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Summary:

Political science studies of the last few years show that the German and Austrian health care systems are rather reform-resistant. On the basis of the launch of electronic card systems in the German and Austrian health care system, this dissertation demonstrates that health policy reform steps are possible. Furthermore it uses a comparative research design to examine theories from the comparative policy research as well as from the public policy research. The theories are tested comparing Germany and Austria – two relatively similar structured states with relevant differences in the health policy. Through a qualitative content analysis according to Mayring and the evaluation of expert interviews, the determinants of health policy change are analyzed.

The results of this dissertation differ from previous empirical findings regarding reform possibilities and reform resistance. Hence, the study contributes to political science research due to its explanation of policy change.

The dissertation shows that a combination of theory modules from comparative policy research and public policy research can reasonably explain the introduction of electronic card systems in the German and Austrian health care system. The study shows that a rapid political change was possible in both countries, especially up until the implementation phase of the policy cycle. Changes in power relations, the distribution of power resources between interest groups in the policy field, former political decisions and self- reinforcing mechanisms, the commitment of "new" actors in the subsystem, as well as the bounded rationalities of political decision makers are the main reasons for initiating the launch of the electronic card system in the German and in the Austrian health care system.