

Determinants of Staff's Knowledge of Insurance Companies from the Patient's Bill of Rights

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Abstract: Health insurance as a part of welfare and social security system of the country is continuously undergoing changes and reforms in order to improve the quality, set up ice, increase coverage, enhance patient satisfaction, etc. However, no study has been conducted yet to evaluate the dimensions of patient's rights in insurance organizations and to determine how much this organizations are familiar with the Patient's Bill of Rights. Therefore, this study was aimed to evaluate the knowledge of employees working in insurance companies about the Patient's Bill of Rights and the related influencing factors. This study was performed on insurance companies in Semnan City, Iran, in 2015. In this study, a census method was used. A researcher made questionnaire has been used in this study. The 168 (93%) had inadequate awareness. Logistic regression analysis showed that job experiences (OR = 1.136, p = 0.002, 95% CI) has a direct correlation with increasing of awareness. The results indicated that a small number of employees working in insurance companies had sufficient knowledge about different aspects of patient's rights. The results of regression analysis showed that the work environment could affect the awareness of employees.

Key words: Justice, insurance, direct correlation, sufficient, awareness

INTRODUCTION

Patients are one of the most vulnerable social groups and they are physically, psychologically, socially and economically at risk. As a result, it is clear that, the human rights international institutes and communities must pay a special attention to the concept of patient rights (Farzaneh *et al.*, 2011; Parsapoor *et al.*, 2014). As one of the areas of the clinical services governance, the World Health Organization has placed an emphasis on the patient's views about and experiences of healthcare services (Kahouei *et al.*, 2014a, b; Mahboobe *et al.*, 2012). Patient right is a term which is used to describe the medical team's duties and responsibilities toward patients; it also covers all the advantages, abilities or special permits granted to the patient (Mehdi *et al.*, 2012). It is clear that observing patient's rights can help to increase a sense of security and satisfaction in the patients and in turn it increases patient's participation in medical process and consequently decreases the duration of hospitalization and the related costs (Ozdemir *et al.*, 2006a, b; Kahouei *et al.*, 2014a, b). To regulate and standardize the relations between patients and physicians, health care institutions and other health service providers, it is necessary to prepare the Patient's

Bill of Rights (Dadashi *et al.*, 2010; Lledo *et al.*, 1998). The five dimension of the Patient's Bill of Rights include the followings: the right to receive quality services, the right to receive sufficient and relevant information, the right to respect the privacy of patient and observe the principle of confidentiality by health care providers and the right to access an efficient complaint system (Kahouei *et al.*, 2013a-c). Taking into account the peculiarities of the health sector in the country, making changes in the health system is beyond the authority of the Ministry of Health. Hence to make such changes it is necessary to involve other ministries, non-governmental organizations and private health sector (Nekoei Moghadam *et al.*, 2014; Zandiyeh *et al.*, 2015). In general, changes in the health sector in the country are aimed to move toward a perfect social system and toward better conditions. Hence, the changes and reforms in the health sector indeed require a reform in the policy-making process that could lead to change both in the processes and policies (Vafadar *et al.*, 2014; Mehdi *et al.*, 2011). In addition, the road map of the evolution of the health system defines the best approaches to provide health care services. This road map involves all stakeholders in the health system including insurance organizations and the other institutions involved in health care service delivery

(Nekoei Moghadam *et al.*, 2014). Considering the organizational structure of the medical services insurance in Iran, this organization is affiliated to the Ministry of Welfare and Social Security; in addition, the health care system in Iran as in many developing countries is a general cooperation type (Kahouei *et al.*, 2011). Health insurance as a part of welfare and social security system of the country is continuously undergoing changes and reforms in order to improve the quality, set up ice, increase coverage, enhance patient satisfaction, etc. (Mehrdad, 2009). Studies have shown that different factors such as education level, increased public awareness of the advantages and risks of high tech medicine, lack of faith in the experts and increased attention to the problems of consumers have played a great role in the initiation of civil rights movement and they have increased peoples demands and expectations for patient's rights (Safdari *et al.*, 2010; Mosadegh Rad and Asna Ashari, 2004). Previous studies have evaluated and examined the views of different stakeholders about some of the dimensions of the patient's rights (Haghdoost *et al.*, 2013; Nemat Bakhsh, 2015; Mozghan *et al.*, 2012) and have assessed the impact of various background factors such as age, race, socioeconomic status and disease severity on this attitudes (Mosadegh Rad and Asna Ashari, 2004; Nemat Bakhsh, 2015). Several studies have been conducted to assess the health care service provider's knowledge of patient's rights; however, no study has been conducted yet to evaluate the dimensions of patient's rights in insurance organizations and to determine how much this organizations are familiar with the Patient's Bill of Rights. The formulation of a comprehensive Patient's Bill of Rights is a starting point to safeguard the rights of patients and to set and regulate the correct relationships between the health care service providers and recipients; hence, providing data about the degree of stakeholders awareness of the importance of the patient's rights and the effects of different factors including professional status and environmental differences on such rights can help policy makers to design better monitoring and promotional plans so that to promote the patient's rights. Therefore, this study was aimed to evaluate the knowledge of employees working in insurance companies about the Patient's Bill of Rights and the related influencing factors. The results of the study can provide evidences for better planning in order to increase customer satisfaction, improve the quality of services in the insurance units and to increase the quality of insurance services.

MATERIALS AND METHODS

This study was performed on insurance companies in Semnan City, Iran, in 2015. In this study, a census

method was used. A researcher made questionnaire has been used in this study. The questionnaire consisted of 19 questions in 5 sections. The first part contained 6 questions related to demographic information including gender, field, age, job experience, kind of insurance and education; the second part included 6 questions related to Providing appropriate and quality services; the third part contained 4 questions related to Privacy and confidentiality; the fourth part contained 5 questions related to the right of choice and decision-making and the fifth part contained 4 questions related to the right of access information. Correct answers gives score of 1 and incorrect answers gives score of 0. Respondents could receive maximum score of 19. The study subjects who obtain the score >14 had adequate awareness and obtain the score <14 had inadequate awareness. Then, the primary questionnaire was reviewed for content validity through the content validity index. Next, the questionnaire was revised to be more focused as the experts suggested. Then we piloted the questionnaire on 20 employees of insurance companies randomly selected from the companies by test and retest. The correlation coefficient was 0.872. Participants in the pilot study were excluded from the study. Lastly, the researcher distributed the final version of the anonymous questionnaire among the employees who were working in insurance companies and asked them to complete it. The questionnaire was delivered to the researcher at most 72 h later. Descriptive statistics and logistic regression were used to analyze data.

RESULTS AND DISCUSSION

Total 181 of 240 (72.4%) people participated in the study. 168 (93%) had inadequate awareness Table 1. Significant difference was found in the awareness of the components of patient's bill of rights ($p < 0.001$) Table 2. Univariate analysis showed that job experiences (OR 1.125, $p = 0.002$, 95% CI 1.045-1.212) and kind of experiences (OR 4.623, $p = 0.014$, 95% CI 1.363-15.675) either alone has a direct correlation with increasing of awareness Table 3. Step by step regression showed that job experiences (OR = 1.136, $p = 0.002$, 95% CI) has a direct correlation with increasing of awareness Table 4. This study was conducted to identify factors influencing the insurance companies awareness of the Patient's Bill of Rights. The results showed that insurance companies had different levels of knowledge about the suitable and high quality services provided for patients; the difference was significant. It seems that some staffs are significantly aware of the people's needs and they consider the fulfillment of such needs as the main objective of health care delivery when high quality and appropriate services are provided every individual person in the community will become able to promote his/her

Table 1: Characteristics based on awareness status

Characteristics (Groups)	Awareness status (N, %)	
	Inadequate 168 (93)	Adequate 13 (7)
Sex		
Male	85 (50.6)	3 (23.1)
Female	83 (49.4)	10 (76.9)
Age (Year)*	31±6.88	36±4.19
Job Experiences*	4.6±5.19	10.3±5.34
Field		
Medicine	1 (0.6)	0
Nursing	8 (4.8)	0
Others	159 (94.6)	13 (100)
Education		
Diploma	57 (33.9)	1 (7.7)
Bachelor degree	90 (53.6)	10 (76.9)
Master Degree	20 (11.9)	2 (15.4)
PhD	1 (0.6)	0
Kind of Insurance		
Basic	55 (33.7)	9 (69.2)
Commercial	113 (67.3)	4 (30.8)

*Mean±SD

Table 2: Employee's awareness about patient's bill of rights

Patient rights bill	Awareness status (Mean±SD)		df	p-value
	Inadequate	Adequate		
Providing appropriate and quality services	3.5±0.92	4.69±0.94	5	0.001
Privacy and confidentiality	3.1±0.63	3.69±0.63	3	0.807
The right of choice and decision-making	2.3±0.88	3.9±0.86	4	0.001
The right of access information	2.1±0.79	3.6±0.48	4	0.001

Table 3: Univariate analysis

Characteristics	B	Odd's ratio	df	p-value	CI 95%	
					Lower	Upper
Sex	1.228	3.414	1	0.069	0.907	12.845
Field			2	1		
Nursing	0.000	1	1	1	0.000	
Others	18.699	8E1.321	1	1	0.000	
Age (Year)	0.074	1.077	1	0.28	1.008	1.150
Job experiences (Year)	0.118	1.125	1	0.002	1.045	1.212
Kind of insurance	1.531	4.623	1	0.014	1.363	15.675
Education			4	0.683		
Diploma	17.396	7E3.590	1	0.999	0.000	
Bachelor degree	19.006	EB1.795	1	0.999		
Master degree	18.900	EB1.615	1	0.999	0.000	
PhD	0.000	1	1	1	0.000	

Table 4: Determinants employee's awareness of patient's bill of rights

Characteristics	B	Odd's ratio	df	p-value	CI 95%	
					Lower	Upper
Sex	1.318	3.735	1	0.084	0.839	16.639
Job experiences	0.127	1.136	1	0.002	1.048	1.231
Kind of insurance	1.212	3.361	1	0.065	0.927	12.184

*Hosmer and Lemeshow test = 0.680; Area under the curve = 0.506

health and quality of life that can be achieved through the effective use of information resources through a group activity (Rathlev *et al.*, 2014; Kahouei *et al.*, 2013a-c; Safavi *et al.*, 2012). Studies have shown that employees have enough knowledge about the importance of the delivery of complete health care services for patients

(Hojjatolaslami and Ghodsi, 2012; Su *et al.*, 2012; Kahouei *et al.*, 2013a-c). The results have shown that there was no significant difference between the employees of insurance companies in terms of confidentiality which is a part of patient's rights.

However, the results of the present study showed that given the nature of the job and tasks of employees in insurance organizations, a number of employees had access to information about the type and severity of disease, patient status and other confidential information which should not to be disclosed. Seemingly, the studied employees were aware of and observed the confidentiality of such data and they knew it is illegal and immoral to disclose patient data except for certain cases. Previous studies have shown that employees working in health care institutions put much emphasis on the confidentiality of data in the clinical processes (Domaradzki, 2015; Siebert and Biberthaler, 2013; Kahouei *et al.*, 2015a, b).

The results showed that a number of employees of insurance companies, compared with the other employees were significantly more aware of patient's rights of making choices and decisions. This study showed that some insurance companies were aware of the patient's rights of being informed about the potential risks and benefits of treatment; they knew that patients should be informed about the types of treatment and then choose their own treatment. Previous studies have shown that obtaining informed consent from patients is one of the legal issues in clinical and therapeutic activities which lead to the satisfaction of the patients (Goldberger *et al.*, 2011; Yin *et al.*, 2015; Kahouei *et al.*, 2015a, b). In addition, it seemed that some of the staffs were aware of the legal issues about the enrollment of patients in research studies. Although, health care organizations believe that when a patient refers to an educational health care system, it indicates his/her consent to participate in this process, however, the patient's rights of informed consent must be preserved while participating in a research process (Hicks *et al.*, 2001; Kahouei *et al.*, 2016). Pirhaji *et al.* (2012) conducted a study to evaluate the attitudes of an educational team toward the patient's right to make decisions about participation in educational processes. According to the results, the educational team did not have a favorable attitude toward this right of patients. It seemed that because of the concerns of the faculty members and residents about the participation of the patients, they were less concerned with the right of patients to have information. The results of this study showed that a number of employees were significantly aware of the right of patients to access information such as the cost of treatments and their impact on the course of the disease. Apparently, the employees were aware of the fact that patients must access the required information to make informed decisions about their disease and available treatment methods. Rabei and Rangraz Jeddi (2006)

reported that their study participants had an acceptable level of awareness of the patient's rights of being informed about the complications of diseases and their right to participate in treatment processes. Statistical analysis showed that age alone could influence the awareness but its impact is not very significant ($B = 0.074$, $p = 0.28$). This means that with increasing every year of employee's age, the chance to increase their awareness of patient's rights is increased by 1.077. However, the variable of age along with the other variables has no effect on knowledge. In view of that, the results showed that, compared with the age, other factors such as gender ($OR = 3.735$) and type of insurance ($OR = 3.361$) had a larger impact on employees awareness. This means that working in some health insurance organizations such as and social security and health insurance companies had an impact on employee's knowledge. Because of several issues, the findings of this study should be interpreted cautiously. Firstly, this study was conducted using a researcher made questionnaire and thus, it might have some potential problems such as poor understanding of the questions and likely biases in the responses. However, taking into consideration the high reliability and validity of the questionnaire, it had little impact on the results. Secondly, some participants in our study did not answer some of the questions; it may affect the results. However, the findings of this study are in line with the results of other studies. Thirdly as 24.6% of the population did not participated in our study and since the study was conducted only in one city, the results cannot be generalized to the entire population. Hence, it is recommended to conduct further studies on a large scale.

CONCLUSION

The results indicated that a small number of employees working in insurance companies had sufficient knowledge about different aspects of patient's rights. In addition, they had different and sometimes significant levels of knowledge about various areas of the patient's bill of rights. The results of regression analysis showed that the work environment, work experience and gender could affect the awareness of employees. Regardless of the statistical results, holding in-service training to increase the knowledge of employees in insurance companies can help to promote their awareness of different dimensions of patient's bill of rights.

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