

This paper is based on the fact that the income gap in China is expanding against the background, "How the socioeconomic status affects health gap between men and women and between rural and cities, and important factors are "What are the differences in socio-economic status preventing the demand for medical services (outpatient visits, hospitalizations)?" We conducted an empirical analysis of the two static research questions. Data to be used are data of wave 1-wave 3 (2011, 2013, 2014) of "China Health and Retirement Longitudinal Survey (hereinafter abbreviated as CHARLS)" conducted by the Beijing University National Development Institute for middle and elderly people aged 45 or over, Year, 2014). In this paper, wave 1 (2011) and wave 2 (2013) are constructed as panel data, and wave 3 (2014) is used to extract information included only in the relevant year. The number of samples is 13,059, of which 6,151 (47.1%) is male and 8,408 (64.4%) are rural residents. As for the analysis method, this paper presumed the health demand function and medical service demand function of middle and elderly people as a demonstration model according to Kan (2009). In the health demand function, subjective health impression was used as an explanatory variable, and a regression analysis was performed by probit model. In the medical service demand function, regression analysis was performed using the conditional fixed-effect negative binomial model as the explanatory variable for the number of outpatient visits in the past month and the number of hospitalizations in the past year. The results obtained in this paper are summarized into the following five points. ① An agricultural family register who does not have medical insurance may not be able to pay insurance premiums and may not be able to join even if he / she wants to join medical insurance; ② if the child's health condition or economic situation is bad, High probability of answering that subjective sense of well-being is bad; ③ High female and rural residents have a higher probability of answering that the current subjective sense of well-being is poor as the level of education is high; ④ Habitually taking smoking behavior Those with low health awareness tend to have low demand for outpatient. ⑤ Statistically negative correlation was found between work and hospitalization, whereas statistically negative correlations were not found between women at retirement age and older and rural residents. From the results obtained in this paper, as measures to eliminate the health disparity between men and women, rural - cities, in the short term, although ① new type agricultural cooperative medical insurance is enforced to become 'everyone' insurance, It may lead to further reducing the health disparity by setting up a medical rescue system that is public aid for rural poor who can not be insured due to a certain factor; ② Reduce smoking rate, By raising the awareness of health, there is a possibility that it will reduce the number of outpatient visits to men in urban areas. In the long term, it is conceivable that (3) the women are able to prepare an environment that is easy to receive regular education, and enhance public education in rural areas; ④ In China where the aging problem is seriously advanced, labor policies on the elderly It is necessary to review labor markets, especially for women and elderly in rural areas, which is easy to work.