## IMPACT OF ECONOMIC CRISIS ON HEALTH INSURANCE SCHEMES: EFFICIENCY, FINANCING AND SUSTAINABILITY



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The Economic Crisis that struck South-East Asia countries beginning in 1997 impacted Thailand. The crisis caused rising of current account deficit sharp decline in import and exports and GDP, rising inflation rate, violating exchange rate, increasing unemployment and sharp decline of public spending and consumers. A combination of these factors impacted health insurance schemes in health sector.

The target of this study was analyzing the impact of economic crisis on health insurance schemes through applying a monitoring tool included indicators of financial sustainability and efficiency. A set of indicators including percent of revenue of each scheme to GDP and total recurrent health expenditure and cost recovery were proposed for financial sustainability. Main Indicators proposed for technical efficiency were average length of stay, number of outpatients and inpatients referred to public and private facilities. Indicators proposed for economic efficiency included percent of coverage of each scheme, percent of personnel expenditure, percent of drugs and supplies to total recurrent health expenditure, as well as number of beds per public -private, cost per public- private and amount paid to hospitals, percent of PHC and EPI against total recurrent health expenditure sugges ed as indicators of allocative efficiency. Indicators were scored by experts of Ministry of Public Health to measure the changes before and during the economic crisis in 1996, 1997 and 1998 years. Then they were weighted against validity, interpretability, and reliability. Results of study showed all schemes are impacted by the economic crisis, but Social Security and Workman's Compensation scheme where more sustainable and more efficient. Public Assistance scheme was subsidiesed more to sustain. There were not enough data about private scheme and growth of Health Card Project declined during the economic crisis. Ministry of public health responded the crisis by reallocating budget and insisting some policies including called "good health at low cost" to maintain basic health services and assure offering to avoid the worst consequences of economic crisis.

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