

ABSTRACT

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The purpose of this study was to examine for satisfaction of insurance's customers to claiming Medical expenses in Private Hospitals in Mueng District, Chiang Mai Province. Data was collected through questionnaires which were given to 138 clients who purchased the addition health insurance plan. The statistical results are shown in frequency, percentage and mean.

Is was found that majority of the responded clients were single female with the age of under 30 years. Their highest level of educational background was bachelor. Degree. Most of them were employee with the salary of 5,000 – 10,000 baht and had purchased the health insurance for 1 – 5 years. Among the insurance companies the respondents were able to select a Thai insurance company, a joint venture between Thai and foreigner company and an international company.

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Before receiving any service, the customers had high expectation of the company character and service offered base on the information, such as the companies stability and the reliability. During Service, they were very much satisfied with well informed physicians and nurses who knew exactly how to the forms and the Insurance representative who gave good advice on how to fill the forms correctly. After the service, they were very much satisfied with stability and reliability of the company.

Problems that occurred before receiving the service they found it was difficult filling out the claim form and difficult to contact the insurance representative.

Problems that occurred during services were they had to deal directly with the hospital. They found it was difficult contacting the Insurance representative and the document was quite complicated. They had no idea what they could claimed. Sometimes they could not pay attention to their needs. Besides, the insurance representative did not to assist customers and the delay in processes to be done before being released from the hospitals.

Some of the problem that occurred after receiving health care service were it took too long time for case consideration and getting refund from the company, the processes did not cover all that was involved and necessary, not enough attention and explanation from the Insurance representative difficulties trying to contact the insurance representative. Not enough assistance and continuous care from the insurance representative and the customers had to pay more of the balance than expected.