



SEHAT SAHULAT PROGRAM

Brief Overview

Federal Ministry of National Health Services, Regulations and Coordination

3rd floor, Kohsar Block, Pak Secretariat - Islamabad

Overview:

Ministry of National Health Services, Regulations and Coordination (NHSRC), Government of Pakistan, in collaboration with Provincial Governments, started a landmark health care initiative, the Sehat Sahulat Program, with an objective to lead a path towards Universal Health Coverage (UHC) in Pakistan. In a brief it is a scheme for the poor to enable them to access needed health-care services free of cost without any financial constraint.

The program is being implemented in a phased manner and shall provide coverage eventually to hundred million population across Pakistan. As of today, the program is being implemented in 91 districts of Pakistan, including Punjab, Khyber Pakhtunkhwa, Azad Jamu and Kashmir, Gilgit Baltistan, Islamabad Capital Territory, Newly Merged Districts of Khyber Pakhtunkhwa and District Tharparkar – Sindh, covering almost 9 million families.

Special Provision on Prime Minister's Directive:

As a special provision by Honorable Prime Minister, the ambit of Sehat Sahulat Program has been extended to individuals with disability and Transgenders who are registered in NADRA and has special Computerized National Identity Cards (CNICs). The program will be expanded in all districts of Pakistan and will enroll a total of 14 million poor and marginalized families during the year 2020 through which they can access free of cost indoor health care services from empaneled health care facilities, both public and private sector.

Objectives:

The Specific objectives of the program are as follows:

- i. 60% of the poorest families are covered by health insurance scheme to access quality health care.
- ii. 60% reduction of out-of-pocket expenditure of enrolled beneficiaries for inpatient care.
- iii. 60% reduction in episodes of catastrophic health expenditures for inpatient hospitalization of enrolled families.

Benefit Package:

In Sehat Sahulat Program each beneficiary family is eligible for indoor health care services with basic coverage of financial limit of Rs: 60,000 per family per year for secondary health care services and Rs: 300,000 per family per year for 8 priority health care services. These financial limits are extended to additional Rs: 60,000 for secondary health care services and additional Rs: 300,000 for 8 priority health care services in case basic limits are exhausted and patient requires additional support for completion of treatment during current admission.

Details of benefit package is present in **Annex I**.

Maternity Coverage:

The secondary care coverage also includes maternity care package, including 1) 4 Antenatal Visits, 2) SVD or C-Section, 3) Complication in Pregnancy / Delivery (if any), 4) 5 days post discharge medications (if required), 5) 1 Postnatal Visit, 6) 1 Neonatal visit, 7) Post-partum family planning counseling 8) with provision of one time contraceptive technologies (copper T, Bilateral Tubal Ligation, vasectomy) 9) Counseling on immunization and 10) Counseling on nutrition for both mother and child.

Family Structure:

A family is composed with the help of NADRA as per family registration certificate and is defined as a group composed of (i) husband, wife and unmarried children; (ii) husband and wife without any children; (iii) divorced / separated woman / man, widow / widower with or without unmarried children, living alone or with her parents / relatives. Parents are not included in a family but will form a separate family unit if living in same household.

Transportation Cost:

SSP is a cashless scheme in which no cash assistance or cash transfers will be provided to the beneficiary except needed indoor health care services and a traveling allowance. Traveling allowance of Pak Rs. 1,000/- per discharge, for a total of 3 discharges per year, from residence to hospital and back is provided to the beneficiaries. However, the cost for shifting from Secondary facility to tertiary facility within city or outside shall be borne by the program.

Poverty Beneficiary Data Base:

The Sehat Sahulat Program has used the best available data in Pakistan to identify and select the families living below international poverty line (Below PMT 32.5). The data was collected by Benazir Income Support Program (BISP) through a household socio-economic survey. SSP does not have the mandate to include new members or exclude any member from the list of beneficiaries until and unless they are included or excluded by BISP through fresh household poverty survey. However, as per the direction of Prime Minister, Sehat Sahulat Program has been extended to all families who are permanently residing in the Merged District of Khyber Pakhtunkhwa, District Tharparker (Sindh), Individuals with disability and Transgenders registered in NADRA and having special Computerized National Identity Cards.

Monitoring:

The primary responsibility for monitoring at the project level is providing supplementary review, technical oversight, coordination and quality assurance while having a stringent monitoring system through Central Management Information System (CMIS) is being used to monitor the program activities in real time. The system has been developed in collaboration with NADRA and is being used for quick decision making with real time implementation. The program also enjoys a high level of client satisfaction rate of more than 97%. This satisfaction rate has been assessed by NADRA as a third-party monitor. Call center of NADRA randomly calls discharged patients / beneficiary and gets their feedback on specially designed questionnaire to assess their satisfaction from program services. Personnel of NADRA call center are also trained on the program benefits so that their quality feedback calls can be used to improve service delivery to the beneficiaries.

Toll Free Number & 8500 Services:

A toll-free number 0800-09009 has been developed by State Life for comments, suggestions and complaints. Any beneficiary with complaint can call the toll-free number and file its complaint. The complaint will be posted on the CMIS of SSP for review and follow-up. Low level operational complaints will be managed at district level while high level quality control-based complaints will be forwarded to Provincial PMU's for interventions. Each level of complaint will be allocated appropriate time for redressal. Failure to redress / clear the complaint will be highlighted in the CMIS. A service of

“8500” has enabled all Pakistani individuals to check their beneficiary status by texting their CNIC numbers to the number.

Insurance Company:

Sehat Sahulat Program is being implemented through State Life Insurance Corporation of Pakistan, hired through an open and transparent bidding process. Services are delivered to the beneficiaries by empaneling secondary and tertiary level health care facilities, both at public and private sector, in all focused districts and metropolitan cities of the country. The hospital is being empaneled by the insurance company based on hospital empanelment criteria set forth in the project documents. Approval of all empaneled tertiary health care facilities are being given by Federal PMU of SSP in consultation with provincial PMU of respective province. Due to economies of scale a low premium of Rs: 1,998 per enroll family per year has been secured for the provision of treatment to enrolled families.

Equalization Reserve Funds (ERF):

In order to protect the financial interest of all stake holders, Equalization Reserve Fund (ERF) has been developed in the program which ensure recovery of unutilized premium during a contractual period by the government. As per this ERF, any unutilized premium and any profit earned by the insurance company on the insurance premium, shall be distributed between the insurance company and the government at a ratio of 5/95, 10/90 and 15/85 for first, second and third year respectively.

Current Status of Services to the families:

Currently Sehat Sahulat Program is proving free to cost services to 60 ,863 families in ICT, 1,213,057 families in newly merged districts of Khyber Pakhtunkhwa, 5,077,715 families in Punjab, 272,311 families in Azad Jammu & Kashmir, 45,198 families in Gilgit Baltistan, 314,661 families in District Tharparker- Sindh.

Annex I: Enhanced Benefit Package Phase-II

Name of Package:	Priority Disease Treatment Package	Secondary Care Treatment Package
Financial Coverage in Package:	Initial Coverage: Rs: 300,000 / family / year	Initial Coverage: Rs: 60,000 / family / year
	Additional Coverage (If required): Rs: 300,000 / family / year	Additional Coverage (if required): Rs: 60,000 / family / year
Diseases Covered in Package:	<ul style="list-style-type: none"> • Heart diseases • Diabetes mellitus complications • Burns and accidents • Dialysis • Chronic infections complication • Organ failure management • Cancer management including chemotherapy, radiotherapy & surgery. • Neuro-surgical procedures 	<ul style="list-style-type: none"> • All medical cases not covered in priority disease treatment package. • All surgical cases not covered in priority disease treatment package. • Maternity services including normal delivery and C-Section. • All emergencies covered • All pre-existing conditions covered
Additional Coverage	<ul style="list-style-type: none"> • Transportation cost of Rs: 1,000 per discharge 3 times in any given year • Burial support expense of Rs: 10,000 per death in empaneled hospitals • One free post discharge follow-up • 3 antenatal visits, one postnatal visit of mother, one postnatal visit of newborn, nutritional counselling, immunization counselling, family planning counselling and one long term family planning intervention, if agreed by family 	
Exclusions	<ul style="list-style-type: none"> • Normal exclusion criteria • Cosmetic interventions • Transplants (Liver, Kidney, others) 	