



Evidence for improving health care provision to ensure universal health coverage amid rapid population ageing in Japan

Lead Research Institution: University of Occupational and Environmental Health, Japan (UOEH)
Principal Investigator (PI): Dr Shinichi Tomioka, Assistant Professor, Department of Preventive Medicine and Community Health

Budget: US\$ 100,000

Start of project: October 2017; Statistical analysis of secondary health care data (outpatient care, home care, disaster health care, and acute hospital care): November 2017- August 2018; Completion of project: September 2018

Background

As the sustainability of universal health coverage (UHC) is coming under question in Japan, largely under the pressures of rapid population ageing, the delivery of appropriate and efficient health care informed by relevant evidence is urgently needed. Large-scale administrative data are still relatively underutilized in health research in Japan. The research team is renowned in Japan for their advanced efforts in establishing a nationwide Diagnosis Procedure Combination (DPC) data system administered by the Ministry of Health, Labour and Welfare, Japan. This study will utilize this and other large-scale health care data to examine the actual delivery of health care in Japan and to obtain evidence that can contribute to future health policy towards sustainable UHC.

Research questions

Key research questions include:

- 1) How efficient is outpatient care in Japan compared to other countries with similar health care systems, including France, Germany and the UK?
- 2) Can a policy shift from facility care to home care contain health care costs?
- 3) What are the lessons of the 2016 Kumamoto earthquake experience on the delivery of disaster medical care for ageing populations?
- 4) How equitable is acute hospital care (e.g. prescription, surgical treatment, length of hospital stay) for older people? Are there systematic differences in care based on patient's age or mental health status (e.g. dementia, schizophrenia)?

Methods

This research aims to provide evidence for more efficient, equitable and cost-effective health care delivery in Japan at the primary and secondary care levels spanning four domains: 1) outpatient care, 2) home care, 3) disaster health care, and 4) acute hospital care. All research questions will be addressed through a cross-sectional, statistical analysis of secondary, large-scale health care data from Japan, namely DPC, medical reimbursement receipts, and the Japanese Surveillance in Post-Extreme Emergencies and Disasters (J-SPEED).

Expected outcomes

This study will provide evidence that can guide the development of health systems and policies for ageing populations toward more efficient, equitable and cost-effective health care delivery across a broad range of clinical settings. The results will provide important implications for health policy reforms to advance UHC in Japan and ensure its sustainability. It will also offer valuable insights and lessons to other countries.

Team members

Lead Institution:

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Study overview

Sustainable Universal Health Coverage in a rapidly ageing society Primary care level Secondary care level DPC data 1. Outpatient care Receipt data Acute hospital care Polypharmacy Fair treatment for older and Multi-departmental consultation mentally ill patients Gatekeeping Prescription Surgical treatment 2. Home care Receipt data Length of hospital stay Cost containment Waiting days for surgery J-SPEED data Research aim 3. Disaster health care Elderly care in natural disasters Finding evidence for more efficient, Transition from emergency equitable and cost-effective health care delivery at primary and secondary care levels amid rapid population ageing in Japan