



Prime Minister's National Health Program, Pakistan
Ministry of National Health Services, Regulations and Coordination, Pakistan



Prime Minister's National Health Program Pakistan

Dr. Faisal Rifaq

Director – Technical

Ministry of National Health Services, Regulations and
Coordination

Brief on Pakistan:

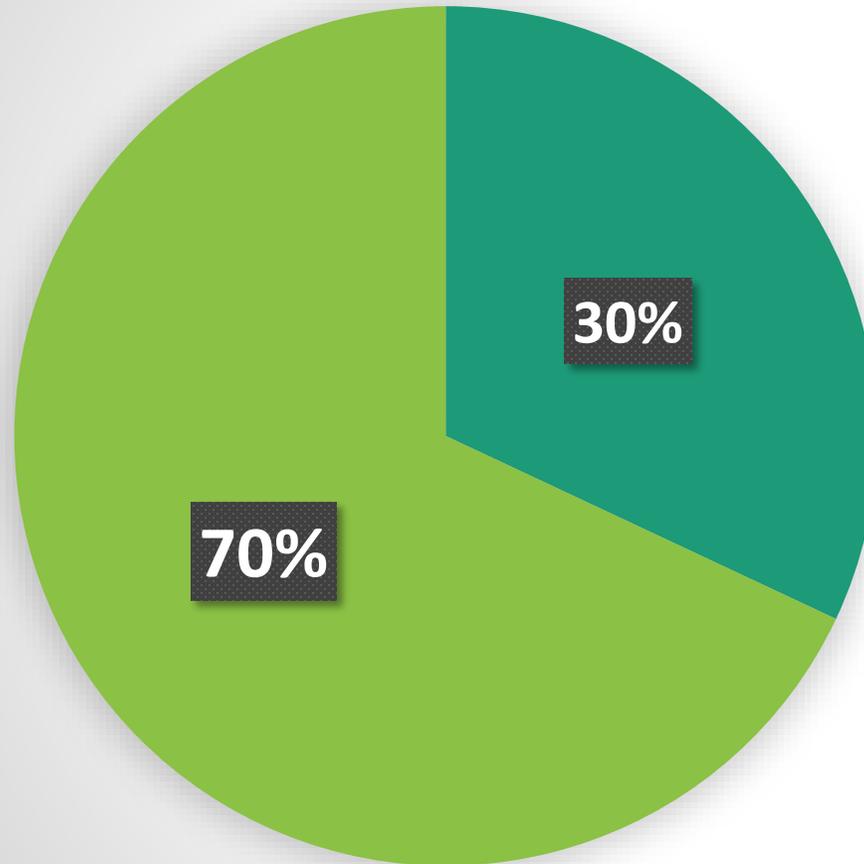


Lower Middle Income Country	
Total Population	207 million
% under Poverty Line	60% (\$2.0 / day) / 21% (\$1.0 / day)
% under Poverty Line in rural areas	69 % (\$2.0 / day) / 25% (\$1.0 / day)
Income per Capita	US\$ 5,580 /capita
Health Expenditure per Capita	US\$ 129 (2.7% of GDP)
Average Life Expectancy	66 years
High fertility rate	Very high
MMR	178 / 100,000
U5MR	81 / 1,000

Brief on Pakistan:

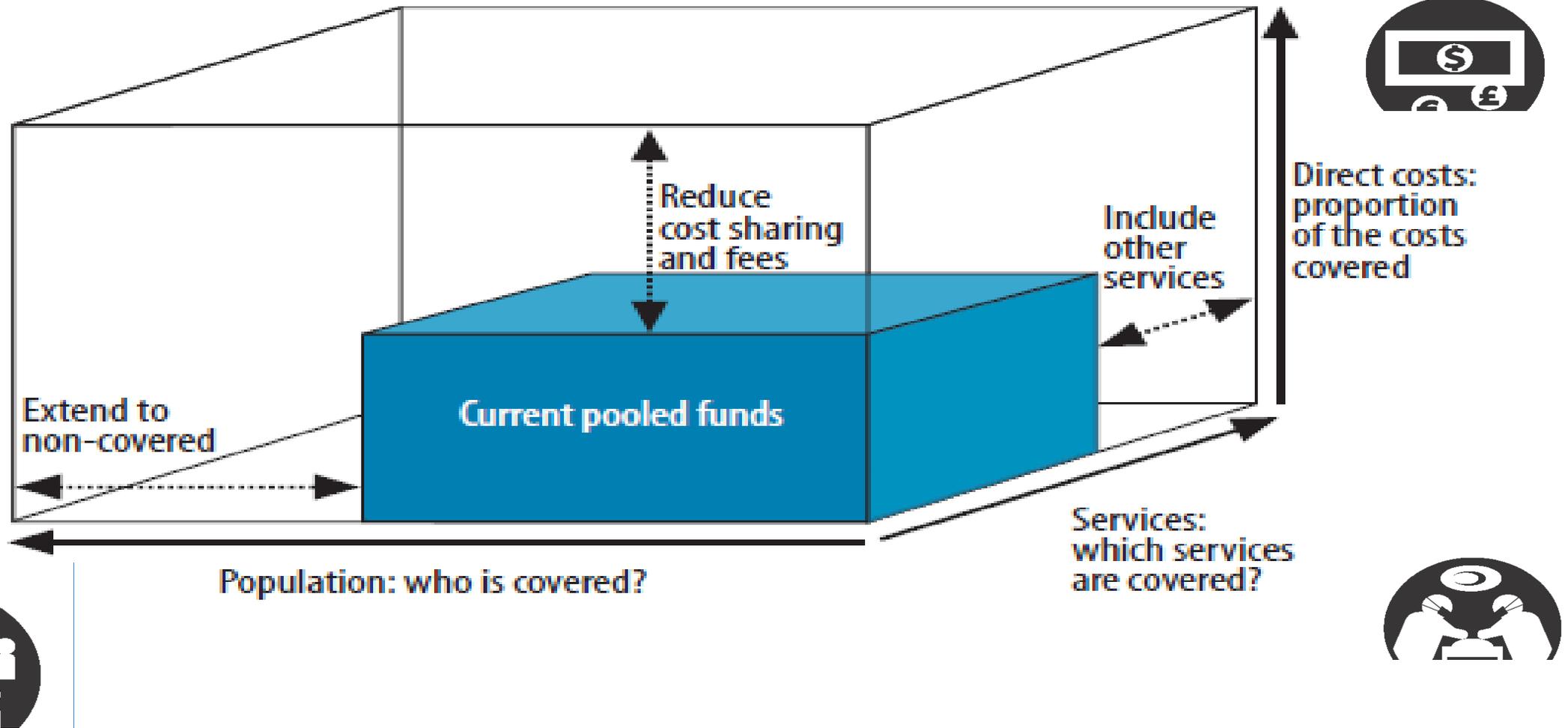


Source of Funds For Health



- Public Sector Spending: 30%
- Out of Pocket Expense: 70%

Universal Health Coverage:



Prime Minister's National Health Program:



- A **social protection initiative** in Pakistan.
- A path towards **Universal Health Coverage** in Pakistan
- Providing **financial protection** to families against **Out of Pocket (OOP)** Expenditure especially **Catastrophic Health Expenditure (CHE)**.
- Program Implementation in phased manner

Phase I of PMNHP:



- A program for the provision of **“Free of Cost Health Insurance”** to families living **“below poverty line of US 2 Per day”** to access **“Cashless” “Indoor health care services”**.
- **Population Coverage:**
 - 3.1 Million Families living in 40 districts
 - Districts Decided by respective provinces and regions
- **Two Distinct packages**
 - Hospital Benefit Package One: Secondary Care Package.
 - Hospital Benefit Package Two: Priority Care Package.

Prime Minister's National Health Program:



- Unit is Family (Husband + Wife + Unmarried Kids) verified by NADRA
- No Cap on family members
- No Co-Pay
- No Reimbursement (Cashless)
- All pre-existing conditions are covered
- No extra premium on age

Objectives of PMNHP:



- To provide **health insurance** for indoor health care services to **60% of the poorest families** in all districts of Pakistan.
- To **reduce Out-of-Pocket expenditure** on indoor health care services by insured families **by at least 60%**.
- To **reduce catastrophic health expenditure** of insured families for in-patient hospitalization **by at least 60%**.

Benefit Packages:



Secondary Care Package (One)	Priority Disease Package (Two)
Rs: 50,000/- (\$ 500) per family/yr All Medical and Surgical illnesses	Rs: 250,000 (\$2,500) per family/yr 7 Priority Disease Package
<ul style="list-style-type: none">• All medical and surgical• Maternity Services (SVD / CS)• All Emergencies• Free Follow up• Transportation Cost• Referral transportation.	<ul style="list-style-type: none">• Heart diseases (Angio/Open).• Diabetes Mellitus Complications / Insulin Provision• Burns and Accident• Dialysis.• Chronic infections Complication• Organ failure management• Chemo / Radio / Surgery)
Excess of Loss: Additional extra similar Insurance limits	

Financing:



- **Innovative partnership** between provinces and federal government to utilize economy of scales
 - Provincial government will provide **premiums for secondary care**
 - Federal government will provide funding for topping up **premiums for priority diseases**
- Strong technical support from **World Health Organization (WHO)** and German Development Corporation (GIZ)

Prime Minister's National Health Program:



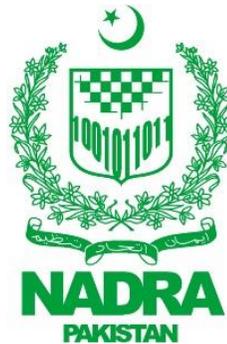
- Working as per the directives from Honorable Prime Minister of Pakistan.
- Work Started: June 2014
- 31st Dec 2015



Current Status:



- District Served: 26 districts of Punjab, Balochistan, Sindh, FATA, AJK, GB and ICT.
- Enrolment: **1,479,827** families
- Services: **48,316** families
- Patient Satisfaction Rate: More than **94%**



Governance:



- **National Steering Committee**
- Chaired by **Federal Minister** of NHSRC
- Rep from Ministry of Finance, Commerce, Planning, Law.
- Rep from Secretary Health of Provinces and regions
- Rep from Pakistan Bait Ul Mal, NADRA, State Life

Insurance Company Selection:



- **Transparent PPRA approved Process.**
- **Expression of Interest:** Floated in November 2014.
- Insurance Company Selected: **State Life Insurance Corporation of Pakistan.**
 - Secondary Care Premium: Rs: 1,000 per family per year.
 - Priority Disease Care Premium: Rs: 300 per family per year.
- Responsibility of Insurance Company
 - **Enrolment of families**
 - **Hospital empanelment and Service Delivery**
 - **Hospital reimbursements and Risk bearing**

Beneficiary Enrolment Center:

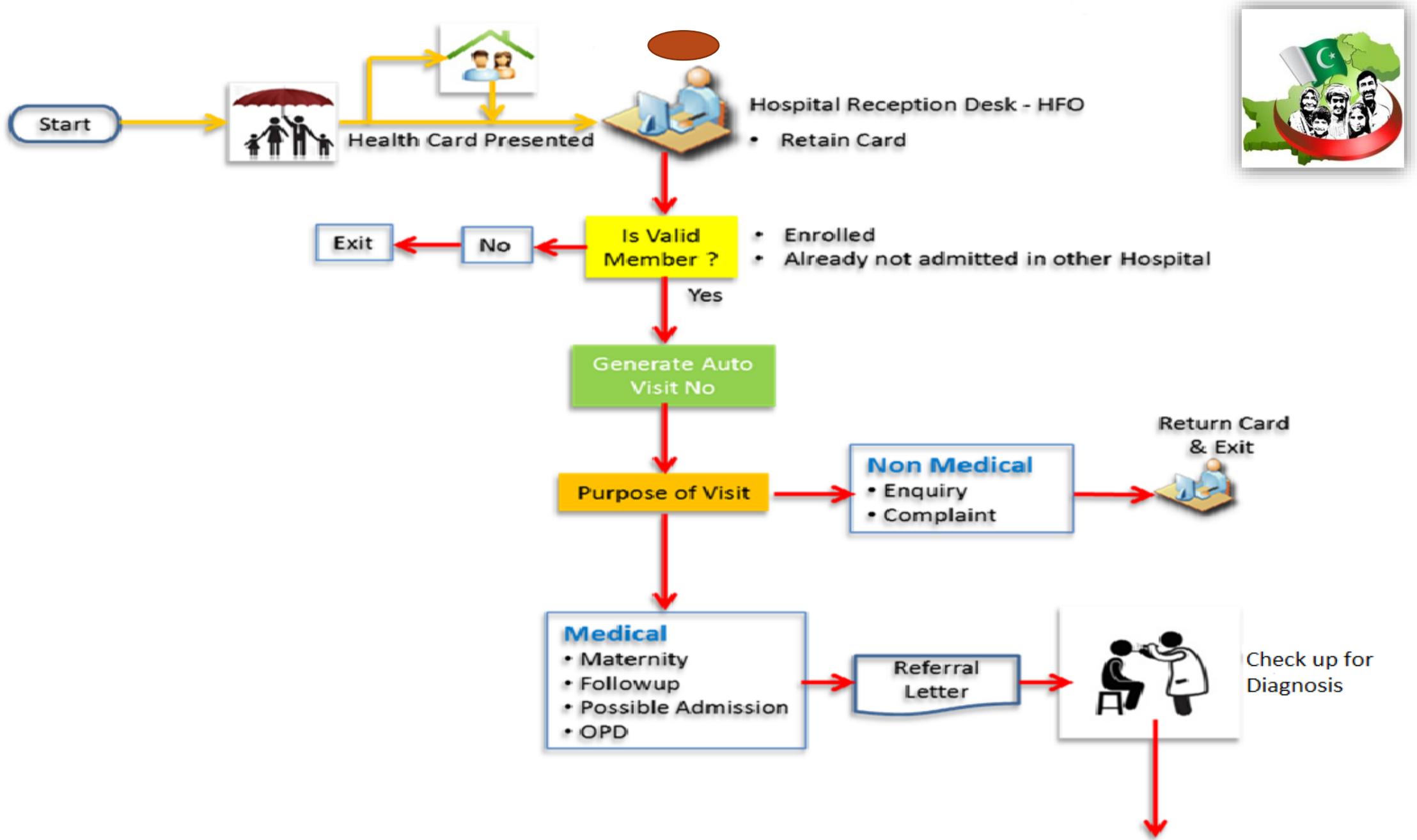


Empaneled Hospitals:

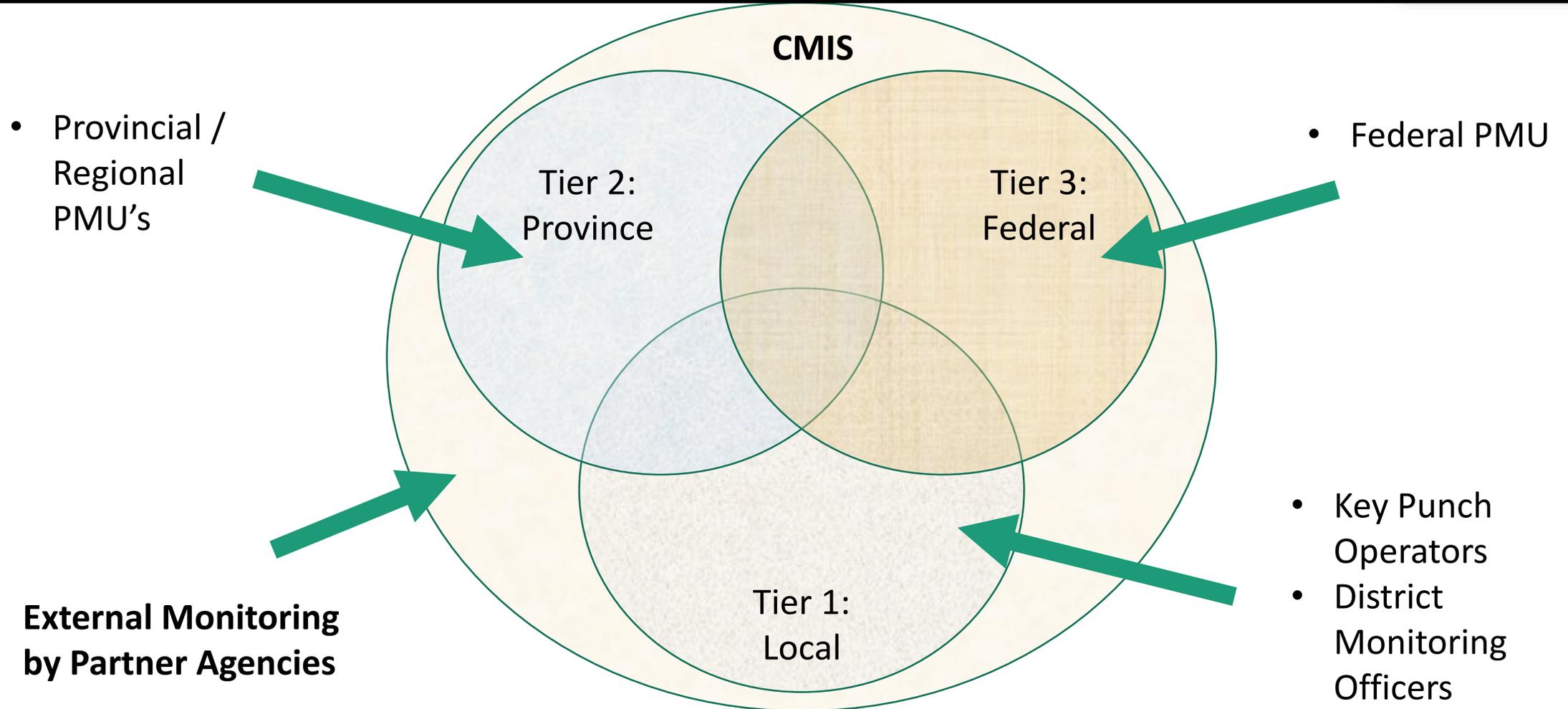


- Services through: **118 Empaneled hospitals** (public and private both)
- Inter District Portability





Monitoring:



Central Management Information System:

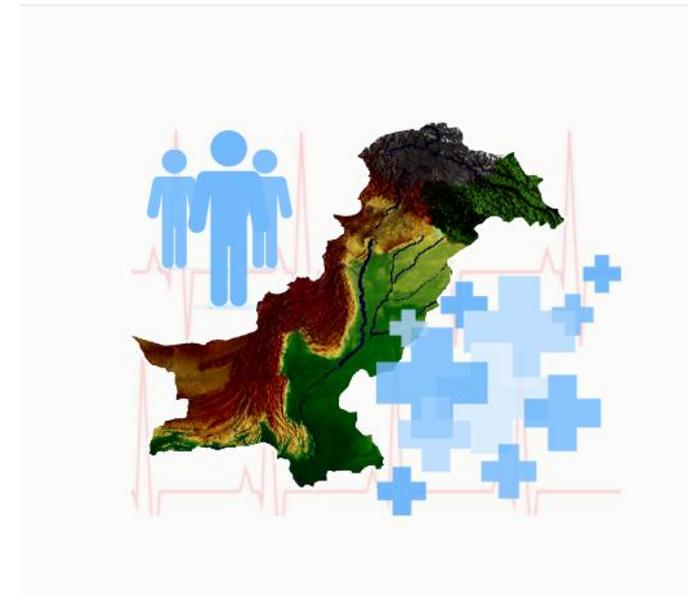
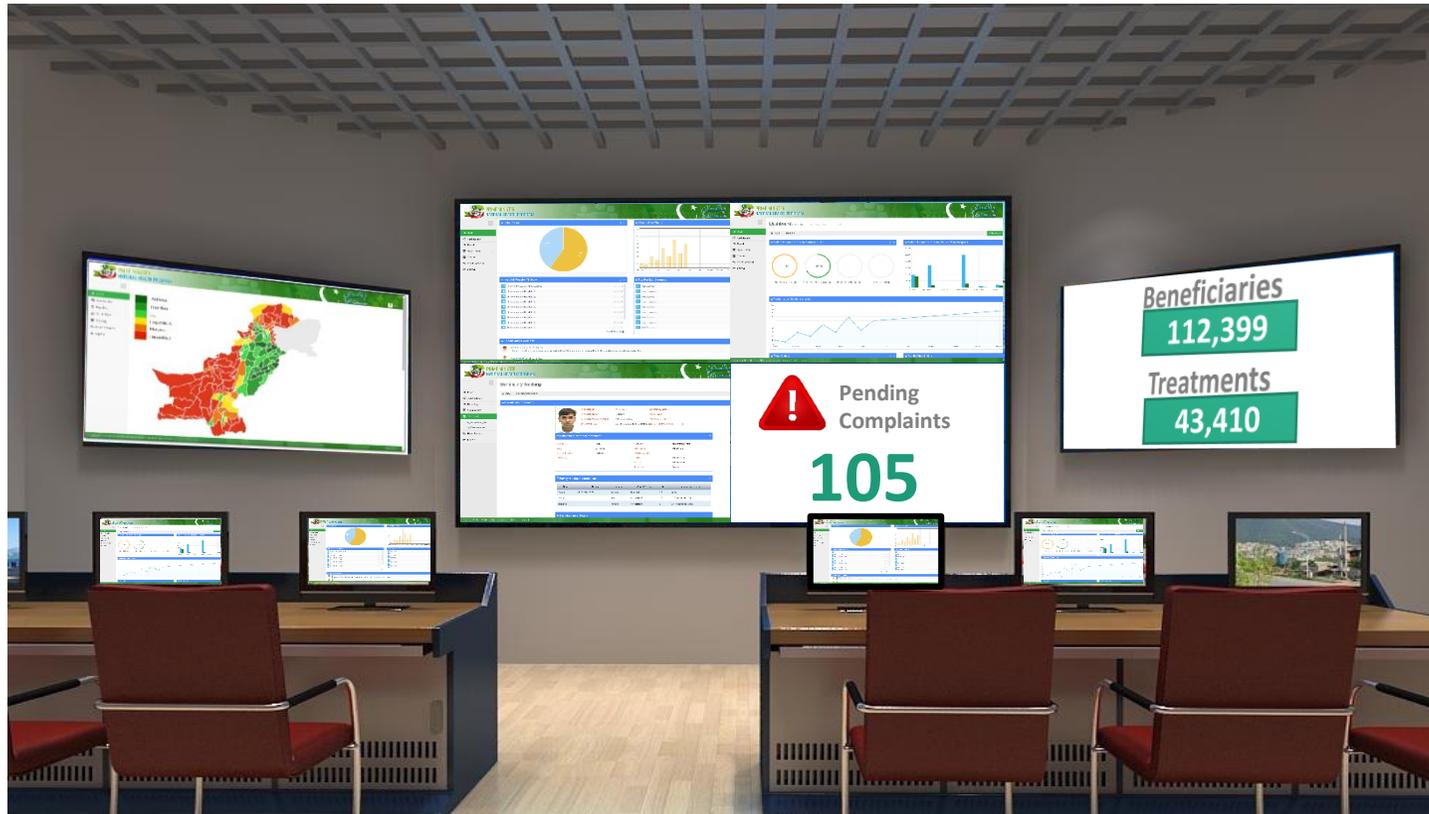


- Developed by National Database and Registration Authority (NADRA)
- Web based **Tactical and Strategic reporting** on:
 - Number of **Beneficiary Enrolled** and their **Geo-Spatial Analysis**
 - Number of **Admissions** and **Discharges**
 - Level of **Financial Utilization**
 - Beneficiary **Complaints** and **Feedback** and **Alerts**
 - Hospital **Claims** and **Reimbursements** monitoring.
 - <https://pmhealthprogram.gov.pk/nhi/home>

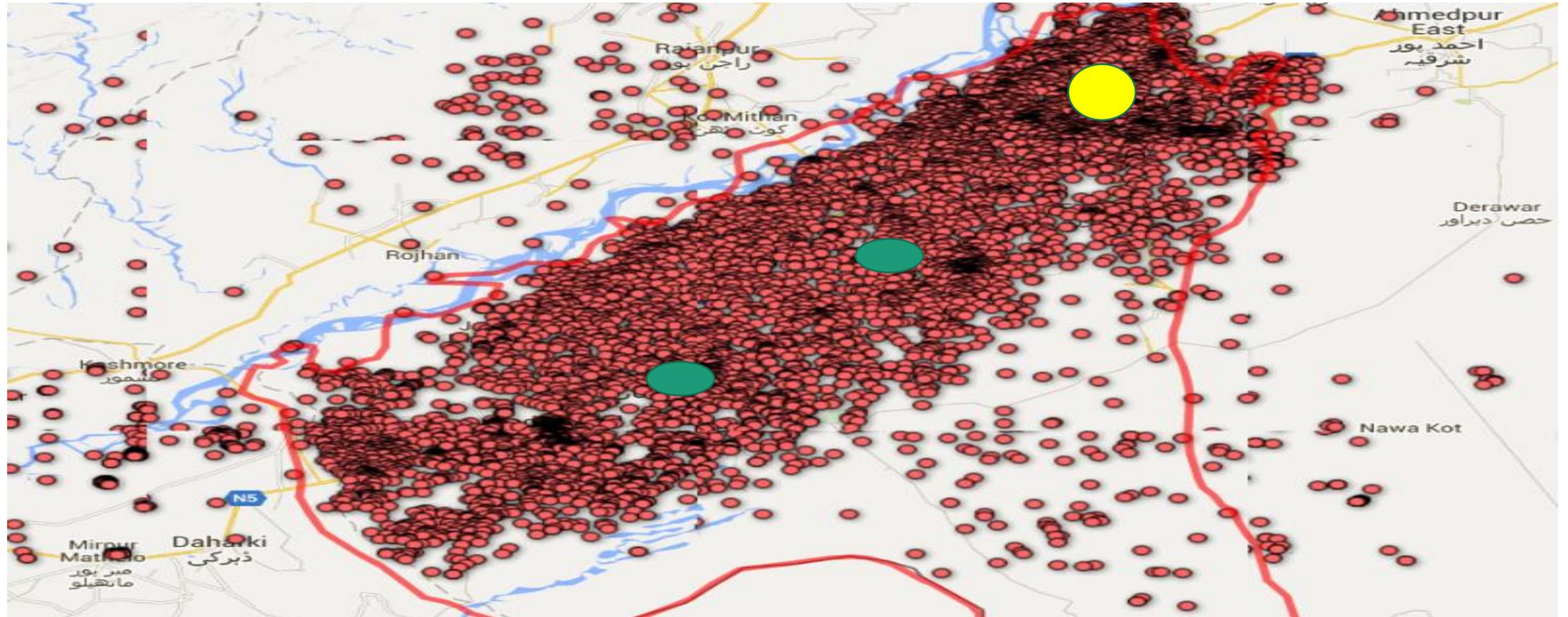
Command Center:



- With Central Monitoring System:



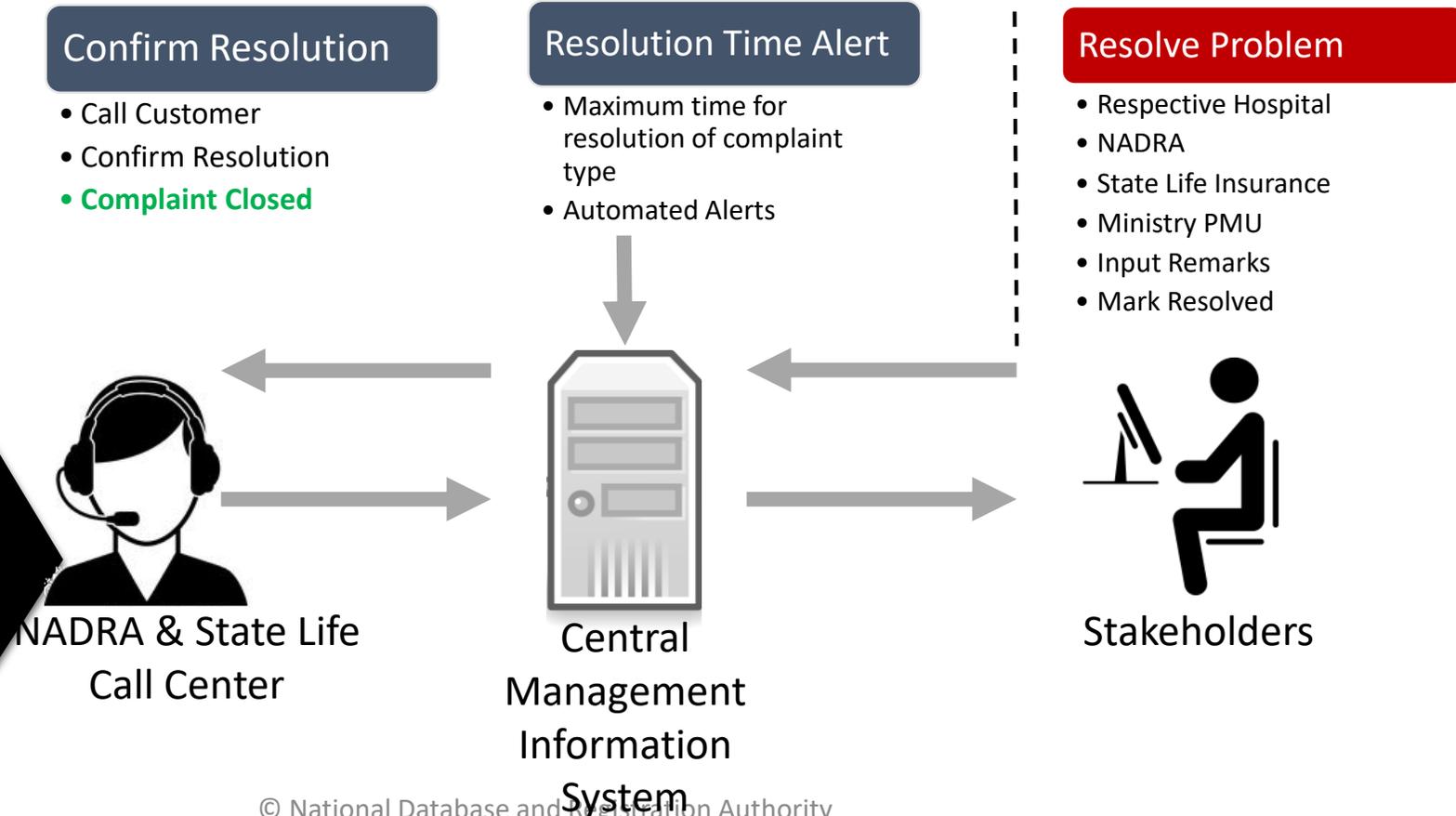
Central Management Information System:





Complaint Management (0800-09009):

- Why am I not a beneficiary...
- Why my family members are not present in program ...
- How can I get my B-Form...
- I did not get my card ...
- What can I do with the card...
- Where is my nearest hospital...
- There is no desk of the program at hospital...
- I have been declined treatment at hospital...
- I have not been treated well at the hospital...
- I have used all my available balance...
- Why is the treatment not covered in the program...
- I am unable to get medicines using the card...
- What is the balance in my card ...
- Other complaints...



Beneficiary Status:



- Any Pakistani can check its beneficiary status by texting its CNIC to:

“8500”

Equalization Reserve Fund (ERF) Clause:



- **To reclaim un spend funds from Insurance Company:**
 - Year 1: Govt 95% Insurance Company 5%
 - Year 2: Govt 90% Insurance Company 10%
 - Year 3: Govt 85% Insurance Company 15%

Survey and Evaluation:

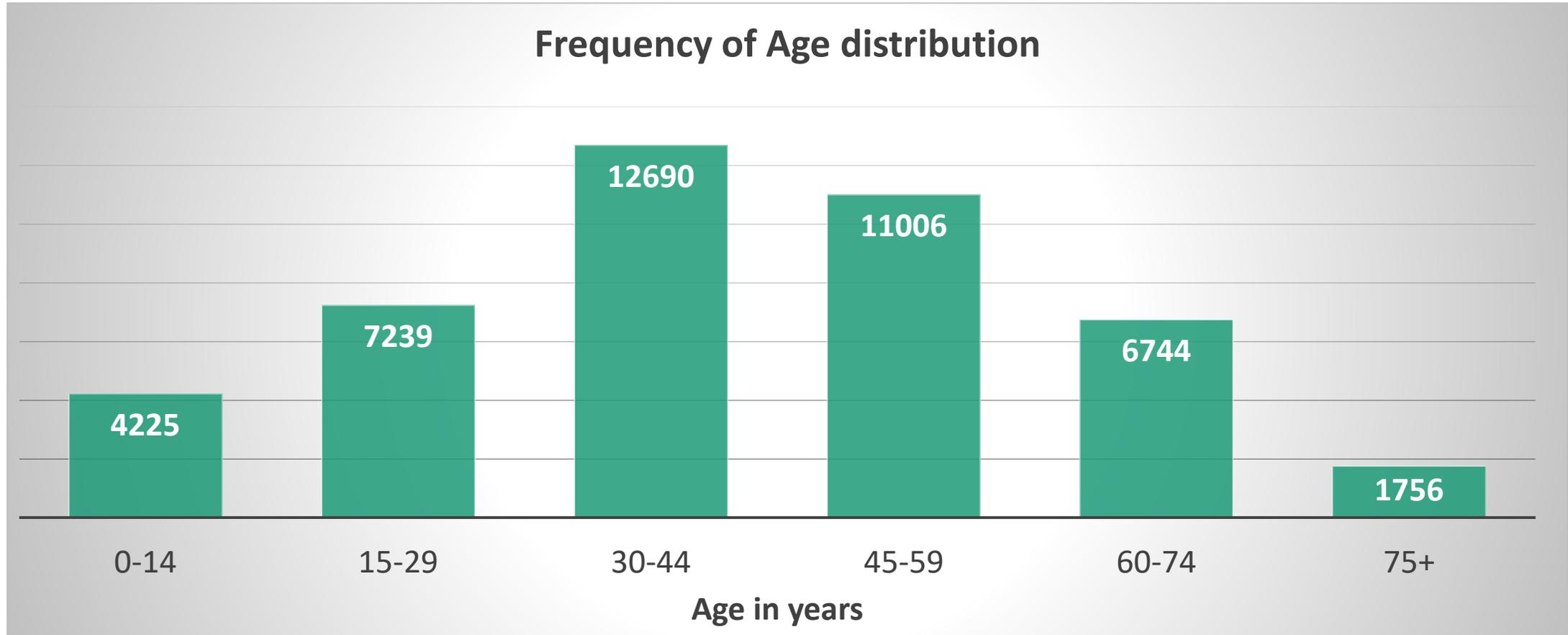


- Third party **Baseline Survey**: Before execution
- Third party **Mid Line Survey**: After 1.5 years of implementation
- Third party **End Line Survey**: Completion of 3 years



Statistics

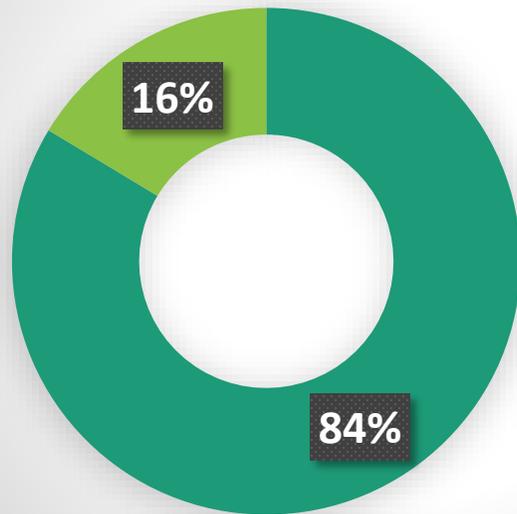
Beneficiaries who availed Services



Frequency of Service Utilization Level



Utilization of services



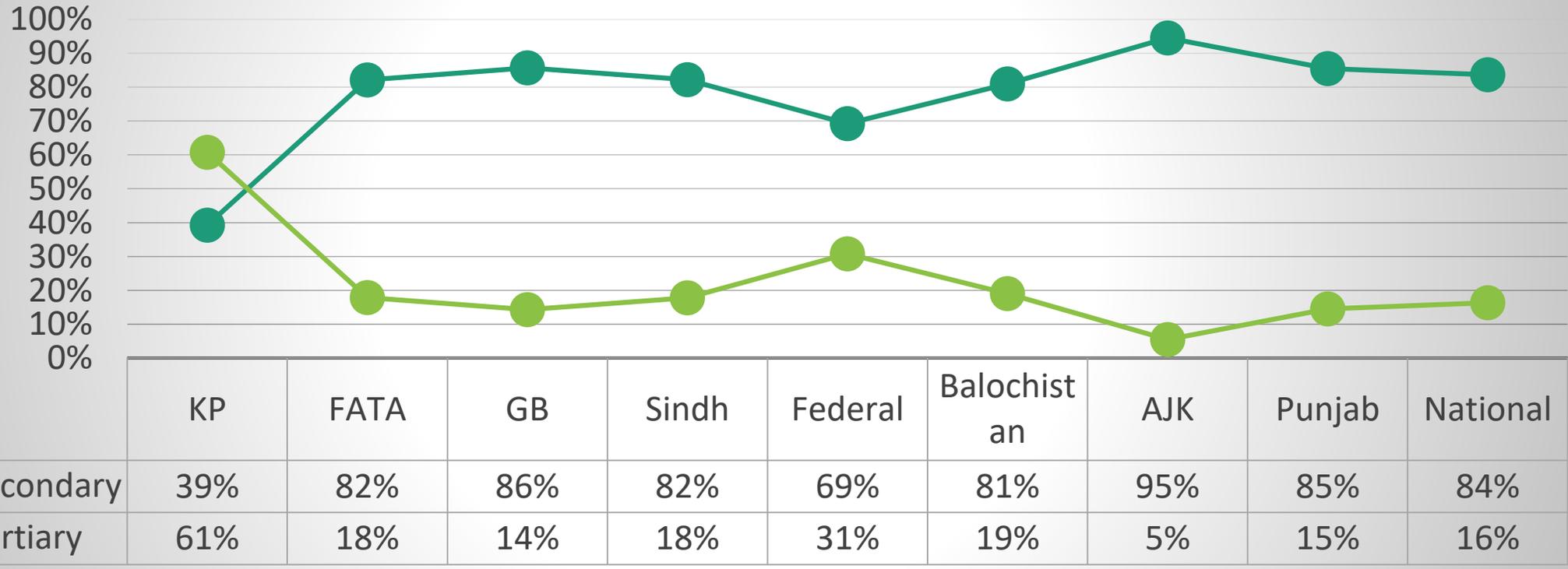
■ Secondary
■ Tertiary

Coverage	Number of patients	Percent
Secondary	36408	83.4
Priority	7121	16.3
Total	43529	99.7
Missing	131	.3
	43660	100.0

Frequency of Service Utilization Level; Provincial break up



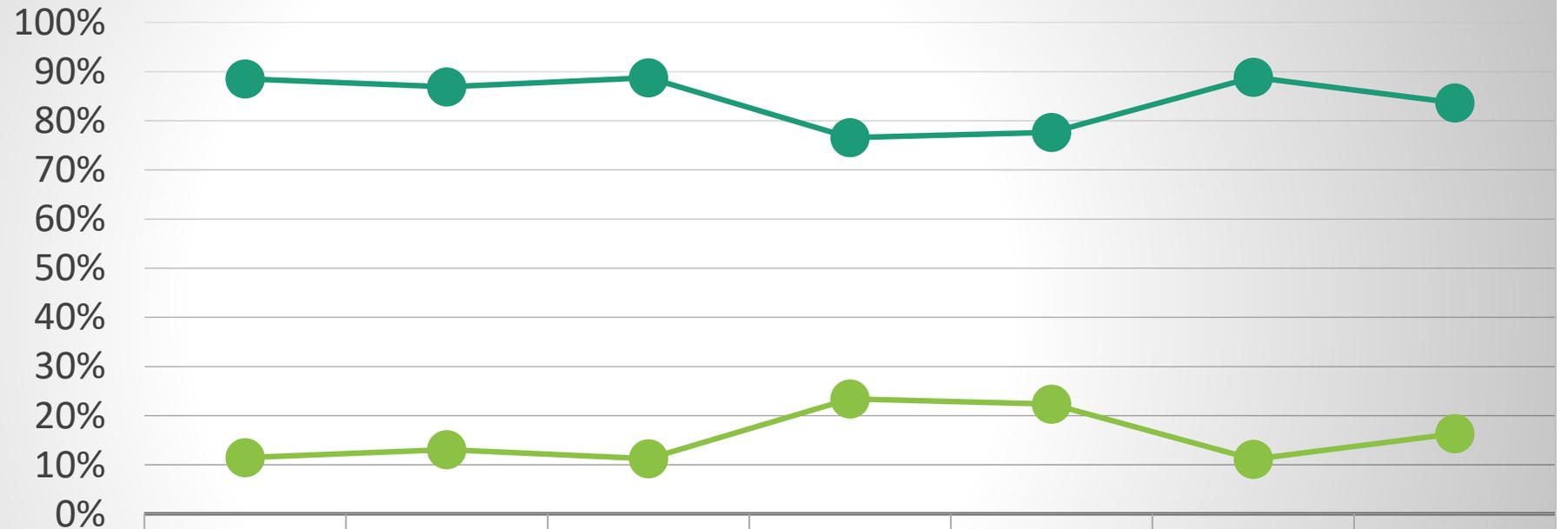
Utilization of services; provincial break up



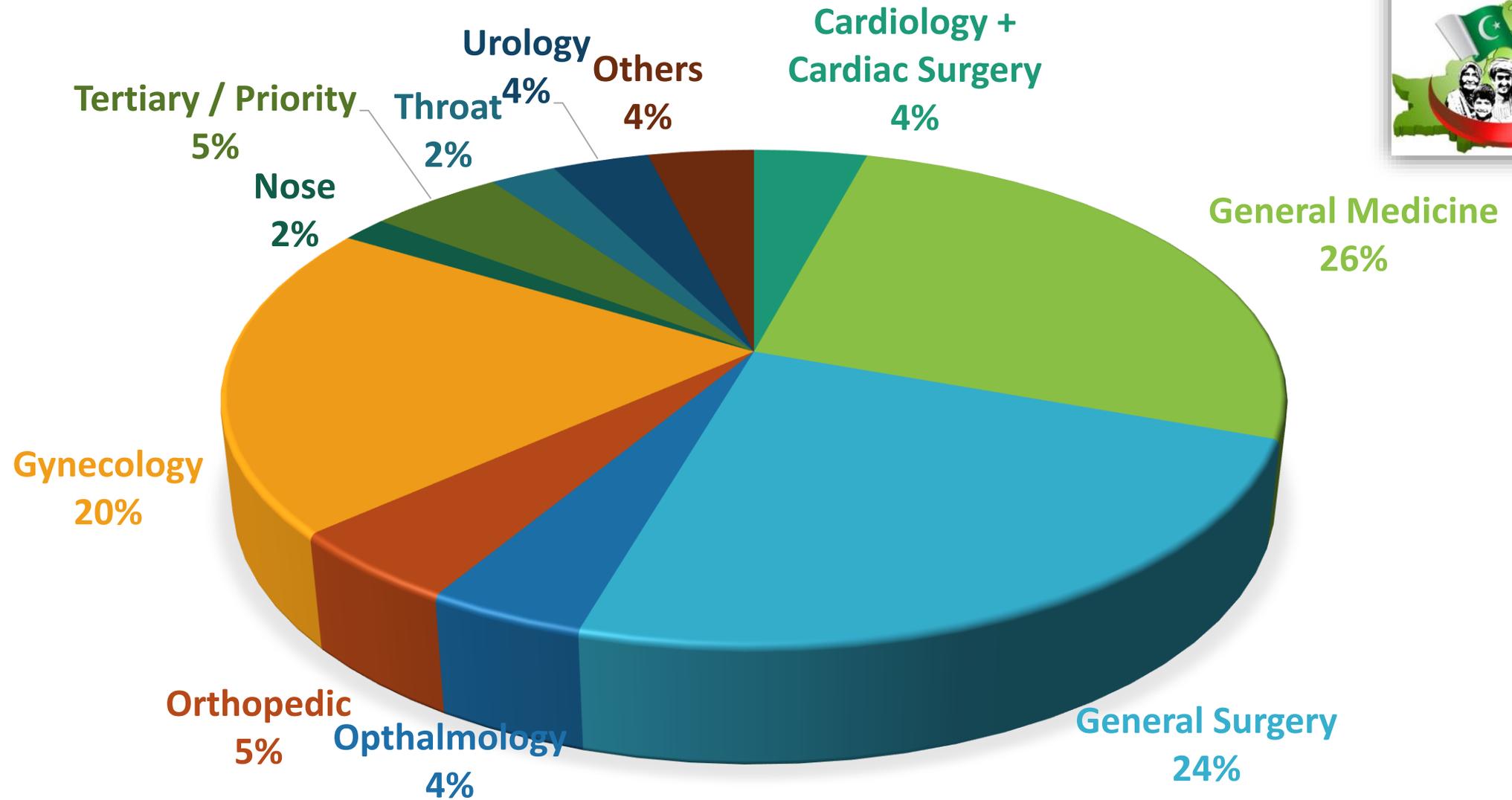
Service utilization across age groups



Utilization of Services; Age Distribution



	0-14	15-29	30-44	45-59	60-74	75+	Total
● Secondary Care Services	89%	87%	89%	77%	78%	89%	84%
● Tertiary Care Services	11%	13%	11%	23%	22%	11%	16%



FREQUENCY OF MORBIDITIES TREATED THROUGH PROGRAM



Future

Linkages and New Initiatives for UHC:



- Linkages with “**Family Practice Program**”
 - Utilization of facilities + Quality / Safety at PHC + Gate keeping
 - Piloting in **PMNHP districts** across Pakistan
 - Identification of **Task force**.
- Addition of “**Out Patient Department**” in services package
 - 7 Non-Communicable Diseases
 - Heart Failure, Hypertension, Dyslipidemia, Diabetes, Breast Cancer, Asthma, COPD
 - Medicines Cost / Disease: \$1 Per Month.
 - Identification of Pilot District.

Legislation, Financing and Reproductive Health:



- **Legislation** to assure social health protection for all
- **Future Financing** Options includes legislation for Health Specific Taxes and others
- Incorporation of **Reproductive Health component**



Challenges

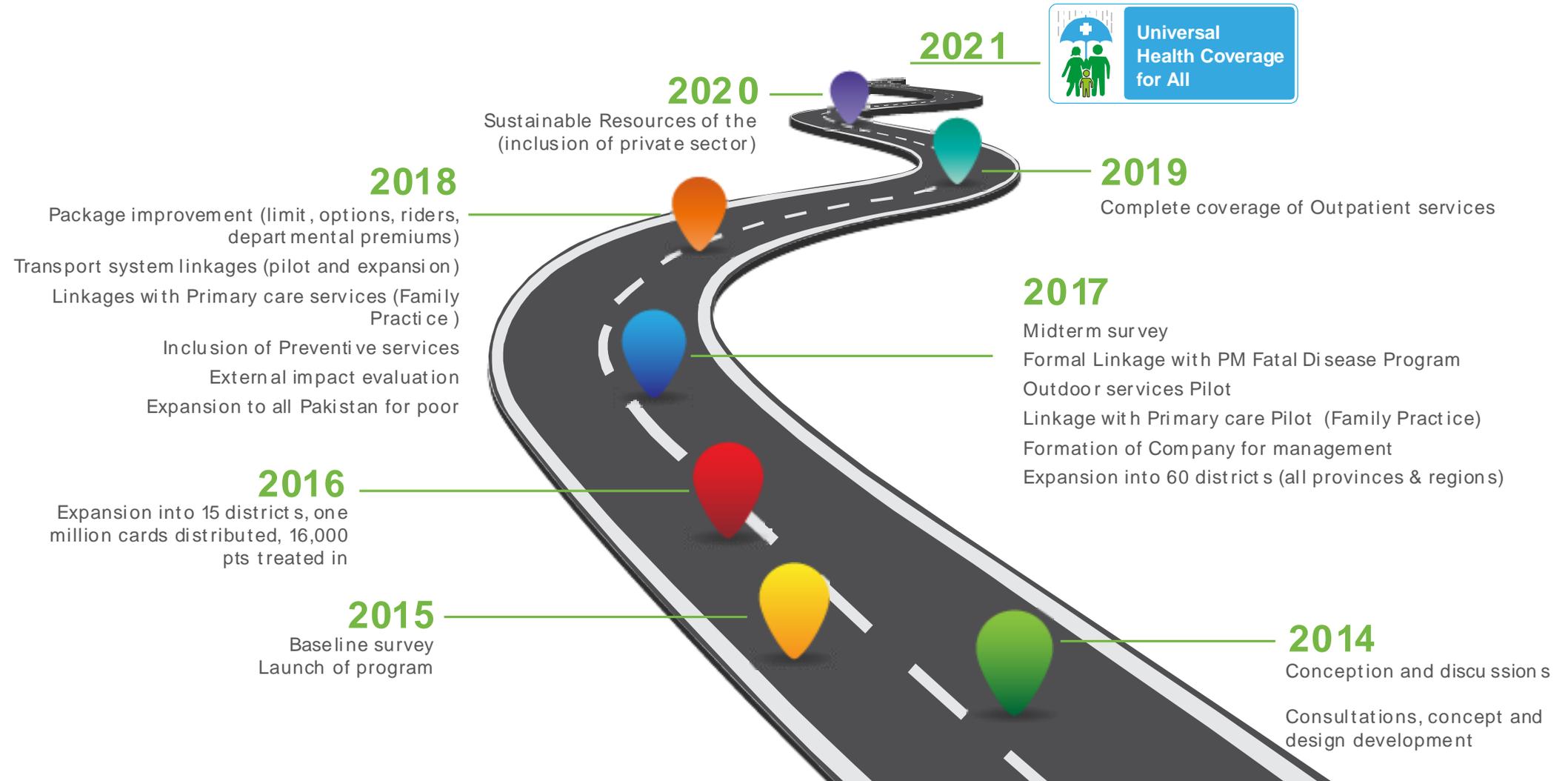


Implementation Challenges:

- **Identification of families** and enrolling them (Health Seeking Behavior)
- **Service Delivery Facilities** at Rural Areas
 - Non Available
 - Un Regulated
 - Poor or low health standards
 - Poor linkage with referral hospitals
- Absence of **Standard Treatment protocol**
- Absence of **medical coding** at hospitals
- No **cost assessment** of medical procedure



ROAD MAP OF PRIME MINISTER NATIONAL HEALTH PROGRAM



Thank you

