

Variations in healthcare use across departments in France going down but still persistent

According to a new OECD report, variation in rates of health care activity across geographic areas in France is a cause for concern. Wide variation suggests that whether or not you will receive a particular health service depends greatly on the region where you live in France.

Variations such as those documented in Table 1 suggest that either unnecessary care is being delivered in areas of high activity, or that there is unmet need in regions of low activity. In both cases, this raises questions about the efficiency and equity of health care services delivered in France.

Standardised rates for cardiac procedures and knee interventions are at least three times higher in certain areas of France. There are smaller variations for hospital medical admissions, caesarean sections and hysterectomies.

Table 1. Variations in hospitalisation rate for selected health care procedures, France, 2005 and 2011

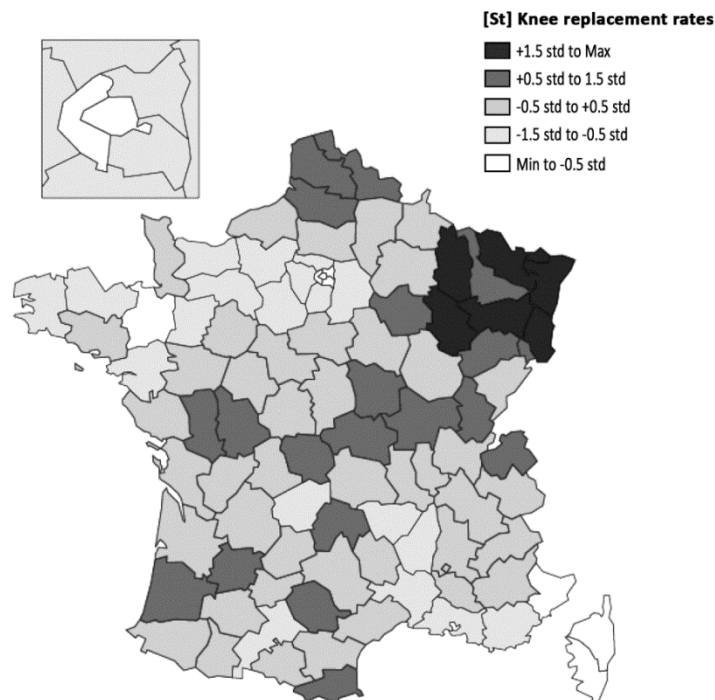
	Crude rates	Standardised rates	Q10	Q90	Q90/Q10	Max/min	Coefficient of variation	Systematic component of variation
2011								
Hospital medical admissions	8802	8 975	7 736	10 161	1.3	1.8	0.11	1.2
CABG	29	30	20	41	2.1	5.2	0.28	7.4
PTCA	271	267	192	338	1.8	2.9	0.23	5.2
Hip fracture	126	141	125	156	1.3	1.5	0.09	0.9
Knee replacement	133	136	106	166	1.6	2.8	0.18	3.6
Knee arthroscopy	213	225	157	272	1.7	3.9	0.23	6.1
Caesarean section	196	184	161	212	1.3	1.9	0.12	1.3
Hysterectomy	170	176	141	219	1.6	2.4	0.18	3.2
2005								
Hospital medical admissions	8098	8 237	6 775	11 931	1.8	2.4	0.13	1.7
CABG	27	28	16	40.4	2.5	6.7	0.35	10.8
PTCA	225	219	158	281	1.8	5.5	0.27	6.2
Hip fracture	126	127	110	142	1.6	3.2	0.1	1.9
Knee replacement	91	93	74	116	1.6	4.5	0.2	4.2
Knee arthroscopy	227	236	181	285	1.6	3.2	0.21	5
Caesarean section	177	167	132	191	1.4	3	0.15	2.1
Hysterectomy	181	198	159	235	1.5	2.5	0.17	3.2

Note: Rates are calculated for 100 000 persons, except for caesarean section (for 1 000 live births).

Source: Or and Verboux (2014). Chapter 7 France: Geographic variations in health care, in *Geographic Variations in Health Care: What do we know and what can be done to improve health system performance?* OECD Health Policy Studies, OECD Publishing.

If you live in the North-East of France, you are almost three times more likely to have a knee replacement, particularly in Vosges, Moselle, Alsace (200 or more per 100 000 population over 15-years old), compared to people living in Corse or Paris (85 or less per 100 000). Variations in knee replacement rates can be partly explained by differences in population health status, in particular in obesity rates and osteoarthritis. The prevalence of osteoarthritis explains some of the differences in rates across departments: one study showed that the highest rates were observed in parts of the North-East of France. While the number of knee replacements increased by almost 50% between 2005 and 2011, the variation between departments fell slightly over this period.

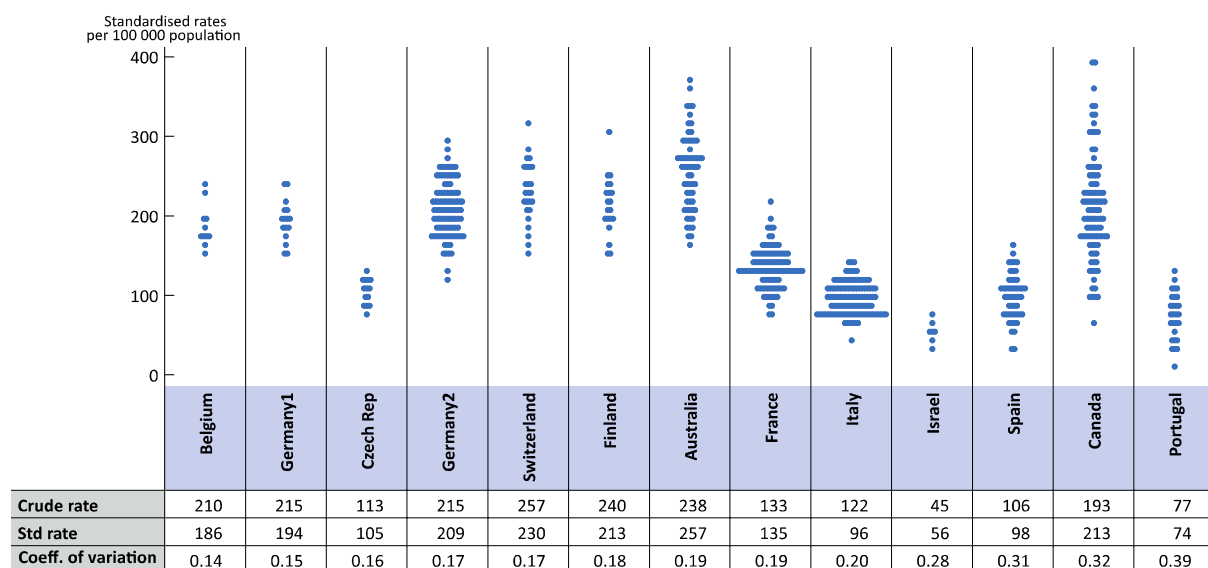
Figure 1. Map of variations in knee replacement across departments, France, 2011, standardised rates per 100 000 population (deviation to the mean)



Source: Or and Verboox (2014). Chapter 7 France: Geographic variations in health care, in *Geographic Variations in Health Care: What do we know and what can be done to improve health system performance?* OECD Health Policy Studies, OECD Publishing.

The rate of knee replacement in France is lower (135 per 100 000) than in Australia, Switzerland, Finland, Canada and Germany (above 200 per 100 000 population over 15-years old). Within countries, knee replacement rates often vary by two-to three-fold, but they vary by more than five-fold in Canada, Portugal and Spain.

Figure 2. Knee replacement rate across and within selected OECD countries, 2011 or latest year



Note: Each dot represents a territorial unit. Countries are ordered from the lowest to highest coefficient of variation within countries. Data for Portugal and Spain only include public hospitals. Germany 1 and 2 refers respectively to Länder and Spatial Planning Regions.

Source: Srivastava et al. (2014). Chapter 1 Geographic variations in health care use in 13 countries: A synthesis of findings, in *Geographic Variations in Health Care: What do we know and what can be done to improve health system performance?* OECD Health Policy Studies, OECD Publishing.

Besides patient need or preferences, other factors can play a significant role in geographic variations in knee replacement rates within countries. For example, differences in medical practice and in the socio-economic status of patients influence knee replacement rates.

Stakeholders in France are increasingly conscious of these geographic variations in health service use, and France has taken some measures to tackle unjustified variations and inappropriate care. For example, France recently reduced the gap between the prices paid by health insurance for C-sections and normal delivery to reduce the inappropriate use of C-sections.

Further actions could help promote more appropriate care. For instance, systematic public reporting of high-cost and high-volume procedures would help to further raise awareness among providers and the public. There is scope to move towards policies that target providers through promoting clinical guidelines, giving feedback to providers, and setting targets for specific health care activities (as is done, for instance, in Canada, Belgium and Italy). Patients might be better engaged in the decision-making process about treatment options through better decision aids tools and the measurement of outcomes after surgical procedures. The latter is done for example for knee replacement in Sweden and in the United Kingdom.

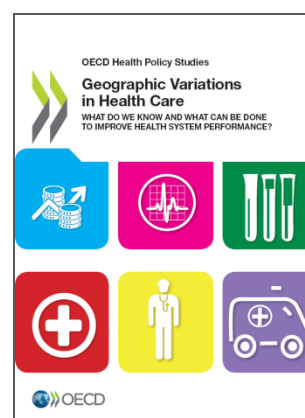
The OECD report will be released at a joint conference organised by the OECD and the Bertelsmann Foundation on 16th September in Berlin to discuss the report's findings among German stakeholders (www.faktencheck-gesundheit.de).

The report **Geographic Variations in Health Care: What do we know and what can be done to improve health system performance?** is available at <http://dx.doi.org/10.1787/9789264216594-en>.

More information on France is available in the report in **Chapter 7, France: Geographic variations in health care.**

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The **OECD press release, country notes and further information** are available at <http://www.oecd.org/health/health-systems/medical-practice-variations.htm>.