

In Taiwan, in December 1994 the National Health Insurance (hereinafter referred to as "all-private health insurance") was introduced. Regarding this system, the most important issue is the problem of medical costs that skyrocketing. According to Liu · Wu (2009), it is known that the aging of the population greatly contributes to the increase in medical expenses. In Taiwan, in view of the background that the aging of the population is accelerating, it is expected that the treatment rate of the elderly will gradually increase in future and will pressure on medical finance. Therefore, in order to balance the medical finance while improving and maintaining the health level of the people, it is thought that it is necessary to verify the determinant factor of the patient's behavioral behavior. In this research, based on the previous research of each country, we analyzed using the "National health visit survey" data of Taiwan in 2001 and 2005. Based on the attributes of the explanatory variables, we analyzed them using models such as linear probability model, probit model, logit model, linear regression model and negative binomial regression model. According to the analysis results, it can be said that the annual dummy, the sex, the number of years of illness, the number of diseases, the number of clinical examination, the presence or absence of general medical examination visit, the awareness of health condition, trouble with life, Prescription The explanatory variable of whether or not to purchase traditional Chinese medicine was shown to have statistical significance with respect to hospitalization probability and frequency. In addition to the variables described above, the variables such as age, frequency and degree of drinking, mental health status, income, purchase of non-prescription medicine, and behavior when get sick are also determined with respect to the probability and the number of outpatient clinics Statistical significance was observed. Based on the research results, three policy implications and proposals can be considered. First, by implementing three policies at the same time, including the implementation of the aggregate budget system and raising the insurance premium rate and self-payload, it is possible to suppress the behavior and to alleviate the medical deficit deficit. Second, by setting a more appropriate medical insurance system for the elderly, increase in medical expenses can be suppressed. Third, by promoting medical examination, it is possible to improve the health level and to maintain the balance of medical finance.