SESSION 3: INFORMAL PAYMENTS AND HEALTH CARE CONSUMERS

PROJECT PRESENTATION:

“PAYING FORMALLY OR INFORMALLY? ELICITING PREFERENCES FOR PHYSICIAN SERVICES IN UKRAINE USING DISCRETE CHOICE EXPERIMENT”

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ABSTRACT:

Contemporary Ukrainian health care system suffers a range of problems main of which are: low quality of services, unsustainable budget financing, reduces access for some population groups, the existence of informal patient payments, and an underdeveloped primary care system. Evidence on preferences of Ukrainian consumers for health care improvements and their value can help to design reforms that best respond to societal priorities.

This study aims to elicit and to place a monetary value on the public preferences for out-patient physician services in Ukraine. The focus of this presentation is on the preferences for paying formally or informally. The method of discrete-choice experiment (DCE) is applied using a sample of 303 respondents, representative for the Ukrainian population. The impact of the quality and access improvements and their interactions with socio-demographic characteristics on the choice of a physician was modelled using a mixed effect (random parameters) logit regression. Valuation of the preferences for quality and access improvements is done based on marginal willingness to pay.

At a sample level, there is no preference for paying formally instead of informally or vice versa. The risk groups that explicitly demonstrate preferences for paying informally are younger people, people with higher income, and those residing in rural areas or small towns. It is notable that elderly people are more sensitive to price than the rest of the population. The most important quality- and access-related attribute of physician services is the attitude of medical staff representing interpersonal aspects of care and psychological access, followed by the state of medical equipment representing clinical safety and quality. Improvements in maintenance of the office, travel and waiting time are still important, though have lower priority. Thus, the introduction of the official patient payments in Ukraine has certain potential. However, collected funds should be allocated to quality and access improvements in the Ukrainian out-patient care sector, as those suggested by our study.

LINK TO PRESENTATION SLIDES: