

Health Professionals Report : Capacity, Accessibility and Production

Specialty of Interest : Speech Therapist

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Introduction

Introduction

This report provides a comprehensive overview per healthcare specialty working within the Belgian health insurance system, within hospital and ambulatory settings.

Professional perspective :

• Aspects covered are: capacity, production (numbers and financials), subspecialties, replacement rates. Those aspects are described by gender, age, geography, type of activity, workplace, evolution.

Patient perspective :

• Accessibility and frequentation are described by gender, age, social status, geographical distribution, evolution.

Data Sources & Transformations

This report draws insights from the "Doc P" database, encompassing patients who sought care in Belgium and claimed insurance reimbursement. The database spans from accounting years :

- 2013 to 2023 for health professionals
- 2018 to 2023 for health professionals subspecialties
- 2018 to 2022 for insured coverage and patient frequentation

Each studied year N is coupled with socio-demographic data on providers as of December 31 N.

To address GDPR (General Data Protection Regulation) compliance for small cell data, numbers from fewer than 5 registered providers are hidden.

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Additional information

For official information regarding the number of healthcare providers :

- NIHDI : please click <u>here</u>
- MOH : please click <u>here</u>

Key Variables & Metrics

Healthcare professional perspective (specialty is determined by grouping <u>NIHDI competency codes</u>) :

- <u>Demographic characteristics</u> are age (groups by 10Y), sex (M/F), working address (or contact address if not available), communication language (Dutch/French), convention status (full, partly), activity status (>1 intervention/year), type of prestation (see <u>NIHDI</u> <u>nomenclature</u>).
- <u>Numeric characteristics</u> are number of professionals (all providers registered within INAMI-RIZIV), number and cost of (reimbursed) prestations. Evolution is available since 2012 for professionals figures and since 2018 for the study of their activity.
- <u>FTE (full-time equivalent)</u> is calculated to determine the workload of a healthcare provider (= total reimbursements by provider in a given year divided by the median amount of reimbursements for providers aged 45 to 54 in the same specialty, see Annex 1). FTE values are capped at 1. The FTE for employed doctors in medical homes (lump sum financing) was estimated at 0.82 per doctor because the actual FTE cannot be evaluated given the absence of activity registration. Medical homes with lumpsum are not included in the productivity calculation. General practitioners with "Fee for Service" in the title specifies that doctors and patients in medical homes with lumpsum are excluded from the analysis.
- <u>Working place</u> : distinction is made between private, polyclinic, day hospitals, or hospital stays, depending on the place of prestation.
- <u>Subspecialty Clusters</u> : Healthcare providers within a specialty can be clustered based on ([sub] group of similar) nomenclature codes reimbursed or working place.
- Indicators of Density : FTE/10.000 insured, total activity/FTE, reimbursement/FTE, number of patients/FTE.

Patient perspective :

- <u>Demographic characteristics</u> are age, sex (M/F), address of residence (not treatment place !) (by region, province, etc.), social status (normal and preferential regime [BIM])), type of specialty contacted during the year.
- <u>Patients Indicators</u> : insured coverage (% at least 1 contact) (N.B. Specialists in training included), insured frequentation (number of contacts/insured), patient frequentation (number contacts/patient).
- A KPI (Key Performance Indicator) color system is used in this report. It is shown as
- Grey for contextual information
- Green for positive performance compared to starting year
- Red for negative performance compared to starting year

Limitations & Assumptions

- Professional density : metrics in this report were not standardized to a consistent population size, which means comparisons between regions or provinces may not be entirely fair or accurate.
- Patient analysis uses actual care years, not accounting years, unlike other analyses. If the analysis year is N, the last available year for patient analysis is N-1 in order to present relevant data.
- The calculation of FTEs may be impacted by modifications of competency codes over the years. A change within a specialty affects the median of reimbursements and thus generates breaks in the evolution of FTEs (see the recognition of nephrologists since 2022 for internal medicine). The median value changes depending on the year (see Annex 1).



Speciality Metrics and Comparison (2023) : Speech Therapist

This sheet co	Speech Therapist	
	Description	Competency Code
	Graduates in speech therapy	58801
# N SubSpecialities	Licensed speech therapists	58802
# N Total		
# N Active		
# Full-Time Equivalent (FTE)		
€ Expenses per FTE		
65+		
Convention		

This	his sheet compares the specialty of interest (left) with comparison group (right).					
	Speech Therapist	Physiotherapist	Physiotherapist			
# N SubSpecialities	1	1	Profession Physiotherapist			
# N Total	11.771	44.630				
# N Active	6.823	26.444				
# Full-Time Equivalent (FTE)	4.684	18.848				
€ Expenses per FTE	33.515	56.362				
65+	% Active % FTE 2% 2%	% Active % FTE 6% 5%				
Convention Accreditation	% Active % FTE 46% 46% (Bla) (Bla)	% Active % FTE 68% 67% (Bla (Bla				

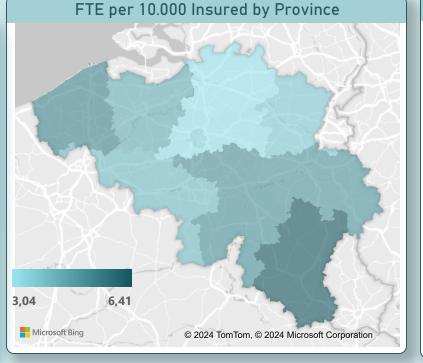


Geographical Accessibility (2023) : Speech Therapist

Geographical accessibility is measured by density, calculated as the number of FTE (Full Time Equivalent) per 10.000 insured and comparing the results between provinces and regions. Metrics in this report were not standardized to a consistent population size.

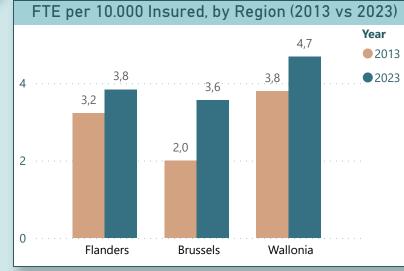
Indicators :

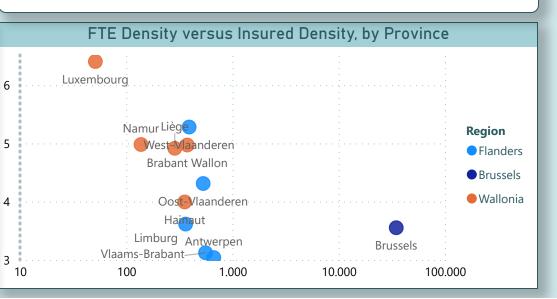
- Geographical distribution which enables to check for homogeneity.
- Evolution over 10 years and growth rate within that period.
- Comparison of number of FTE and number of insured to detect correlation.



Demographic Information by Province					
Province	#FTE	Density (FTE per 10.000 Insured)	%65+ (FTE)	%Women (FTE)	
West-Vlaanderen	648,98	5,28	0%	99%	
Oost-Vlaanderen	680,99	4,31	1%	99%	
Antwerpen	581,54	3,04	1%	98%	
Limburg	317,03	3,62	2%	98%	
Vlaams-Brabant	366,95	3,12	1%	99%	
Brussels	407,70	3,55	1%	97%	
Brabant Wallon	203,37	4,97	3%	98%	
Hainaut	536,90	4,00	2%	98%	
Namur	251,36	4,98	1%	98%	
Liège	543,43	4,92	4%	98%	
Luxembourg	145,68	6,41	4%	98%	
Total	4.683,92	4,07	2%	98%	









Financial Accessibility (2023) : Speech Therapist

Financial accessibility is measured by the number of conventioned FTE (Full time equivalent) by 10.000 insured.

Convention means that the professional is committed to respect prices determined in the NIHDI convention. This agreement can occur partly (at specific hours during the week) or totally (all the working hours). The conventioned FTE for partially conventioned providers is calculated as half of their total FTE.

Indicators :

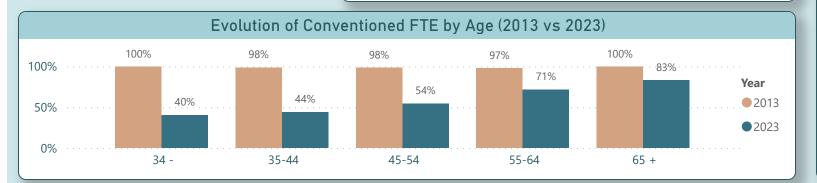
• % FTE meeting the criteria / total FTE

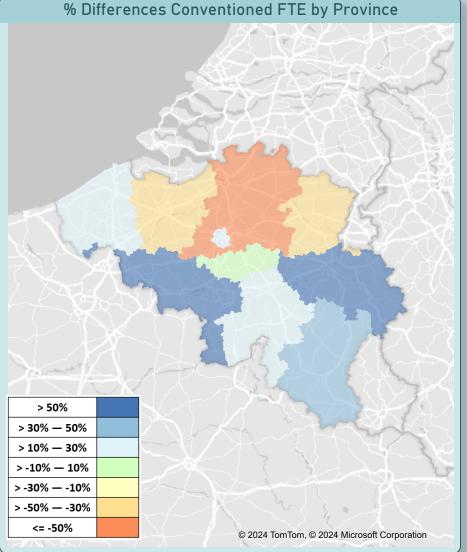
• Financial accessibility is gauged by conventioned FTE (Full Time Equivalent) per 10.000 insured.



% Conventioned FTE by Language and Regime						
Language	Part	Full	Total			
FR		64%	64%			
NL	31% 31%					
Total		46 %	46 %			

Demographic Information by Province					
Province	Density (FTE per 10.000 Insured)	Density (Conventioned FTE per 10.000 Insured)	% Conventioned FTE		
West-Vlaanderen	5,28	2,94	56%		
Oost-Vlaanderen	4,31	1,36	32%		
Antwerpen	3,04	0,56	18%		
Limburg	3,62	0,92	25%		
Vlaams-Brabant	3,12	0,52	17%		
Brussels	3,55	2,00	56%		
Brabant Wallon	4,97	2,29	46%		
Hainaut	4,00	2,97	74%		
Namur	4,98	2,72	55%		
Liège	4,92	3,42	70%		
Luxembourg	6,41	4,07	64%		
Total	4,07	1,87	46%		







Subspecialties Activity and Working Place : Speech Therapist

	The level of activity is measured by the total reimbursement amount of the specialty. The distribution of the reimbursement by specialty allows to
	distinguish different types of activity which are grouped to study what kind of procedures are done and where. The type of activity is described by 2
	criteria: the place of work and the nature of the activity:
Reimbursement by FTE (2023)	The place of work is the place where the activity takes place (private, polyclinic, day hospital, hospital stay).
Reinibul Sement by FTE (2023)	• The nature of the activity is described according to 2 logics of grouping. The traditional distribution of reimbursements within NIHDI (N01 contacts, N20 surgery,
22 5 0 7	etc.) and a specific, more detailed breakdown to identify sub-specialties within the specialty (i.e. cardiac surgery within surgery).
33.597	Indicators :
2018: 23.684 (+41.86%)	Reimbursement (in Euros) / FTE
	% Reimbursement (in Euros) by category / total reimbursement (in Euros)
	The evolution provides information on the stability of the patterns of the activity comparing year N with N-5.



GroupN	Description		GroupA	Description
N74	Cross-cutting health care objective		P02_LOGOPEDIE	Logo.
N84	Speech therapy			
		C		

Subspecialties Activity and Working Place (2023) : Speech Therapist

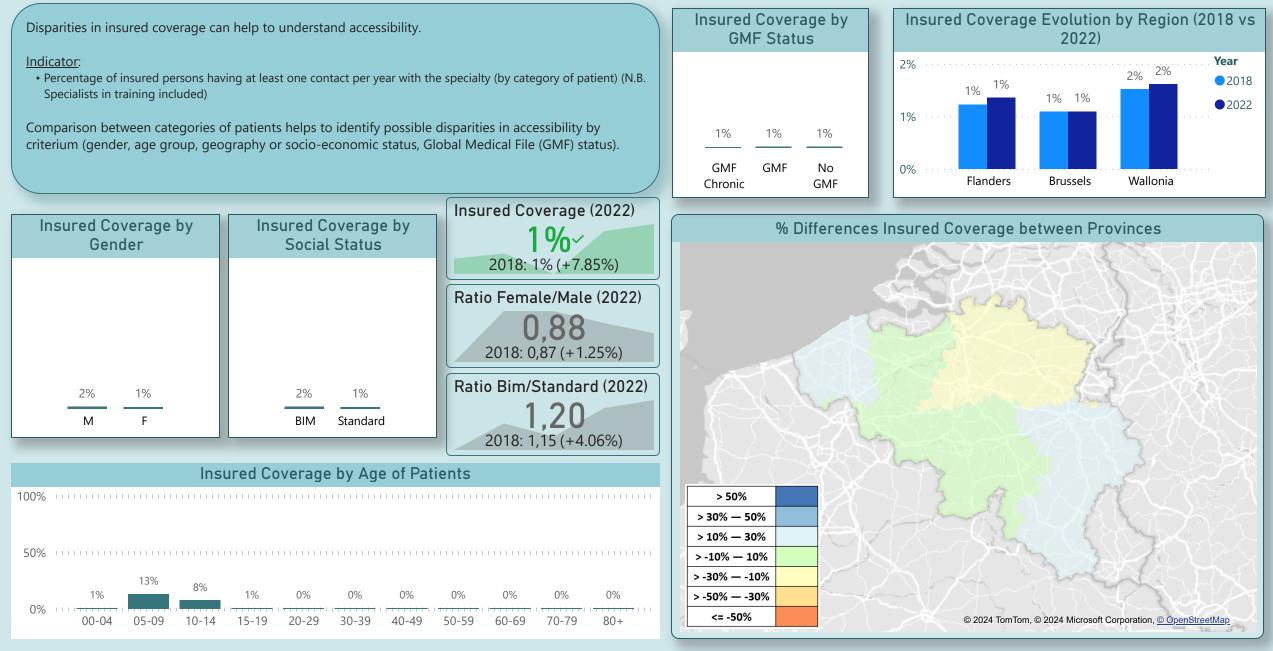
Subspecialties are identified by the working place and/or type of activity (see previous page): the assignment of a health care provider to a sub-specialty prioritizes the type of activity exercised. In general, the type of activity with the most reimbursements, if the amount exceeds 10% of reimbursements in all types of activity, determines the specialty of the health care provider. If no particular activity was identified for the specialty, the assignment was done on the criterium of the workplace: hospital, polyclinic, private. If there is no clear distinction between the different locations, then the cluster is named "Mixed". Clusters less than 5 FTE or less than 0,5% of total FTE are left out. Comparison of clusters helps to understand differences in nature of work. Indicators :

- % FTE by type of cluster
- % type of activity (in Euro) / total reimbursement (in euro) by cluster





Accessibility, Insured Coverage (2022) : Speech Therapist



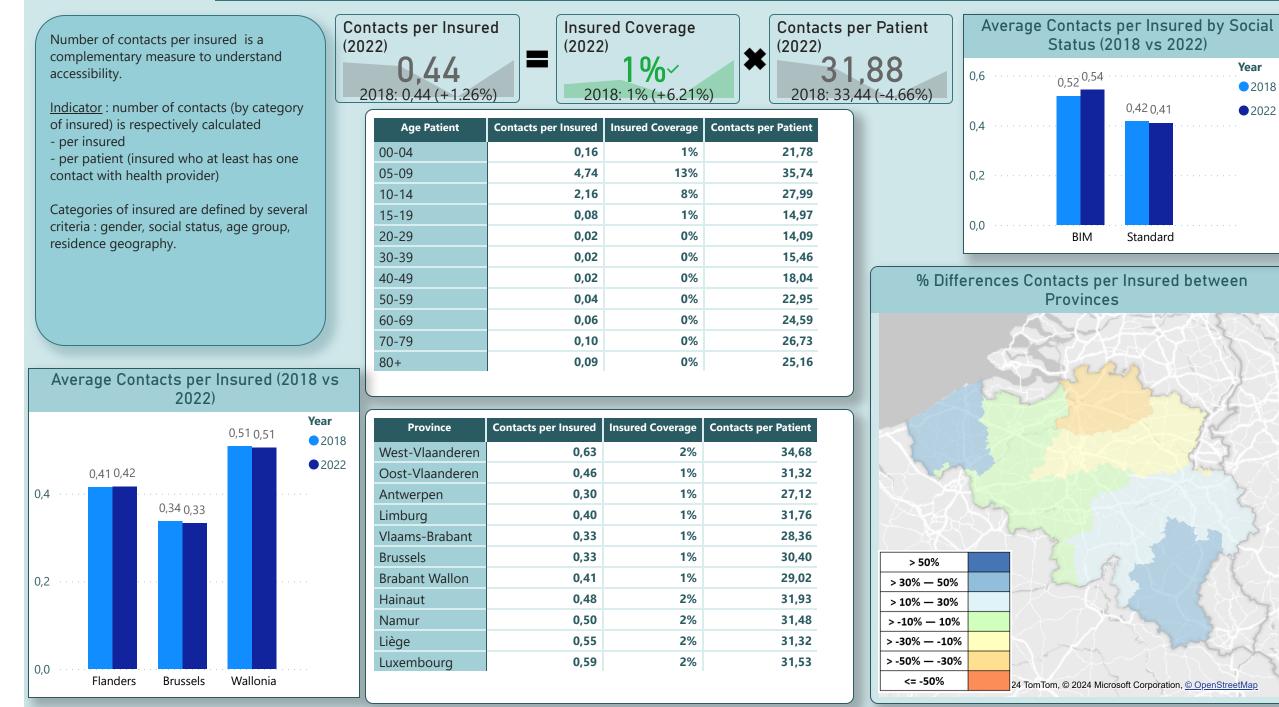


Accessibility, Contacts per Insured (2022) : Speech Therapist

Year

2018

2022



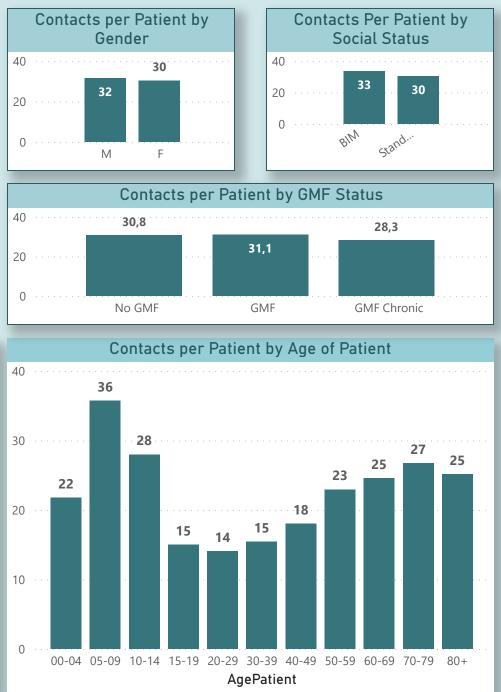


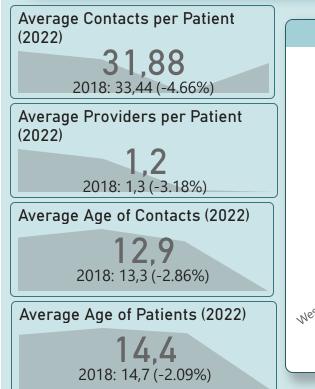
Patient Frequentation (2022) : Speech Therapist

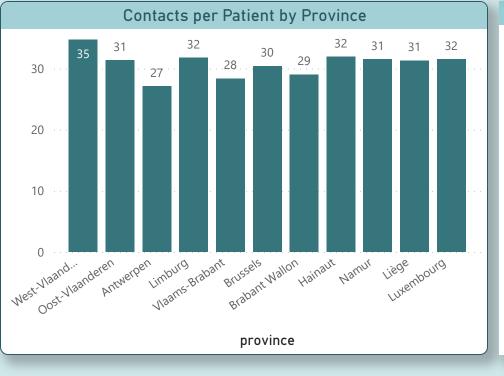
Frequentation of patients (number of contacts) is a measure to understand health consumption and workload.

<u>Indicator</u> : number of contacts (by patient category) is calculated per patient (insured who at least has one contact with a health provider).

Categories of patients are defined by several criteria : gender, social status, age group, residence geography, GMF (Global Medical File) Status.









Complementarity with comparison group (2022) : Speech Therapist

00-04

• 05-09

• 10-14

• 15-19

20-29

• 30-39

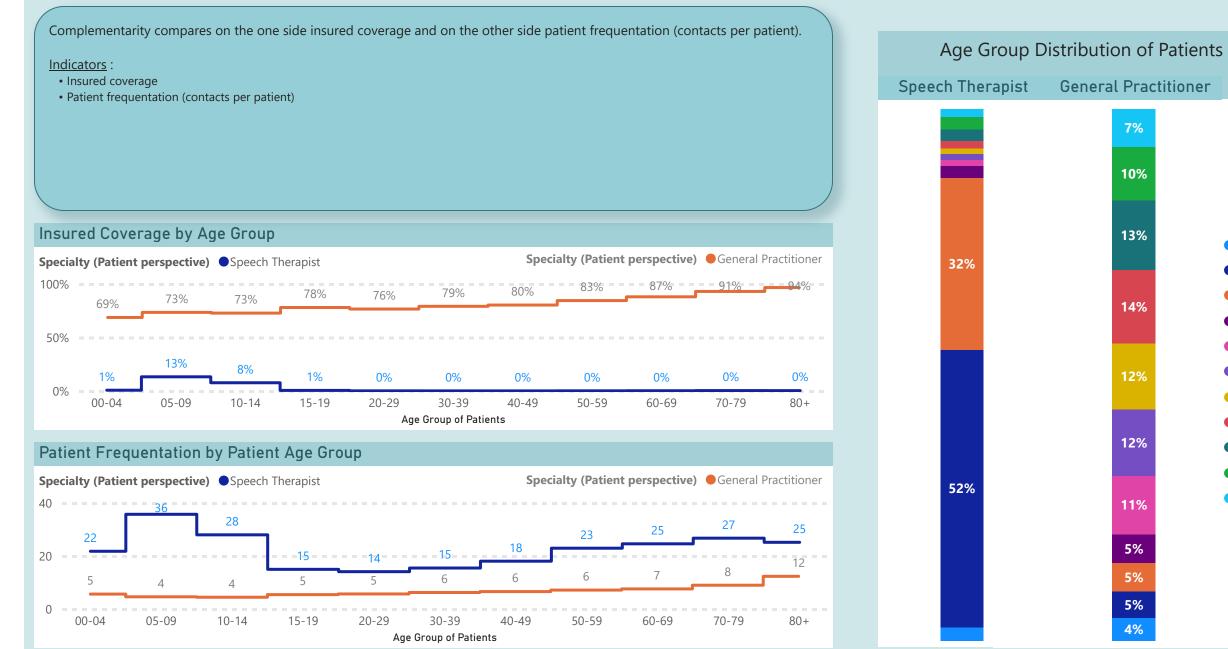
40-49

50-59

• 60-69

• 70-79

80+





Workload (2022) : Speech Therapist

Workload by specialty provides insight into the work volume per year of the specialty by FTE and the patient base population (Individual patients are allocated to one single professional per specialty per year to build the patient base population for each single professional/ provider) (N.B. Specialists in training are excluded). The classification criteria are linked to the healthcare professional (age, language, gender, work address, convention status, accreditation)

Indicators:

- Workload : contacts / FTE
- Patient base population: Patients / FTE

27,4 2018: 28,8 (-4.84%)

• Contacts per patient per provider

Limitation : working address of health professionals can be different than the location of patients. This can explain differences in workload results (contact/FTE, patients/FTE) and lead to misinterpretation for geographical criteria (province) especially for small numbers of working professionals. Also if the number of FTE by cell is inferior to 5, contacts per FTE and patients per FTE are hidden.

	((
Average Contacts per FTE (2022)	Province	Contacts per FTE	Patients Per FTE	Contacts per Patient and Provider		Gender	Contacts per FTE	Patients Per FTE	Contacts per Patien and Provider
1071	West-Vlaanderen	1.196	35	28,4		Μ	1.207	42	26,
1.071	Oost-Vlaanderen	1.037	33	26,4		F	1.069	34	27,
2018: 1098 (-2.43%)	Antwerpen	969	36	24,7					
	Limburg	1.079	34	28,6					
	Vlaams-Brabant	999	34	26,4		Language	Contacts per FTE	Patients Per FTE	-
erage Patients per FTE (2022)	Brussels	962	32	26,7					and Provider
	Brabant Wallon	978	34	25,3		FR	1.071	35	
35	Hainaut	1.157	36	29,2		NL	1.071	35	27,
2018: 33 (+5.41%)	Namur	1.104	35	28,9					
	Liège	1.161	37	28,2	ſ	Convention	Contacts per FTE	Dationts Day ETE	Contacts per Patient
	Luxembourg	972	31	29,3		Convention	Contacts per FTE		and Provider
verage Contacts per Patient and)	Full	1.146	36	28,7
rovider (2022)						No	1.014	34	26,3

Age Class	Contacts per FTE	Patients Per FTE	Contacts per Patient and Provider
34 -	1.055	34	26,3
35-44	1.076	35	28,0
45-54	1.121	36	28,7
55-64	1.152	36	30,4
65 +	832	25	31,3

Accredited	Contacts per FTE	Patients Per FTE	Contacts per Patient and Provider
No	1.071	35	27,4



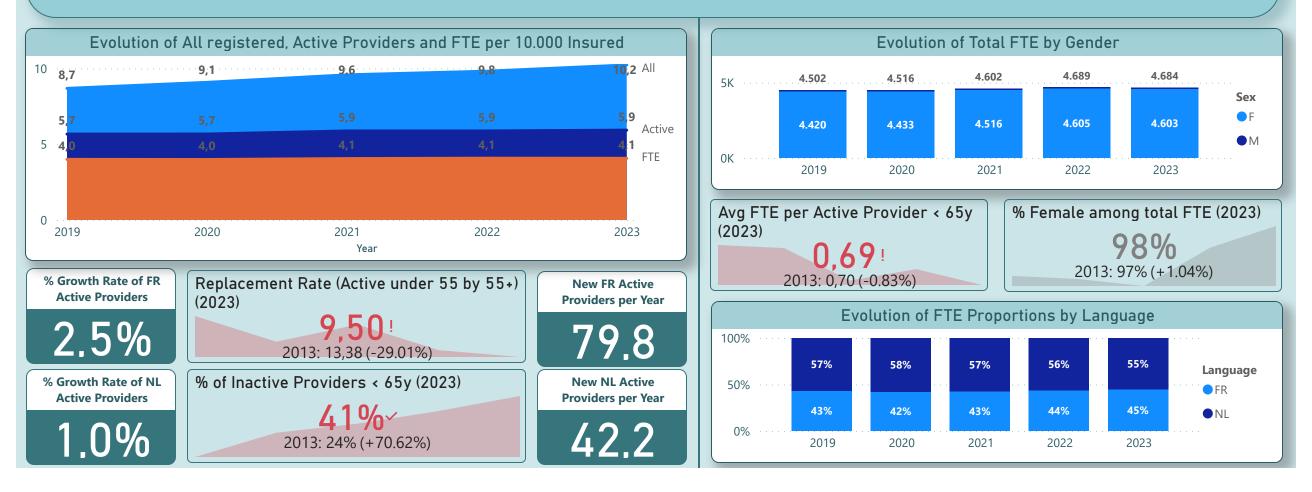
Healthcare workforce demographics present active professionals having more than one activity per year on the <u>left side</u> of the page, while Full-Time Equivalents (FTE) are displayed on the <u>right side</u>. The analysis spans the past decade and is segmented by professional characteristics such as age class, gender, and language.

Active indicators (Left):

- Number of Actives (>1 prestation /accounting year) and its % growth rate over the past decade.
- Replacement Rate: Active professionals above 55 years compared to those below 55 years.
- Inactivity: % of inactive professionals in relation to the total.
- New Active Providers per Year: Annual influx of new providers (derived from linear regression over the past decade to estimate the average rate).

FTE indicators (Right):

- Equal proportion of gender: Indicates the percentage of female FTE in relation to the total FTE.
- Average FTE: Indicates the level of activity by dividing the FTE below 65 years with the total active workforce.



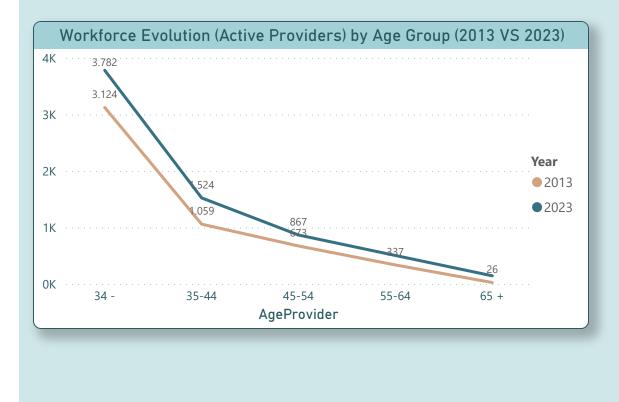


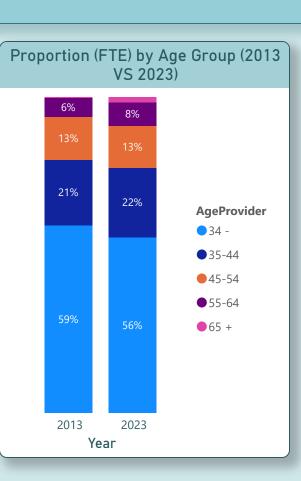
Demographic Evolution by Age Group (2023) : Speech Therapist

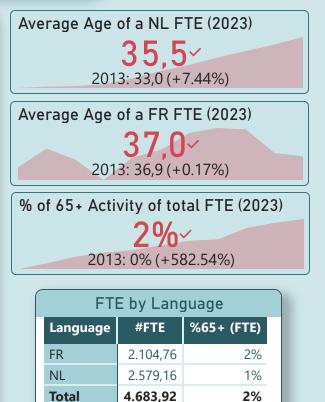
Demographic evolution by age group and activity of professionals above 65 years (provides information on the demographic stability).

Indicators :

- Trend in age group distribution (active/FTE),
- Age FTE : average of a professional's age weighted by its corresponding Full-Time Equivalent (FTE) value, by language of the provider.
- Contribution of older practitioners to the overall activity: % 65+ FTE/ Total FTE







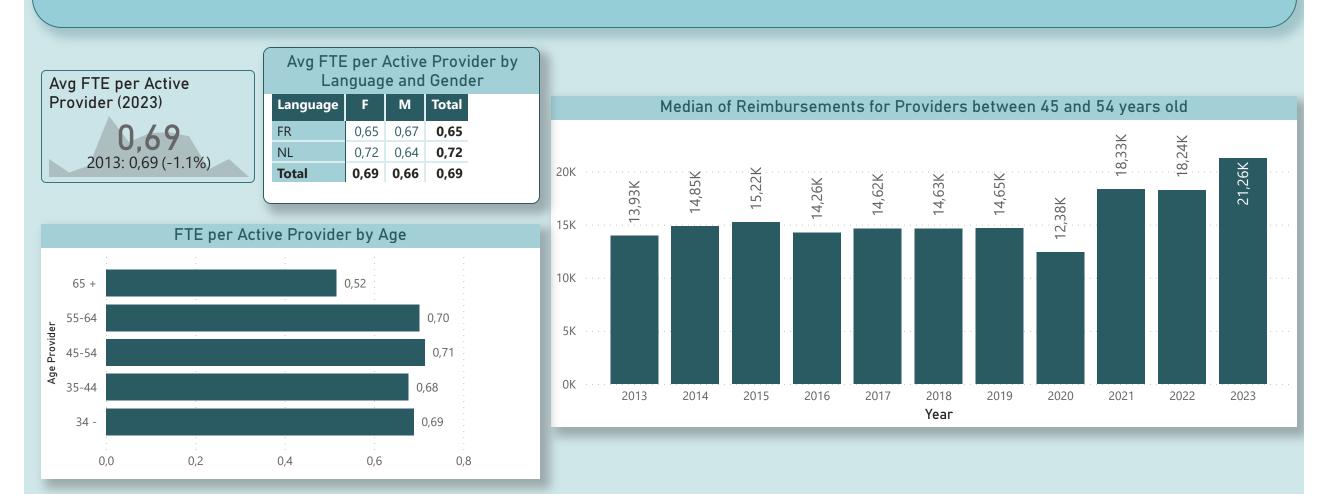


<u>FTE (full-time equivalent)</u> is calculated to determine the workload of a healthcare provider (= total reimbursements by provider in a given year divided by the median of reimbursements for providers aged 45 to 54 in the same specialty).

The median amount of reimbursement for providers aged 45 to 54 is calculated each year. Evolution is not adjusted for inflation.

FTE values are capped at 1. See the comparison per active provider by sex, language and age group.

N.B. The FTE for employed doctors in medical homes (lump sum financing) was estimated at 0,82 per doctor because the actual FTE cannot be evaluated given the absence of activity registration.





Annex 2: Type of Practice (2023) : Speech Therapist

Type of practice (FTE) by age group and region. Evolution and trends

- 5 types of practices are represented:
- Nursing home: represents care facilities for the elderly or individuals requiring psychiatric care.
- Group: represents collective practices or facilities where professionals work together (ex: medical house with lumpsum, mental health center, day care center, public pharmacies, medical laboratories, bandagist/orthopedist workshops).
- Hospital: represents hospitals or medical establishments (ex: general hospitals, psychiatric hospitals, hospital pharmacies)
- Solo: represents individual practitioners or private addresses.
- Other: represents facilities or organizations not falling into the above categories (ex: physiotherapy office, tariff office, organizations with a registered business number)
- N.B. Not Available (NA) values are decreasing over time as the database becomes increasingly complete.

