

# **Feasibility Study on the Replacement of Individual Account by Overall Planning of Medical Insurance Outpatient Service**

## **—Based on the Investigation of Jinan City, Shandong Province**

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### **ABSTRACT**

With the gradual improvement of China's medical security system, the role of outpatient co-ordination is becoming increasingly significant, and personal accounts will gradually lose their value. Outpatient co-ordination is a kind of medical security form that expands the scope of security and improves the level of security in the current medical insurance system. Although it is in the pilot stage at present, it will be an inevitable trend with the improvement of medical insurance financing ability and the increase of medical insurance fund balance. Based on Jinan City, Shandong Province, this paper uses the method of questionnaire survey to investigate the feasibility of replacing individual account with outpatient co-ordination, which mainly involves three aspects: the implementation status and existing problems of individual account, the implementation status and current deficiencies of outpatient co-ordination, and the gradual improvement and Optimization Reform of outpatient co-ordination.

**Keywords:** *employee medical insurance, personal account, outpatient co-ordination, feasibility*

## **1. INTRODUCTION**

According to the data released by the National Bureau of statistics, by the end of 2017, the number of urban employees covered by basic medical insurance was 303.227 million, and the accumulated balance of urban employees' medical insurance fund was 1585.1 billion yuan, a year-on-year increase of 22.2%. [1] This situation shows that China's employees' medical insurance participation base is large, and the accumulated amount of individual account funds is large, while the overall planning fund is facing the risk of "wearing the bottom", so it is difficult to improve the level of medical insurance. How to reform the individual account and improve the quality of medical service with the surplus funds in the individual account of active employees' medical insurance is an important issue that we should pay attention to. In the face of the above situation, the government has gradually implemented the trend of outpatient co-ordination to replace individual accounts. In 2009, the Ministry of human resources and social security and other three ministries and commissions issued the guiding opinions on the development of urban residents' basic medical insurance outpatient co-ordination, which clearly defined the basic principles of the development of residents' medical insurance outpatient co-ordination, and put forward specific requirements for financing, security

scope, medical treatment and settlement management. To sum up, there are drawbacks and problems in individual accounts, while the reform of outpatient co-ordination is still in the theoretical and pilot stage. Facing the severe situation caused by the difficulties in maintaining and increasing the value of individual accounts of medical insurance, and the risk of "underperforming" in co-ordination fund, it is necessary and urgent to study whether it is feasible for employee medical insurance outpatient co-ordination to replace individual accounts.

## **2. SAMPLE INTRODUCTION**

### **2.1. Sample introduction**

Jinan is the capital city of Shandong Province, the economic and political center of Shandong Province, located in the Midwest of Shandong Province. It covers an area of 8177.21 square kilometers, governs seven districts and three counties, and has a registered population of 6.3283 million. [2]

According to the statistical yearbook of Jinan in 2016, the level of medical and health care has steadily improved. At the end of the year, there were 5947 health institutions, an increase of 2.8% over the previous year, including 268 hospitals and health centers, an increase of 1.1%. There

were 49300 beds in health institutions, an increase of 2.1%. There were 71700 health technical personnel, an increase of 3.9%; 32600 licensed (Assistant) doctors, an increase of 5.2%. According to the permanent population, each person has 6.9 beds, an increase of 1.2%; each thousand people has 4.6 doctors, an increase of 4.5%. [3]

Since 2002, Jinan City has implemented the individual account of medical insurance, which is used for medical treatment, drug purchase and settlement fees of designated medical institutions and designated retail pharmacies of basic medical insurance. The source of funds is 2% of the personal payment of medical insurance. Jinan started to implement outpatient co-ordination in 2014, and reimbursed a certain proportion of ordinary outpatient medical expenses incurred by employees' medical behaviors in 193 insured hospitals and designated community medical service institutions in the city. See Table 1 for the specific reimbursement proportion.

## **2.2. Basic information of sample**

40 questionnaires were distributed in Qixian community health service center, the hall of the Fifth People's Hospital, the outpatient department of Shandong provincial hospital and its vicinity, totally 120 questionnaires were distributed, 110 questionnaires were recovered, the recovery rate was 91.7%, 107 effective questionnaires, and the effective rate was 89.2%.

## **3. CURRENT SITUATION ANALYSIS**

In this paper, the feasibility study of outpatient co-ordination instead of personal account refers to people's attitudes, needs and suggestions on the reform plan of outpatient co-ordination instead of personal account. The following is an elaboration and analysis from the implementation status of individual account of medical insurance, the implementation status of outpatient co-ordination, and the attitude needs of employees on the replacement of individual account of outpatient co-ordination.

### **3.1. Employees' overall satisfaction with individual accounts of medical insurance is low.**

According to the data collected from the questionnaire, the analysis of employees' satisfaction with the personal account of medical insurance shows that among 107 employees, the number of employees who are dissatisfied with the personal account of medical insurance is the largest, 58, accounting for 54.2%; while the general satisfaction selection is 14, 26 and 12, accounting for 24.3% and 11.2% respectively; the very satisfied one is chosen Compared with the satisfied ones, there are only 11 people, accounting for 10.3%.

### **3.2. Problems in individual account of medical insurance**

The attitude of employees towards the individual account of medical insurance shows that there are some problems in the individual account of medical insurance. Among the problems reflected by the employees of the enterprise in the individual account of medical insurance, the number of people who choose the individual account of medical insurance is the most, 48, accounting for 44.9%; the number of people who choose the individual account with low utilization rate of funds is 22, accounting for 25.2% of the total; the number of people who choose the individual account whose funds are abused (such as purchasing drugs for others and purchasing daily necessities) There are 18 people, accounting for 16.8%; while the number of people who choose personal account to increase income gap and the role of personal account funds is relatively small, 10 and 4 people respectively, accounting for 9.3% and 3.7% respectively. In the communication process of the questionnaire survey, it is found that the main reason why most employees choose the personal account of medical insurance is that the funds of the personal account are really insufficient for the employees who really need it; on the contrary, the main reason why it is difficult to choose the personal account of medical insurance is that the funds of the personal account are used for limited purposes and are seldom sick, which makes it difficult to make the personal account of medical insurance Households play a role.

It can be seen that the individual account of medical insurance has the problems of low utilization rate of individual account of medical insurance for the group with good health and low risk of disease, and it is difficult to maintain and increase the value of individual account of medical insurance; however, the group with poor health and high risk of disease has exposed the problem of lack of mutual assistance; as a way of income redistribution, the individual account of medical insurance has lost the fairness of medical insurance The income gap between employees has been widened, which makes the role of the personal account with limited scope of application more limited. As a way of social security, the personal account of medical insurance is uneven in drought and flood, which makes it difficult to realize the effective allocation of funds and resources. The management mode is rigid, which hinders the improvement of the quality of medical security and reduces the sense of access of employees.

### **3.3. Staff's attitude to the feasibility of replacing individual account with outpatient co-ordination**

According to the analysis of questionnaire data, the attitude of employees towards the replacement of individual account by outpatient co-ordination: among 107 respondents, 71 (66.4%) thought that it was feasible to replace individual account by outpatient co-ordination; 36

(32.8%) thought that it was not feasible, the former was slightly higher than the latter (32.8%).

This shows that employees are less satisfied with the individual account of medical insurance and higher satisfied with the overall planning of outpatient service, but there are still some problems in the overall planning of outpatient service at present, such as the low proportion of reimbursement, the main items of reimbursement are minor diseases and the few items of diagnosis and treatment. At present, it is feasible to cancel individual account and carry out outpatient co-ordination, but it needs to be gradually improved to overcome the corresponding problems and ease the difficulty of reform.

#### **4. CONCLUSION**

Taking Jinan City as an example, this paper investigates, studies and analyzes the feasibility of medical insurance outpatient co-ordination to replace individual account, and finally finds that, at present, there are still some problems in outpatient co-ordination, and it is difficult to comprehensively implement outpatient co-ordination to replace individual account, so in the future, we should implement gradual medical insurance reform to gradually withdraw individual account from the medical insurance system, in the near future, the work should be carried out in the following aspects:

Government should strengthen the publicity and enhance the staff's understanding of outpatient coordination. The policy publicity of outpatient co-ordination should be clear and definite, including the fund source, reimbursement proportion, medical service package, relocation plan, etc. Employees who enjoy outpatient co-ordination should see the benefits and help from the bill details, so that they can have a sense of gain. At the same time, we should strengthen the awareness of "intergenerational mutual assistance" in the policy, embody the spirit of mutual assistance and mutual assistance, gradually change the inherent concept, and reduce the resistance of the reform of medical security mode.

Medical insurance should improve the overall coverage of outpatient services. The outpatient co-ordination covers two aspects. First, actively increase the number of insured

medical institutions. The outpatient co-ordination should implement a strict access mechanism. The designated hospitals and community designated medical service institutions should be strictly inspected and reviewed. The contracted employees should be paid according to the head of the contracted medical institutions. Every year, the contracted employees should be given the opportunity and supplement to change the designated medical institutions. The new contracted and designated medical institutions make outpatient co-ordination full of vitality and improve quality and efficiency through two-way selection and "catfish effect". Second, we should improve the catalogue of outpatient co-ordination to ensure that outpatient co-ordination can guarantee both minor and major diseases.

There are some defects in the selection and size of the survey samples, which may not be highly representative. At the same time, the limited sample size will inevitably affect the reliability and validity of the research data. In addition, the limitations of the author's own knowledge and academic level have not yet formed a comprehensive and objective understanding and analysis of the feasibility study on the overall replacement of individual accounts in outpatient clinics, I hope that the research in this paper can provide some reference for later researchers, as an individual's opinion in social policy action.

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