# Strategies of Challenges and Advantages of Implementation for Health Insurance in Saudi Arabia: A Systemic Review 2024

Hail Masad Nafe Alharbi1, Naher Mater Alharbi1, Salem Ghormullah Salem AlGhamdi2, Emad Abdulrahman M Dhahwah3, Fahad Sulaiman Alfaqih4, Nasser Saadi Dhaifallah Alghbewee5, Hamed Saeed Alasmari6, Yasir Salah Alhuwayfi7, Ibrahim Mohammed Alharazi8, FAIZ Abdullah Ahmed AlNebate9, Shakir Khalid Abdullah Al-Sharif10

1senior Hospital Management Specialist, General Directorate Of Health Affairs Of Medina, Saudi Arabia.
2health Administration Specialist, Prince Mishari Bin Saud Hospital In Baljurashi, Saudi Arabia.
3medical Coordinator Medical Coordination And Tratment Eligibility, Material And Children Hospital, Saudi Arabia.
4hospital Health Administration Specialist, Erada Complex And Mental Health Taif, Saudi Arabia.
5senior Specialist-Health Administration, Al Yamamah Hospital, Riyadh Second Health Cluster, Saudi Arabia.
6management Of Health Services And Hospitals Riyadh, Medical Referral Center, Saudi Arabia.
7medical Secretary Technician, Riyadh Medical Referral Center, Saudi Arabia.
8health Administration, Qunfuda. Second Doqa Phc, Saudi Arabia.
9 Health & Hospital Administration, Hera General Hospital, Saudi Arabia.
10 Medical Records Technician, King Abdulaziz Specialist Hospital, Saudi Arabia.

#### **Abstract**

Background: Saudi Arabia's Vision 2030 has taken a center stage in the development of its healthcare sector through Implementation for Health Insurance in Saudi Arabia . since the launch of the ambitious Vision 2030, identifying issues those need to be addressed and steps taken towards provision of Health Insurance in Saudi Arabia. Effective health insurance is defined as a pooling funding function, is a critical tool for obtaining financial security. The term health insurance refers to "a method of dividing the financial risk brought on by the variation in each person's health care costs by pooling costs over time through pre-payment and across people through risk sharing." Health Insurance programs generally aim at enhancing quality of care, promoting patient safety, equitability, accessibility, and feasibility of healthcare services. Aim of this systematically review: To assessment the Challenges and Advantages of the implementation approach for health insurance in Saudi Arabia2024. Method: Online searching engines were using databases to identify relevant articles through the included electronic databases: Google Scholar, PubMed, and Saudi Digital Library (SDL), data extracted from published articles were systematically analyzed for determining the insurance in Saudi Arabia to achieving higher level. Results: Usability and outcome of health insurance in Saudi Arabia are based on Vision 2030. 7 articles were selected that compliant with the theme of this present systematic review. Among the 7 reviewed articles, articles have explained the current financial methods of the healthcare system in Saudi Arabia; articles assess the prospective role of CHI in achieving Vision 2030 goals in the healthcare system. Conclusion: The systematic review of the health insurance in Saudi Arabia embarks on the transformation journey driven by the Saudi Vision 2030 facing the daunting challenges, but it appears that the government has a laid out a roadmap with the legislative framework to begin the health insurance process, however caution must be exercised as these fundamental changes in the implementing health insurance after raising awareness and building a strong healthcare infrastructure in which citizens follow strict regulations, have strong leadership, administrative control, and trained staff, and increase employee job satisfaction. Also, further research could be about the challenges in depth that might be facing health insurance in Saudi Arabia.

Keywords: Strategies, Challenges, Advantages, Implementation, Health Insurance, Saudi Arabia.

#### **Introduction:**

Nations are always attempting to put effective health policies and reforms into place to improve the health and well-being of their citizens. A global understanding of the significance of establishing equitable access to health services and universal health care is developing.[1] Health insurance remains an imperative policy strategy for

The Effectiveness of Implementing Multiple Intelligences Theory and The Six Thinking Hats Approach in Enhancing Academic Performance and Cultivating Critical Thinking Skills Among University Students improving health outcomes at this crucial time, when many countries are pursuing the third Sustainable Development Goal (SDG) of safeguarding healthy lives and promoting well-being for all at all ages.[2] health insurance remains a crucial policy option for improving health outcomes.[3] They are a call to action to end poverty and inequality, protect the planet, and ensure that all people enjoy health, justice, and prosperity."[4]

Healthcare system in Saudi Arabia is well established both in public and private sectors comprising two tiers i.e. primary and secondary care. Primary care has a network of health centers and clinics that provide preventive, prenatal, emergency, and basic services including mobile clinics for remote rural areas. The secondary care comprises hospitals and specialized treatment facilities located in urban areas [5]. In order to cater for healthcare needs in the Kingdom there are three key players i.e. Ministry of Health (MOH), other governmental organizations and the private sector organizations [6]. This system caters for a population of 30 million including 9.7 million expatriates [7]. Saudi Arabia has a largest and fastest growing population in the Gulf Cooperation Countries (GCC) which according to an overview by Colliers International Health (CIH) will reach 38.6 million, including 14.6 million non-Saudis, by 2020 [8]

Previous literature reveals that health insurance reduces the cost of medication and hospitalization, which enables people to obtain better medical care during the treatment of various diseases.[9] Other studies, however, show that insurance does not significantly increase utilization of health services, especially in cases where the insured people would still obtain good medical care in the absence of the insurance.[10] However, the effects work better where the insured are the marginalized.[11] This strengthens the rationale for most countries establishing national health insurance schemes with an objective of assisting the poor to access good-quality healthcare, there was an inevitable need for health care reform to ensure the continuity of providing adequate health care services [12]. The decision-makers decided to transition towards the National Health Insurance model. [13] The first step was taken by the passage of the Council of Cooperative Health Insurance Law in 1999, which established a mandatory health insurance scheme Cooperative Health Insurance (CHI) in 2002 for private sector employees, who were mostly expatriates [14]. The scheme aimed to relieve the financial burden on the public sector by forcing private sector employers who form 67.9% of the workforce in Saudi Arabia to cover health care costs for their Saudi employees (22.3%) and non-Saudis (77.7%). This scheme will push the private sector employees to private health care providers to get their health services [15] By definition, health care services are the medical services provided by health care professionals to treat, protect or promote the health and well-being of the people; it includes hospital care (emergency care, outpatient clinics, admissions, diagnostic measures), primary health care services, physicians and clinical services, dental services; besides home health care, other residential health services prescribing drugs, durable and nondurable medical products [16]

The KSA provides free access to healthcare services through the MOH to both Saudis and non-Saudis working in the government sectors. Furthermore, the KSA provides free health services to the general public, which exorbitantly raises the cost of financing healthcare in the kingdom, exacerbated by the rapid population growth and increased prices of medical technology.[17] Public health provision in Saudi is of high quality; however, it has faced efficiency challenges due to the overwhelmingly large number of people that it caters for.[18] providing a further strain on the healthcare resource envelope.[19] In response, the Saudi government enacted the Cooperative Health Insurance Law. The law aimed at reducing pressure from public health services through forcing private companies to internalize the healthcare expenditures of their expatriate employees, with a compulsory insurance paid by the employers to increase usage of private health facilities.[20]

# Methodology

# Aim of the study:

To assessment the Challenges and Advantages of the implementation approach for health insurance in Saudi Arabia: a systematic review 2024.

# **Study design:**

Systematic reviews using Online searching engines were using databases to identify relevant articles through the included electronic databases: Google Scholar, PubMed, and Saudi Digital Library (SDL), data extracted from published articles were systematically analyzed for determining the insurance in Saudi Arabia to achieving higher level.

## Search strategy:

This systematic review follows the online searching engines were used to identify relevant articles through the included electronic databases: Google Scholar, PubMed, and Saudi Digital Library (SDL). The search terms used were Health insurance, OR The Effectiveness of Implementing Multiple Intelligences Theory and The Six Thinking Hats Approach in Enhancing Academic Performance and Cultivating Critical Thinking Skills Among University Students Health Insurance advantage, OR Health Insurance benefits, OR Health insurance challenges, AND Saudi Arabia, OR KSA, OR SA, AND Saudi Vision, OR Vision 2030. All searches were limited to the English language and to the year 2020 and after. The result of this search would be used to offer a thorough overview of the Strategies of Challenges and Advantages of Implementation for Health Insurance in Saudi Arabia . The number of articles extracted for the research is evaluated based on Preferred Reporting Items for Systematic Reviews.

# **Searches and Data Sources**

A comprehensive search was performed to obtain studies on the Challenges and Advantages of Implementation for Health Insurance in Saudi Arabia. The databases used in the search included ProQuest and Scopus, and the keywords used were 'Strategies', 'Challenges', 'Saudi Arabia', 'Advantages', 'Challenges' 'Implementation'. These keywords were used to find articles with matching terms in their abstracts or titles. To discover the most recent studies and literature on our review topic, the search was limited to articles published between 2020 and 2024.

## **Inclusion criteria**

Studies were included if they met the following: Saudi articles, focusing on health insurance in Saudi Arabia, focusing on issues, Challenges and Advantages of Implementation for Health Insurance in Saudi Arabia, informative and original research articles, published in the last recent 4 years, published in 2020 or after, and in English language.

## **Exclusion Criteria**

Exclusion criteria were studies that not review of the abstract met the inclusion criteria, but on reading the full text were not RCTs or in which the outcomes of Saudi Health care System but not opportunities and Challenges.

#### **Data Extraction**

As this review relies heavily on a prior systematic review that included online articles, the findings could be affected by selection bias. However, efforts were made to collect the necessary information for the appropriate review, explanation, and interpretation of the available literature. Studies were excluded if they investigated health insurance outside Saudi Arabia, review studies, studies were not directly related to health insurance, and studies were excluded if they were published before 2020.

The process of selecting the articles, which are contained in this review .

Presents method used for selecting eligible studies for this review. In the first stage, Pro Quest and Scopus returned 240 articles. After duplicate articles and those published before 2020 were removed, 94 remained. Non-peer-reviewed articles (75) and articles not mainly about health insurance Saudi Arabia, (22) were then excluded. After excluding studies with sample sizes under 80 and response rates under 60%, 7 articles were included in this review.

Table1: Summary of Findings of the Challenges and Advantages of Implementation for Health Insurance in Saudi Arabia.

Author,	Region	Study design	Study aim	Results
Date, Country				
Althabaiti et	Kingdom of	Used data from the	To identify factors	The study revealed that individuals
al	Saudi Arabia	2018 Saudi Family	influencing health	who were employed exhibited a
			insurance	
(2024) [21]			enrollment and its	higher propensity to possess health
		(FHS)		insurance, which comes in line with
			impact on outpatient	the implementation of the initial
			service utilization in	phases of the cooperative health
			the Kingdom of	insurance program in Saudi Arabia.
			Saudi Arabia.	These initial stages entailed
				obligatory enrollment in insurance
				plans for employed individuals in
				the private sector. The study showed
				that the married were more likely to
				have health insurance, which comes
				in congruence with the previous
				study which revealed that being
				married was associated with a
				tenfold increase in the likelihood of
				owning health insurance compared
				to patients who were never married,
				which suggests that marriage may
				encourage insurance ownership due
				to factors like the desire to protect
				children and mitigate the risk of
				catastrophic health care expenses.
				Conclusions
				Policymakers should take more
				targeted measures that address the
				challenges and opportunities
				associated with health insurance
				enrollment and health care service
				utilization. Introducing targeted
25	1	l	l	L

The Effectiveness of Implementing Multiple Intelligences Theory and The Six Thinking Hats Approach in Enhancing Academic Performance and Cultivating Critical Thinking Skills Among University Students

				Among University Students
				interventions oriented toward
				improving health insurance literacy
				and understanding insurance
				benefits for the insured population
				could be helpful to improve the
				current level of health service
				utilization. These measures could
				involve creating a robust education
				campaign and enhancing health
				services accessibility to diverse
				population groups. To guarantee
				every resident has equitable access
				to health care, we strongly suggest
				the development of a health
				insurance program based on a
				different financing solution.
Khalid et al	Saudi Arabia	National	To address the	The insufficient studies have been
(2024) [22]	Suddi i nuoiu	Transformation	potential and risks	conducted on infrastructure and
(2024) [22]		Program (NTP) in	behind the National	people. Following a thorough
		Saudi Arabia.	Transformation	critical review of the literature
		Saudi Alabia.	Program (NTP) in	utilizing the value transformation
			Saudi Arabia	theoretical framework, the most
			through the lens of	cited concern was the sustainability
			the Value	and workforce of the healthcare
			Transformation	system. Furthermore, limited
			Framework.	information is available on how to
				assess the transformation, which
				remains an unaddressed research
				question, according to the literature,
				disagreements among researchers
				and arguments were found on the
				use of best strategies for success in
				NTP.
				Conclusions
				The transformation journey in Saudi
				Arabia could meet several hurdles.
				The planning phase was critical.
				Furthermore, future research should
				incorporate expert consultation and
				more databases and search engines,
				such as Scopus and CINAHL and
				examine the impact of NTP from the
				point of view of medical college
				faculty members, policymakers,
				managers, and leaders
				managors, and readers

Hazazi et al. (2022) [5]	Saudi Arabia	Quantitative and Qualitative	Assesses the attributes of health funding models that support better control of no communicable diseases (NCDs) and perspectives on health insurance as a model from the perspective of patients, clinicians, and managers	Findings indicated concerns that the current health funding mechanism is financially unsustainable and, as a result, there will be a greater reliance on personal health insurance to support government spending on healthcare. Essential elements of any health insurance model to support effective NCD management identified from a review of the literature include the ensuring continuity of care and equity; funding chronic disease prevention interventions; prioritizing primary healthcare; and maintaining the principle of community rating to prevent
			11	
			communicable	insurance to support government
			diseases (NCDs)	spending on healthcare. Essential
			and perspectives on	elements of any health insurance
			health insurance as	model to support effective NCD
			a model from the	management identified from a
			perspective	
			<b>P</b> ,	
			,	
			managers	•
				insurers from discriminating against
				members.
				Conclusions
				The healthcare financing system in
				Saudi Arabia faces challenges
				common to many countries;
				increased costs due to demographic
				changes, inequity, an ageing
				population, an increase in NCDs,
				escalating costs of healthcare
				services, and increased public demand for improved healthcare are
				issues facing the public sector.
				There is concern that existing public
				revenue will not be able to support
				the increased demand under the
				existing largely government-funded
				approach. The proposed solution to
				this is to move to a largely private
				health insurance model, the details
				of which are unclear.

The Effectiveness of Implementing Multiple Intelligences Theory and The Six Thinking Hats Approach in Enhancing Academic Performance and Cultivating Critical Thinking Skills Among University Students

Tobaiqy, et	University of	Medical Center	To assess the	Believed that virtual clinics, using
al	Jeddah (UJ)	In University of	perceptions of staff	primary medical services (clinical
(2023) [23]	Saudi Arabia	Jeddah (UJ)	working at the	examinations, laboratory,
			University of	radiology), organizing scientific
			Jeddah (UJ)	conferences and training courses,
			Medical Center on	and offering consulting services to
			the possibility of	companies would be a potential
			finding new	benefit for the medical centers and
			financing methods	an area of privatization of services.
			for the	Of note, respondents believed that
			administration and	the Revenue Development Project
			privatization of the	would contribute to increasing the
			primary and	employees' income and motivating
			specialized medical	them. That privatizing health
			care services it	services would increase their
			provides	effectiveness, quality, and public
			provides	satisfaction while enabling the
				government to perform its
				constitutional obligations.
				Conclusions
				These studies were satisfied with
				the medical services provided by the
				Medical Center and the potential
				Development Project. However, the
				majority also believed that the UJ
				Medical Center is still being
				prepared for the Revenue
				Development Project at the current
				time. Future work should focus on
				how responsibility is applied and
				upheld in environments where it has
				never been performed.
Puteh et al	Saudi Arabia	Qualitative	To assess	The most considerable issue in the
(2022)			qualitatively the	KSA for the implementation of NHI
[24]			benefits, barriers	is the lack of awareness in Saudi
			and factors	society, lack of rare specialtie and
			associated with	genetic, lack of technical staff, Lack
			implementation of a	of qualified cadres, poor
			national health	understanding of minority
			insurance (NHI) in	population about insurance, and
			Saudi Arabia	weak knowledge about the benefits
				of the healthcare facilities. The
				respondents highlighted that lack of
				qualified national practitioners,
				insurance awareness among Saudi
L	1	<u>l</u>	<u>l</u>	

citizens, price disparities, the number of insurance companies, and the emergence of legal authorities with lack of awareness are potential barriers in the insurance industry. The research in Qassim highlighted that people in KSA are lack of skills and knowledge to adopt the insurance policy. Therefore, it hindered the implementation of NHI in the KSA.

Conclusions

The qualitative analysis produced four themes; Benefits of NHI implementation in KSA, barriers of NHI implementation, reduction of government cost on healthcare, and with factors associated implementation of NHI in KSA. Benefits, Barriers, Factors Future Associated with Implementation of National Health Insurance Qualitatively, to assess the benefits, barriers and factors associated with future implementation of a national health insurance (NHI) in Saudi Arabia. By considering the transcripts and the supporting articles, it examined that the implementation of NHI in the Saudi Arabia is the complicated process and management and ministries should work collaboratively to impose those policies in Saudi Arabia because lack of awareness among Saudi citizens, strong Islamic values that hindered them to accept the policies actively in Saudi Arabia.

				Decomposition of the factors that
Al-Hanawi.	Saudi Arabia	Quantitative.	To investigate and	contribute to this inequality revealed
et al (2021),		Concentration	decompose factors	heterogeneity. Specifically, factors
[25]		indices and	that are associated	that increase the burden amongst the
		concentration	with inequalities in	poor included aged above 60 years,
		curves. Moreover,	relative OOP health	and low levels of education,
		the Wag staff	expenditure,	whereas factors that increase the
		approach was used	estimated as the	burden amongst the rich included
		to decompose the	percentage of	male gender, below the age of 60
		concentration	income spent on	years, secondary and higher
			healthcare, in Saudi	education, having health insurance
			Arabia.	coverage, and suffering from
				chronic illnesses. Importantly, these
				results demonstrate that poor people
				might be exposed to hazardous
				health spending. Therefore, efforts
				to curbing OOP health expenditure
				should be framed by taking into
				account the specific factors that
				drive the burden towards the poor,
				such as older age and lack of
				education, so as to safeguard the
				overall welfare of the poor.
				•
				Conclusion
				Conclusion  Decomposition analysis of
				Conclusion  Decomposition analysis of inequalities in OOP health
				Conclusion       Decomposition     analysis     of       inequalities     in     OOP     health       expenditure     as     a     percentage     of
				$ \begin{array}{cccccccccccccccccccccccccccccccccccc$
				Conclusion         Decomposition       analysis       of         inequalities       in       OOP       health         expenditure       as       a       percentage       of         income       provides       valuable         information that could be useful for
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various socioeconomic factors to inequality
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various socioeconomic factors to inequality in relative OOP health expenditure
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various socioeconomic factors to inequality in relative OOP health expenditure is heterogeneously distributed
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various socioeconomic factors to inequality in relative OOP health expenditure is heterogeneously distributed between the rich and the poor, OOP
				Conclusion  Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various socioeconomic factors to inequality in relative OOP health expenditure is heterogeneously distributed between the rich and the poor, OOP health expenditure generally
				Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various socioeconomic factors to inequality in relative OOP health expenditure is heterogeneously distributed between the rich and the poor, OOP health expenditure generally resulting in a greater burden for the
				Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various socioeconomic factors to inequality in relative OOP health expenditure is heterogeneously distributed between the rich and the poor, OOP health expenditure generally resulting in a greater burden for the poor, as population growth, elevated
				Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various socioeconomic factors to inequality in relative OOP health expenditure is heterogeneously distributed between the rich and the poor, OOP health expenditure generally resulting in a greater burden for the poor, as population growth, elevated rate of preventable injuries,
				Decomposition analysis of inequalities in OOP health expenditure as a percentage of income provides valuable information that could be useful for health policymakers. The results drawn from employing Wag staff decomposition methods on data obtained from respondents in the KSA showed that although the contribution of various socioeconomic factors to inequality in relative OOP health expenditure is heterogeneously distributed between the rich and the poor, OOP health expenditure generally resulting in a greater burden for the poor, as population growth, elevated

Alharbi	Saudi Arabia	Quantitative.	To explore the	That majority of Saudi citizens were
(2022) [26]			people's willingness	willing to pay a monthly
			to pay for a National	contribution for the National Health
			Health Insurance	Insurance (NHI), if implemented, in
			system in Saudi	return for a sustainable and
			Arabia. The study	improved quality of public
			also aims to	healthcare services. Tis finding is
			understand the	consistent with previous studies that
			factors affecting	examined people's willingness to
			their willingness or	pay for NHI in Jeddah city in Saudi
			unwillingness to pay	Arabia. Our study provides evidence
			National Health	that citizens from other regions were
			Insurance.	also in favor of a NHI. The type of
				usual source of healthcare and
				satisfaction with the current
				healthcare services were found to
				have significant impact on the
				willingness to pay for NHI. People
				who usually used private health
				facilities were less willing to pay for
				an NHI. Tis were probably because
				they already had a private health
				insurance through their employer, so
				they did not see the need for a NHI.
				In Saudi Arabia, the employers in
				the private sector are required by
				law to provide their employees with
				health insurance.
				Conclusions
				This study provided some evidence
				that more people were willing to pay
				for NHI than those who declined.
				The factors that appeared to
				influence the willingness to pay and
				the amount of monthly payment.
				Individuals who frequently used
				public health services and were very
				satisfied with these services were
				more willing to pay for NHI.
				Younger population, those with
				master's degree and from the central
				region were willing to pay more
				amount of money for NHI.

#### **Results and discussion**

The usability and outcome of health insurance in Saudi Arabia are based on Vision 2030. 7 articles were selected that compliant with the theme of this present systematic review (Table 1). Among the 7 reviewed articles, articles have explained the current financial methods of the healthcare system in Saudi Arabia; articles assess the prospective role of CHI in achieving Vision 2030 goals in the healthcare system. Different health insurances system was explained in different articles, articles highlight the strengths and weaknesses of health insurance. Finally, articles have provided recommendations for Saudi health insurance practices.

Although Challenges and Advantages of Implementation for Health Insurance but have evolved rapidly in low- and middle-income countries, many of these continue to be challenged by low uptake, coverage and sustainability. As evident from the findings of this review, there are a multitude of interrelated factors at the individual, interpersonal, community and systems level that drive the implementation and sustainability of Health Insurance.

The main reason for doing the review is to analyze the Strategies of Challenges and Advantages of Implementation for Health Insurance in Saudi Arabia. The inclusivity of the healthcare service at all levels—primary, secondary, and tertiary— and the free distribution to all Saudi citizens are the fundamental benefits of the country's current public healthcare system.[14] These services are provided by the MOH network of hospitals and primary healthcare centers through which health services are distributed throughout the country, and other governmental institutions such as university hospitals, which exorbitantly raises the cost of financing healthcare exacerbated by the rapid population growth and increased prices of medical technology.[21]

These should be properly addressed in scheme design and implementation Health Insurance across to ensure proper attainment of scheme objectives and promote effective and equitable health systems. An overview of the factors influencing implementation, uptake and sustainability of Health Insurance is presented [27]

Our systematic review provides a much more global perspective than the Saudi Arabia alone as well as attempts to identify all factors implementation, enrollment, of already implemented.

The target population in the program includes both Saudi and non-Saudi workers engaged in the private sector, including their dependents. In accordance with the policy, it is mandatory for employers to obtain health insurance for their workers and dependents. Except for emergency cases and hospitalization, insured workers are required to pay the agreed-upon deductible amount, as applicable.[24] One of the few nations in the world that offers its residents free access to healthcare is Saudi Arabia.[18] Healthcare for non-Saudi nationals is primarily provided by the private sector and is either covered by the employer or the individual. Hospitals and primary care clinics received significant funding over the past 10 years, and as a result, the total amount of money spent by the public on healthcare has increased.[23]

The Saudi Vision 2030 is an ambitious growth plan with the main objective of changing its economy by the year 2030. In order to achieve this goal, the country announced an interim development plan called the National Transformation Program (NTP) that sets out strategic objectives for all key sectors of the economy including health. Among other things, vision 2030 envisaged a reduction in public spending through the efficient use of resources and greater participation of private players in different spheres.[24]

Furthermore, we Strategies of Challenges and Advantages of Implementation for Health Insurance in Saudi Arabia Impact on Annual Cost of Healthcare Sector Government is extremely concerned about the cost and advantage situation in the nation because they are accountable to offer various benefits to the citizens along with investing in the developed projects to create income. In this manner, the government evaluated that NHI would be supportive of them in the KSA to save the cost for healthcare facilities in future or not. For this purpose, the research examined this factor with the interviews and supporting articles to assist the government and NHI based authorities to deal with the cost processes and budget for health insurance in the KSA

## **Conclusion**

There are a multitude of interrelated factors in the strategies of Challenges and Advantages of Implementation for Health Insurance in Saudi Arabia at the individual, interpersonal, community and systems levels that drive the implementation and sustainability of Health Insurance schemes. These should be properly addressed in scheme design and implementation and harmonized across the different levels to ensure attainment of scheme objectives. Future research efforts should be directed towards

The Effectiveness of Implementing Multiple Intelligences Theory and The Six Thinking Hats Approach in Enhancing Academic Performance and Cultivating Critical Thinking Skills Among University Students conducting well-designed primary studies with particular attention to recruitment strategy, use of validated tools, and control for potential confounding variables. Furthermore, more research is needed on how Health Insurance schemes could complement the broader health financing system to progress to Health Insurance.

# References

- 1. World Health Organization. (2018). A vision for primary health care in the 21st century: towards universal health coverage and the Sustainable Development Goals (No. WHO/HIS/SDS/2018.15). World Health Organization.
- 2. Monaco, S. (2024). SDG 3. Ensure healthy lives and promote well-being for all at all ages. In *Identity, territories, and sustainability: Challenges and opportunities for achieving the UN Sustainable Development Goals* (pp. 33-41). Emerald Publishing Limited.
- 3. Fan, H., Yan, Q., Coyte, P. C., & Yu, W. (2019). Does public health insurance coverage lead to better health outcomes? Evidence from Chinese adults. *INQUIRY: The Journal of Health Care Organization, Provision, and Financing*, 56, 0046958019842000.
- 4. Okuonzi, S. A. (2018). Towards A Sustainable World: Implications for Universal Health Coverage. *J Pol Sci Pub Aff*, 6(339), 2332-0761.
- 5. Hazazi, A., Wilson, A., & Larkin, S. (2022, November). Reform of the health insurance funding model to improve the care of noncommunicable diseases patients in Saudi Arabia. In *Healthcare* (Vol. 10, No. 11, p. 2294). MDPI.
- 6. Sajjad, R., & Qureshi, M. O. (2020). An assessment of the healthcare services in the Kingdom of Saudi Arabia: an analysis of the old, current, and future systems. *International Journal of Healthcare Management*, *13*(sup1), 109-117.
- 7. Arens, K. (2023). Healthcare Innovation: Challenges and Strategies for Developing a Financially Sustainable Health Insurance Product for the Senior Market in Collaboration with AdvanceCare (Master's thesis, Universidade Catolica Portuguesa (Portugal)).
- 8. Scharfenort, N. (2020). Generating jobs for youth GCC nationals?—Tourism development, demographic change, and labour market situation in GCC countries. *Zeitschrift für Tourismuswissenschaft*, 12(2), 274-298.

- Tibirna, A., Petrescu, C., Ciobanu, C. A., Cercel, G. E., Manea, M. C., Ciobanu,
   A. M., & Manea, M. (2024). Hospitalization Costs and Mental Health:
   Challenges and Solutions from Recent Research-A Narrative Review.
- 10. Djahini-Afawoubo, D. M., & Aguey, S. T. (2022). Mandatory health insurance and health care utilization in Togo. *BMC Health Services Research*, 22(1), 1520.
- 11. Tungu, M., Amani, P. J., Hurtig, A. K., Dennis Kiwara, A., Mwangu, M., Lindholm, L., & San Sebastiån, M. (2020). Does health insurance contribute to improved utilization of health care services for the elderly in rural Tanzania? A cross-sectional study. *Global Health Action*, *13*(1), 1841962.
- 12. Walsh, F. (2024). Performing grief in pandemic theatres. *Elements in Contemporary Performance Texts*.
- 13. Mussa, E. C., Palermo, T., Angeles, G., Kibur, M., & Otchere, F. (2023). Impact of community-based health insurance on health services utilisation among vulnerable households in Amhara region, Ethiopia. *BMC Health Services Research*, 23(1), 55.
- 14. Ranabhat, C. L., Kim, C. B., Singh, D. R., & Park, M. B. (2017). A comparative study on outcome of government and co-operative community-based health insurance in Nepal. *Frontiers in public health*, *5*, 250.
- 15. Rahman, R., & Al-Borie, H. M. (2021). Strengthening the Saudi Arabian healthcare system: role of vision 2030. *International Journal of Healthcare Management*, 14(4), 1483-1491.
- 16. National Academies of Sciences, Medicine Division, & Committee on Integrating Social Needs Care into the Delivery of Health Care to Improve the Nation's Health. (2019). Integrating social care into the delivery of health care: moving upstream to improve the nation's health.
- 17. Sukhatme, N. U., & Bloche, M. G. (2019). Health Care Costs and the Arc of Innovation. *Minn. L. Rev.*, 104, 955.
- 18. Alkhamis, A., Ali Miraj, S. S., Al Qumaizi, K. I., & Alaiban, K. (2021). Privatization of Healthcare in Saudi Arabia: Opportunities and Challenges. *Handbook of Healthcare in the Arab World*, 1865-1907.
- 19. Hassan, E. M., & Mahmoud, H. N. (2021). Orchestrating performance of healthcare networks subjected to the compound events of natural disasters and pandemic. *Nature communications*, *12*(1), 1338.
- 20. Heled, Y., Vertinsky, L., & Brewer, C. (2019). Why Healthcare Companies Should Be (come) Benefit Corporations. *BCL Rev.*, 60, 73.

- The Effectiveness of Implementing Multiple Intelligences Theory and The Six Thinking Hats Approach in Enhancing Academic Performance and Cultivating Critical Thinking Skills Among University Students
- 21. Althabaiti, K. S., Khan, J. S., Hunsberger, M. S., & Ahmed, S. (2024). Factors Influencing Health Insurance Enrollment and Its Impact on Outpatient Service Utilization in Saudi Arabia: Insights from the National Saudi Family Health Survey. *medRxiv*, 2024-10.
- 22. Alkhurayji, K., Alzahrani, H. A., s Alotaibi, A., Alharbi, A. G., Zandan, A. A., & Alsheikhi, H. (2024). Potential and Risks Behind the National Transformation Program in Saudi Arabia. *Cureus*, 16(7), e65047.
- 23. Tobaiqy, M., Alrefai, A., Qashqary, M. E., Al Sulami, R., & Aldahery, S. T. (2023, September). Privatization of Medical Services and Revenue Development Project: A Cross-Sectional Survey of Staff Perceptions at the University of Jeddah Medical Center. In *Healthcare* (Vol. 11, No. 18, p. 2540). MDPI.
- 24. Puteh, S. E. W., Aizuddin, A. N., & Al Salem, A. A. (2022). Feasibility of National Health Insurance for Saudi healthcare services: qualitative study. *Inf Sci Lett*, 11(2), 427-437.
- 25. Al-Hanawi, M. K. (2021). Decomposition of inequalities in out-of-pocket health expenditure burden in Saudi Arabia. *Social Science & Medicine*, 286, 114322.
- 26. Alharbi, A. (2022). Willingness to pay for a National Health Insurance (NHI) in Saudi Arabia: a cross-sectional study. *BMC Public Health*, 22(1), 951.
- 27. Althabaiti, K. S., Khan, J. S., Hunsberger, M. S., & Ahmed, S. (2024). Factors Influencing Health Insurance Enrollment and Its Impact on Outpatient Service Utilization in Saudi Arabia: Insights from the National Saudi Family Health Survey. *medRxiv*, 2024-10.