

Health Insurance and Quality of Care

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Financial Access Initiative

Research Project

Does participation in a health insurance scheme affect the quality of care received by households?



The Question

- Benefits of health insurance
 - Risk management, financial protection
- What about quality of care?

Does participation in an health insurance scheme

- change clients' health seeking behavior?
- provide clients access to better providers?
- improve service delivery by provider?

The Setting

- Pune, India
- Uplift Health
 - Health Mutual Fund
- Parvati and Annapurna
 - NGO MFIs
- How do they operate?
 - Network of providers
 - Medical advice



Research Design

- Compare experiences of insured and uninsured
 - Comparing clients with four common procedures requiring hospitalization: C-section, appendectomy, hysterectomy, hernia surgery
 - Insured
 - Find claims for surgical treatments within past year
 - Uninsured
 - Within community
 - Conscious of potential selection problems
- * Small sample (53 – 29 insured, 24 uninsured)
- * Starting point to further research

What is quality of care?

Donabedian Framework

STRUCTURE

- Accessibility of inputs
 - Infrastructure
- Availability of staff and equipment

PROCESS

- Accuracy of diagnosis
 - Quality of curative process
- Information sharing

OUTCOME

- Improvement in health condition
 - Patient satisfaction

Data Collection

- MFI & insurer interviews
- Patient interviews
- Health provider interviews
- Infrastructure assessment checklist
- Patient files

Measure quality of care

Patient Assessment

- Patient experience
- Patient satisfaction index

Objective assessment of provider quality

- Knowledge skills matrix for providers
- Infrastructure checklist
- Benchmark treatment comparison

Methods

- Qualitative interviews & comparisons
- Non-parametric testing of large observed differences
 - Wilcoxon & Fischer's Exact Tests

Preliminary Results from ongoing analysis

Sample Characteristics

Comparability of Insured vs. Uninsured Groups

– Similar in terms of:

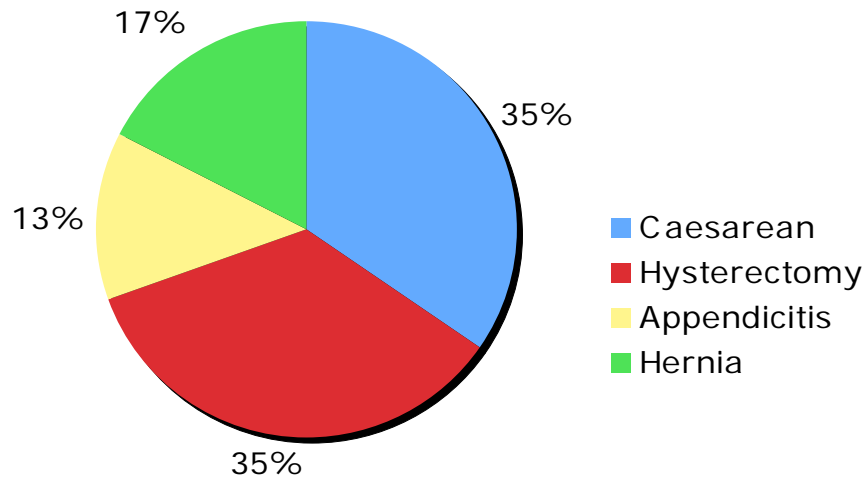
- Household income
- Education level (patient, head of household, and female head of household)
- Gender
- Occupation

– Differences:

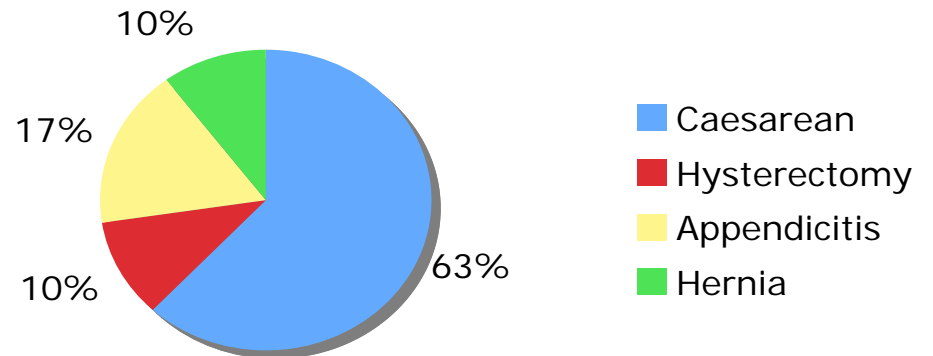
- Over-representation of Caesarian patients in Insured Group
- Age lower in insured (28 years) than uninsured (38 years)
 - Driven by the number of caesarian patients in sample

Disease Composition

Uninsured Clients: Breakdown by Disease



Insured Clients: Breakdown by Disease



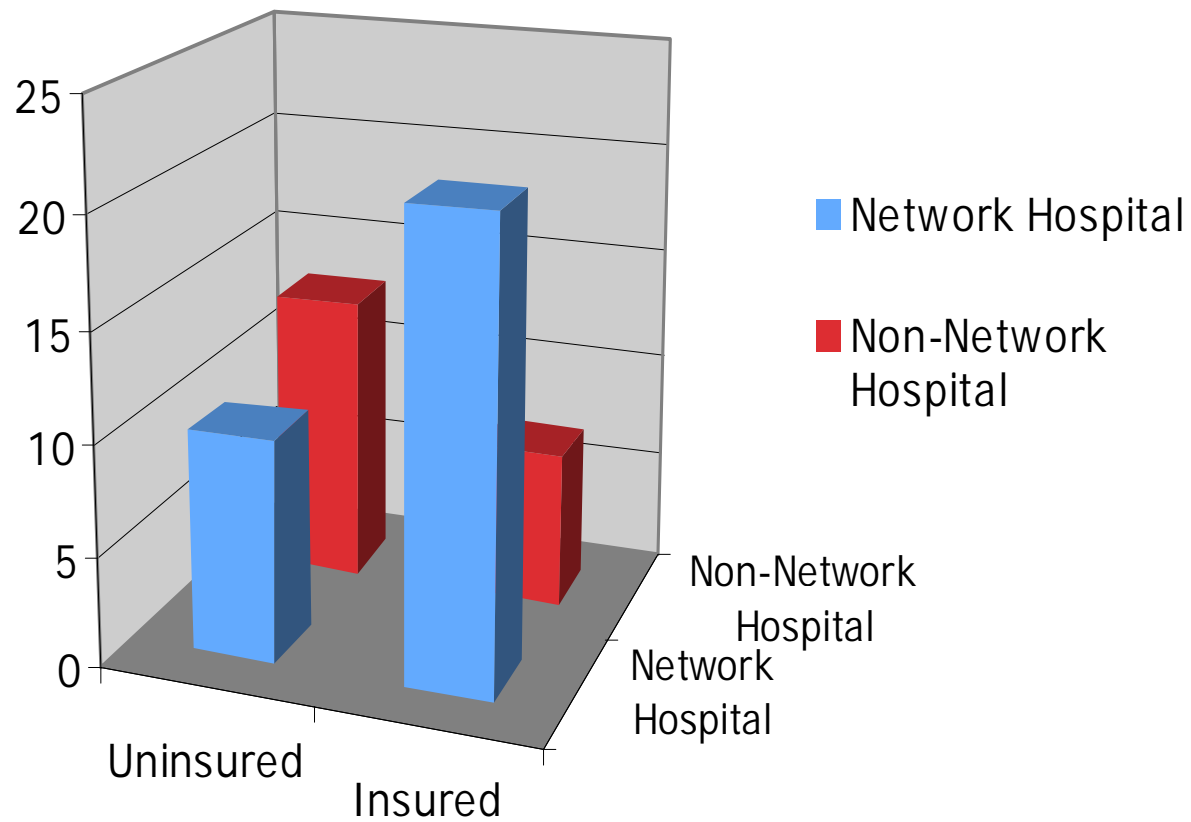
Provider Selection: Who?

Primary doctors

- Uninsured mostly go to private clinics first (21 to private clinics, 2 to hospital)
- Insured are split between private clinics and hospitals (16 to private clinics, 11 to hospital)
- Insured diagnosed more accurately (85% insured vs. 60% uninsured)
- Accuracy also varies by disease – hernia is frequently misdiagnosed

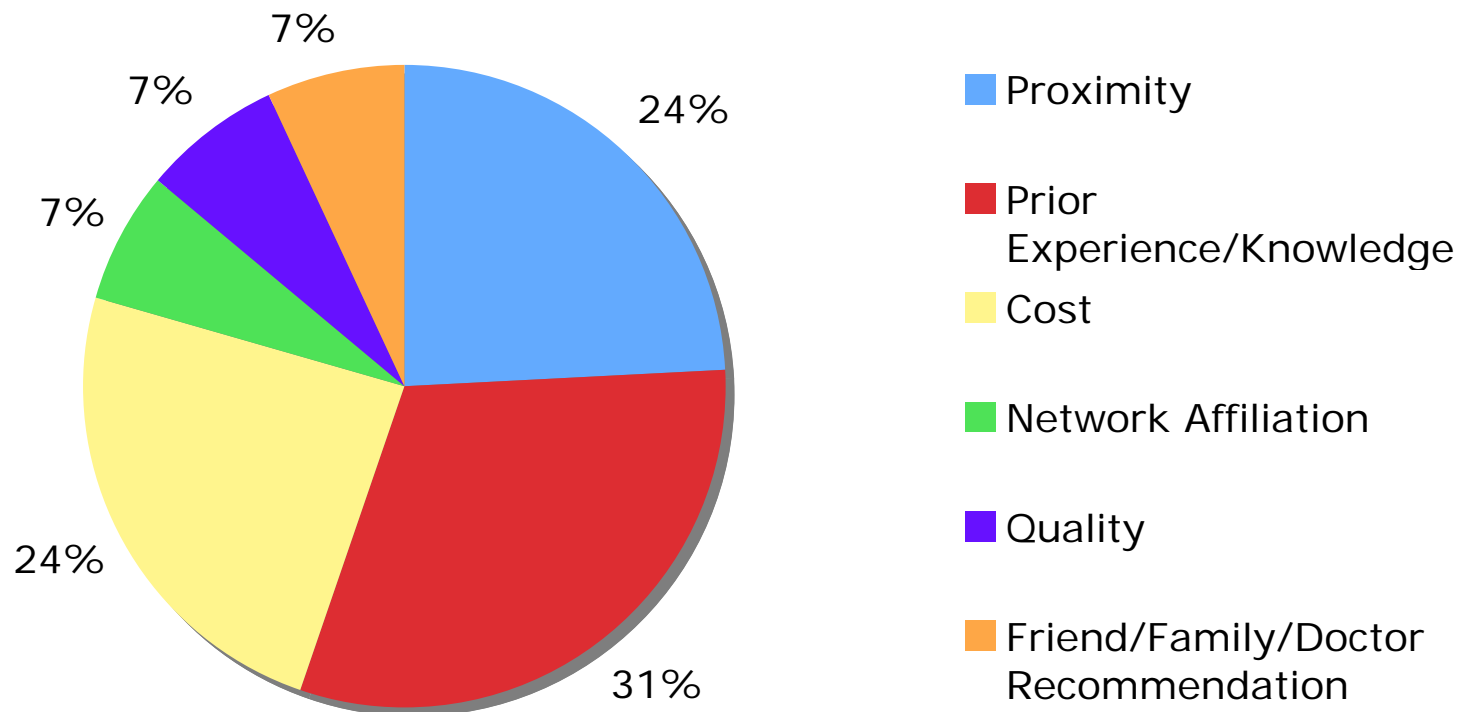
Provider Selection: Who?

Provider Type by Insurance Status



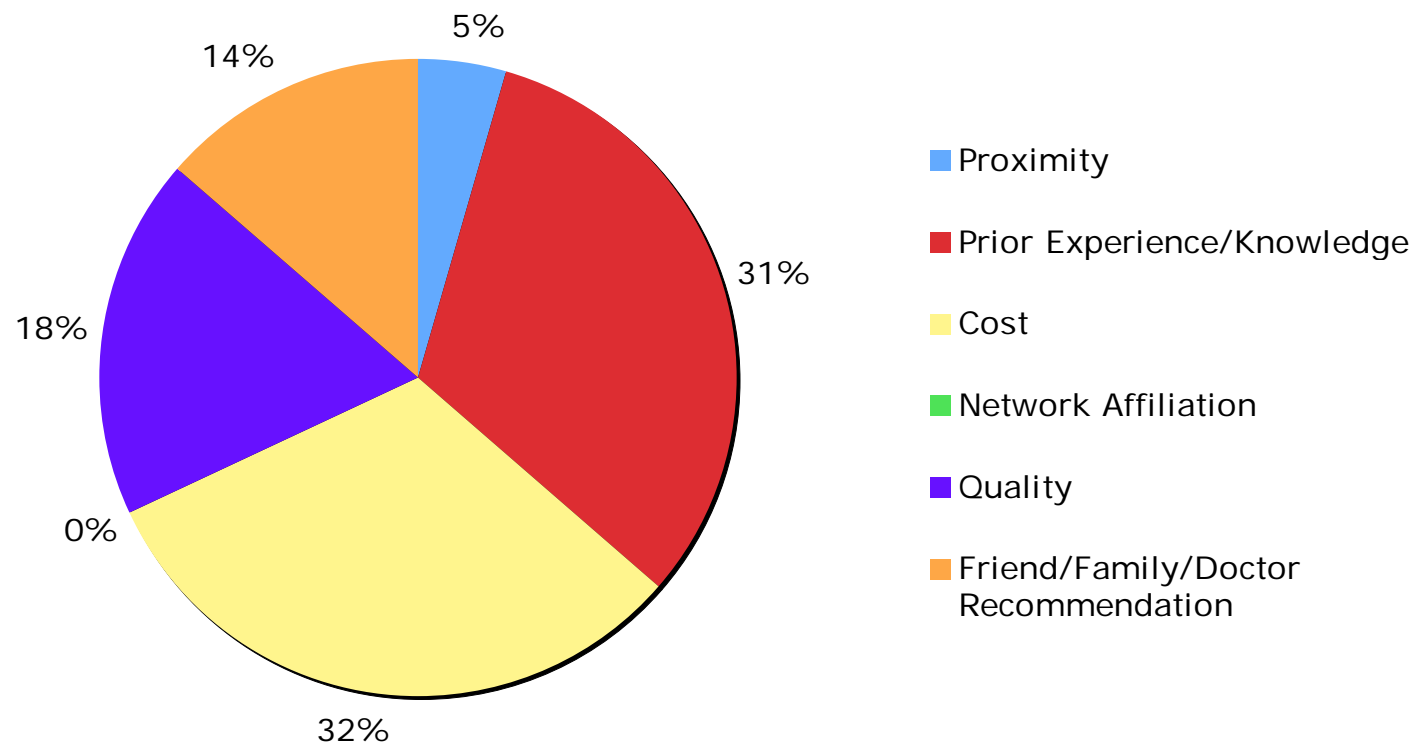
Provider Selection: How?

Reasons Insured Pick Providers



Provider Selection: How?

Reasons Uninsured Pick Providers

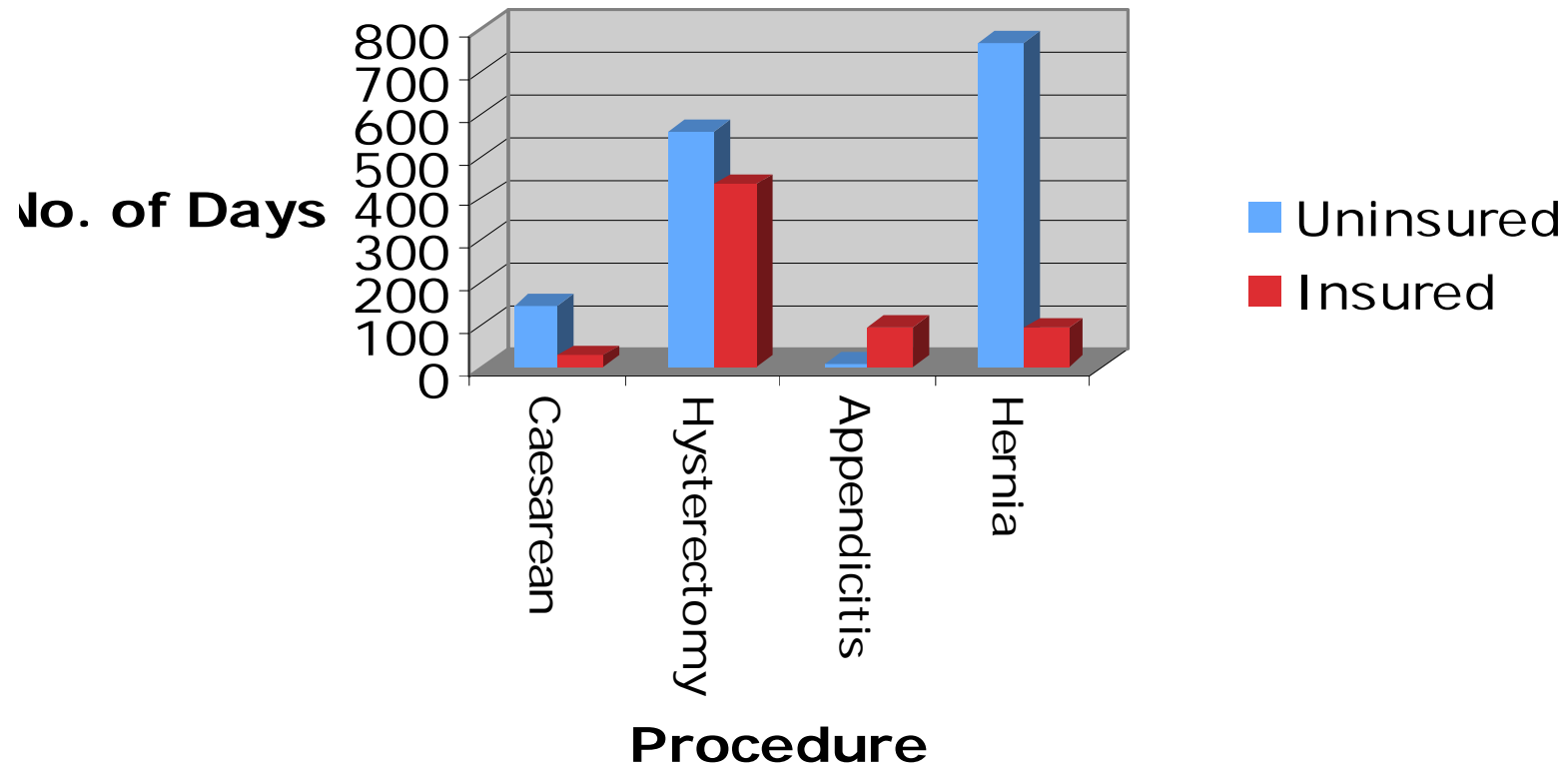


Provider Selection: When?

- Both groups wait approximately the same number of days before consulting with their primary doctor
- However, uninsured patients wait longer to go to the hospital after experiencing symptoms

Provider Selection: When?

Days Between Symptoms and Approaching Hospital



Costs

- Network hospitals are cheaper than non-network hospitals for three of the diseases, without considering reimbursements

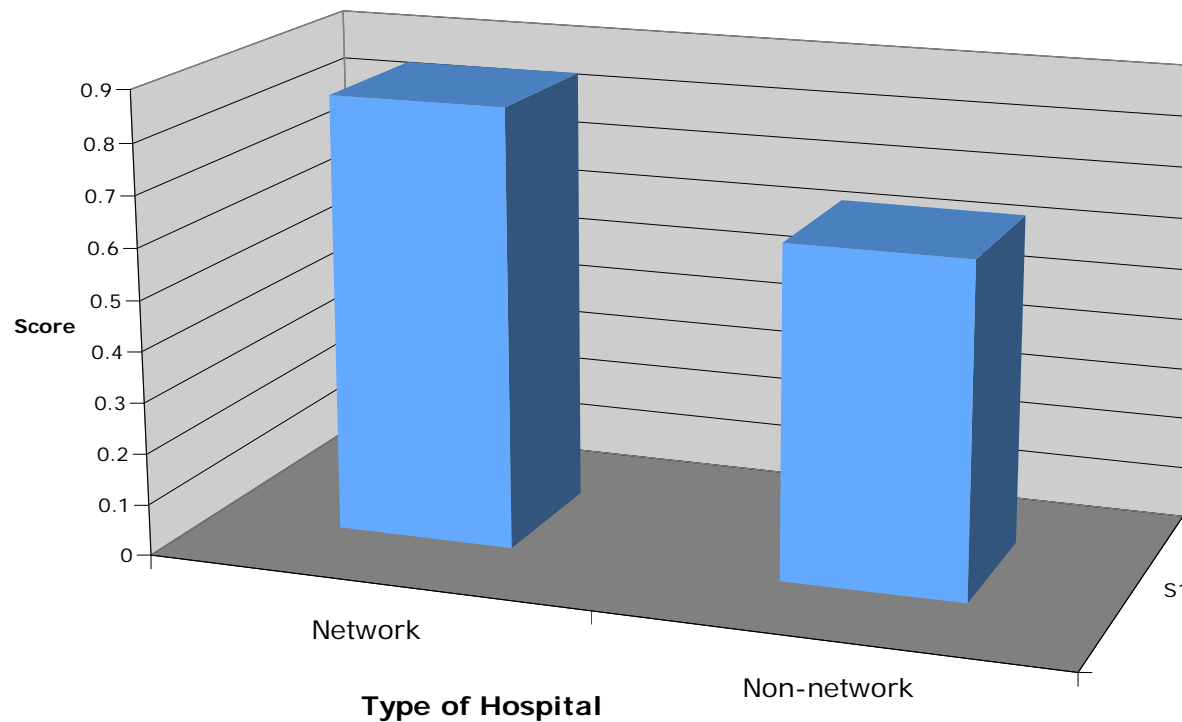
Disease	Uninsured	Insured
Caesarean	INR 18,700	INR 16,700
Hysterectomy	INR 26,500	INR 22,000
Appendicitis	INR 14,200	INR 18,100
Hernia	INR 18,600	INR 11,600

Financing

- Savings –first option, but not enough
- Advance from work
- Borrowing from family/friends
- Borrowing from moneylenders

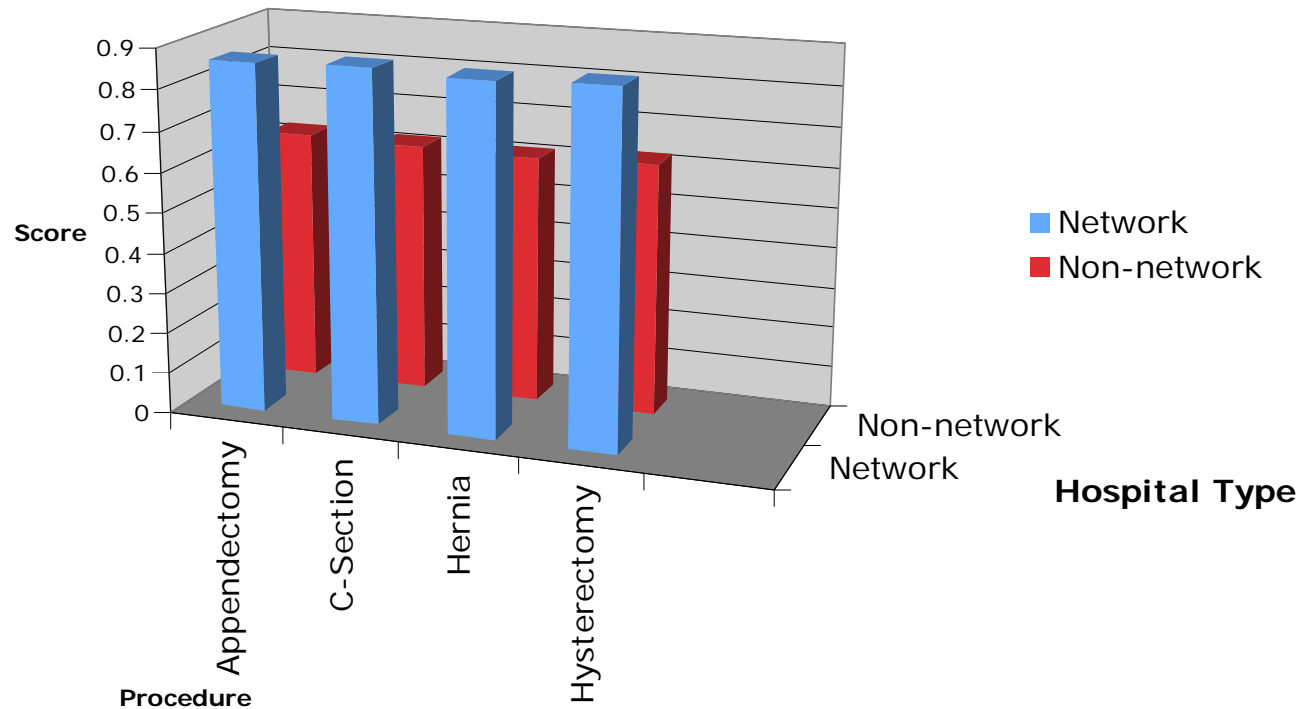
Quality Measures: General Infrastructure

Multi-Procedure Hospital Infrastructure Score



Quality Measures: Procedure-Specific Infrastructure

Procedure-Specific Infrastructure Scores for Hospitals

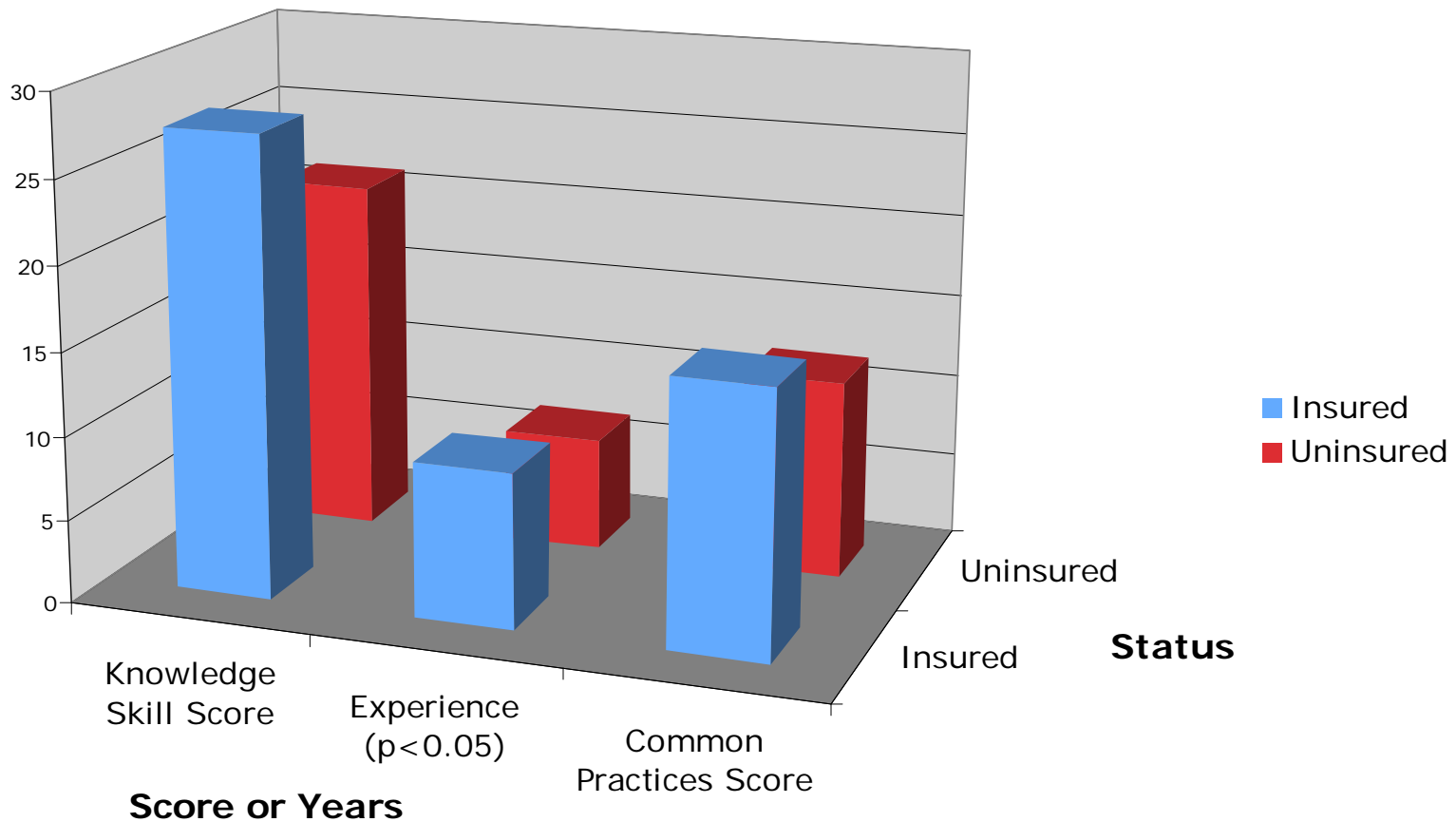


Quality measure: Knowledge Skill Matrix

- Doctor interviews at both network and non-network hospitals
- Knowledge Skill Matrix
 - Provider questionnaire on operating procedures
 - Years of experience
 - Qualification

Quality Measures: Knowledge Skills Matrix

Provider Quality Scores



Quality Measures: Patient satisfaction

- “Likert” Scale



- Categories

- General infrastructure facilities
- Health care infrastructure facilities
- Health personnel
- Medical treatment
- Equality in treatment

- Health outcomes

Quality Measures: Patient satisfaction

- Patient satisfaction is similar for both groups
- Health outcomes after procedure are similar for both groups

Preliminary Emerging Themes

- Having health insurance impacts which hospitals you go to and when you decide to go
- Insurance scheme included better quality providers as well as effectively guided people to use them
- Insured pay less for healthcare than uninsured for most parts
- Patient satisfaction and reported health outcomes similar

Going Forward

- Will look at:
 - Professional evaluation of patient files to evaluate the medical techniques employed