

### **BHARATHIDASAN UNIVERSITY**

Tiruchirappalli- 620024, Tamil Nadu, India

### **Programme: MA Economics**

Course Title: HEALTH ECONOMICS Course code: 22EC02b

> Unit 4 Health Care Financing

Dr. P Natarajamurthy Professor Department of Economics

### **Health Care Financing: Definition**

- Health care financing refers to the methods used to pay for health services.
- Includes both private and public sources of funding.
- Aims to ensure equitable access to healthcare services.
- Financing models impact the quality, availability, and affordability of care.
- Involves raising, pooling, and allocating resources.

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### **Key Aspects of Health Care Financing**

- Revenue Generation: Taxes, premiums, out-of-pocket payments.
- Pooling of Funds: Shared financial resources for risk reduction.
- Purchasing Services: Health care services bought by governments or insurers.
- Financial Risk Protection: Ensuring health costs do not cause financial hardship.
- Efficiency in Spending: Ensuring funds are used effectively for health outcomes.



### Health Care Expenditure: Private vs. Public

- Public Expenditure: Government funding for public health services, insurance, infrastructure.
- Private Expenditure: Out-of-pocket payments, private insurance premiums, employer-funded health plans.
  Global Differences: Public health spending in developed vs.
- Global Differences: Public health spending in developing nations.
- Health Outcomes and Expenditure: Link between spending and health outcomes.
- Sustainability Issues: Long-term challenges in financing health care

### **Public Health Care Expenditure**

- Government funding for national health systems.
- Allocation to public hospitals, clinics, and public health programs.
- Focus on preventive care and health promotion.
- Role of social health insurance programs.
- Examples of public expenditure models

### **Private Health Care Expenditure**

- Expenditure by individuals on private health services.
- Out-of-pocket spending for treatment, medication, and consultations.
- Private insurance schemes and employer-funded health plans.
- Impact of private expenditure on health inequality.
- Examples of private expenditure systems



### Healthcare Insurance: Overview

- Definition of health insurance: Protection against financial risk of health expenses.
- Types of Health Insurance: Private, public, employer-based, government-funded.
- Premiums and Coverage: Monthly payments for access to medical services.
- Pooling of Risk: Insurance pools risks to protect individuals from catastrophic costs.
- Importance of Insurance: Reduces the financial burden of healthcare expenses.



### **Types of Health Insurance**

- Private Health Insurance: Plans offered by private companies to individuals or employers.
- Public Health Insurance: Government programs like Medicare, Medicaid, and NHS.
- Employer-Sponsored Insurance: Coverage provided by employers to employees.
- Community-Based Insurance: Collectively pooled insurance schemes for specific communities.
- Voluntary vs. Mandatory Insurance: Different systems of enrolment and participation.

### **Need for General Health Insurance**

- Financial Protection: Helps individuals cover healthcare costs.
- Universal Access: Ensures everyone can access essential health services.
- Health Security: Reduces the risk of financial ruin due to medical emergencies.
- Public Health Benefits: Promotes early detection and prevention of diseases.
- Economic Benefits: Healthier populations contribute more to the economy.

### **Benefits of General Health Insurance**

- Protection from catastrophic medical expenses.
- Reduced out-of-pocket spending on healthcare.
- Enhanced equity in healthcare access.
- Improved health outcomes through preventive care.
- Economic stability for individuals and families.

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## **Need for Special Health Insurance for the Poor, Disabled, and Aged**

- Vulnerable populations face higher health risks and financial burdens.
- Poverty: Limited access to private healthcare, resulting in worse health outcomes.
- Disability: Increased need for continuous medical care and rehabilitation.
- Aged populations: Higher likelihood of chronic diseases and long-term care needs.
- Ensuring equity through targeted health insurance schemes for these groups.

### **Types of Special Health Insurance Schemes**

- For the Poor: Government-sponsored schemes like India's Ayushman Bharat.
- For the Disabled: Disability-specific coverage, addressing long-term care needs.
- For the Elderly: Senior citizen insurance plans covering geriatric care and rehabilitation.
- Universal Coverage Models: Plans that integrate coverage for all vulnerable groups.
- Integration with Welfare Systems: Combining insurance with social welfare programs.

### **Financing Health Care for Vulnerable Populations**

- Government Funding: Targeted public schemes for the poor, disabled, and aged.
- Subsidized Insurance: Reduced premiums for lowincome or high-risk groups.
- Universal Health Coverage (UHC): Ensuring all populations have access to essential healthcare.
- Role of NGOs: Community-based organizations providing healthcare services.
- Health Equity: Focus on reducing disparities in health access.

### **Financing Institutions in Healthcare**

- Government Bodies: Ministries of health, social welfare, and finance.
- Private Insurers: Insurance companies providing a range of health plans.
- Multilateral Organizations: WHO, World Bank, and the Global Fund for healthcare financing.
- Non-Governmental Organizations (NGOs): Organizations providing health services and financial support.
- Social Insurance Institutions: Public-private partnerships for pooling health funds.

### **Government Financing Institutions**

- Ministry of Health: Responsible for national healthcare policies and expenditure.
- Social Health Insurance Schemes: Public programs like Medicaid and Medicare.
- State Healthcare Funds: Provincial or regional healthcare financing in federal systems.
- Public Health Financing: Direct funding of public health programs and hospitals.
- Global Financing Programs: Partnerships with international agencies to fund health systems.

### **Financing Health Systems in Low-Income** Countries

- International Aid and Loans: World Bank, UN agencies providing financial support.
- National Health Financing: National governments' role in allocating funds for health services.
- Public-Private Partnerships: Collaboration to improve health service delivery.
- Health Insurance Models in Developing Countries: Efforts to implement universal coverage.
- Challenges: Limited financial resources, political instability, and healthcare infrastructure gaps.

### Health Care Financing in Developed Countries

- National Health Systems: Examples of NHS (UK), Medicare (Australia).
- Public Funding: Higher reliance on taxes to finance health systems.
- Private Insurance Market: Voluntary insurance for supplementary coverage.
- Social Health Insurance Systems: Countries like Germany, France, and Japan.
- Challenges in Developed Nations: Rising costs due to aging populations and chronic diseases.



### **Public-Private Partnerships in Health** Financing

- Combining government funding with private investment.
- Examples: Public-private partnerships for infrastructure projects and health insurance.
- Shared risk and resource pooling.
- Benefits: Enhanced service delivery, cost savings, and innovative health financing models.
- Challenges: Regulatory oversight, ensuring equity and access.



### **Innovative Health Financing Models**

- Pay-for-Performance (P4P): Incentivizing healthcare providers to improve outcomes.
- Health Savings Accounts (HSAs): Individuals save for future medical expenses.
- Micro-health Insurance: Small-scale insurance programs in developing countries.
- Crowd funding for Healthcare: Individuals raise funds for medical treatments.
- Digital Health Financing: Use of mobile platforms for health insurance distribution.

### **Health Care Financing and Economic** Development

- Healthcare as an economic driver: Investment in health contributes to a productive workforce.
- Health system strengthening boosts national development.
- The link between health expenditure and GDP growth.
- Economic burden of healthcare costs on low-income families.
- Policies to reduce out-of-pocket spending and promote health investment.

### **Challenges in Health Care Financing**

- Rising Costs: Increasing demand for healthcare services and pharmaceuticals.
- Equity Issues: Disparities in access to insurance and healthcare services.
- Financial Protection: Need to avoid catastrophic healthcare costs for individuals.
- Aging Populations: Growing healthcare costs for elderly care.
- Healthcare Fraud and Waste: Impact on efficiency and resource allocation.

### **Policy Solutions for Health Financing**

- Universal health coverage models to ensure equitable access.
- Strengthening Primary Health Care: Focus on prevention to reduce healthcare costs.
- Risk Pooling and Risk Sharing: Broader pooling of funds to reduce individual risk.
- Regulation of Private Insurers: Ensuring affordability and fairness in private insurance.
- Targeted Subsidies: Reducing financial barriers for vulnerable populations.

### Conclusion

- The need for sustainable health financing systems.
- Balancing public and private sector contributions to healthcare.
- Importance of insurance for financial protection.
- Ensuring equity and access for all populations.
- On-going challenges and the need for innovative solutions.

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