SPECIAL REPORT *The Centenary Commitment to Improving Healthcare by the Communist Party of China*

Government Provides Vigorous Supports to the Improvement of Health Care in Qinghai Province, China

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Abstract Qinghai province is located in the northeastern part of the Tibetan Plateau, and is an underdeveloped province of inland China. Chinese government gives high priority to the improvement of the wellbeing of Qinghai people, and have provided great supports in aspects of policy, funding, and professional resource to the development of health care and medical system in Qinghai. Great progress has been made, and wellness of residents in Qinghai has been significantly improved. This article reviews the strategies and measures from central and provincial government in improving health care of Qinghai province under the leadership of the Communist Party of China.

QINGHAI province, located in the north-west inland China, is an underdeveloped province. It is characterized by plateaus and mountains geographically, and residents in Qinghai province are mainly Han people, with some ethnic minorities. The average life expectancy was below 30 years at the year when the People's Republic of China was founded; while it has increased to 73.7 years as reported recently.^[1] Since Chinese reforming and opening in the late 1970s, the maternal mortality has decreased from 500 per million

to 24.7 per million, and the infant mortality has decreased from 110‰ to 7‰.^[2]

The magnificent progress in Qinghai people's welfare is inseparable from the great efforts on developing the health care and medical system of the province by the government. Medical care deliveries and public health resources have grown rapidly in the past a few decades. In the early period of the nation, there were only two hospitals and about a hundred inpatient beds throughout the province, while currently there are 215 hospitals and over 40 thousand inpatient beds in the province. Since Chinese reforming and opening, the number of licensed physicians (including assistant physicians) per thousand population has increased from 1.91 to 3.09, and the number of nursing staff per thousand population increased from 1.32 to 3.32.^[3]

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Under the leadership of the Communist Party of China, the government has provided strong supports to Qinghai in aspects of policies, funding, and professional resources, which are paramount to the current achievements. In this article, featured strategies and approaches taken by Chinese central and provincial governments in developing the health care of Qinghai province are outlined.

TARGETED POLICY SUPPORTS

Strategic plan on developing the western regions of China

Since the implement of the full-scale development program for the Chinese western regions, health care system of Qinghai province has been greatly stimulated in the past 20 years. Health care services in both urban and rural areas are increasingly matured, and medical care capabilities have been enhanced evidently. Life-threatening diseases are controlled effectively. Endemic prevention and control have achieved remarkable outcomes. Besides, Tibetan medicine has flourished. The health care professionals grow continuously in amount. Particularly, with the in-depth advancement of developing Chinese western regions in the new era, nation's supports to public services in western regions have been significantly enhanced. In 2020, the Qinghai provincial government issued the approaches for implementing the *Guiding Opinions of the State Council the Central Committee of the Communist Party of China on Promoting the Development of the Western Region in a New Era to Form a New Pattern*.^[4] It is clearly emphasized to continuously promote the Healthy Qinghai Initiative, accelerate transition of health care from disease-focused to wellness-focused, construct and improve standardization of health care service, comprehensively enhance the service capability, promote convenient and inexpensive health care, vigorously develop the "internet plus" medical service, integrate traditional Chinese medicine with Tibetan medicine, and promote health conserving combined with institutional medical care delivery using both Chinese and Tibetan medicine. The implementation of strategies above will play vital roles in high-quality development of health care in Qinghai province.

The pilot province in national reform of medicine and health care system

In February 2015, Qinghai province was appointed as

one of the first round pilot provinces in the national reform of medicine and health care system by the reform leading group of the State Council.^[5] During the 13th Five-Year Plan period, Qinghai provincial government put the medical service system reform as one of the three priority reforms. The strategies include enhancing top-layer design, innovating system and mechanism, synchronizing linkage of the "Five Med", ie., medical science, medical care, medical insurance, medicines, and hospitals. These strategies have ensured the integration, systematics and harmony of the health care system reform in the province.^[6] Currently, Qinghai has realized the "seven unifications" in terms of basic health insurance coverage, urban and rural residents financing standard, medical insurance for life-threatening diseases, medical service pricing, centralized medicine procurement, basic subsidy standard for public health, and separate invoicing for medicine purchase and selling. There are "nine coverages" of the health care reform in terms of public hospital reformation, grading of medical care system, salary system, medical treatment partnership construction, medical insurance via commercial insurance, off-site billing payment, basic medicine policy, counterpart assistance, and billing after hospitalization. Qinghai has achieved the phased goals of "people benefited, medical staff stimulated, medical institutions developed, and government beloved", and customized a path to a successful health care reform. For driving the health care reform in-depth, Qinghai has been regarded as a pioneer in solving the issue of "inaccessibility and expensiveness of medical care".

Twinning support working model

To boost the development of the six residential regions of Tibetan in Qinghai province, since 2010, Chinese central government has established a twinning support working model, which provides one-to-one support by six developed regions, including Beijing, Tianjin, Shanghai, Shandong province, Jiangsu province, and Zhejiang province. Funds, experts, technologies and educational resources have been input into Qinghai-Tibetan regions, through which optimization and complementary of medical resources are achieved. In addition, Qinghai officially launched a project in 2018 that initiated province-level hospitals providing medical assistance to county-level hospitals in southern Qinghai.^[7] Based on this program, 183 medical professionals from 12 province-level hospitals have immersed into

7 state-level and 14 county-level hospitals in southern Qinghai. The capabilities of treating common diseases and life-threatening diseases in the recipient hospitals have been significantly improved. In 2020, the total number of emergency visits, hospital admissions, and surgeries performed in the recipient hospitals increased by 9%, 10%, and 20%, respectively, compared to the last year.^[8] Furthermore, the central government initiates a program of the MDs Serving Team, which sponsors medical professionals with doctor degree from top hospitals in China to work in medical facilities of Qinghai, helping with tackling technical problems, strengthening collaboration, cultivating key talents, etc. This program has provided strong intellectual supports to medical system and health care development of Qinghai. Over 40 technical gaps in the province have been fulfilled through this program.

Preferential fiscal policies

The central government launched a policy providing subsidies for the development of regional medical and healthcare system, which was updated in 2019.^[9] It is clarified that the financial investments from central government are in the form of subsidy in principle, and are differential among regions with different economic and social development level. For the eastern, central, and western regions of China, the proportions of subsidized investment from the central fiscal revenue should not exceed 30%, 60%, and 80% of the total investment, respectively. For the six Tibetan autonomous prefectures in the southern Qinghai, all the medical and health related projects are fully funded by the central fiscal revenue, which is a great financial relief for the local government.

ONGOING FINANCIAL SUPPORTS

Rapid increases of funding

Governmental investment in the health care of Qinghai has been grown rapidly in recent years. From 2016 to 2020, the overall financial investment in the medical system and health care from Qinghai fiscal revenue exceeded 69 billion yuan, with an average annual increase rate of 13.7%. The expenses on medical system and health care out of total provincial GDP increased from 9.3% in 2016 to 12.0% in 2019 (2020 data not released). The out of pocket payment in individual health care expenses decreased from 27.5% in 2016 to 24.9% in 2019, compared to the national average

level of 28.4%. During the 13th Five-Year Plan period, the expense of public hospital from general public budget increased at an annual rate of 13.9%; for public comprehensive hospitals in the province, the fiscal subsidies accounted for 25.8% of the total expenditure in 2016 fiscal year, and increased to 39.3% in 2020 fiscal year.^[10]

Improve the health care delivery system

During the 13th Five-Year Plan period, Qinghai province received about 3.6 billion yuan in total from the central government as specific funding, which increased by 26.4% compared to that of the 12th Five-Year Plan period. With the continuous financial investment, 347 projects have been implemented in health care delivery system, including the constructions of new campuses of Qinghai Institute of Health Sciences, treatment bases for major epidemic outbreak, county-level hospital housing for Chinese, Tibetan, and Mongolian medicine, maternal and child healthcare housing, institutional laboratories for disease prevention and control, institution for blood collection and supply, boosting project on communicable disease treatment at county-level hospitals, the project on food safety measurement and monitoring capacity, the project on diagnosis and treatment improvement for rare or difficult diseases, the project on Chinese herbal medicine inheritance and innovation, constructions of sub-centers of provincial hospital in Tibetan areas, constructions of emergency care stations on traffic arteries, constructions of ancillary facilities for township hospitals, and etc.^[11] By these actions, the medical care infrastructure in the province at all levels has been improved significantly, which further fulfill the functions of the province-, city (prefectures)-, and county-level hospitals cross the province. With the capacity of primary medical care services continuously enhanced, the fairness and accessibility of medical and health services are further improved.

Optimize urban and rural residents' medical insurance policies

In 2020, the reimbursement in medical expense of urban employed residents and urban general residents by the basic medical insurance policy were 84.6% and 72.5%, respectively. The reimbursement proportions of outpatient expenditure for chronic diseases and some special diseases increased and covered 25 diseases, with the maximum annual payment by government increased to a range from 2,000 to 10,000 yuan. For

insured urban and rural residents, the reimbursement of hospitalization expenses at level 3, level 2 and level 1 medical institutions are 70%, 80% and 90%, respectively, with a maximum reimbursement of 100,000 yuan. The per capita funding of medical insurance for urban and rural residents has increased from 550 yuan in 2015 to 940 yuan in 2020, and the ratio of fiscal subsidies to personal payment reached 1.99:1 in 2020.

Increase subsidy rate for basic public health services

In 2020, Qinghai had 34 basic public health service projects, including 31 national level projects and 3 provincial level projects. The per capita subsidy baseline increased from 45 yuan in 2015 to 79 yuan in 2020, which was the top level in western China and 5 yuan higher than the rate of the nation.^[12] The total investment on the basic public health service projects reached 1.8 billion yuan during the 13th Five-Year Plan period. To cope with population aging and provide better health care for the elderly, the province provides free health checkup and consultation at a rate of 130 yuan per person,^[13] with total input of 270 million yuan during the 13th Five-Year Plan period. The basic public health services in the province are generally paid by government, and performance appraisal system for projects on public health services has been established, which is conducted based on mechanism of daily monitoring combined with periodical inspection. The annual implemented reward or penalty funds are about one million yuan.

Control the major infectious diseases

The fund input in controlling major communicable diseases has been increased year over year, which was 188.1 million yuan in 2020, 8.86 times higher than that of the year 2004. The major life-threatening infectious diseases and endemic diseases in Qinghai province, such as hepatitis B, acquired immunodeficiency syndrome (AIDS), tuberculosis, and echinococcosis, have been restrained significantly from proveniences. Vaccination rates for all types of vaccines in the immunization programs have reached 95% and above. AIDS remains low prevalence level. The spread of tuberculosis is restrained. For hydatid disease, by the Surgery Clearing Action, Qinghai achieved the goal of clearing off current suffering patients, and the population prevalences had been reduced to 1% or less in 84.6% counties in Qinghai.^[14] Notably, Qinghai government

and health professionals strive to explore effective measures targeting on the features of each epidemic focus to prevent and control epidemics of plague, and there has been no human plague infection for 9 consecutive years within the province.^[15] The "Qinghai model" for plague prevention and control has been recognized and promoted nationwide.

In summary, under the leadership of the Communist Party of China, Chinese government gives strong supports to develop the health care in Qinghai province, and great achievements have been made since the founding of People's Republic of China. Continuously proceed the construction of a healthy Qinghai and pursue the initiative of Health for All will be sure to bring greater wellbeing to the people of Qinghai province.

Conflict of interests

None.

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中文摘要

党和政府大力支持青海省卫生健康事业发展

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摘要

青海省地处青藏高原东北部, 是中国西北部内陆欠发达省份。国家高度重视改善青海人民的卫生健康状况, 为提高青海省医疗卫生水平, 在政策、资金和人才方面持续大力投入。目前, 青海省卫生健康事业取得长足发展, 人民健康水平显著提升。本文回顾了在中国共产党的领导下, 中国中央和地方政府为改善青海省的医疗卫生状况所采取的策略和措施。

关键词: 青海省; 医疗卫生; 政策; 政府支持