

Mexican Health System

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- The health system in Mexico has 70 years, in 1943 was created the Secretariat of Assistance and Public Health services, (today Secretariat of Health), Mexican Social Security Institute and the children hospital.
- After this year, began an important process to create new health institutions, for example specialized health institutions as national institute for Cancer.



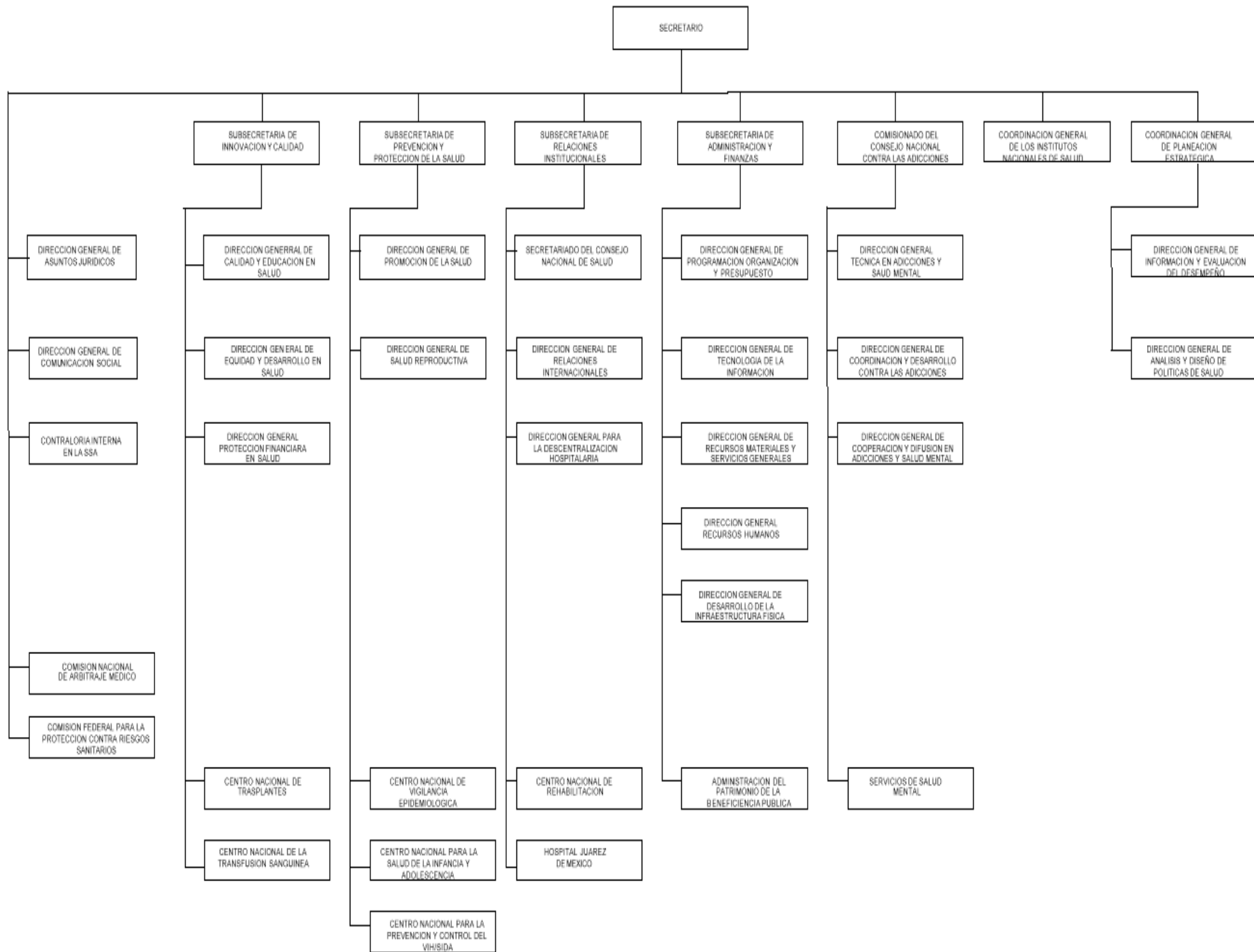
- With the creation of new institutions appeared the first generation of health reforms to respond to the health and medical need of population and to provide medical services to the worker population, which have increased for the industrial development boom in Mexico.
- For this reason the creation of the Mexican Social Security (IMSS) Institute in 1943 and the social security and services institute for State workers (government workers) ISSSTE.
- At the beginning of the decade of 50's the Secretariat of Health was responsible to provide health services to rural and urban groups that were not affiliated to IMSS or ISSSTE.



- The rapidly increased of people affected the distribution of health services because it was designed to specific conditions.
- So in the late 70's the health services in Mexico were insufficient to assist the population.



- Insurance in the provision of accessible and affordable health services: a randomized controlled trial in Mexico





- - Before 2003, the right to health care in Mexico was an employment benefit. A significant percentage of the poor population were unemployed and therefore at risk of poor health and impoverishing health expenditure.
- - In 2003, the government initiated a new set of health reforms which aimed to provide health care services and adequate coverage to approximately 50 million people.
- - Seguro Popular (People's insurance) was the new public insurance scheme which assures legislated access to comprehensive health care.



- Assessing the impact of Seguro Popular (study design)
- - 100 pairs of health facility catchment areas or 'health clusters' were randomly assigned to receive either the intervention or the control.
- - INTERVENTION: Seguro Popular provided a package of benefits that included coverage for 266 health interventions and 312 medicines. It also provided funds to state health ministries (proportional to the number of families joining the scheme).



- In health facilities receiving the intervention, there was a campaign that persuaded families to enroll in Seguro Popular.
- CONTROL: control cluster families received usual health care which they had to pay for



- Findings
- - In the intervention clusters, out-of-pocket expenses/catastrophic expenditures were 23% lower than the control clusters.
- - Within the intervention clusters, families that signed up for Seguro Popular has their catastrophic expenditures reduced by 59%.



- 69% of people enrolled in Seguro Popular rated the quality of health services as very good or good.
- There was no effect of Seguro Popular on the quality of health care including access to and use of medical facilities. Long-term research is needed to determine the effects of the program.
- August 2012 (10 years since the launch of the program) 52 million previously uninsured Mexicans had state protected health care.



In Mexico the Universal The Secretariat of Health has advanced to achieve the Universal coverage.

Nowadays the access has been improved and a great challenge to Mexican Health System is provide access to the population and gets better the quality services.