

Annex 1: Features of Pakistans' three main social health protection programs

	Sehat Sahulat Program (formerly known as Prime Minister National Health Insurance Program)	Sehat Sahulat Programme Khyber Pakhtunkhwa (KP)	Social Health Protection initiative Gilgit-Baltistan
General Overview			
Launched in	December 2015	January 2016	August 2016
Geographical coverage	72 districts across the country	26 districts in KP province	One district in Gilgit-Baltistan province
Population coverage (2019)	Approximately 8 million families	Approximately 2.4 million households	Approximately 5,340 households
Basis for enrolment	Automatic (beneficiary families earning an income of less than or equal to USD 2 per day) as per data from National Database Registration Authority AND All residents of Azad Jammu Kashmir, Gilgit-Baltistan, newly merged districts of Federally Administered Tribal Areas, the district of Tharparker, all disabled persons and transgender persons (based on national registry)	Automatic (beneficiary households earning an income of less than or equal to USD 2 per day) as per data from National Database Registration Authority.	Automatic (beneficiary households earning an income of less than or equal to USD 2 per day) as per data from National Database Registration Authority.

Benefit Package			
Outpatient entitlements	One free outpatient follow-up for inpatient entitlement	One free outpatient follow-up for inpatient entitlement	Only ante-natal care check-up
Inpatient entitlements	<p>Hospitalization services for 7 priority diseases:</p> <ol style="list-style-type: none"> 1. Cardiovascular Disease 2. Complications of Diabetes Mellitus 3. Emergency and Trauma 4. Organ Failure Management 5. Chronic Infections complications 6. Cancer management 7. End Stage renal disease <p>And medication for up to 5 days</p> <p>Maximum coverage: PKR 50,000/family/year for secondary care and PKR 250,000/family/year for tertiary care</p>	<p>Hospitalization services for 7 priority diseases:</p> <ol style="list-style-type: none"> 1. Cardiovascular diseases 2. Complications from Diabetes Mellitus 3. Emergency and Trauma 4. Oncological diseases including: <ol style="list-style-type: none"> a. Chemotherapy (Day care or hospitalization) b. Radiotherapy (Day care or hospitalization) c. Medical and Surgical management requiring hospitalization 5. HCV & HBV Complications 6. Organ failure management 7. Cerebro-Vascular Accidents (CVA) <p>Maximum coverage: PKR 240,000/family/year for secondary care and PKR 300,000/family/year for tertiary care</p>	<p>Hospitalization services for 8 priority Inpatient Services</p> <ol style="list-style-type: none"> 1. All Medical and Surgical Procedures 2. Heart diseases (Angioplasty/bypass) 3. Diabetes Mellitus 4. Burns and Road Traffic Accidents (Life, Limb Saving Treatment, implants, Prosthesis) 5. End stage kidney diseases/ dialysis 6. Chronic infections (Hepatitis/HIV) 7. Organ Failure (Liver, Kidney, Heart, Lungs) 8. Cancer (Chemo, Radio, Surgery) <p>Maximum coverage: PKR 50,000/family/year for secondary care and PKR 250,000/family/year for tertiary care</p>
Transport (inpatient only)	<ul style="list-style-type: none"> • Referral transportation for indoor patients • PKR. 350 provided at time of discharge up to 3 times per year 	PKR 2,000 paid upon discharge	<ul style="list-style-type: none"> • Referral Transportation of indoor patients • PKR. 350 provided at time of discharge up to 3 times per year

Health Financing Arrangements			
Revenue sources	<p>Full premium payment by Public Exchequer (Federal and provincial governments)</p> <ul style="list-style-type: none"> • Secondary & priority healthcare premium is paid by Provincial Government of Punjab through Punjab Health Initiative Management Company, however, earlier Priority healthcare premium was paid by Federal Government of Pakistan. • No co-payment by the beneficiary. 	<ul style="list-style-type: none"> • Donor funding in 4 pilot districts, KP provincial government funding for rest of 22 districts • No co-payment by the beneficiary. 	Donor and provincial government contributions make 75% and 25% of funding respectively
Pooling arrangements	Some national pooling through federal contributions; otherwise through provincial pools (based in turn on national pooling through National Finance Commission Award)	Provincial tax-based pool (federal transfers make approx. 60%)	Donor funding pooled with provincial tax-based pool
Purchasing / payment	Payment against agreed treatment packages. Reimbursement cheques issued by insurance company to service providers as per already agreed package rates.	Payment against agreed treatment packages. Reimbursement cheques issued by insurance company to service providers as per already agreed package rates	Payment against agreed treatment packages. Reimbursement cheques issued by insurance company to service providers as per already agreed package rates.

Other			
Other information e.g. service delivery	Hospitals empaneled (public plus private): 153 (16+137)	Hospitals empaneled (public plus private): 106	Hospitals empaneled (public plus private): 5 (2+3)
Next plans	<ol style="list-style-type: none"> 1. Expansion to all district of Pakistan with enhanced benefit package 2. Incorporation of Primary Health Care services (Pilot). 3. Incorporation of take-home medications in benefit package 	<ol style="list-style-type: none"> 1.. Enhanced benefit package 2. Extension of population coverage with voluntary enrolment option 3. Shifting from household coverage to family coverage as per National Database Registration Authority family tree 	<ol style="list-style-type: none"> 1. Incorporation of priority care in social health protection initiative. 2. Expansion to four additional districts 3. Outpatient care to be incorporated in the benefit package 4. Extension of population coverage in Phase-II