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Knowledge and Practice of the Referral System under the National Health Insurance Scheme among Medical and Dental Practitioners of A Large-Accredited Facility in Kano, Nigeria

Connaissance et Pratique du Système de Référence Sous le Régime D'assurance Maladie National chez les Praticiens Médicaux et Dentaires d'un Grand Établissement Accrédité à Kano, Nigeria

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ABSTRACT

BACKGROUND: Studies on healthcare professionals' knowledge about the National Health Insurance Scheme (NHIS) are scarce. Therefore, we assessed the knowledge and practice of the NHIS referral system among Medical and Dental practitioners in a tertiary hospital in Northwest Nigeria.

METHODS: This cross-sectional study involved 242 medical and dental practitioners randomly selected from nine departments for over 6-weeks. A structured self-administered questionnaire was used to collect data. Data were analyzed using descriptive and inferential statistics.

RESULTS: The respondents' mean age was 35.7 ± 6.0 years; they were predominantly males (64.9%). Their mean overall knowledge score was $58.9 \pm 23.0\%$, with 66.9% of respondents having inadequate overall knowledge of the NHIS referral system. Practice department (Fishers exact, $P=0.0019$), perceived knowledge of the referral system ($\chi^2=8.169$, $P=0.004$), and having been referred as an enrolee ($\chi^2=6.358$, $P=0.012$) were associated with overall-knowledge. Obstetrics-and-Gynaecology (odds ratio[OR]=0.29, 95% confident interval [CI] [0.88-0.98]), Dental-and-Maxillofacial-Surgery (OR=0.08, 95%CI[0.01-0.98]), and Otorhinolaryngology (OR=0.18, 95%CI[0.04-0.80]) respondents were less likely to have adequate overall-knowledge. Although 56.2%, 50.4%, 20.7%, and 89.7% were enrolees, had received treatment as enrolees, had been referred as enrolees and treated other enrolees, respectively, an unimpressive proportion had sighted a referral letter (64.9%) or authorization code on the letter (25.2%), referred an enrolee from their department previously (51.2%) or used the NHIS referral form to write referrals (38.8%).

CONCLUSION: The overall knowledge of the NHIS referral system was inadequate. The practice of the referral system was below expectation. Therefore, training medical and dental practitioners on the NHIS referral system is necessary. Training should target those who are least likely to have adequate overall knowledge.

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KEYWORDS: Knowledge and Practice, Medical Practitioners, National Health Insurance Scheme, Nigeria, Referral

RÉSUMÉ

CONTEXTE: Les études sur les connaissances des professionnels de la santé concernant le Régime d'assurance maladie national (NHIS) sont rares. Nous avons donc évalué les connaissances et la pratique du système de référence du NHIS parmi les médecins et dentistes d'un hôpital tertiaire du Nord-Ouest du Nigeria.

MÉTHODES: Cette étude transversale a impliqué 242 médecins et dentistes sélectionnés de manière aléatoire dans neuf départements pendant plus de 6 semaines. Un questionnaire structuré auto-administré a été utilisé pour recueillir des données. Les données ont été analysées à l'aide de statistiques descriptives et inférentielles.

RÉSULTATS: L'âge moyen des répondants était de $35,7 \pm 6,0$ ans ; ils étaient principalement des hommes (64,9 %). Leur score moyen global de connaissances était de $58,9 \pm 23,0\%$, avec 66,9 % des répondants ayant une connaissance globale insuffisante du système de référence du NHIS. Le département de pratique (test exact de Fisher, $P=0,0019$), la connaissance perçue du système de référence ($\square 2 = 8,169$, $P=0,004$) et avoir été référé en tant qu'adhérent ($\square 2 = 6,358$, $P=0,012$) étaient associés à la connaissance globale. Les répondants en obstétrique-gynécologie (rapport des cotes [OR]=0,29, intervalle de confiance à 95 % [CI] [0,88-0,98]), en chirurgie dentaire et maxillo-faciale (OR=0,08, IC à 95 % [0,01-0,98]), et en oto-rhino-laryngologie (OR=0,18, IC à 95 % [0,04-0,80]) étaient moins susceptibles d'avoir une connaissance globale adéquate. Bien que 56,2 %, 50,4 %, 20,7 % et 89,7 % étaient adhérents, avaient reçu un traitement en tant qu'adhérents, avaient été référés en tant qu'adhérents et avaient traité d'autres adhérents, respectivement, une proportion peu impressionnante avait vu une lettre de référence (64,9 %) ou un code d'autorisation sur la lettre (25,2 %), avait référé un adhérent de leur département précédemment (51,2 %) ou avait utilisé le formulaire de référence du NHIS pour écrire des références (38,8 %).

CONCLUSION: La connaissance globale du système de référence du NHIS était insuffisante. La pratique du système de référence était en deçà des attentes. Par conséquent, la formation des médecins et dentistes sur le système de référence du NHIS est nécessaire. La formation devrait viser ceux qui sont moins susceptibles d'avoir une connaissance globale adéquate. WAJM 2024; 41 (1): 16 - 24.

MOTS-CLÉS: Connaissances et Pratiques, Professionnels de la santé, Régime national d'assurance maladie, Nigeria, Renvoi

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