

Analysis on the Integration of Urban and Rural Medical Insurance System

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Abstract: In recent years, the reform of medical insurance system has become the focus of attention of the government and society, the urban and rural medical security system has hampered the economic and social development of China. In order to realize the steady transition in the urban and rural medical insurance system integration, it needs cooperation in many aspects, such as idea, system, management and service. And with the government as the leading factor synchronously, to integrate the system, institution and resources. In addition, improving medical insurance management and quality of medical and health services is also necessary for the integration of urban and rural medical insurance truly implemented, and benefit all the people.

1. INTRODUCTION

The two element structure of urban and rural areas has been one of the important reasons that hinder the rapid development of Chinese economy and society, the system of urban and rural division leads to different treatment of medical insurance employees and low level of overall planning. As a transitional policy, the new rural cooperative medical insurance policy alleviates the rural population's demand for medical service to a certain extent, but many problems exposed in the process of the implementation of the urgency of the integration of urban and rural medical insurance system.

2. CURRENT SITUATION OF URBAN AND RURAL MEDICAL INSURANCE SYSTEM IN CHINA

At present, the urban and rural residents medical insurance system is complex in China, which include basic medical insurance for urban workers, basic medical insurance and free medical care for urban residents, and the new rural cooperative medical insurance for the rural population. Current medical insurance policy has basically achieved full coverage in China, however, due to the implementation of voluntary medical insurance for residents, many problems made a great influence on the rate of medical insurance, such as the lack of convergence of the system, the lack of guarantee projects and the low level of protection.

First, there are great differences in the object of medical insurance, the level of security, security projects and so on, which is obviously contrary to the basic fairness and unity of social insurance.

Second, all kinds of medical insurance are separated, and the unified management is not achieved. Once the identity of insured employees changed, they can only choose to surrender or rejoin other insurance, which fundamentally undermined the protective role of medical insurance for the insured.



Third, the overall level of medical insurance is low. Scattered insurance system not only increased the difficulty of the floating population insured, and because the number of insured is less, it is difficult to achieve the requirements of other social insurance at all.

Forth, the current medical insurance system is inefficient. The division of urban and rural system not only makes the part of urban and rural residents, the government insured repeat repeat subsidies, also caused the problem of agency jumbled, administrative inefficiency, waste management costs, it is difficult to achieve fine management.

3. INTEGRATION PATH OF URBAN AND RURAL MEDICAL INSURANCE SYSTEM

To promote the integration of urban and rural medical insurance system is an urgent requirement to build a fair and sustainable national health insurance system. Because of the difference between urban and rural areas, economic and institutional differences between urban and rural household registration system and the traditional concept of integration of urban and rural medical insurance system is still very difficult.

3.1. Set up the Idea of Overall Development of Urban and Rural Areas

Before the reform of any system, we should take the lead in beating the old with traditional ideas and thinking set. Only by doing so can we effectively promote the development of the system to a more scientific and advanced direction. The medical insurance system is no exception.

The urban and rural segmentation system in China has been deeply rooted in many people's hearts. In the process of legislation and policy making, the urban population and rural population was always regarded as two different groups unconsciously (Gongcheng, Zheng, 2014). But there has never been a precedent for setting up medical insurance system according to the difference between urban and rural areas all over the world. To carry out the reform of urban and rural medical insurance system, the first thing is to accelerate the transformation of the concept of urban and rural different structure, actively explore the differences and relations between urban and rural medical insurance system, seek effective integration path and way, and gradually realize the integration of urban and rural medical insurance system. In consideration of the medical insurance system reform, need to consider differences in the characteristics of urban and rural residents and the implementation of the current system, medical security system steadily docking.

3.2. Weakening the Traditional Household Registration System

Different household registration systems in urban and rural areas are the symbol of determining the identity of the people, but also closely linked with the rights and interests of all citizens, which is the root of the urban-rural system segmentation (Shaoguo, Zhai, Yulin Qiu, 2014). In the social security system of China, only the endowment insurance policy the basic realization of the urban and rural areas, the system is still in full state segmentation.

The traditional household registration system restricts the free flow of population, and makes the rural population unable to integrate into cities and towns constantly. On the one hand, due to its long-term work and life in the town, they can't join the local new rural cooperative medical insurance according to the location of their registered permanent residence (Jiachuan Geng, 2015). On the one hand, because of their identity restrictions, they can't live in the town for a long time, they have to eventually return to the rural areas, so they can't achieve continuous payment and ultimately difficult to benefit in the urban medical insurance (Haoran, Peng, 2014). Then most of the urban migrant workers have chosen not insured.

Therefore, the weakening of the traditional household registration system can be said to be fundamental to the integration of urban and rural medical insurance system, if the traditional household registration system is not broken, it is difficult to establish the medical security system in the true sense of fairness.

3.3. Adhere to the Top-down Reform

The reform of the medical insurance system is affecting the whole body. It is not only related to the reform of the social security system, but also closely related to the medical and health system, the public financial system, public health undertakings and so on. If the reform is carried out from bottom to top, it is bound to be strongly controlled by the relevant interest departments, so that it is difficult to implement the reform. Therefore, it is necessary to carry out the central decision-making, government leading and top-level design to make substantial progress in the reform.

The government needs to integrate the urban and rural medical insurance system design from the macro level, and resolve internal conflicts and adjustment functions, deepen reform, build integrated medical security system. from the medical insurance fund management, medical insurance, agency setting, and many aspects of transferring. In the process of reform, we need to aware of the current economic situation, make feasible reform plan, consider about the local pilot, and then steadily promoting the realization of top-down.

3.4. Build an Efficient and Unified Management System

The original management system of the dispersion is the main cause of the segmentation of the medical insurance system. The dispersion of the original management system is one of the important reasons for the separation of medical insurance system, so the establishment of an efficient and unified management system is the basis of medical insurance reform. If the administrative department cannot be unified, it will cause the division of responsibilities is not clear, the uneven distribution of benefits, the service efficiency is low, lack of information sharing and other issues, which will result in unequal treatment, repeating insure and difficult to transfer.

The integration of management system includes two aspects: social security and medical care (). Although the medical system reform has taken the first step in China, the medical service and health care service is still in the division, public health service system is not perfect, the basic medical and health service platform has not yet been built (Gongcheng, Zheng, 2014). Only reform the health-care system in such social and economic conditions, the health care system integration will be superficial because of the lack of medical resources, the high medical expenses and the multi management system. Therefore, to realize the integration of health care system, it is necessary to reform the health care and medical security system at the same time, in order to truly achieve universal health care.

3.5. Transfer and Continuity of Insurance Relationship

How to solve the transfer of insurance relationship is one of the most important issues in the integration of medical insurance system. If this problem has not been properly solved, it is meaningless to set up the so-called urban and rural medical insurance system, which will only divide the urban and rural medical insurance into regional segmentation and can't achieve the goal of medical insurance integration.

Insurance for transferring the implementation cannot be achieved overnight, but should be under the premise of ensuring system stability under the plan, step by step. In the premise of the system under the unified urban and rural medical insurance, the first is to start the medical insurance docking between urban and rural residents, gradually unified insurance projects and flattening insurance benefits, which can make the rural medical insurance gradually moves closer to town. Then integrate it with the employee medical insurance and establish a nationwide medical insurance system. Finally, establish a truly universal medical security system through the adjustment of the allocation of financial resources on this basis.

4. THE FUTURE DIRECTION OF THE INTEGRATION OF URBAN AND RURAL MEDICAL INSURANCE SYSTEM

The ultimate goal of the integration of medical insurance system is undoubtedly to establish a set of national health insurance system that meets the national conditions and social needs, fairness, justice and reasonable, and can benefit all citizens.

Although the universal medical insurance system has been established basically in China, the system, management institutions and agencies haven't achieve integration yet. Since the eighteenth Congress of the Communist Party of China has made important decisions on integrating urban and rural residents' medical insurance, how to establish a set of universal medical insurance system as soon as possible has become one of the most important topics of our government.

The reform of the medical insurance system is not only a combination of the existing medical insurance systems, but also the adjustment of medical services, medical supplies and other fields. The main problem of the medical insurance system after the integration will bring the public medical resources shortage and uneven distribution, if it is unable to realize the rational allocation of medical resources, the reform of medical insurance system alone will be meaningless. Therefore, in the process of carrying out medical system reform, on the one hand, we have to strengthen the construction of infrastructure and basic medical system, ensure the urban and rural residents medical services and medical service level should be similar, on the other hand, private medical institutions should be properly introduced, strictly controlling access restrictions and institutional qualifications, improving the level of private medical institutions, achieving effective triage of patients, and making public medical resources more inclined to the grassroots.

5. CONCLUSION

In short, urban and rural integration of the medical insurance system will be the main trend of the future development of the medical security system. At present, although most of the people in China can meet the basic needs of medical services by participating in different types of medical insurance projects, because of the segmentation between urban and rural system makes the lack of fairness and rationality, to change from inclusive to equity, the key lies in the integration of urban and rural institutional arrangements reflect the fairness. The integration of medical insurance system is not only conducive to the rational allocation of medical resources, but also plays an indispensable role in promoting social and economic development.

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