# Willingness to Pay

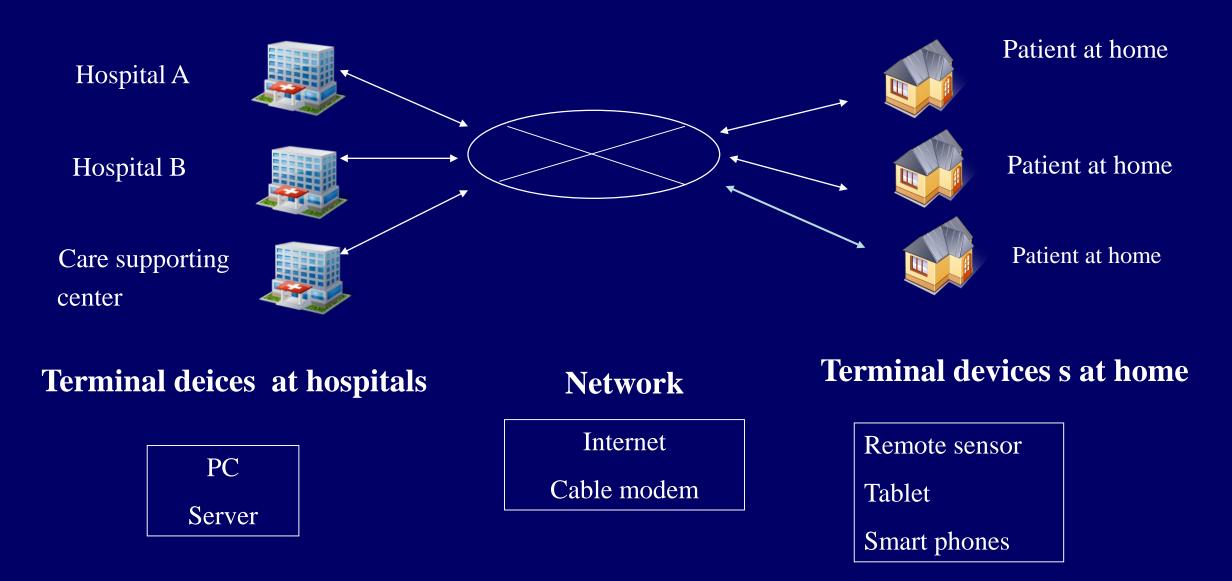
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ITU-D Study Group 2 Rapporteur Group Meeting, Question 2/2, Geneva, 14 October 2019

# Outline

- 1. Introduction
- 2. Benefits of e-Health
- 3. Measuring WTP I: Telemonitoring
- 4. Measuring WTP II: Teleradiology
- 5. Measuring WTP III: Online clinic
- 6. Conclusion

# e-Health System



# Why difficult to measure benefits of e-Health

1. No direct medical effects by e-Health e-Health is not aimed to cure diseases

2. Benefits of e-Health contain: Early finding of symptom Prevention of getting worse Stabilizing the condition of diseases Raising health consciousness Privation of treatment stoppage Decreasing anxiety towards health Decreasing medical expenditures

# What are outcomes of e-Health to Measure ?

QoL Travel costs Treatment days Hospital admissions Medical expenditures WTP (Willingness to pay) and WTA (Willingness to accept)

Our main methods

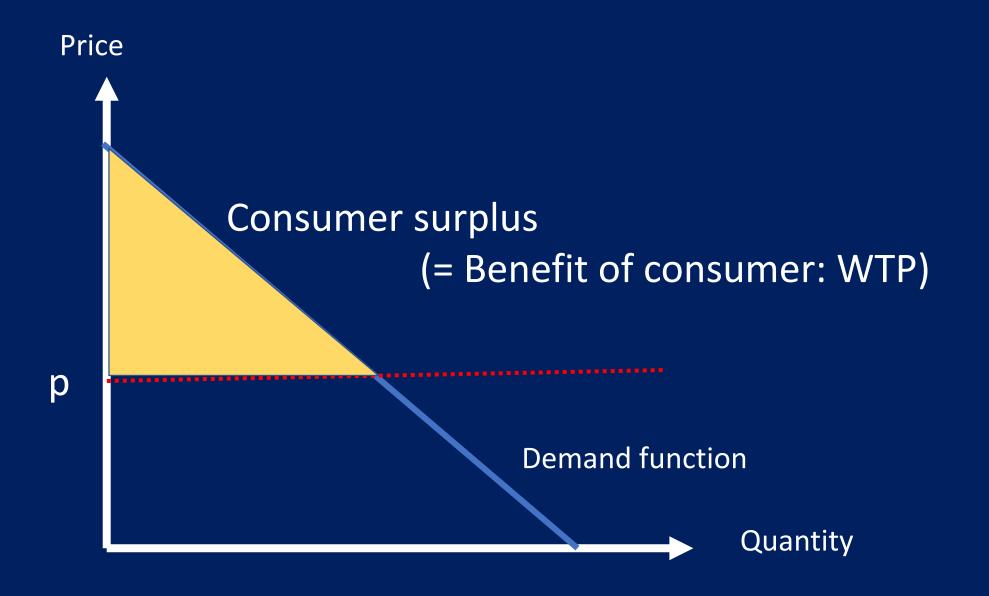
# **Methodology: CVM**

# CVM (Contingent Valuation Method) The method of estimating economic values for nonmarket goods such as public services and environments.

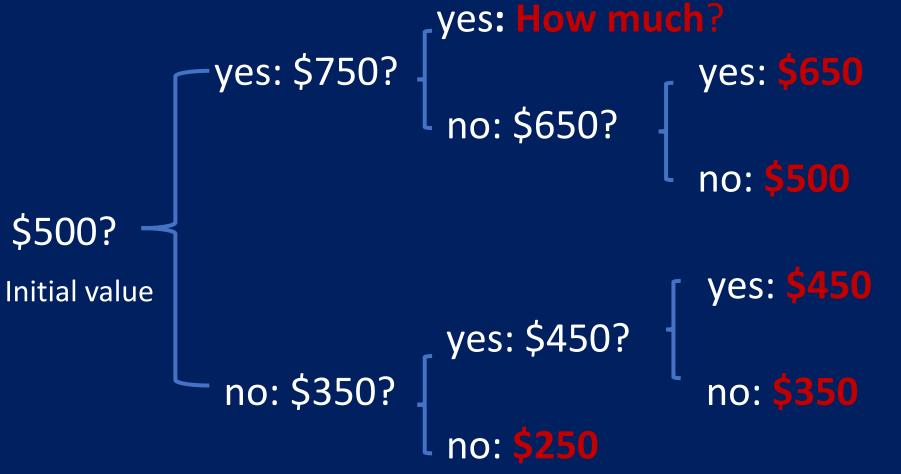
#### > WTP (Willingness to Pay)

In CVM, WTP is estimated as a benefit. The method involves directly asking people how much they would be willing to pay for using the services.

# How to Measure WTP







The amounts in red letter are determined values.

# The Scene of Asking WTP



# Summary of WTP from our previous studies I

Evaluation method		Ex-ante					
	Kamaishi	Nishiaizu	Katsurao	Sangawa	Izawa	Misumi	
No. of users	348	518	926	384	552		
No. of Devices	211	400	325	225	219		
Manufacturer	Nasa	Nasa	NEC	Nasa	Nasa		
Network	CATV	CATV	PSTN (ISDN)	CATV	PSTN	(CATV)	
Monthly charges	2,500 yen	none	none	none	none	(none)	
WTP	4,519 yen	3,178, yen	1,640 yen	2,955 yen	1,758 yen	2,825 yen	
	\$\$45.19	\$31.78	\$16.40	\$29.55	\$17.58	\$28.25	

# WTP of Japanese Teleradiology and Telepathology

Tsuji, M., S. Miyahara, C. Iizuka, F. Taoka and M. Teshima, "An Economic Evaluation of Japanese Telemedicine: focusing on Telepathology and Teleradiology," *Journal of Telemedicine and Telecare*, Vol. 12, No. 1, 29-31, July, 2006

# **Comprehensive Mail Survey**

#### • February 2005

Sent questionnaires to 622 medical intuitions received 220 valid replies

#### • Questionnaires:

Characteristics of institutions Implementation: costs, charges, frequency, etc. Level of satisfaction WTP and WTU Future plan of implementation

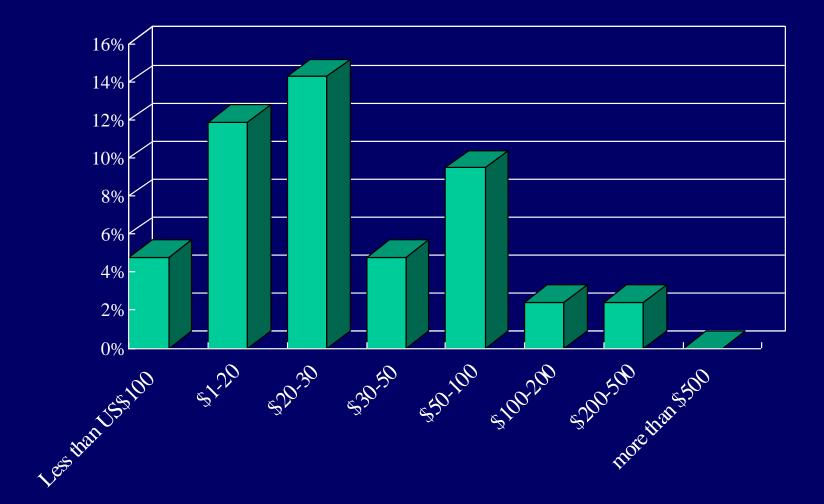
# WTP and WTU of Teleradiology and Telepathology

**Requesting medical institution** 

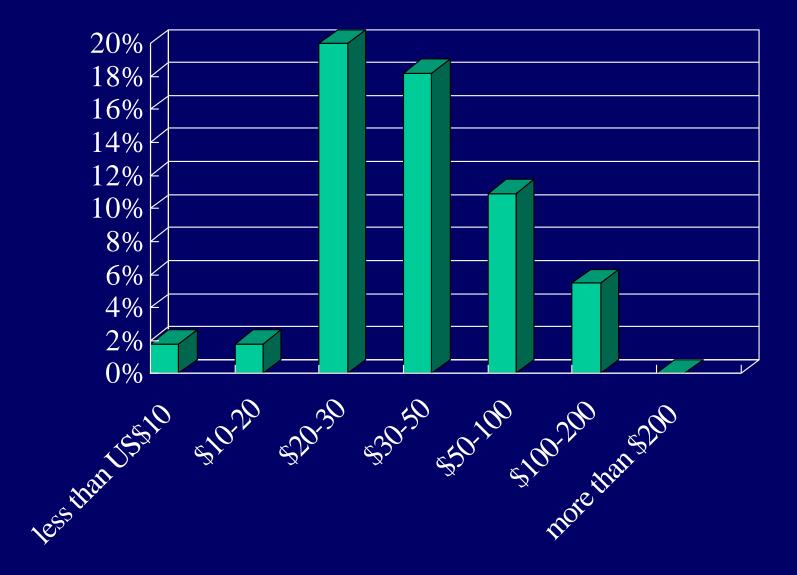
WTP (Willingness to pay)

**Undertaking medical institution** 

# **Distribution of WTP: Teleradiology**



# **Distribution of WTU (WTA): Teleradiology**



#### **Estimated WTP and actual charges for services**

	Kernel estimates	unit: US\$ Actual payment
Teleraidology	38.75	21.42
Telepathology	79.18	74.42
Teleconference	32.30	17.62
Teleconsultation	36.43	62.50
Surgical advice	85.76	
Catheter intervention	43.23	
Telecare with pictures	21.11	
Telecare with biomedical monitor data	34.44	

#### **Economic Evaluation of Online Clinic:**

# **Current Research**

# **Definition of online clinic**

Making a diagnosis and medical prescribing to a remote patient via the Internet with the help of telecommunications devises such as smart phones, video phones, tablets, SNS, and so on.

# **Example of online clinic I: Online diagnosis**



# **Example of online clinic II: Medical question**





# **Benefits of online clinic**

Saving time and effort of patent, doctors, and care takers

- Prevention of getting worse
- Early finding of symptoms
- Privation of treatment stoppage

# WTP is the most suitable method to evaluate!

# Conclusion

# Measuring economic benefits of e-Health is difficult, but it is mandatory to do it.

#### **Cost Benefit Analysis:**

	B/C	B/C after receipt of subsidies	Ministries support
Kamaishi	1.07	1.87	Welfare
Katsurao	0.54	1.42	Welfare, Agriculture
Nishiaizu	0.58	2.31	Welfare, Agriculture
Sangawa	0.61	2.60	Post and telecom, And Agriculture