A Study on the Medical Security of Migrant Workers

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Abstract: At present, China is in the process of accelerating the industrialization, urbanization and information. More and more rural labor force is chosen to be employed in the city. According to the statistics, the number of migrant workers in the country reached 281.71 million in 2016. The increasingly number become an important force in socialist construction. To solve the migrant workers in this social group is difficult to see a doctor, expensive care for their worries, has become the urgent task of urban and rural development. So the article discusses how to solve the medical insurance of migrant workers.

Keywords: migrant workers, medical security, model.

INTRODUCTION
Definition Of The Concept Of Migrant Workers

How to define the migrant workers, government and academics have expressed this, such as the March 27, 2006 promulgated the "State Council on the settlement of migrant workers in a number of opinions" on the "migrant workers" Explained that: "migrant workers are China's reform and opening up and industrialization, urbanization in the process of the emergence of a new labor force. Their household registration is still in rural areas, mainly engaged in non-agricultural industries, and some in the slack season to migrant workers, Strong mobility, and some long-term employment in the city, has become an important part of industrial workers. "Gongcheng Zheng that migrant workers are rural household registration status in the urban workers, that is a traditional Chinese household registration system under a special Identity is the objective result of the accelerated process of industrialization in China and the serious conflict of traditional household registration system [1].

It can be seen that the migrant workers are a unique social group produced under the historical conditions of the industrialization, urbanization and non-agricultural development of the rural population. However, this group is basically a manual worker in the town. One reason the health risks of their work are particularly prominent. Due to the lack of historical reasons and the lack of government system design, the social security of migrant workers has not received due attention, and the insurance of migrant workers' pension, medical care, work injury and unemployment has appeared in the system. The medical security of migrant workers is not only related to their own survival and development and family stability, but also related to the quality and quantity of the facilities to build and complete, and social stability and harmony. At present, the establishment of the whole social security system is still in the stage of exploration and development. The development of society is complicated and varied. It is obviously not enough to meet the needs of the special group of rural migrant workers [2]. Medical insurance has become the second floor of the bottom line guarantee of migrant workers' social security system, second only to the industrial injury insurance which constitutes the bottom of the social security needs of migrant workers.

HEALTH PROBLEMS OF MIGRANT WORKERS
Lack of awareness of migrant workers

According to the statistics provided by the spokesman for the Ministry of Human Resources and Social Security, as of the end of 2008, the number of migrant workers participating in medical insurance was 42.66 million, an increase of 11.35 million over the previous year. The number of insured persons accounted for 16.9% of all migrant workers. National Bureau of Statistics data show that in 2009 the total number of migrant workers in the country 229.78 million, of which 4335 million people participated in urban health insurance, an increase of 69 million over the previous year. Although the number of insured persons accounted for 16.9% of all migrant workers. National Bureau of Statistics data show that in 2009 the total number of migrant workers in the country 229.78 million, of which 4335 million people participated in urban health insurance, an increase of 69 million over the previous year. Although the number of insured persons has increased, the total rate of participation is still low [3].

There are several reasons for the low participation rate of migrant workers: the first level of knowledge of the first migrant workers is not high, the
awareness of risk, the low awareness of rights and interests, the lack of awareness of the importance of social security, awareness of rights is not strong, even if the employer did not know Their own to pay the relevant medical security, social vulnerable migrant workers in order to get the job they will not take the initiative to fight for their own interests. This is the main reason for the low rate of participation of migrant workers. Second, due to poor income of migrant workers, the family burden, feel that their physical strength does not need to participate in medical security. In addition, due to the mobility of the work, the uncertainty of the future, they also worried that the relationship will be linked to the geographical migration or replacement work obstacles.

The nature of the work of migrant workers led to low participation rate

The biggest feature of the work of migrant workers is mobility, employment and instability. First, the group of migrant workers has a strong liquidity, the purpose of this particular group is to find a better job opportunities and living environment, when a region or an industry position is not suitable for its development, different from the root Of the local people, their scruples less, the urgency is also strong, often choose to quickly move to more suitable for their own position, and most of the work of the simple so that they can quickly adapt to another post. According to the survey, migrant workers in a unit of work for more than three years accounted for only 20% to 30%. This leads to difficulties in the employment of migrant workers, insured rate is low. On the one hand, for the migrant workers themselves, they are unlikely to be in a place to pay the number of years, and migrant workers social security relations inconvenient transfer, regional coordination is low, resulting in units and individuals insured the enthusiasm is not high, surrender The situation increased [4]. On the other hand, for the national management, the current social insurance management in China is very low degree of socialization, but also the lack of a guarantee that social security relations can be transferred between urban and rural areas, regional management mechanism. Even in the area of a county or city, but also because of migrant workers temporarily unemployed or frequent changes in the work, so that the social security departments face cumbersome procedures and struggling to cope with the high cost of management. At the same time, due to the differences in individual and group of migrant workers are very large, but also more difficult to implement a unified security model, but also to the labor and social security departments to determine the basis of funding and supervision of law enforcement and other difficulties.

The legal system is not perfect, coverage is not enough

At the beginning of the founding of the country to adapt to the industrialization of the line and supporting the introduction of a series of urban and rural division of the social system, although with the rapid development of reform and opening up, the development of market economy, urban and rural integration process accelerated, urban and rural differences are far away and down The But the household registration system, labor and employment system as the symbol of urban and rural segmentation situation is still deeply rooted. Many of the current social rights are based on the citizens' household registration. Has become an important part of the community of migrant workers in rural areas and between the city, the basic exclusion in the work of the social system outside the place, which also led to the emergence of social forms of "ternary social structure" [5].

In the case of medical insurance, urban workers enjoy a subsidized medical insurance system. Local farmers enjoy a new cooperative medical system with weak support ability, but the vast majority of migrant workers have become fully self-financed medical groups. Although the management has undergone some reforms, it can’t be changed immediately, so that the vast majority of migrant workers are still excluded from the safeguards system.

At present, many cities to implement the medical insurance policy of migrant workers is the object of employment with the employer to establish a labor contract relationship between migrant workers, such as Beijing, Xiamen, Shen Zhen and so on. However, many migrant workers are engaged in temporary work or working in private workshops. They rarely sign labor contracts. In addition, some people are mostly rural women without knowledge. They follow their families and do not participate in formal work. Obviously their rights can’t be guaranteed. Shanghai allows non-employment units to participate in comprehensive social insurance coverage, covering more than other models, but in the domestic service, agricultural labor and the introduction of personnel through the introduction of personnel is still excluded [6]. And Shanghai's comprehensive insurance does not take into account the current migrant workers within the emergence of different groups, the lack of flexibility in the design of the system can’t meet the different levels of social insurance needs, migrant workers in the insured there is no choice, affecting their insured.

At present, around the design of migrant workers in the medical insurance system to take the general practice of maintaining the disease does not protect the clinic, and rarely involved in migrant workers health care related issues. Due to the
complexity of the composition of migrant workers, high risk of building workers in the construction of migrant workers suffering from serious illness risk, protect the disease is conducive to this group. But the clinic is undoubtedly the most important medical problem in relation to those engaged in the tertiary industry or engaged in knowledge work. Therefore, the current system of B & B does not protect the outpatient service, and it can’t meet the different levels of migrant workers.

Social security co-ordination is small

The scope of co-ordination is too small and the level is too low is a serious obstacle to the development of social security. At present, most provinces are basically within the scope of the city and county, and there is no realization of provincial co-ordination. It is also difficult to achieve national co-ordination on the existing basis. This not only hinders the smooth expansion of social insurance for migrant workers, but also in the export of migrant workers and the input between the cause of many contradictions, resulting in a lot of unreasonable phenomenon.

Rural migrant workers have a strong liquidity, most of the year most of the time spent in the workplace. The new rural cooperative practice is the county-level co-ordination, fixed-point medical institutions are mainly distributed in the county. This leads to the fact that if migrant workers participate in the new rural cooperative medical system, once they are sick, they will need to return to their place of residence for medical treatment or first seek medical treatment, and the medical expenses will be reimbursed after rehabilitation[7].

Medical insurance is difficult to achieve off-site settlement. China has not yet developed a unified social security system for migrant workers, the existing urban health care system, whether the new rural cooperative system or migrant workers to the medical security system, are in the "territoriality principle" under the implementation of the territory Management, each region in accordance with their actual situation to develop policies to manage the local financial do not want to have no obligation to go to the outflow of the health insurance system "fill in the blank", which resulted in a large mobility of migrant workers in the basic medical treatment Circumstances, even if the medical security has been handled, but to go to the remote can’t directly enjoy the medical security services [2].

MEDICAL INSURANCE FOR MIGRANT WORKERS
Raise awareness and enhance the awareness of migrant workers

As the idea of migrant workers is conservative, the overall quality is relatively low, the awareness of protection is weak, little is known about the social insurance policy, and a large proportion of people are concerned only with the importance of doing social insurance. Insurance lack of confidence, vague understanding, fear of policy changes in the future will not be honored. Enterprises are obliged to pay various social insurance premiums for migrant workers because they are required to pay for the participation of migrant workers in social insurance. In the process of establishing and perfecting the social insurance system of migrant workers, it is necessary to enhance the awareness of enterprises and migrant workers to realize that the participation of migrant workers in social insurance is a key to reduce labor disputes and improve employment relations, The establishment of migrant workers social security is conducive to maintaining the employment of migrant workers in the labor relationship between the harmonious and enterprise development and long-term interests to maximize: At the same time, migrant workers social insurance system to establish and improve the enterprise and migrant workers In order to disperse the various risks of labor and employment.

Establish a personal account for the transfer of migrant workers

The establishment of unified national social security individual account, and to ensure that it can be transferred across the country. When the migrant workers flow, the individual account with the transfer into the new city, according to the new city into the standard through the conversion into the local migrant workers medical insurance personal account. In the calculation of the insured time, the local mutual recognition of the insured time. The same form of protection in the transfer between different regions, should maintain the continuous calculation of the insured time. Such as Zhenjiang, return home migrant workers in the field to participate in urban workers medical insurance, back to the town to continue to participate in the unified management of basic health insurance, health insurance relationship between the implementation of barrier-free transfer, in the field bowling and bowling can be calculated continuously.

To improve social health care coverage

On the whole, due to the particularity of migrant workers, it is impossible to establish a unified social security system, but rather targeted, from the urgent need to solve the problem, from point to surface, and gradually establish a sound migrant workers Social security system. As the constraints faced by each migrant workers are not the same, their economic capacity is not the same, so the demand for social health care system is not necessarily the same. Therefore, in the process of evolution of migrant workers According to their different needs, through the classification, hierarchical way to provide them with different
protection, the establishment of suitable for migrant workers characteristics of the social insurance system, to build a separate from the enterprises and institutions, the diversification of funding sources, security system standardization, Management services socialized social security system [8].

**To improve the overall level, to encourage migrant workers at the same time insured**

Although the province, autonomous region and municipality directly under the central government as the social security (pension, medical, unemployment) co-ordinate units, but in fact most provinces still remain in the county and city level, leading to the transfer of social insurance is difficult, difficult convergence. Some areas artificially set up policy barriers to protect local interests, such as the promulgation of policies, and do not accept medical insurance procedures for those who do not have permanent residence from other cities. Because the region for migrant workers health insurance co-ordination of the higher part of the overall level of migrant workers if the lower, will increase the financial burden of the region. To this end, the establishment of migrant workers should be the provincial medical insurance co-ordination, so that the co-ordination fund in the province within the swap, migrant workers can solve the flow of medical insurance funds, archives and other transfer problems, ease the region, industry, business The contradiction between the uneven costs, but also enhance the fund to resist a wide range risk and the ability of emergencies [9].

In addition, the government should encourage migrant workers to participate in urban social health insurance while participating in new rural cooperative medical care [10]. The coexistence of the two systems needs to take into account the issue of reimbursement quota control, that is, how to ensure that the beneficiaries receive compensation that does not exceed the actual medical use. Can be taken to "repeat compensation, the total does not exceed" principle to pay compensation. This area has done a useful exploration of Zhenjiang, the provisions of the local residents to participate in basic medical insurance or "new rural cooperative", back to the town and then participate in local medical insurance, medical insurance in accordance with the provisions of the medical expenses, the first reimbursement in the field costs , And then hold the relevant reimbursement vouchers and medical expenses split single, according to the city medical expenses reimbursement requirements settlement; can also be in the city according to the provisions of reimbursement costs, and then hold the relevant reimbursement vouchers and medical expenses split single home Reimbursement.

**Perfect the legal system of social security for migrant workers**

System is the most fundamental protection, from the chapter system to start, the establishment of migrant workers to implement long-term protection of the new mechanism. The social insurance system of the migrant workers is not perfect, and the important reason is that the legislation of social insurance for migrant workers is lagging behind. We construct the authoritative and normative laws and regulations, and make clear from the law. Social insurance rights and obligations, to establish the legal status of migrant workers to participate in social insurance in order to enable migrant workers to participate in social insurance law, to protect the social insurance interests of migrant workers according to law. Only to a strong law to do backing to ensure that migrant workers social insurance issues have rules to speed up the migrant workers social insurance system to establish a sound, in the construction of individual laws and regulations at the same time, should encourage and promote local governments According to the local practice to develop specific methods and a series of supporting reform measures, and to strengthen the legal rights and interests of migrant workers supervision [10].

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