

Burden of Disease, Financial Protection and Behavioral Responses. Chronic Illnesses in Argentina

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Resumen

Changes in populations' epidemiological profiles in developing nations defy existing mechanisms of social protection in health care, and require greater interaction between the health system and its users. In particular, the prevalence of chronic illnesses in the country's burden of disease leads to an increase in years of life potentially lost due to such causes (DALYs), and calls the attention of public, social security and private institutions about how to finance their costs. In recent years, public programs in Argentina coordinated by the National Ministry of Health have concentrated their efforts on early detection and monitoring of population groups with hypertension and diabetes, also enhancing initiatives to promote healthy habits. The motivation behind these interventions is aimed at identifying cost-effective parameters in the inter-temporal analysis of health spending: more prevention and early detection of chronic diseases provide the opportunity to provide treatments to reduce its health impact, while retracting the risk of financially catastrophic health spending. Some social security institutions begun a similar path, adding companion funding to guaranteeing the drugs needed to prevent such chronic diseases from becoming catastrophic. However, and beyond the policy design, adherence to treatments by users is the main factor to affect both its effectiveness and its impact on health spending, not only for the insurance institution, but also for the user himself / herself. The objective of this project is to design a monitoring methodology to follow such prevention policies and their impact on expenditures in one mayor Argentine Social Insurance Institute. To do this, we aim to identify those chronic diseases with greater participation in the national DALYs, and to review local and international literature in order to instrument the way of monitoring the behavior of patients with such diseases. In addition, a representative sample of beneficiaries will be chosen to analyze the incremental costs associated to patients with and without chronic diseases, and within the former those with adherence and not to prescribed treatments. With such information it is expected to analyze differences in health status and out-of-pocket spending patterns. The obtained results will be compared to those arising from the general population, by using the Surveys of Utilization and Expenditures conducted by the Argentine Ministry of Health between 2005 and 2012 .