



TAIWAN MEDICAL ASSOCIATION*¹

Ching-Chuan SU,¹ Jerry-Y.H. CHU²

Taiwan Medical Association (TMA) compiled data on membership, physician-patient ratio and distribution of physicians across all levels of healthcare facilities by end of 2013. A summary of TMA's recent activities is presented below:

Government Sponsored Projects

Projects included “2014 Global Budget Implementation Performance and Evaluation,” “CME Credits Acknowledgement,” “ICD-10-CM/PCS Training,” “Community-based Colorectal Cancer Screening,” and “Development of Job Stress Inventory for Physicians in Taiwan.”

Legislative Advocacy and Policy Formulation

Policies promoted by TMA included “Medical Care Act Amendment,” “Medical Malpractice Resolution and Compensation Act” (draft), “Long-term Care Act,” “Long-term Care Insurance

Act” and a policy governing pharmacist’s registration of parallel practices in multiple locations.

International Programs

We visited Japanese Ministry of Health, Labour and Welfare, Japan Medical Association and long-term care facilities in Japan; attended the 67th World Health Assembly and World Medical Association Luncheon Meeting; sent a delegation to the American Medical Association General Assembly; visited Malaysian Health Ministry and Medical Association, and actively engaged with Chinese medical professionals.

Other Activities

We identified critical gaps to be addressed in the NHI system, purchased group insurance for our members, and collaborated with mass media in various occasions.

The 29th CMAAO Assembly & 50th Council Meeting

- Country Report -

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Taiwan Medical Association

Instruction

TMA's membership=43,556
Doctor-patient ratio=1:554
Proportion of practicing physicians in medical institutions

Distribution of physicians by level of healthcare facilities

Healthcare Facility	Proportion (%)
Clinic	37.5%
Academic Medical Center	28.7%
Regional Hospital	23.1%
District Hospital	9.7%
Psychiatric Hospital (accredited under New Hospital Accreditation Program)	1.2%
General Hospital	0.2%

Statistics by the end of December 2013

*¹ This article is based on a presentation made as the Report of Activities by each NMA at the 29th CMAAO General Assembly and 50th Council Meeting, Manila, the Philippines, on September 24-26, 2014.

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1) Primary Care

Background:

TMA's work achieved an "Excellent" status in the 2013 Global Budget Implementation Performance and Evaluation Meeting.

Project Objective:

- Planning and management of inspectors.
- Standard operation procedure of handling abnormal claims.
- Quality of inspectors.
- Claims reviewed by inspectors.
- Coherence of inspectors' qualifications.
- Coherence of inspection.



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2) CME Credits Acknowledgement

Background:

The physician license be renewed every 6 years, upon completion of:

- 162 CME credits of professional courses.
- 18 CME credits of quality, ethics and legal education.

Project Objective:

- TMA, as an accredited provider of CME, offers professional courses in a variety forms from regular, symposium, correspondence to online courses.

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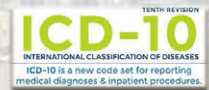
3) ICD-10-CM/PCS Training

Background:

- ICD-9-CM is in use for over 30 years and inconsistent with current medical practice.
- It cannot accurately describe the diagnoses and inpatient procedures of care

Project Objective:

- To reduce error and measure outcomes with higher accuracy.
- To facilitate care management.
- To enhance clinical research.
- To manage long-term care.



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4) Colorectal cancer screening

Background:

- Before 2006, colorectal cancer was the 3rd leading cause of cancer mortality after liver cancer and lung cancer.
- After 2006, it became the NO. 1 killer, followed by liver and lung cancers.

Project Objective: Early detection and early treatment.

- To increase the prevalence of colorectal cancer screening.

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5) Development of Job Stress Inventory for Physicians in Taiwan

Objectives:

- To facilitate physicians' understanding about sources of stress and assess their mental & physical health conditions.
- To establish a database of stress as work and mental & physical health among Taiwanese physicians.
- To identify risk factors and adopt stress management and prevention policies.



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- 1) “ Medical Care Act Amendment “
- 2) Advocacy for the “Medical Malpractice Resolution and Compensation Act” (draft)
- 3) Promotion of “Long-term Care Act and Long-term Care Insurance Act”
- 4) Promoting “Pharmacists to Register Parallel Practices in Multiple Locations”

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● Visited Japan.



Long-term care facilities



Japan Medical Association



Japanese Ministry of Health

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● Participation in the 67th WHA & WMA Assembly



Venue of WHA & WMA Assembly



Venue of WMA Luncheon Meeting



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● Visited Malaysia & USA.



American Medical Association



Malaysian Medical Association



Malaysian Medical Association

● Visited China.



Shanghai Planned Parenthood Committee

Shenzhen Medical Association

Chinese Medical Doctor Association

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1) Identified Critical Gaps in the NHI System

- Increase reimbursement rate,
- Increase allocated quota,
- Subsidize training of resident physicians,
- Ensure adequate supply of supportive workforce,
- Strengthen PGY training,

for 5 major departments included Surgery, Medicine, Gynecology, pediatrics & emergency.

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2) Group Insurance

- No upper age limit.
- Monthly premium of NT\$100 will be drawn from membership fees, adding no extra levy.
- NYS300,000 of life insurance and 200,000 of accident insurance coverages.

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3) Work with Media

Description:

- Collaborated with TV, radio, newspapers and magazines.

Objectives:

- To build a positive and professional image.
- To disseminate comprehensive and correct health news and messages.
- To join interview-based programs that provide insights from medical professional perspectives.

Achievement:

- ☆ http://www.kbro.com.tw/SMod/prog_smod_00.aspx?B=1&CategoryID=a77135b0-0d18-400f-a154-9db46ea1515
- ☆ <http://www.youtube.com/?g1=TW&h1=zh-TW>
- ☆ http://www.tma.tw/followDr/index_03.asp

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감사합니다 Natick
Danke Ευχαριστίες Dalu
Thank You Köszönöm
Tack
Спасибо Dank Gracias
고맙습니다 Merci Seé

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