

The Need for Complementary Health Insurance in Iran and Suggestions for its Development

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Dear Editor

International experience has shown that the increasing diversity in healthcare services precludes the integration of all services under a government health insurance plan in terms of performance and economy; no institution receiving a fixed amount of money per capita is able to provide all services. Supplementary insurance is used in many countries.¹ In Iran, comprehensive coverage of medical costs through a basic government medical insurance program is not possible because of the rising costs of diagnosis, use of more up-to-date and expensive medical technologies, and the development of new treatment methods. The number of people deprived of the right to healthcare is increasing daily.

The structure of complementary insurance is based on participation and provides three types of coverage: completion of services, completion of costs, and integration of costs and services. In many leading countries, insurance is provided to a group with the participation of the insured and the insured's employer who pays the employee's premiums. In some cases, the premium is paid entirely by the insured, and governments generally have the participation priority in paying the premium. In countries around the world, the private sector has been effective in enriching complementary insurance, but careful monitoring by the state is emphasized. Studies have shown that considering the deductible for covered services is useful for creating competition among insurance institutions so as to control consumption patterns and avoid unnecessary demands.²⁻⁴ Considering Article 29 of Iran's Constitution which reads, "covering all medical services the non-provision of which puts one's health at risk" and examining the structure and performance of the Healthcare Insurance Organization, it seems that, despite growth in the covered population, complementary coverage is not proportionate to the current organizational structure. Therefore, the structure needs to be modified to adapt to new circumstances. In general, the successful implementation of complementary insurance programs in the European Union, especially in France that has one of the most successful insurance

systems in the world, shows that principles should be established to govern the healthcare systems available in the market. Furthermore, requiring participation in health insurance should be based upon a person's income, while care should be provided based on medical need, not financial participation.⁵

Authors' Contributions

All authors contributed equally in the preparation of this paper.

Conflict of Interest Disclosures

None.

Ethical approval

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