

THE EFFECT OF HEALTH INSURANCE ON QUALITY OF CARE:
A CASE STUDY OF VIET-TIEP HOSPITAL
IN HAIPHONG, VIETNAM



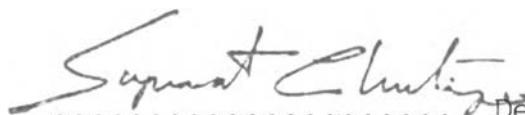
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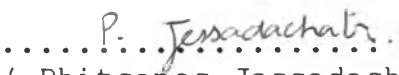
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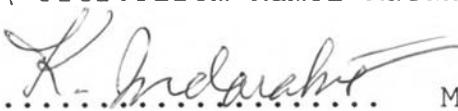

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The main objective of this study is to compare the quality of care between the insured patients and the non-insured patients at Viet-Tiep hospital in Haiphong, Vietnam. The secondary objective is to study the factors affecting on the quality of care under the health insurance scheme.

The quality of care was assessed by the process and outcome approaches. The process of care was assessed by analyzing the medical records at IPD and analyzing the prescriptions at OPD. For inpatient care, the medical procedures and length of stay were used as indicators for assessing the quality of care. For outpatient care, the prescribing practice was considered. Patient satisfaction was used to evaluate the outcome of care provided by the hospital at both OPD and IPD.

For inpatient care, there was no significant difference about medical procedures between the insured and the non-insured patients. The length of stay of the insured was longer than of the non-insured. The medical costs for the insured were higher than for the non-insured. For outpatient care, the prescribing practice of doctors for the insured was better than for the non-insured since the number of items prescribed and average cost per encounter were lower while the proportions of drugs prescribed by generic name and from the essential drug list were higher. At the same time, there was no difference in terms of the conformity to the standard treatment between the insured and the non-insured. Due to no available data, the analysis of factors affecting the quality of care of insured and non-insured patients is only for the purpose of demonstration, based on hypothetical data.

This study may provide information about quality of care under health insurance schemes from different perspectives. From the professional perspective, the quality of care was not different between the insured and the non-insured patients at both OPD and IPD. However, it can be differently perceived by the insured patients and the non-insured patients. For the health insurance agency, the increasing trend of medical costs for inpatient care leads to a concern about inefficiency. Some measures were recommended in this study in order to control medical costs at IPD including co-payment pattern and a list of drugs used under health insurance schemes. The assessment of quality of care would be improved in further studies.

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ABBREVIATION

CHI	Compulsory health insurance
VHI	Voluntary health insurance
MOH	Ministry of health
WHO	World Health Organization
OPD	Outpatient department
IPD	Inpatient department
URI	Upper respiratory infection
LOS	Length of stay
CSP	Percentage of conforming standard procedures
CSD _I	Percentage of conforming standard drug prescription for inpatients
CSD _O	Percentage of conforming standard drug prescription for outpatient