

摘要：在“健康中国”国家战略的大背景下，人民群众的健康问题广受关注。

2009 年国家开始新一轮医疗体制改革，改革重点之一就是推进分级诊疗制度建设。为实现分级诊疗，有必要了解现阶段居民的就医选择。本文以 h 县为例，探究目前居民就医行为选择的差异性。具体而言，本文通过对 h 县居民进行问卷调查，得到居民就医选择行为数据，利用 spss 软件进行数据分析，结果发现：（一）医院条件、经济费用因素和疾病严重程度三大类因素对居民就医行为会产生较大影响，而医院技术水平、便利程度、服务水平及人际关系等四大类因素对居民就医行为影响较小。（二）性别、年龄、家庭月收入、门诊经历、自诊健康状况、慢性病史、婚姻状况和子女状况等 8 项内容不会显著影响居民对医院的选择，而拥有城市户口、学历更高、拥有住院经历、在医疗上花费费用越高以及拥有体检经历，具备这些特性的人会更多选择大医院。基于此，本文提出：政府应该增强对差异化医保支付方式改革的推动，推动医联体建设，基层医疗机构应该更充分利用自己的便利性和熟悉感，留住病人。

关键词：就医行为；影响因素；分级诊疗

Abstract: In the context of the "Healthy China" national strategy, people's health issues have received widespread attention. In 2009, the country began a new round of medical system reform. One of the reform priorities is to promote the construction of a hierarchical diagnosis and treatment system. In order to achieve graded diagnosis and treatment, it is necessary to understand the residents' medical treatment options at this stage. This article uses h county as an example to explore the differences in current residents' choice of medical treatment. Specifically, in this paper, by conducting a questionnaire survey of residents in county h, we obtained data on residents' choice of medical treatment, and analyzed the data with spss software. The results found that: (1) three types of factors affecting the residents: hospital conditions, economic cost factors, and disease severity The medical treatment behavior will have a greater impact, and the four major factors of the hospital's technical level, convenience, service level and interpersonal relationships have a small impact on residents' medical treatment behavior. (2) 8 items including gender, age, monthly family income, outpatient experience, self-diagnosed health status, chronic medical history, marital status, and child status will not significantly affect residents' choice of hospitals, but they have urban household registration, higher education, People with hospitalization experience, higher medical expenses and medical examination experience will have more choices in large hospitals. Based on this, this paper proposes that the government should strengthen the promotion of the reform of differentiated medical insurance payment methods and promote the construction of medical unions. Primary medical institutions should make fuller use of their convenience and familiarity to retain patients.

Keywords: medical behavior; influencing factors; graded diagnosis and treatment

1.选题及意义

1.1 研究背景

习近平总书记说：我们始终要把人民群众的身体健康和生命安全放在第一位。身体健康是我们进行生产发展的前提，是国家得以延续，人类社会得以发展的前提，因此保障好人民群众的健康，才能实现国家富强，民族振兴，使人民群众拥有获得感，幸福感，安全感。

近二十年来，为了推进医疗卫生改革事业发展，深化医疗卫生改革，国务院共发布了 13 个重大的医疗卫生指导性文件。从仅有城镇职工医疗卫生得到保障发展到全民健康得到保障，我国在医疗卫生体系建设上，成为了以医院，基础医疗卫生机构及专业公共卫生机构等覆盖城乡为主的医疗体系。但是仍然存在诸多问题，例如医疗卫生资源总量不足，质量不高，分布不均，服务体系较为碎片化，以及部分公立医院不合理扩张等问题。

在关于推进分级诊疗制度建设的指导意见（国办发【2015】70 号）中，提出建立分级诊疗，使优质医疗资源的有效下沉，试点地区 30 万以上人口的县至少拥有一所二级甲等综合医院和一所二级甲等中医医院，县域内就诊率提高到90%左右，基本实现大病不出县；基层医疗卫生机构诊疗量占总诊疗量比例明显提升，实现小病不出村。分级诊疗对基层医院及县级医院提出了更高诊疗量，更好的诊疗效果的要求。在村里，县里，哪些要素会对患者的就医选择产生更大的影响，他们选择基层医院和县级医院的情况区别是什么，正是本文研究的问题。

1.2 研究意义

通过对县级人民就医选择的研究，能够了解当下县级人民就医行为的实际状

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