Health Insurance System Research Office
Health System Research Institute

Thailand's Universal Health Coverage

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Country profiles: Thailand

- Constitutional monarchy in Southeast Asia
- Population - 67 million
- Unemployment rate is 1.4%
- GDP per capita (PPP US $) 8,703(2011), Gini 40
- Total Health Expenditure (PPP US $) 330 (2010)
  - Sources: Public 65%, SHI 8%, Private 25%, OOP 14% of THE,
  - GGHE 13.1% GGE
- Health status
  - Total fertility rate 1.6 (2010)
  - Life expectancy at birth 74.1 years
  - U5MR 14/1000
  - MMR 48/100,000
- Physicians per capita 4/10,000
- ANC & hospital delivery 99-100% (2009)

What is the Universal Coverage Scheme?

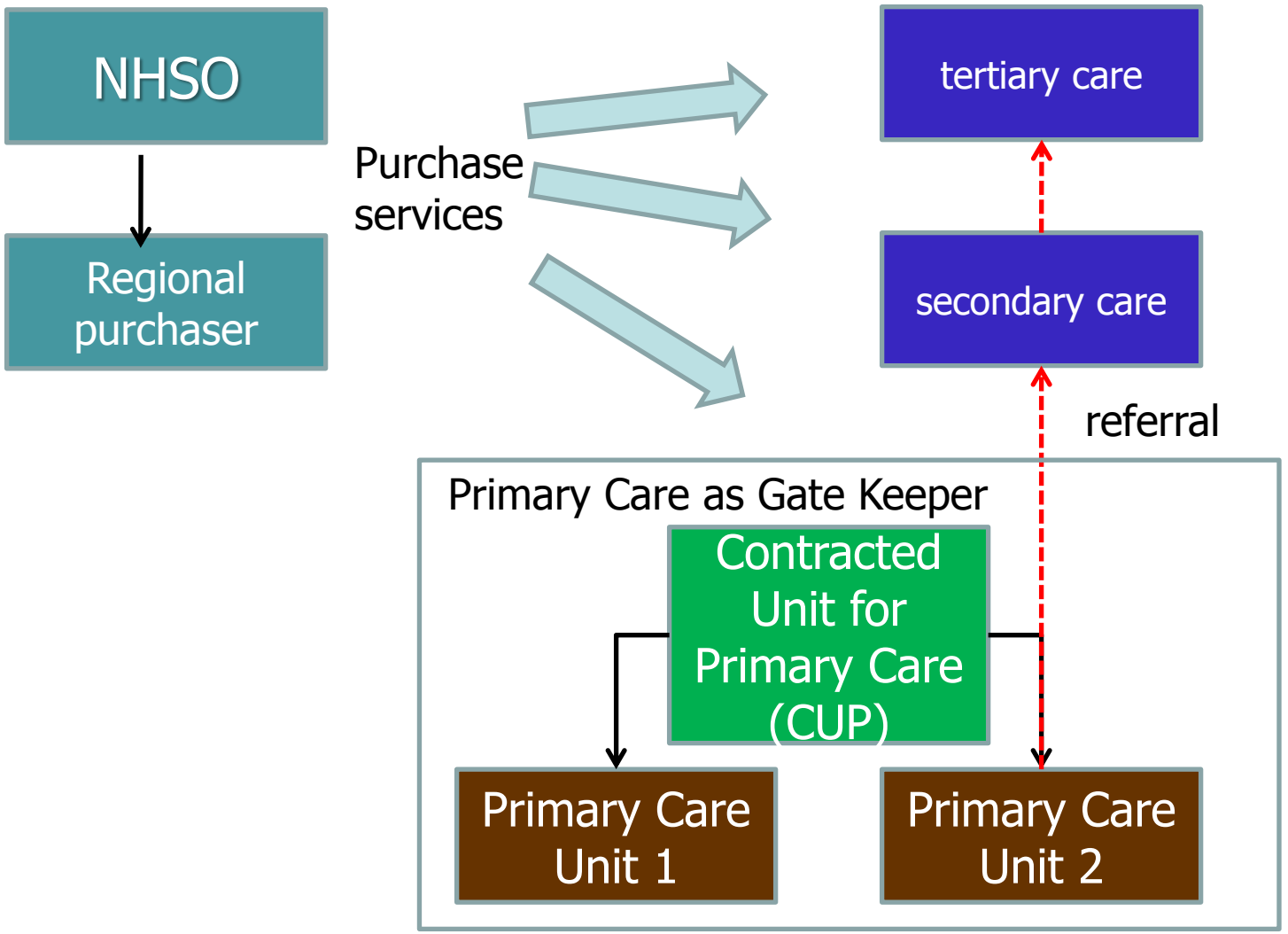
Thai citizen have enjoyed "Universal Health Coverage" since 2002

Major Schemes	Civil Servant Medical Benefit Scheme (CSMBS)	Social Security Scheme (SSS)	Universal Coverage (UCS)
Introduced in	1960s	1990s	2002
Target beneficiaries	Govt employees & dependents, retirees	Private sector employees:	To whom which not covered by CSMBS nor SHI,
Pop Coverage	7%	16%	75%
Funding	Govt budget (Tax)	Payroll contribution, Tripartite (Social Health Insurance)	Govt budget (Tax)

What is the Universal Coverage Scheme?: Comprehensive Benefit Package

- Promotive and preventive services
- Diagnosis
- Ante-natal care
- Curative care
- Medicine, medical supplies, organ substitutes, and medical equipment
- Delivery
- Boarding expenses within health care unit
- Newborn and child care
- Ambulance or transportation for patient
- Transportation for disabled person
- Physical and mental rehabilitation
- Other expenses necessary as prescribed by the Board.

What is the Universal Coverage Scheme?: Purchaser Provider Split with Gate Keeper



Enabling Factors for the Universal Coverage Scheme

- State commitment to health
  - Socioeconomic (growth & poverty reduction)
  - Human rights -> Legitimacy -> constitution
- Centralized (Public) health care coverage plan
- Planning and utilization of human resources
- Improvement of institutional capacity on health systems:
  - health systems research, health care financing, model development
- Support and collaboration with health care professionals, civil societies and politicians

State Commitment to health

User fees
1945

Exemption

1970

Establish Prepayment

1990

Expand Prepayment

2000

Universal Coverage of Health Care

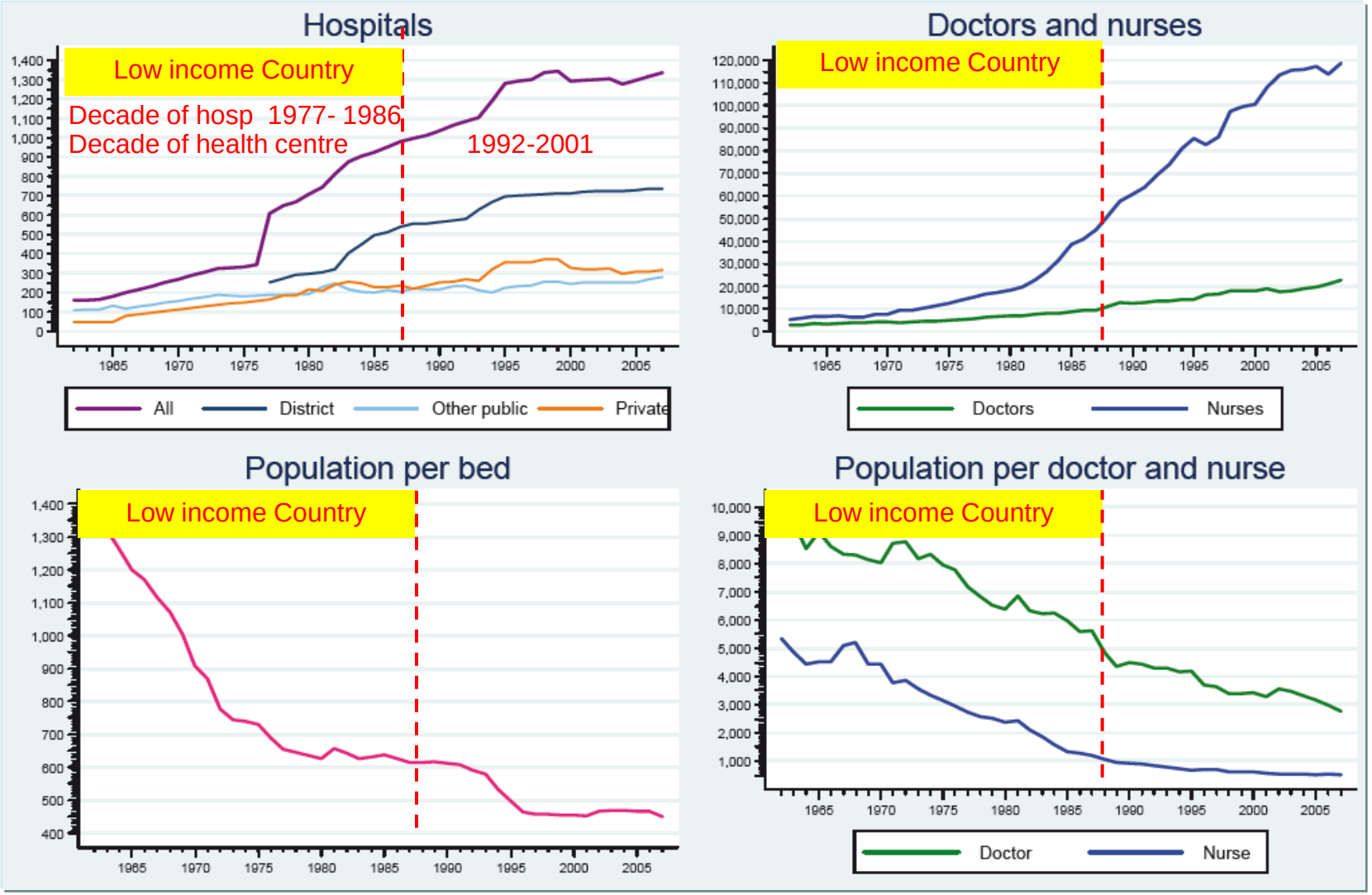
2002

Social Health Protection Scheme

Out of Pocket Payment

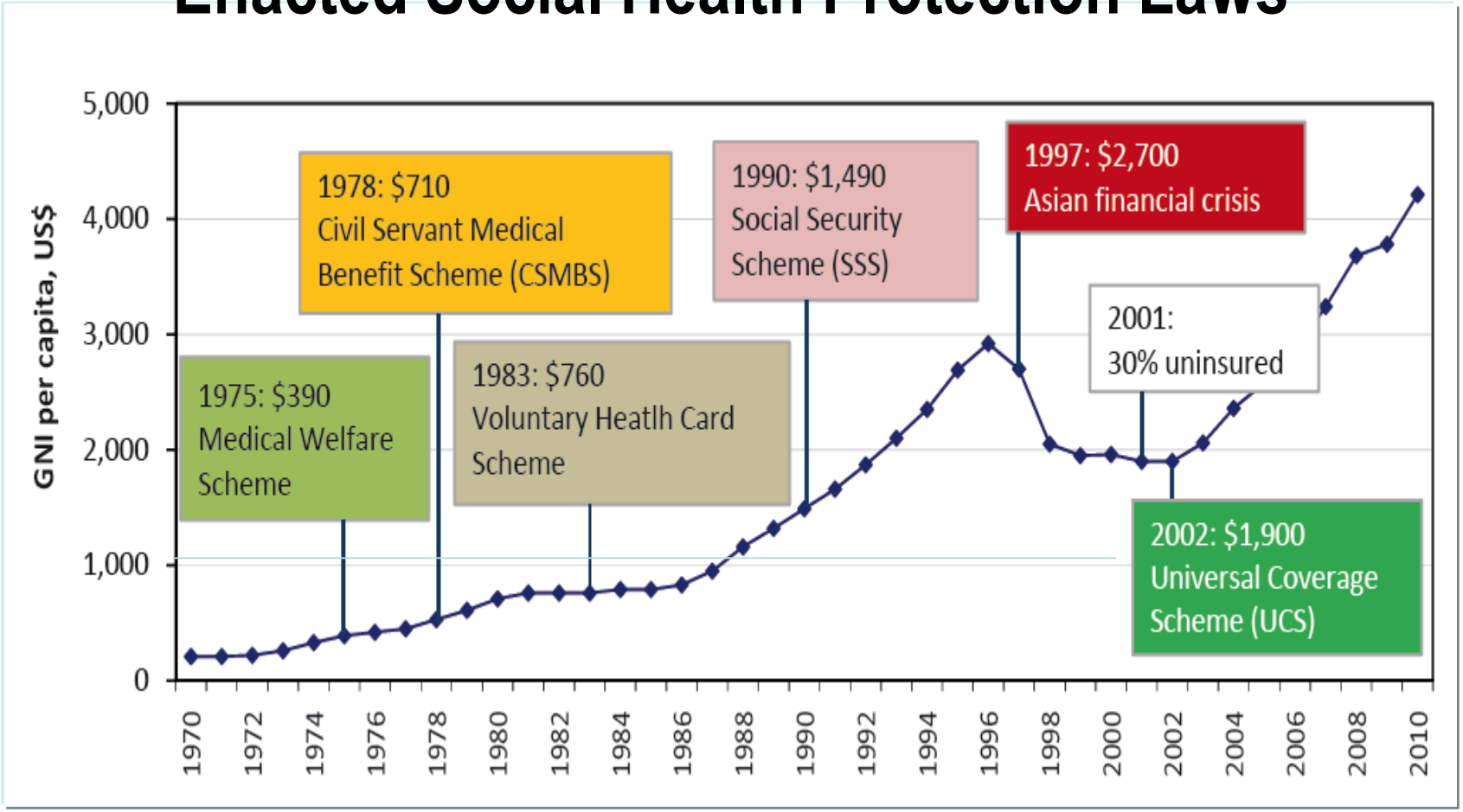
Health Care Facilities and Personals

State Commitment to health: (Public) health care facilities



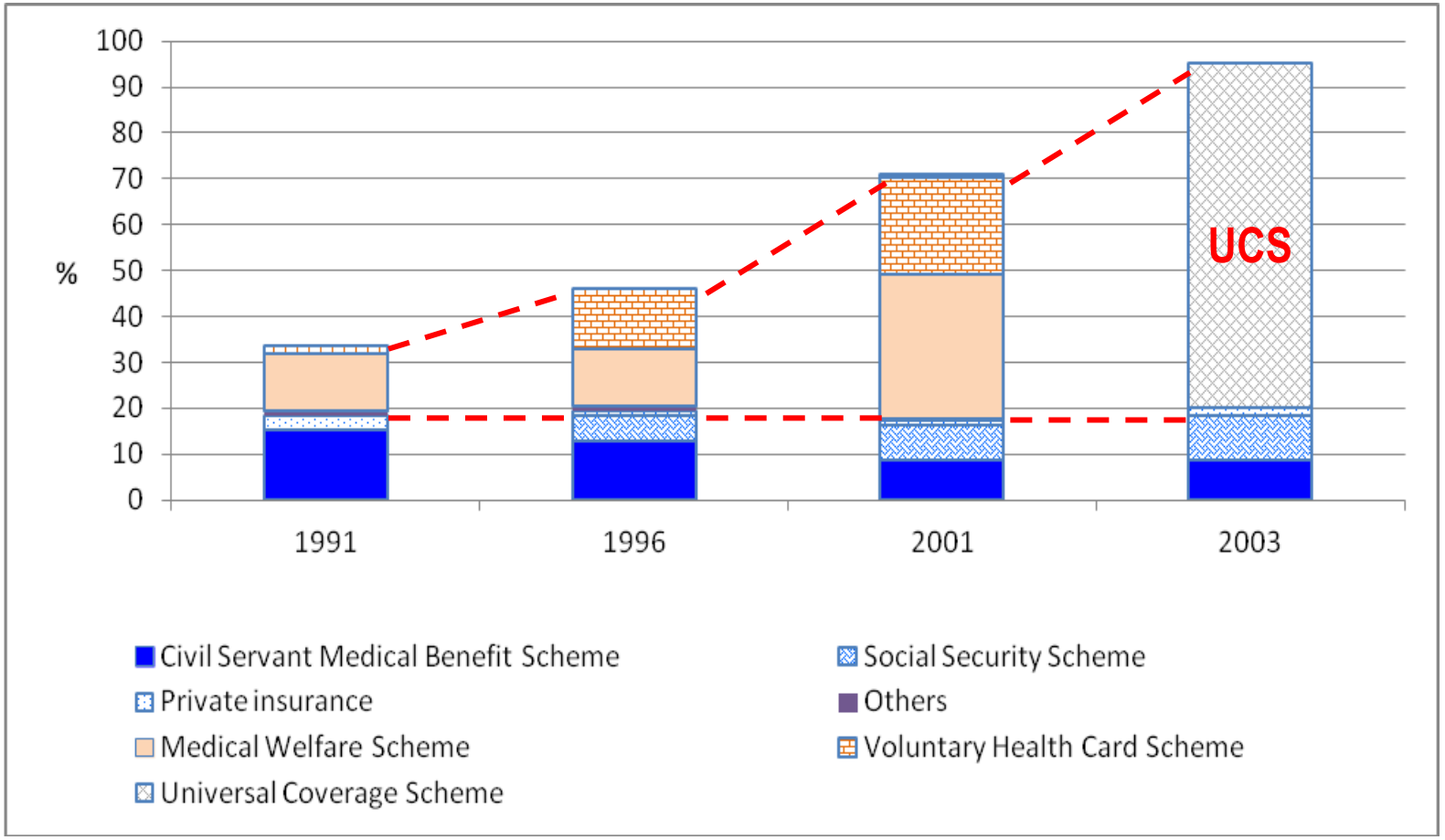
Source: Patcharanarumol W et al (2011). Why and how did Thailand achieve good health at low cost?10

State Commitment to health:
Enacted Social Health Protection Laws



Source: HISRO (2012) Thailand's Universal Coverage Scheme: Achievements and Challenges. An independent assessment of the first 10 years (2001-2010).

State Commitment to health: Increasing of Coverage



Source: National Statistics Office, the Health and Welfare Surveys in 1991, 1996, 2001 and 2003.

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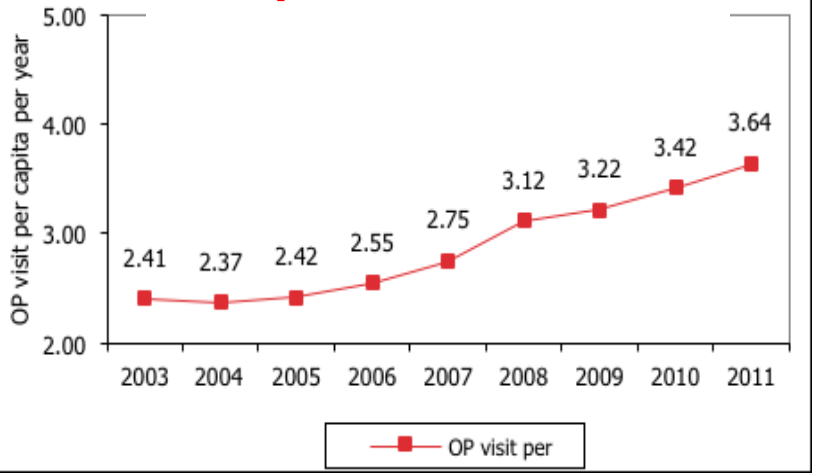
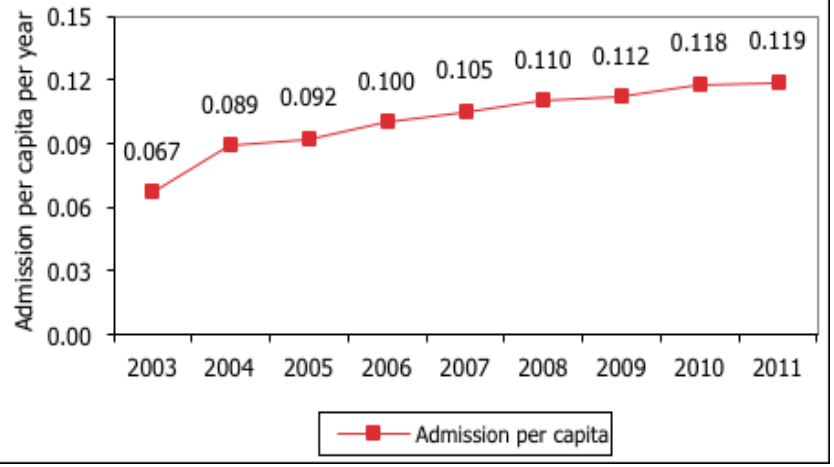
Increased Access and Health Status

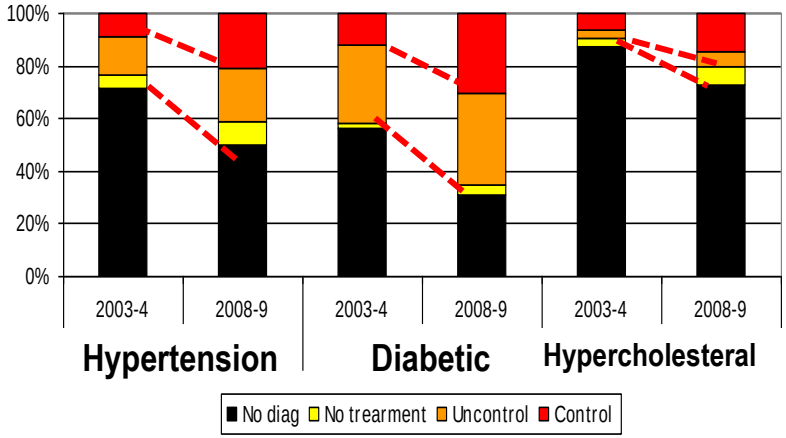
Out-patient utilization



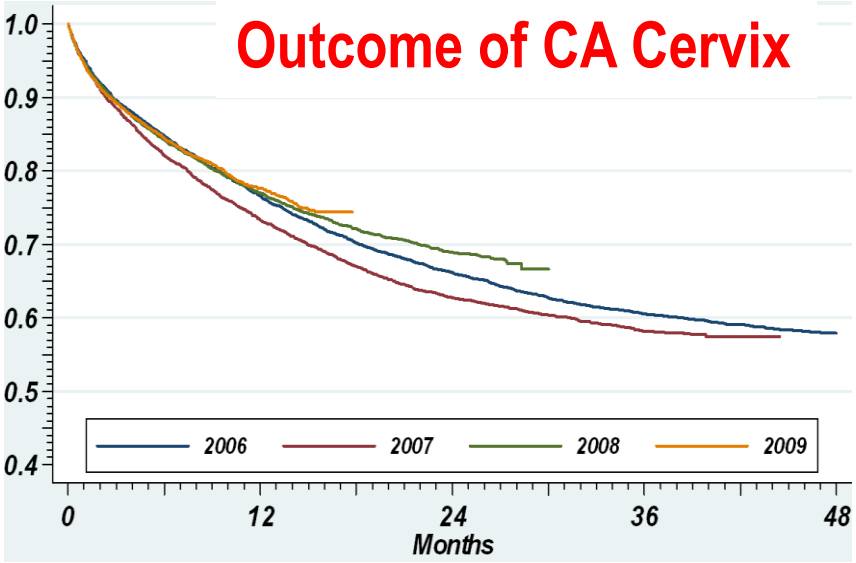
In-patient utilization



Outcome of HT, DM Services



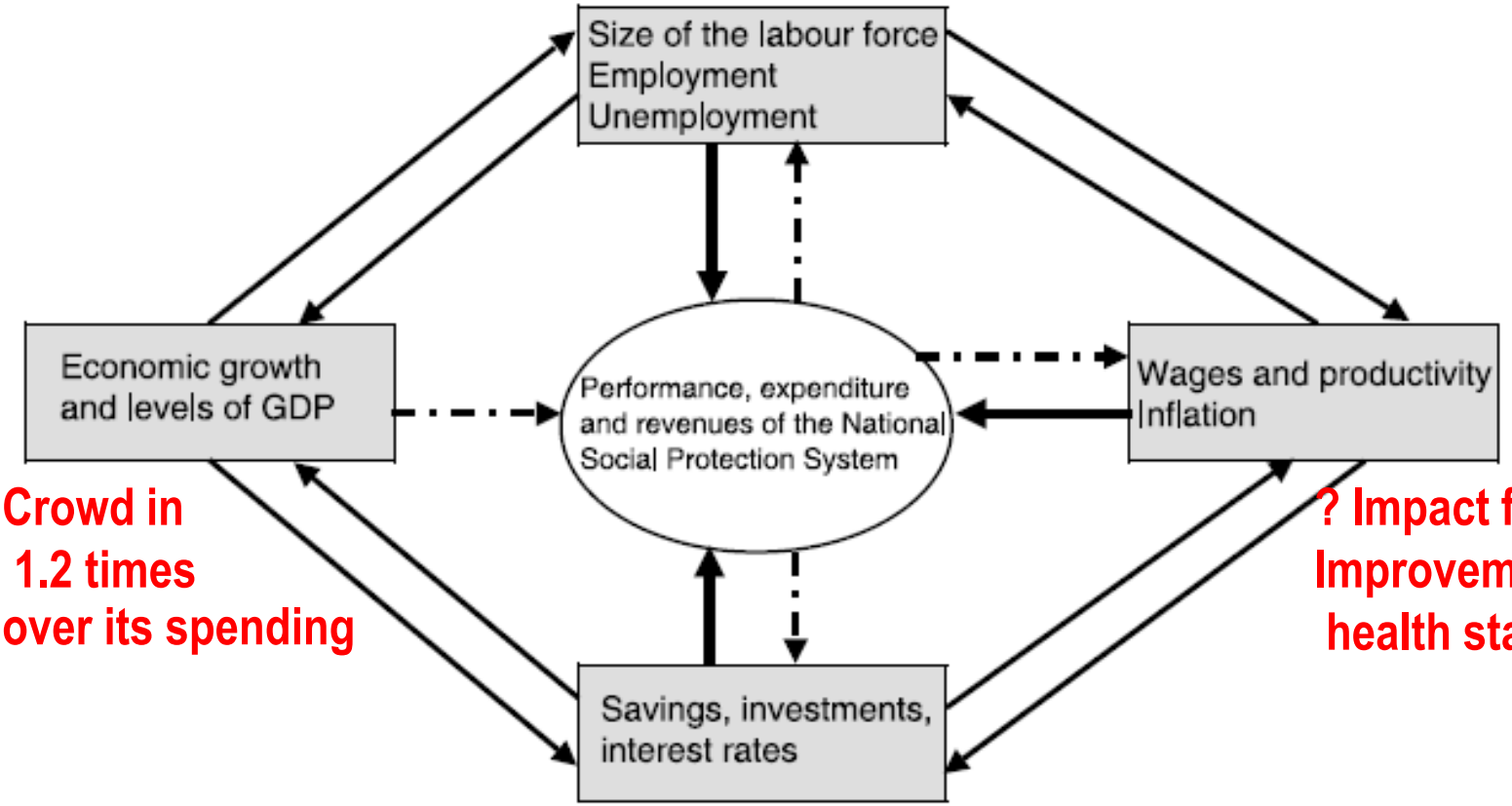
Outcome of CA Cervix



Source: National Health Examination Survey 2003-2004. 2008-2009, Administrative data of UCS various years

Positive Economic Impact of the UCS

? Impact to labour market

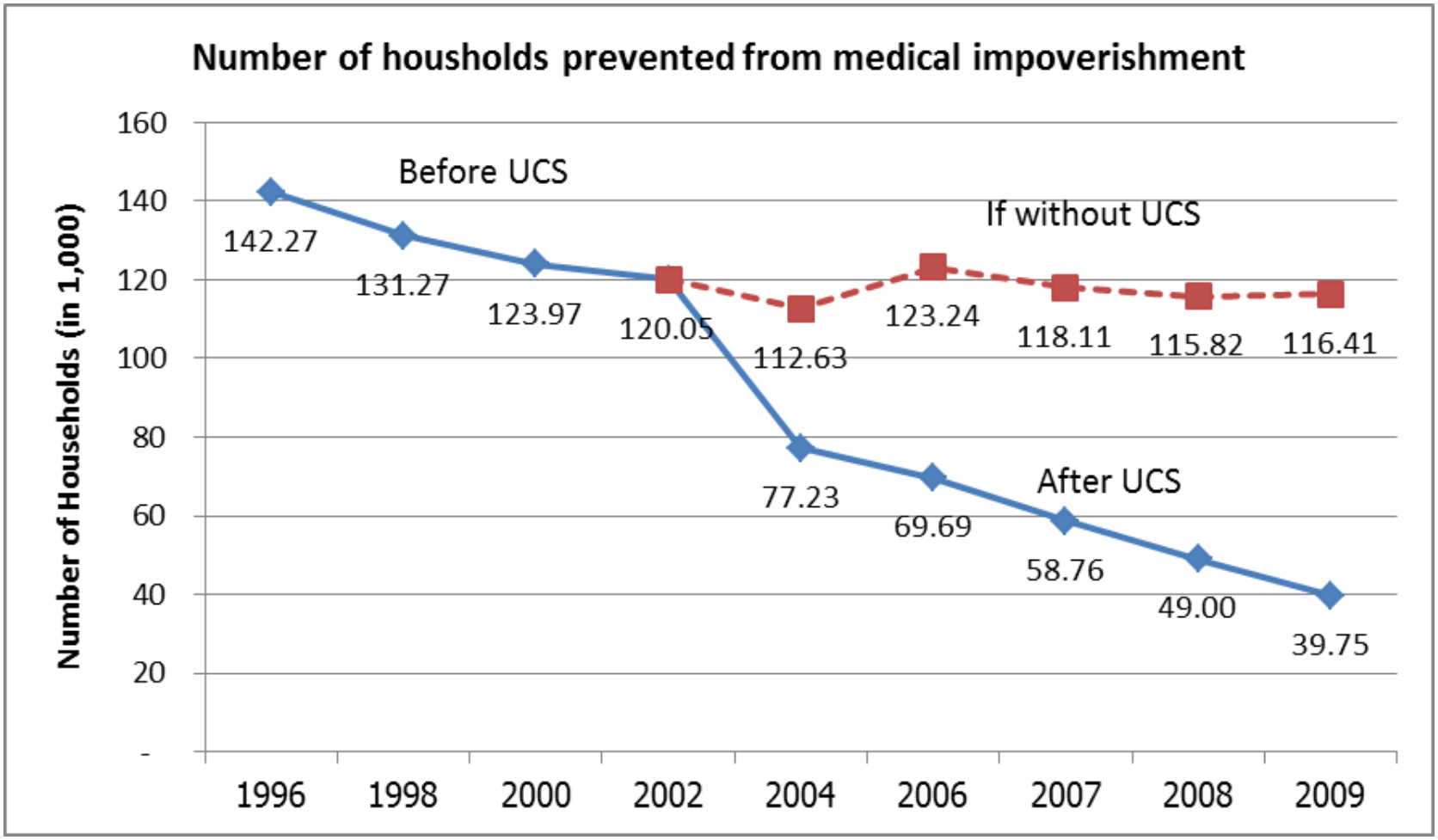


Crowd in 1.2 times over its spending

? Impact from Improvement of health status

Does not have effect on the precautionary savings

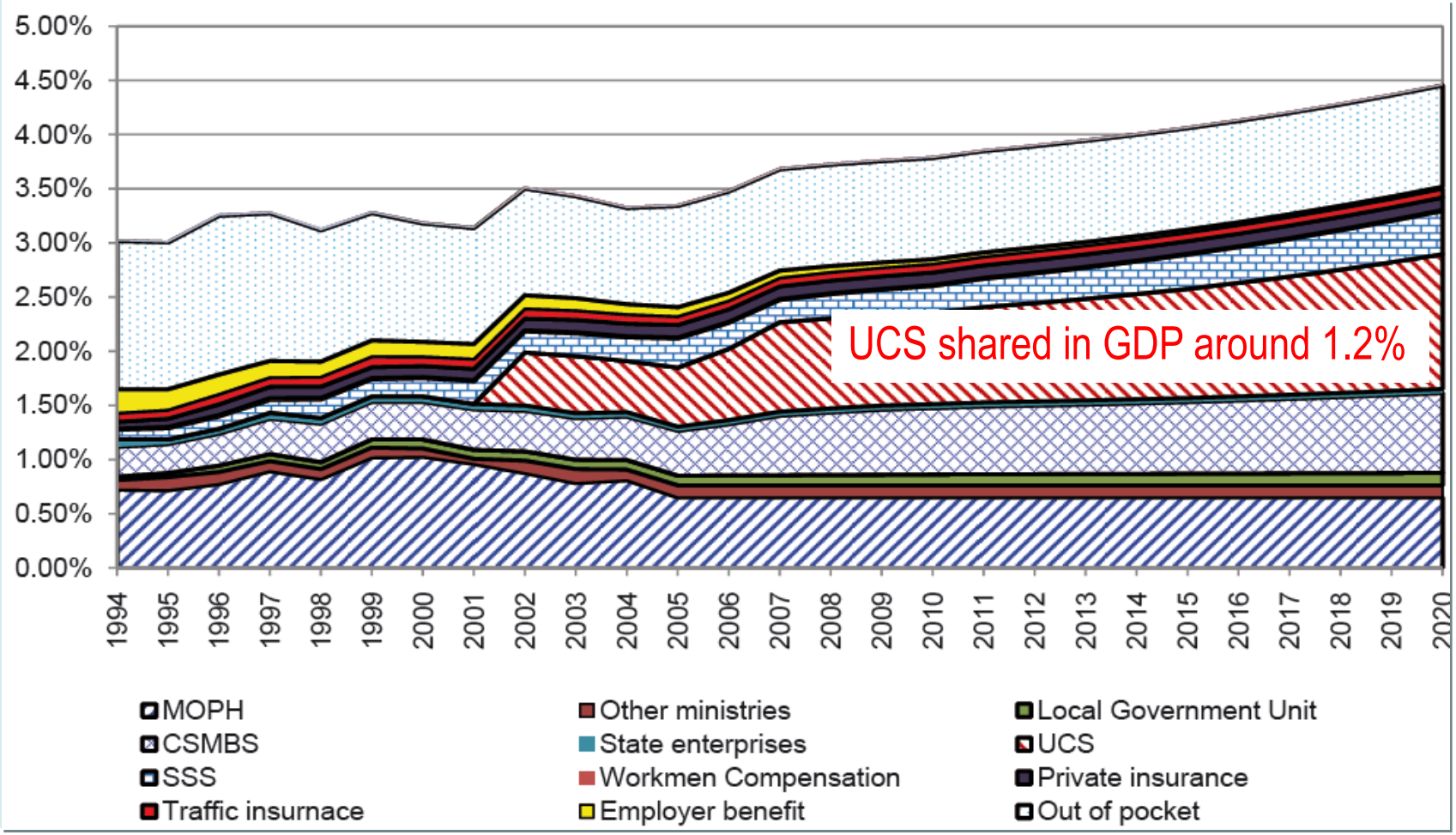
UCS prevented medical impoverishment



Source: HISRO (2012) Thailand's Universal Coverage Scheme: Achievements and Challenges. An independent assessment of the first 10 years (2001-2010).

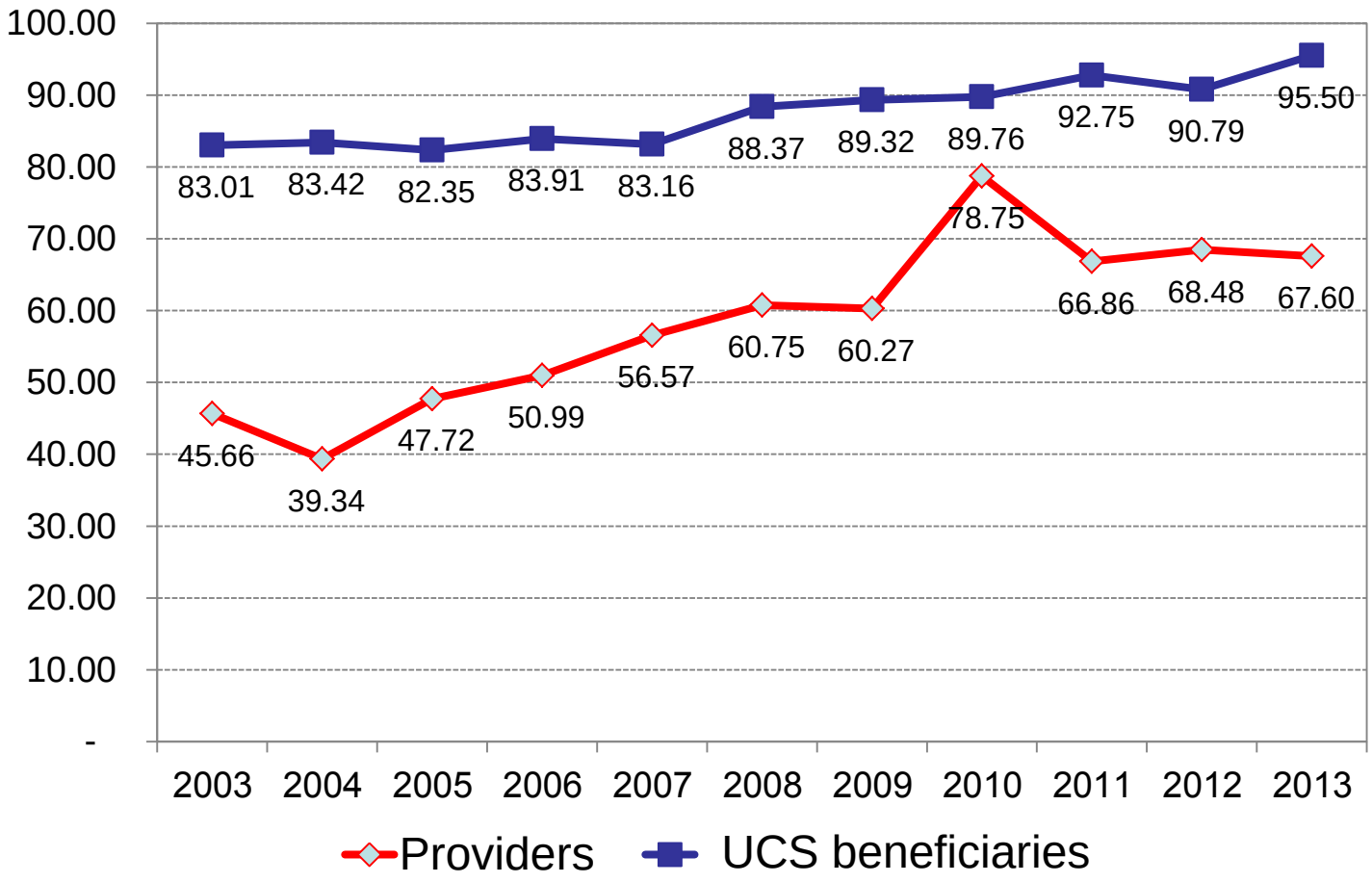
Financial Sustainability

Projection of Total health expenditure as Percentage of GDP is not high



Source: Hennicot JC, Scholz W and Sakunphanit T. Thailand health-care expenditure projection: 2006–2020. A research report. Nonthaburi, National Health Security Office, 2012

Social Sustainability



Source: Satisfaction survey of NHSO (Various Years)

Challenges and The Way Forward

- Harmonized social protection schemes
  - Multiple schemes using the same payment mechanisms
  - Identify basic health care package and harmonized them e.g. life saving and high cost care among three schemes
- More efficient and improved quality health care
  - More “efficient” public providers & Public-Private Partnerships
- Mitigate and cope with Aging Society

Thank You