

摘要

台灣數十年來的醫療人力研究集中在人力供需的推估上，其重點在於人力的素質、數量與分佈的議題，然而工作投入時間是決定生產力的重要因素，卻鮮少研究關注醫師勞動供給的問題。從勞動經濟學的觀點來看，高所得者很有可能因為休閒的邊際效用大於財貨的邊際效用而減少工作的時數，身為高所得者的醫師在薪資改變時會如何選擇？或至少產生工作時間對所得不敏感的現象，這樣的勞動供給問題一直是學術與實務領域極欲探究的。

本研究目的主要在於探討中醫師收入對勞動供給的影響，並瞭解醫師特質中是否有解釋勞動供給改變的重要因素，最後闡釋研究結果對於醫師人力供給的政策意涵。

本研究母群體為 2002 年 6 月台灣地區執業之中醫師，依據系統等機率抽樣原則，將執業地區與郵遞區號進行排序後抽出具代表性樣本。並分別以自填與日誌方式之結構性問卷進行中醫師執業場所與生產力之資料蒐集。研究分析在分別進行聯立性檢定(Hausman Test)與異質性檢定(White Test)後，確定在以工具變項對薪資進行估計的情況下進行一般最小平方估計法(Generalized Least Square)。

研究發現中醫師之勞動收入對勞動供給的彈性為 0.2029，也就是說中醫師在目前的薪資水準底下的替代效果依舊大於所得效果。除了勞動收入會影響勞動供給，特考及格與院所有附設藥局之中醫師也有較高之勞動供給，受雇狀況也是重要的影響因素。雖然本研究顯示中醫師之勞動供給處於彈性較小的不敏感區域，但政策制定者未來在支付點數之設定可以屏除線性思考，其認為若要醫師增加生產力必要提高其薪資水準，而可以改為考慮過高的薪資水準並不會增加醫師勞動供給也不會因此縮短病患等候時間的可能性。

關鍵詞：中醫師、勞動供給、勞動經濟學、一般最小平方法

Abstract

During last two decades in Taiwan, the medical manpower policy research often concerned with estimating the physicians' productivity and focused on quantity, quality, and distribution of physicians. Freiman (1984) and Jacobsen (1987) indicated the work effort was the important factor of productivity. In labor economics framework, work hours of high-income individual might decrease as his wage increase. Could the labor supply curve of high-income Chinese traditional medical physicians was backward-bending? It had limited paper to interest on this issue in Taiwan.

The object of this empirical thesis was considered about the impact of income on labor supply of Chinese traditional medical physicians in Taiwan. Second, attempt to find the explanatory factor of physicians labor supply. In final, according to the result, it could recommend the application policy of medical manpower.

The population of study was Chinese traditional medical physicians in Taiwan at June, 2002. Our representative sample selected by systematic stratified sampling principle. The data sources were constructed by structural questionnaire and diary that record the physicians' productivity during one week. The empirical econometric was estimated by generalized least square (GLS) under estimating the virtual wage by instrumental variables.

One of our results is that Chinese traditional medical physicians have been insensitive to wage changes with an elasticity of 0.2029. We also find it had more hours of work that physicians who gained the license through Chinese Medical Physician Specialist License Qualifying Exam and those own the pharmacy. Besides, the employment types were also the important factor of hours of work. In spite of our result does not show the backward-bending supply curve, we suggest that the policy maker consider the result of unlimitedly arise the level of physicians' wage.

Key word: Chinese traditional medical physician, Labor supply, Labor economics, Generalized least square.