

Social Health Insurance Reform: MONEF's position, roles of private sector

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Pressing issues

- Although compulsory, Social Health Insurance has not been accessible for all.
- People who are not covered by health insurance, do not have access to quality medical care.
- No monitoring for quality of drug.

Pressing issues (continuation)

- It is impossible for users to control quality and cost of medical care and service.
- Although some prevention services are financed by insurance, household hospitals are subsidized by government.

Pressing issues (continuation)

- Unequal awareness about quality and results of medical service among patients, insurance companies and hospitals.
- Unfairness (who will finance the costs resulted from wrong habits such as smoking, drinking, using drug and fattening etc).

Pressing issues (continuation)

- No incentives for being healthy.
- No sufficient medical services for elders as their problems are regarded “natural”.
- No consistency between doctors’ salary rate and their skills, outcome and quality.

Pressing issues (continuation)

- No decisions made on how to increase health insurance fund reserve and to manage better in order to prevent from risks.
- Weak social partners in health insurance sector.

Pressing issues (continuation)

- Out of pocket expense especially for medical care out of the country and for private medical care tends to raise however people are covered with health insurance.
- Resulting from the above, structure of source of finance for health protection is changed as following:
 - tax
 - Social health insurance
 - Direct financing
 - Voluntary or private health insurance
 - Donation or group health insurance

Purpose of the reform

- To develop health insurance system in accordance with users' demand

Principles

- Accessible for everyone
- Quality and efficient
- Risk sharing on the basis of finding consensus
- Equal responsibilities by stakeholders, fair financing to allow payment capacity
- Development of social partnership

Reformative recommendations

- Make social health insurance accessible for everyone
- Support competition
- Improve management of health insurance fund
- Broaden role of health insurance organization
- Strengthen capacity of social partners of health insurance

Accessible social health insurance

- To finance household hospitals from health insurance
- Raise insurance payment up to 4 % of legal minimum wage for those whose insurance payment is made by government

Supporting competition

- Support private hospitals
- Improve competitiveness of government owned hospitals
- Ensure fair competition in pharmaceutical sector

Improve management of health insurance fund reserve

- Have private sector be responsible for management of health insurance fund reserve
- Establish a structure to monitor over company managing the health insurance fund reserve

Broadening of role of health insurance organization

- Rationalize cost and types of medical service, change infrastructure and organization
- Establish evaluation system for cost and quality of medical service
- Establish electronic information system
- Create special health insurance for people 65 and older

Strengthening capacity of social partners in health insurance

- Strengthen government capacity
- Strengthen private sector capacity
- Strengthen users' capacity

Thank you!