

AB024. Out-of-pocket payment and health insurance utilization by migration status in China

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Background: In China, migrants and non-migrants, categorized by the possession of local household registration (i.e., hukou), obtain different health insurance benefits and procure diversified support from the healthcare system. Previous studies identified that migrants received less reimbursement than local residents, and were not well protected by health insurance, but limited studies attempt to examine the association between migration and out-of-pocket payment of medical expense (Zhang, Nikoloski & Mossialos, 2017; Qin, Pan & Liu, 2014; Chen, Zhang, Renzaho, Zhou, Zhang & Ling, 2017; Zhao *et al.*, 2014). The current study seeks to fill this gap. Diversified health insurance programs may influence the effect of hukou-based migration on out-of-pocket, which will also be examined.

Methods: We used one wave of data from China Family Panel Studies (2014, N=19,133). Multiple linear and logistic regression models were applied. Subsamples were created by insurance participation to explore the heterogeneous effect. Migration coefficients were compared across groups through testing interactions and conducting Chow tests.

Results: The main findings are as follows. Migration decreased the likelihood of utilizing reimbursement by 35%. Migrants had lower medical expenditure ($b=-965.8$, $P<0.001$) and out-of-pocket cost ($b=-425.2$, $P<0.001$), but higher out-of-pocket ratios ($b=0.05$, $P<0.001$) than local residents, and this association with out-of-pocket ratios also existed in subsamples that participated in basic health insurances, although the coefficients across groups were not

significantly different.

Conclusions: The healthy migrant hypothesis might explain why migrants cost less, but migrants still received insufficient support from health insurance which indicates long-term financial and health risks. Currently, one in every four Chinese people are migrants, but hukou-based health policies excluded migrants from Universal Health Coverage. The small-scale migrant-oriented policies that were established in recent years shall be expanded and benefit more people.

Keywords: Migration; universal health coverage; out-of-pocket payment; health insurance

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Footnote

Conflicts of Interest: Both authors have no conflicts of interest to declare.

Ethical Statement: The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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