





Modernization of the Health sector in Kazakhstan

Role of Social Health Insurance Fund

Basis for introduction of mandatory social medical insurance



- Step 80. INTRODUCTION OF MANDATORY SOCIAL HEALTH INSURANCE.
- Strengthening the financial sustainability of the healthcare system based on the principle of SOLIDARY RESPONSIBILITY of the state, employers and citizens.
 Primary care will be the main unit of national healthcare system, providing the early detection of diseases.

State programme of healthcare development in the Republic of Kazakhstan «Densaulyk» 2016 -2019

• Direction 4: Improvement of the healthcare system through the introduction of solidarity and increasing its financial sustainability

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2015	 Adoption of Law on Mandatory Social Health Insurance
2016	 Establishment of Social Health Insurance Fund
From 1 st of July 2017	Collection of employers contributions
From 1 st of January 2018	The functioning of Mandatory Social Health Insurance System

The reasons to create the Single Purchaser

- Accumulation of risks in the single pool
- Resource allocation based on each region's in depends on population needs
- Purchase of unified health service package
- Providing equal access to health service package for everyone
- Establishment of unified rules for purchasing of medical services
- Improvement the efficiency of the healthcare system and quality of medical services

The Kazakhstan's model of MSHI

Purchaser Covered services Source of funding BASIC PACKAGE (SGBP) – 35% of exp. Emergency care, sanitary aviation Vaccination **STATE BUDGET** Social health insurance PHC, outpatient care, day care, and inpatient care for socially significant diseases (cancer, tbc, communicable des. etc.) fund Inpatient care for emergency reasons PHC and outpatient care for uninsured individuals (till 2020) **SHI SYSTEM** MSHI PACKAGE – 65% of exp. STATE's contribution 5% (14 PHC, outpatient care categories of individuals) Social health insurance Day care **EMPLOYERS 3%** Inpatient care fund **EMPLOYEES 2%** Prescription medicines in outpatient level **ENTERPRENEURS 5%** Tertiary care **Private individuals Voluntary health insurance**

Contribution of the Social Health Insurance Fund to modernise the healthcare system

The Fund is a financially stable organisation that carries out strategic procurement of effective and high quality medical services

Ensuring universal coverage of citizens by quality medical services

Support for the quality of care

Development of the Fund as a strategic purchaser of medical services

Deregulation and transparent policy of purchasing medical services

- From 2020 40% of the SHIF funds will be used to purchase outpatient and outpatient drug support services
- 5% of the SHIF funds will be spend on the purchase of hospital-replacement assistance per annum
- Consumption of the specialized inpatient care for diseases managed at the PHC level will decrease by 5%
- Procurement of tertiary care services will increase by 5% per annum
- From 2020 the selection of health care providers will be based on the outcome indicators
- From 2019-2020 the conclusion of contracts will be conducted online
- From 2020 the purchase of medical services under the ΓΟΕΜΠ and SHIF from private suppliers will constitute no less than 30%

Opportunities for patients

Model will allow:

- To expand the PHC network through private providers;
- To provide equal access
 to health services for people from
 rural areas;
- 3. To develop competition among providers
- 4. To provide a PATIENT-ORIENTED service



- 1 Free choice of the PHC organization
- 2 Free choice of GP
- Improved choice of hospitals during the planned hospitalisation
- Equal access to expensive types of medical examination magnetic resonance imaging, CT scan, laboratory research
- 5 PARTICIPATION in the process of assessing the QUALITY of the provided services