

# Research on China's Health Insurance System

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**Abstract:** Health is an important goal for every individual and society. Health insurance is an important means to deal with health risks, and it is also the core content of the public happiness index. At present, the reform of the health insurance system directly related to the pursuit of health goals is becoming one of the important policy goals of many countries. This article mainly studies China's health insurance system.

**Keywords:** Health insurance system study

## 1. Introduction

Health is an important symbol of social progress, material civilization and the development of spiritual civilization. The pursuit of health is the goal of each individual, because human life is only one time, and the prerequisite for the realization of the quality of life and its value is health; health is also an important social goal. The International Primary Health Care Congress in 1978 declared in its congress - - The "Almaty Declaration" advocates that "health is a basic human right and achieves the highest possible level of health. It is one of the world's most important social goals." As a basic human right, it provides effective members of society. Ways and channels to promote their health are important responsibilities of the country and society. Therefore, in the past few decades, health, health, and health care have become very important issues in both developed and developing countries.

Based on the research of China's health insurance system, it is helpful to further clarify the development direction and positioning of China's health insurance by summarizing and analyzing the global experience and development trend of the health insurance system. Studying China's health insurance system as a theme, through reviewing the development history and problems of China's health insurance system, especially through comprehensively examining the role of government and the market in different stages of health insurance system construction, to promote the sustainable and healthy development of China's health insurance system. Is very important. Based on the research of China's health insurance system, the construction of a health insurance system that combines the government and the market will promote the reform of the medical and health system that has entered the "deepwater region" and will improve the health quality and happiness index of the people and achieve economic and social benefits. Sustained development has important strategic significance.

## 2. The Health Insurance System Theory Review

Health Economics has a complete system. The research contents mainly include: First, general research, mainly including health characteristics, status indicators, health value, utility, etc.; second, factors that affect health, such as human genes, working and living environment, consumption patterns, lifestyle, Education level, income, etc.; third, from the micro perspective, mainly the supply and demand of medical services, as well as the balanced analysis and efficiency analysis of the healthcare industry; fourth, the macro perspective, focusing on systematic research on the entire healthcare industry, including regions. Inter-country and country-to-country comparison studies. The risk characteristics of health insurance are the core issues in the study of health economics theory. Arrow's research is considered to be the starting point for the study of risk characteristics of health insurance. It has the following characteristics: 1. Information asymmetry; 2. Principal-agent relationship; 3. Caused demand; 4. Moral hazard and adverse selection.

## 3. Development and Dilemma of Health Insurance in China

The first is from personal health spending. The burden of personal health expenditure is heavier. From 1980 to 2011, the proportion of China's total health expenditure as a percentage of GDP remained at a level of between 4 and 5%, with little change, but personal health expenditures for the same period were presented to the "U" type. From 1980 to 2000, with the promotion of "marketization reform" in the field of health care, personal hygiene support has rapidly increased, from 21.1% to 59%. This means that while government responsibility has decreased, health expenditure has largely shifted to individuals. After 2000, especially since the implementation of the new medical reform program in 2009, with the ad-

justment of national policies, the proportion of government and social health expenditure has been continuously increased, and personal health expenditure has shown a downward trend, falling from the highest 59% to the end of 2011. 34.8%. However, it is still 15.3 percentage points higher than the level of 21% in 1980. Therefore, the public's evaluation of the improvement of personal health expenditure is still negative.

The second is from the expenditure of medical expenses. In recent years, due to the general rise in medical expenses, the people have been under greater pressure. From 2007 to 2011, the per capita medical expenses of outpatients and discharged patients showed a clear upward trend. From 2007 to 2011, per capita medical expenses for outpatients and per capita medical expenses for discharged patients rose by 43.84% and 37.19%, respectively. The contradiction between the rise in medical expenses and the country's limited ability to pay for medical treatment has become one of the prominent problems in the medical and health field in China.

The current social medical insurance system faces the limitations of material preconditions and foundations. Economic development is the material prerequisite and foundation for the realization of medical security. The choice of medical security model and the level of medical security are closely related to the level of economic development. The current social medical insurance management is decentralized and its operational efficiency is low. Judging from the actual operation situation, the urban medical insurance for employees and the medical insurance for urban residents are generally headed by the human resources and social security departments at all levels, but they are managed by different internal agencies. The new rural cooperative medical service is under the supervision of the health department. The artificial separation of management makes it difficult to form a unified and complete management system across the en-

tire basic medical security system. In the formulation and implementation of policies, there is a lack of overall planning and coordination, and it is easy to form a vacuum in policy and management. The existence of a dual role of the government makes it difficult to achieve a fair and effective allocation of health resources. In the framework of China's health insurance system, the government plays a dominant role.

The new medical reform proposed the phased goal of "everyone enjoys basic medical and health services". As an important institutional arrangement for the modern government to solve people's health problems, we believe that "everybody enjoys health" should be the fundamental goal. Under this goal, the reform of the health insurance system should focus on the protection of medical expenses and medical services. The three dimensions of safeguards and preventive medical care are deepened. The construction of the health insurance system must always pay attention to the effective promotion of the national health level and realize "everybody enjoys health". The realization of this goal needs to be based on the combination of market and government, combined with the perspective of perspective on how to consolidate and expand the basic field of "medical cost protection", effectively cut into the "medical service guarantee", and promote the "prevention of medical security" .

## References

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