



## CHAPTER III

### PUBLIC HEALTHCARE PROGRAMS

This chapter presents a body of public healthcare programs regulations, requirements, and qualifying conditions which can be used as managed subject throughout the thesis and to ensure the programs sustainability. As of the public healthcare system, characterised by fragmentation and inadequate coverage in schemes, cannot achieve healthcare systems goals of efficiency and equity. To improve programs accountability and quality, requires setting up a regulatory framework, in a form of consultation tool to all type of patients for their adequate choices. The brief details of each public healthcare program are as shown:

#### **3.1 Universal Care (UC): '30-Baht Scheme'**

Universal Care, it is a universal coverage service offered originally by MoPH—launched on 26<sup>th</sup> February 2001 (NHSO, 2004), provides a free-for-service medical care for the poor, elderly, disabled, and children under 12 years of age. In general, every unemployed Thais is to register for healthcare at either public hospitals or certified private hospitals and subjected to pay only 30 baht per visit for every episode of “*overall*” treatment. The main intention is to cover other underprivileged groups; children under 12 years old or adolescence above 60 years old, and monks. The registered patients would receive the UC card. This card must be used in companion with the Thai-national ID card when access to the hospital. This program is solely financed by general tax revenue. And the hospital receives per capita reimbursement (based on number of patient registers) from the MoPH by the end of the year.

#### **3.2 Social Security Fund (SSF):**

The SSF provides compulsory social insurance while embracing seven benefits for the insured patients consisting of sickness/injuries, maternity, invalidity, death, child allowance, unemployment, and old-age benefits. It provides protection and security for patients who are sick/injured, disabled, or die from non work-related

causes. It is a tripartite system contributed by employers, employees, and the government, in which each party are required to make contribution 1.5% of general wage to complete the fund. The scheme uses a contract capitation model where the hospitals were paid contribution, in lump sum payment in a fixed flat rate reimbursement. In case of if the registered patient has worked for many jobs, then he/she is still need to pay contribution for each job but the patient can reimburse contribution back from their second jobs by the end of the year. The SSF is administrated by SSO, and under the responsibility of the Ministry of Labour (Mol) (SSO, 2003).

**SSF Card:** The registered patients will receive SSF card after registration for 5 days, the patients have to use it when filling the contribution form for record of contribution payment. Noting that the patients will be issued only one card, despite they have many jobs or changing jobs.

**Medical Card:** The registered patients will also receive medical card from the hospital after registration and pay contribution. Then, hospital within patients' area will be indicated in this card as registered hospitals, entitled to that patient.

**Types of Benefits:** As of the year 2005

1. **Sickness/Injuries:** Sickness or accident consists of medical care and cash benefits.
2. **Disability:** Invalidity consists of medical care and cash benefit.
3. **Death:** Death consists of funeral grant and survivors allowance.
4. **Maternity:** Maternity benefit consists of cash benefit and lump sum for delivery.
5. **Child Allowance:** Monthly allowance is paid to the first two children (under 6 years old) of the patients.
6. **Unemployment:** Employment benefits under approval of employers.
7. **Old-Age Benefit:** Patients will either receive old-age lump sum or old-age pension benefit.

### Qualifying Conditions: Minimum qualifying periods

Schemes	Valid for Contribution
1. Sickness/Injuries	$3 \leq \text{month} \leq 15$ month before visit
2. Maternity	$7 \leq \text{month} \leq 15$ month before confinement
3. Invalidity	$3 \leq \text{month} \leq 15$ month before disable
4. Death	$1 \leq \text{month} \leq 6$ month before death
5. Child Allowance	$12 \leq \text{month} \leq 36$ month before receiving benefit
6. Unemployment	$6 \leq \text{month} \leq 15$ month before laid-off
7. Old-Age: Lump-sum Pension	$< 180$ month $\cap \geq 55$ years, before cessation of being insured $180 \leq \text{month} \leq \infty$ month $\cap \geq 55$ years, before cessation of being insured

Table 3.1: SSF Qualifying Conditions

### Time Requirements: Ceiling of contributions

Range (Month)	Starting Event	Description of Connecting Activity	Duration (Month)	Ending Event	Type(s) of Benefit Received
[1-2]	1	$1 \leq \text{Contribution} \leq 2$	1	1	Death
[3-4]	3	$3 \leq \text{Contribution} \leq 4$	1	4	Death + Disability + Sickness/Injuries
[5-11]	5	$5 \leq \text{Contribution} \leq 11$	8	11	Death + Disability + Sickness/Injuries + Maternity
[12-179]	12	$12 \leq \text{Contribution} \leq 179$	168	179	Death + Disability + Sickness/Injuries + Maternity + Child Allowance
[179- $\infty$ ]	180	$180 < \text{Contribution}$	$\infty$	$\infty$	Death + Disability + Sickness/Injuries + Maternity + Child Allowance + Old-Age Benefit

Table 3.2: SSF Time Requirements

## 3.3 Insurance (IN): RAA, HI, and PA

For IN program, DoI: Ministry of Commerce is in charge of general supervision. The reimbursement and indemnity will be paid by various types of contracts of insurance companies after a patient has been treated at any hospitals. The three types of contracts are as shown:

### 3.3.1 Road-Accidental Acts (RAA)

For RAA, there are two authorities that responsible for the reimbursement in which are insurance companies and office of victim compensation fund (OVCF). In most case, the patients allow the hospital to attain reimbursement, by signing a form of power of attorney that indicated substitute of reimbursement authorised. The

evaluation process, then has to be proceed for evaluating which party is granted fault or right. Most of the time, it takes the hospital to hire managed-care attorneys to solve the case, especially the AE case. Primary information needed are as shown:

1. Patient's address
2. Date of accident occasions
3. Place of accident occasion
4. License plate of both parties' vehicles
5. RAA policy № (signed) of both parties' vehicle

### 3.3.2 Health Insurance (HI)

Private health insurance provides a voluntary risk related premium contribution covers mainly the better-off patients sector.

### 3.3.3 Personal Accident (PA): Student PA

PA is voluntary type of healthcare for the group of patients; rural informal sector workers, who are not eligible for regular schemes, such as kinder gardens, primary school, and college students.

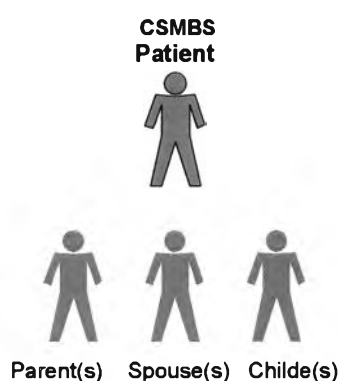
## 3.4 Workmen's Compensation Fund (WCF):

Employers are generally required to pay annual contribution to the WCF for compensation to their employees who are sick/injured, disable, or die from work-related causes. The contribution rate varies from 0.2-2.0% of wages based on an industrial classification. Then, all employees will be eligible to receive medical care and compensation for incapacitated period depending on the seriousness of injuries. The employers have to pay compensation benefits to work-related injury employees. The compensation benefits are divided into two cases, first, where the employees have worked in enterprises and employers pay contributions to WCF, then it will replace employer's liability to pay compensation benefits to employees for medical care, cash benefits for sickness, invalidity/loss of organ(s), death, rehabilitation, and funeral grants. Second, where the employees have worked in firms where employers are not obliged to pay contributions, the WCF has to order employers to pay compensations to employees. Also, the work-injury cases will have to be divided

into those covered and not covered by WCF. The reimbursement will be paid by insurance companies based on number of patients treated at registered hospitals. The WCF is administered by DoI and Ministry of Commerce is in charge of general supervision.

### 3.5 Civil Servant Medical Benefit Scheme (CSMBS):

This scheme has been provided with general medical-care coverage that covers only government employees. There are two authority types of government employees; civil servant (CS) and state enterprise (SE). The coverage includes their dependents; parents, spouses, and not more than three children who are less than 20 years old. For the retirees, this scheme is for old-age benefits in compensation for a generally low salary scale of government works. The scheme reimburses beneficiary and it is a fee-for-service reimbursement model. Overall, this is a non-contributory scheme and also received the highest state subsidy. It is also a scheme that totally financed by general tax revenue, through a general supervision of Comptroller General's Department: Ministry of Finance (MoF).



**Figure 3.1:** Coverage links of a CSMBS patient

In addition to this scheme, there are restrictions on the kind of work women and children can perform. Guidelines are set for wages and overtime, as well as resolution of labour management disputes. These vary significantly in term of scheme nature, population coverage, benefit package, and financing sources (payment methods). Thus, the characteristics summary and regulatory framework provide principle, objective, and key characteristics of the healthcare programs are as shown:

### 3.6 Characteristics Summary

Characteristics	UC	SSF	IN	WCF	CSMBS
<b>1. Scheme Nature</b>					
Type	Social welfare	Compulsory	Compulsory/ Voluntary	Compulsory	Fringe Benefit
Model	Public contracted	Public contracted	Voluntary reimbursement	Public reimbursement	Public reimbursement
<b>2. Population Coverage</b>					
	<p>To provide every Thai a register for healthcare at either public or certified private hospitals and subjected to pay only 30 THB for every visit of "overall" treated. The insured patient is the employee whose ages are in between 12 ≤ age ≤ 60 years. Including as follow:</p> <ul style="list-style-type: none"> <li>-Adolescence above 60 years old</li> <li>-Children under 12 years old</li> <li>-Handicaps</li> <li>-Monks and novices</li> <li>-Religion leader</li> <li>-Community leader</li> <li>-War veterans</li> <li>-Below a defined poverty-line patients</li> </ul>	<p>To establish security which society provide for its members by sharing risks from the stoppage on reduction of earning resulting from sickness, maternity, old age, disability, death, invalidity, and family allowance. It is a defined contribution scheme.</p> <p>Employers of firms with 1 or more employees must register.</p>	<p><b>RAA:</b> Compulsory To have liability coverage for motor vehicle owner against injury, disease, and death resulting from registered vehicles.</p> <p><b>HI:</b> Voluntary To establish health insurance for personal that specifically covers medical treatment; injury, disease, and other related health problems.</p> <p><b>PA:</b> Voluntary To establish personal, group, and student insurance that specifically cover accident. In this thesis, only student PA will be discussed.</p>	<p>To replace employer's liability and to give prompt and equitable protection against injury, disease, and death resulting from within working hours of employment.</p> <p>Employers of firms with 1 or more employees must register.</p>	<p><b>CS &amp; SE:</b> The fund is established to provide with medical care coverage and serve as a retirement pension/ financial support upon employee's resignation, disability, and death. It is a retirement contribution scheme for government employees and retirees and their dependents including parents, spouses, and not more than three children (less than 20 years old).</p>
Patient Registers	9,262	5,453	N.A.	N.A.	N.A.
% Coverage	51.3	32.1	4.88	1.46	1.00
<b>3. Benefit Package</b>					
Medical Care	Yes	Yes	Yes	Yes	Yes
Cash Benefit	No	Yes	Yes/No	Yes	No
Condition Included	Comprehensive package	Non-work related sickness/injuries	Comprehensive package/ Depends on premium	Work related sickness/injuries	Comprehensive package sickness/injuries
Condition Excluded	13 conditions	3 conditions	Severe sickness/injuries, pre existing conditions, depends on policy	No	No

4. Financing Sources					
Source of Funds	General tax	Tripartite 1.5% of wages	Household or employer premium	Employer, 0.2-2% of wages with industrial classification	General tax
Financing Body	NHSO: MoPH	SSO: MoL	DoI: MoC/Private companies	SSO: MoL	CGD: MoF
Payment Mechanism	Tax revenue	Capitation	Proportional reimbursement among care levels/Fee for services with ceiling	Fee for service	Fee for service
Co-payments	0/30 THB	Yes, if beyond the ceiling of 35,000 THB	Yes, if beyond the ceiling, depends on policy and premium	Yes, if beyond the ceiling of 30,000 THB	Yes, IPD private limits only life for threatening care
Expenditure per capital (THB)	Yes, if beyond the ceiling of 30,000 THB	Yes, if beyond the ceiling of 35,000 THB			

**Table 3.3:** Characteristics Summary of Public Healthcare Programs

Therefore, as part of project results, the hospital will have to form a regulatory framework of aggregated regulations and requirements of public healthcare programs and prioritise each benefit package. The selection of the best benefit package that a patient is entitled to, will have to be presented and sorted out to a patient to decide in the time of implementation in the front reception counter. Upon implementation, the hospital has no need to limit their average costs spent and enable to remain incentives for the hospital efficiency. The regulatory framework is as shown:

### 3.7 Public Healthcare Programs Regulatory Framework:

Programs	UC	SSF	IN	WCF	CSMBS
1. Coverage Policy	<p>Every unemployed Thais are eligible to register the program, and receive the UC card.</p> <p><b>AE:</b> A patient can choose any hospitals (public &amp; private) nearby or Primary Care Unit (PCU) that</p>	<p>The insured patient is the employee who starts working between 15 ≤ age ≤ 60 years. Contributions are deducted from 1.5% from each; employer, employees, and the government (payer) with varied rate of 4.5-5.0 % of wages per</p>	<p><b>RAA:</b> A motor vehicle owner who uses or having a motor vehicle for use has to obtain this liability insurance against injury for victims, through any insurance companies.</p> <p>Complaint must</p>	<p>It is employer's liability to pay contribution to the WCF annually, similar to an insurance premium. Employers of firms must pay contribution to WCF with varied rate of 0.2-1.0% of wages per month.</p> <p>Patients are</p>	<p><b>CS &amp; SE:</b> Employers with CSMBS will be paid compensation for resignation, laid off, and die resulting from within working hours.</p> <p>It is a long-term saving fund where contribution are made by</p>

<p>based on MoPH to be treated. In case of other than registered hospital, limits to <math>\leq 2</math> occasions per year.</p>	<p>month.</p> <p>There are 2 coverage conditions:</p> <p>1.1 Employment</p>	<p>be filed within 180 days from the date of accident. In general, RAA covers everybody who is resulted from the accident.</p>	<p>eligible to receive compensation benefits consisting of:</p> <p>1.1 Compensation (if sick leave &gt; 3 consecutive days)</p>	<p>general tax revenue.</p> <p>Governmental employees will receive lump-sum benefit at the time of their retirement/resignation.</p>
<p><b>UC exempted services:</b></p>	<p>1.2 Voluntary coverage for the self-employed</p>	<p><b>HI:</b></p>	<p>1.2 Monthly indemnity</p> <p>1.3 Rehabilitation</p> <p>1.4 Funeral grant</p>	
<p>1.1 SSF &amp; WCF patients</p>	<p><b>SSF exempted services:</b></p>	<p>The insured patient will be paid indemnity when treatment/diagnosis occurs in any hospitals, resulting from any work-related causes and other health-related problems.</p>	<p><b>WCF exempted services:</b></p>	
<p>1.2 Bureaucratic patients; including state-enterprise patients</p>	<p>1.3 Employees of foreign governments</p> <p>1.4 International organisations</p>	<p>Decentralise purchasing authority of individual insurance</p> <p>No ages and occupations limited for HI but exempted diseases as shown:</p>	<p>1.5 Peddlers/ Stall shop owners</p>	
<p>1.3 Non-Bureaucratic patients</p>	<p>1.5 Thais working abroad.</p>	<p><b>HI exempted services:</b></p>	<p>1.6 Fishermen</p>	
		<p>1.1 HIV Patients</p> <p>1.2 Cancer Patients</p>		
		<p><b>PA:</b></p>		
		<p>Ages sensitive and protection 24 hours a day, 365 days a year. Based on coverage selected, cash-less IPD and OPD treatment.</p>		



2. Qualifying Conditions	UC	SSF	IN	WCF	CSMBS
	<b>There are 2 types of UC service, which are 'no-fee' and '30 baht':</b>	<b>There are 7 types of SSF service:</b>	<b>There are 3 categories of IN service; RAA, HI, and PA:</b>	<b>There are 5 types of WCF service:</b>	<b>There are 2 types of governmental employees: CS and SE</b>
	<b>'No-Fee' per visit service: (focus only preliminary examining).</b>	2.1 Sickness/ Injuries:	<b>RAA:</b>	2.1 Temporary Disability:	<b>CS:</b>
	2.1 Obstetric check	Receive cash for sickness/injuries and medical care; if contribution $\geq$ 3 months $\cap$ within last 15 months.	Victim who is defined as a person sustaining the life, body or health injury caused by a motor vehicle used, including driver, passengers, survivors, and pedestrians.	2.2 Loss of Organ (s):	2.1 Retirement/ Resignation (Unemployment)
	2.2 Childcare	2.2 Maternity:		2.3 Invalidity:	2.2 Disability (Invalidity):
	2.3 General diagnosis	Receive cash for maternity and medical care; if contribution $\geq$ 7 months $\cap$ within last 15 months. (limited to 2 pregnancies).	<b>HI:</b>	2.4 Death:	2.3 Death:
	2.4 Family planning	2.3 Invalidity:	Coverage of disease, injuries, and other health related problems are as follow:	2.5 Rehabilitation:	<b>SE:</b>
	2.5 HIV medicine (only in case of mother-to-child infection)	Receive cash for invalidity; if contribution $\geq$ 3 months $\cap$ within last 15 months. Must already have received cash sickness benefits for $\geq$ 12 months.	2.1 Room charge & foods, hospital service charge, and emergency charge		2.4 Resignation (Unemployment):
	2.6 Home healthcare	2.4 Death:	2.2 Operation charge		2.5 Laid off:
	2.7 Preventive measures with the MoPH communicable disease control department deems nonessential services	Receive funeral grant; if contribution $\geq$ 1 months $\cap$ within last 6 months.	2.3 Doctor discharge fee		2.6 Death:
	2.8 Healthcare counselling	2.5 Child Allowance:	2.4 Clinical fee (OPD)		
	2.9 Mouth related diseases care; only in mouth examining, fluorine given, teeth-care prevention, and misc.	Receive child allowance benefits; if contribution $\geq$ 12 months $\cap$ within last 36 months. Child must be $\leq$ 6 years old	2.5 Maternity		
	<b>Coverage of '30 baht' per visit service:</b>		2.6 Dentistry		
	2.10 Doctor examining;		2.7 In-house care from calling a doctor & nurse		
			<b>HI exempted services:</b>		

<p>diagnosis, and treatment<sup>3</sup></p> <p>2.11 Maternity (limited to 2 pregnancies)</p> <p>2.12 Room charge &amp; foods</p> <p>2.13 Dentures; uproot, fill, glide, crowned tooth, and misc.</p> <p>2.14 Medicine; only medicine listed by MOPH</p> <p>2.15 Referral; ambulatory service and hospital arrangement</p>	<p>(limited to 2 childes).</p>	<p>2.8 Sterile</p> <p>2.9 Surgery</p> <p>2.10 Diet</p> <p>2.11 Leisure</p> <p>2.12 Temporal mental disability</p> <p>2.13 Venereal diseases</p> <p>2.14 Eyes examining</p>		
<p><b>UC exempted services:</b></p>	<p>2.6 Unemployment: Receive cash for maternity and medical treatment; if contribution <math>\geq</math> 6 months <math>\cap</math> within last 15 months.</p>	<p><b>PA:</b> Student PA covers generally 4 types as follow:</p> <p>2.13 Death, loss of organ(s); limbs, eyesight, and hearing/speech permanent total disability</p> <p>2.14 Permanent partial disability</p> <p>2.15 Temporal disability</p> <p>2.16 Medical treatment</p> <p>2.19 Assaulted: (additional)</p> <p>2.20 Murdered: (additional)</p>		
<p>2.16 Mentality (permanent partial mental health requires &gt; 15 days of treatment)</p> <p>2.17 Drug abuse and rehabilitation</p> <p>2.18 Traffic accident (paid for by insurance companies under the RAA)</p> <p>2.19 Infertility treatment</p> <p>2.20 Fertile</p> <p>2.21 Cosmetic surgery</p> <p>2.22 Specialised hospital care without a proper referral letter</p> <p>2.23 Admission &gt; 180 days; unless chronic diseases</p>	<p>2.7 Old-Age Benefits:</p> <ul style="list-style-type: none"> <li>• Pension Receive old-age pension; if age <math>\geq</math> 55 years <math>\cap</math> contribution <math>\geq</math> last 180 months (non-consecutive) <math>\cap</math> cessation of being an insured patient.</li> <li>• Lump sum Receive old-age pension; if age <math>\geq</math> 55 years <math>\cap</math> contribution &lt; last 180 months (consecutive) <math>\cap</math> cessation of being an insured patient.</li> </ul>	<p><b>PA exempted services:</b></p> <p>2.21 Alcoholic influence</p> <p>2.22 Suicide, self-injured</p> <p>2.23 Abortion</p> <p>2.24 War time/ Rebellion (additional)</p>		

	<p>indicated (complications and comorbidities)</p> <p>2.24 Experimental treatments without proven benefits</p> <p>2.25 Peritonealdialysis &amp; Hemodialysis for chronic end-stage renal disease (only in acute renal failure) (OPD ≤ 2,000 THB/visit, IPD ≤ 15,000 THB/admission)</p> <p>2.26 HIV treatment (Cryptococcal Meningitis); OPD ≤ 3,000 THB/visit, IPD ≤ 15,000 THB/admission</p> <p>2.27 Organs transplantation</p> <p>2.28 Synthetic lenses and eyeglasses</p>		<p>2.25 Protester/ strike (additional)</p> <p>2.26 Radioactive hazardous</p> <p>2.27 High-risk sports; e.g. bungee jump (additional)</p> <p>2.28 Motorcycling (additional)</p> <p>2.29 Non-commercial airplane transports (additional)</p> <p>2.30 Crime activity</p> <p>2.31 Police, soldier, and volunteers in the curfield</p>		
<b>3. Benefits Package</b>	<b>UC</b>	<b>SSF</b>	<b>IN</b>	<b>WCF</b>	<b>CSMBS</b>
		<p><b>Resulting from other than working hours:</b></p> <p>3.1 Sickness/ Injuries: Cash benefit + Medical care</p> <p>3.2 Maternity: Cash benefit + Medical care</p> <p>3.3 Invalidity: Cash benefit + Medical care</p> <p>3.4 Death: Funeral grant (Cash benefit)</p>	<p><b>Every Thais can purchase this type of service.</b></p> <p><b>RAA:</b></p> <p>3.1 Injuries: Medical care</p> <p>3.2 Death: Funeral grant</p> <p>3.3 Death after injuries: Medical care + Funeral grant</p> <p>3.4 Injuries: Total ≤ 50,000 THB.</p>	<p><b>Resulting from within working hours:</b></p> <p>3.1 Temporary Disability: Cash benefit + Medical care</p> <p>3.2 Loss of Organ (s): Cash benefit</p> <p>3.3 Invalidity: Cash benefit</p> <p>3.4 Death: Cash benefit</p> <p>3.5</p>	<p><b>CS:</b></p> <p>The patients will be paid pension or lump sum ≥ last 180 months (non-consecutive) ∩ age ≥ 55 years ∩ quit job.</p> <p><b>SE:</b></p> <p>Pension or lump sum will be paid if employees are as follow:</p> <p>3.1 Resignation (Unemployment )</p>

				Rehabilitation: Medical care	3.2 Laid off 3.3 Death
		3.5 Child Allowance:	3.5 Death/ Disability:		
		Monthly allowance (Cash benefit)	Total $\leq$ 100,000 THB.		
		3.6 Unemployment:	3.6 Injuries: Medical care		
		Cash benefit + Skill development service	3.7 Death/ Disability: Either funeral grant or compensation		
		3.7 Old-Age Benefits:	3.8 Injuries: Medical care		
		Pension + Lump sum benefits	3.9 Death: Funeral grant		
			3.10 Death After Injuries: Medical care + Funeral grant		
			3.11 Injuries: Injury benefit		
			3.12 Death or Disability: Either death benefit or disability benefit		
			<b>HI:</b>		
			Indemnity = Medical bill (Total indemnity $\leq$ Total insurance premium)		
			<b>PA:</b>		
			Deductible amount is indicated in the policy. Receive Medical care + Cash benefit for:		
			3.13 Death, loss of organ(s); limbs, eyesight, and hearing/speech		

			<p>permanent total disability</p> <p>3.14 Permanent partial disability</p> <p>3.15 Temporal disability</p> <p>3.16 Medical treatment</p>		
<b>4. Cash Benefit</b>	<b>UC</b>	<b>SSF</b>	<b>IN</b>	<b>WCF</b>	<b>CSMBS</b>
		<p><b>4.1 Sickness/Injuries:</b> Receive cash for sickness/ injuries 50% of wages, up to 90 days for each occasion, but ≤ 180 days/year. Payable up to 250 THB/day, except chronic disease, payable for ≤ 365 days, and medical care.</p> <p><b>4.2 Maternity:</b> Receive cash for maternity 50% of wages, up to 90 days for each confinement (limited to 2 confinement for female IPD).  For female, lump sum = 4,000 THB/confinement  For male, lump sum = 4,000 THB/confinement, regardless of married certificate.  Note: If both are insured, limited to 2+2 pregnancies.</p> <p><b>4.3 Invalidation:</b> Receive cash for</p>	<p><b>RAA:</b> <b>Victims will be paid preliminary compensation upon medical bill within 7 days, while waiting for a proof of liability as shown:</b></p> <p><b>4.1 Injuries:</b> Receive medical treatment ≤ 15,000 THB.</p> <p><b>4.2 Death:</b> Receive funeral grant ≤ 35,000 THB.</p> <p><b>4.3 Death after injuries:</b> Receive medical treatment + funeral grant ≤ (15,000 + 35,000) THB.</p> <p><b>Beyond the preliminary compensation, the fund will be paid under proof of liability, by the insurance company of the fault. In total as shown:</b></p>	<p><b>4.1 Temporary Disability:</b> Receive compensation 60% of wages up to 365 days, if the doctor consents absence ≥ 3 days waiting period.</p> <p><b>4.2 Loss of Organ (s):</b> Partial disability; receive compensation 60% of wage, up to 10 years.</p> <p>Permanent total disability; receive compensation 60% of wage up to 15 years. (No. of years varies subject to lost organ(s)).</p> <p><b>4.3 Invalidation:</b> Receive compensation 60% of wages, up to 15 years.</p> <p><b>4.4 Death:</b> Receive funeral grant = highest daily wage * 100. And grant money for survivors 60% of wage up to 8 years, and must be in between</p>	<p><b>CS &amp; SE:</b> The patient receive old-age pension at the rate of 15% of average wage (last 60 months)</p> <p>The patients will be paid lump sum, then old-age lump sum. The old-age lump sum = amount of old-age benefits + interest</p> <p>In case of the patients died in between 0 ≤ old-age pension ≤ 60 months, receive last old-age lump sum benefit * 10</p>

		<p>invalidity 50% of wages and medical expense ≤ 2,000 THB/month for entire life duration. If the insured patients die afterward, receive funeral grant ≤ 30,000 THB</p> <p>If contribution ≥ 36 months, receive cash for disability 50% of wage * 3.</p> <p>If contribution ≥ 120 months, receive cash for disability 50% of wage * 10.</p>	4.4 Injuries:	2,000-9,000 THB/month.
			Fund ≤ 50,000 THB.	4.5 Rehabilitation: N/A.
			4.5 Death/ Disability:	
			Fund ≤ 100,000 THB.	<p><b>In the case of ≥ 2 vehicles accident, and both has no proof of liability:</b></p>
			<b>In the case of ≥ 2 vehicles accident, and both has no proof of liability:</b>	
			4.6 Injuries:	
			Medical treatment ≤ 50,000 THB/ patient.	
			4.7 Death/ Disability:	
			Either funeral grant or compensation ≤ 50,000 THB /patient.	
			<b>In the case of 'no victims' and driver admitting fault:</b>	
			4.8 Injuries:	
			Receive medical treatment ≤ 15,000 THB.	
			4.9 Death:	
			Receive funeral grant ≤ 35,000 THB.	
			4.5 Child Allowance:	4.10 Death After Injuries:
Receive monthly allowance = 200 THB/child. For child < 6 years old only (limited to 2 childe).	Receive medical treatment + funeral grant ≤ (15,000 + 35,000) THB.			
4.6 Unemployment:	<b>The passenger will be benefited:</b>			
Receive cash for	4.11 Injuries:			

		<p>unemployment 50% of wages, up to 180 days for each laid-off. If quit job voluntarily, receive 30% of wages for up to 90 days, but the accumulation days of benefit <math>\leq</math> 180 days/year. And skill development service provided,</p>	<p>Receive injury benefit <math>\leq</math> 50,000 THB.</p>		
			<p>4.12 Death or Disability:</p>		
			<p>Receive either death or disability benefit <math>\leq</math> 100,000 THB.</p>		
			<p><b>HI:</b></p>		
			<p>Vary and depends on premiums</p>		
		<p>4.7 Old-Age Benefits:</p>	<p><b>PA:</b></p>		
		<p>• Pension; if contribution = last 180 months (non-consecutive), receive pension 15% of wage of the last sixty months.</p>	<p>Total indemnity <math>\approx</math> annual wage * 10</p>		
		<p>If contribution &gt; last 180 months, receive that 15% + 1% per additional 12 months beyond 180 months.</p>			
		<p>• Lump sum; if contribution &lt; last 12 months (consecutive), receive lump sum = child allowance + old-age benefit.</p>			
		<p>If contribution <math>\geq</math> last 12 months, receive lump sum = child allowance + old-age benefit + interest (set up by SSO)</p>			
		<p>In case, if the insured patients die within last 60 months since entitlement,</p>			

		receive lump sum benefit * 10			
<b>5. Medical Care<sup>4</sup></b>	<b>UC</b>	<b>SSF</b>	<b>IN</b>	<b>WCF</b>	<b>CSMBS</b>
		Scope of medical care is defined in term of medical expenses, and it will be spent only patients inform the registered hospital within last 72 hours; total ≤ 35,000 THB/occasion:	<b>RAA:</b> Max ≤ 100,000 THB/patient ∩ ≤ 5,000,000 THB/everybody ∩ ≤ 10,000,000 THB in case of greater than 7-seats vehicle.  Including victims who are related to the accident such as pedestrians, which both parties' insurance companies have to jointly pay preliminary compensation by averaging out in equal proportion.  In case of permanent disability or organ disability	5.1 Temporary Disability: Receive medical care concerning medical treatment ≤ 35,000 THB/occasion. In serious cases, between 35,000 ≤ medical care ≤ 50,000 THB, patients are permitted under special circumstance.	
		5.1 Sickness/Injuries:		5.2 Loss of Organ (s): N/A.	
		<b>OPD:</b>  • Medical treatment ≤ 350 THB/visit.  • Laboratory ≤ 200 THB/visit.  • Physician fee ≤ 200 THB/visit.		5.3 Invalidity: N/A.	
		<b>IPD:</b>  • Medical treatment ≤ 1,500 THB/visit.  • Minor operation (less than 2 hours) ≤ 8,000 THB/visit.  • Major operation (greater than 2 hours) ≤ 14,000 THB/visit.  • Room charge & food ≤ 700 THB/visit.  • ICU ≤ 2,000 THB/visit.	5.1 Blinding  5.2 Hearing Impaired  5.3 Speaking-Impaired  5.4 Reproduction Organ  5.5 Arm, Leg, Palm, and Finger  5.6 Mental Disability  5.7 Permanent Disability	5.4 Death: N/A.	
				5.5 Rehabilitation: Receive Medical rehabilitation ≤ 20,000 THB and Vocational rehabilitation ≤ 20,000 THB.	
			<b>HI:</b>		



		<ul style="list-style-type: none"> <li>• CT Scan<sup>5</sup> &amp; MRI<sup>6</sup> ≤ 4,000 THB/visit.</li> <li>• Kidney &amp; Hemodialysis ≤ 1,500 THB/visit (limited to 2 visit /week).</li> <li>• Dentistry ≤ 200 THB/visit (limited to 2 visit s/year).</li> <li>• Bone-Marrow Transplantation.</li> <li>• Loss of organs; receive artificial organs /physical therapy.</li> <li>• Ambulance ≤ 500 THB within province + 0.9 THB/Km additional (for across province).</li> </ul>	Vary and depends on premiums		
			<b>PA:</b>		
			Vary and depends on premiums		
		<b>5.2 Maternity:</b>			
		<ul style="list-style-type: none"> <li>• IPD Only Medical expense ≤ 4,000 THB/visit (limited to 2 confinement).</li> </ul>			
		<b>5.3 Invalidity:</b>			
		Artificial Organs and Physical Therapy. Reimbursement up to 2,000 THB/month.			
		<b>5.4 Death: N/A.</b>			
		<b>5.5 Child Allowance: N/A.</b>			
		<b>5.6 Unemployment: N/A.</b>			
		<b>5.7 Old-Age</b>			

		Benefits; Pension & Lump sum: N/A			
6. Usage Condition	UC	SSF	IN	WCF	CSMBS
	<p>In general, a patient should use the service at the registered hospital nearby, where they registered at, and present the UC card + National ID. If not, they will have to also show referral form from the registered hospital in order to be treated and pay no fee at different hospitals.</p> <p>In case of child &lt; 15 years old, present Birth Certificate (copy).</p>	<p>In general, a patient should use the service at the registered hospital nearby, where they registered at., and present SSF card + National ID.</p> <p>In case of other than main contracted hospital, patients must reimburse directly from SSO.</p>	<p>In case of having victims, the patients need to provide:</p> <p><b>RAA:</b> Police report (copy) + BT. 2 or BT. 4 Forms + Any form of ID card (copy) of the opposition + Reporting to the insurance company (time, date, and place) + Information of witnesses or referrals (name, phone number, and address).</p> <p>Documents needed for the patients to file a complaint:</p> <p>BT. 2 or BT 4 Forms. + ID or Residential Certificate + Medical Bill + Police Report + [Death Certificate + Survivor's ID]</p> <p><b>HI:</b> HI insurer have to report to the insurance company and provide Medical Bills + Doctor Report + Police Report + Death certificate (if death)</p> <p><b>PA:</b> In case of accident, PA</p>	<p>SSF card + National ID + Letter of power attorney (and ID of authorised personnel)</p> <p>Hospital personnel have to submit Medical bill + WCF form + Letter of power attorney, within 16 days.</p> <p>In case of other than main contracted hospital, patients must reimburse directly from WCF within 90 days, no letter of power attorney needed.</p>	<p><b>CS:</b> Normally, any public or private hospitals with the present of CS card + National ID. But require hospital to provide Medical bill + Doctor Report.</p> <p><b>SE:</b> Normally, any public or private hospitals with the present of SE cars + National ID. In certain medical condition, require SE to make co-payment, vary by DRGs.</p>

			patients have to report to the insurance company and provide Medical Bills + Doctor Report + Police Report + Death certificate (if death)		
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**Table 3.4: Public Healthcare Programs Regulatory Framework**  
Source: Healthcare Authorities and Various Public Healthcare's Regulations Handbooks, Brochures, and Booklets

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<sup>4</sup> Medical Care: Medical care means medical treatment throughout the whole symptom regulated by Health Service Practice Guideline (HSPG, listed by MoPH), meaning until relieve or recover are presented

<sup>5</sup> CT Scan: Computer Axial Tomography, is a high-technology non-invasive method of radiological diagnosis that enable to create an '*image*' of the inside of human body by mean of computer simulation.

<sup>6</sup> MRI: Magnetic Resonance Imaging, is an advanced diagnosis procedure used to create cross-sectional image of the inside of human body by the use of strong magnetic field and enable to generate images by mean of computer simulation.