Facts and figures

- Over 125 years’ experience as Germany’s largest health insurer
- Over 1,200 offices in 14 regional AOKs all over Germany mean local service for all insured persons
- AOK health insurance covering 24 million people
- More than 53,000 highly qualified employees
- Market share of 34 per cent
- Annual expenditure of more than 61.2 billion euros on health care for AOK members
- National and international advisory work by the in-house consulting firm AOK-Consult
- Scientific health-sector analysis by the AOK Research Institute (WIdO)

The AOK
in the German health care system

Health.
Security.
Solidarity.
The AOK system
A strong community

For over 125 years the AOK has guaranteed high quality medical care for its insured members in the event of ill health. It is the largest of Germany’s roughly 180 statutory health insurance funds. Around 24 million people are insured under the regional 14 AOKs – close to a third of the German population. More than 53,000 qualified AOK employees based in over 1,200 offices ensure that members receive all the services they require: quickly, competently and without bureaucracy.

Professional health care management. But that is not all the AOK does – it also works hard to provide its members with a better standard of health care. For instance, it has developed its own structured treatment programmes for people with chronic diseases. These programmes benefit from scientific monitoring and evaluation, and an integrated quality management system to ensure their constant improvement.

Integrated, not disconnected. The AOK sets standards in other fields, too. Integrated care is a good example. Different stages in treatment – doctor’s surgeries, hospital, nursing homes or rehabilitation – are coordinated for maximum efficiency. Patients are spared duplicate procedures and therapy is more effective. For AOK members this constitutes the best possible health care at an affordable price.

More than just a health insurance fund. Along with the service provided to members by our health and social insurance experts, the AOK has subsidiary companies addressing the needs of the many other stakeholders in the health care system. The AOK’s in-house consultancy firm, AOK-Consult, offers consulting in the areas of performance management, marketing, distribution, controlling and service, in Germany and abroad.

Scientific research institute. Since 1976, the AOK system has benefited from scientific analysis and extensive and reliable data, thanks to its own research institute, WIdO. Special research fields of expert knowledge include the pharmaceuticals and hospitals sector. WIdO’s findings are acknowledged as a credible source of information for the entire German health care system. And the AOK’s systems and software house, AOK-Systems, develops SAP-based, individually-customised IT solutions for the AOK and other statutory health insurance funds.

All AOKs under one banner. The Federal Association of the AOK (AOK-Bundesverband) is the political umbrella organisation of the AOK group. The independent regional AOKs are united under this banner. All strategic decisions regarding the course of the AOK system are taken by these AOKs as partners in the Federal Association.
AOK service
Advice, assistance, choice

The AOK offices are the first point of contact for insured members with questions of any kind about their health insurance. Over the phone or face to face – the AOK experts are there also to advise members on a vast array of health issues. A broad range of preventive programmes rounds off the AOK’s portfolio of services.

No charge to see the doctor. The electronic patient’s card is every AOK member’s key to all the services their health insurance fund provides. The “benefits in kind” principle guarantees that people with health insurance never have to pay for doctors’ services themselves. Except for a practice fee of ten euros per quarter and a small co-payment for prescriptions, doctors appointments are free of charge – regardless of how often the patient needs a consultation. Patients are free to choose their own doctor. Every person covered by statutory health insurance in Germany pays a contribution rate of 14.9 per cent of earnings, set by the State.

Quick settlement of charges. The AOK settles medical charges on a quarterly basis, paying its contract partners directly. Registered doctors providing outpatient services receive their money via their respective Doctors' Association. One of their main functions is the distribution of the moneys received from the health insurance funds.

Facts and figures
Spending on health

Total AOK expenditure: 61.2 billion euros
The four largest components of spending:

<table>
<thead>
<tr>
<th>Component</th>
<th>Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospitals</td>
<td>€ 21.012 billion</td>
</tr>
<tr>
<td>Doctors</td>
<td>€ 9.140 billion</td>
</tr>
<tr>
<td>Dentists, dental prosthetics</td>
<td>€ 3.469 billion</td>
</tr>
<tr>
<td>Drugs, dressings, appliances from pharmacies</td>
<td>€ 11.368 billion</td>
</tr>
</tbody>
</table>

Average AOK expenditure per member: 3,485 euros
The four largest components of spending:

<table>
<thead>
<tr>
<th>Component</th>
<th>Expenditure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospitals</td>
<td>€ 1,197</td>
</tr>
<tr>
<td>Doctors</td>
<td>€ 521</td>
</tr>
<tr>
<td>Dentists, dental prosthetics</td>
<td>€ 198</td>
</tr>
<tr>
<td>Drugs, dressings, appliances from pharmacies</td>
<td>€ 647</td>
</tr>
</tbody>
</table>

Source: AOK

The AOK has 23,662,699 insured people all over Germany. Its market share is now 34.18 per cent. (Figures quoted as of 2008)
The AOK’s history is indivisibly linked with the inception of social health insurance in Germany. As early as 1883, the first local health funds emerged as providers of health insurance for blue collar workers. Eleven years later, the first association of health funds was founded.

The Third Reich. In the mid-1930s, health provision, like all other areas of politics, was brought in line with Nazi ideology. Self-administration of health insurance funds was replaced by state control. In 1948, the local AOKs regrouped to form the “Vereinigung der Ortskrankenkassenverbände” (Union of Local Health Insurance Fund Associations).

Dominant policy influence. In the post-war period, the AOK as Germany’s largest health insurance fund took on a key role in the shaping of health policy. Since 1987 the umbrella organisation of the AOK community has been known as the AOK-Bundesverband (Federal Association of the AOK). In the 1990s, the AOK embarked on the establishment of new regional AOKs in the five eastern states of the reunified Germany. At the end of 2008, the Federal Association of the AOK moved its headquarters to Berlin.

AOK policy positions

Quality and competition

The AOK advocates a sustainable health policy informed by these key principles:

- More competition is necessary within the health care system. Competition between service providers – in the inpatient as well as the outpatient sector – raises the efficiency and quality of medical services.

- Health insurance funds need to play a strong role in managing an efficient and quality-focused system of health care provision.

- Evidence-based medicine ensures good care. Therefore, the AOK will continue to invest in innovative care packages – tailored, for example, to the needs of the chronically ill.

- The principle of solidarity is the very foundation of statutory health insurance. Every member is entitled to the same benefits, regardless of his or her income, marital status or – most importantly – individual risk of ill health.

- Self-administered health insurance funds with equal representation has been a successful model for over 125 years. Employee and employer representatives should continue to have a say on how the AOK develops.
The Federal Association of the AOK
Championing the AOK system

The Federal Association of the AOK is the umbrella organisation of the AOK group. It makes its presence felt wherever health policy is formulated. Since the end of 2008 it has been headquartered in Berlin, the capital of Germany. As champion of the AOK community’s interests, the Federal Association of the AOK is actively committed to high quality and economically efficient health care for 24 million AOK members.

A new role. In the wake of the German health reforms in 2007, the Federal Association of the AOK handed over some of its functions to the newly established GKV-Spitzenverband (National Association of Statutory Health Insurance Funds). The Federal Association of the AOK is now making its mark as an effective and innovative service provider for the AOK system. For instance, on the political level it lobbies for greater competition and quality in the health care sector.

Representing the interests of the AOK group. Another core function of the Federal Association of the AOK is to represent the interests of the AOK group vis-à-vis the National Association of Statutory Health Insurance Funds. It also acts as a point of contact for contractors of the health insurance fund. On behalf of the AOK group, it helps with the drafting of exclusive contracts with general practitioners (GP), pharmaceutical companies and other service providers in the health sector. As a result, AOK members receive special benefits, arranged outside the statutory standard care regime. This includes integrated care contracts or GP-centred care with special services for AOK insureds. Another of the Federal Association’s range of tasks is to develop special services such as the “health navigator” which AOK members can use to find the right hospital for an operation or a suitable nursing home. And, to tailor insurance protection to the needs of all AOK members, it develops optional tariffs for the AOK group.
Competition on quality of care. Over and above this, the Federal Association takes charge of financial management for the internal settlement of the AOK group, and its brand management as a health insurance fund. Mainstream marketing strategies are used to nurture the AOK brand identity: coordinated nationwide campaigns – from TV ads to billboard posters – present the AOK as a strong, dependable and caring community in touch with its members.

AOK management. The Extended Board consists of the Chairs of the Boards of all regional AOKs. This body is responsible for developing the business policy and strategy of the Federal Association and the AOK system as a whole. Its role underpins the overall effectiveness of the AOK group. The Management Board is responsible for the daily operational business of the Federal Association of the AOK.

New National Association. As part of its 2007 reform to strengthen competition in the health care system, the German government stipulated the founding of a common association of all statutory health insurance funds. The main task of the GKV-Spitzenverband (the National Association of Statutory Health Insurance Funds) is to shape the regulatory framework for market competition between health insurance funds. For example, it negotiates all the framework contracts and payment plans for inpatient, outpatient and dental care. The AOK has 14 representatives on the Administrative Board of the National Association.

AOK self-administration
Democracy in action

The principle is simple: the State entrusts statutory health insurance funds with certain tasks that serve the public interest, in this case health care provision for its citizens. The health insurance funds come under the legal supervision of regulatory bodies, but within their remit they are free to administer their own affairs to the benefit of their members. The rationale is that a self-administered organization can respond to changing needs and challenges more rapidly and flexibly than the State.

Stakeholders have a voice. Every six years all members of the statutory health insurance funds are called upon to determine the composition of the health insurance funds' new Administrative Boards in what is known as “social elections”. Half the Boards' representatives are elected by the employers, the other half by the members. This is because both sides share in the financing of the health insurance funds in roughly equal measure. The Administrative Board is accountable for the fund's budget and its general political course. It also elects and oversees the Management Board.

Self-administration of the Federal Association.
One Administrative Board member representing insureds and another representing employers from each of the 14 individual AOKs convene to form the Supervisory Board of the Federal Association.
Addresses of the 14 AOKs

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- www.wido.de
- www.aok-consult.de
- www.aok-systems.de
- www.social-insurance.de
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