Reviewer's report

Title: Urban health insurance reform and coverage in China using data from National Health Service Surveys in 1998 and 2003

Version: Date: 2 Date: 30 May 2006

Reviewer: Viroj Tangcharoensathien

Reviewer's report:

General

This is an interesting paper reflecting the stagnate and deteriorating insurance coverage in urban population despite government interventions. The paper compares household survey in 1998 and 2003 the level and profile of insurance coverage prior to (for the GIS and LIS) and after the reform (BIHS).

The paper is difficult to understand, some parts are not very clearly described and discussed. Further analysis on the insurance profiles and its dynamicity between the mandatory BHIS and the voluntary non-commercial and the commercial schemes.

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Major Compulsory Revisions

1. Detail description on the differences between GIS and LIS versus BHIS on the following
(1) benefit package and co payment,
(2) the contribution, and
(3) eligibility of dependants
as all these has a major impact on the changes, deteriorations in insurance coverage between 1998 and 2003
2. Description of the non-commercial and commercial insurance schemes on benefit package and co payment, the contribution and premium, eligibility of dependants,
3. Description on the enforcement capacity by insurance management agencies
4. Further analysis of tables to include insurance coverage by the employees and their dependants, and gender.

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Minor Essential Revisions

This paper does not address the issue of access to and use of health services between gender, income groups and employment status (P11). Insurance coverage is the only focus of this paper.

Describe the possible routes of transforming GIS or LIS to BHIS and other non-commercial and commercial insurance e.g.
(1) the child and spouse dependants of either GIS or LIS, or both GIS and LIS were excluded, this results in reduction in size of coverage,
(2) the transformation of GIS/LIS to other non-commercial and commercial insurance schemes, this is just a shifting, no changes in size of coverage,
(3) the termination of some LIS and not join in BHIS, this results in reduction in the size of coverage
(4) the private enterprises who do not have LIS (the uninsured) did not join the BHIS, this results in a small pool of new-entrants.
(5) etc.

Comparing 2003 and 1998 can give figures on total coverage, but does not reflect the dynamic transformation among GIS and LIS to BHIS, other non-commercial and commercial schemes. There is a need to elaborate discussion this point as it is the central focus of the paper. In addition, table 3 should be broken down by employee, retiree, spouse and child dependants.

Table 6, it is not clear if the income is household annual income, or it is per capita annual household
Discretionary Revisions

- The Month that the NHSS 1998 and 2003 was conducted
- What are the seven groups of socio-economic conditions of cities and counties?
- If proxy respondents are allowed for the non-presenting members on the survey date. If proxy respondents are allowed, comment on accuracy of information given. Comment on potential bias when doctors at community level were interviewers of this survey.

**What next?:** Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

**Level of interest:** An article of importance in its field

**Quality of written English:** Not suitable for publication unless extensively edited

**Statistical review:** No

**Declaration of competing interests:**
'I declare that I have no competing interests'