

Improving equity in access to essential health service for the poor rural population in China under the New Rural Cooperative Medical Scheme – Experiences from the China Rural Health Project

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BACKGROUND

With the ever-increasing income gap between different social groups, people living in poverty in rural China becomes the most vulnerable population in access to essential health service. Along with the rebuilding of new rural cooperative medical scheme (NCMS), the World Bank/DFID supported China Rural Health Project (2008-2013) has developed innovative interventions for the rural poor in 40 counties of 8 provinces to improve equitable access to essential health care.

OBJECTIVES

To improve the equality and accessibility of the essential health service for rural residents through pro-poor policies and innovations in health financing and services.

METHODOLOGY

Data mining on project implementation database and data from China rural health service survey, together with quantitative and qualitative field investigations were given to assess the accomplishments of the project.

MAJOR FINDINGS

The pro-poor interventions were conducted at all 40 study counties in 8 Province. The medical assistance system covered 170 county-level hospitals and 1172 town health centers.

Policy development and innovative interventions :

- Seamless combination between medical compensation and civil assistance;
- Adjusting NCMS reimbursement percentage for patients living in poverty;
- Enlarging the coverage of beneficiary population for reimbursement under NCMS;
- Lowering the start line of reimbursement for hospitalization for patients living in poverty;
- Reducing/waiving medical charge for patients living in poverty;
- Providing temporary assistance to patients whose income was above NCMS capping line but had difficulties in payments;
- Developing “one-stop” service and real-time settlement to guarantee the timely treatment and simultaneous compensation

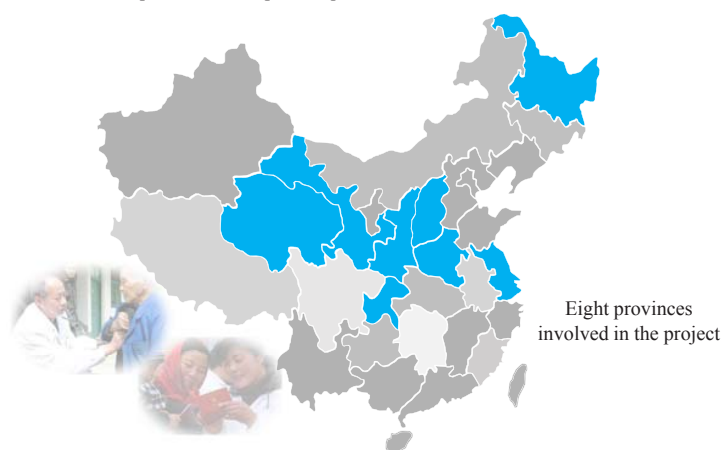
CONCLUSION:

The achievements indicated that the pro-poor health interventions could reduce the economic burden of health care, and improve the accessibility of essential health service for the poor patients in rural China.

ACKNOWLEDGEMENT

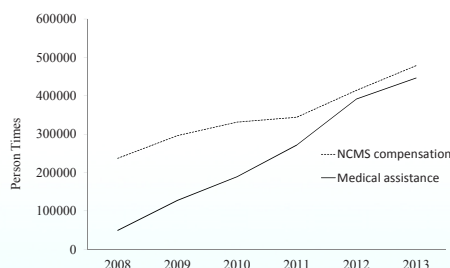
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Accomplishments of project outcome indicators:

Outcome Indicators	Target Value	Achieved in 2013
Proportion of households having an annual health expenditure exceeding 20% of household income	4% reduction	6% reduced
Proportion of OOP payment accounting for total hospitalization expenditure in NCMS participants	7% reduction	26.3% reduced
Proportion of OOP payment accounting for total hospitalization expenditure in medical assistance beneficiaries	7% reduction	37.3% reduced



NCMS Compensation and Medical Assistance during 2008-2013