« Les Facteurs Dynamiques du Secteur Médical au Liban »

The Dynamics of the Healthcare System in Lebanon

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Healthcare industry in Lebanon

- Lebanon is one of the most dynamic healthcare markets in the Arab region.
  - 76% of the Lebanese population is insured
  - Patient bias towards the selection of the doctor rather than the hospital
  - This behavior drove large hospitals to attract specialists and doctors to their counters rather than adopt the Primary Physician philosophy
- Hub for medical treatment of the GCC Countries because of the proximity of distance, language and culture.
- GCC Countries which subsidize treatment abroad for their nationals stopped referring their nationals to Lebanon due to the unstable political climate.
- Lebanese living abroad
- New emerging target markets: Iraq, Syria
- Advanced academic and educational background within its population and a considerable portion of it is oriented towards healthcare: educated patient population.
- There are 3.54 doctors per 1000 people, over double the regional average.
- The Lebanese system is dominated by the private sector which is responsible for 90% of all total services according to the WHO.

Drawbacks of Healthcare industry in Lebanon

- Lack of regulation of the private sector, uneven geographical distribution of hospitals and diagnostic centers
- Lebanon also has presently an oversupply of doctors
- Shortage in nurses and basic technical staff

Lebanese Healthcare providers

- Public hospitals
- Private hospitals: Tertiary or university hospitals, Affiliated hospital, Private hospitals

Types of Guarantors

- Governmental payers: MOH - , NSSF – 50% - 70%, COOP- 20%, Municipalities 15%, Army, Sécurité Générale…
- Private insurance companies (Medgulf, …)
- Mutual Funds (Caisse Mutuelle)
- Third party payers (Globemed, Nextcare, Best Assistance, La Medicale, TCL…)
- Private payers (Expats, Iraq, Syria)
- NGO

Accreditation

- Launched in 2002 in an endeavor to regulate the medical sector and enforce a system of quality control in the hospitals
- Subsidized: Australian, French, Current
- Outcome

- Benefit on infrastructure – Self-enhancement of Private Sector
- Benefit on proper documentation and practice
- Patient safety & infection control
- No continuity
- Corruption and bribes

Benefits in Infrastructures

- Re-engineering of the hospitals
  - Piping (PVC) to avoid cross contamination
  - OR sterility guidelines: Laminar Flow
  - Fire Safety issues
  - Negative Positive Pressure for isolation & OR
  - Humidity and temperature control for infection control and supplies
  - Anti-bacterial materials and hospital-bases construction
  - Ergonomically built setup for physicians and patients
  - Friendly for physically challenged people
  - Heppa filtering in all patient accessed areas
  - Waste management department to treat infected and toxic waste
  - Reverse Osmosis and water treatment plant for all hospital water consumption
  - Nuclear and radiation monitoring and assessment

Patient Safety Benefits

- Proper documentation through expert committees
- Standardized practice through policies and procedures
- Contingency plans
- Staff Orientation Programs and Training
- KPI (Key Performance Indicators for quality indication and competencies
- Repetitive cross cultures and calibration
- Continuous Medical Education Credits
- Preventive Maintenance management

Major costs in Hospitals

- Factors that affected cost on hospitals
  - The accreditation concept increases the expenses of hospitals by an average of 30%
  - Rapid Advancement in technology
  - Lack of medico-urban planning and coordination
  - Burden of Guarantors' payments
  - Political instability