



PERCEPTIONS OF SAUDI PEOPLE ON HEALTH INSURANCE IN SAUDI ARABIA: AN EMPIRICAL STUDY

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ABSTRACT

The aim of the present study is to understand the practices taking place in the Kingdom of Saudi Arabia (KSA) in terms of Health Insurance Programs implemented and used. The research survey has conducted on 400 Saudi people working in different government sectors in Riyadh city by usage of Likert scale questionnaire to find out perception outcomes on Health Insurances. The empirical study purely based on primary data and participants were from different parts of the capital city Riyadh. The questionnaire designed by the researcher in current perspective of Health Insurance implementation by Saudi government and challenges faced by Saudi People. The results of the study significantly show that most of the Saudi People perception is positive about the Health Insurance Program in Saudi Arabia.

KEYWORDS : Health Insurance, Perception.

INTRODUCTION

Insurance is an economic device in terms of providing social security and finances the risk to a common person of the society. It also gives the sense of security to the people of the society in their unpleasant happenings in term of monetary protection and benefits. The concept of life insurance across the world is to share the risks and promotes the thrift of saving and investment. The traditional theory of life insurance was based on security and savings, while the modern theory gave us one new concept of investment with return and death benefits to the beneficiary, in case of breadwinner, dies. Health Insurance provides monetary help and decreases the burden of medical expenses of the insured in their health uncertainties. An insured buys the health insurance policy with a promise to pay both medical inpatient and outpatient medical expenses to the hospital on the insured sickness by the insurers. Health Insurance assures the insured, if he gets ill, he will be benefitted and protected by the Health Insurance Provider in terms of medical expenses. However, it is considered as an intangible product and piece of paper with promises to insured according to terms and condition of health insurance policy. Some people prefer to take health insurance, whereas some do not prefer, due to poor awareness about the insurance in Saudi Arabia.

The burning issue is raising the cost of healthcare globally leads to rising in premium prices of Health Insurance Program. The insurer faces challenges to provide cost-effective health insurance products to the insured, in the era of throat cut competitions to retain their market share in the insurance sector in Saudi Arabia. The main objectives of health insurance products are to provide comprehensive coverage to insured in exchange of a small amount of premium that result in improved health status with the achievement of equity and efficiency within limits of political feasibility. To achieve these objectives, most of the countries across the world are designing economic policy and taking major steps to reform of their healthcare systems with the alignment of health insurance sector simultaneously. To providing affordable healthcare system in the country can be seen as disagreeing with the objective of providing high-quality healthcare system to the Saudi people (Koornneef, Robben, Al Seiari, & Al Siksek, 2012). The dearth of a global agreement on the health reform due to wide diversities among countries people's lifestyles, patterns of culture, religion

etiquettes, inherent social values, demographic conditions, socio-economic developments, the complexity of designing and implementation of health reforms (Saltman & Figueras, 1998).

The Health Insurance System is publicly financed in Saudi Arabia aimed towards achieving the equality by promoting free access of healthcare services to Saudi people. The primary reason to provide free access to the people is based on the belief that healthcare is the individual right of the Saudi peoples, aimed towards promoting the proper health care for the Saudi peoples. However, people are attracted towards the health insurance by the insurance agencies. The efforts made by the Saudi government in the health insurance have significantly increased recently. The people also remain the concern due to rising health care costs and long waiting lists. These issues act as the obstacles for the government towards creating a public healthcare system. Therefore, people sometimes rate the healthcare services negatively.

The Kingdom of Saudi Arabia is considered as a developed country having high per capita income and a landmass of more than 2,149,690 sq. km in 2016 according to World Bank and population is approximately 32.6 million according to latest figure. Two research articles presented by Bawazir et al. (2013) and Aldosari et al. (2014) stated that since the discovery of oil in Saudi Arabia, the lifestyle of Saudi Arabia has significantly improved along with the service delivery methods. The healthcare services have also improved in Saudi Arabia since the development in the country.

Health care Services are provided by Public Sector and health insurance services provided by Private Sector in Saudi Arabia. The provision of Healthcare Services in Saudi Arabia depends on providing Public Healthcare with the help of Ministry of Health (MOH) (Alharbi & Qasim, 2017). MOH receives fund from the government. It is believed that MOH runs approximately 60% of the Primary Healthcare Centers and Hospitals (Bawazir et al., 2013; Aldosari et al., 2014). Recently efforts are seen by the body towards improving healthcare services within the allocated budget which was 7% of the total budget in 2014 (Alnehmer, 2018). Alissa (2016) stated that the reason of success behind KSA Healthcare System lies investing a significant amount by the Saudi government. Therefore, it can be said that Healthcare Services in Saudi Arabia have significantly increased and high level of financing is also received by MOH.

The challenges faced by insurance companies in Saudi Arabia include rapid demographic changes, increasing population, growing lifestyle, rising costs of healthcare and changing perceptions of the people (Saeed, n.d.; Saad & Mohammed, 2015). The current situation looks unsustainable especially in the longer terms because of the fluctuating oil prices. Therefore, sustainability of the current healthcare financing system is questioned by the people and international health organizations such as WHO (Alissa, 2016; Alkhamis, 2017). To reduce the financial burden, the government has implemented a health insurance program named as Compulsory Employment-Based Health Insurance (CEBHI). The centre is responsible for covering all the private sector employees and the funding is received by the employees. The same insurance program is needed to be expanded to all the parts of Saudi Arabia.

The research findings of Sommers et al. (2017) showed that people all around the world, rate health insurance programs positively by assessing services provided to them. They found that people preferred to take the health insurance programs if they found that services provided to them are adequate in perspective to the investments demanded by the providers. Health Insurance has received a lot of attention in the last few years and the numbers of insurance programs have significantly increased in the last few years.

It is necessary that insurance programs developed by the government are according to the perceptions of the people because the insurance programs cannot be sold at higher prices as argued by various scholars (Bawazir et al., 2013; Aldosari et al., 2014; Saeed, n.d.). According to the Report of WHO, Healthcare Department presented that the KSA is ranked as 26th best in the world. The strategies used by the government are good. However, the cost associated with improving healthcare is also high and needs revision (AlNehmer, 2018).

STATEMENT OF THE PROBLEM

The present research aims to investigate the perceptions of the Saudi people on the health insurance programs developed by the government and willingness of people to take them. This investigation will help in understanding the perceptions of Saudi people related to services provided to them and its contribution towards healthcare. The study will act as the one evaluating the acceptability and feasibility of the healthcare reforms taking place in the KSA and in particular the health insurance platform currently present in the country by taking perceptions of Saudi people. The study contributes to the insurance category of the health insurance and public preferences towards the financing of healthcare. The obtained results from the study will help the insurers and Insurance Actuary to design best insurance products with a cost-effective premium for the Saudi people.

OBJECTIVES OF THE STUDY

- To know and evaluate the perceptions of Saudi people about the Health Insurance present in the society of Saudi Arabia.
- To know the strengths and weaknesses of Insurance programs currently operated in Saudi Arabia.

REVIEW OF RELATED LITERATURE

The aim of the literature review is to understand the Health Insurance Programs and its impact on the countries. The healthcare activities are considered the most important for the well-being of the people and insurance programs are developed to provide for insureds. The health of the children and adults both are covered in good insurance schemes because both can face health problems. The evidence is present in abundant numbers related to health insurance programs and their role in improving finances. One of the most important evidence comes from the research of Gruber (2017) who carried out investigation in the United States. The findings showed that people prefer to take insurance because it enhance thrift of financial savings and significant savings take place due to insurance programs. The research carried out by Sommers et al., (2017) concluded that health insurance programs help the people to cover the expenses for the operations, which are significantly high in case they don't take the insurance. The findings of Pounkanta & Suphanchaimat (2017) and Apriyanti (2017) have also revealed similar findings, showing that insurance reduces bills significantly at the time of treatments. The medical insurance programs are also preferred because a person cannot estimate the costs of the health expenses and sometimes all the savings drain into the medical expenses.

According to Gruber (2017) and Apriyanti (2017), the policymakers sometimes value Health Insurance as an important component of the social safety, which has a positive impact on the low-income population. Several observational studies have reported that insurance coverage expansion is associated with the higher rates to have the health caring source and to afford the needed care (Apriyanti, 2017). However, the arguments presented by Gruber (2017) go with the statement that insurance coverage should be aimed to provide the care by addressing the factors of healthcare associated with the better healthcare outcomes. The research study carried out by Kim et al. (2017) showed that coverage expansion is mostly not addressed by the health insurance companies especially in Korea, which resulted in poor accessibility and dissatisfaction related to taking insurance programs.

Various studies have stated that coverage expansion should increase by keeping in consideration primary care, more ambulance care visits and providing better medication for the healthcare (Gruber, 2017; Sommers et al., 2017; Apriyanti, 2017). The authors of the presented studies have also argued that people will prefer to take insurance programs if the coverage expansion takes place regularly. The evidence related to increasing the coverage increases accessibility is also present in high numbers. If the distance between the insured hospital and home is reduced, the chances of improved healthcare will significantly increase. The findings of Nghiem et al. (2018) showed that people in high-income countries have started to take health

insurance because it provides them services in increased numbers now. Moreover, the insurance covered common tests required for diabetes, HIV, hypercholesterolemia and other diseases.

The connection between the health outcomes and the ways people perceive the health insurance services vary significantly among the scholars. The research article presented by Nghiem et al. (2018) tried to investigate the importance of coverage with respect to the patients suffering from the chronic diseases who require urgent help in case of the heart attacks. On the basis of the research findings, the authors argued that coverage has a major impact on the perceptions of the people to take the insurance, especially patients suffering from chronic healthcare problems. The research findings of other authors have also presented the same argument by writing that expanding the medical aid should not only be the focus of the insurance providers; they must include a significant number of hospitals in the coverage (Joo et al., 2017).

Poungkanta & Suphanchaimat (2017) concluded that insurance has a major impact on the treatment of patients, due to which people prefer to take the services of the insurance. Arguing with the statement, the research findings of Sommers et al. (2017) showed that coverage expansion results in improved healthcare and timely treatment in case of emergencies. Based on the above arguments, an opinion can be presented that people should take the services of insurance providers because it will have a significant impact on the treatment. The studies in the context of other diseases such as asthma, kidney related diseases and heart failure demand more investigation before findings can be reported. Some studies have reported that people willing to take the health insurance services have shown that increasing the coverage will improve regular caring activities (Apriyanti, 2017). Overall, the arguments presented don't show access to the regular care especially for the treatment of chronic diseases. Therefore the condition to take the services of insurance providers remains ambiguous with respect to increasing diseases, population and delivery systems.

Joo et al. (2017) argued that Health Insurance is considered an important mechanism, which helped people in improving healthcare activities. The findings of Kim et al., (2017) go with the argument that most of the insurance programs are based on serving poor people. However not all the insurance programs are cheap. Moreover, the insurance programs will not be bought by the people, if they are expensive and unaffordable for the people. The argument is presented by many studies which stated that cost is an important factor in insurance programs, which affect people's perceptions.

There are many reasons for buying insurance programs, which impacted on the choices of people to buy insurance. The findings of Mitra et al. (2017) stated that some people don't buy insurance because they feel that it is a waste of money and the investment will never help them. Another article which supported the statement of Gaudette et al. (2017) who stated that some people have a mindset of not buying the insurance or they will opt for the least expensive. Therefore, efforts of insurance programs will not be able to attract these types of people no matter what they do.

One of the advantages of the insurance program is reported by Prinja et al. (2017) stated that insurance programs provided in the developed countries are available in significantly lower costs, which is the reason people take them seriously and buy them. The argument is supported by Chung et al. (2017) who wrote that people preferred to take insurance because they knew that they will not be able to cover the expenses if the disease is of high complexity. People knew that insurance is beneficial but it is not preferred by the people if the services provided are low as compared to the expenses. An example is presented by Prinja et al. (2017) on the argument why people preferred to buy the insurance. When a person visits a clinic without insurance the cost of the visit was approximately \$109 reported by one of the respondents. However, when they visited the clinic after taking the insurance, the cost significantly decreased to \$60. Insurance is good in some cases because it provides the peace of mind by covering all the expenses of health issues. Additionally, insurance also decreases depression when a person is not having required money for the treatment.

HYPOTHESES

The study attempts to prove the following hypotheses formulated on the basis of literature review and findings from the earlier researches, related to the present study.

1. Saudi people working in government sectors are aware about the Health Insurance Policy and having it.
2. Saudi People are satisfied with the quality of Health Insurance and willing to take the Health Insurance.

RESEARCH METHODOLOGY

The present study has selected quantitative methods for the collection of primary data and research design used in the study is to conduct a survey and presenting the results by making use of the Tables. The target population in this study was 400 Saudi people working in different government sectors and living in Riyadh, Saudi Arabia. The data was collected by using a questionnaire, which was based on five-point Likert scale. The study was conducted by contacting Saudi working people in the city randomly by meeting them on various locations. However, the results can be used for consideration in other cities of Saudi Arabia. The study lies in the context of health insurance and how people support health insurance opportunities provided to them in the country. The purpose of the study is to present the role of Health Insurance in Saudi Arabia according to the people perceptions.

DATA ANALYSIS AND INTERPRETATION

There are 9 questions inquired from 400 respondents and results are compiled and presented in the following tables.

Table 1: Awareness about Health Insurance

Research Question ₁ = Are you aware about Health Insurance?			
S.No.	Response	Frequency (N=400)	Percentage (%)
1.	Yes	340	85
2.	No	60	15
Total		400	100

Table-1 shows that 85% people in Riyadh, KSA are aware about Health Insurance and only 15% people are not aware about Health Insurance.

Table-2: Availability of Health Insurance Policy

Research Question ₂ = Do you have Health Insurance Policy?			
S.No.	Response	Frequency (N=400)	Percentage (%)
1.	Yes	240	60
2.	No	160	40
Total		400	100

Table-2 depicts that majority of the people (60%) has Health Insurance Policy in Riyadh, KSA.

Table 3: Easy Availability of Health Insurance Services

Research Question ₃ = Are Health insurance services available easily?			
S. No.	Response	Frequency (N=400)	Percentage (%)
1.	Strongly Agree	132	33
2.	Agree	72	18
3.	Neither Agree nor Disagree	48	12
4.	Disagree	76	19
5.	Strongly Disagree	72	18
Total		400	100

Table-3 reveals that 51% (33+18) of the respondents agreed that Health Insurance Services are easily available in the country because Health Insurance Programs are increasing with the rapid pace in the country.

Table 4: Serving people of all ages by Health Insurance

Research Question₄ = Do Insurance Programs serve people of all ages effectively?			
S.No.	Response	Frequency	Percentage
1.	Strongly Agree	144	36
2.	Agree	72	18
3.	Neither Agree nor Disagree	32	8
4.	Disagree	120	30
5.	Strongly Disagree	32	8
Total		400	100

From Table-4, the responses received from the fourth question indicates that Saudi Arabian people get the Insurance Programs in high numbers and people of all age groups get the support by Health Insurance Providers. Not only young people get it the insurance programs are developed in high numbers for the old people also.

Table-4 also shows that 54% (36+18) of the respondents agreed that people of all ages in KSA could make use of the Health insurance programs. Only, 38% of the population reacted negatively and most of the population who reacted negatively belonged to the young population.

Table 5: Covering treatment of major diseases by Health Insurance

Research Question₅ = Do Insurance Programs cover treatment of major diseases?			
S.No.	Response	Frequency	Percentage
1.	Strongly Agree	56	14
2.	Agree	96	24
3.	Neither Agree nor Disagree	96	24
4.	Disagree	80	20
5.	Strongly Disagree	72	18
Total		400	100

Table-5 depicts that the responses received show mixed responses because some people supported the coverage of the Health insurance programs, whereas some of them went against it. Moreover, the responses received indicate that coverage of Health Insurance is needed to be increased in some areas, where responses received were negative. Still, the improvements in the healthcare services can be improved upon by increasing coverage areas and by the development of more Health Insurance Service Centers. Moreover, insurance provisions should cover urban and rural areas both, because people all around the country need health services.

Table 6: Coverage of all types of healthcare activities by Health Insurance

Research Question₆ = Does Health insurance cover all types of healthcare activities?			
S.No.	Response	Frequency	Percentage (%)
1.	Strongly Agree	72	18
2.	Agree	152	38
3.	Neither Agree nor Disagree	88	22
4.	Disagree	40	10
5.	Strongly Disagree	48	12
Total		400	100%

From Table-6, the responses received from the above question indicated that people are aware of the healthcare activities, which are taking place in high numbers in the country. 56% of the respondents were agreed with the statement that healthcare activities in Saudi Arabia in terms of insurance activities go in the favor of the activities and efforts made by the Insurance Providers in the country. The responses received indicate that healthcare activities in Saudi Arabia are improving and people in the country also support the developments.

Table 7: High Tech Hospitals are under the panel of Health Insurance

Research Question₇ = Are Hospitals in Insurance Programs supported by High Technology?			
S.No.	Response	Frequency	Percentage
1.	Strongly Agree	40	10
2.	Agree	128	32
3.	Neither Agree nor Disagree	64	16
4.	Disagree	88	22
5.	Strongly Disagree	80	20
Total		400	100%

Table-7 shows that 42% (10+32) of the respondents supported the developments in the hospitals in terms of technology and 42% did not. If the arguments in terms of development are needed to be analyzed, it can be said that suggestions of people who responded negatively should be taken and applied in hospitals, if found valid. The responses received from the questionnaire presented various arguments. First, it can be said that Healthcare Services in the country are improving, because of which, many people in the country are found supporting the argument that healthcare activities in the KSA are good and in support of the developments.

Table 8: Satisfaction with the Quality of Health Insurance

Research Question₈ = Is the Quality of Health Insurance satisfactory?			
S.No.	Response	Frequency	Percentage
1.	Strongly Agree	224	56
2.	Agree	88	22
3.	Neither Agree nor Disagree	0	0
4.	Disagree	32	8
5.	Strongly Disagree	56	14
Total		400	100

From Table-8, the responses received show that people are extremely satisfied with the Health Insurance provided to them. More than 70% of respondents provided positive feedback and based on which, it can be said that people in the country are happy with the efforts of Health Insurance Providers. The quality of the Health Insurance can be further improved by increasing accessibility because the respondents opined negative on the Healthcare accessibility platforms.

Table-9: Willingness of People to take Health Insurance

Research Question₉ = Are you willing to take Health Insurance?			
S. No.	Response	Frequency	Percentage
1.	Strongly Agree	48	12
2.	Agree	192	48
3.	Neither Agree nor Disagree	0	0
4.	Disagree	104	26
5.	Strongly Disagree	56	14
Total		400	100%

Table-9 depicts that the responses received to show that most of the people in Saudi Arabia are willing to take the services of Health Insurance Programs because they found it adequate and support the development of the Health Insurance Service in high numbers. Furthermore, 60% of the respondents agreed that Health Insurance Providers work with good efforts, because of which, people are willing to participate in the health insurance programs produced in the country. Based on the arguments, it can be said that people in Riyadh, KSA enjoy Health Insurance in high numbers.

CONCLUSION

Health Insurance Programs must be developed by any country adequately in high numbers of presentation, so that accessibility becomes easy to the people. Overall, the results are obtained in favor of Saudi government, because Health Insurance Programs are being developed in the country at a rapid pace. The efforts produced by the Saudi Arabian government are great and supporting the infrastructure development in Healthcare and health insurance program. Healthcare costs in Saudi Arabia are rated high, because of that the insurance programs in the country are considered very important and significantly implemented.

Most of the Saudi people are aware about Health Insurance and are also having Health Insurance Policy in Riyadh, KSA. Health Insurance Services are easily available in the country. The people of all age groups get the support by Health Insurance Providers in terms of in-patient and out-patient medical coverage except those are not interested in Insurance any programs. The respondent also indicates that healthcare activities in Saudi Arabia are improving and insurance program contributes in country's Gross Domestic Product (GDP) and healthcare infrastructure development. However, the conclusion can be drawn from the findings is that the development of the Health Insurance Programs are taking place in high numbers significantly and Healthcare professional are spreading awareness through advertisement and publicity in the country.

Furthermore, majority of the people are extremely satisfied with the Health Insurance providers while, most of the people in Saudi Arabia are willing to take the services of Health Insurance Programs to transfer of medical risk from their shoulders to the insurers. It is concluded that, the insurance is a legal contract and controlled by Saudi Arabian Monetary Agency (SAMA). All the insurance providers work satisfactory with good efforts under the purview of SAMA guidelines, that protected to the insured and being a reason of that, the people are willing to participate in the health insurance programs. The hypothesis of the research study is proved positively.

The researcher collected the data from the respondents present in one city of the KSA only i.e. Riyadh. Therefore, future studies should incorporate more cities in the investigation. The study was limited to find out the responses by using the method of the survey; future studies should conduct long interviews so that more weaknesses can be identified. The future studies should compare healthcare activities of various insurance providers by comparing different companies and their efforts. Future studies should investigate why people want to or don't want to take the insurance programs by making use of interview approach. The further comparative study is required by the scholar on Health Insurance programs between Rural and Urban areas in Saudi Arabia.

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