



**Gemeinsamer  
Bundesausschuss**

# **The Federal Joint Committee**



Around 71 million people are insured under statutory health insurance (SHI) in Germany. They are entitled to high-quality healthcare. The Federal Joint Committee (Gemeinsamer Bundesausschuss, G-BA) is the highest decision-making body of the joint self-government of physicians, dentists, psychotherapists, hospitals, and health insurance funds in Germany. It specifies the concrete services to which patients and persons insured under SHI are guaranteed access to by law.

### Responsibilities

By mandate of law, the G-BA issues directives that define sufficient, expedient, and economical healthcare, as described in the German Social Code, Book Five (SGB V). It ensures that patients and persons insured under SHI are examined and treated according to the current standard of care.

The G-BA issues directives covering:

- Prescription of medicines
- National needs planning for specialist practices
- Assessment of examination and treatment methods in outpatient and inpatient care
- Highly specialized outpatient care for serious, complex diseases
- Psychotherapy
- Services ordered by doctors, for example remedies and assistive technologies
- Disease management programmes for the chronically ill
- Dental care

The G-BA also has important responsibilities in the area of quality assurance of medical care in clinics and doctors' practices.

G-BA directives are binding for persons insured under SHI, healthcare providers, and statutory health insurance funds. The Federal Ministry of Health (BMG) is responsible for the statutory supervision of the G-BA.

## Workflows

The structures, procedures, and deadlines for G-BA decision-making are set forth in the bylaws and the Rules of Procedure. These ensure the transparency and legal certainty of G-BA decisions based on the best available evidence and the most up-to-date scientific knowledge. Before taking its decisions, the G-BA conducts hearing procedures and consults external experts on a wide range of topics. Pharmaceutical companies, the Robert Koch Institute, medical professional associations, the Radiation Protection Commission, and scientific associations are some of the organizations entitled to a hearing procedure, depending on the directive or topic.

In addition, the G-BA often requests expert opinions from independent scientific institutions to help it perform its duties. These include the Institute for Quality and Efficiency in Healthcare ([www.iqwig.de](http://www.iqwig.de)) in Cologne and the Institute for Quality Assurance and Transparency in Healthcare ([www.iqtig.org](http://www.iqtig.org)) in Berlin.

## Members

SGB V, section 91 defines that the following healthcare organizations comprise the Federal Joint Committee: the National Associations of Statutory Health Insurance Physicians and Dentists (KBV, KZBV), the German Hospital Federation (DKG), and the National Association of Statutory Health Insurance Funds (GKV-SV). These organizations appoint members to the G-BA. The main decision-making body is the plenum. It consists of 13 members with voting rights, and usually meets twice a month in a public session. The chair and two other members are impartial. The statutory health insurance funds appoint five members, as do the care providers: contracted physicians, dentists, psychotherapists, and hospitals. Patient representatives also take part in each plenum session. They have the right to take part in discussions and submit petitions, but not to vote. Over 100 patient representatives are involved in the various G-BA subcommittees and workgroups.

# Lawmakers

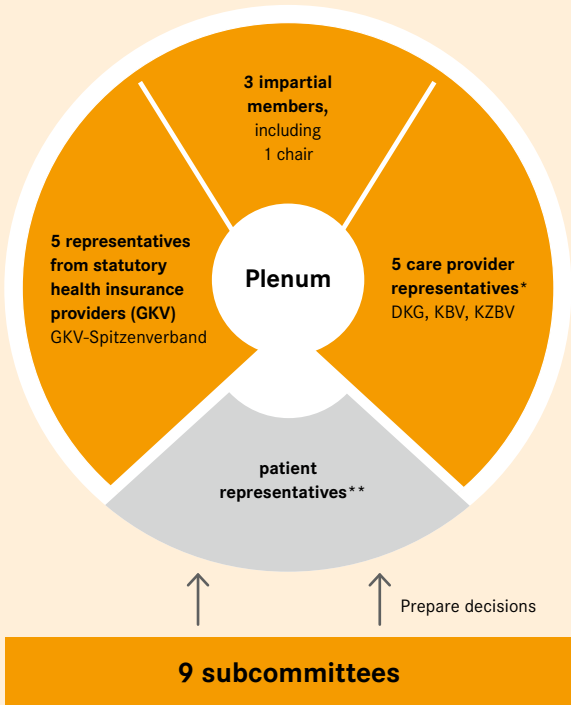
Mandate through the German Social Code, Book Five (SGB V)

## Federal Ministry of Health

Legal supervision ↓ ↑ Directives (for review)

### Federal Joint Committee (G-BA)

(Council in accordance with SGB V, section 91)



Abbreviations: GKV-Spitzenverband = National Association of Statutory Health Insurance Funds; DKG = German Hospital Federation; KBV = National Association of Statutory Health Insurance Physicians; KZBV = National Association of Statutory Health Insurance Dentists

\* Care providers are entitled to vote only on issues affecting their area of expertise. Otherwise these votes are allocated proportionally in accordance with the bylaws, section 14a, paragraph 3.

\*\* Entitled to take part in discussions and submit petitions, but not to vote

## **Financing**

G-BA financing is regulated in SGB V, section 91, paragraph 3 in connection with SGB V, section 139c. The G-BA is financed through so-called system surcharges. A surcharge is collected from the SHI premiums for each outpatient or inpatient treatment case invoiced. The system surcharges are recalculated and published each year.

## **Further information**

You can find G-BA directives and resolutions on the G-BA website ([www.g-ba.de](http://www.g-ba.de)). There you will also find the annual report and other information material on the responsibilities and structure of the G-BA, as well as press releases and newsletters.

Parts of the website are also available in English (<http://www.english.g-ba.de/>).



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**Email:**

[info@g-ba.de](mailto:info@g-ba.de)

**Internet:**

[www.g-ba.de](http://www.g-ba.de)

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