

Abstract

The government of Lao PDR has aimed to achieve universal health coverage by 2025. However, the current coverage of health insurance schemes is lower than the planned expansion for 2015 which was 50% (the actual coverage was only 29% of total population in 2015). The research problem is why the planned coverage failed to reach the planned target and whether Lao PDR will be able to find solutions so that universal coverage can be achieved in the future. This dissertation examines the prospects of achieving universal health coverage and equity access to health care services in Lao PDR. The study includes qualitative and quantitative parts and a field study was also conducted for collection of original data from a large sample of 400 households living in 10 villages in the Xaythany district, Vientiane Capital for an in depth understanding of the issue. The study covers four major areas related to universal coverage and equity access to health service in Lao PDR, the health system and social protection schemes, the expansion of the coverage of health insurance schemes, the level of satisfaction with healthcare services among the insured versus uninsured households, and catastrophic health expenditures among insured and uninsured groups.

The study applies qualitative methods after reviewing the existing relevant literature and documents, by interviewing key informants involved in the implementation of health insurance schemes in Lao PDR as well as providers of health services at various levels from the Ministry of Health down to the district level. In addition, cross-sectional household survey was employed. Structured pre-coded questionnaires were used to collect information from 400 households, half of which were uninsured. An independent sample T-test was used to determine the levels of satisfaction on health care services among the insured and uninsured groups. The WHO catastrophic health expenditure analyzing tools were also employed to determine catastrophic health expenditure among insured and uninsured households in Xaythany District.

The results of the study show that low capitation fees, overutilization of health services, unclear roles and mandates of institutions responsible for health insurance schemes, weak law enforcement, and low levels of social solidarity are crucial factors that have slowed the expansion of health insurance schemes in Lao PDR. While health service providers believe that introduction of copayment was necessary to improve the quality of care and eliminate unnecessary health seeking behaviors, health policy makers and health insurance managers did not support the co-payment as they feared that it would discourage people from joining health insurance schemes. The study also found that the insured group had different levels of satisfaction with the overall quality of services, drug supply, attitudes of staff and waiting time in the central hospitals compared to the uninsured group. At the district level, the insured and uninsured households also had different levels of satisfaction with the overall quality and drug supply. In addition, the analysis found that both the insured and uninsured experienced relatively high catastrophic health expenditures. Such high catastrophic expenditures reflect the inadequate depth of health insurance schemes in the country. From these findings, it could be argued that limited financial resources have been the major obstacle for Lao PDR to achieve universal health coverage by 2025, and strategies are needed to gradually increase coverage to expand the size of the insured pool of health care users. This would require policies to encourage the participation of private sector in healthcare, improvement of the quality at public health care facilities, introduction of user fees when possible, and provision of more depth of coverage to deal with catastrophic health care expenditures. This needs to be implemented with a more balanced approach in provision of health services.