

B. TRENDS IN HEALTH INSURANCE.

A study of existing and proposed schemes shows certain trends. Thus there is a definite tendency for schemes for the provision of medical and hospital benefits to be :—

- (a) Compulsory :
- (b) Contributory :
- (c) No longer restricted to wage-earners, but widened to include all those below a certain income-level :
- (d) Of a family character, medical benefits being provided for dependants of the insured :
- (e) Complete so far as medical care is concerned—general practitioner, hospital, specialist, maternity, dental, and other services being provided :
- (f) Separated from schemes for the provision of cash benefits. It is generally considered that medical and hospital benefits provided by insurance should for administrative purposes be linked with existing health and medical services.

It is suggested that the above should represent the guiding principles in any scheme for health insurance which may be introduced into New Zealand.

C. PERSONS TO BE COVERED AND BASIS OF CONTRIBUTIONS.

Many of the remarks under these heads in the first part of the report apply with equal force to this part.

Any scheme for health insurance should primarily be designed for the *compulsory* inclusion of persons working for wages and salaries, with their dependants. In addition, there should be provision for the *voluntary* inclusion of workers on their own account, with dependants. It is a matter for consideration by the Government whether the benefits of the scheme should be restricted to those who are regarded as incapable, without hardship, of making adequate provision for medical care, and whether consequently an income-limit should be set.

Contribution in the case of compulsory members of the scheme might be made by the employee, the employer, and the State, while workers on their own account might be expected to contribute on a basis representing payments by employer and employee.

The unemployed are a special problem, and it is not unreasonable to suggest that the Unemployment Fund might pay the insurance premium for this section of the community, so bringing them definitely within the scope of the scheme.

D. PER CAPITA COSTS.

The annual *per capita* costs of providing reasonably full medical and hospital benefits have been estimated approximately to be as follows, estimated costs for New Zealand being compared with those for British Columbia.

	British Columbia.	New Zealand.
	\$	s. d.
General practitioner service	3.40	12 0
Maternity service	0.20	*
Specialist medical service	1.00	2 0
Dental service	0.50	7 6
Nursing service (other than hospital) ..	0.50	2 0
Hospital service	3.50	18 0
Drugs, medical, surgical, and optical supplies	1.60	4 6
Laboratory service	0.80	0 2½†
Reserve and contingencies	1.00	3 9½
	\$12.50	£2 10 0

* Not shown separately, but included in the amounts shown opposite general practitioner, nursing, and hospital services.

† Non-institutional work only. Institutional laboratory work is partly covered under hospital service.