The Bavarian Association of Statutory Health Insurance Physicians (KVB)

Legal foundation and supervision

The Bavarian Association of Statutory Health Insurance Physicians (Kassenärztliche Vereinigung Bayerns, abbr. KVB or BASHIP) is a statutory body under public law. It is one of the healthcare system’s self-administration bodies, and its work is under the legal supervision of the Bavarian Ministry of Health. However, it is not a subordinate government agency.

The establishment of ASHIPs goes back to 1931, when Heinrich Brüning, then Chancellor of the Weimar Republic, issued an emergency decree to settle disputes between doctors and health insurance funds. It resulted in the abolition of individual contracts between doctors and health insurers and paved the way for the establishment of regional ASHIPs.

Tasks and responsibilities

The KVB ensures that about 11 million compulsory and voluntary SHI-members in Bavaria can consult a physician or a psychotherapist of their own choice at any time and anywhere in the state. The KVB guarantees high quality of medical care and ensures that every patient can reach a doctor within a reasonable distance. It makes medical care available within and outside consultation hours and continuously works to improve medical services. The KVB represents about 26,000 doctors and psychotherapists and lobbies for preserving and improving the medical system.

Together with the National Association of Statutory Health Insurance Physicians (Kassenärztliche Bundesvereinigung, abbr. KBV or NASHIP) – the common association of the 17 regional ASHIPs that acts on the federal level – the KVB represents the political interests of all office-based physicians and psychotherapists in Bavaria and promotes doctors’ positions in legislative processes. In addition, the KVB negotiates and concludes contracts with the associations of the statutory health insurance funds on the state level.

On the federal level, the NASHIP concludes agreements with the national association of the statutory health insurance funds and other parties of the health care sector. Together with the statutory health insurers it devises and revises the office-based doctors’ fee schedule, the so-called Uniform Value Scale (EBM). As a member of the Federal Joint Committee (G-BA), the
supreme decision-making body of Germany’s self-governing healthcare system, the NASHIP belongs to those organizations that determine the list of services covered by the SHI.

**Statutory bodies of the KVB**

The KVB is legally obligated to have two organizational bodies: the assembly of delegates (Vertreterversammlung) and the executive board (Vorstand). Every six years all Bavarian office-based physicians and psychotherapists elect 50 representatives for the delegates’ assembly. Its main function is to decide on fundamental issues, guidelines, and regulations within the responsibility of the KVB. The delegates’ assembly elects the executive board which consists of three members.

The present chairman of the executive board is MD Wolfgang Krombholz. He is also responsible for care provided by general practitioners. MD Pedro Schmelz, the second member of the KVB board, is responsible for services provided by medical specialists. The third board member, MD Claudia Ritter-Rupp, is responsible for psychotherapists’ care. All together, more than 1450 people work for the KVB.