

Concept Note

Development of proposals for revising the health screening and health benefits packages of migrants in Thailand

1. Background and rationale

According to data from the Foreign Workers Administration Office, Ministry of Labour, the number of migrant workers in Thailand continues to increase, with 1,445,575 migrant workers legally working as of December 2015 (1). Migrant workers generally come to work in the so-called "3D jobs" (difficult, dangerous, and dirty) such as ones in the fishing industry – which Thai workers mostly refuse to take (2). Additionally, they have less access to health services and social welfare, including a lack of knowledge about basic healthcare. These are some reasons that cause migrants to be more vulnerable to health problems than other people (3). Therefore, it is important to have effective measures or policies to protect the health of migrants.

Migrants who are granted work permits have the same rights as Thai workers to join and access health services under the Thai social security scheme, with contributions coming from themselves, their employers, and the government; however, in 2011, less than 9% of estimated migrant workers were covered by the scheme (4). Apart from the social security scheme, in 2004, the Ministry of Public Health introduced the Health Insurance Card Scheme (HICS) for migrants who were not covered by the social security scheme. At present, in theory, this scheme has since expanded its coverage to all migrants regardless of their status (5). Migrants pay a premium to be insured under the HICS, and there are currently three types of the HICS: (i) a health insurance card for migrant workers at the rate of 2,100 baht per person per year (500 baht for health check-up and 1,600 baht for health insurance), (ii) a health insurance card for migrants at 2,700 baht per person per year (500 baht for health check-up and 2,200 baht for health insurance), and (iii) a health insurance card for children under 7 years old at 365 baht per person per year (no health check-up fee and 365 baht for health insurance) (6).

The HICS covers health check-ups or screening such as chest x-rays for tuberculosis, and screenings for syphilis, microfilariasis, leprosy, etc. The benefits package covers medical services for general illnesses, emergency services, medical referrals, health promotion and prevention, and disease surveillance. However, the package does not cover certain medical services such as treatment of psychosis, dialysis for chronic renal failure, etc. (4, 6).

Measures and guidelines for health screening and health insurance for migrants are periodically adjusted according to Cabinet resolutions, and this can be seen in the modification of migrant card prices as shown in Figure 1 (5). However, the health screening and benefits packages under the HICS have not changed much throughout the last 10 years (7, 8), with only a revision of the benefits package to cover the provision of antiretroviral (ARV) drugs having been implemented in 2013.

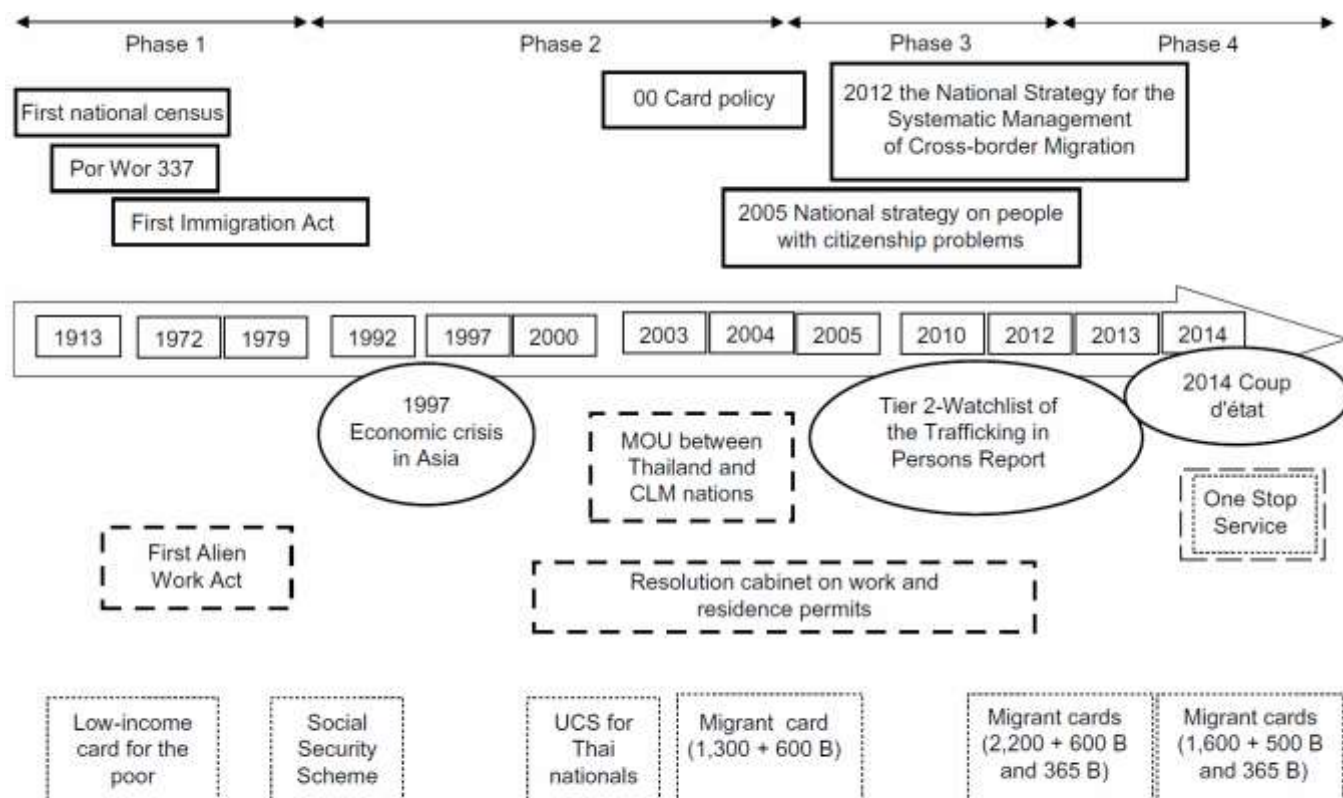


Figure 2 Evolution of migrant policies in Thailand.
Notes: Bold line, security policies; dashed line, employment policies; dotted line, health insurance policy; oval, external factors.
Abbreviations: B, Baht; CLM, Cambodia, Lao PDR, and Myanmar; UCS, Universal Coverage Scheme.

Figure 1 Evolution of migrant policies in Thailand (5)

Therefore, a study should be conducted to revise the health screening and health benefits packages under the HICS in accordance with the current situation, and these policies should be developed based on scientific evidence and a participatory process in order to provide comprehensive and effective health services for migrants in Thailand.

2. Objectives

General objectives

Phase 1¹: To develop an appropriate health screening package for migrants in Thailand

Phase 2: To develop an appropriate health benefits package for migrants under the Health Insurance Card Scheme

Specific objectives

¹ WHO has committed to provide funding for Phase 1 of the project starting from September to December.

Phase 1:

- 1) To investigate the current health problems of migrants in Thailand
- 2) To review and identify screening interventions that are effective and good value for money based on academic evidence, and address the current health problems of migrants
- 3) To analyze the budget impact on health screening interventions developed in 2)

Phase 2:

- 1) To investigate health services utilization and health expenses of migrants under the Health Insurance Card Scheme
- 2) To review and identify health interventions that are effective and good value for money based on academic evidence, and address the current health problems of migrants
- 3) To revise health benefits package under the Health Insurance Card Scheme
- 4) To conduct budget impact and feasibility analysis of revising health benefits package under the Health Insurance Card Scheme

3. Methods

Phase 1:

- 1) Secondary data from the database of the Health Insurance Group (HIG), Ministry of Public Health, from 2013-2017 will be analyzed to investigate health problems of migrants in Thailand.
- 2) Literature and document review on effectiveness and value for money of screening interventions in migrants will be conducted while considering the situation of health problems analyzed in 1).
- 3) Develop a draft for an appropriate health screening package for migrants based on the literature review
- 4) Conduct a focus group discussion consisting of physicians from the Royal College/association and physicians who work in hospitals both in Bangkok and at the provincial level to discuss the draft health screening package in 3)
- 5) Modify the draft health screening package according to the focus group discussion results
- 6) Estimate the budget impact of the draft health screening package based on standard cost lists for health technology assessment (9) or literature review. If there is no information available regarding costs, the research team will collect and analyze the unit cost of that intervention.
- 7) Organize a meeting to present the results of the study to relevant stakeholders including health care providers, policy makers, academics, and non-governmental organizations (NGOs) to discuss the draft health screening package for migrants in Thailand

Phase 2:

- 1) Secondary data from the database of the Health Insurance Group (HIG), Ministry of Public Health, from 2013-2017 will be analyzed to investigate health services utilization and health expenses of migrants under the Health Insurance Card Scheme.
- 2) Health problems will be prioritized by the research team according to the data analyzed in 1) and health problems of migrants in Thailand analyzed in Phase 1, based on the criteria for prioritization such as size of population affected by the disease or health problem, severity of the disease or health problem, economic impact on household expenditure, etc.

- 3) Literature and document review will be conducted to identify health interventions that are effective and good value for money for the health problems prioritized in 2).
- 4) Develop a draft of an appropriate health benefits package for migrants under the Health Insurance Card Scheme
- 5) Conduct a focus group discussion consisting of physicians from the Royal College/association and physicians who work in hospitals both in Bangkok and at the provincial level to discuss the draft health benefits package in 4)
- 6) Conduct in-depth interviews with key informants such as health care providers, officers from Provincial Health Offices, policy makers in the Ministry of Public Health, etc., to explore the problems/obstacles and feasibility of implementing the benefits package developed by the research team
- 7) Modify the draft health benefits package and develop a policy recommendation for improving the benefits package under the Health Insurance Card Scheme according to the focus group discussion results and in-depth interviews
- 8) Estimate the budget impact of the draft health benefits package based on standard cost lists for health technology assessment (9) or literature review. If there is no information available regarding costs, the research team will collect and analyze the unit cost of that intervention.
- 9) Organize a meeting to present the results of the study to relevant stakeholders including health care providers, policy makers, academics, and non-governmental organizations (NGOs) to discuss the draft health benefits package under the Health Insurance Card Scheme

4. Benefits from this research

- 1) This study will illustrate the situations of migrant health problems in Thailand and health services utilization of migrants under the Health Insurance Card Scheme.
- 2) This study will propose appropriate health screening and health benefits packages for migrants under the Health Insurance Card Scheme according to the current situation, which will be developed based on scientific evidence and a participatory process.

5. Timeline

Phase 1

Activities	Month			
	1	2	3	4
Develop proposal				
Identify health problems of migrants				
Literature/document review and draft a health screening package				
Focus group discussion on the draft health screening package				
Modify the draft health screening package according to the focus group discussion results and estimate the budget impact				
Stakeholders meeting to present the results of the study				
Final report				

Phase 2

Activities	Month					
	1	2	3	4	5	6
Develop proposal						
Investigate health services utilization under the Health Insurance Card Scheme						
Prioritization of health problems						
Literature/ document review and draft a health benefits package for migrants under the Health Insurance Card Scheme						
Focus group discussion on the draft health benefits package						
In-depth interviews with key informants						
Modify the draft health benefits package according to the focus group discussion results and in-depth interviews, and estimate the budget impact						
Stakeholders meeting to present the results of the study						
Final report						

6. Research team

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