measures must be taken as quickly as possible. The matter remains alarming given the conflict situation between several partners. The difficulties in reaching an agreement on the TARMED revision and the risks of deadlock are real.

New subsidiary power for Federal Council

Following the SFAO's work, however, the Federal Assembly approved an important amendment to the Health Insurance Oversight Act at the end of 2011. Since then, the Federal Council may make the necessary adjustments whenever the tariff partners fail to come to an agreement on the revision.

In 2014, the Federal Council used this subsidiary power to revalue primary care medicine. To offset the increase of CHF 200 million, it opted for an 8.5% linear cut on 13 technical services. While the chosen approach is not the most appropriate in terms of fairness and actual costs, the SFAO believes that it was difficult to find another solution given the time, data and resources available. The SFAO welcomes the use of this subsidiary power to the extent that it is a credible means for exerting pressure on the tariff partners.

Federal principles that are too general

Nevertheless, it has been known for years that the TARMED structure needs revising. At the end of 2010, the tariff partners – except santésuisse – came to an agreement in order to initiate a revision process. The new insurer's association Curafutura joined the group of tariff partners in 2014. Planned for the end of 2015, they had hoped to send a proposal to the Federal Council in June 2016 for approval. Although it has been five years since these partners began working on the matter, it was not until May 2015 that the Federal Council adopted principles for the TARMED revision, which are still too general. The SFAO regrets that the Federal Council did not settle important points such as principles to make the tariff structure less complex or even principles to facilitate updating the tariff. The points are closely related to the recommendations made by the SFAO in 2010.

Furthermore, the Federal Council did not indicate a deadline for the tariff partners' submission of their proposed revision to it. This situation makes management by the Federal Department of Home Affairs (FDHA) more complicated, be it to break the deadlock situation or to assess the tariff submitted, or to declare a breakdown in negotiations and draw conclusions from it.

¹ The SFAO's recommendation calling for the Office of Price Supervision to have a greater role is no longer current. This office can now intervene as a result of the introduction of the Federal Council's subsidiary power in the Health Insurance Oversight Act.



Invoices that are hard to understand and sometimes obscure

Similarly, the SFAO did not observe any progress on invoicing either. This problem persists and makes the tariff non-transparent and prevents it from being updated whenever tariff partners fail to reach an agreement on tariff items for new services or technical developments.

Despite the recent associated findings on the lack of readability of invoices, the SFAO notes the inertia of the various players with regard to possible simplification. According to a survey from consumer and patient protection associations, most patients do not understand an invoice fully or at all. Moreover, it sometimes happens that the patient is not even given a copy. This issue is in part linked to a simplification of the tariff structure, but not exclusively. Service providers must provide invoices that are detailed and understandable. This is a legal requirement. The Federal Council may define additional details that should be included on invoices.

Lack of analyses of the need to improve TARMED

The Federal Council has taken measures to improve the statistical databases on outpatient medical care. The Federal Statistical Office (FSO) and the Federal Office of Public Health (FOPH) are working together to collect data. This is a long-term programme for which not all of the uncertainties have been resolved: data quality, level of precision, specific data processing methods. In terms of studies, the FOPH has given priority to the monitoring of laboratory analyses. In the outpatient sector, it has planned a follow-up reevaluation of primary care medicine. It has not performed any other in-depth analyses to identify the need to improve TARMED. At the end of 2015, it at least committed the resources for studies in order to prepare itself for the approval stage of the TARMED revision.

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