1. People movements to sponsor the National Health Security (Insurance) Bill

• In 2001, 12 civil society organizations campaigned and succeeded in collecting 52,772 signatures of Thai citizen to sponsor the National Health Security Bill to the parliament. This is according to the 1997 People’s constitution. It is the first Bill under this clause.

• After the parliament considered and accept the Bill in the first reading, a Parliamentary Commission was set up with 5 representatives from the civil society to consider and revise the Bill.

• 11 Nov. 2002, enactment of the National Health Security Act.
2. Voice in the governing bodies of the UHC

- 5 representatives each from NGOs and local govt. are members in the Governing Board and Quality Board and also members in their subcommittees including Regional and Provincial Sub Boards, as well as community health development funds.
- Provincial Independent Complaint Centers were established and operated by civil society organization.

People Participation Mechanisms in National Health Insurance System

- National level: Health Secur. Board, Quality Contr. Board
- Provincial level: Comm. Health Fund Comm.
- Local level: People (PP, Provider, Consumer, local autho.)
Voice of the People in NHSS through

1. General Opinions of Providers and Beneficiaries in Annual Meeting of the Board. (section 18(13)
2. Consumer Protection channel (call center 1330)
3. Independent Complaint Center in accordance with NHS Act Section 50(5)
4. Preliminary Assistance for Patients and Service Providers (No Fault Compensation) (section 41)
5. Friendship Support Center: Patient Participation in the Healthcare System

1. The ‘1330’ call center

Services Provided

- Complaints about quality of services 3,175 (0.56%)
- Complaints about management in general 4,337 (0.76%)
- Inquiries 558,528 (98.13%)
- Complaints about patient refer 3,124 (0.55%)

569,164 complaints

As of June 2011
2. Independent Complaint Centers

- Section 50(5) stipulates that a complaint unit that is independent from the accused be established as a center to protect rights. (now 42 centers)
- Have to disseminate information and knowledge to foster the people’s understanding of their rights and the channels for accessing those rights independently.
- The Standard and Quality Control Board declared the criteria for registration of Independent Complaint Centers on 19 February 2009 and develop training curricula to train the center’s staffs.

Implementation Progress

1. Explanation, foster understanding: Section 57, 59 82 cases (61%)
2. Submit case to Consideration Sub-committee: Section 41 12 cases (8.8%)
3. Submit case to Quality Control Sub-committee 7 cases (5.1%)
4. Provide other assistance 34 cases (25.1%)

Total Complaints 135 cases (100%) 41 centers

As of June 2011
3. Preliminary Assistance for Customers and Service Providers (No Fault Compensation)

- Section 41 required that the NHS Committee earmark no more than 1 percent of the fund for preliminary monetary assistance to service recipients.
- This is managed as the No Fault Compensation fund. The patient has only to prove that there have been negative implications from receiving health services. There is no need to prove who is wrong.
- The Standard and Quality Control Board will make the final decision in providing the no fault compensation within the determined rate or refusing the appeal.

Implementation Progress

Rate of no fault comp.
- Death or permanent disability no more than 200,000 baht or US$ 6,350
- Loss of organ or handicapped no more than 120,000 baht or US$ 3,810
- Injury or chronic illness no more than 50,000 baht or US$ 1,587

no fault liability in chapter 41 and provider protection of National health security act 2002
4. Friendship Support Center: Patient Participation in the Healthcare System

- NHSO has coordinated and supported the creation of networks and volunteer communities of patients who have received high cost treatment since 2003.
- Emphasis on enabling healthcare centers providing care for chronic patients to provide space and to establish and continuously develop a system of active patient volunteers and care providers.

High Cost Chronic Patient Network in Health Security System

- Heart Patient Network
- Diabetic Patient Network
- Cancer Patient Network
- Renal Patient Network
- Disability Network
- AIDS Patient Network
Implementation Progress as of September 2011

- 253 healthcare centers have participated in implementing Friendship Support Center activities and provided opportunities for networks of patients / communities to participate.
- Result to the development of the service system where patients and service recipients participated in providing humanized healthcare services leading to the tangible creation and implementation of the “Friendship Support Center”.

Satisfaction of UC People and Providers from 2003-2009

Source: ABAC poll, Assumption University
Conclusion

- The Universal Coverage Healthcare System has emphasized the importance of protecting the rights to participation of the people, healthcare recipients and patients,
- To receiving no fault compensation and to provide humanized healthcare with the objective of achieving a healthcare system that responds to the needs of the people and patients
- And to improve their quality of life both physically and mentally.

Thank you for your attention

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