

CATEGORY	:	Transformation Recognition Award
ORGANIZATION	:	Social Security Board (SSB), Myanmar
CONTACT PERSON	:	Mr. Tin Ko Ko Naing Director General Social Security Board Ministry of Labour
NAME OF PROJECT	:	Implementation of Medical Care for Insured Person By Social Security System according to Public Private Partnerships
OBJECTIVE AND NATURE OF PROJECT	:	To increase the confidence of employer and employee and to improve the nation's productivity by strengthening health care for insured workers, they covered under the Social Security System
WHY IT SHOULD BE RECOGNISED	:	<p>Social Security System plays a vital role in one of the social protection processes in Myanmar and it provides insured persons and their family members with more security in social life and health care, normal situation and especially during the Covid-19 pandemic and after the Covid-19 pandemic, Social Security Board has been implementing for medical care for insured persons by Provider Purchaser Split or Public Private Partnerships.</p> <p>Implementation of Medical Care for Insured Persons by Social Security System according to Public Private Partnerships is a practice that has resulted in improvement in the overall effectiveness, efficiency and success of the Social Security Board as well as improving the nation's productivity.</p> <p>Government departments and Government organizations which carry out business and all companies with five workers or more must register the Social Security Township office of the Social Security Board within 30 days after the establishment is being operated, and must pay regular contributions to protect workers in case of sickness, maternity, employment injury and death, etc...</p> <p>The employer must be responsible for registering his new worker within 10 days to cover Social Security Board, it will take the responsibility for the benefits of the registered workers, within 10 days whenever the workers are</p>

	<p>migrants, resign, or deceased.</p> <p>Insured person, Health Care and Cash Benefits can enjoy as contributions monthly upon the employee's wages per month for these systems, 2% from the worker and 3% from the employer with a total of 5% contribute to the Social Security Board for Health and Social Care Insurance System and Employment Injury Insurance System, in accordance with the Social Security Law, 2012. At the end of March, 2020, over (1.49) million workers were under the coverage of Social Security Scheme implemented by Social Security Board.</p> <p>Social Security Board provides medical care for insured persons very important for employee and their family of social life. As insured workers, if they are validly registered and contributed in the Social Security system, they are entitled to receive the following medical treatment rights:</p> <ul style="list-style-type: none"> • Medical treatment and delivery (out-patient, in-patient, medicine, laboratory, transportation in case of referral outside urban areas) for a maximum of 26 weeks for one type of disease and medical care for the first year of the new born; • 50% of Medical treatment cost for retired workers; • Workers can get medical reimbursement on the basis cost of referral to other Public Hospitals/ private hospital (emergency cases) ; • Especially, during COVID-19 pandemic, allowed to receive medical treatment nearby private hospitals and clinics, reimbursement of medical cost. <p>There are three Worker's Hospitals and 92 clinics under social security board to provide free health care services to insured workers, before COVID-19 pandemic. Apart from its own hospital and clinics, the Social Security Board also manages 40 enterprise clinics (i.e. provision of medical supplies) supervised by their respective ministries. Worker's Hospitals are located in urban areas (Yangon and Mandalay). Social Security clinics are present in 13 of the 15 Myanmar states and regions.</p> <p>Social Security Board has many Challenges to provide health care service for insured persons. These are;</p> <ul style="list-style-type: none"> ▪ Insufficient of medical doctors, specialists , staff, nurses and medical officers.
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- Upgrade Workers' Hospitals and clinics.
- Lack of Social Security clinics in many insured workers area.
- Doctors are available in clinics and hospitals, although not in sufficient number/ outside workers' working hours.
- Drugs are available in the main medical store Social Security Board for Workers' Hospitals and clinics are forecasting, ordering drugs and equipment on time.

Therefore, Social Security Board (SSB) needs to incentive service improvement of health care service for insured persons. Later, the number of workers was steadily decreased since the COVID-19 first wave commenced. It means that COVID-19 continues to challenge health services and disrupt social and economic activities for not only employees but also employers. Significantly, the people who were low socio-economic status faced challenges relevant to healthcare service during COVID-19 pandemic.

Therefore, during the Covid-19 Pandemic, the insured person can get free medical care from Social Security clinics and hospitals, they can also get medical reimbursement for treatment from public and private clinics. As a result, it encourages increased the interest of the employers and employees. Currently, some ministries want to cover under the Social Security Scheme.

Medical Reimbursement requests for medicine and diagnostic procedure workers to get outside of the SSB facilities upon referral from the SSB worker's hospitals increased in recent years. Social Security Law, 2012, the SSB may need to implement additional facilities to be able to cater to the health needs of an increasing number of workers.

The challenges and difficulties arising from COVID-19 pandemic encouraged SSB to enhance its role and reputation between insured workers by providing the satisfied healthcare service and supporting cash benefits when the workers faced social and economic challenges.

By doing so, the SSB has been progressively separating two distinct functions: the management of healthcare facilities on the one hand, and the health insurance function on the other hand. There are two main benefits of

	<p>introducing this separation: It clearly allows distinguishing the insurance part from the provider of health services part. It will be then possible to know how much money is allocated to the medical care of the beneficiary, per beneficiary. This element is key in the improvement of the health services provided to beneficiaries because:</p> <ol style="list-style-type: none"> a. It allows for better-allocating resources where they are most needed by beneficiaries, b. It allows better projection of health consumption to ensure the scheme is sustainable. <p>Methodology to improve the SSB medical care scheme and the implementation of PPS in theory / Provider Purchaser Split (PPS) by discussing meeting on Policy Level with Social Security Board, Medical persons, Specialist, state holders of private hospitals and clinics. The following topics were discussed:</p> <ul style="list-style-type: none"> ▪ Selecting providers ▪ Providing accreditation and contracting providers ▪ Negotiating with providers ▪ Controlling cost and ensuring quality ▪ Referral system and Pre-Authorization ▪ Standard Treatment Guidelines and Essential Drugs List ▪ Provider Payment mechanisms <p>The Social Security Board (SSB) has been signed with private hospitals and clinics (Project-level' partnerships) in townships with a large number of workers to provide medical treatment to insured workers, thus the trust and confidence of employer and employee becomes increasing on the Social Security Board. During the Covid-19, the Social Security Board allowed financial benefits to be relaxed, and in terms of medical treatment. According to the ground conditions, medical treatment costs in nearby public hospitals and private hospitals were reimbursed, as well as drug purchase expenses, so that the insured persons would not suffer. The necessary tools and procedures to implement a Provider Purchaser Split (PPS) are;</p> <ul style="list-style-type: none"> ▪ Contract/ Agreement ▪ Accreditation form ▪ Claim forms /Invoice
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- Manual of procedures
- Medical audit procedures
- Several monitoring tools

Every insured patient can visit and have delivery care and gynecology operations in SSB-Provider Clinics. All of SSB-Provider Clinics are available for the insured person when they suffered social contingency.

There are two types of Project-level' partnerships or SSB collaborates with Private Hospitals and Clinics in the way of Provider Purchaser Split with two payment systems;

- a. **Fee-for-Service Payment:** Paying at a fixed rate based on the number of visits a patient makes. (provide medicine/ 4000 K for one time)
- b. **Capitation Payment:** Prepaying a fixed amount of money for a patient to receive services over a period of time.((en-roll / non- roll, 4554 K for one person , 75% (4) time/ 25%)

In addition, with the target of such responsibilities, SSB contracted with the private provider clinics for the healthcare of the insured person. The healthcare services SSB purchased are outpatient care (OPD care and Specialist OG care) and inpatient care (Delivery care). After Covid-19, the Social Security Board has been contracting with private hospitals and clinics to provide medical treatment for insured persons. Therefore, the contracted hospitals and clinics have become abundant and insured persons have the right to receive medical treatment at nearby hospitals or clinics without days off.

Number of patients in SSB (hospitals and clinics) and Private hospitals and clinics

Fiscal Year	Number of Patients										
	Yangon Worker Hospital		Htantabin Worker Hospital		Mandalay Worker Hospital		SSB Clinics	PPS Clinics	Fee For Service Clinics (OPD)	Total	
	In	Out	In	Out	In	Out				In	Out
10/2019 to 9/2020	2,597	42,508	643	5,665	2,277	31,193	482,185	7,846	266,167	5,517	835,564
10/2020 to 9/2021	789	19,442	456	2,068	64	3,450	232,414	18,998	265,448	1,309	541,820
2021 Mini Budget (10/2021 to 3/2022)	229	21,326	17	377		5,757	115,687	13,656	159,165	246	315,968
2022-2023 (4/2022 to 3/2023)	1,051	55,172	15	1,450	138	15,742	218,208	100,466	371,853	1,204	762,891
2023-2024 (4/2023 to 2/2024)	1,500	59,303	113	2,245	378	15,529	193,194	127,617	406,601	1,991	804,489

	<p>At present, there are 1,236,082 insured workers from 34,510 establishments under the Social Security Scheme. Therefore, the insured persons in the townships with a large number of workers, who are covered by the Social Security Board, have the right to receive medical treatment at the nearby clinics contracted by Social Security without having to take days off work.</p> <table><tr><th>No.</th><th>About</th><th>Before Covid-19 Pandemic</th><th>AfterCovid-19 Pandemic</th><th>Progress</th></tr><tr><td>1</td><td>Township Office</td><td>78</td><td>78</td><td></td></tr><tr><td>2</td><td>Coverage Area</td><td>116</td><td>124</td><td>8</td></tr><tr><td>3</td><td>SSB Hospitals</td><td>3</td><td>3</td><td></td></tr><tr><td>4</td><td>SSB Clinics</td><td>96</td><td>74</td><td>-22</td></tr><tr><td>5</td><td>Employer’s Clinics (above 500 employee) Provider</td><td>40</td><td>61</td><td>21</td></tr><tr><td>6</td><td>Purchaser Split (with Capitation) Provider</td><td>26</td><td>26</td><td></td></tr><tr><td>7</td><td>Purchaser Split (with Fee For Service)</td><td>12</td><td>49</td><td>37</td></tr><tr><td>8</td><td>Specialist (OG,OPD) Care</td><td>9</td><td>16</td><td>7</td></tr><tr><td>9</td><td>Traditional Clinics</td><td>1</td><td>1</td><td></td></tr></table>	No.	About	Before Covid-19 Pandemic	AfterCovid-19 Pandemic	Progress	1	Township Office	78	78		2	Coverage Area	116	124	8	3	SSB Hospitals	3	3		4	SSB Clinics	96	74	-22	5	Employer’s Clinics (above 500 employee) Provider	40	61	21	6	Purchaser Split (with Capitation) Provider	26	26		7	Purchaser Split (with Fee For Service)	12	49	37	8	Specialist (OG,OPD) Care	9	16	7	9	Traditional Clinics	1	1	
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SUMMARY OF THE PROJECT	<p>Currently, the contracted hospitals and clinics have become abundant and insured persons have the right to receive medical treatment at nearby hospitals or clinics without days off.</p> <p>Thus the trust and confidence of employer and employee becomes increasing on the Social Security Board. SSB could reduce the risks on providing medical care for insured persons, as a result of contracting with the private hospitals and clinics by the systems of PPP/PPS. We can provide better medical treatment service for insured persons, competition between providers could create incentives to improve services.</p> <p>Therefore, every insured persons , as a member of Social Security, has the right to proudly, covering to unfairness and reduce the poverty and entitle to normally income to Social Security” and effectiveness for secure their Social Life in Society.</p> <p>The Social Security Board has also been implementing the purpose of the 2012 Social Security law 2012, including one of five “Causing to support the development of the State's economy through the increase of production to enjoy</p>																																																		

	more security in social life and health care of workers who are major productive force of the Union by the collective guaranty of the employer, worker and the Union for enabling to fulfill health and social needs of the workers”.
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