

Road to Results

ACHIEVING SUCCESS STEP BY STEP

Program Successes in Kyrgyzstan

July 2002

New Co-Payments Increase Health Financing Transparency

Despite significant changes in the health financing system in Kyrgyzstan, the cost of providing health care still exceeded the health care budget. Health care worker salaries remained unrealistically low, and the post-Soviet tradition of charging informal payments for services persisted. In response, the MOH, with technical assistance from ZdravPlus and the WHO Monitoring and Evaluation Project, formalized the co-payments the population needed to pay for health services. Co-payments are required for outpatient specialty and inpatient care, while PHC remains free. Health providers keep and allocate the co-payments at the facility level, but are required to submit financial reports to the Health Insurance Fund which incorporates the level of co-payments into rate-setting.

In Issyk-Kul Oblast, monitoring efforts showed that:

- financial incentives, new provider payment systems, increased autonomy for health providers, and the co-payment policy resulted in an increase of 20% in health worker salaries;
- informal payments for drugs and supplies decreased by 92%;
- informal payments to staff decreased by 66%; and
- 46% of patients knew what they had to pay in advance, compared with 15% of patients before co-payments were introduced.

One of the major objectives of the new co-payment policy was to mitigate individual financial risk and increase transparency by allowing patients to know the amount they had to pay before obtaining services. Patient knowledge is a powerful force in behavior change — as one patient remarked, “The situation is better now. The payment is official and I was aware of it before I came. Plus, I’m getting all the drugs I need and I don’t have to go to the pharmacy to get them myself. Everything’s included.” Recognizing the benefit to both health workers and the population, the Minister of Health of Kyrgyzstan stated, “I am pleased with the experience of the policy to date. In particular, I feel that it has demonstrated that we can reduce corruption in the health system and enable health workers to increase their salaries by legal means. This system also has empowered patients by giving them a good understanding of their financial responsibilities as well as their rights.”



ZdravPlus
ЗдравПлюс



Empowering FGPs to Improve Quality of Care in Issyk-Kul Oblast

In January/February 2001, three FGPs in Issyk-Kul Oblast became pilot sites to test a new Quality Improvement System (QIS). Staff from the Family Medicine Training Center in Karakol were trained as “curators” to work with FGPs on improving quality of care using four tools: exit interviews with clients; a facility walk-through; observation of practitioners; and a self-assessment meeting with FGP staff. The staff of the FGP work as a team to prioritize problems, decide how to solve them, and develop an action plan for implementing the solution. Three months later, the curator returns to check on progress and to repeat the cycle.

Under the pilot project, three rounds of the QIS were implemented in 2001 and a variety of problems were resolved. After the first round of observation of services showed that doctors at all three FGPs did not follow standards of care in the provision of contraception or prenatal care, training was provided,

The USAID-funded ZdravPlus Program provides technical assistance and training to improve the health of Central Asian populations by improving health delivery systems

increasing assessment scores from 63 to 88 percent and from 47 to 91 percent, respectively. At one FGP, clients gave the examination room low scores. The staff determined that clients felt the room did not look nice and offered little privacy. In response, they created three separate examination rooms, bought flowers, curtains, a painting, soap and towels. By the third round, client satisfaction had improved 119 percent.

The QIS improved the quality of care, as measured by compliance with MOH standards. It also increased client satisfaction and strengthened the organizational capabilities of the FGPs. Staff reported feeling more motivated, part of a team, and able to solve their own problems. In addition, FGP head doctors found sponsors to support improvements in their facilities and persuaded clients to donate time and skills, demonstrating local-level initiative not often seen in FGPs in Central Asia.

A year later, the pilot FGPs and curators are continuing the QIS, without outside assistance, and have broadened its scope to include quality improvement in immunization, tuberculosis, control of diarrheal diseases and anemia. A cadre of trainers has been developed and, through them, the QIS has been expanded to other Issyk-Kul FGPs and the FMTC polyclinic in Bishkek. In the summer of 2002, it will be rolled out nationwide through the network of FMTCs.

Outpatient Drug Benefit Improves Access to Drugs, Reduces Referrals

The Kyrgyz MOH, with technical assistance from ZdravPlus, introduced a new outpatient drug benefit. It was first tested in Bishkek City and is now being extended nationwide through the implementation of the single-payer system. It is an example of “intelligent” health purchasing. The MOH knew that it had to reduce hospital admissions and capacity to adapt to the collapse of health sector funding. They also knew that many patients only go to the hospital to get drugs. So, they introduced the outpatient drug benefit to improve patient access to necessary drugs while also reducing hospital admissions.

The population is changing how they access the health delivery system. In Issyk-Kul Oblast, after the introduction of the outpatient drug benefit, visits to FGPs increased by 6%, emergency cases decreased by 38%, and there was a 22% decrease in referrals to hospitals for PHC sensitive conditions (asthma, hypertension, anemia, ulcers). Patients are very satisfied with the new outpatient drug benefit. An elderly pensioner stated, “My pension is very small and this program allows me to have the necessary medications at a reduced price.”

For more information

Office in Kazakhstan

39 Begalina Street
Almaty, Kazakhstan 480100
Tel: (3272)915-775, 919-433
Fax: (3272)919-409
E-mail: office@zplus.kz

Office in Kyrgyzstan

1 Togolok Moldo Street
Bishkek, Kyrgyzstan 720405
Tel: (996-312)663-816, 663-708
Fax: (996-312)661-024
E-mail: abt_bish@infotel.kg

Office in Uzbekistan

16 Bozbozor Street
Tashkent, Uzbekistan 700007
Tel: (998-71) 169-2212, 169-1491
Fax: (998-71) 169-1492
E-mail: abt@zdravplus.uz

Office in Tajikistan

155 Rudaki Street, #7-8
Dushanbe, Tajikistan 734017
Tel: (992-372) 245-369
Fax: (992-372) 245-369
E-mail: zdrav@tjinter.com

Office in Turkmenistan

43 Gyorogly Street, # 4
Ashgabad, Turkmenistan 744020
Tel: (993-12) 344-242
Fax: (993-12) 344-547
E-mail: natalyazp@online.tm