

036 **DOES HEALTH INSURANCE PROMOTE HEALTHCARE ACCESS AND PROVIDE FINANCIAL PROTECTION: EMPIRICAL EVIDENCES FROM INDIA**

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10.1136/bmjopen-2015-forum2015abstracts.36

**Background** Promoting healthcare access and reducing out-of-pocket (OOP) expenditure is an important health policy goal in a developing country including India. How far health insurance interventions have helped in achieving these objectives is examined in the present study.

**Objectives** This paper examines the impact of health insurance in promoting access to healthcare use and providing financial risk protection during health emergency. This also evaluates the relative role of publically financed pro-poor health insurance-PFPHI (like, the Rashtriya Swasthya Bima Yojana-RSBY and state run health insurance scheme) schemes, employer insurers and private insurance companies in providing financial protection to meet health expenses.

**Methods** This study has explored data at the household's level from two National Sample Survey (60th: 2004–05 and 68th: 2011–12) rounds, provided by Government of India. The two-sample t-test, concentration curve and multivariate regression analysis is used.

**Result** We found that health insurance promotes access to healthcare use for inpatient cares and promote equity. The impact of health insurance in promoting healthcare use remained noticeable high among poorest, as the inpatient rates of poor insured persons found about 16.4% higher than poor uninsured persons. However, it appears that health insurance encourages people to switch to costlier/tertiary cares and side-tracking primary care providers and leading to demand-supply induce moral hazard problems. This in turn increases the cost per inpatient episode of care. Health insurances financial protection remained highly biased towards rich and urban, while limited to poor and rural residents. The publically financed pro-poor health insurance strategies turned effective in