

VBHCSUISSE – Swiss Society for Value Based Healthcare

Swiss Patient Compass Think Tank

SWISS DECLARATION ON PATIENT PRIORITY

Bern, Switzerland

February 25, 2025

Executive Summary

The Swiss Declaration on Patient Priority (hereafter referred to as 'The Declaration') is a call for action to unite commitments to transforming Swiss healthcare delivery from a system focused primarily on volume to one centered on value and patients.

The Declaration is a joint effort of the non-profit association Swiss Society for Value-Based Healthcare (hereafter referred to as VBHCSUISSE) and the think tank Swiss Patient Compass. It aims to foster its wide acceptance among Swiss healthcare stakeholders and generate public discussion on the best ways to adjust the current healthcare system.

Four specific focus areas are proposed for a successful transition toward the value-based model of care: 1. Patient-Centered Care and Outcome Measurements, 2. Economic Sustainability and Incentives for Value Rather than Volume, 3. Data, Technology, and Digital Tools, and 4. Leadership, Regulation, Governance.

We invite healthcare and policy experts and leaders to advocate for and enact policies prioritizing patient outcomes and embracing innovative initiatives, collaboration, and accountability to achieve this goal by signing the Declaration.

About VBHCSUISSE

The non-profit association VBHCSUISSE was founded in 2021 with the overall mission to promote Value-Based Healthcare (VBHC) and enable continuous development and value-based optimization of the Swiss healthcare system.

The association promotes initiatives, instruments, and measures to increase the quality of treatment. Of particular importance is the systematic and standardized measurement of results at the individual patient level using patient-centric outcomes measures, some of which should be patient-reported ones (PROM). In addition, the association promotes the corresponding optimized use of available resources for sustainable patient centricity.

About Swiss Patient Compass

The think tank Swiss Patient Compass was formed in 2023 by Swiss healthcare leaders who came together voluntarily to create a platform to discuss opportunities to improve patient-centric care in the Swiss healthcare system. The think tank's vision is deeply rooted in the research and findings of the book *The Patient Priority* by S. Larsson, J. Clawson, and J. Kellar. The think tank aims to identify obstacles and initiate healthcare projects to broaden the interest of healthcare experts and regulators in collaborating on applying the patient-centric model of care nationally.

The members (in alphabetical order): Dr. Claudine Blaser, PhD, Managing Director Medgate Switzerland; Thomas Boyer, CEO of Groupe Mutuel; Rodolphe Eurin, CEO of La Tour; Thomas Huggler, CEO of Balgrist University Hospital; Stefan Larsson, MD, PhD a healthcare advisor, expert, and author in the domain of value-based healthcare; Urs Martin, Cantonal Minister of Health & Finance, Canton of Thurgau; Prof. Dr. Christoph A. Meier, Head of Internal Medicine, University of Geneva, Geneva, Switzerland; Daniel Schmutz, independent advisor and former CEO of Helsana; Irina Volf Reinoso, independent healthcare advisor; Sarah Wyss, National Councilor.

Introduction

The Swiss health system performs exceptionally well in various indicators (i.e., life expectancy, coverage, accessibility, waiting times, public satisfaction).¹ This reflects our commitment to providing high-quality healthcare to all. However, pressing issues, such as the rising healthcare costs reflected by increased basic health insurance premiums, demand immediate attention. Additionally, the Swiss Healthcare system faces a growing prevalence of non-communicable diseases and multimorbidity, patients' increasing needs, and expected shortages of qualified professionals.² These call for urgent adjustments to the current model of care and its shift towards a more integrated and patient-centered one.

Commitment

We recognize the need to continuously improve the Swiss healthcare system and maintain its high-value care. Thus, we declare our commitment to expediting the patient-centered approach and encouraging agreement among stakeholders and sectors. We are committed to promoting patient-centered initiatives and fostering the dialogue among parties to overcome obstacles that potentially slow this process.

Specific focus areas

The Declaration focuses on four domains aligned with our commitment: 1. Patient-centered Care and Outcome Measurements, 2. Economic Sustainability and Incentives for Value Rather than Volume, 3. Data, Technology, and Digital Tools, and 4. Leadership, Regulation, Governance.

1. Patient-centered Care and Outcome Measurements

Placing patients at the center of healthcare decision-making ensures their proactive participation and guides our care delivery based on their preferences, needs, and values. Therefore:

- We support initiatives encouraging patients' proactive participation in their treatment plans, full disclosure of clinical and diagnostic findings, the patient's health, treatment options, clinical and diagnostic findings, provider options, and hospital benchmarks.
- We promote considering all aspects of patients' health through shared decision-making along their care pathway, setting standards for treatment strategies, and helping patients understand the benefits and risks of the chosen treatment options.
- We endorse establishing seamless care pathways across primary care, hospital treatments, and rehabilitation centers and strengthen prevention to reduce hospital readmissions and unnecessary treatments.
- We advocate the defragmentation of the current healthcare system towards interdisciplinary and interprofessional care integration.
- We advocate using internationally accepted standardized quality measures, including patient-reported outcome measures (PROMs), in clinical practice, such as those gathered by the non-profit organization ICHOM—the International Consortium for Health Outcomes Measurements—to generate evidence of treatment outcomes and report them transparently to support research and enable informed shared decision-making between patients and healthcare providers.

¹Fillettaz SS, Berchtold P, Koch U, Peytremann-Bridevaux I. Integrated Care in Switzerland: Strengths and Weaknesses of a Federal System. *Int J Integr Care*. 2021 Oct 29;21(4):10. doi: 10.5334/ijic.5668. PMID: 34754285; PMCID: PMC8555474. Available at [Integrated Care in Switzerland: Strengths and Weaknesses of a Federal System - PMC \(nih.gov\)](https://pubmed.ncbi.nlm.nih.gov/34754285/).

²De Pietro, C., Camenzind, P. Sturny, I., Crivelli, L., Edwards-Garavoglia, S., Spranger A., Wittenbecher, F., Quentin, W., 2015. Health Systems in Transition, Switzerland Health system review, Vol. 17 No. 4. European Observatory on Health Systems and Policies. Available at [Health Systems in Transition: Switzerland Vol 17 No 4 2015 \(who.int\)](https://www.euro.who.int/en/health-topics/health-systems-transition/publications/health-systems-in-transition-switzerland-vol-17-no-4-2015).

2. Economic Sustainability and Incentives for Value Rather than Volume

Optimizing limited resources while facing rising healthcare costs, the success of current care models is challenged. Thus, focusing on delivering better patient outcomes over opting for more interventions leads to value-based competition among care providers. Towards this aim:

- We support adapting reimbursement structures that lead to optimal patient outcomes.
- We encourage eliminating ill-guided incentives and opting for less invasive treatment options, such as outpatient treatments, instead of costly inpatient therapies.
- We support using payment models that prioritize holistic and integrated treatment plans. These models improve healthcare outcomes, reduce unnecessary interventions, and create innovative care pathways. These models, such as bundled payment or capitation, incentivize care providers to choose less expensive treatment options. For example, capitation-based systems encourage physicians to focus on preventing illnesses and avoiding excessive treatment costs.

3. Data, Technology, and Digital Tools

Connecting payers, care providers, and patient organizations to foster the exchange of information through innovative digital tools and interventions is one of the crucial elements of integrated healthcare. To achieve that, we focus on the following:

- We endorse closing the healthcare digitalization and data protection gap and support the necessary public and private investments to expedite this process. We emphasize the need for stakeholders' coordination to ensure the compatibility and interoperability of technologies and tools.
- We advocate for a standardized electronic patient records system to become a compulsory platform for all patients and providers, possibly integrating PROMs and other relevant outcome measures. Patients should own their clinical data and control their use entirely in connection with their medical treatment and research.
- We encourage developing patient-centered applications in the healthcare sector, where clinical data handling remains secure and compliant with data protection regulations.

4. Leadership, Regulation, Governance

The public sector's engagement at the cantonal and federal levels is crucial for the transition towards the value-based model of care, its success, and sustainability. Equally important are constant patient education and public-private partnerships in healthcare (PPP). These PPPs are subject to creating and implementing specific regulations depending on the collaboration area. In addition:

- We encourage developing committed leadership across stakeholders, including adapting medical education to reflect a patient-centric vision of healthcare.
- We encourage efforts that support improved patient literacy and education to ameliorate patients' understanding of their condition and potential for enhanced self-care.
- We call for openness in discussions and the willingness of all stakeholders to challenge the current healthcare system and create new alliances.

Join us in advocating for and enacting policies prioritizing patient outcomes and embracing innovative initiatives, collaboration, and accountability to achieve this goal.

Signatories:

- **Swiss Patient Compass, think tank (the members in alphabetic order of their family name)**

MD, PhD Dr. Mr. Stefan Larsson, Founding Member Swiss Patient Compass

Mr. Daniel Schmutz, Founding Member Swiss Patient Compass

Prof. Dr. Christoph A. Meier, Board Member, VBHCSUISSE, Founding Member of the Swiss Patient Compass

Dr. PhD. Claudine Blaser, Member Swiss Patient Compass

Mr. Thomas Boyer, Member Swiss Patient Compass

Mr. Rodolphe Eurin, Member Swiss Patient Compass

Mr. Thomas Huggler, Member Swiss Patient Compass

Mr. Urs Martin, Member Swiss Patient Compass

Ms. Irina Volf Reinoso, Board Member, VBHCSUISSE, Member Swiss Patient Compass

Ms. Sarah Wyss, Member Swiss Patient Compass

- **VBHCSUISSE, a non-profit organization (the Board Members in alphabetic order of their family name)**

Dr. Florian Rueter, President VBHCSUISSE

Ms. Elvira Haeusler, Vice-President VBHCSUISSE

Dr. Eva Blozik, Board Member, VBHCSUISSE

Dr. Sophie Ernst, Board Member, VBHCSUISSE

Mr. Joel Lehmann, Board Member, VBHCSUISSE

Dr. Florian Liberatore, Board Member, VBHCSUISSE

Mr. Florian Rossiaud-Fischer, Board Member, VBHCSUISSE

Dr. Kristina Schmitz-Grosz, Board Member, VBHCSUISSE

Ms. Jessica Thürmer, Board Member, VBHCSUISSE

Mr. Daniel Volken, Board Member, VBHCSUISSE