

Joint Prakas on
Provider Payment Mechanism for
Social Health Insurance and Occupational Risk Insurance

ANNEX 1

Annex 1 describes a case-based payment method to be applied to health facilities contracted with the National Social Security Fund (NSSF) for Social Health Insurance and Occupational Risk Insurance schemes. The overview of this case-based payment method is provided in the table below.

1. **Number and category of cases** (column 1 in the table): There are in total 36 case groups divided in four levels (or categories) of care, as described in the Ministry of Health's Guidelines on Minimum Package of Activities (MPA) and Complementary Package of Activities (CPA): MPA, CPA level 1 or CPA1, CPA level 2 or CPA2 and CPA level 3 or CPA3.
2. **Case code** (column 2 of the table): A code of three consonants and one number is given to each case category. The three consonants are mostly the three first characters of the case name, which can be considered as abbreviated name of the case, whereas the number indicates the level of care: 0 = MPA, 1 = CPA1, 2 = CPA2 and 3 = CPA3. The case code will be mainly used for ICT system to generate data and facilitate monitoring, evaluation and reporting as well as claim and payment process.
3. **Case name** (column 3 of the table): In addition to the code, there is a name for each case group or case name. The case name can be used in combination with the case code for monitoring, evaluation, reporting, and claim and payment purposes.
4. **Case description/definition** (column 4 of the table): A practical case description/definition is provided for each case group in order to allow defining and classifying patients or health service users by case group. Practically, the case description/definition is enough for contracted health facilities to classify each patient or health service user by case group.
5. **Possible health conditions/diagnoses** (column 5 of the table): the list of possible health conditions/diagnoses complements case description/definition, and allows contracted health facilities exercising diagnostic-related grouping toward a diagnostic related group payment method in the future.

Provided that this list of possible health conditions/diagnoses is not comprehensive yet, the contracted health facility can just refer to the practical case description/definition for cases whose medical condition/diagnosis does not match with the provided list of health conditions/diagnoses. Hospitalized cases (inpatients) will be defined at discharge (authorized discharged, referral or dead). For cases which are admitted and receive care from more than one department (ward) during the hospitalization will be considered as a

case which is the most expensive one, e.g. one case which is first admitted in emergency ward, then in surgical ward and finally is operated should be considered as a case of major surgical intervention, and be paid accordingly for this case only.

6. **Payment amount** (column 5 of the table): refers to the amount of money (in Riels) to be paid to the contracted health facility for each case.¹ In principle, this amount of payment will cover the cost of all provided medical and ancillary services which are professionally needed for caring and treating the case, and are included in the benefit package, as defined by the *Prakas* on Benefit Package and the contract between NSSF and the health facility. However, this payment will not cover the cost of transport (ambulance) and other expensive ancillary services which are only available in a limited number of health facilities. For these services, please refer to (exceptional) fee-for-service payment method in Annex 2. For national hospitals, NSSF can consider paying them more than the indicated amount for CPA 3 level (between 100%-150%). For similar reason, NSSF can pay private health facilities which NSSF has no choice to contract them (for the reason of no reliable public facilities) up to 130% of the indicated amount for relevant level of care.

In practice, and for quality improvement purpose, NSSF has the right to pay less or more than the indicated payment amount (between 80%-120%) according to the level of quality of services to be measured or assessed with a reliable mechanism.

7. **Classification of health facilities:** in order to be able to apply this case-based payment method, NSSF needs to assess and classify each contracted health facility into MPA, CPA1, CPA2, CPA3 level or a mixture of them, based on the scope and quality of services the facility can provide. A health facility can be classified in two or more levels (mixed level): e.g. for a health center with beds, its outpatient services can be considered as MPA level, while its inpatient care can be considered as CPA1 level. A CPA1 hospital which can provide major surgical interventions (operations), such operation services can be classified as CPA2 major surgical interventions and the rest is considered as CPA1 level. A health center located in the compound of or under the management of a referral hospital should be contracted as an MPA facility if its services do not differ from others.

¹ The current per case payment amount is calculated based on the average cost without government subsidies estimated by the health center and hospital costing studies and is adjusted by level, taking into account the user fee prices and payment rates applied by health equity funds and HIP. In order to ensure the efficiency and acceptability of the payment method, this proposed payment amount can be re-adjusted after one year of testing.

No.	Code	Case name	Case description/definition	Possible medical conditions/diagnoses	Payment amount in Riels
1	CONO	MPA outpatient consultations	New and follow-up outpatient consultations at a health center. The consultation services include: consultation booklet, necessary clinical services (medical education/counseling, interrogation and physical exam), ancillary services (malaria rapid test, TB smear), and treatment (prescribed medicines). <i>Follow-up treatment of TB (DOTS) and leprosy is included in this case group</i>	Common cold and other uncomplicated acute respiratory infections (ARI), diarrhea without severe dehydration, uncomplicated malaria, suspect and uncomplicated TB/leprosy, uncomplicated typhoid fever, acute conjunctivitis, otitis media, dental caries, intestinal worms, common sexually transmitted infection syndromes, skin diseases, headache, fatigue, unknown fever	4,000
2	REFO	MPA emergency and referrals	First aid and referral services at a health center, including: referral slip, a serum infusion and other necessary monitoring and first aid services, but excluding fee for ambulance or other form of transportation	Complicated ARI (severe pneumonia/asthma), chronic diarrhea or diarrhea with severe dehydration, complicated malaria, (suspect) severe pulmonary and extra pulmonary TB, complicated typhoid fever, suspect dengue, hypertension with complication/stroke, complicated delivery, drown, shock, convulsion, coma, bone fracture, severe burn or bleeding, snake bite, dog bite, other life threatening insect bites, and other complicated medical conditions that cannot be managed at the health center	6,000
3	MINO	MPA minor surgical activities	Minor surgical procedures, including cleaning, dressing, suture and other necessary services for a minor surgical condition at a health center	Normal abscess, small wound, mild burn	12,000
4	PREO	MPA preventive services	New and follow-up birth spacing (including counseling & modern contraceptive methods such as condom, pill, injectable, IUD), antenatal care consultation (including voluntary counseling & testing for HIV), postnatal care consultation, post-abortion care, and vaccination at a health center	Antenatal care, birth spacing, postnatal care, post-abortion care, vaccination	10,000

5	DELO	MPA delivery	Attendance and other necessary services (including oxytocin injection as part of active management of the third stage of labor or AMTSL, suture of episiotomy, immediate newborn care and resuscitation, immediate postnatal monitoring and care) for an uncomplicated delivery at a health center	Normal delivery	80,000
6	CON1	CPA1 outpatient consultations	New and follow-up outpatient consultations, including <i>referral consultation</i> , at a CPA1 referral hospital. The consultation services include: consultation booklet, necessary clinical services (medical education/counseling, interrogation and physical exam), ancillary services (such as basic lab and X-ray), and treatment (prescribed medicines). <i>Emergency referral services for outpatients (excluding fee for ambulance or other form of transportation) are also included in this case group</i>	Common cold and other uncomplicated acute respiratory infections (ARI), diarrhea without severe dehydration, uncomplicated malaria, suspect and uncomplicated TB/leprosy, uncomplicated typhoid fever, dengue fever, acute conjunctivitis, otitis media, dental caries, intestinal worms, common sexually transmitted infection syndromes, skin disease, headache, fatigue, unknown fever, and other conditions that cannot be managed at health centers but do not require hospitalization. <i>Emergency referrals include meningitis (including TB meningitis) encephalitis, milliary TB, tetanus and other emergency conditions (as indicated in EMG1) which require immediate referral</i>	8,000
7	MIN1	CPA1 minor surgical activities	Non-hospitalized minor surgical procedures, including operating, drainage, cleaning, dressing, suture and other necessary services for a minor surgical condition at a CPA1 referral hospital	Superficial abscess, small wound, mild burn, <i>mild myositis, sebaces cyst, lipoma, circumcision (phymosis or paraphymosis) and tooth extraction</i>	16,000
8	EMG1	CPA1 emergency	Hospitalization (even less than 24 hours) and related medical and ancillary services provided in emergency ward of a CPA1 referral hospital	Any medical conditions which require emergency resuscitation, including drown, respiratory distress, shock, convulsion, coma, severe burn or bleeding, snake bite, intoxication (with gastric lavage), road traffic accidents (severe cases which require hospitalization) and other medical conditions that require emergency care	120,000

9	MED1	CPA1 adult general medicine	Hospitalization and related medical and ancillary services <i>for adults</i> provided in medicine ward of a CPA1 referral hospital. <i>Hospitalized surgical cases which do not require emergency care or referrals are included in this case group</i>	Pneumonia, severe bronchitis, asthma, pleurisy, pneumothorax, pulmonary abscess, severe or chronic diarrhea, severe/complicated malaria, complicated TB/leprosy, typhoid fever, AIDS, gastritis, gastric ulcer, (chronic) heart diseases, septicemia, (complicated) diabetes, hypertension, joint disease, and <i>other medical conditions that require hospitalization</i>	80,000
10	DEL1	CPA1 delivery	Attendance and other necessary services (including oxytocin injection as part of active management of the third stage of labor or AMTSL, <i>vacuum extraction</i> , suture of episiotomy, <i>repair of cervix rupture</i> , immediate newborn care and resuscitation, immediate postnatal monitoring and care) for a normal or complicated delivery at a CPA1 referral hospital	Normal delivery, complicated delivery which does not require caesarian section	88,000
11	GYN1	CPA1 gynecology	Hospitalization and related medical and ancillary services provided in maternity/ gynecology ward of a CPA1 referral hospital	Severe cervicitis, vagina wound/injury	92,000
12	ABO1	CPA1 abortion	Spontaneous and (legal) induced abortion & post abortion care at a CPA1 referral hospital	Miscarriage, still birth, unwanted or medically unacceptable pregnancy	80,000
13	PED1	CPA1 child general medicine	Hospitalization and related medical and ancillary services <i>for children</i> provided in pediatric ward of a CPA1 referral hospital	Pneumonia, severe bronchitis, asthma, pleurisy, pneumothorax, pulmonary abscess, severe or chronic diarrhea, severe/complicated malaria, typhoid fever, <i>dengue hemorrhagic fever</i> , AIDS, heart diseases, septicemia and other medical conditions that require hospitalization	72,000
14	TUB1	CPA1 tuberculosis	Hospitalization and related medical and ancillary services provided in TB ward of a CPA1 referral hospital	All forms of TB, pulmonary/extra-pulmonary, <i>excluding TB meningitis and millitary</i> , and Leprosy requiring hospitalization	160,000

15	CON2	CPA2 outpatient consultations	New and follow-up outpatient consultations, including referral and <i>basic specialist consultations</i> , at a CPA2 referral hospital. The consultation services include: consultation booklet, necessary clinical services (medical education/counseling, interrogation and physical exam), ancillary services such as lab services and X-ray, <i>ultrasound</i> , and treatment (prescribed medicines). <i>Emergency referral services for outpatients (excluding fee for ambulance or other form of transportation) are also included in this case group</i>	Common cold and other uncomplicated acute respiratory infections (ARI), diarrhea without severe dehydration, uncomplicated malaria, suspect and uncomplicated TB/leprosy, uncomplicated typhoid fever, dengue fever, acute conjunctivitis, otitis media, dental caries, intestinal worms, common sexually transmitted infection syndromes, headache, fatigue, unknown fever, <i>diabetes, AIDS (ambulatory OI/ART), mental health, oral health and other conditions that cannot be managed at health centers or CPA1 referral hospitals but do not require hospitalization. Emergency referrals refer to all emergency conditions (as indicated in EMG2) which require immediate referral</i>	12,000
16	MIN2	CPA2 minor surgical activities	Non-hospitalized minor surgical procedures, including operating, drainage, cleaning, dressing, suture and other necessary services for a minor surgical condition at a CPA2 referral hospital	Superficial abscess, small wound, mild/moderate burn, myositis, sebaceous cyst, lipoma, circumcision (phymosis or paraphymosis) and tooth extraction	20,000
17	EMG2	CPA2 emergency	Hospitalization (even less than 24 hours) and related medical and ancillary services provided in emergency ward of a CPA2 referral hospital	Any medical conditions which require emergency resuscitation, including drown, respiratory distress, shock, convulsion, coma, severe burn or bleeding, snake bite, intoxication (with gastric lavage), road traffic accidents (severe cases which require hospitalization), <i>hypertension with complication/stroke, severe chest pain, tetanus, pulmonary edema</i> and other medical conditions that require emergency care	200,000
18	SUR2	CPA2 surgery	Hospitalization and related medical and ancillary services provided in surgical ward (<i>except cases of major surgical interventions as indicated in MAJ2</i>) of a CPA2 referral hospital	Head trauma, abdominal trauma, chest trauma, injury, internal bleeding (through digestive system), liver abscess, kidney stone, bladder stone, gallbladder stone	120,000

19	MAJ2	CPA2 major surgical interventions	Major surgical interventions carried out in operation theater (with general, rachis and some large local anesthesia, mainly emergency operations) with pre and post operation hospitalization and related care and resuscitation at a CPA2 referral hospital	Appendicitis, hernia, ectopic pregnancy, ovarian cyst, amputation, eye operation (cataract, wound), caesarian section, dislocation of joint, and sterilization (tuboligation, vasectomy)	240,000
20	MED2	CPA2 adult general medicine	Hospitalization and related medical and ancillary services <i>for adults</i> provided in medicine ward of a CPA2 referral hospital	Pneumonia, severe bronchitis, asthma, pleurisy, pneumothorax, pulmonary abscess, severe or chronic diarrhea, severe/complicated malaria, complicated TB/leprosy, typhoid fever, meningitis, AIDS, gastritis, gastric ulcer, <i>pericarditis and other forms of heart diseases</i> , septicemia, (complicated) diabetes, hypertension, join disease, <i>thyroid</i> and other medical conditions that require hospitalization	100,000
21	DEL2	CPA2 delivery	Attendance and other necessary services (including oxytocin injection as part of active management of the third stage of labor or AMTSL), vacuum extraction and <i>other baby delivery assisting procedures</i> , suture of episiotomy, repair of cervix rupture, immediate newborn care and resuscitation, immediate postnatal monitoring and care) for a normal or complicated delivery at a CPA2 referral hospital	Normal delivery, complicated delivery which does not requires caesarian section	100,000
22	GYN2	CPA2 gynecology	Hospitalization and related medical and ancillary services provided in maternity/ gynecology ward of a CPA2 referral hospital	Severe cervicitis, vagina wound/injury	120,000
23	ABO2	CPA2 abortion	Spontaneous and (legal) induced abortion & post abortion care at a CPA2 referral hospital	Miscarriage, still birth, unwanted or medically unacceptable pregnancy	80,000
24	PED2	CPA2 child general medicine	Hospitalization and related medical and ancillary services <i>for children</i> provided in pediatric ward of a CPA2 referral hospital	Pneumonia, severe bronchitis, asthma, pleurisy, pneumothorax, pulmonary abscess, severe or chronic diarrhea, severe/complicated malaria, typhoid fever, dengue hemorrhagic fever, meningitis, encephalitis, AIDS, heart diseases, septicemia and other medical conditions that require hospitalization	88,000

25	TUB2	CPA2 tuberculosis	Hospitalization and related medical and ancillary services provided in TB ward of a CPA2 referral hospital	All forms of TB, pulmonary/extra-pulmonary, <i>except multidrug resistant forms</i> , and Leprosy requiring hospitalization	180,000
26	CON3	CPA3 outpatient consultations	New and follow-up outpatient consultations, including referral and <i>comprehensive specialist consultations</i> , at a CPA3 referral hospital or <i>national hospital</i> . The consultation services include: consultation booklet, necessary clinical services (medical education/counseling, interrogation and physical exam), ancillary services such as lab services, X-ray, ultrasound, <i>ECG, echocardiography (expensive ancillary services such as CT-scan, MRI are excluded)</i> and treatment (prescribed medicines)	Common cold and other uncomplicated acute respiratory infections (ARI), diarrhea without severe dehydration, uncomplicated malaria, suspect and uncomplicated TB/leprosy, uncomplicated typhoid fever, dengue fever, acute conjunctivitis, otitis media, dental caries, intestinal worms, common sexually transmitted infection syndromes, headache, fatigue, unknown fever, and other conditions that cannot be managed at lower levels, <i>including those requiring comprehensive specialist care (dental, eye, ENT, mental)</i> , but do not require hospitalization	16,000
27	MIN3	CPA3 minor surgical activities	Non-hospitalized minor surgical procedures, including operating, drainage, cleaning, dressing, suture and other necessary services for a minor surgical condition at a CPA3 referral hospital or national hospital	Superficial abscess, small wound, mild/moderate burn, myositis, sebaces cyst, lipoma, circumcision (phymosis or paraphymosis) and tooth extraction	24,000
28	EMG3	CPA3 emergency	Hospitalization (even less than 24 hours) and related medical and ancillary services provided in emergency ward of a CPA3 referral hospital or national hospital	Any medical conditions which require emergency resuscitation, including drown, respiratory distress, shock, convulsion, coma, severe burn or bleeding, snake bite, intoxication (with gastric lavage), road traffic accidents (severe cases which require hospitalization), hypertension with complication/stroke, severe chest pain, tetanus, pulmonary edema and other medical conditions that require emergency care	280,000
29	SUR3	CPA3 surgery	Hospitalization and related medical and ancillary services provided in surgical ward of a CPA3 referral hospital or national hospital	Head trauma, abdominal trauma, chest trauma, injury, internal bleeding (through digestive system), liver abscess, kidney stone, bladder stone, gallbladder stone	160,000

30	MAJ3	CPA3 major surgical interventions	Major surgical interventions carried out in operation theater (with general, rachis and some large local anesthesia, mainly emergency operations) with pre and post operation hospitalization and related care and resuscitation at a CPA3 referral hospital or a national hospital	Appendicitis (including <i>abscess</i>), hernia (including <i>complicated or strangulated</i>), ectopic pregnancy, ovarian cyst, <i>peritonitis</i> , <i>operation of kidney (kidney stone or other causes)</i> , <i>prostatectomy (prostate cancer or tumor)</i> <i>operation of bladder (bladder stone or other causes)</i> , <i>operation of gallbladder (gallbladder stone and other causes)</i> , <i>removal of abdominal tumor</i> , <i>hysterectomy (uterus rupture, prolapse, tumor)</i> , <i>thyroidectomy (complicated thyroid)</i> , <i>operation of bowel (bowel obstruction, wound)</i> , <i>amputation and other orthopedic surgical interventions (bone fracture)</i> , eye operation (cataract, wound), caesarian section, <i>major ENT conditions which require operations</i> , and sterilization (tuboligation, vasectomy)	400,000
31	MED3	CPA3 adult general medicine	Hospitalization and related medical and ancillary services <i>for adults</i> provided in medicine ward of a CPA3 referral hospital or national hospital	Pneumonia, severe bronchitis, asthma, pleurisy, pneumothorax, pulmonary abscess, severe or chronic diarrhea, severe/complicated malaria, complicated TB/leprosy, typhoid fever, meningitis, AIDS, gastritis, gastric ulcer, pericarditis and other forms of heart diseases, septicemia, tetanus, (complicated) diabetes, hypertension, join disease, internal bleeding (through digestive system), thyroid and other medical conditions that require hospitalization	120,000
32	DEL3	CPA3 delivery	Attendance and other necessary services (including oxytocin injection as part of active management of the third stage of labor or AMTSL), vacuum extraction and <i>other baby delivery assisting procedures</i> , suture of episiotomy, repair of cervix rupture, immediate newborn care and resuscitation, immediate postnatal monitoring and care) for a normal or complicated delivery at a CPA3 referral hospital	Normal delivery, complicated delivery which does not requires caesarian section	120,000

33	GYN3	CPA3 gynecology	Hospitalization and related medical and ancillary services provided in maternity/ gynecology ward of a CPA3 referral hospital or national hospital	Severe cervicitis, vagina wound/injury, cervical cancer, breast cancer...	160,000
34	ABO3	CPA3 abortion	Spontaneous and (legal) induced abortion & post abortion care at a CPA3 referral hospital or national hospital	Miscarriage, still birth, unwanted or medically unacceptable pregnancy	100,000
35	PED3	CPA3 child general medicine	Hospitalization and related medical and ancillary services <i>for children</i> provided in pediatric ward of a CPA3 referral hospital or national hospital	Pneumonia, severe bronchitis, asthma, pleurisy, pneumothorax, pulmonary abscess, severe or chronic diarrhea, severe/complicated malaria, typhoid fever, dengue hemorrhagic fever, meningitis, encephalitis, AIDS, heart diseases, septicemia and other medical conditions that require hospitalization	108,000
36	TUB3	CPA3 tuberculosis	Hospitalization and related medical and ancillary services provided in TB ward of a CPA3 referral hospital and national hospital	All forms of TB, pulmonary/extra-pulmonary, including <i>multidrug resistant forms</i> , and leprosy requiring hospitalization	200,000