



Profile

Reinhard Busse: leader in Germany's health-system development



As head of the Department for Health Care Management at the Technical University of Berlin, Germany, Reinhard Busse enjoys a varied, interdisciplinary academic life. "I run a department of around 20 researchers, crossing disciplines including medicine, public health, business engineering, political science, and economics, a vast array of talent that is needed in the projects we run in the field of health systems performance", he says. Busse's analysis of Germany's health-system characteristics and performance is detailed in the first paper of the *Lancet* Germany country Series.

Drawn towards health after spending a year as a volunteer ambulance driver—to avoid military service—Busse knew early on as a medical student at Philipps University in Marburg that he wanted to work in health systems research, "to the astonishment of my fellow students", he recalls. His medical education introduced him to contrasting health systems: he was in London when the purchaser-provider split began its implementation within the UK National Health Service in the early 1990s. In Boston, he was amazed by the amount of administration involved in reimbursement for hospital procedures. "I remember working in ICU, where two administrators recorded everything that took place during a procedure, and produced an invoice that resembled a telephone directory. It opened my eyes to the bureaucracy and expense of the US health system", he says.

Back in Germany, Busse enjoyed postgraduate study in public health, followed by clinical work in rheumatology and internal medicine, both at Hannover Medical School. He was offered a 5-year contract to continue in clinical medicine: "It was a great offer, but I was more interested in the performance of Germany's health system, so I declined, to the surprise of my fellow clinicians", he says. Instead, Busse joined Friedrich Wilhelm Schwartz at Hannover's Department of Epidemiology, Social Medicine, and Health Systems Research, a fertile training ground as Schwartz was at that time a leading adviser to the German Ministry of Health. Busse became Schwartz's closest research assistant, and quickly learnt how to run a research team. He was greatly influenced by a 1995 WHO meeting on health systems in Seoul, South Korea, examining health-systems coverage in low-income and middle-income countries, where the peerless health economist Brian Abel-Smith made a great impression.

The European Observatory on Health Systems and Policies was established in 1998, and Busse was invited to lead the Observatory's hub in Madrid. "Yet again, my colleagues in Germany thought I was mad to give up a good job, and when I arrived with an empty desk and a blank computer, I wondered whether they might be right", he recalls. For 3 years Busse coordinated research and

policy work to assess whether social health insurance, so well established in Germany, could be a model for other European countries to adopt, especially those from eastern Europe undergoing huge social and political change in the post-communist era.

Busse returned to Germany in 2002, as full Professor at Berlin's Technical University in the department where he works today. Most notable in his time in Berlin has been his continuation of European health research projects from his time in Madrid, extensive work in the field of health technology assessment, and his leadership in the Diagnosis Related Groups (DRGs) research programme. He takes a mixed approach, based on both epidemiology and economics, to address key health-systems questions, such as the effect of clinicians' reimbursement on health outcomes for patients across contrasting health settings. The impact of DRGs has led to Busse taking on considerable health advisory work, both in Germany, and internationally. "Comparative health-systems research is always interesting. Often countries believe they are operating at an acceptable level. Quality comparative health-systems research enables all health systems to learn from those systems that perform better in certain dimensions", he says.

Busse recently contributed to a German National Academy of Sciences' public information leaflet that evoked considerable coverage in the German media. "The leaflet highlighted how Germany's health system is over capacity, and needs to consolidate in order to run more effectively and efficiently", Busse explains. "I recently chaired a session with the Minister of Health to discuss the overcapacity problem, with 800 German hospitals treating breast cancer, for example. Consolidation will be crucial for Germany's ongoing health-system development", he says.

Martin McKee, Professor of European Public Health at the London School of Hygiene & Tropical Medicine, worked closely with Busse at the European Observatory on Health Systems and Policies, and comments: "Reinhard has an encyclopaedic knowledge of different health systems, but he brings much more than that to discussions with policy makers. He has a deep understanding of history, culture, and politics, explaining why the German social insurance system is not just a way of paying for care, but is a complex set of relationships between the citizen, their employers and trade unions, and the government, based on trust and mutual understanding. Reinhard has done more than anyone else to make health-systems research visible in German speaking countries, bringing rigour, innovation, and deep insights to practical problems."

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