



Taiwan's National Health Insurance

Oliver Liu

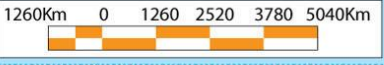


National Health Insurance Administration
Ministry of Health and Welfare

WORLD MAP



- | | | | |
|---------------------------|-------------------|-----------------------|------------------------------------|
| 1. Netherlands | 10. Austria | 20. Ghana | 29. Liechtenstein |
| 2. Belgium | 11. Hungary | 21. Togo | 30. Montenegro |
| 3. Luxembourg | 12. Serbia | 22. Benin | 31. Kosovo |
| 4. Switzerland | 13. Moldova | 23. Cameroon | 32. Palestinian Territories |
| 5. Slovenia | 14. Macedonia | 24. Equatorial Guinea | 33. St. Vincent and the Grenadines |
| 6. Croatia | 15. Albania | 25. Rwanda | |
| 7. Bosnia and Herzegovina | 16. Cyprus | 26. Cambodia | |
| 8. Czech Republic | 17. Lebanon | 27. Panama | |
| 9. Slovakia | 18. Guinea-Bissau | 28. Malawi | |





Profile of Taiwan

Population	23.37 million
Land area	36,193km ²
Ageing	11.53% (2013)
GDP per capita (2012)	US\$ 20,423 (nominal) US\$ 38,357 (PPP, by IMF)
Crude birth rate	8.53 ‰ (2013)
Crude death rate	6.68 ‰ (2013)
Infant mortality	3.67 ‰
Maternal mortality	8.53 o/0000 (2012)
NHE to GDP	6.62% (2012)
Life expectancy	83.3 (F) / 76.7(M) (2013)





Taiwan's Major Social Insurances

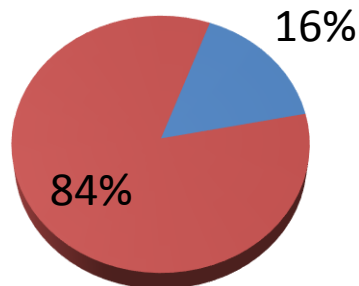




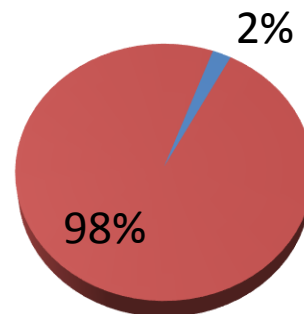
Taiwan's Healthcare Delivery System

- Dominated by the private sector
- A closed-staff medical structure for hospitals
- No gate-keeper system
- High volume of hospital OPD services
- No waiting list as defined in western countries

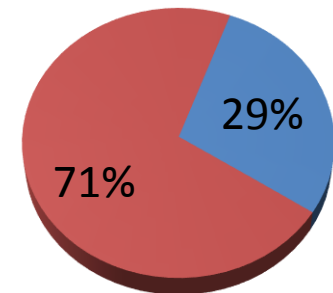
Hospitals



Clinics



Beds



■ public ■ private



NHI Characteristics

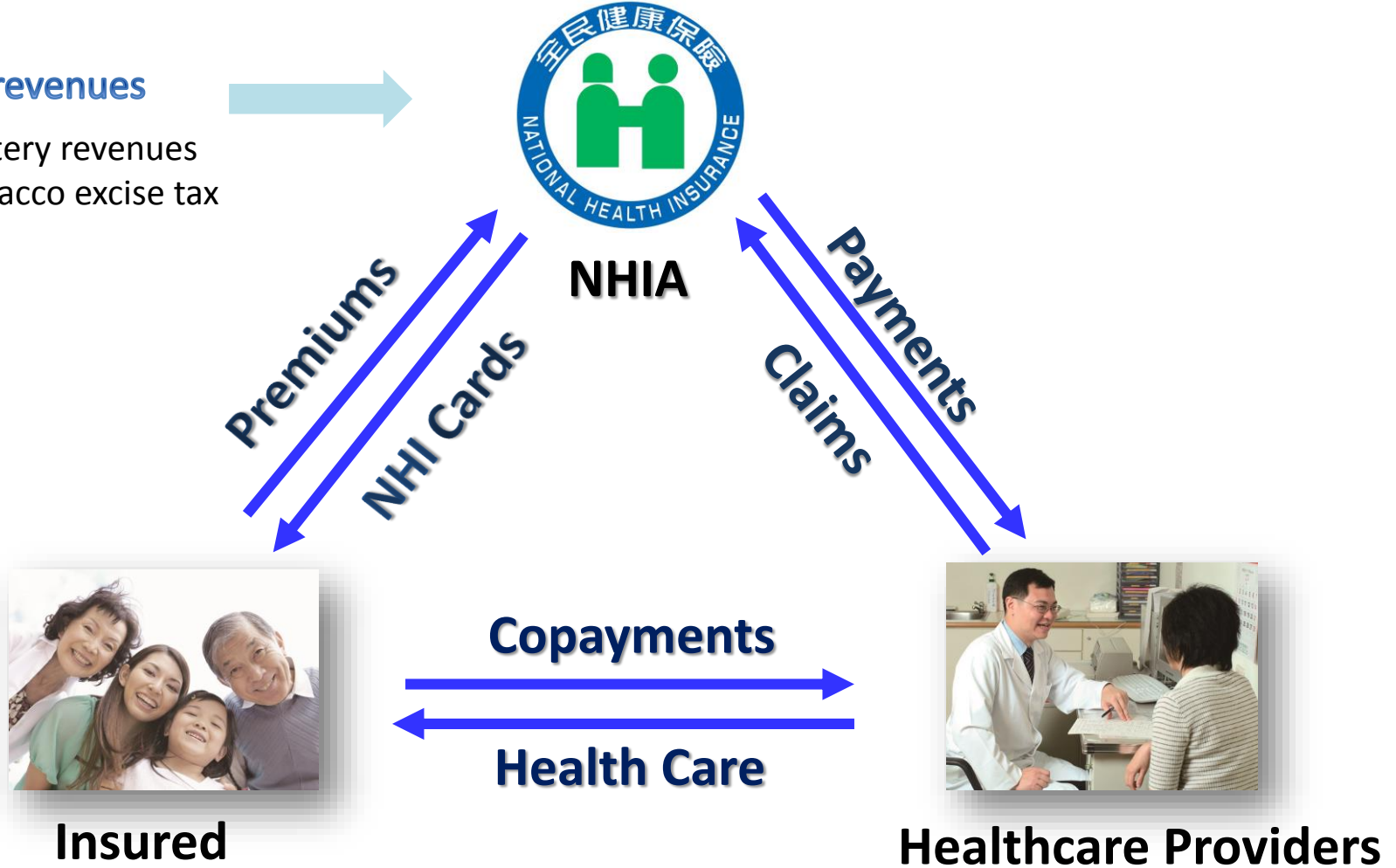
Coverage	Compulsory enrollment for all citizens and legal residents (99.9% of the population is covered by the NHI)
Administration	Single-payer system run by the government
Financing	Premiums
Benefits	Uniform package, copayment required
Providers	<ul style="list-style-type: none">•Contract-based•93.46% of healthcare providers contracted with NHI
Payment	Plural payment programs under the global budget payment systems
Privileges	Premium subsidies and copayment waivers for the disadvantaged



NHI Framework

Other revenues

1. Lottery revenues
2. Tobacco excise tax





NHI Financing

General Premium & Supplementary Premium

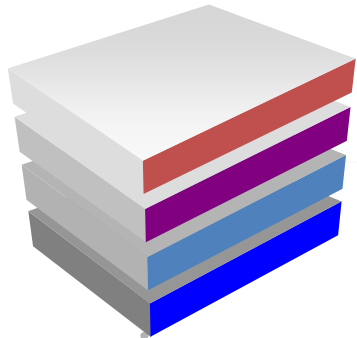
Calculated on payroll-related income

Main Revenues

Imposed on non-payroll incomes

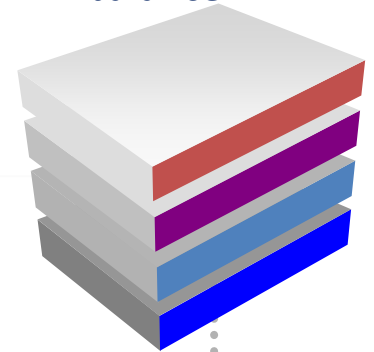
Premium Rate

Reviewed by the NHI Supervisory Board



Pay-As-You-Go

Maintain financial balance



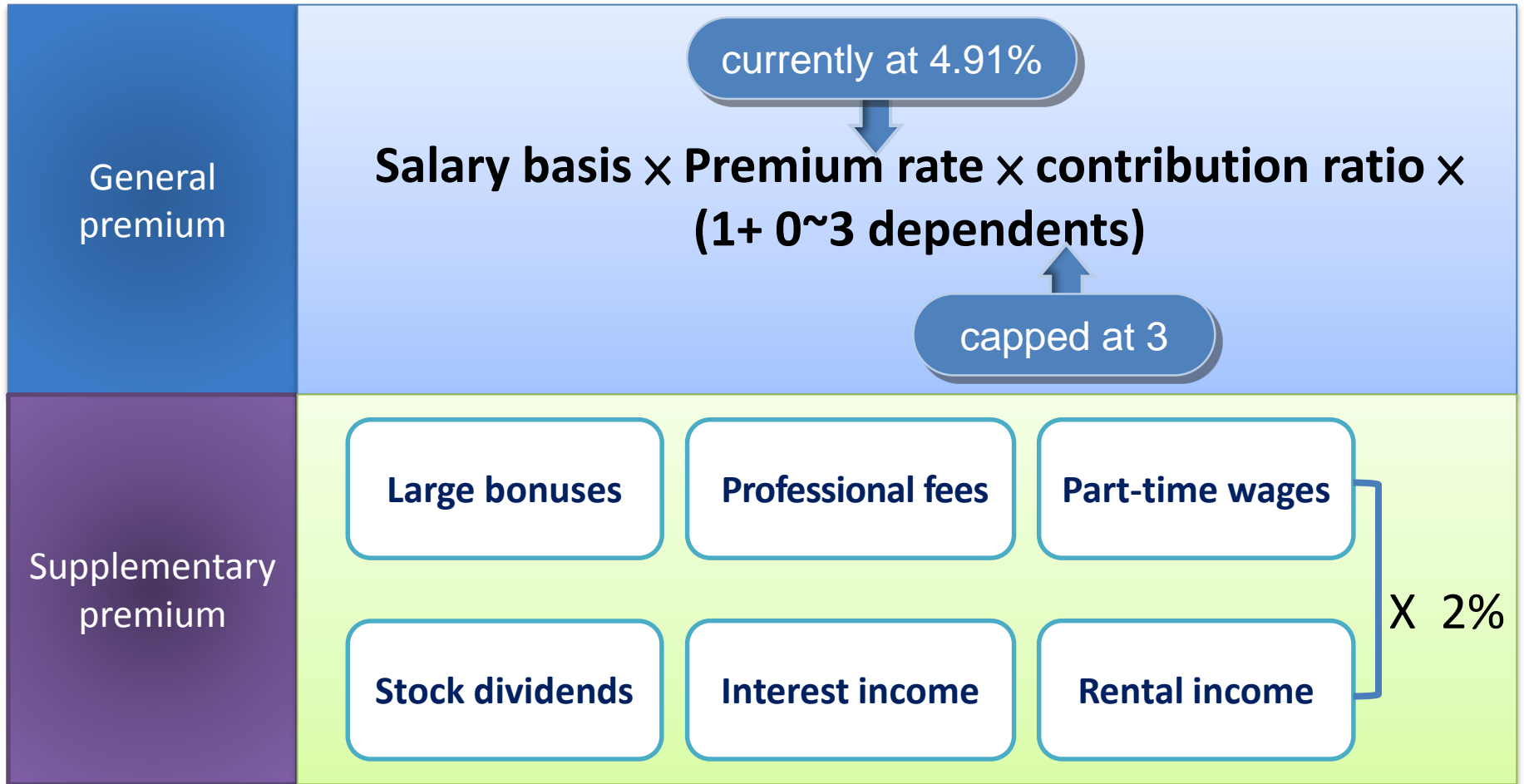
NHI Fund

Other Revenues

Lottery revenues, Tobacco excise tax



Premium Collections





Contribution Shares

Unit:%

	Category	Insured	Employer	Government
1	Private-sector employees	30	60	10
	Government employees	30	70	--
	Self-employed/Employers	100	--	--
2	Occupational union members	60	--	40
3	Farmers/Fishermen	30	--	70
4	Conscripted military personnel	--	--	100
	Prisoners	--	--	100
5	Low-income households	--	--	100
6	Veterans	--	--	100
	Community groups	60	--	40



Benefits

Disease

Injury

Maternity care

- Inpatient care
- Outpatient care
- Prescription drugs
- Dental services (orthodontics, prothodontics excluded)
- Traditional Chinese medicine
- Day care for the mentally ill
- Home nursing care



Copayment for Outpatient Care

Unit: US\$

	Outpatient Care		Emergency Care	Dental Care/ Chinese Medicine	Drug (20%)
	With Referral	Direct Visit			
Medical Centers	7	12	15	1.7	0~6.7
Regional Hospitals	4.7	8	10	1.7	0~6.7
District Hospitals/	1.7	2.7	5	1.7	0~6.7
Clinics	-	1.7	5	1.7	0~6.7

Exemptions:

(1 USD = 30 NTD)

1. Catastrophic diseases and child delivery.
2. Medical services offered in mountain areas or on offshore islands.
3. Low-income households, veterans, and children under the age of 3.
4. Insured in areas with inadequate medical resources.



Coinsurance for Inpatient Care (Acute Care)

Length of Stay	Rate
Within 30 days	10%
31 to 60 days	20%
Above 61 days	30%

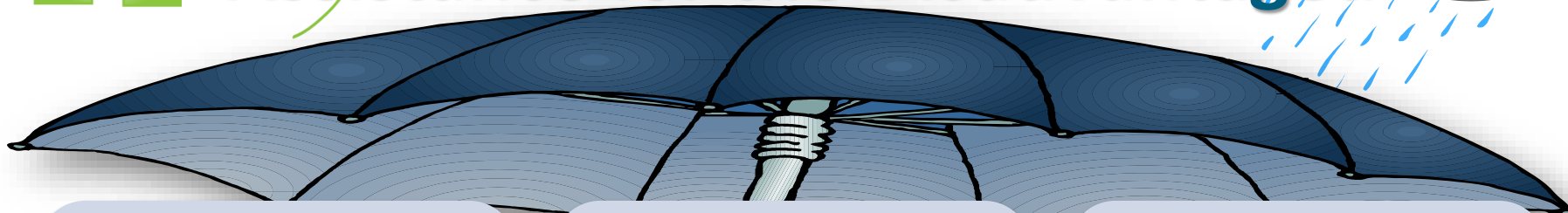
Coinsurance ceiling for the inpatient care in 2014:

1. US\$1,067(NT\$32,000) per stay for the same disease.
2. A total of US\$1,767(NT\$53,000) accumulated in the entire calendar year.

(1 USD = 30 NTD)



Assistance for the Disadvantaged



Statutory premium subsidies

Low-income households

Disabled persons

The elderly

The temporarily unemployed

Financial assistance for the near poor

Interest-free Loans

Payment by installments

Referrals to charity organizations

Medical assistance for the disadvantaged

Guaranteed emergency services

Copayment subsidies and exemptions



Alleviating Financial Burdens

Patients with catastrophic diseases represent 3.94% of population, who used 27.58% of NHI health expenditures.

Type of User	Medical Expenses	Equivalency
Per capita	NT\$25,258	1.0
Per catastrophic disease	NT\$179,249	7.1
Per cancer patient	NT\$135,890	5.4
Per cirrhosis of liver patient	NT\$138,864	5.5
Per dialysis patient	NT\$586,200	23.2
Per patient on respirator	NT\$726,860	28.8
Per hemophilia patient	NT\$3,305,733	130.9



NHI Payment Systems

1995

**Fee for
service**

1998 Global Budget w/FFS

- 1998 Dental care
- 1999 Chinese Medicine
- 2001 Clinics
- 2002 Hospitals
- 2003 OPD Dialysis

2012 Capitation (pilot)

2010 TW-DRGs (Inpatient)

2004 RBRVS

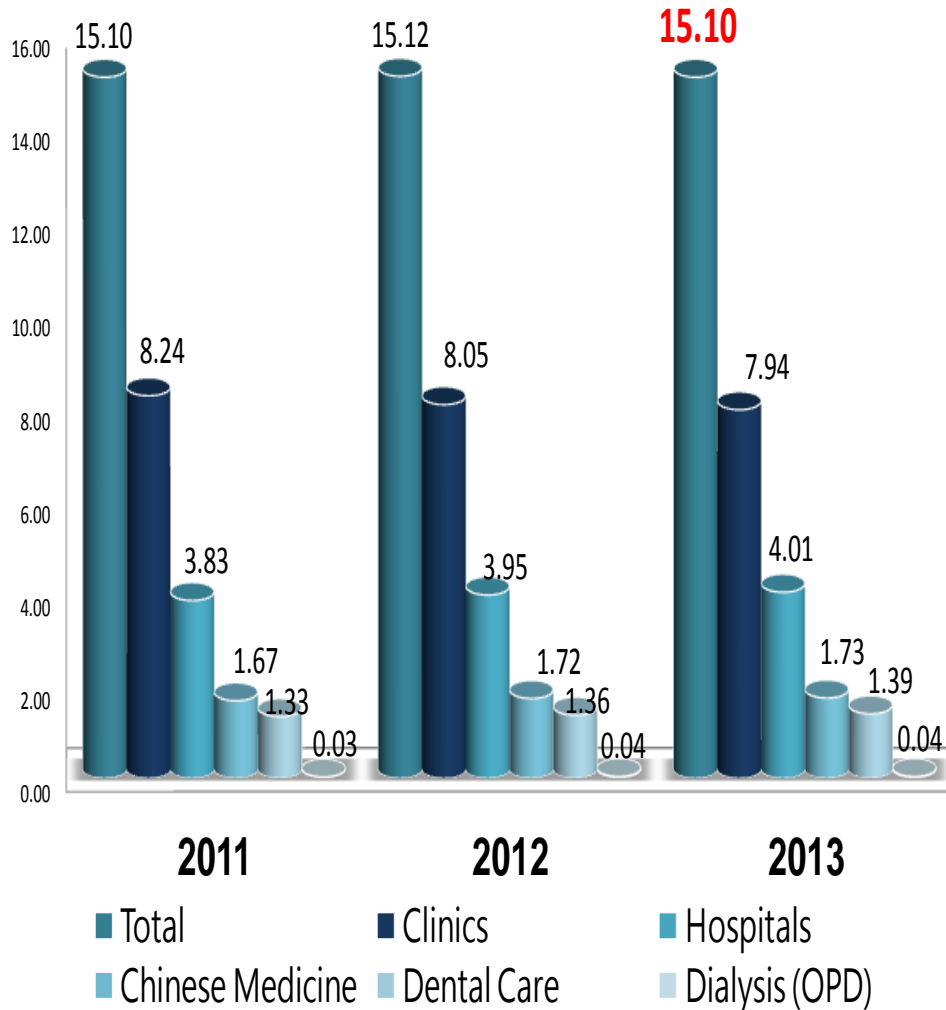
2001 Pay for Performance

1995 Case Payment

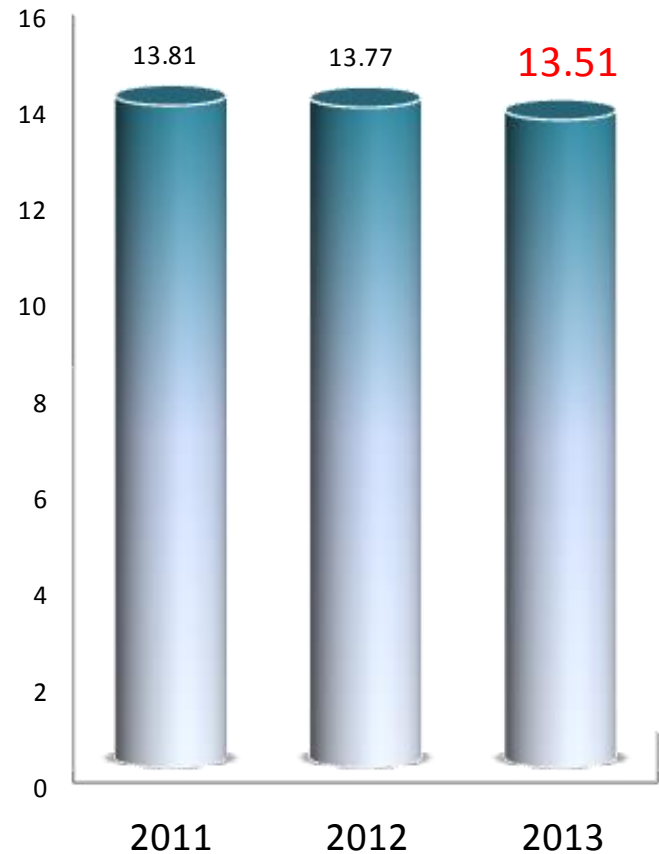


NHI Medical Utilization

Outpatient visits per person per year



No. of hospital admissions per 100 persons





NHI Smart Card

Simplification of management process

Daily update of medical visit data

Infectious disease tracing & monitoring

Heavy-user detection & management



- 1. Last Six Medical Visits**
- 2. Drug Prescriptions, Drug Allergies**
- 3. Catastrophic Diseases**
- 4. Organ Donation Consent**
- 5. Palliative Care**



NHI Pharmacloud

Pharmaceutical Records Database

488
Hospitals



NHIA head-

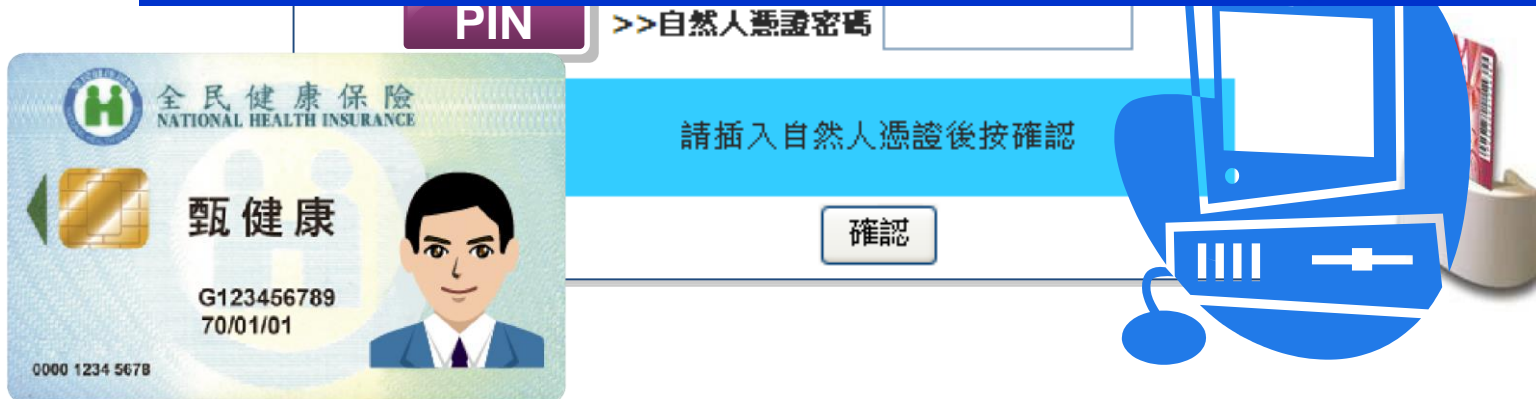
Keep patients safety
Prevent duplicated prescriptions

- A patient-centered medication information system established in July 2013
- Information updated on a daily rolling basis
- Allowing authorized medical practitioners to **view real-time medication records** with patient's consent
- Subject to strict privacy and security through VPN network



My Health Bank

Keep patients safety
Close information gap

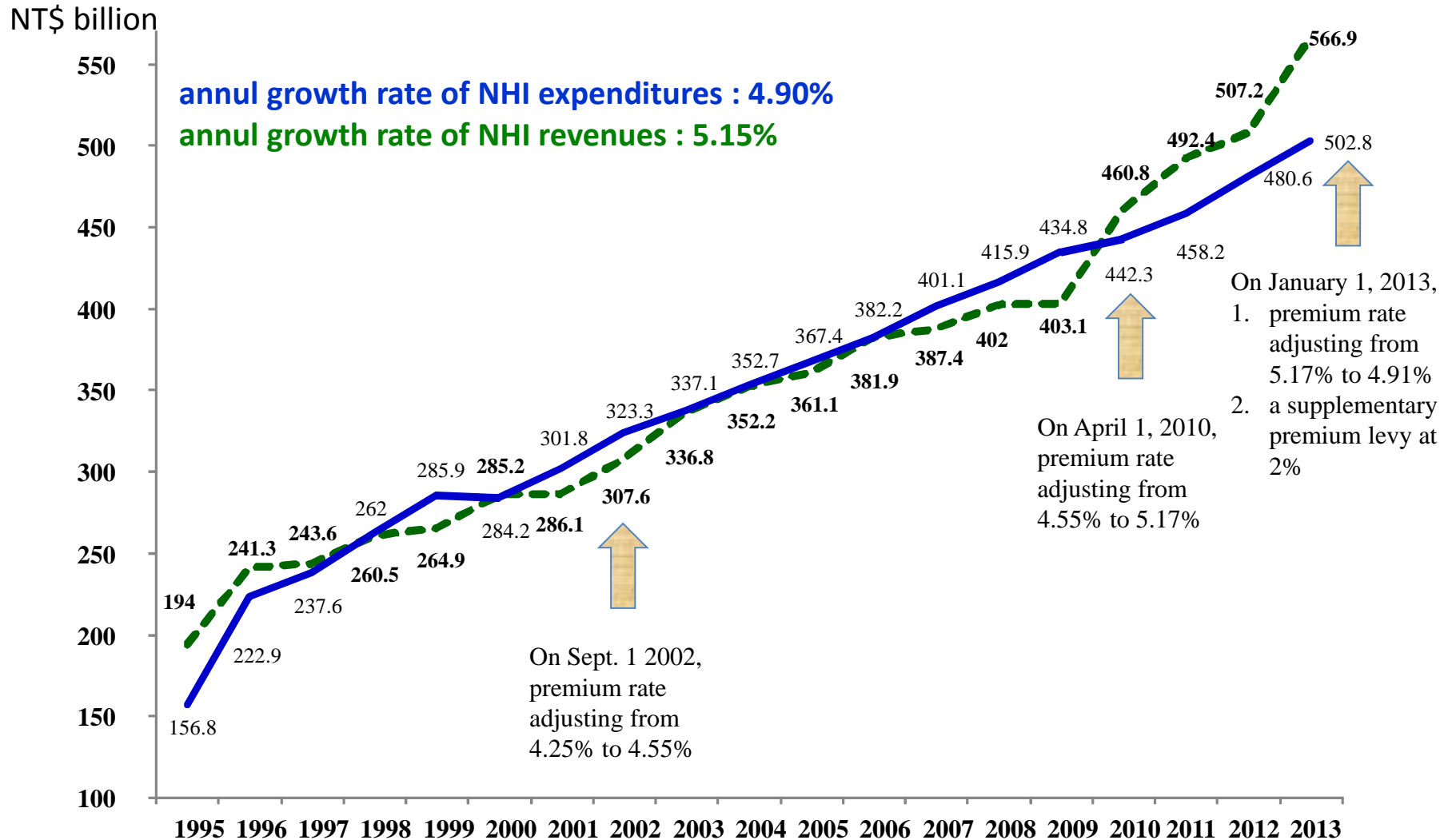


- The medical information includes the provider's names, visiting dates, diagnoses, medications, examinations, copayments, and the NHI expenditure.



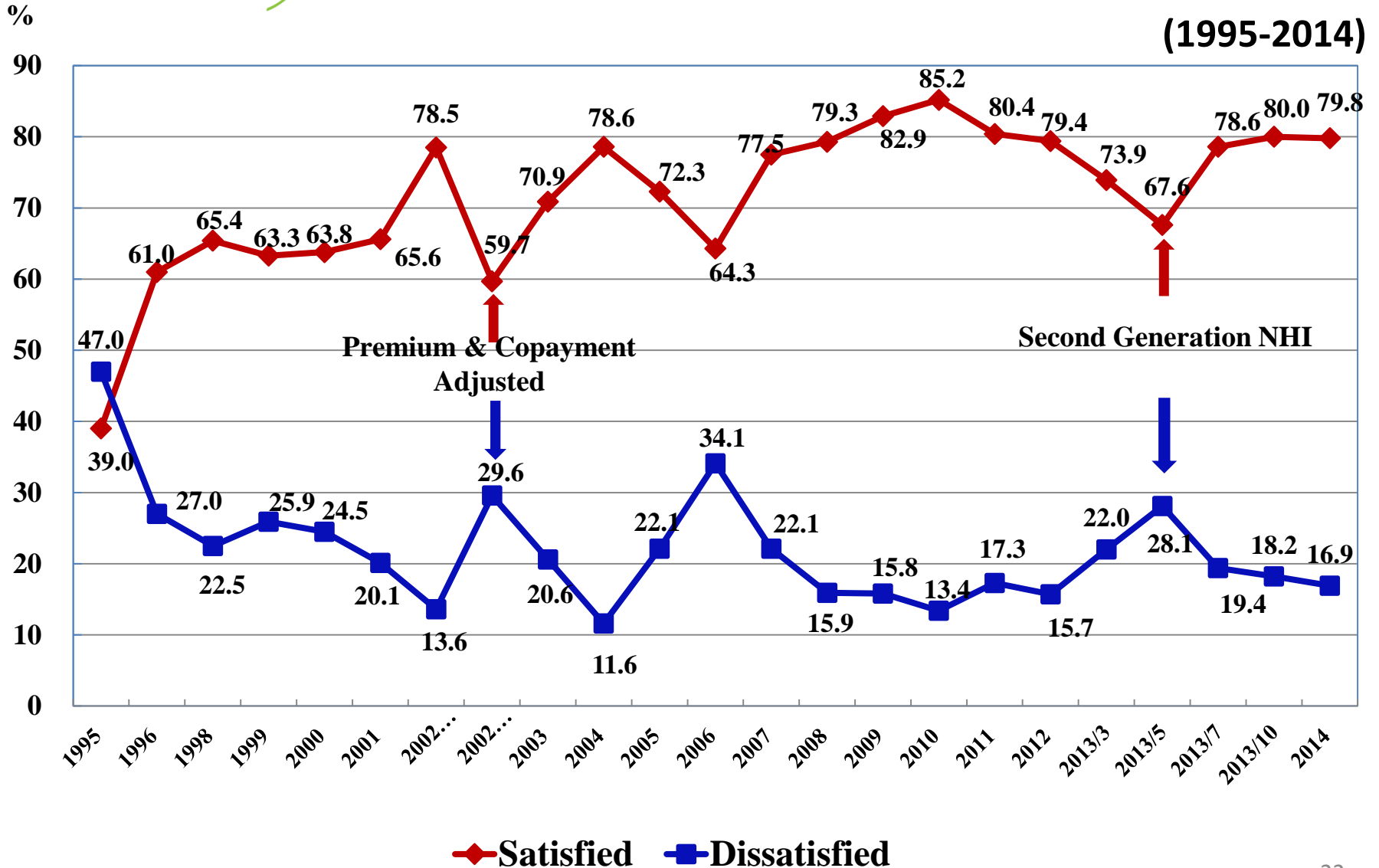
Trend of NHI Financial Status

• Accumulated surplus as of 2013: NT\$85.1 bn





High Public Satisfaction





Major NHI Achievements





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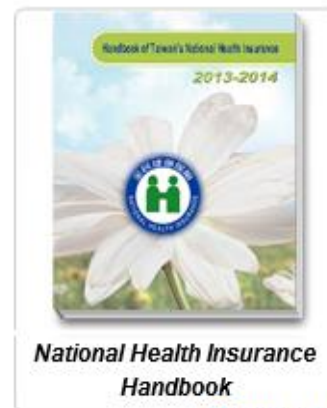


The 2nd Generation of NHI

Bring Your NHI Card

International Perspectives

▶ Remember to Bring Your NHI Card when Visiting a Doctor



National Health Insurance Handbook

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? About NHI

i Program Overview

Enrollment

Premium Contribution

Medical Services

Insurance Card

Law & Regulations

Assistance Measures

Special Medical Needs

Other Projects

Statistics &

R&D



Hot News

2013-05-06 **Preserving Medical Resources is a Shared Responsibility**

2013-05-06 **The Bureau Takes Action to Control Medical Resource Abuse**

2013-05-06 **Visit a Local Post Office for Quick and Easy NHI Card Applications**

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Cherishing Health Insurance for a Healthy Taiwan
National Health Insurance Administration
<http://www.nhi.gov.tw>



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for your kind attention!***

