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!