



21世纪中国地方公共治理现代化研究

医保筹资与待遇调整 关联机制研究

袁 涛 著



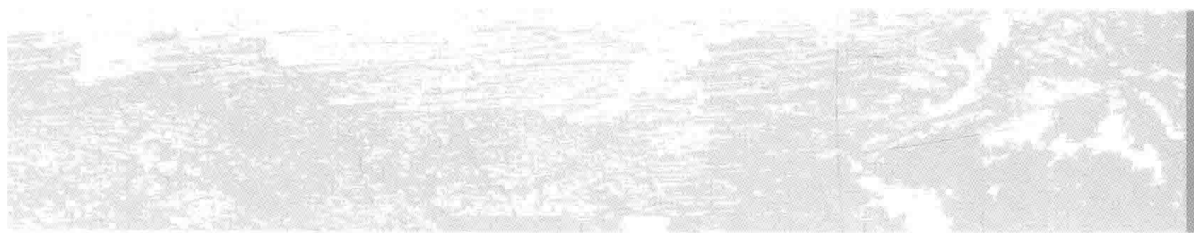
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中文摘要

在社会生产力尚不足够发达，物质财富尚不足够丰富的社会主义初级阶段，如何在公平合理地筹资的同时尽可能给予国民充足的保障，解决健康筹资与待遇需求之间的矛盾，是完善中国特色社会医疗保险制度建设的核心议题。

本书所讲筹资与待遇的关联机制，主要是从宏观层面分析社会医疗保险制度基金财务的平衡机制。从筹资与待遇的关联机制看，社会医疗保险基金的财务年度平衡机制有以收定支、以支定收两种基本模式。以收定支，是根据所能筹集的资金收入确定支出规模，其特点是预算编制不产生赤字，以利于控制支出成本。以支定收与以收定支恰好相反，其基本原理是根据支出需求规模筹集所需资金。

对社会医疗保险制度来说，理论上，保费核定是基于风险评估预测的结果，“以支定收”是保险制度的内在规律。但是，实践中，我国城镇职工基本医疗保险制度却宣称“以收定支”为基本原则。两种收支平衡原则到底有何不同？中国城镇职工基本医疗保险制度为什么要宣称“以收定支”为基本原则？其实践效果到底如何？中国的社会医疗保险有无可能以及有无必要转向“以支定收”的财务平衡模式？表面上看来，这些问题似乎无关紧要，然而，如果循着不同路径去实践，则会产生不同的实践效果，有些施政方向甚至是悬殊极大，不仅关系到两种不同的建制理念、筹资理念和管理服务理念，还关系到我国社会医疗保险制度建设的福利成本，更关系到社会医疗保险制度的待遇水平的确定以及制度的长期可持续发展，实则是社会医疗保险制度建设的核心问题。

为了从理论上厘清“以收定支”和“以支定收”两种社会医疗

保险财务平衡原则的基本内涵、缘起和具体的测算方法,比较分析二者的异同,厘清有关基本概念,更好地指导社会医疗保险财务预算编制工作,本书梳理了我国社会医疗制度的基本概念、制度特点和主要功能,从理论和实践相结合的比较视角,研究分析了以收定支和以支定收财务平衡方法的异同,并从收支关联的视角,构建适用于我国社会医疗保险政策环境的筹资与待遇关联机制模型,用以分析和揭示我国社会医疗保险基金财务平衡的内在本质规律。

通过本书的研究发现,社会医疗保险筹资与待遇是一个事物的两个方面,二者同寓于制度建设之中,相互支撑、互相关联、缺一不可。若将二者割裂,循着不同的路径,可能会产生截然不同的效果。所谓社会医疗保险筹资与待遇关联机制,其实质是制度覆盖人口结构及其健康状况、医疗消费服务价格和待遇保障水平综合作用的结果,是参与要素此消彼长的互动关系。在筹资与待遇关联机制模型中,缴费基数与费率成反比,人口负担系数、住院率、次均费用与岗平工资之比、报销比例与费率成正比。以支定收是社会医疗保险财务平衡的本质规律,而以收定支的政策实践必然存在诸多问题。

基于本书构建的关联模型,主要开展了三个层面的定量分析研究:

一是构建筹资与待遇关联机制数理模型,并在模拟现实政策环境下,验证和揭示社会医疗保险筹资和待遇关联机制各内生要素之间的数量关系。譬如,在既定的假设条件下,住院率每提升1个百分点,费率则需相应提升0.29%;次均住院费用相对于岗平工资每提升1个百分点,则相对应地需带动费率提升0.2%;人口负担系数每增加1个百分点,费率则需相应提升0.14%;次均住院费用报销比例提升1个百分点,则需费率上升0.07%。

二是基于所构建的数理模型,代入统计经验数据,对实践中我国“以收定支”的财务平衡模式进行政策实践效果的评估。经实证分析发现:实践中,我国城镇职工医疗保险制度宣贯“以收定支”为基本原则,不仅存在高额的超额负担和费率扭曲(G省2005—2015年的11年间,城镇职工基本医疗保险制度累计征收了约34.29%的超额负

担,平均每年约2.09%的费率扭曲,费率的扭曲系数约占名义费率的23.73%),且看似相对稳定的费率的背后,其实隐藏着依赖费基应对支出增长的玄机;在医疗服务价格基本平稳的背后,暗藏着不断高企的住院率;缴费年限政策简单粗放、设置过低;在以收定支的指导原则下,事实上存在盲目频繁调整提高医保待遇,致医保基金不堪其重等问题。

三是应用筹资与待遇关联的基本原理,结合当前国家“十三五”规划改革的有关政策要求进行案例应用研究,以验证本书所构建的社会医疗保险筹资与待遇关联机制的可行性、科学性、实用性。从生育并入医疗保险的案例测算中可以看出,所谓筹资的公平性,主要在于同等缴费人群之间均等缴费义务;而政府责任在于为无力缴费人提供补助。从筹资与待遇关联的视角来看,解决高额医疗费用的负担,主要依托多层次的医疗保障分担机制。

基于理论研究和多重定量分析研究,本书认为,目前我国社会医疗保险制度“以收定支”原则既不符合社会医疗保险制度自身内在的发展规律和基本理论要求,在实践中也存在较高的超额负担、扭曲的费率机制;在单项控费思维下,极易导致住院率虚高;待遇调整缺乏科学依据和统一标准等问题。基于长期精算平衡的分析,本书还发现,我国城镇职工基本医疗保险的缴费年限政策在短期的年度收支平衡机制下,忽视了其重要的作用,亟待进一步采取科学的办法统一设置。

综合上述研究,本书建议,在政策法规逐步完善、制度建设日趋健全、制度运行逐步规范、信息系统功能不断完备,以及大数据等科技手段日益发达的今天,我国社会医疗保险制度应全面转向“以支定收”的财务平衡模式。具体应从科学界定医保待遇适度标准,完善收入诚信体系规范缴费基数,科学统一设置缴费年限标准,加强政府对低收入者的配资责任,完善多层次医疗保障制度的协同性等方面,进一步完善我国社会医疗保险制度建设。依循本书所构建的筹资与待遇关联机制模型,可简易操作、便捷理解社会医疗保险筹资与待遇关联的内在规律,其模型也是社会医疗保险制度建设的本质内涵。此外,

本书的另一大贡献是，基于生命周期精算平衡的理念，设计了科学的最低缴费年限确定公式，其原理类似于养老金的计发月数表，可用于统一完善当前我国城镇职工基本医疗保险的最低缴费的设置标准，具有极强的政策创新价值和现实应用价值。

能力所限，本书并没有就“以支定收”型社会医疗保险基金财务平衡的管理体制、法制环境、机制风险以及具体的可操作措施等政策应用层面展开具体讨论和细节研究；对所构建关联机制模型的内涵、功能及意义的解释不足；所使用的研究方法也相对比较简单，这些均有待后期进一步加强研究。此外，本书所用数据主要由金保工程系统数据经由统计分析提取，虽由本人小心甄别，亦恐难免有失周全，有关结论，仅对样本负责。

关键词：社会医疗保险 筹资 待遇 关联机制

Abstract

In the primary stage of socialism, social productivity is not yet well developed, material wealth is not rich enough, how to raise money in a fair and reasonable manner as much as possible to give national adequate protection, to solve the contradiction between health financing and treatment needs, both improve the core issue of social medical insurance system with Chinese characteristics, but also the implementation of the “13th Five – Year Plan” proposed “to establish a stable and sustainable financing and treatment adjustment mechanism” .

This paper describes the mechanism of financing and treatment, mainly from the macro level analyze social financial balance mechanism of medical insurance system fund. From the associated mechanism of financing and treatment, the main financial mechanism of social medical insurance are “Income determines expenditure” and “Expenditure determines income” . “Income determines expenditure” is based on the funds that can be raised to determine the size of the expenditure, which is characterized by no deficit, in order to control costs. On the contrary, the basic principle of “Expenditure determines income” is to raise the required funds on the size of the expenditure requirements.

For the social medical insurance system, theoretically, the premium approval is based on the results of the risk assessment forecast, “Expenditure determines income” is the inherent law of the insurance system. However, in practice, China’s urban workers basic medical insurance system has claimed that “Income determines expenditure” . What is the difference be-

tween this two principles? Why the basic medical insurance system of urban workers in China should be declared "Income determines expenditure" as its basic principle? How its practical effect? China's social medical insurance is possible and whether there is a need to turn to "Expenditure determines income"? On the face of it, these problems seem insignificant, but its essence, follow the different path to practice, will have different practical effects, some policy direction and even great disparity, directly related to two different concept, Concept and management service concept. It is directly related to the financial cost of the construction of social medical insurance system in our country. It is more concerned with the determination of social medical insurance system and the long-term sustainable development of the system. In reality, it is the core problem of social medical insurance system construction.

In order to clarify the basic connotation, origin and concrete method of the two kinds of financial balance mechanism with social medical insurance, analyzes the similarities and differences between the two basic concepts, clarify the basic concepts, to better guide the social medical insurance financial budget preparation work, this paper combs the basic concept, institutional characteristics and main functions of the social medical system in our country. From the comparative perspective of the combination of theory and practice, this paper analyzes the similarities and differences between the payment of funds and the balance. From the perspective of revenue and expenditure, to build a social medical insurance policy environment for China's financing and treatment associated with the mechanism model for the analysis and disclosure of China's social health insurance fund financial balance of the inherent nature of the law.

Through this study, it is found that social medical insurance financing and treatment is one of two aspects of things, both with the system of construction, mutual support, and mutual correlation. If the two are separated, follow the different path, may have a very different effect. The so-called so-

cial medical insurance financing and treatment of the associated mechanism, its essence is the system covers the population structure and its health status, medical consumption service prices and the level of treatment of the combined effect of the results of the elements involved in the interaction between the shifts. In the model of the mechanism of financing and treatment, the pay base is inversely proportional to the premium rate. Population burden coefficient, hospitalization rate, the average cost and wage rate, reimbursement ratio is proportional to premium rate. "Expenditure determines income" is the essence balance law of social health insurance, accept and policy of "Income determines expenditure", there must be many problems.

Based on the correlation model constructed in this paper, the paper mainly carries out three levels of quantitative analysis:

First, build the mathematical model of the mechanism of financing and treatment, and verify and reveal the quantitative relationship between the endogenous factors of social medical insurance financing and treatment - related mechanism in the realistic environment. For example, under the established assumptions; the rate of hospitalization is increased by one percentage point, the premium rate is correspondingly increased by 0.29%; the average hospitalization fee is increased by one percentage point relative to the salary increase 1%, the premium rate is correspondingly increased by 0.2%; The population burden factor increase one percentage point, the premium rate will need to increase accordingly 0.14%; hospitalization expenses reimbursement ratio increased by one percentage point, the premium rate need increase 0.07%.

Second, based on the mathematical model, use the statistical experience data, evaluate the practice of our "Income determines expenditure" financial balance model. According to the empirical analysis, it is found that in practice, the medical insurance system of urban workers in our country is based on the principle of "Income determines expenditure", will create a high excess burden and a distorting rate. Seemingly the premium rate rela-

tively stable behind, in fact, hidden in dependence on payment base response to the growth of expenditure; behind the basically stable of medical service prices, hidden high rate of hospitalization; payment policy is simple and extensive, set too low; based on "Income determines expenditure", there is a blindly frequent adjustment to improve medical insurance treatment, so that the medical insurance fund bear its heavy and other issues.

Third, use the basic principles "financing and treatment are combined" and the relevant policy requirements in "13th Five - Year Plan" to verify the feasibility, scientificity and practicability of the mechanism of financing and treatment of social medical insurance constructed in this paper. From the case of fertility insurance merge into medical insurance, it can be seen that the so - called fairness of financing is mainly due to the equal payment obligation between the same paid population, and the government's responsibility lies in providing subsidy for those who cannot afford payment. From the perspective of financing and treatment, solve the burden of high medical expenses mainly depends on multi - level health insurance sharing mechanism.

Based on the theory and multiple quantitative analysis, this paper argues that at present, the principle of "Income determines expenditure" is not in line with the inherent laws and basic theoretical requirements of the social medical insurance system, and there are also higher excess burden, distorted rate mechanism in practice; in the single control fee thinking, easily lead to hospitalization rate is high; treatment adjustment lack of scientific basis and unified standards and other issues. Based on the analysis of long - term actuarial balance, this paper also finds that the payment policy of basic medical insurance for urban workers in China under the short - term annual balance of payments mechanism, neglects its important role, and needs to adopt scientific method to set up.

Based on the above research, this paper suggests that China's social medical insurance system should be fully shifted to "Expenditure determines Income" with the policy and regulations are gradually improved, the system

construction is becoming more and more perfect, the system operation is gradually standardized, the information system functions are continuously completed, and the large - scale scientific and technological means are increasingly developed. Specifically, should be defined from the scientific treatment of appropriate medical standards, improve the integrity of the credit system to standardize the base, the scientific uniform set the payment of the standard, to strengthen the government's commitment to low - income people, improve the multi - level health care system coordination and so on, further perfecting the construction of social medical insurance system in China. According to the model of the mechanism of financing and treatment, this paper can easily understand and understand the inherent law of social health insurance financing and treatment. The model is also the essence of social medical insurance system construction. In addition, another contribution of this paper is, based on the concept of actuarial balance of life cycle, the formula of determining the minimum payment period of science is designed, Its principle is similar to the pension payment schedule, can be used to improve the current basic insurance for urban workers in China the minimum payment of the standard set, with a strong policy innovation value and practical value.

Limited by author's capacity, this paper does not discuss the details of the policy application level, such as the management system, the legal environment, the risk of the mechanism and the specific operational measures. The explanation of the connotation, function and meaning of the model of the associated mechanism is relatively simple. The research methods used are relatively simple, which are subject to further research. In addition, the data used in this paper mainly by the "Jin Bao Engineering", although I carefully screened, also fear inevitably loss of the whole, the conclusion is only responsible for the sample.

Key words: Social Medical Insurance, Financing, Treatment, Association Mechanism

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