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Some aspects of workers' health insurance in the market.

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Abstract — the problem of health insurance is a rather acute global problem in the face of rapid aging of the population and the lack of qualified personnel. One of the topical areas of insurance is insurance in campaigns with a small number of workers, the world experience and analysis of the state of insurance medicine in small and medium-sized businesses, the main problems and directions of distribution of insurance coverage.

Keywords - campaign, insurance coverage, insurance policy, worker.

In a situation where the health care problem is exacerbated in Ukraine (50% of the budget deficit in the medical sector), one of the best and only possible ways to solve this problem is to switch to the health insurance model. The analysis of the modern world insurance experience has shown that for its successful realization in any country several basic general conditions must be fulfilled.

Thus, the proposed insurance model should satisfy the following factors:

- to provide the best possible continuous insurance coverage among a predetermined population;
- to cover the insurance pole only for the groups stipulated by the program;
- it (the model) should differ in structure from other types of programs, and not repeat them;
- be economically viable based on market conditions and opportunities;
- the application of this model should lead to a significant reduction in health care costs and to a significant improvement in the health of the population to be insured;
- be available for sale for both workers and employers, without causing significant pressure from public finances;
- only cover factors that are really relevant to the health of the worker.

Any insurance comes in two directions: public insurance and private insurance campaigns, with insurance being paid at the expense of both the employee and the employer.

Health insurance is not exclusion. There is practically no health insurance in Ukraine, there are separate insurance campaigns (about 400) and some companies that conclude a health insurance contract for their employees, but unfortunately this phenomenon is more casual than usual and has not become widespread.

However, the problem needs to be addressed because the health situation in Ukraine is the worst in Europe (the first in terms of mortality, the leader in tuberculosis and cardiovascular disease).

According to research, due to timely medical care in some countries, mortality rates have fallen by almost 80% over the full coverage of insurance medicine. The experience of leading countries shows that in some countries health insurance is predominantly state and compulsory (UK, Italy, Austria, Germany).

Some are mostly private (USA). Given the state of the Ukrainian economy, it is advisable to pay attention to the experience of private insurance, the conditions, risks, benefits and opportunities for its application in Ukrainian realities. It should be noted that some post-Soviet countries have also achieved some success (Moldova, Georgia, Russia).

However, the experience of these countries is difficult enough to use. Georgia and Moldova have a much smaller population than Ukraine, Russia is much larger, and the state insurance model is predominantly operating in these countries.

For analysis and experience, the best model is to use a basic US insurance model. First, as noted above, it is based on private insurance

(90% of the medical sector), subject to state support.

Second, recent studies have highlighted the problems of insuring workers in small firms and campaigns (small ones mean campaigns with 2 to 50 employees), which is almost identical to the Ukrainian situation, where most campaigns are small in size and the basis of the modern economy is medium business.

Thus, according to statistics, the distribution of American workers and their families by age, working in small campaigns is as follows: the age of workers is 19-34 years (51.7%), respectively, older than 34 49.3%. Most (80%) middle-aged workers aged 35-64 do not have health insurance.

In addition, compared to large workers in small campaigns, they have less than twice the health insurance coverage. On the whole, this may be quite understandable, and explained that small businesses are more sensitive to economic changes and health insurance problems among smaller companies are more acute than complex.

The main criterion for drawing up a health insurance policy is employment and income levels of families. Therefore, it is used to address the spread of insurance among the poorest and most vulnerable sections of the population:

- Provision of support for small insurance campaigns by large medical conglomerates (existence of a simplified medical policy) for the group of low income individuals who cannot afford the usual insurance coverage; - extension of maternal and child support (SCHIP, State Children's Health Insurance Program);

- Existence of medical aid from federal funds (in case of urgent need the state finances up to 90% of expenses);

- the existence of a subsidy system for private campaigns, ie the creation of various programs, flight insurance depending on the region of residence, level and quality of work;

- Extending state aid to insurance campaigns in the case of lending to the most vulnerable sections of the population (eg reducing tax pressure);

- Creation of cheap insurance policies with the condition of withdrawal of expensive medical care;

- Supporting healthy lifestyle advocacy programs.

Based on the calculations and calculations, it was determined that the application of this model is quite economically viable, the main consumer of such a health insurance market is an average worker of 19-64 years, the best term (lower level) is a fixed-term policy for 12 months with the condition of partial insurance and his family members.

The best results are obtained by the following distribution of the cash load: 50 and 60% of the value of the insurance policy between the worker and the individual.

In this case, for private insurance companies, the best recommended product would be an insurance policy that has a simplified system of insurance for the worker and his family: namely:

- Preventive servicing of the individual worker and his family members; maternity and child protection;

- First aid at basic level.

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