

**OUT-OF-POCKET EXPENDITURE OF
SURGICAL CASES IN
YANGON GENERAL HOSPITAL (2017)**

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ABSTRACT

Out-of-pocket (OOP) payments are defined as direct payments made by individuals to health care providers at the time of service use. A study of cost analysis can be categorized as direct cost, indirect cost, formal cost and informal cost. This cross-sectional descriptive survey was conducted in 110 surgical patients attending the surgical units of Yangon General Hospital (YGH) by using the quantitative method with pre-tested questionnaires. The objectives of this study are to describe the amount of OOP expenditure on direct payment for medical care, laboratory and imaging investigations and to elaborate the proportion of OOP expenditure to total health care costs in YGH. This study showed the cost variation for inpatients depending on types of surgical treatments, methods of anaesthesia, and specific operation types. The unit cost incurred by patient for medicine was 37,665 MMK, for blood transfusion was free of charges, for OGD endoscopy was 15,000 MMK, for operation was 80,786 MMK, for laboratory investigation was 25,926 MMK and for imaging investigations was 2,177 MMK respectively. The minimum unit cost of OOP expenditure was for blood transfusion and maximum unit cost of OOP expenditure was for operation cost. So the major driver of OOP expenditure of surgical patient during hospitalization was operation cost. According to method of anaesthesia, the highest unit cost of OOP expenditure was major surgery with general anaesthesia (119,254 MMK). Likewise the lowest unit cost of OOP was surgery with short general anaesthesia (32,200 MMK). Regarding types of operation, OOP expenditure of biliary operation (145,875 MMK) was the highest unit cost and OOP expenditure of wound operation (30,810 MMK) was the lowest unit cost. However this study did not include the cost for human resources for health, buildings and infrastructure such as electricity, equipment and machine. This study can provide the basic cost information to help policy makers in efficient allocation of healthcare budget among the hospitals to a certain extent.