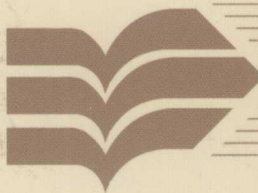


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Zhongguo Yiliao Jiage De Zhengfu Guanzhi Yanjiu

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## 中文摘要

本书针对当前社会反映“看病贵”的问题，选择了政府对医疗价格的管制为分析问题的立足点。医疗的价格形式是医疗费用，由于费用的高低，可以直接改变人们就医的可及性，可以决定人们能够消费和消费多少量的医疗服务，可以将弱势群体排除在基本医疗消费承受能力以外。因此各国政府对医疗的价格都会进行严格地控制。我国政府也不例外，先后出台了一系列医疗价格管制的公共政策和法规进行治理，但收效不佳，成为当前社会关注的一个主要矛盾。本书试图运用公共政策科学、新古典经济学、制度经济学、管理经济学、行政管理学、统计学等方法，重点从以下几个方面进行论证分析，以期能在总结经验的基础上寻求新的理论路向：

一、市场失灵带来的效率损失与政府管制的一般理论分析。这一部分主要解决的问题是政府为什么要对医疗价格进行管制？造成市场失灵的原因是多方面的，而每一种因素都会导致效率损失。在医疗市场中主要是由于垄断和信息不对称引起的市场失灵，通过分析使我们可以看清这两种因素所带来的效率损失，为政府在管制中的定位提供了理论依据。另外，管制的过程是一个非常复杂的过程，涉及管制的主体理论、管制的公共利益理论、管制的利益集团理论、非经济目标的政府管制理论、交易成本理论、公共选择理论、博弈理论等，所有这些理论共同构成了对政府管制行为的认识理论。通过这些理论可以使我们认识到政府在管制的过程中也有可能偏离公共福利价值取向目标，导致政府管制失灵。总之，市场失灵是政府管制的必要条件，但不是充分条件，因为政府管制也可能出现失灵。比如政府管制的政策失灵、政策执行的失灵、管制目标

的偏离等。通过对市场失灵理论和政府管制相关理论的分析,以期寻找政府职能定位以及对政府行为加以改进的理论依据。

二、医疗行业的市场特点与我国政府管制的特点分析。首先,医疗行业的性质是公益性的福利事业,它是社会效益优先,专业化程度较高的垄断性行业;医疗服务业是健康产业,它的这些性质和特点决定了医疗行业不同于其他一般的行业。在医疗市场中,医疗服务供给者具有两权合一性,医疗服务市场需求的价格弹性缺乏,医疗服务市场主体多元性、复杂性等市场和产品特点,反映了医疗服务市场不同于一般的产品市场;医疗服务产品所具有的无形性、同时并发性、异质性、易逝性,反映了医疗服务产品不同于一般的市场产品。同时,对完全竞争假设条件的偏离使得医疗市场竞争具有不完全性特点。这些共同构成了政府对医疗价格进行管制的逻辑起点。其次,对我国医疗资源总量存量结构、所有制结构、经营分类结构、医疗资源的消费结构等特点进行了梳理。最后对国外政府对医药价格的管制模式及我国政府对药品价格管制的特点进行了认识。

三、医疗的价格形式是医疗费用,而影响我国医疗价格(费用)的因素是多方面的。第一,从供需因素分析了对我国医疗价格带来的影响。第二,分析了当前“以药养医,以设备养医”机制存在着严重的制度缺陷,是导致医疗价格贵的主要因素之一。具体表现为:“以药养医,以设备养医”的机制诱导医院和医生开贵重药,用贵设备;导致药厂可以通过对医院供药的控制,采取价格歧视政策,最终使医院和医生成为药价虚高的助推器;由于激励机制存在问题,医生成了高价药最好的“纤夫”,而开高价药最终成为了“纤夫的爱”;同时这一制度还派生出劣币驱逐良币机制,使价廉物美的药品在市场中难以购买甚至消失,最终导致医疗价格的上涨。第三,由于不同的支付制度和方式产生的约束和激励效应是不一样的,所以医疗费用支付制度和方式对医疗价格会产生直接的影响。第四,当前我国医院竞争赢利的方式是典型的配售品赢利模

式。在这种市场结构下, 尽管医药生产领域已经形成了竞争, 但竞争并没有让我们看到药品价格的下降; 医药合业的体制, 使药品搭上了垄断的便车, 这是药品价格不降反升的内在机制。第五, 我国药品在医疗费用中占有相当大的比重, 超过了 50%。医用药品政府招标采购制度的引入, 本来是希望通过引入竞争机制, 规范医用药品流通秩序。这是因为政府作为社会最大的一个消费机构或群体, 可以提高其在市场中的谈判地位, 它的消费量足以对市场价格产生大的影响, 可以起到平衡市场药品价格的作用, 但这种平衡作用的发挥受政府采购的规模、品种、产品的可替代性等多种复杂因素的影响。由于政府采购制度在我国还刚刚兴起, 许多配套措施没有跟上, 所以目前老百姓从政府采购制度中还没有体会到政府采购的实惠。第六, 影响我国医疗价格政策形成的利益团体变量在不同的政治经济环境中, 彼此交互运作并影响医疗价格管制政策的形成, 最终影响到医疗价格。从价格定调及收费的管制过程分析, 不同的利益主体有不同的表达形式, 他们由于所处的具体情境不同, 所持的价值观不同, 对不同形式的利益的要求不同。展现着多元利益的冲突与整合的复杂局面。在政府、消费者、利益集团之间形成的均衡, 往往是“分散的多数”(消费者)与“集中的少数”(利益集团)在信息不对称的情况下, 由于“分散的多数”(消费者)的表达能力较弱而使政府更易倾向于代表产业或行业的利益。

四、对中国医疗价格政府管制政策法规的变迁历程及其成效进行了梳理和实证分析。我国医疗价格管制政策法规的变迁分为三个阶段: 一是计划经济体制下医疗价格的政府全过程管理时期; 二是向市场经济体制转变的计划与市场相结合的过渡时期; 三是适应市场经济体制的政府价格管制探索时期。通过分析我们可以看出价格管制政策法规的变迁总是伴随着医疗保障制度的变革而变迁。通过实证分析使我们了解到, 尽管我国政府对医疗价格管制的相关政策法规进行了不断的完善, 也采取了积极的干预政策, 如从 1996 年以来, 政府对医药价格进行了二十几次的干预治理, 其结果却并不

令人满意，导致社会对卫生部门的不满，也给医疗机构带来诸多负面影响。

五、中国医疗价格政府管制存在的主要问题分析。第一，政府越来越少的卫生投入，使得医疗产业在投入机制上出现了明显的市场化倾向，卫生财政的分权化又进一步促进了这种市场化走向。受市场化逐利机制的影响，最终导致医疗机构特别是公立医疗机构的公益福利性质日益淡化，这不能不说是政府的失职。第二，政府对医疗流通领域的监管不力，医疗流通秩序的混乱，是导致医疗价格虚高的主要原因之一。第三，政府对医疗药品价格管制的范围偏小，方式简单，使得政府对整个药品价格的控制力度有限，效果不佳。第四，政府在弥补市场失灵过程中，同样也存在自身失灵的问题，主要表现在政府制定政策、法规及其执行过程中的失灵。第五，医药合业体制、中央与地方价格管制机构职权划分的不合理以及政事不分等给政府管制政策的实施带来了体制障碍。这些构成了政府在医疗价格管制过程中存在和遇到的主要问题。

六、中国医疗价格政府管制改革的政策建议。政府不仅要从经济理性出发，还要从社会理性出发，根据国内社会经济的发展水平，结合医疗服务行业的具体特点，借鉴国外经验，进行制度建设和安排，合理搭配经济和非经济治理手段，来改变市场绩效，提高社会公共福利水平。为此本书建议：

1. 政府要不断加大对医疗行业的投入比重，切实发挥政府在社会医疗卫生筹资中应占据主导地位的职能，降低从投入到产出的市场化倾向，从总量上减少个人对医疗卫生的支出比重，减轻老百姓的医疗负担。政府可采取逐步到位的形式，但应该有计划、有步骤地尽早实施。

2. 目前我国社会贫富差距较大、发展很快的情况下，国家应以非营利性医院建设为主，防止滥用高端医疗设备，控制医院规模快速扩大，提高医院的有效利用率。

3. 我国政府应进一步加强医疗卫生领域行业的管制，而不是

相反的放松管制。尽管世界范围内的放松管制运动正在兴起，但是，世界上大多数国家的政府对医疗事业的管制不仅没有放松，相反还在不断加强和完善。我国政府应看清形势，特别是中央政府应通过增加项目的调控范围、采用科学的管制方法等加大对医疗价格的管制力度。

4. 政府应充分发挥网络在管理中的技术优势。网络技术的充分应用可以降低管理成本，增加管理的透明度，简化管理程序，提高管理的针对性等，最终降低交易成本和制度成本，从整体上提高政府对社会管理的理性成分和效率。

5. 医药分业的体制改革不能因为试点的失败而放弃，而是要认清医药分业应该具备的条件，政府要通过创造医药分业的前提条件，这里最关键的问题是要解决医疗机构的补偿问题，才能够使医药分业的改革取得根本性的突破，改变药品作为配售品的地位，然后对医和药分开进行管制，这样可以更好地明确目标、明确责任。

6. 政府只有打破医疗机构对药品的处方垄断权，才能使整个药品市场进行充分的竞争。这样政府可借助于市场的力量促使药品价格大幅下降，而不是简单地使用行政命令式的最高限价模式。

7. 医保定点药房从本质上来讲是医院药房的一个延伸，由于它的政府指定性，使其具有了一定的垄断势力，其所出售的药品价格通常不仅不低于普通药房，反而还要高于它们。所以本书认为，随着医疗制度的不断完善，这一制度应该逐步取消。

8. 我国现行的医疗保障制度无论是在支付方式、支付额度、支付程序等都存在或多或少的问题，必须建立和不断完善覆盖全民的公共基本医疗保障制度。

总之，医疗价格只是一种表象，它是各种因素作用的一种结果。这种表象和结果映射出政府对医疗价格的管制不能仅仅停留在“头痛医头，脚痛医脚”的层面。对问题的根本解决，还有待于医疗体制改革的进一步深入。管制既是一个政治过程，也是经济系统的一个内生变量。市场特性、政治的影响、政策的选择、立法与法



律的限制、利益集团等构成了管制制度均衡的主要变量，根据变量之间的关系不同，政府管制的方法亦有差异。这取决于政府管制计划的政策选择因素的强弱、市场特性稳定与否。调整的最终方案是在政府职责、成本约束、利益集团博弈之间寻求平衡的结果。

## Abstract

This thesis looks into the expensive medical treatment problem, and aims at the governmental regulation on medical price. The price form of medical treatment is the fees, which directly changes people's access to medical treatment, determines the amount of medical service, or even exclude the poor patients, therefore, all governments will strictly regulate medical price, so is with China, where a series of public policies and regulations concerning medical price are issued, but the effect is poor. On the basis of the theories and practices of public policy, neo-economics, institutional economics, management economics, administration, statistics, the thesis mainly focuses on the following aspects:

The first question is about the efficiency loss caused by market failure and government regulation. The author answers the question why the government needs to regulate medical prices. There're many reasons, each of which will result in efficiency loss. There are two main factors, such as monopoly and asymmetrical information on the medical market, and through the analysis we can see how and why they cause the efficiency loss, which can supply the theory foundation for the government's position in regulation. Government regulation is a complex process, which involves theory of regulator, public interests theory, interest groups theory, neo-economic objective regulation theory, transaction cost theory, public choice theory, game theory and so on, all of these theories consist of the foundation to realize government regulation. With these we can know a government may also deviate from the public welfare. Generally

speaking, market failure is the necessary condition of government regulation, but not the full condition, because government regulation may also causes failure, such as the policy failure, the policy implementation failure, and regulation target deviation, etc.

The second question is about the characteristics of medical market and government regulation. Firstly, medical industry is a welfare cause, which puts social benefits in the first place and enjoys monopoly with highly specialization. Medical industry is health concerned, which makes it quite different from other industries. In the medical market the provider have two rights, the medical service demand is lack of the price elasticity, the characteristics of the market and product, such as the market subjects' multiplicity and complexity, shows that medical industry is different from other ordinary market; the characteristics of medical product, such as invisibility, simultaneousness, heterogeneity, and transience, shows that medical product is different from ordinal products. Meanwhile, the deviation from supposed complete competition makes the medical market incomplete. All these characteristics consist of the logical starting point of medical regulation. Secondly, the author combs the structures of general medical resources, ownership, management classification and the consumption of medical resources. Finally, the author analyzes the model of medical prices regulation practiced by Chinese government and some foreign governments as well.

The third question is about the influential factors of medical prices. The first factor is demand and supply. The second factor is the deficiency of the system of "medicine income and examination income supplying hospital and doctors". It's the most one that due to expensive medical treatment. Concrete performance is: the mechanism inducement hospital of "keep to cure by medicine, keep to cure by equipments" and doctor prescribes a valuable medicine, using an expensive equipments; Cause

the pharmaceutical factory be able to pass the control to provide the medicine to hospital, adopt the price bias policy, end make the hospital and doctor become the medicine price to help to push a machine falsely and highly; In order to encouraging the mechanism existence problem, the doctor became the costliness medicine the best "boat tracker", but prescribed the costliness medicine and became the love of the boat tracker; This system still sends to living a base coin to tend to pursue a good currency mechanism in the meantime, making the drugs of the quality goods at reasonable price hard to purchase to even disappear in the market, and cause the medical treatment soar pricingly. The third factor is payment system and payment model that because different system and model will produce different effect of restrain and encouragement. The fourth factor is the profit-making model with medicine put on allocation. Under this market structure, the field of medicines product has formed competition, but the competition hasn't brought cheap price. The fifth factor is that the medicine income takes the largest share - over 50% in the total income of hospitals. It's originally hope to lead a mechanism into the competition, the norm cures to circulate order with the drugs by use the drugs government purchase system. Because as a big consume group, government can rise his negotiations status through his purchase quantity that can influence market price enough and balance it, but this action of balance is decided by the purchase scale, variety and replacement. Because the government purchase system to still just rise in our country, many integrations not kept up with, so the common people haven't realize to the government purchase system currently of real benefit. The sixth factor is various interest groups which influence medical prices. From price adjustment and the progress of price regulation to see, different beneficiary have different expression way, because they are in various situation and have different valuation. Emerge the conflict of the diverse

benefits and the complicated situation of the integration. The balance caused by government, electorates and interest groups, it's usually between "sporadic majority" (customers) and "concentrated minority" (interest groups), in the case of asymmetrical information, the former have so less power in decision-making that government are inclined to represent the latter's benefits.

In the fourth part, the author reviews and analyzes the historical change of the medical price regulation policies and laws, which experienced three periods: the first stage is under planned-economy system, during which the government controlled the whole pricing processes of medicine and treatment; the second stage is a transitional period towards market economy system within which plan and market combined together; the third stage is the experimental stage of government regulation in accordance with market economy system. The changes demonstrate that although price regulation policies and laws have always been strengthened, for example, since 1996 the government have intervened the medical prices for 21 times, the result is not as good as expected, therefore, the public became dissatisfied with the department of health and the medical agencies began to have an ill name.

In the fifth part, the author analyzes the existing problems of government regulation on medical price in China. Firstly, the market orientation of all medical agencies is strengthened by the consistent decrease of investment from government and financial decentralization of budget. Secondly, the government is weak in monitoring the circulation of medical products. Thirdly, the narrow scope and simple measure of government regulation weakens its power of supervision. Fourthly, failure also occur to government itself while it tries to make up market failure; Fifthly, the system of cure and medical treatment combination, the irrational power division between the central and the local regulation organization,

and the overlapping administration and affair cause systematic obstacles to the implementation of government regulation policies and laws. These are the key problems of government regulation.

In the sixth part the author brings forward some suggestions on the reform of government regulation. The government should carry out system reform in the light of economic rationality and social rationality, borrow successful foreign experiences, change market effect, and improve the level of the welfare of the whole society, the suggestions are as follows:

Firstly, the government should continuously increase investment in medical industry and curb its marketing trend so as to reduce individuals' economic burden. The government could adopt policies and measures step by step.

Secondly, as the gap between rich and poor is being enlarged, the government should guarantee the non-profitable state-owned hospitals' full development, duly restrict the expansion of highly advanced medical technologies, and control hospital scale in order to raise hospitals' valid utilization.

Thirdly, our government should strengthen its regulation on health industry. Although loosening regulation movement is on the rise, most governments of the world are going the other way. The central government should realize the world trend and take some measures, for example, the government should widen the scope of regulation and develop more scientific measures.

Fourthly, the government should deploy network technology in medical management. The full usage of network can lower management cost, increase transparency of management, enhance pertinence of management, and finally lower the cost of transaction and institution.

Fifthly, the reform on the separation of treatment and medicine should proceed despite failures in experiments. The establishment of a

sound complement rule is the breakthrough of the reform.

Sixthly, the government should break the monopoly of prescribed drugs of medical agencies; therefore, the market competition can cut down the average price of drugs, which will perform better than simple administrative price limitation orders.

Seventhly, the drug stores recommended to medical insurance holders is an extension of the hospital pharmacies, which actually enjoy part of monopoly, where the price of drugs is higher than the other drug stores. So the rule must be banned finally as medical rules and regulations are being completed.

Finally, the current medical insurance system has many problems in is payment models, payment amount, and payment procedure, and a generally covered medical insurance scheme must be created and carried out.

All in all, the medical price is a superficial indicator of medical problems. The government shouldn't take stop-gap measures in medical price regulation. The final settlement lies in the further reform of medical treatment system. Government regulation is not only political process, but also an inner-born variant of economic system. The nature of market, the political influence, the choice of policies, the limitation of laws and law-making, and interest groups are the main variants contributing to the balance of price regulation policy. The regulation model should vary with the variants, which is determined by the policy selection of the government and the stability of the market. The final scheme is the result of the balance between government's responsibility, cost restriction and the game of interest groups.

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