

# Report on Bachelor / Master Thesis

Institute of Economic Studies, Faculty of Social Sciences, Charles University in Prague

<b>Student:</b>	Petra Kučová
<b>Advisor:</b>	Henrieta Tulejová
<b>Title of the thesis:</b>	Behavioral Economics and Motivating Insurees to Take Care about their Health – The case of hemodialysis patients

## **OVERALL ASSESSMENT** (provided in English, Czech, or Slovak):

Health care systems around the world are striving with problem of increasing burden of chronic diseases. Due to scarcity of resources we must look for the measures to increase efficiency of health systems both on the side of health care providers as patients. Self care and good life style of patients are important part of stabilizing chronic diseases and thus decreasing health care costs.

Health economists are more often looking at the behavioral economics findings and try to implement them in the context of health systems.

Thus, the topic chosen by the student is very up to date. In Czech republic it is probably the first comprehensive assessment of adherence four different aspects (attendance, medication, fluids, diet) of treatment of heamodialysis patients in Czech republic and the proposal to incentive program. Such incentive or wellness programs are used in recently developed and implemented disease management programs for chronically ill patients around the world.

The student start with a very comprehensive, thorough and interesting literature review on patient adherence and renal disease. She did very good analytical work in defining necessary terminology and categories that she then studied in the qualitative research based on questionnaires from patients with renal disease. The student also benefited from the cooperation and practical experience with employees of health care provider of hemodialysis.

This thesis fills in the gap in the empirical research in the Czech Republic. The major contribution is the assessment of non-adhering aspects of treatment, their prevalence and the factors influencing it in Czech context which is differing from other countries. There are some interesting questions that were not answered:

1. How do you interpret that model for explaining fluid nonadherence proved to be poorer compared to other variables (p. 56)? Is it because fluid adherence was identified as the most difficult one?
2. If there is no correlation of fluid intake with any patient or treatment characteristics, does it not mean that it is universal problem for all patients and it is embodied in the design of health care provision? Health care system is used to providing health services but is poor in providing counseling regarding behavioral change that is necessary for improved health status.

In the discussion part the student tried to propose the interventions focused on increasing adherence. This is the part that would deserve more elaboration, including estimation of potential savings and implementation and administration costs both on the part of health care providers as health insurance companies.

3. For the part of presentation, could you please explain how could such interventions work within the cooperation between health care providers and health insurance companies, e.g. saving sharing model.

# Report on Bachelor / Master Thesis

Institute of Economic Studies, Faculty of Social Sciences, Charles University in Prague

<b>Student:</b>	Petra Kučová
<b>Advisor:</b>	Henrieta Tulejová
<b>Title of the thesis:</b>	Behavioral Economics and Motivating Insurees to Take Care about their Health – The case of hemodialysis patients

The thesis is written in very good academic English. Thesis is very well structured and very easy to read. Tables are well prepared and support the ideas in the thesis.

**Overall, I consider this diploma thesis of high quality and recommend it for the “odměna děkana”.**

## **SUMMARY OF POINTS AWARDED** (for details, see below):

<b>CATEGORY</b>	<b>POINTS</b>
<i>Literature</i> (max. 20 points)	20
<i>Methods</i> (max. 30 points)	29
<i>Contribution</i> (max. 30 points)	29
<i>Manuscript Form</i> (max. 20 points)	20
<b>TOTAL POINTS</b> (max. 100 points)	<b>98</b>
<b>GRADE</b> (1 – 2 – 3 – 4)	<b>1</b>

**NAME OF THE REFEREE:**

**DATE OF EVALUATION: 17.9.2014**

---

**Referee Signature**

