The Committee on Health
“Patients are at the centre of our health policy. The quality of the care they receive is the yardstick by which the organisation of our health system is judged. We would all like to live a long, healthy life, and we all wish to benefit from medical advances and the opportunities opened up by the digital revolution. At the same time, however, the health system must remain affordable. At the centre of these conflicting interests, the Committee on Health discusses all topics falling within its remit and prepares decisions with the aim of equipping our health system to cope with future challenges.”

Erwin Rüddel, CDU/CSU
Chairman of the Committee on Health
The German Bundestag’s decisions are prepared by its committees, which are established at the start of each electoral term. Four of them are stipulated by the Basic Law, the German constitution: the Committee on Foreign Affairs, the Defence Committee, the Committee on the Affairs of the European Union and the Petitions Committee. The Budget Committee and the Committee for the Rules of Procedure are also required by law. The spheres of responsibility of the committees essentially reflect the Federal Government’s distribution of ministerial portfolios. This enables Parliament to scrutinise the government’s work effectively.

The Bundestag committees
The German Bundestag sets political priorities of its own by establishing additional committees for specific subjects, such as sport, cultural affairs or tourism. In addition, special bodies such as parliamentary advisory councils, committees of inquiry or study commissions can also be established. The committees are composed of members of all the parliamentary groups, reflecting the balance of these groups in the German Bundestag. The distribution of the chairs and deputy chairs among the parliamentary groups also reflects their relative strengths in the plenary. In the current electoral term, the committees have between nine and 49 members.

The committees discuss and deliberate on items referred to them by the plenary. They also have the right to take up issues on their own initiative, allowing them to set priorities in the parliamentary debate. When necessary, they draw on external expertise – usually by holding public hearings. At the end of a committee’s deliberations, a majority of its members adopt a recommendation for a decision and a report, which serve as the basis for the plenary’s decision.
Health is a major policy field which touches on many areas of the economy and society. The health sector accounts for around one tenth of gross national product; one in ten workers are employed in this sector; and around 90 per cent of the German population is insured under the statutory health insurance scheme. The range of economic and social interests with which health policy has to deal is correspondingly diverse. Patients want to receive high-quality medical care, health professionals want to receive an appropriate income, and insured people want the contributions they pay to remain within reasonable limits. Health policy needs to strike a balance between these different concerns. Its aim is to guarantee high-quality medical care while limiting the cost of health services. As a result, there is a constant need for political action and regulation.

The Committee on Health
In recent decades, the Committee on Health has dealt with at least one major health reform in almost every electoral term. The core issues dealt with by the Committee are the financing of the statutory health insurance system, medical and dental care, and long-term care. However, health policy also covers the health professions, genetic diagnosis, the prevention of addiction and disease, and ethical issues – in relation to organ transplants, for example. The 41 members of the Committee, chaired by Erwin Rüddel, therefore have a heavy workload. Their consideration of the large number of bills and motions requires a wealth of detailed knowledge. To ensure they can take informed decisions, the Committee members draw on a range of information sources. They regularly request briefings from the Ministry of Health and other federal ministries, or invite experts from academia or the health sector for discussions in order to obtain a full and independent picture of the subject under discussion.

The Committee also holds public hearings, particularly in the context of its deliberations on legislation. It invites experts and representatives of associations to participate in specialist discussions. The participants are selected by the parliamentary groups in line with their relative strengths in the plenary. This is to ensure that the majorities in Parliament are reflected at public hearings. The time available for questions is allocated to the individual parliamentary groups in accordance with the same principle. The length of a hearing depends on the complexity of the bill or motion under discussion. Sometimes an hour and a half is sufficient; on occasion,
Health’s role as a key element in sustainable development is becoming increasingly important. The effects of infectious diseases, such as Ebola or tuberculosis, and of antibiotic resistance extend far beyond national borders. Migration flows are giving rise to new health-related challenges. To take account of this development and facilitate cross-cutting cooperation and dialogue between the parliamentary bodies dealing with these issues, a Subcommittee on Global Health attached to the Committee on Health has been set up in this electoral term.

However, discussions can span several days. The number of experts invited also varies. Given the large number of stakeholders – including patients, doctors, carers, hospitals and health-insurance funds – the hearings held by the Committee on Health often have a large number of participants. For example, 66 experts were invited to a hearing on the Care Sector Occupations Reform Act in the last electoral term. The information obtained by the Committee members at public hearings, together with the written statements submitted by experts, is fed into the Committee’s deliberations, which sometimes extend over many weeks. The conclusion of the Committee’s deliberations on a bill or motion takes the form of a recommendation for a decision to the plenary and a report on the course of the Committee’s deliberations. On this basis, the plenary then takes a majority decision on the item in question.

Number of members of the Subcommittee on Global Health: 9
Chairwoman: Heike Baehrens, SPD
Deputy Chairman: Professor Andrew Ullmann, FDP
In addition to bills and motions relating specifically to health policy, for which the Committee on Health is the lead committee, it is also consulted on items of business for which other committees are responsible, if they touch on aspects of health policy. The Committee on Health submits its opinion on these items as well. Its right to take up issues on its own initiative allows the Committee to place other relevant subjects on the agenda. For example, it can call on the Federal Government to provide briefings on its health-policy initiatives, within the framework of parliamentary scrutiny of the government’s work. The briefings might focus on the state of play of plans to reform hospital financing, palliative care, or the implementation of the new concept of “need for long-term care”. Several times a year, the Committee also welcomes the Federal Minister of Health to its meetings to explain his health-policy plans or his Ministry’s budget. When information is needed about cross-cutting issues such as corruption in the health system, the concerns of people with disabilities, or medical research, ministers from other departments are also asked to brief the Committee. Another important aspect of the Committee’s work is international dialogue. Talks with politicians from other countries who specialise in health policy provide ideas for reform projects in Germany. In addition, groups of parliamentarians from around the world consult the Committee on Health to learn about the German health system.
European dimensions of health policy

Under Article 168 of the Treaty on the Functioning of the European Union (TFEU), responsibility for the organisation of health services rests with the Member States of the European Union. In fact, the EU is expressly prohibited from taking steps to harmonise the relevant laws of the Member States. This means that the Member States have sole responsibility for their national health policies, organisation of the health system, and medical care, including the financing of services and the scope of services covered by health insurance. Nonetheless, the EU does have scope to take action in the sphere of public health. This scope derives, firstly, from the competences set out in the TFEU and relates primarily to the improvement of public health and prevention of illness and diseases. It includes, in particular, action to obviate sources of danger to human health, the fight against widespread health scourges such as HIV/AIDS, malaria or tuberculosis, and complementary action to reduce drugs-related health damage. In addition, the European Union is responsible for measures to establish high standards of quality and safety for organs, substances of human origin, blood and blood derivatives. It also promotes cooperation between the Member States. Secondly, provisions relating to the EU’s single market, and especially the four fundamental freedoms – the free movement of goods, persons, services and capital – are having a growing impact on national health systems. For example, the European Court of Justice (ECJ) has made it clear in several rulings that these fundamental freedoms also apply, in principle, in the sphere of public health. The Court has ruled that medical products and services, as well as hospital treatment abroad, are subject to the free movement of goods and services.
The German legislature drew the appropriate conclusions from the ECJ rulings and applied this interpretation of the law to the German health system with the Statutory Health Insurance Modernisation Act, which entered into force in 2003. One topical example is the Court’s ruling on the fixed-price system for prescription-only medicinal products in Germany. It remains to be seen how German lawmakers will respond to this decision. However, they are free to choose whether to adhere closely to European provisions and recommendations when implementing EU law, or whether to require a higher level of protection.

When considering EU items of business, the Committee on Health has the task of ensuring that the principles of subsidiarity and proportionality are upheld in EU directives and regulations affecting the health sector. If it takes the view that these principles are being infringed, the Committee can recommend that the plenary of the German Bundestag should deliver an opinion to this effect (a “subsidiarity objection”). It is thus essential for the Committee on Health to learn about planned EU projects well in advance. For this reason, the Committee members request regular briefings from the Federal Government about the latest developments at European level.
Committee members

The 41 members of the Committee on Health

Erwin Rüddel,
CDU/CSU
Chairman
Business administrator,
b. 21 Dec. 1955
in Bonn;
marrried;
two children.
Bundestag Member
since 2009

Harald Weinberg,
The Left Party
Deputy Chairman,
The Left Party
spokesman on health
policy
Educational adviser,
b. 13 Feb. 1957
in Bonn,
Bad-Godesberg;
two children.
Bundestag Member
since 2009
Dr Georg Kippels, CDU/CSU
Lawyer, b. 21 Sep. 1959 in Bedburg; married. Bundestag Member since 2013

Dr Roy Kühne, CDU/CSU
Sports therapist, physiotherapist, b. 27 Sep. 1967 in Magdeburg; married; two children. Bundestag Member since 2013

Dr Rudolf Henke, CDU/CSU
Doctor, b. 5 June 1954 in Birkesdorf (now Düren); married; four children. Bundestag Member since 2009

Michael Henrich, CDU/CSU
CDU/CSU spokesman on the Committee
Lawyer, b. 14 Jan. 1965 in Balingen; married; two children. Bundestag Member since 2002

Erich Irlstorfer, CDU/CSU
Commercial employee, b. 27 May 1970 in Freising; married; two children. Bundestag Member since 2013

Alexander Krauß, CDU/CSU
Political scientist, b. 8 Dec. 1975 in Erlabrunn; married; three children. Bundestag Member since 2017

Michael Hennrich, CDU/CSU
CDU/CSU spokesman on the Committee
Lawyer, b. 14 Jan. 1965 in Balingen; married; two children. Bundestag Member since 2002

Rudolf Henke, CDU/CSU
Doctor, b. 5 June 1954 in Birkesdorf (now Düren); married; four children. Bundestag Member since 2009
Karin Maag,
CDU/CSU
CDU/CSU spokes­woman on health policy
Lawyer, former senior civil servant,
b. 13 June 1962
in Stuttgart;
marrried.
Bundestag Member
since 2009

Dietrich Monstadt,
CDU/CSU
Lawyer,
b. 15 Sep. 1957
in Bochum;
four children.
Bundestag Member
since 2009

Stephan Pilsinger,
CDU/CSU
Doctor,
b. 17 Feb. 1987
in Munich;
unmarried.
Bundestag Member
since 2017

Lothar Riebsamen,
CDU/CSU
Former mayor,
b. 24 Sep. 1957
in Pfullendorf;
marrried;
two children.
Bundestag Member
since 2009

Professor
Claudia Schmidtke,
CDU/CSU
Cardiac surgeon,
MBA in Healthcare Management,
b. 29 Mar. 1966
in Neumünster.
Bundestag Member
since 2017

Tino Sorge,
CDU/CSU
Lawyer,
b. 4 Mar. 1975
in Ilmenau;
marrried.
Bundestag Member
since 2013

Stephan Pilsinger,
CDU/CSU
Doctor,
b. 17 Feb. 1987
in Munich;
unmarried.
Bundestag Member
since 2017

Tino Sorge,
CDU/CSU
Lawyer,
b. 4 Mar. 1975
in Ilmenau;
marrried.
Bundestag Member
since 2013
Emmi Zeulner, CDU/CSU
Registered nurse,
b. 27 Mar. 1987
in Lichtenfels;
one child.
Bundestag Member
since 2013

Heike Baehrens, SPD
Bank clerk, specialist
in religious education,
b. 21 Sep. 1955
in Bevern;
mARRIED;
two children.
Bundestag Member
since 2013

Bärbel Bas, SPD
Personnel management
specialist,
b. 3 May 1968
in Walsum, Duisburg;
mARRIED.
Bundestag Member
since 2009

Sabine Dittmar, SPD
SPD spokeswoman
on the Committee,
SPD spokeswoman
on health policy
Doctor,
b. 15 Sep. 1964
in Schweinfurt;
mARRIED.
Bundestag Member
since 2013

Dr Edgar Franke, SPD
Lawyer,
b. 21 Jan. 1960
in Gudensberg;
widowed;
two children.
Bundestag Member
since 2009

Dirk Heidenblut, SPD
Executive at the
Workers’ Samaritan
Federation,
b. 21 Apr. 1961
in Essen;
mARRIED.
Bundestag Member
since 2013

Heike Baehrens, SPD
Bank clerk, specialist
in religious education,
b. 21 Sep. 1955
in Bevern;
mARRIED;
two children.
Bundestag Member
since 2013

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specialist,
b. 3 May 1968
in Walsum, Duisburg;
mARRIED.
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widowed;
two children.
Bundestag Member
since 2009

Dirk Heidenblut, SPD
Executive at the
Workers’ Samaritan
Federation,
b. 21 Apr. 1961
in Essen;
mARRIED.
Bundestag Member
since 2013
Martina Stamm-Fibich, SPD
Marketing and communications manager, works council member, b. 23 Apr. 1965 in Erlangen; two children. Bundestag Member since 2013

Claudia Moll, SPD
Caregiver for the elderly, b. 15 Dec. 1968 in Eschweiler; married; two children. Bundestag Member since 2017

Bettina Müller, SPD
Nurse, lawyer, b. 7 June 1959 in Alzenau-Wasserlos; married; two children. Bundestag Member since 2013

Hilde Mattheis, SPD
Teacher, b. 6 Oct. 1954 in Finnentrop; married; two children. Bundestag Member since 2002

Professor Axel Gehrke, AfD
AfD spokesman on the Committee, AfD spokesman on health policy
Internal specialist, cardiologist, specialist in physical medicine and rehabilitation, university professor, b. 12 Jan. 1942 in Arnswalde; three children. Bundestag Member since 2017

Paul Viktor Podolay, AfD
Medical technician, b. 30 May 1946 in Preßburg; married; two children. Bundestag Member since 2017

Claudia Moll, SPD
Caregiver for the elderly, b. 15 Dec. 1968 in Eschweiler; married; two children. Bundestag Member since 2017

Bettina Müller, SPD
Nurse, lawyer, b. 7 June 1959 in Alzenau-Wasserlos; married; two children. Bundestag Member since 2013

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Teacher, b. 6 Oct. 1954 in Finnentrop; married; two children. Bundestag Member since 2002

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Medical technician, b. 30 May 1946 in Preßburg; married; two children. Bundestag Member since 2017

Claudia Moll, SPD
Caregiver for the elderly, b. 15 Dec. 1968 in Eschweiler; married; two children. Bundestag Member since 2017

Bettina Müller, SPD
Nurse, lawyer, b. 7 June 1959 in Alzenau-Wasserlos; married; two children. Bundestag Member since 2013

Hilde Mattheis, SPD
Teacher, b. 6 Oct. 1954 in Finnentrop; married; two children. Bundestag Member since 2002

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AfD spokesman on the Committee, AfD spokesman on health policy
Internal specialist, cardiologist, specialist in physical medicine and rehabilitation, university professor, b. 12 Jan. 1942 in Arnswalde; three children. Bundestag Member since 2017

Paul Viktor Podolay, AfD
Medical technician, b. 30 May 1946 in Preßburg; married; two children. Bundestag Member since 2017
Christine Aschenberg-Dugnus, FDP
FDP spokeswoman on the Committee
Lawyer,
b. 22 Sep. 1959
in Eppstein, Taunus;
mARRIED;
three children.
Bundestag Member
from 2009 to 2013
and since 2017

Jörg Schneider, AfD
Mechanical engineer,
b. 14 May 1964
in Solingen.
Bundestag Member
since 2017

Dr Wieland Schinnenburg, AfD
Dentist, lawyer,
b. 12 Nov. 1958
in Norden;
mARRIED;
three children.
Bundestag Member
since 2017

Dr Robby Schlund, AfD
Doctor,
b. 19 Feb. 1967
in Gera;
mARRIED;
three children.
Bundestag Member
since 2017

Katrin Helling-Plahr, FDP
Lawyer,
b. 2 Apr. 1986
in Hagen;
mARRIED;
one child.
Bundestag Member
since 2017

Jörg Schneider, AfD
Mechanical engineer,
b. 14 May 1964
in Solingen.
Bundestag Member
since 2017

Detlev Spangenberg, AfD
Business administrator,
b. 10 Apr. 1944
in Chemnitz;
mARRIED;
one child.
Bundestag Member
since 2017

Jörg Schneider, AfD
Mechanical engineer,
b. 14 May 1964
in Solingen.
Bundestag Member
since 2017

Detlev Spangenberg, AfD
Business administrator,
b. 10 Apr. 1944
in Chemnitz;
mARRIED;
one child.
Bundestag Member
since 2017

Jörg Schneider, AfD
Mechanical engineer,
b. 14 May 1964
in Solingen.
Bundestag Member
since 2017

Detlev Spangenberg, AfD
Business administrator,
b. 10 Apr. 1944
in Chemnitz;
mARRIED;
one child.
Bundestag Member
since 2017
Dr Kirsten Kappert-Gonther, Alliance 90/The Greens
spokeswoman on the Committee
Doctor, b. 3 Nov. 1966
in Marburg; married;
two children.
Bundestag Member since 2017

Maria Klein-Schmeink, Alliance 90/The Greens
spokeswoman on health policy
Sociologist, b. 6 Jan. 1958
in Dingden; unmarried;
one child.
Bundestag Member since 2009

Kordula Schulz-Asche, Alliance 90/The Greens
Communications specialist, nurse, b. 31 Dec. 1956
in Berlin; married;
one child.
Bundestag Member since 2013
Information online

The Committee on Health
www.bundestag.de/en/committees/a14
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The German Bundestag takes decisions on what are at times highly complex and controversial bills and parliamentary initiatives relating to the entire spectrum of policy fields. The committees play a central role in parliamentary deliberations. They are the forum where the Members thrash out compromises and draw on expert advice before submitting their reports and recommendations for decisions to be voted on by the Bundestag as a whole.

www.bundestag.de/en/committees