Ministry of Public Health
Islamic Republic of Afghanistan

Health Economics & Financing Directorate

EMIS

Expenditure Management Information System

May 19, 2019

Presented by: HEFD, EMIS team

Outlines

- Overview
- Software tool
- Implementation Status
- A look at the data
- EMIS data use cases
- Challenges

Overview

A tool for collecting, processing, and analyzing health expenditure data

EMIS

The EMIS is designed to collect and report financial data related to health services within the government of Afghanistan.

- **Timely & Accurate for** MoPH & donor reporting
- **Routine/Improved Expenditure** Reporting for NHA
- **Improved** Financial data analysis

Objectives

Support Financial Accountability/Transparency

In the health system

Support Routine Expenditure Data Collection

to NHA

Ensure Quality & Comparability

Of health expenditure information

Objectives …

Link Financial Inputs

& expenditures with health outputs

Exploit Enabling Technologies

In the collection, processing, analysis

Of health expenditure information

Establishing processes and structures to

Decrease the Burden of Financial Reporting

And ensure optimal use of health expenditure data

Scope of EMIS

Ministry of Public Health	Ministry of Higher Education	Ministry of Defense
Ministry of Interior	International Donors (off budget)	Non-governmental Organizations
National Security Department	Kabul Medical University	Ministry of Education

Health Care Expenditures across Afghanistan

EMIS is

A tool for collecting health expenditures by implementers.

A complement to AFMIS and FMIS.

Intended to improve:

1) *transparency and accountability*.
2) increase synergy and collaboration across line ministries

EMIS is not

A replacement of accounting software.

A replacement of AFMIS or FMIS.

A tool to facilitate financial management

A tool to be used for auditing.

EMIS reporting details

National

Overall trend analysis, national level expenditure for each line of expense, comparison with other.

Province

Trend analysis, comparison, average.

District

Trend analysis, comparison between districts within the same district and other district, average, total, seasonal variation.

Health Facility

Trend analysis, comparison, average, total, seasonal variation, service utilization.

Software tool

A tool for collecting, processing, and analyzing health expenditure data

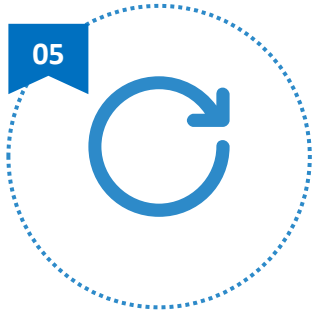
EMIS Modules

Contract

Reporting Period

CoA Mapping

Budget Plan

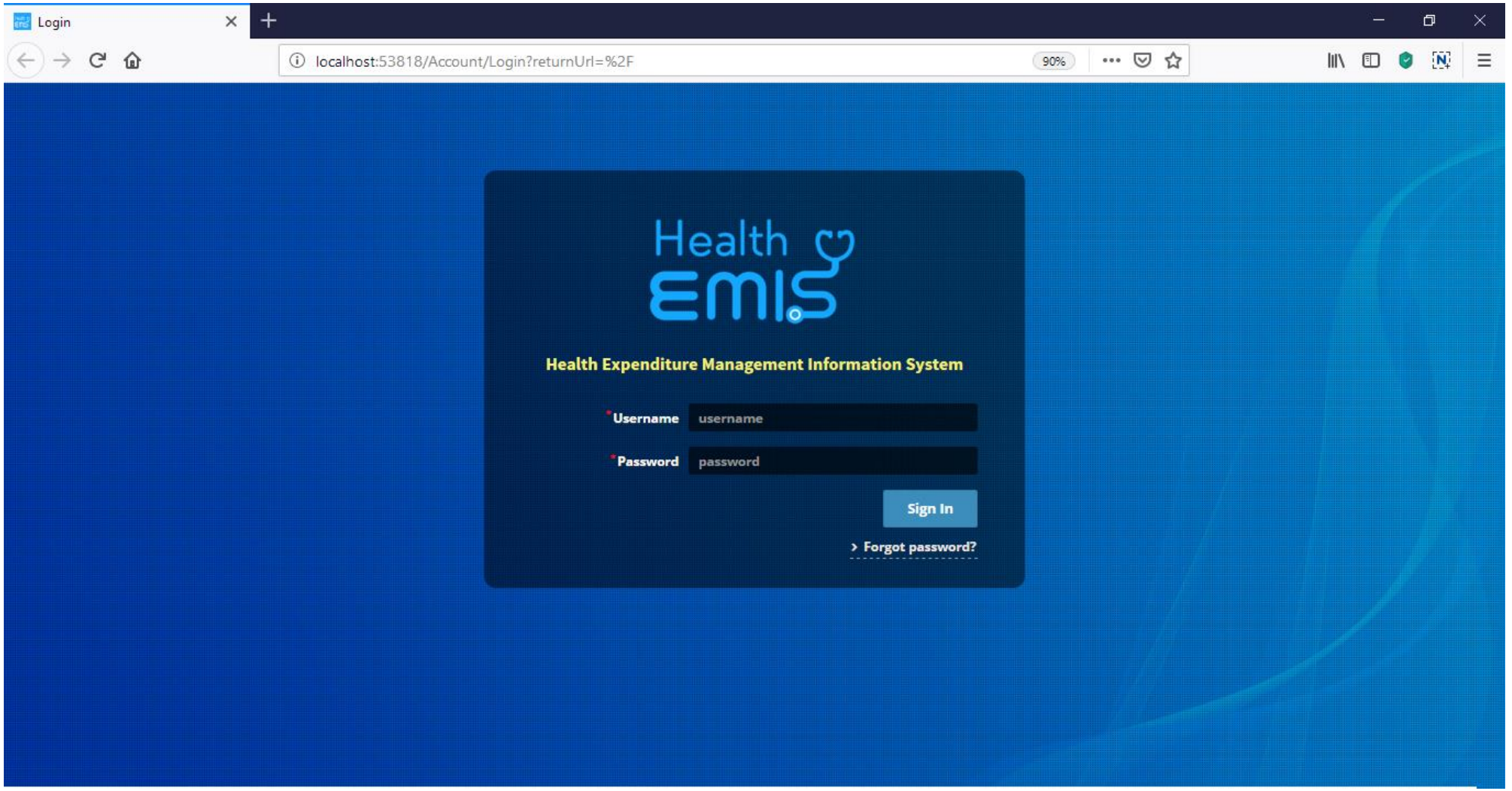


Transactions

Desktop version of EMIS

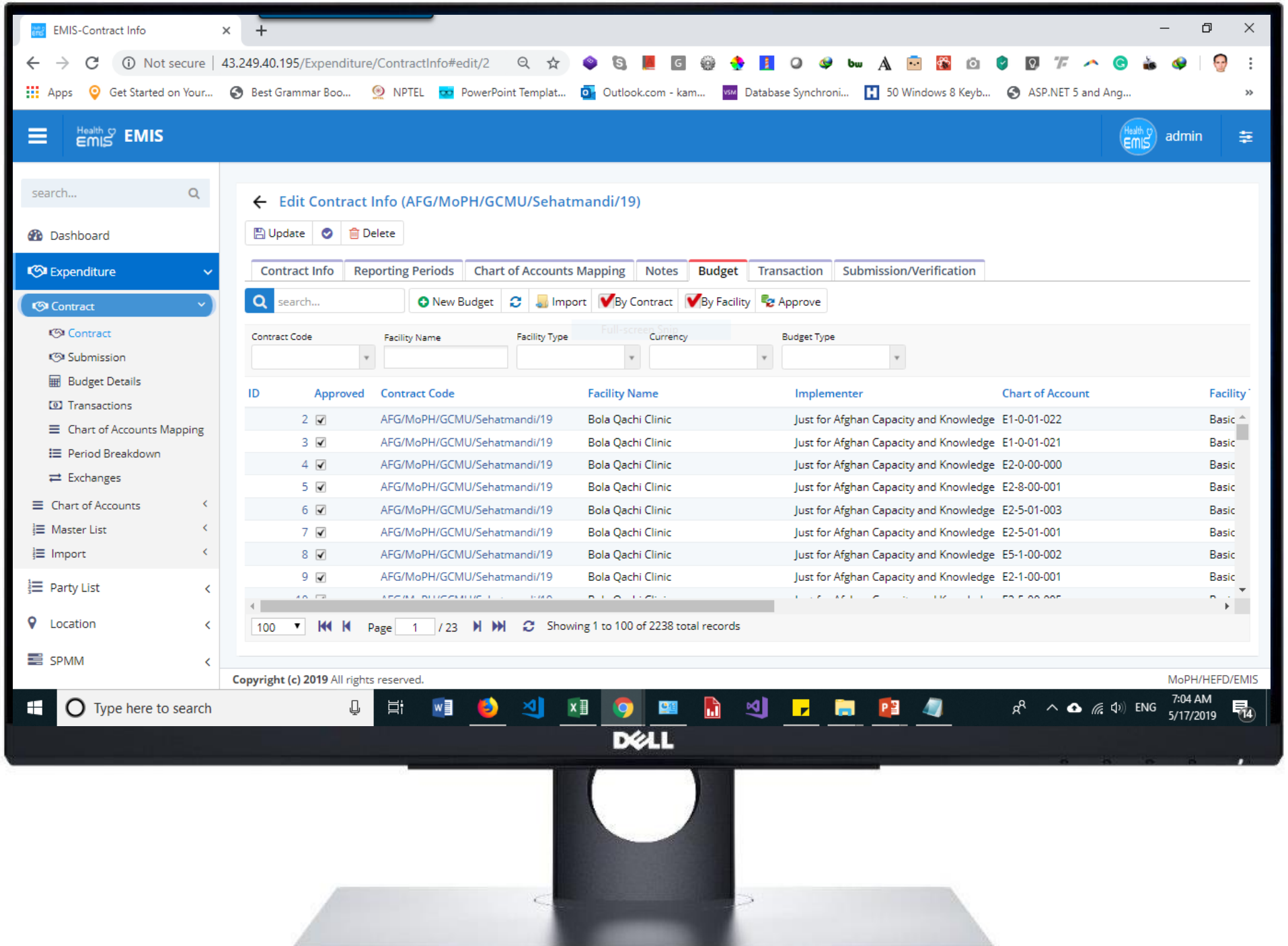
1. Microsoft Access based
2. Implemented and used since 2014
3. Support direct data entry and import
4. Feature to easily update and integrate
5. Using excel to speed up data transfer between implementer and EMIS data

Web-based version of EMIS



Benefits of the web-based version

- Uses all useful features of desktop version
- Highly secure and user roles protected
- Can be accessed from anywhere
- Implementers will have access only their own data
- Unlimited Projects
- Unlimited Health Facilities
- Saves Time and Easy to use
- Communicable with other databases, HMIS, DHIS 2
- Can be accessed by phone, computer, tablet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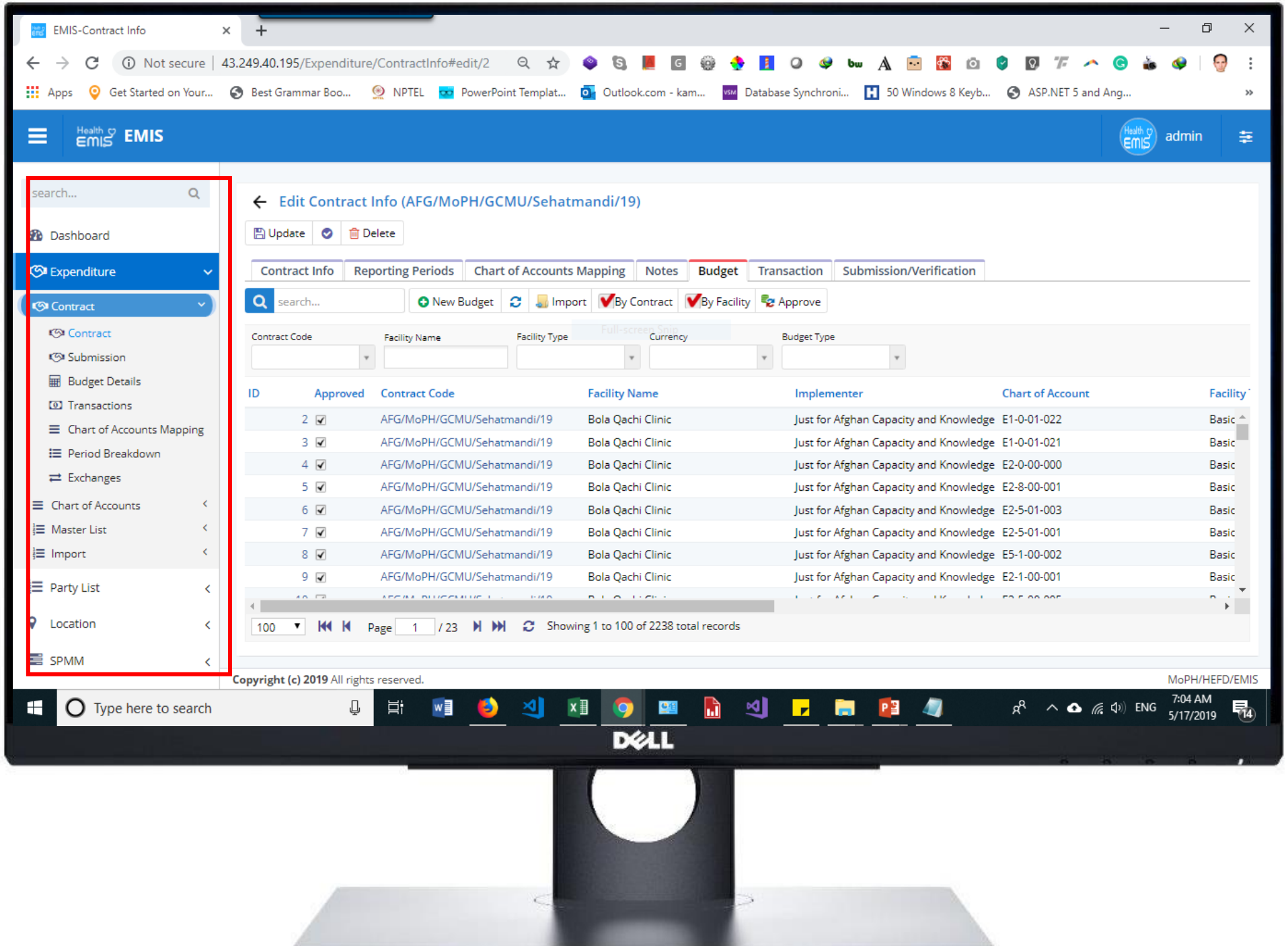
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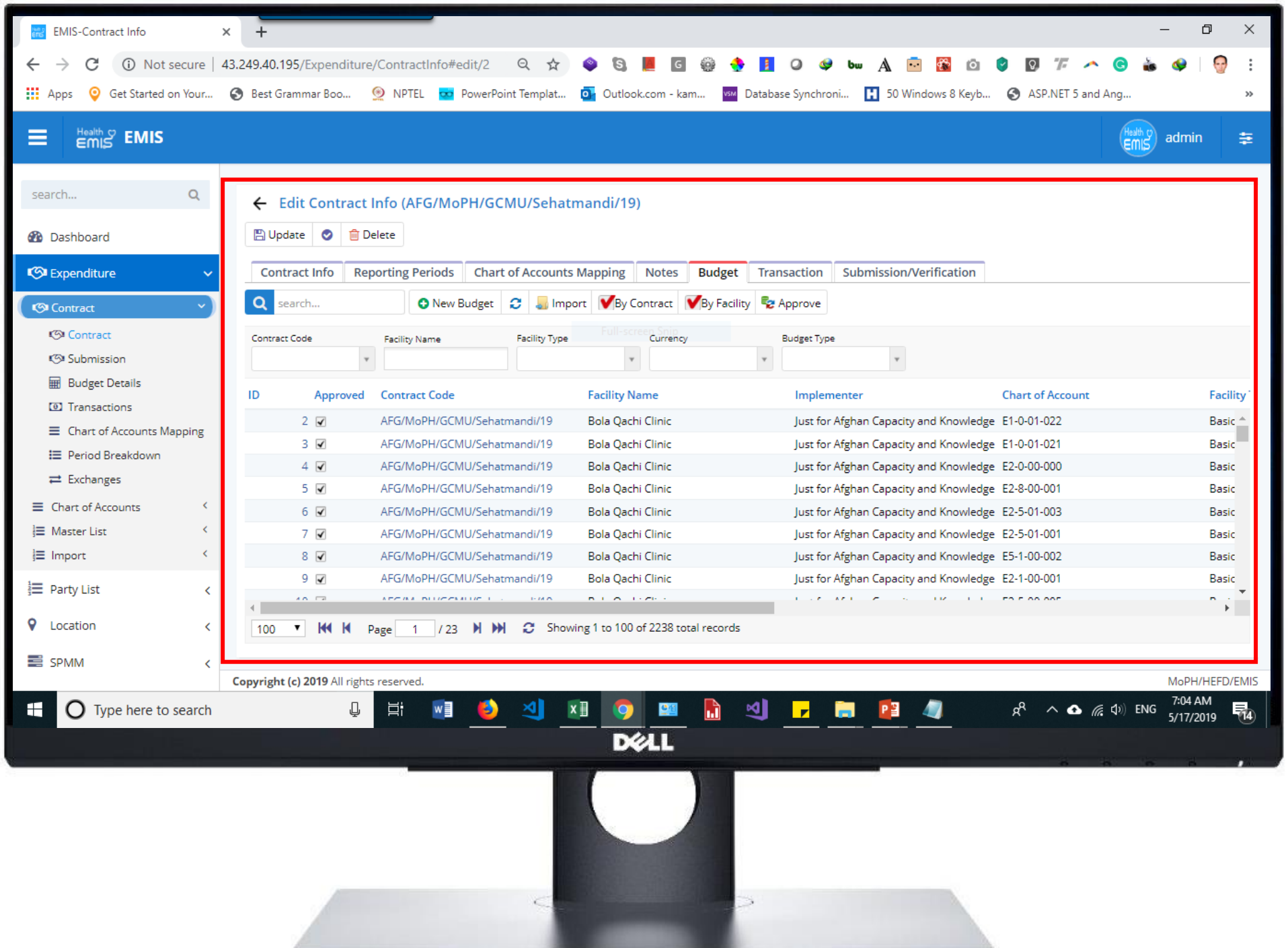
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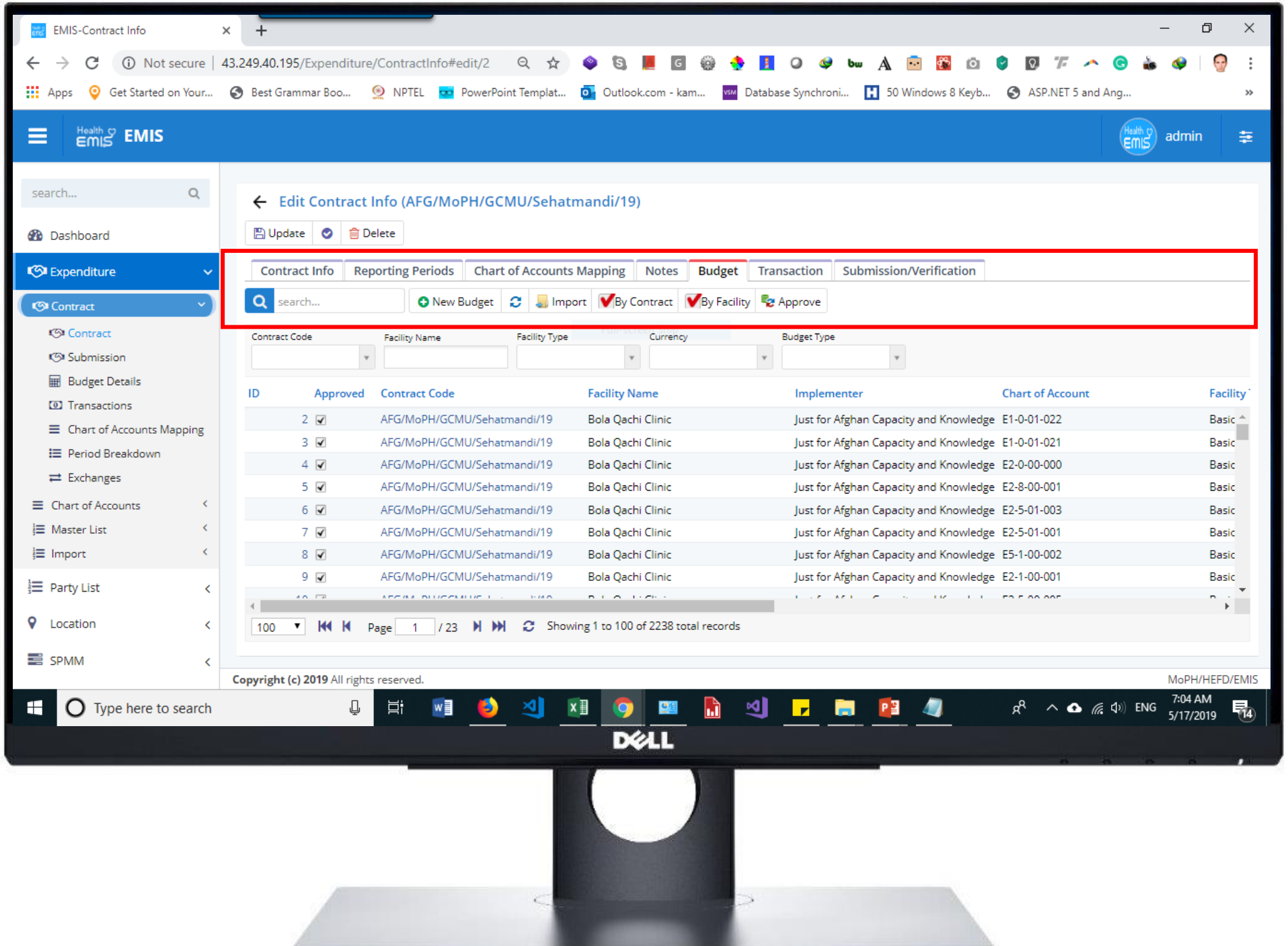
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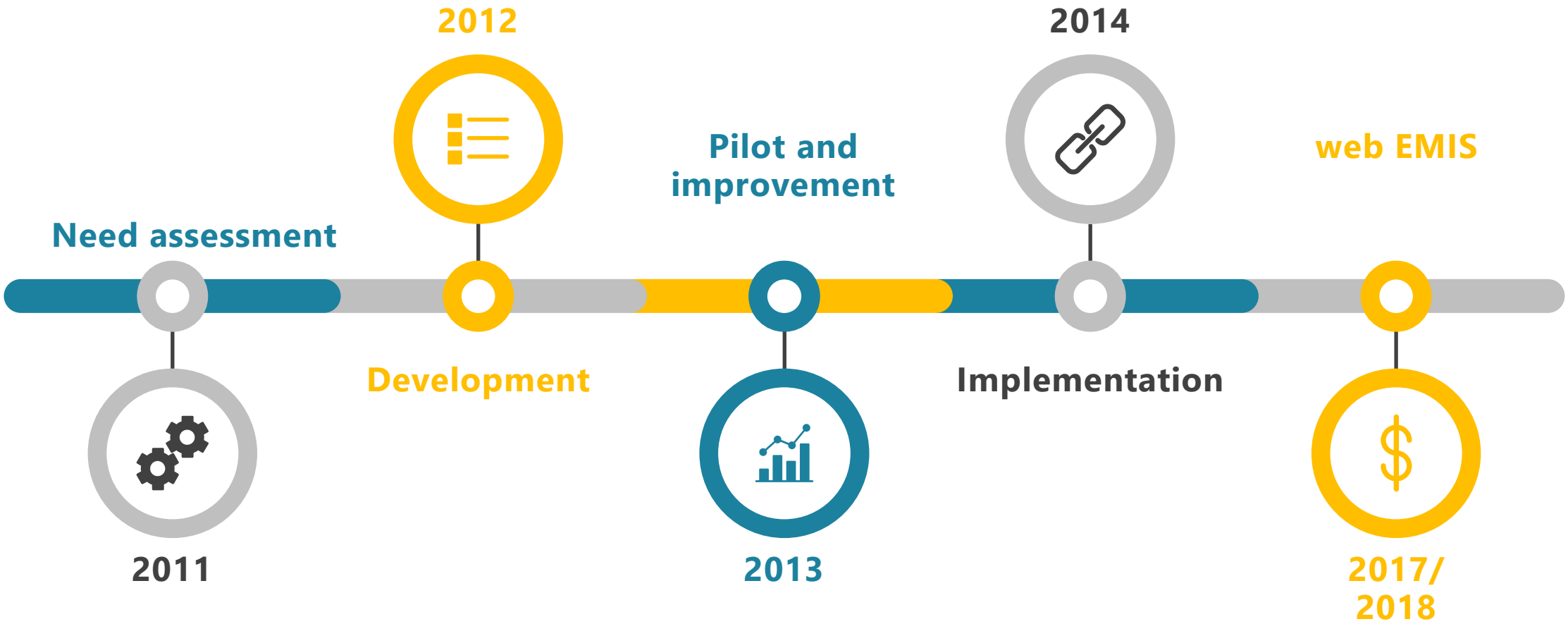
Implementation

A tool for collecting, processing,
and analyzing health expenditure data

Implementation



Implementation => BPHS/EPHS projects

Province	Project	2014	2015	2016	2017	2018	=>2019
Badghis	SEHAT I	✔	✔	✔	✔	✔	
Balkh	SEHAT I	✔	✔	✔	✔	✔	
Dykundi	SEHAT I	✔	✔	✔	✔	✔	
Farah	SEHAT I	✔	✔	✔	✔	✔	
Ghor	SEHAT I	✔	✔	✔	✔	✔	
Helmand	SEHAT I	✔	✔	✔	✔	✔	
Kunar	SEHAT I	✔	✔	✔	✔	✔	
Kunduz	SEHAT I	✔	✔	✔	✔	✔	
Laghman	SEHAT I	✔	✔	✔	✔	✔	
Logar	SEHAT I	✔	✔	✔	✔	✔	
Nangarhar	SEHAT I	✔	✔	✔	✔	✔	
Nimroz	SEHAT I	✔	✔	✔	✔	✔	
Nooristan	SEHAT I	✔	✔	✔	✔	✔	
Samangan	SEHAT I	✔	✔	✔	✔	✔	
Saripul	SEHAT I	✔	✔	✔	✔	✔	
Urozgan	SEHAT I	✔	✔	✔	✔	✔	
Wardak	SEHAT I	✔	✔	✔	✔	✔	
Zabul	SEHAT I	✔	✔	✔	✔	✔	

Province	Project	2014	2015	2016	2017	2018	=>2019
Badakhshan	SEHAT II		✔	✔	✔	✔	
Baghlan	SEHAT II		✔	✔	✔	✔	
Bamyan	SEHAT II		✔	✔	✔	✔	
Faryab	SEHAT II		✔	✔	✔	✔	
Ghazni	SEHAT II		✔	✔	✔	✔	
Hirat	SEHAT II		✔	✔	✔	✔	
Jawzjan	SEHAT II		✔	✔	✔	✔	
Kabul	SEHAT II		✔	✔	✔	✔	
Kandahar	SEHAT II		✔	✔	✔	✔	
Khost	SEHAT II		✔	✔	✔	✔	
Paktika	SEHAT II		✔	✔	✔	✔	
Paktiya	SEHAT II		✔	✔	✔	✔	
Takhar	SEHAT II		✔	✔	✔	✔	

Kapisa, Parwan, Panjshir not implemented

EMIS training workshops

5 Rounds of Training

For NGO Finance Staff

100 Staff Trained

1 Orientation

For MoPH Staff

20 Participants

30 On the Job Training

For NGO Finance Staff

50 Staff Trained

5 Regional Workshops

140 Participants

A look at EMIS data

A tool for collecting, processing, and analyzing health expenditure data

% of expenditure made on salary

SHC

58%

MHT

55%

BHC

59%

CHC

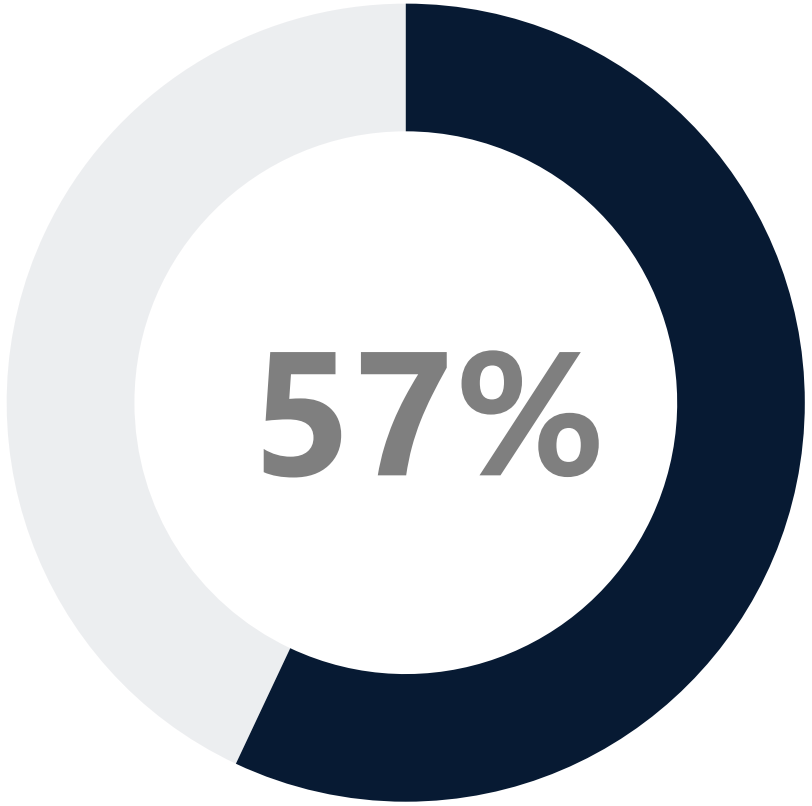
61%

DH

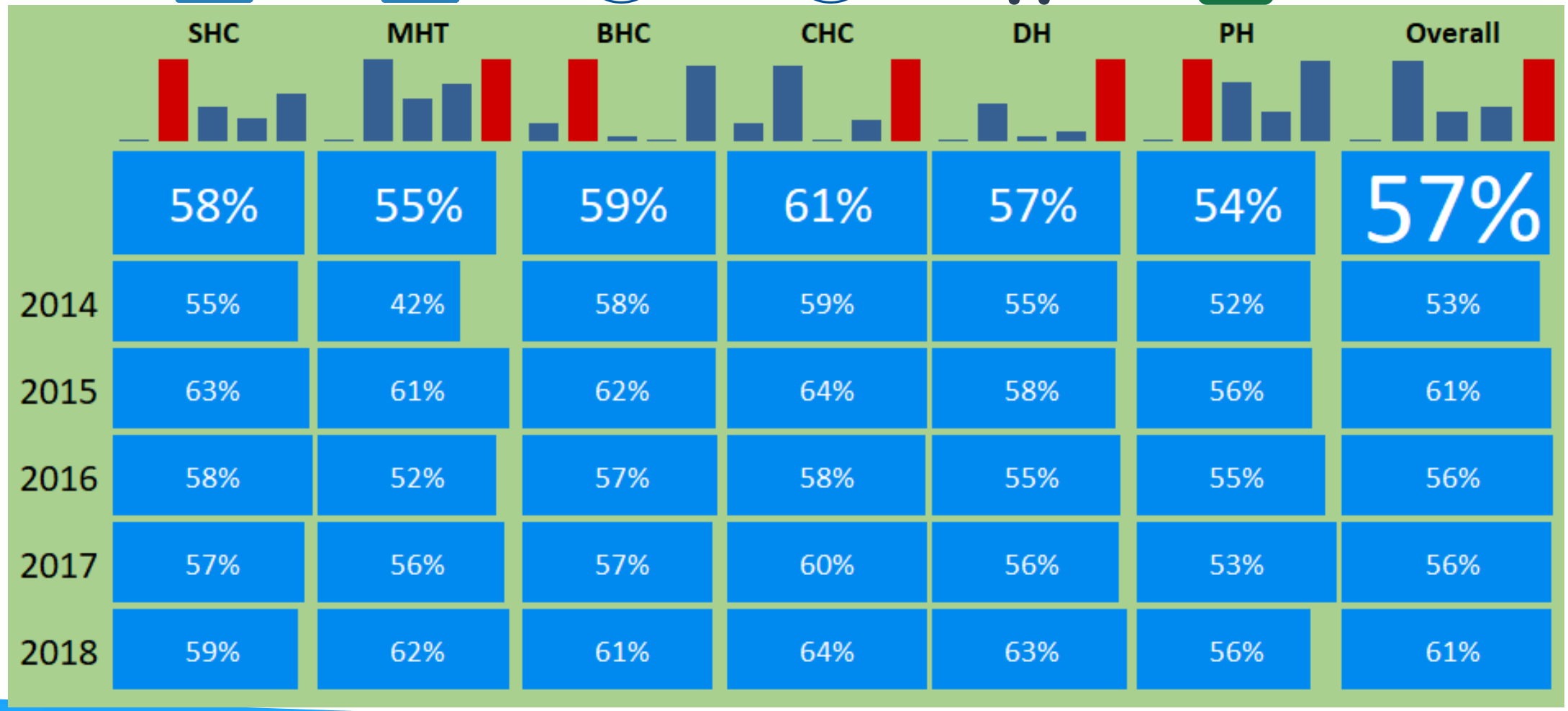
57%

PH

54%



% of expenditure made on salary



	SHC	MHT	BHC	CHC	DH	PH	Overall
	58%	55%	59%	61%	57%	54%	57%
2014	55%	42%	58%	59%	55%	52%	53%
2015	63%	61%	62%	64%	58%	56%	61%
2016	58%	52%	57%	58%	55%	55%	56%
2017	57%	56%	57%	60%	56%	53%	56%
2018	59%	62%	61%	64%	63%	56%	61%

% of expenditure made on medicine

SHC

18%

MHT

22%

BHC

18%

CHC

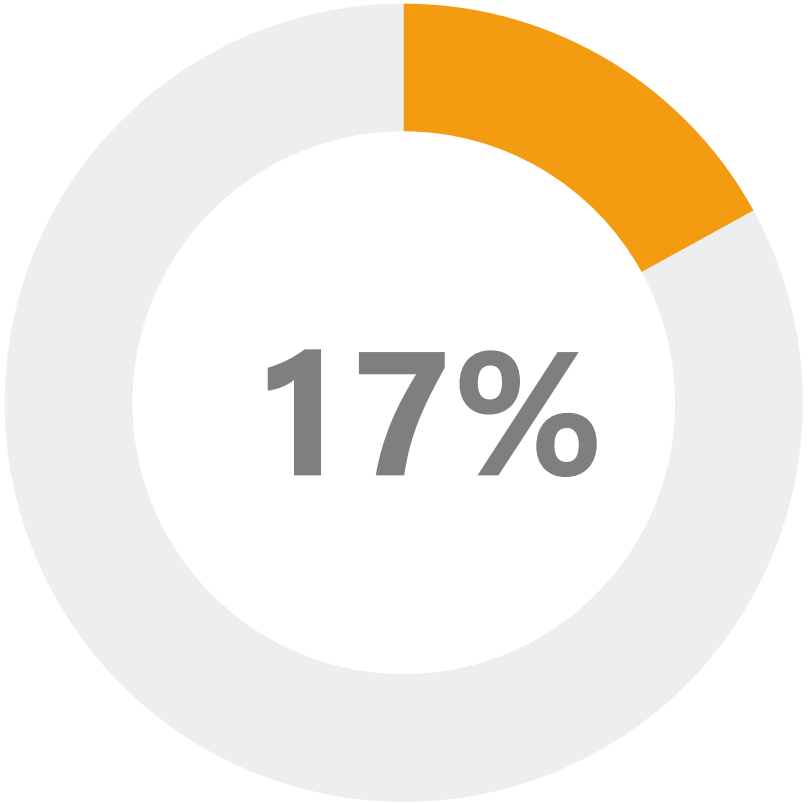
13%

DH

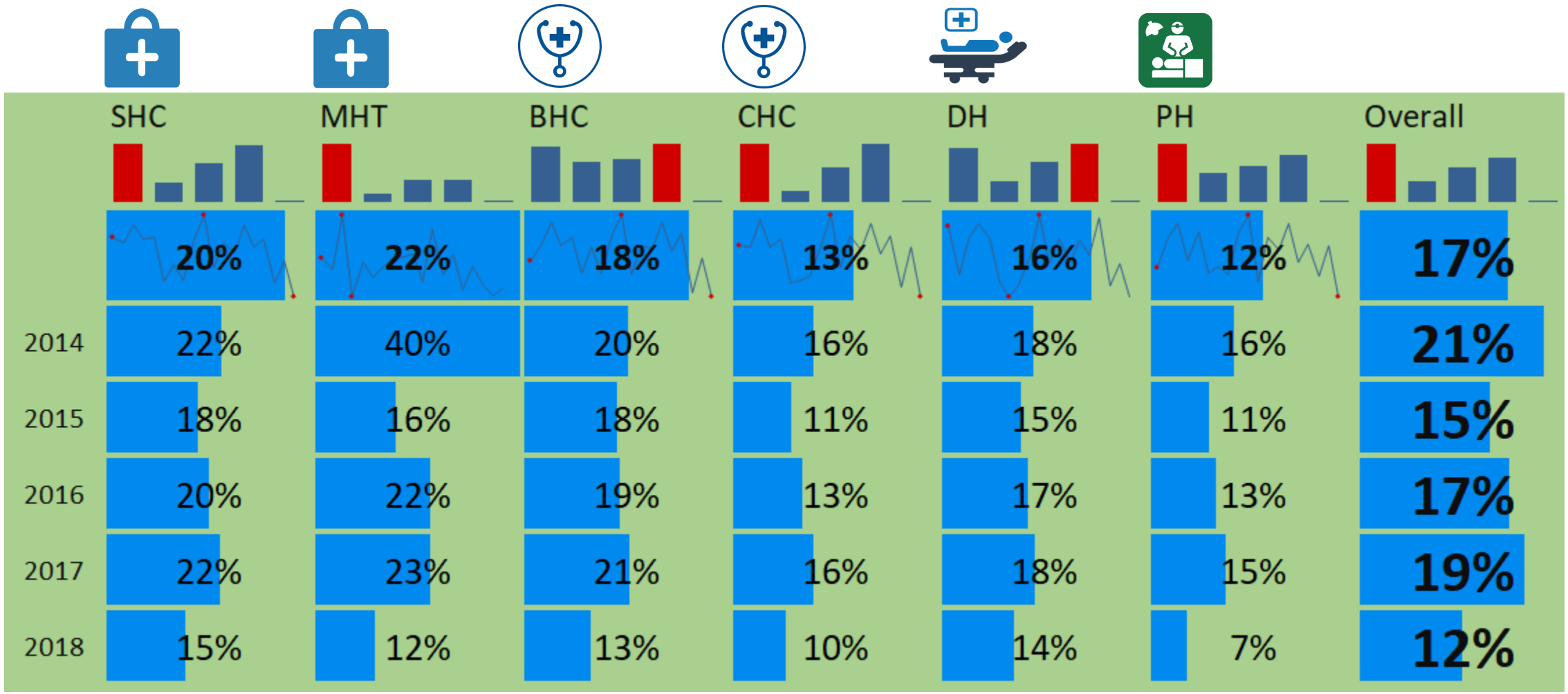
16%

PH

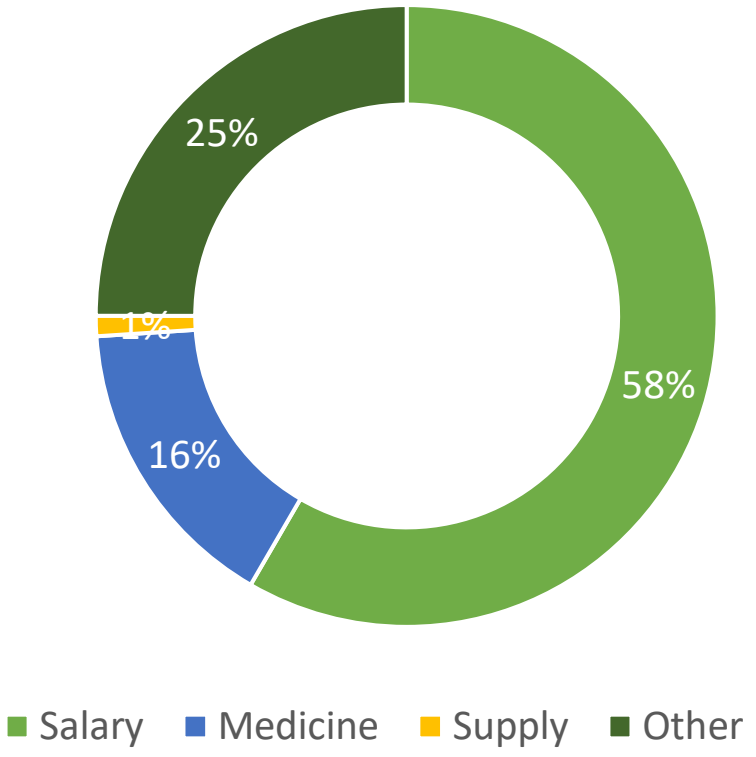
12%

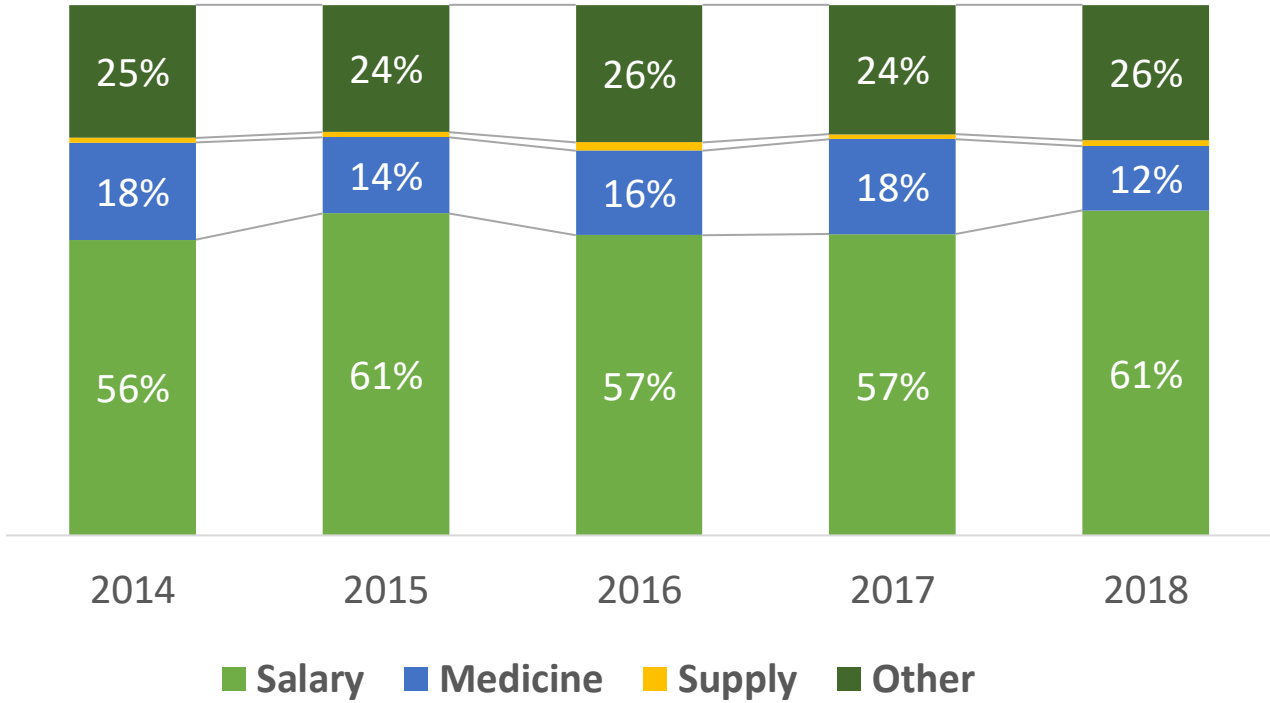


% of expenditure made on medicine

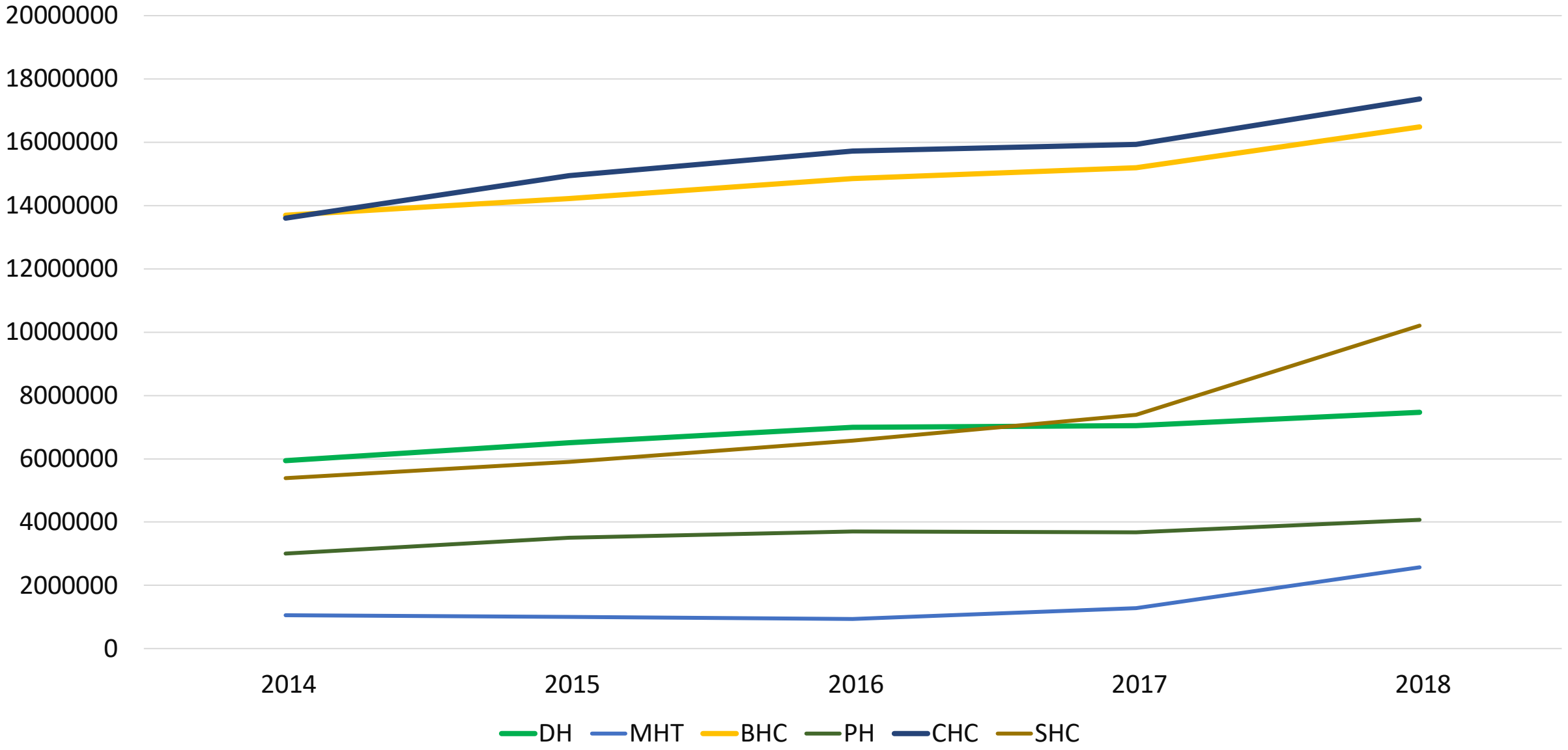


Expenditure by major expense line





Trend of OPD visits/clients



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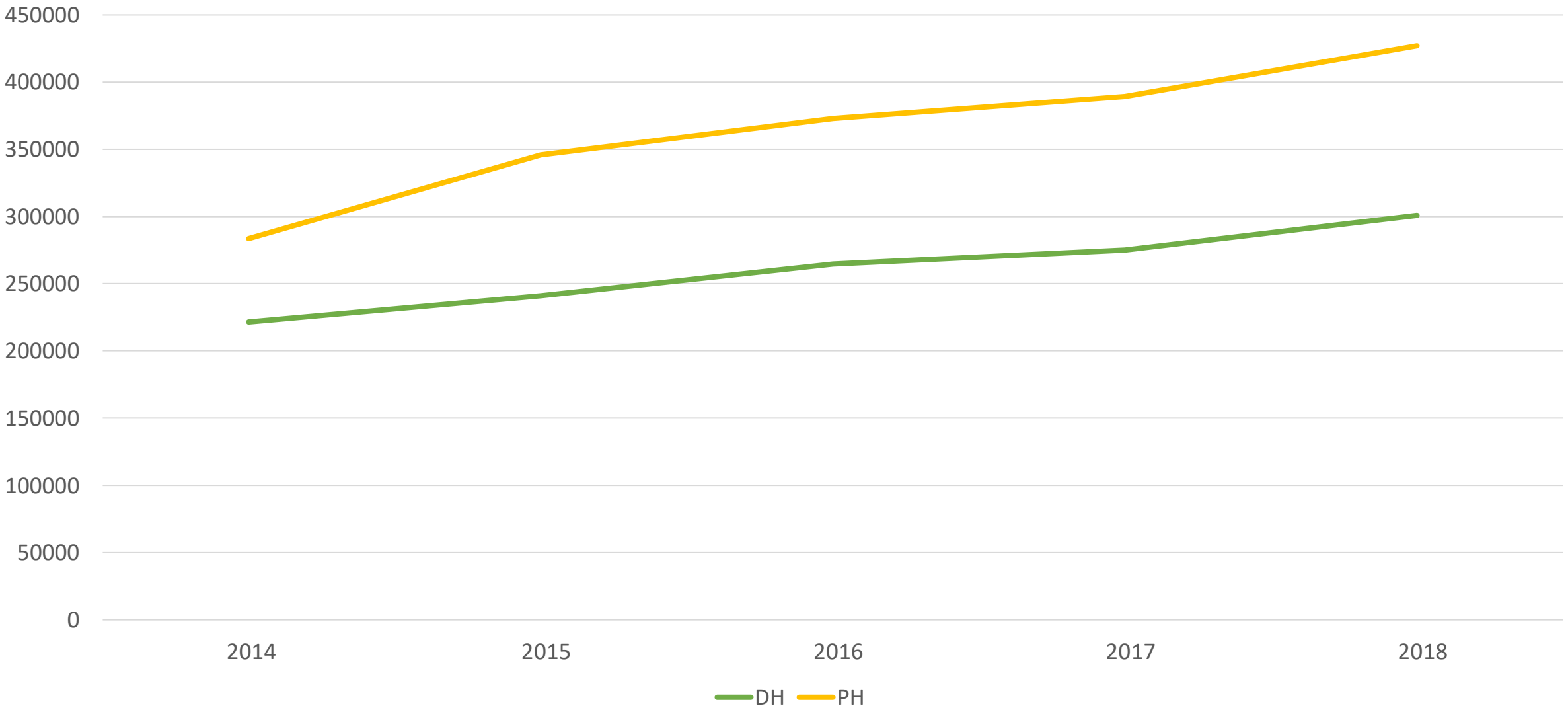
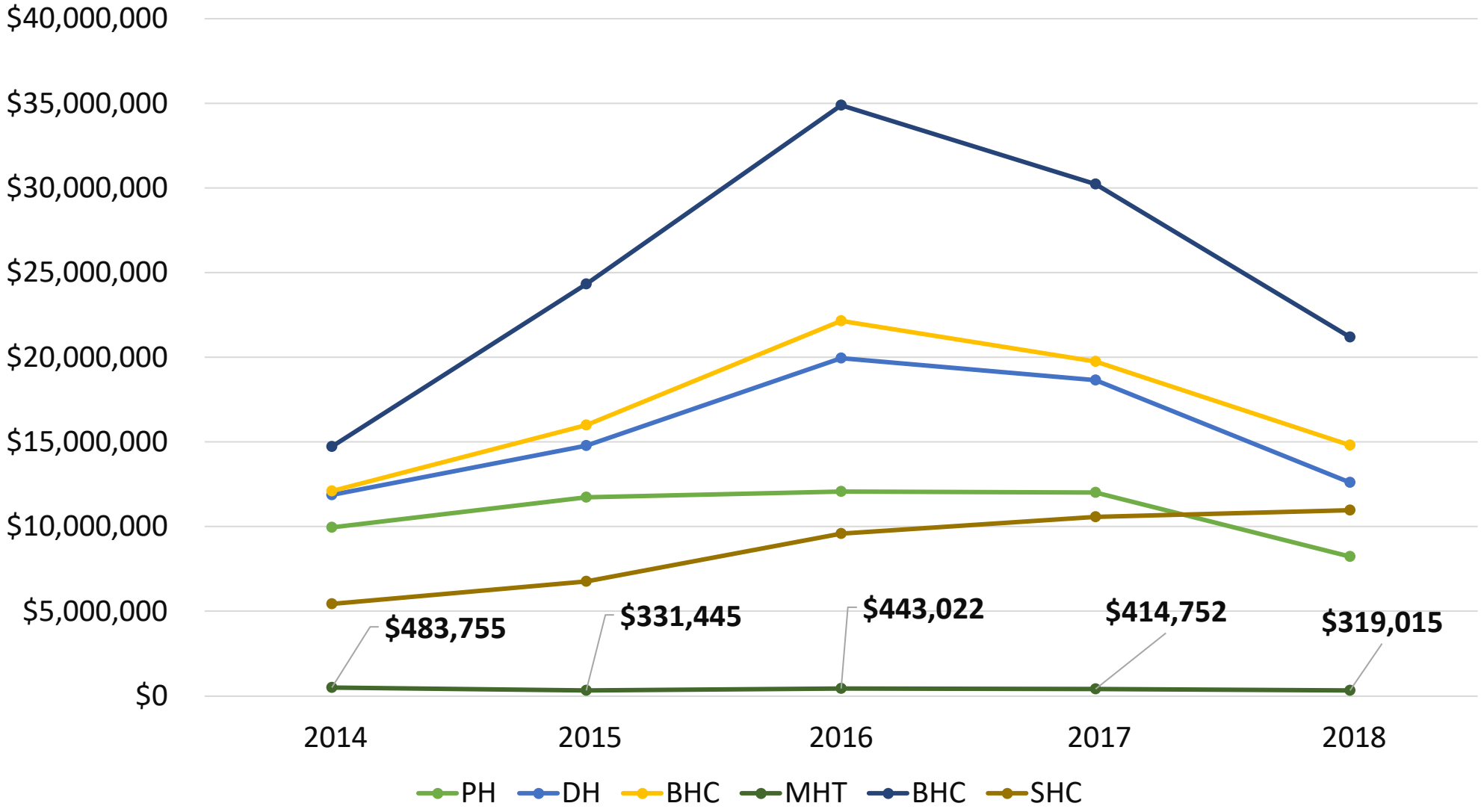
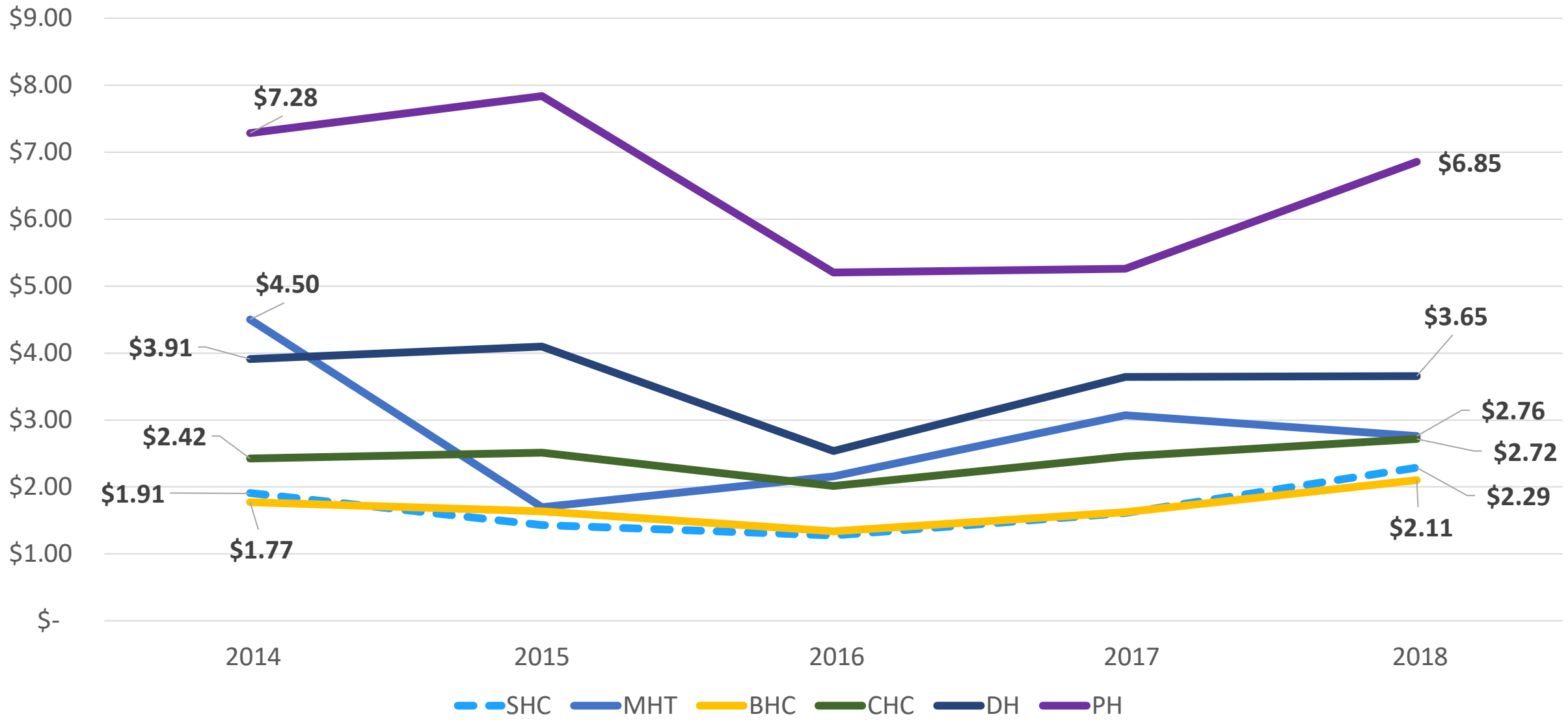


Total expenditure by type of facility

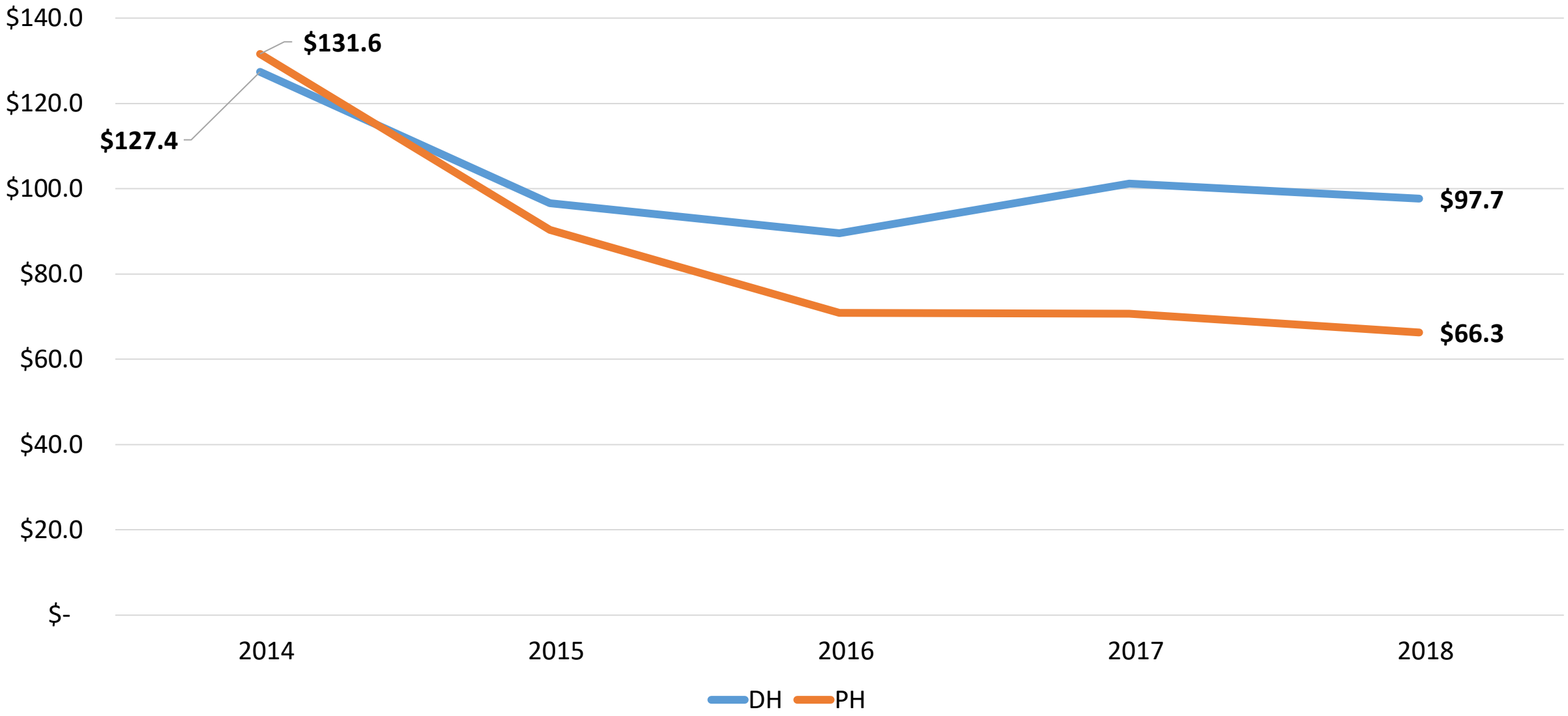


- *2014 to mid 2015 only 18 provinces implemented EMIS*
- *Mid 2015 to mid 2017 31 provinces implemented EMIS and submitted all reports*
- *Mid 2017 and 2018 31 provinces using EMIS but partial report received*

Expenditure per OPD visit($)



Expenditure per IPD visit($)



EMIS data use

1. Service costing for P4P (Sehatmandi)
2. BPHS Efficiency analysis
3. IPEHS costing
4. National Health Accounts (NHA)
5. BPHS Normative Costing
6. Data requests by donors

Challenges

1. Shortage of human resources/job security
2. Inadequate capacity at NGO level

Thank you for your attention

Sustainability of EMIS?