

Original research article

Factors affecting the utilization of Employees' State Insurance Scheme benefits in a tertiary care hospital in Central Karnataka

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Abstract

Background: Employees' State Insurance scheme is an evolutionary security scheme in India that covers huge working population. It provides social protection to workers in the organized sector and their dependents in contingencies, such as, sickness, maternity, disablement and death due to an employment injury or occupational disease. This Study Focus on the awareness and utilisation of ESI scheme by the employees.

Objective: To study the utilization of Employees State Insurance scheme benefits in a Tertiary care hospital in Central Karnataka.

Methodology: All Employees Registered under ESI Scheme of the tertiary care hospital i.e. 398 were included in the study. Out of which 19 were unwilling or unavailable to participate in the study. Thus about 379 covered under ESI Insurance in Basaveshwara hospital were included in the study. The data on socio demographic variables and information on awareness and utilization of ESI services was taken. Data were entered into Microsoft excel sheet and analyzed using SPSS 17.0 software. Frequency and percentages were calculated.

Results: In this study, only 3.9% of the participants utilized health services in ESI hospital. The most common reason (56%) for non-utilization of ESI services was that the OPD timings were unsuitable. Around 32.2% had absolutely no knowledge about ESI services and 59.2% of the participants were dissatisfied due to deficit of medicines in the facility. Around 95% of the study subjects were happy of getting the lab services and any surgical procedures free of cost.

Conclusions: Most of the working employees have low awareness about the existing ESI scheme. Hence both the organization and government should focus on creating the awareness among the employees and the benefits of utilization of ESI policy.

Keywords: Employees' state insurance, utilization, health care services

Introduction

The Employees State Insurance act was proclaimed by the Parliament of India in the year 1948. The ESIC plan was at first propelled on second February 1952 at only two modern focuses on the nation in Kanpur and Delhi with an inclusion of about 1.20 lakh labourers. Then the plan was executed in a staged way with the dynamic inclusion of the state governments. The success of organisation depends upon the strength of human resources. Without positive response and contributions from people, organisations cannot achieve anything. In order to achieve the goals or activities of an organization, they should maintain good relations with them. It's the time that organisations recognize that valuing their employees as assets should be realised in a full-fledged manner. Health is a major constitutive element of the wellbeing and freedom of nation. Hence the employees 'state insurance is a scheme offered by the Govt. of India ^[1]. Employees' State Insurance Scheme of India is an integrated social security scheme tailored to provide social protection to workers in the organized sector and their dependents in contingencies, such as, sickness, maternity, disablement and death due to an employment injury or occupational disease. Towards this objective the insurance provides full medical facilities to insured persons and their dependents, as well as, cash benefits to compensate for any loss of wages or earning capacity during physical distress ^[2]. The ESI Scheme is a contributory and mandatory health insurance scheme for workers of the factories and other establishment's viz. Transport, Hotels, Restaurants, Cinemas, Shops,

and Educational/Medical Institutions wherein 10 or more persons are employed. Depending on the risk grouping and resources, the health insurance scheme provides medical facilities or beneficiaries and case benefits for loss of wages or income in service. It is a legal compliance within itself that primarily analyses their government assistance and their clinical consideration of representatives dependent on normal month to month pay rates [3]. A total of 29 million employees and their dependents contributed towards this scheme in 1995 [4]. The ESI Scheme is financed by employers and employees contributions. The percentage of contribution by employer is 4.75% of the wages which is payable to employees. The employees' contribution is at the rate of 1.75% of the wages payable to an employee [5].

The ESI Act respects human dignity during crises by protecting them from destitution, deprivation and social degradation and many issues. Currently the scheme benefits more than 13 crore beneficiaries [6].

Health Care Utilization is the determination or description of the use of services by people for the purpose of preventing and curing health problems, promoting maintenance of health and well-being, or obtaining information about one's health status and prognosis [7]. Health-care utilization is determined by the need for services, by whether people know that they need care based on their felt needs by whether they want to obtain the services and by whether care can be accessed.

Since having health insurance cannot guarantee access to care among the insured persons, their actual health seeking behaviour should be the evidence reflecting true access. Therefore, the study was conducted with the objective of utilization of Employees State Insurance Benefits in a Tertiary care hospital in Central Karnataka.

Material and Methods

A cross sectional observational study was conducted Basaveshwara Medical College and hospital Chitradurga.

Sample size included all Employees Registered under ESI Scheme of the tertiary care hospital i.e. 398. Out of which 19 were unwilling or unavailable to participate in the study. Thus about 379 covered under ESI Insurance in Basaveshwara hospital were included in the study. The study was undertaken for a period of four months from (August 2022-December 2022). Prior permission was obtained from the concerned employees before initiating the study. After obtaining informed consent from the subject, the employees were interviewed. A pre designed, pretested questionnaire was prepared to collect the data by direct interview method.

The Questionnaire consisted of two sections:

1. Information on socio demographic variables like age, sex, occupation, education, works experience, etc.
2. Information on awareness and utilization of ESI services.

Data were entered into Microsoft excel sheet and analysed using SPSS 17.0 software. Frequency and percentages were calculated.

Results

Table 1: Socio demographic profile of Study subjects

Factors		Frequency	Percentage
Gender	Male	192	50.7
	Female	187	49.3
Education	<SSLC	147	38.8
	12th standard	52	13.8
	Degree	180	47.4
Monthly medical expenses	0-500	115	30.3
	500-1000	155	40.8
	>1000	109	28.9
Percentage of your salary is deducted for ESI	<1%	25	6.6
	1-2%	339	89.5
	2-4%	3	.7
	>5%	12	3.3

Out of 379 ESI employees of Basaveshwara Medical College 50.7% were Males. More than 47.4 % of the subjects were having passed their degree, 38.8% were studied up to 10th Standard and 13.8% were studied up to degree.

Table 2: Utilization of ESI services by the ESI Employees

		Frequency	Percentage
Where do you visit to get medical care	Private	364	96.1
	ESI	15	3.9

More than 96.1% of the ESI Employees visit to the Private hospitals instead of ESI Hospital.

Table 3: The reasons for non-utilization of services among employees

Reasons for non-utilization	No of participants (%)
Unsuitable OPD timings	212 (56%)
Distance far away from home	192 (50.6%)
Lack of knowledge about ESI services	122 (32.2%)
Others	58 (15.3%)

In this study the most common reason for non-utilization of ESI health care services was no need of ESI services i.e. 56% followed by 50.6% said that ESI is far away from their residence while 32.2% subjects had lack of knowledge about ESI health care services. (Table-3).

Table 4: Reasons for dissatisfaction of services among employees

Reasons for dissatisfaction	No. of participants (%)
Deficit of medicines	224 (59.2%)
Unavailability of doctors	77 (20.4%)
Lack of proper care	45 (11.8%)

The study found the reasons of dissatisfaction among beneficiaries that deficit of medicines (59.2%) was the most common reason for dissatisfaction followed by non-availability of doctors (20.4%) followed by lack of proper care (11.8%) (Table-4).

Table 5: Reasons for satisfaction of services among employees

Reasons for satisfaction	No. of Participants
Free of cost of lab services and other surgical procedures for in patients	360 (95%)
Availability of all the lab services round the clock for in patients	353(93.2%)
Availability of medicines	155 (40.8%)

This study also shows that many participants were satisfied with the services provided by the ESI scheme. Around 95% of the study subjects were happy of getting the lab services and any surgical procedures free of cost. About 93.2% of the subjects were satisfied with the lab services being available any time. It also can be seen that 40.8% of the study participants were satisfied with getting most of the medicines needed.

Discussion:

In the present study out of 379 participants 192 (50.7%) were male and 187 (49.3%) were females. In a study conducted by Ramesh Varma *et al.* among utilizing 418 (83.5%) participants, 391 (93.5%) insured persons were males and 27(6.5%) were females ^[2]. Maximum number of participants (40.8%) had their monthly medical expenses between 500-1000 Rs and as far as literacy status is concerned nearly half of study participants (47.4%) had a degree in our study. In a study conducted by Prakash M *et al.* majority 27% of the respondent’s education qualification was high school ^[8]. In our study only 3.9% of the participants utilized health services where as in a study conducted by Shingade *et al.* 38% of beneficiaries had utilized the services and out of those only 45.6% were satisfied ^[9]. In a study by Ramesh Varma *et al.*, 83.6% subjects utilized the ESI services ^[10].

In the present study the most common reason (56%) for non-utilization of ESI services was OPD timings were unsuitable as the participants are from a tertiary health care centre and the timings of both the centres overlapped. On the contrary in a study by Shinged *et al.*, most common reason for non-utilization was unawareness regarding the Scheme ^[9]. In a study in Haryana by Ramesh *et al.* The most common reason (48.8%) for non-utilization of health care services was no need of ESI services followed by 45.1% stated the distance between the residence and services was far away which was 50.6% in our present study ^[10].

This study demonstrated that around 32.2% had absolutely no knowledge about ESI services whereas a study conducted by Prakash *et al.* showed 100% of the respondents were fully aware of sickness, dependents and leave benefits ^[8]. In a study conducted by Latha *et al.*, 52.88% i.e. majority of the employee working in that hospital were very well aware on the ESIC benefits and only about 47.12% had claimed that they did not have any idea on the ESIC benefits ^[11]. Similarly in a study conducted in Nigeria about 60% were aware of out of pocket as the most prevalent form of health care financing, while 40% were aware of National health insurance scheme wherein, television and billboards were their main sources of awareness ^[12].

The present study found the reasons of dissatisfaction among beneficiaries that deficit of medicines (59.2%) was the most common reason for dissatisfaction followed by non-availability of doctors (20.4%)

followed by lack of proper care (11.8%) whereas in a study by Ramesh Varma *et al.* the common reason for dissatisfaction for ESI services among beneficiaries was non availability of diagnostic facility/lab tests (58.1%) followed by non-availability of complete medicines (54.7%)^[10]. In another study conducted by Avishek Hazra *et al.*, 35% persons respondents were satisfied with ESI services and rest were dissatisfied^[13]. In a similar study it was observed that in terms of availability of staff and medicines, about 61 per cent of respondents remained satisfied and two in three patients appeared to be satisfied with the quality of services provided in the ESIC hospitals^[14]. A study conducted to assess the problems faced by employees in utilizing ESI benefits highlighted that out of many problems, lack of medicines and other facilities for treatment was ranked first with a Garrett score of 10850 points^[15]. Whereas in our study 40.8% of the study participants were satisfied with getting most of the medicines needed.

In a study conducted by Miny MJ the overall satisfaction level with benefits provided by ESI was satisfactory^[16]. In a similar study it was seen that only 50 per cent of the employees were satisfied with the information provided by ESI regarding cost, treatment and reimbursement implying that only one in two were satisfied with the healthcare services provided^[14].

In another similar study majority (56.94%) of the participants were not satisfied with the ESI services provided^[17]. In various studies it was observed that a large number of employees were not fully aware of the ESI schemes and most of the employee availing medical care was not satisfied with its quality^[18].

Conclusion

Health Care Utilization refers to the use of health care services. People use health care for many reasons including preventing and curing health problems, promoting maintenance of health and well-being, or obtaining information about their health status and prognosis. Therefore understanding the factors affecting health care utilization is very important in disease prevention and treatment. A working environment will be healthy only when the Organization and the Employees together have a growth. The Employees' State Insurance Scheme of India (ESIC) is a multi-faceted Social Security Scheme designed to provide socio-economic protection to employees' in the organized sector.

Thus in this study the awareness and utilization of ESI services was studied and came out with the following recommendations and suggestions regarding utilization of health care services in ESI dispensary:

Most of the working employees have low awareness about the existing ESI scheme. Hence both the organization and government should focus on creating the awareness among the employees and the benefits of utilization of ESI policy. There is a need for increase in OPD timings and to have sufficient drugs in the facility. Specialist doctors should be appointed/ arranged to provide quality services at ESI dispensary so that it will be beneficiary for their medical problems. Thus the utilization of health care services will improve if the above deficits are made available.

Recommendations

The institution needs to focus more about the benefits of Employee State Insurance (ESI) policy to the Employee.

The Employee should be educated efficiently and made aware regarding the benefits of Employee State Insurance (ESI) policy.

The materials like posters and handouts describing the policies of ESIC schemes and its benefits can be displayed in the main areas of the hospital and distributed to staff to create awareness among the employee.

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