

# **ABSTRACT**

## **FINAL REPORT**

**HDP/HDR/RG-T/CHI/3044**

**RESEARCH PROJECT : Inequity in the Utilization of Health Services in  
Chile?: Analysis of the Effects of Individual Income and Health Insurance  
Coverage on Timely Receipt Health Services**

**by**

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**NOVEMBER, 2002**

## ABSTRACT

This research is a descriptive, analytic, cross-sectional study using data from the 1998 Encuesta de Caracterización Nacional (CASEN) -. The main outcome of interest in this research is the Chilean population's utilization of health services by type of health coverage and family income. The research sought specifically to address the differences in various health care services (primary care, medical specialties, emergency, etc) by those covered by public and private health insurance and those with different family incomes.

To determine whether there are some differences in the actual utilization and opportunity of use of different health services polychotomous logistic regressions were conducted.

Those covered by public insurance FONASA have 1.18 times the probabilities of not using health services when they need it in comparison to those covered by private insurance ISAPREs. Family income was strongly associated with the use of health services in a timely fashion, odds ratios that compared lower income quintiles (1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup>) to the highest income quintile are positive (OR=1.90, 1.59, 1.47 and 1.45), in a sliding scale and all parameters reached statistical significance. Public health insurance was associated with receiving health interventions late, those in FONASA were 2.65 times more probabilities of experimented serious delays in accessing health services than ISAPREs enrollees. Also family income was directly associated with the use of health services on time, individuals from the poorest income quintile are two times more likely to receive health interventions late than richer individuals from the 5<sup>th</sup> income quintile. Documenting disparities in the use of

health services is an important piece of information for the design and evaluation of the current health care reform.

Key words:health inequalities, health services utilization, Chile, health insurance, health system reform.