

ANALYSIS OF BUDGET ALLOCATION FOR GENERAL
AND REGIONAL HOSPITALS IN THAILAND



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for the Degree of Master of Science in Health Economics

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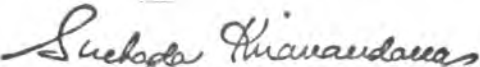
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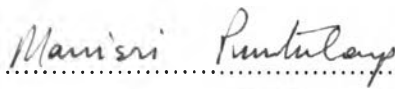
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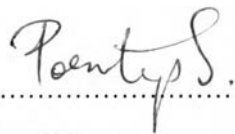
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The purpose of this study is to suggest the resource allocation pattern for achieving equity for regional and general hospitals in Thailand and relation to health need population. The equity is defined as an equity of input and equity of output for equal need, by studying only the regional and general hospitals recurrent budget in the fiscal year 1997 under the responsibility of the Ministry of Public Health. The data collected from the Provincial Hospital Division and the Health Insurance Office using descriptive analysis method and weighted populations.

This study used four factors to apply analysis to the budget allocation namely the hospital need in terms of input and in terms of output, the economic and social factor, the non- government budget and the number of people insured in social security scheme. The results of the study of 6 equations were also presented. Every equation has 3 variables which represent social and economic data, non-government budget and provincial population. First equation used variable of hospital need in terms of input. Second equation used variable of hospital need in terms of output. Third equation used variable of hospital need in terms of input including number of referral. Fourth equation used variable of hospital need in terms of output including number of referral. Fifth equation used variable of hospital need in terms of input including number of insure in social security scheme. Sixth equation used variable of hospital need in terms of output including number of social security scheme.

The analysis showed that the weighted populations was the major basis of the actual budget allocation for regional and general hospitals at present. The 6 patterns in this study is one concept of equitable allocation. The factors used in the 6 patterns have similar influence, the weighted populations value for each hospitals in the 6 patterns were not much different due to the formulas used in each equations. However, the variables in each patterns have both advantages and disadvantages.

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ABBREVIATIONS

AB	Actual Budget
AR	Admission day rate
A1R	Age 0-12 year rate
A2R	Age more than 60 year rate
BOB	The Bureau of the Budget
BR	Bed rate
DRG	Diagnosis Related Group
EB	Expected Budget
HIO	The Health Insurance Office
IGR	Income gap rate
MOPH	Ministry of Public Health
MTR	Mortality rate adjustment
NBR	Non-budget
OVR	Out patient visit rate
PHD	The Provincial Hospital Division
POP	Population (number of population for each province)
RAWP	Resource Allocation Working Party
RR	Referral rate
RW	Relative weight
SMR	Standardized Mortality Ratio
SSR	Social security scheme rate
WP	Weighted Population