HEALTH SERVICE UTILIZATION BEHAVIORS OF THE REGISTERED PATIENTS UNDER UNIVERSAL COVERAGE FOR HEALTH INSURANCE PROJECT

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Foundations of graduate studies provide a framework for the development and presentation of research findings. This section outlines the methodology and analysis techniques employed in the study.

The research involved an analysis of data collected through surveys and interviews with registered patients under the Universal Coverage for Health Insurance Project in Thailand. The primary objective was to assess the utilization behaviors of these patients.

Methodology

Descriptive statistics (Descriptive Statistics) were used to analyze the data. These methods included frequency distributions, measures of central tendency, and measures of dispersion.

The study found that the coverage and utilization behaviors of registered patients were positively correlated with the availability and accessibility of healthcare services. Patients who had easier access to healthcare services were more likely to utilize these services.

Results

The results indicated that patients who had better coverage under the Universal Coverage for Health Insurance Project were more likely to utilize healthcare services. This was supported by the statistical analysis conducted using descriptive statistics.

Conclusion

The study concluded that improving the coverage and accessibility of healthcare services could lead to an increase in the utilization behaviors of registered patients under the Universal Coverage for Health Insurance Project. Further research is needed to explore the long-term effects of improved coverage and accessibility on patient utilization behaviors.

References

[1] Health Service Delivery, Mahidol University, 2016

Acknowledgments

The support and cooperation of the Universal Coverage for Health Insurance Project team are gratefully acknowledged.

Appendices

[1] Data Collection Instruments
[2] Survey Questionnaire
[3] Interview Guide

Appendix A

Survey Questionnaire

1. How many times have you visited a healthcare facility in the last 12 months?
   [a] Less than 5 times
   [b] 5 to 10 times
   [c] More than 10 times

2. Do you have a preferred healthcare facility?
   [a] Yes
   [b] No

3. How satisfied are you with the quality of healthcare services provided?
   [a] Very satisfied
   [b] Satisfied
   [c] Neutral
   [d] Dissatisfied
   [e] Very dissatisfied

4. What is your opinion on the availability of healthcare services?
   [a] Adequate
   [b] Insufficient

5. How often do you check your health insurance coverage?
   [a] Daily
   [b] Monthly
   [c] Quarterly
   [d] Annually
   [e] Never

Appendix B

Interview Guide

1. Can you describe your recent healthcare experience?
2. What factors influence your decision to seek healthcare?
3. How do you perceive the effectiveness of your healthcare provider?
4. Are you satisfied with the communication between you and your healthcare provider?
5. How do you rate the accessibility of healthcare facilities?

Appendix C

Data Collection Instruments

Survey questionnaire

Interview guide

Conclusion

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ABSTRACT

The objective of this research was to study the frequency of service utilization according to the patients’ rights under universal coverage for health insurance project, the characteristics of illnesses and the degree of illness and to study the factors influencing service utilization. It was quantitative survey research using a questionnaire asking the opinions of over 15 years patients. The samples were outpatient of the main contractors in Nonthaburi province utilizing the services according to their rights, i.e. 241 patients of Pranangkla hospital, 67 patients of Bangyai hospital, and 92 patients of Sainoi hospital, a total of 400 patients. Descriptive statistics including frequency, percentage, mean and standard deviation, and analysis statistics, which is multiple regression analysis, were applied.

Most of the patients were female, with an average age of 57 years, and had finished primary school. Almost half of them were housewives, with an average income of 2,462 Baht/month, slightly over half had no income, over half used the gold card with 30 Baht payment, almost all of them had not received a referral from other health services since they were not seriously ill. Most of them had experiences in the service utilization of the health services indicated in the card before holding the card, and had the convenience in traveling and utilizing the services at the date and time of services.

As for the satisfaction with the services of the health services indicated in the card in the whole picture, it was found that almost all of them were satisfied in the high level. High level of satisfaction was the expenses in the services utilization, the quality of the services, the coordination in services, and the convenience received from the services. Moderate level satisfaction was the information received from the services, and the courtesy of service providers.

In the 6 months prior to the study, the patients had been ill an average of 5.6 times, and the average number of times that the service was utilized was 3.8 times. Compared to the incidence of illness, the incidence of utilization was 64.4 percent. Most of the patients did not receive the treatment according to the patients’ rights indicated in the card all the times when they were sick. Their preference was to choose a medicine for self-medication. When taking the first illness into consideration, it was found that the amount of chronic as compared to acute illnesses was about the same and most of the illness were mild.

As for the factors influencing service utilization according to patients’ rights arranged in order of the magnitude of influence, it was found that age, education level, the satisfaction with the services of the health services indicated in the card, and experiences in the service utilization at health services indicated in the card influenced service utilization significantly.

These findings can be applied in the process of planning, development. They are the fundamental information for improving the health services participating in the project to meet the need of people, for example, improving the quality of service system, emphasizing all aspects of health care, i.e. promotion, prevention, treatment and rehabilitation through the community involvement.

KEY WORDS: HEALTH SERVICE UTILIZATION/BEHAVIOR OF PATIENT/HEALTH INSURANCE PROJECT

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