

Health insurance for people with citizenship problems in Thailand: a case study of policy implementation

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Abstract

In 2002, Thailand achieved universal health coverage through the introduction of the Universal Coverage Scheme (UCS). However, people with citizenship problems, so-called ‘stateless people’, were left uninsured. Consequently, the ‘Health Insurance for People with Citizenship Problems’ (HIS-PCP) policy was adopted in 2010 with features emulating the UCS. This study sought to examine the operational constraints faced by health providers in implementing the HIS-PCP policy. Qualitative methods were used, and a case study was conducted to explore the implementation of the HIS-PCP in Ranong and Tak provinces. Individual in-depth interviews and group interviews were conducted with a total of 33 key informants. Interview data were analysed by a thematic approach. The study found that the HIS-PCP faced several operational challenges. Inadequate communication and unclear service guidelines contributed to ineffectiveness in budget spend and service provision. Other problems included the legal instruments that permitted stateless people to live only in certain areas, when such people were in fact highly mobile. Some providers adapted their practices to cope with on-the-job difficulties, including establishing a mutual agreement with neighbouring hospitals to allow stateless patients to bypass primary care gatekeepers. The challenges were aggravated by the delays in nationality verification procedures and insufficient collaboration between the Ministry of Public Health (MOPH) and the Ministry of Interior. Policy recommendations are suggested. In the short term, collaboration with relevant authorities both within and outside the MOPH should be improved. Guidelines concerning budgeting and scope of service provision should be fine-tuned. In the long run, the nationality verification process for stateless people should be expedited. The MOPH should develop clear and practical guidelines to assist health personnel to support patients to resolve their citizenship problems.

Key words: Stateless, citizenship problems, health system, health policy, health insurance, evaluation, case study, Thailand