

The thesis analyses the healthcare system in Germany after the 1990s. The aim is to analyse the changes in the positions of insured persons within the system, as well as both internal and external factors which resulted in these changes. The role of insured persons is different than in the 1990s. Reforms and their impacts with regard to key players, especially patients are described in each chapter.

The analysis is divided into four chapters, which are dedicated to the system of insurance as such, the health care providers and the role of information for the insured persons, subsequently. At the end, the influence of reunification is analysed.

The thesis formulates conditions on which more responsibility and more decision-making opportunities are given to insured persons or taken away from them. Moreover, the role of external factors is described (e. g. the pharmaceutical industry, the development of media or macroeconomic development). Information sources used for the analysis derive from sickness funds, sickness fund unions, expert recommendations, legislation or programmes of political parties.

The thesis concludes that the role of sickness funds has been strengthened, but the utilization is not as rational as it seems and is inhibited by some other factors. In a broader context, the conclusions contribute to the debate whether the healthcare in Germany left the traditional Framework of Bismarckian social state or not.