

April 12 - 13, 2007 | Best Western Resort Country Club | Gurgaon, India

Vouchers for Equity in Health

Shailesh Krishna
Executive Director
State Innovations in Family Planning Services Agency
Lucknow



CONSTELLA FUTURES

Uttar Pradesh

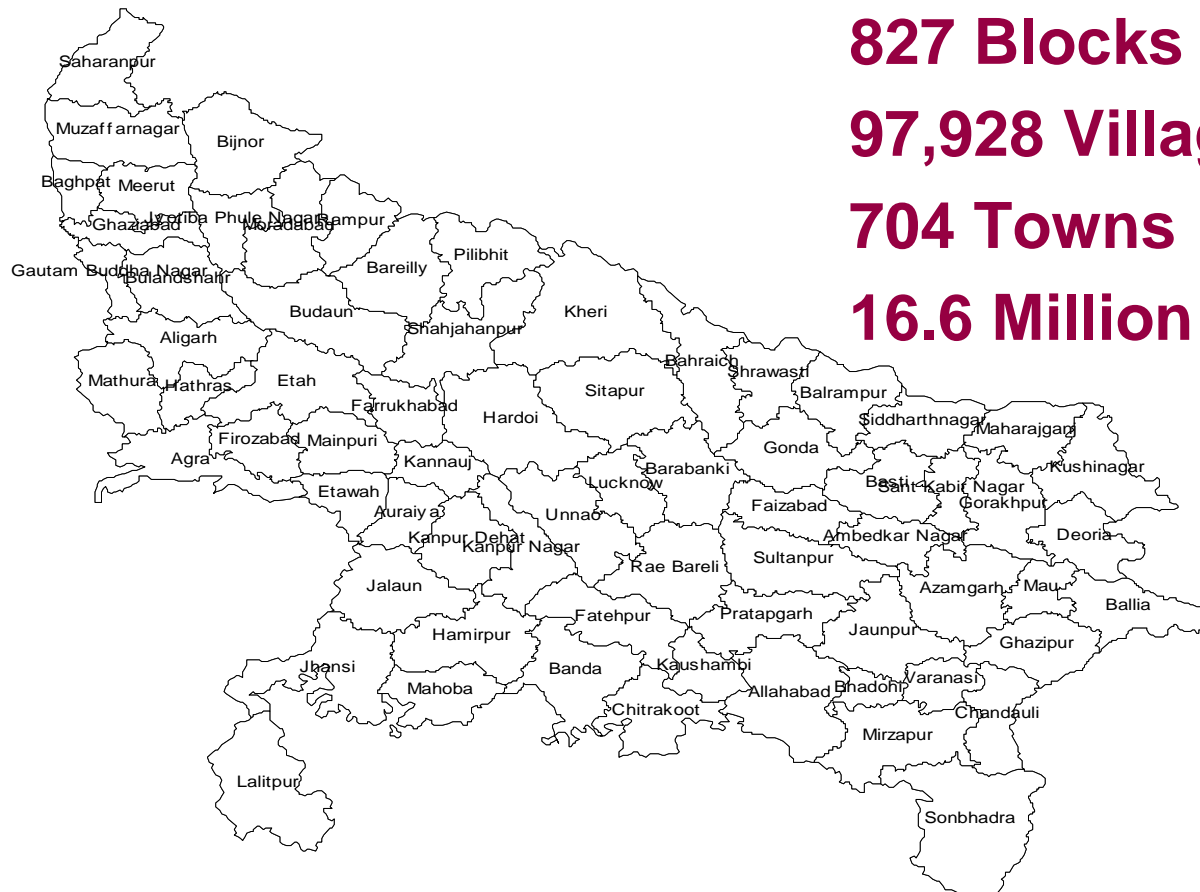
70 Districts

827 Blocks

97,928 Villages

704 Towns

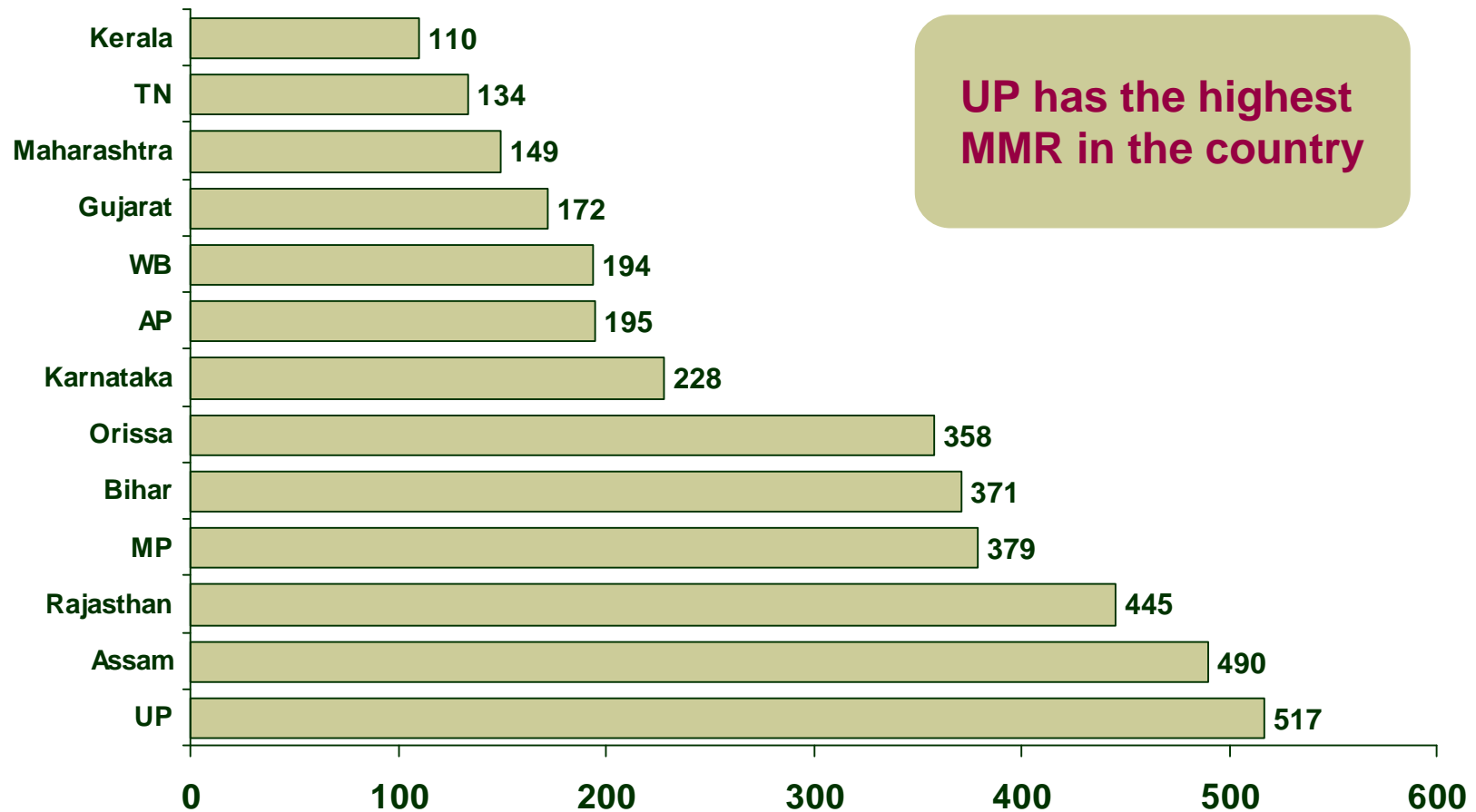
16.6 Million Population



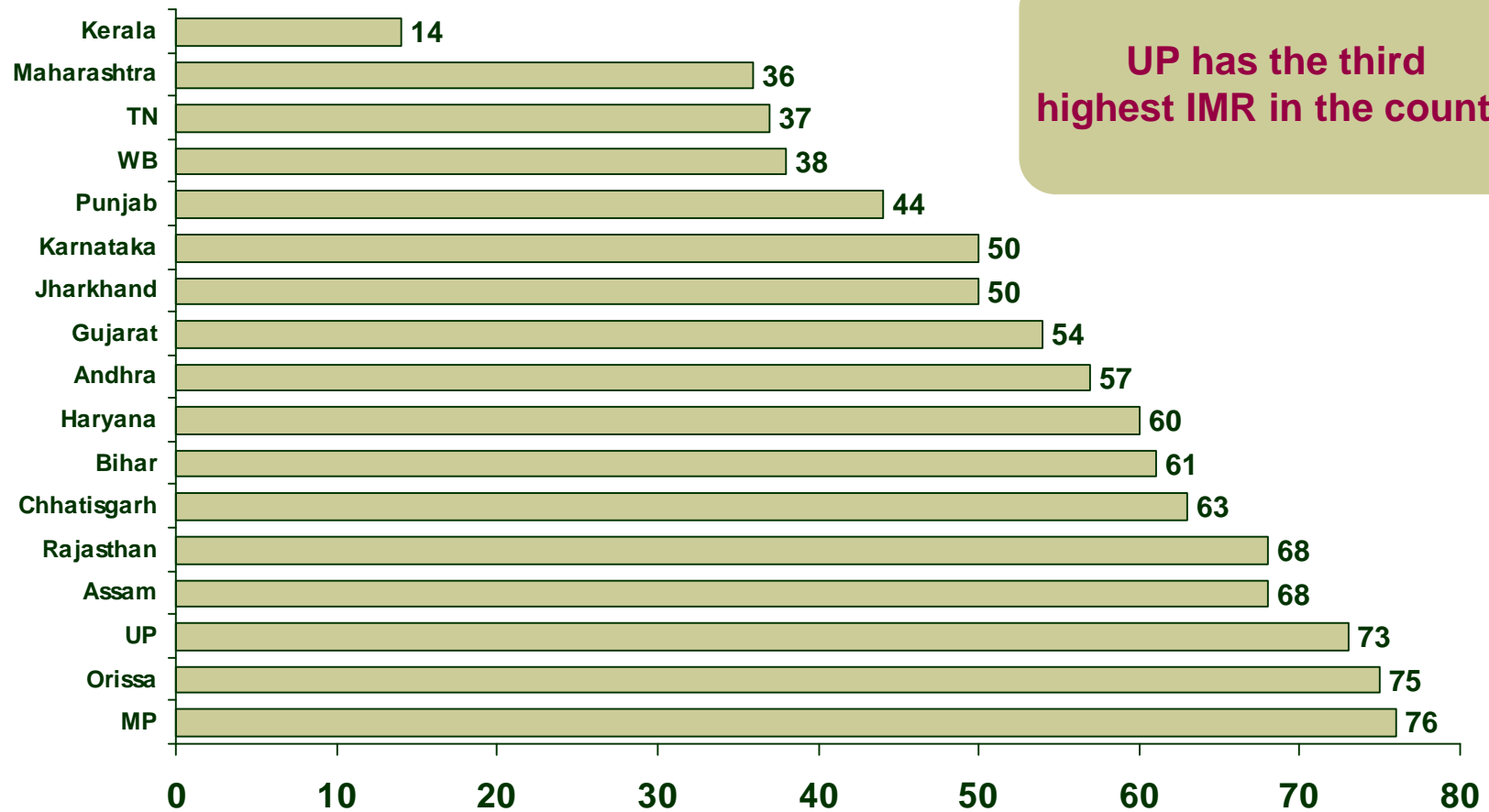


UTTAR PRADESH SITUATIONAL ANALYSIS

Maternal Mortality Ratio in Major States of India

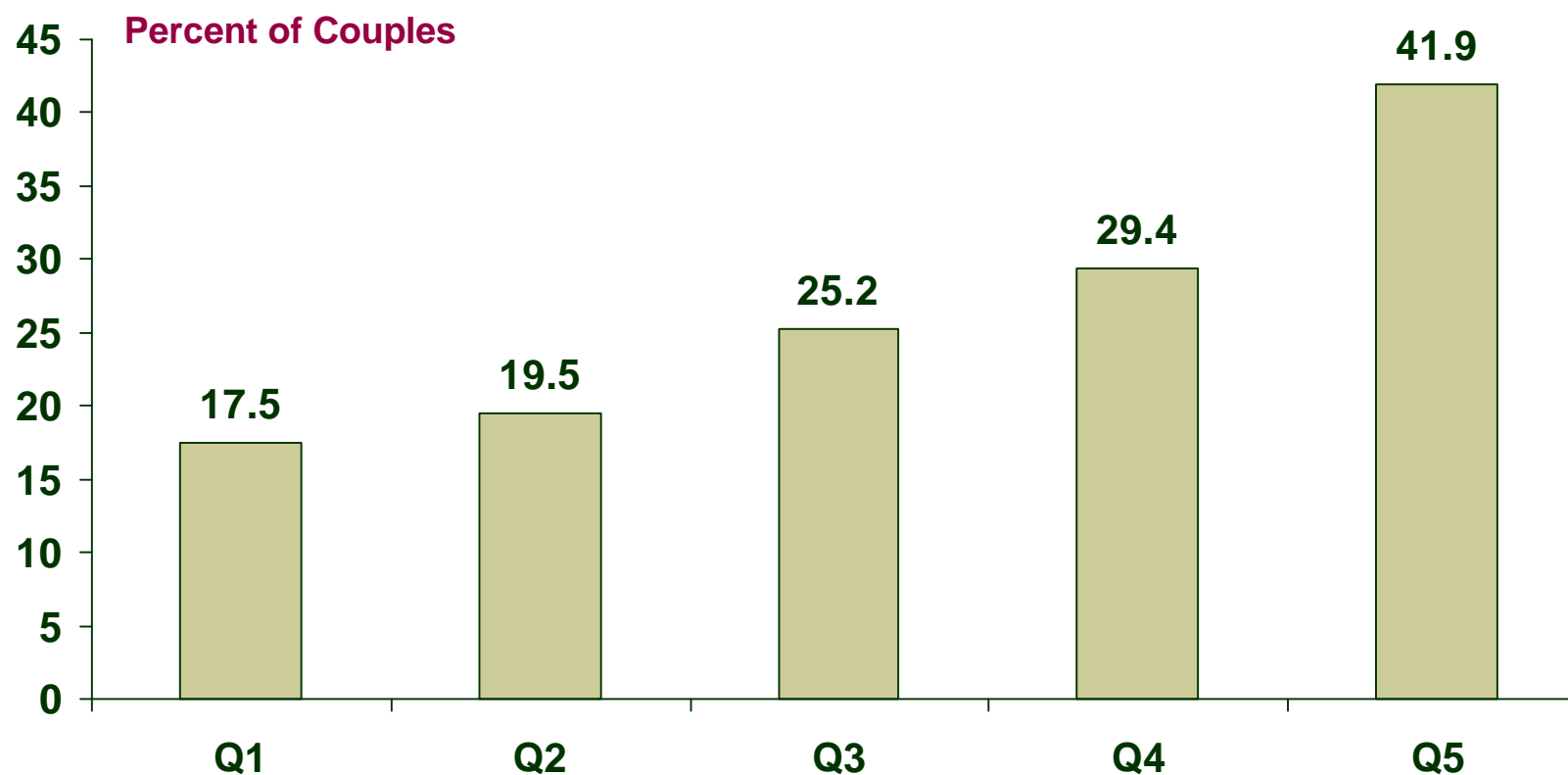


Infant Mortality Rate in Major States of India



UP has the third highest IMR in the country

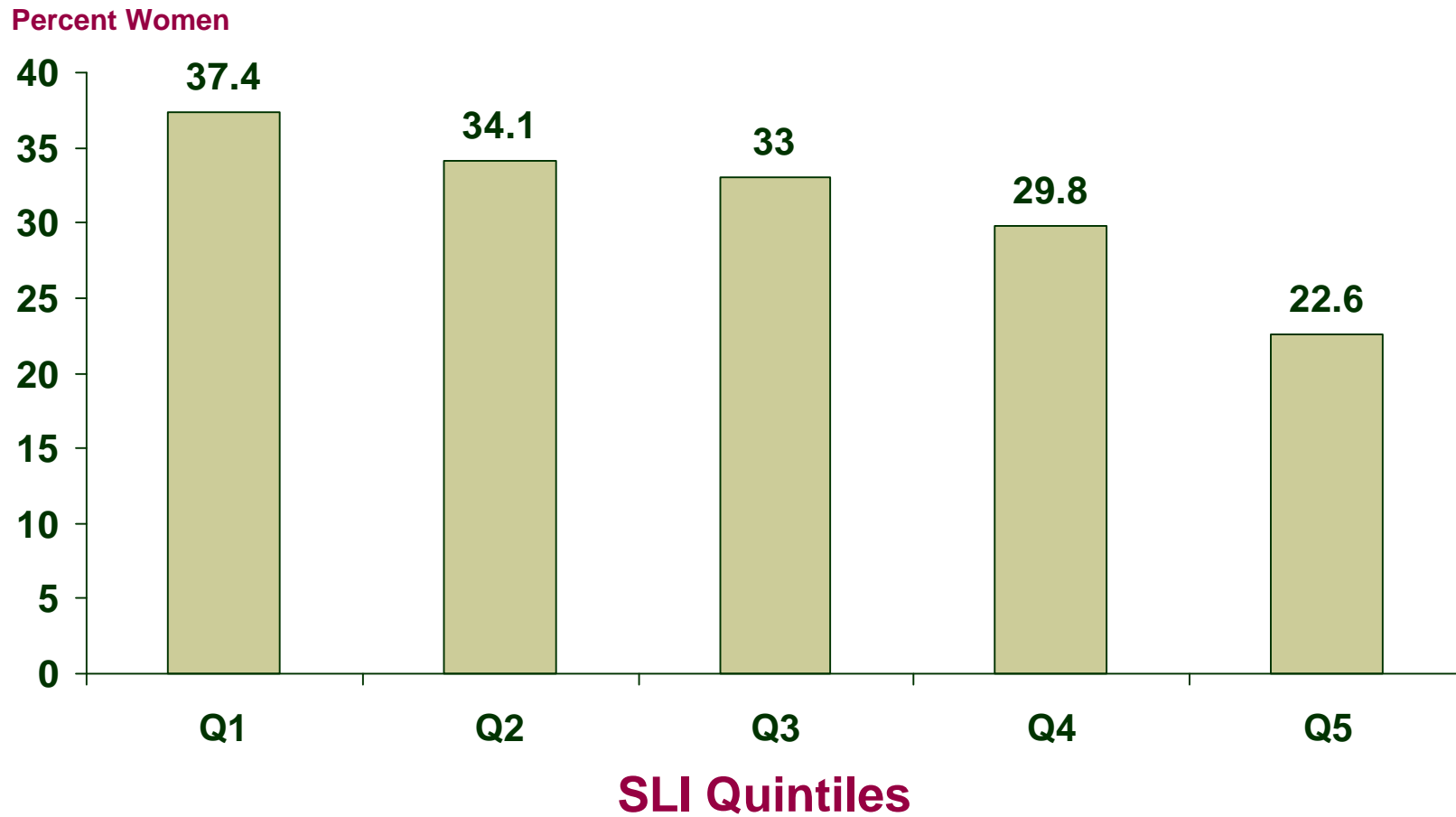
Any Modern Family Planning Method Use



Source: ITAP, RH Indicator Survey-2005

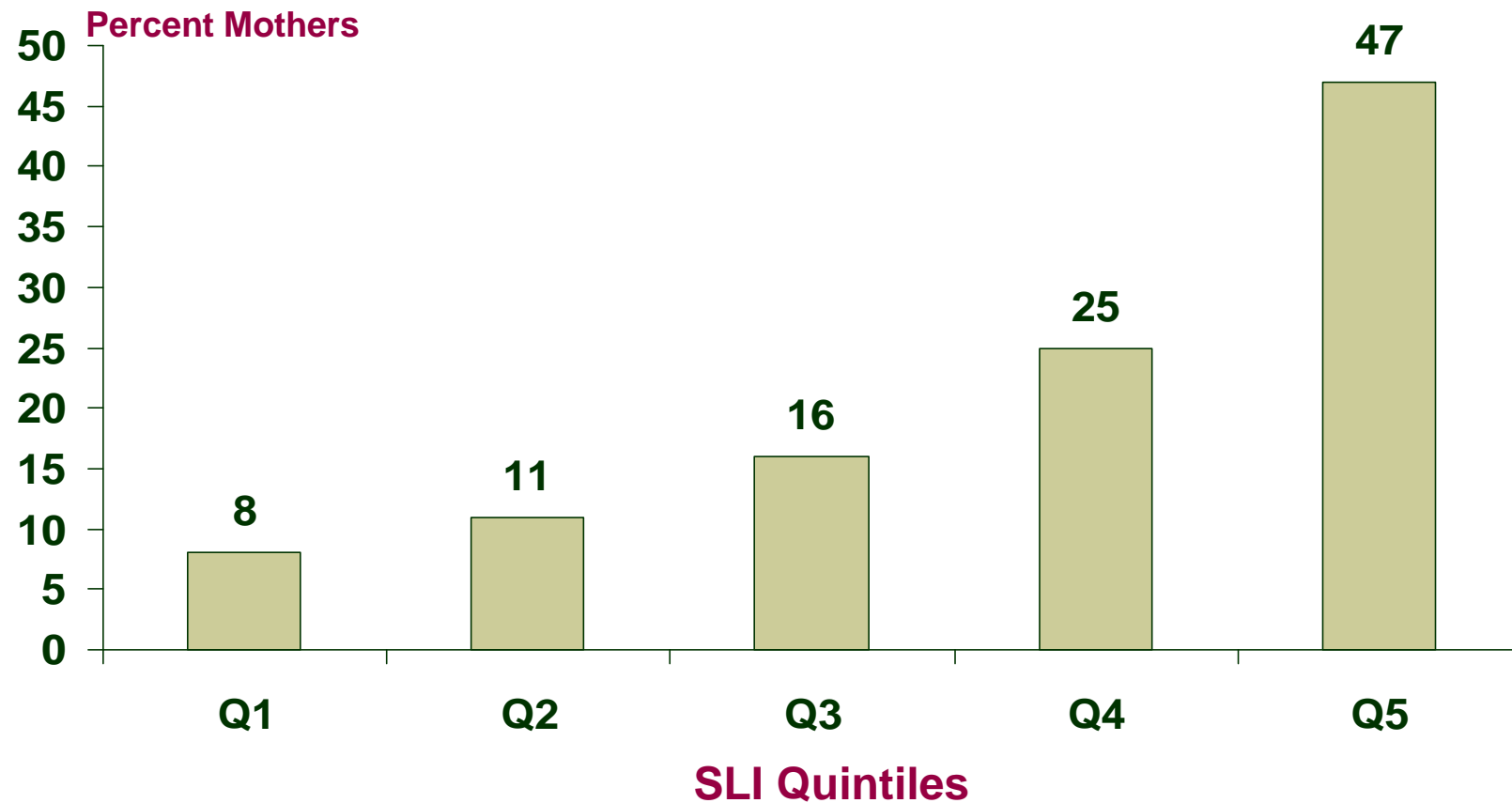
Standard of Living Index (SLI) Quintiles

Unmet Need for FP in UP



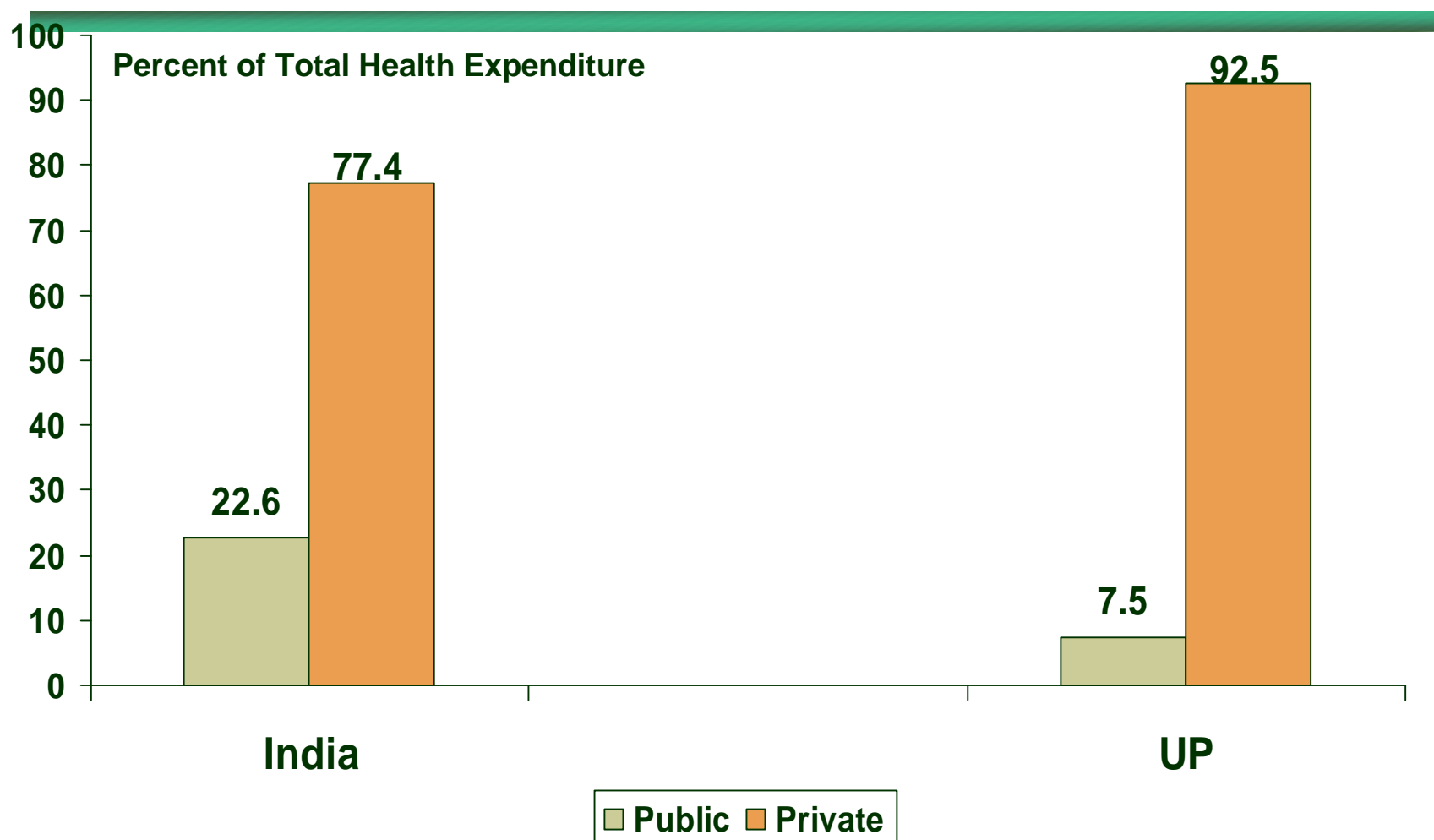
Source: ITAP, RH Indicator Survey-2005

Institutional Deliveries in Uttar Pradesh



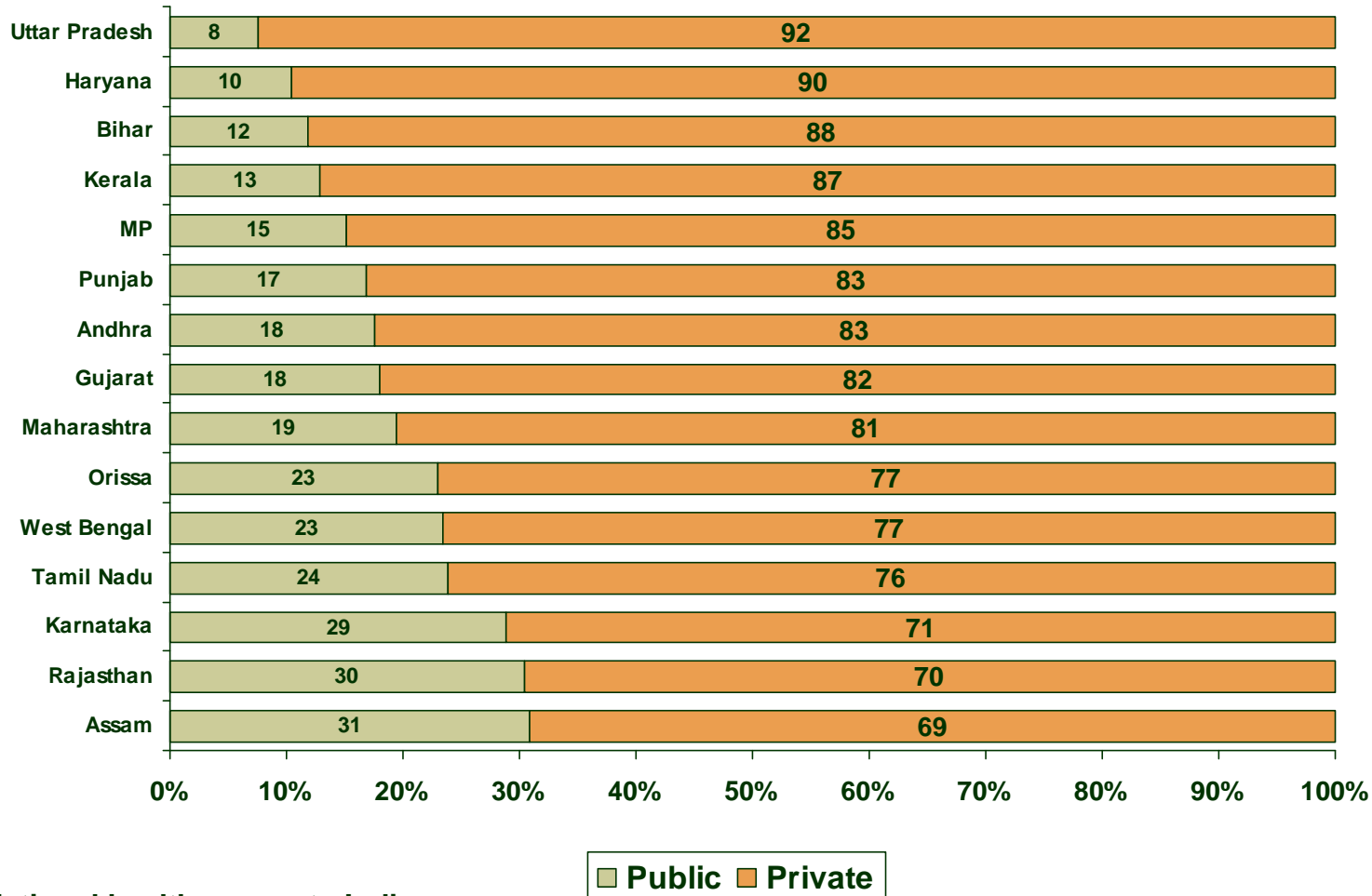
Source: ITAP, RH Indicator Survey-2005

Public and Private Health Expenditure in India and UP



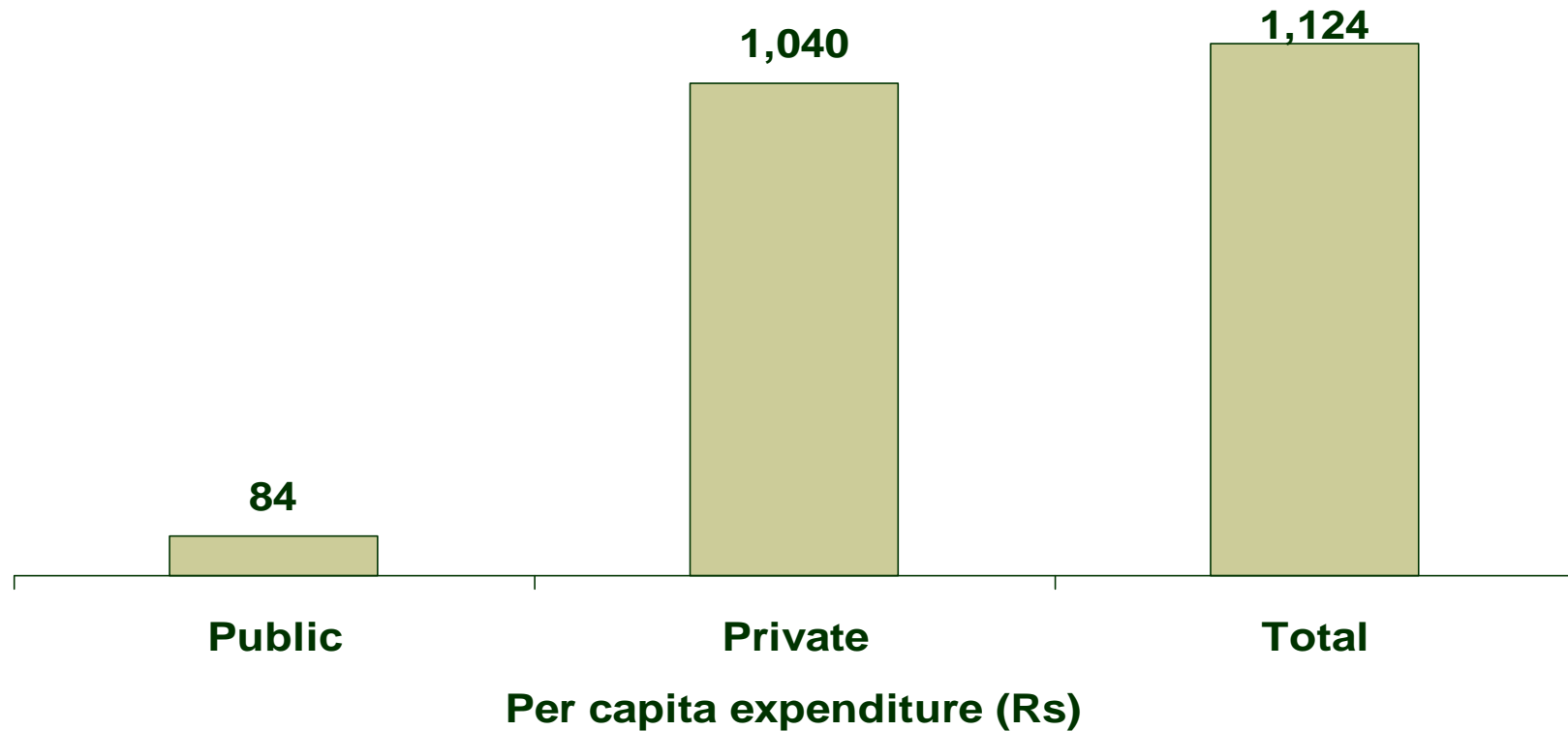
Source: National Health Accounts

Public and private expenditure on health in major states : 2001-02



Source: National health accounts-India

Per Capita Public and Private Health Expenditure in UP : 2001-02



Source: National health accounts-India

Average expenditure incurred on antenatal services in UP and India

	Govt	Private	All
Rural			
UP	109	556	316
India	230	918	499
Urban			
UP	225	665	468
India	356	1377	905

Average Expenditure Per Child Birth By Place Of Delivery in UP and India

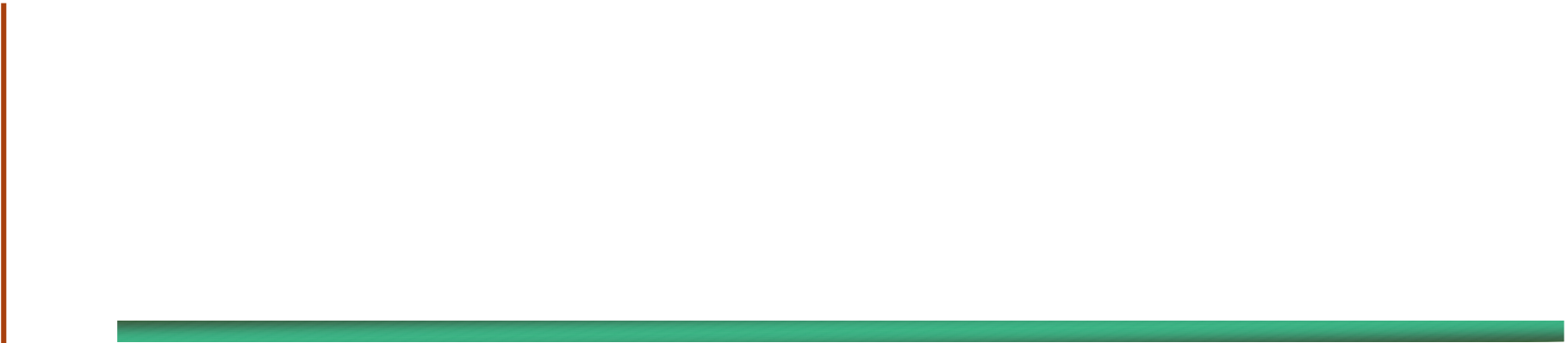
	Govt	Private	Home	All
Rural				
UP	1,725	4,008	505	856
India	1,165	4,137	414	1,169
Urban				
UP	1,688	4,361	643	1,851
India	994	5,480	552	2,806

Situation Analysis: Sum Up

- **UP has the highest MMR in the country**
- **IMR is the third highest in the country**
- **Modern FP method is low**
- **Use of institutional facilities for deliveries is low**
- **Use of FP methods and institutional facilities for deliveries is the lowest among poor**
- **Per capita expenditure of UP govt. on health is very low**
- **Out of pocket expenditure on RCH services in both government and private facilities is high**
- **Health care systems places enormous burden on poor**

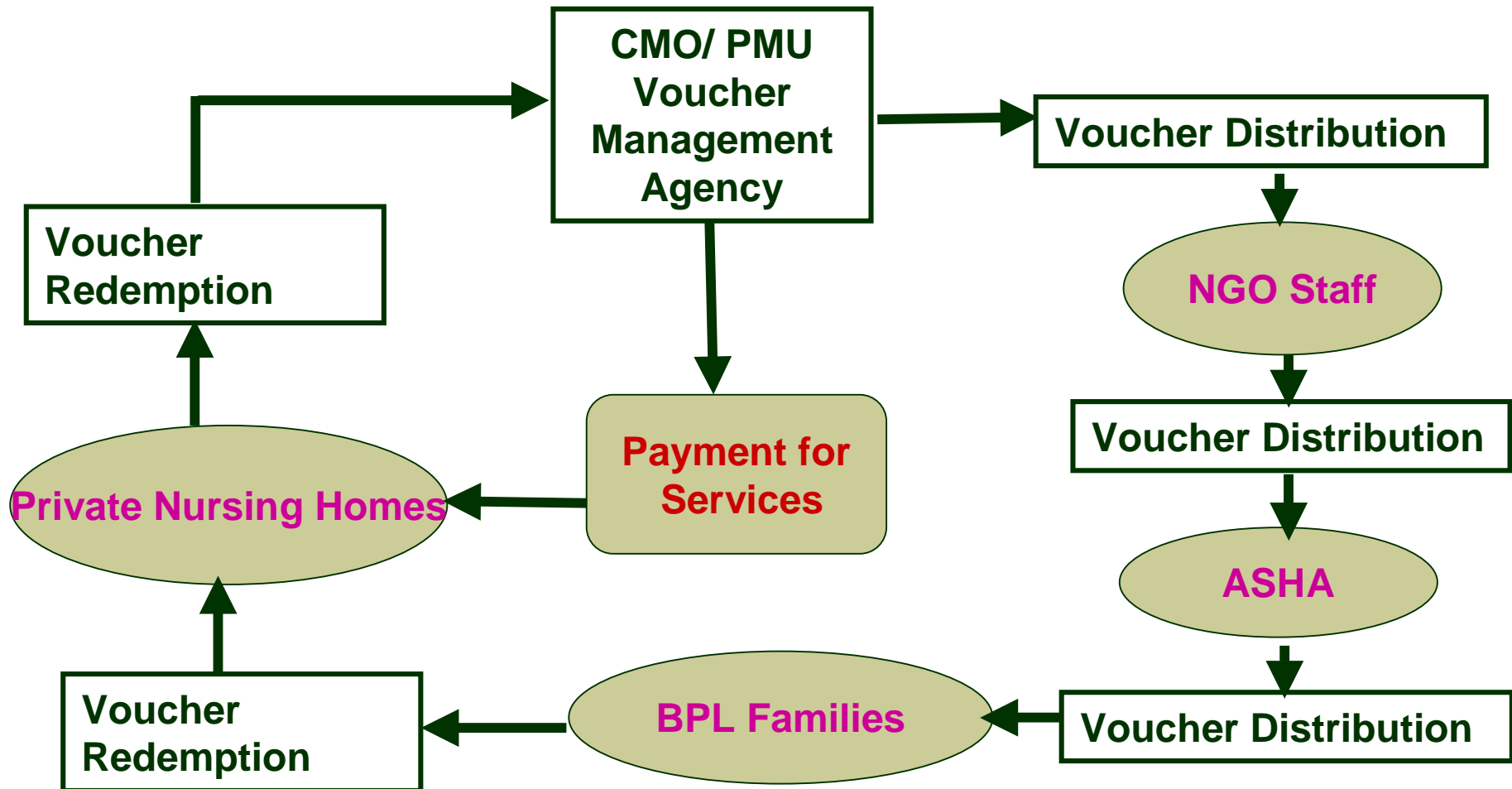


Voucher System in 7 Blocks of Agra



Voucher system helps to purchase outputs while also offering beneficiaries a choice of provider.

Voucher Management System in Agra



Agra Voucher System: Objectives

- **Target BPL population**
- **Improve service coverage and enhance demand**
- **Improve quality of services**
- **Accredit private health facilities to provide services to BPL families**
- **Provide a choice of service providers**
- **Create and manage a voucher system for availing predetermined RCH services**
- **Establish linkages with other stakeholders**

Agra Voucher System: RCH Services

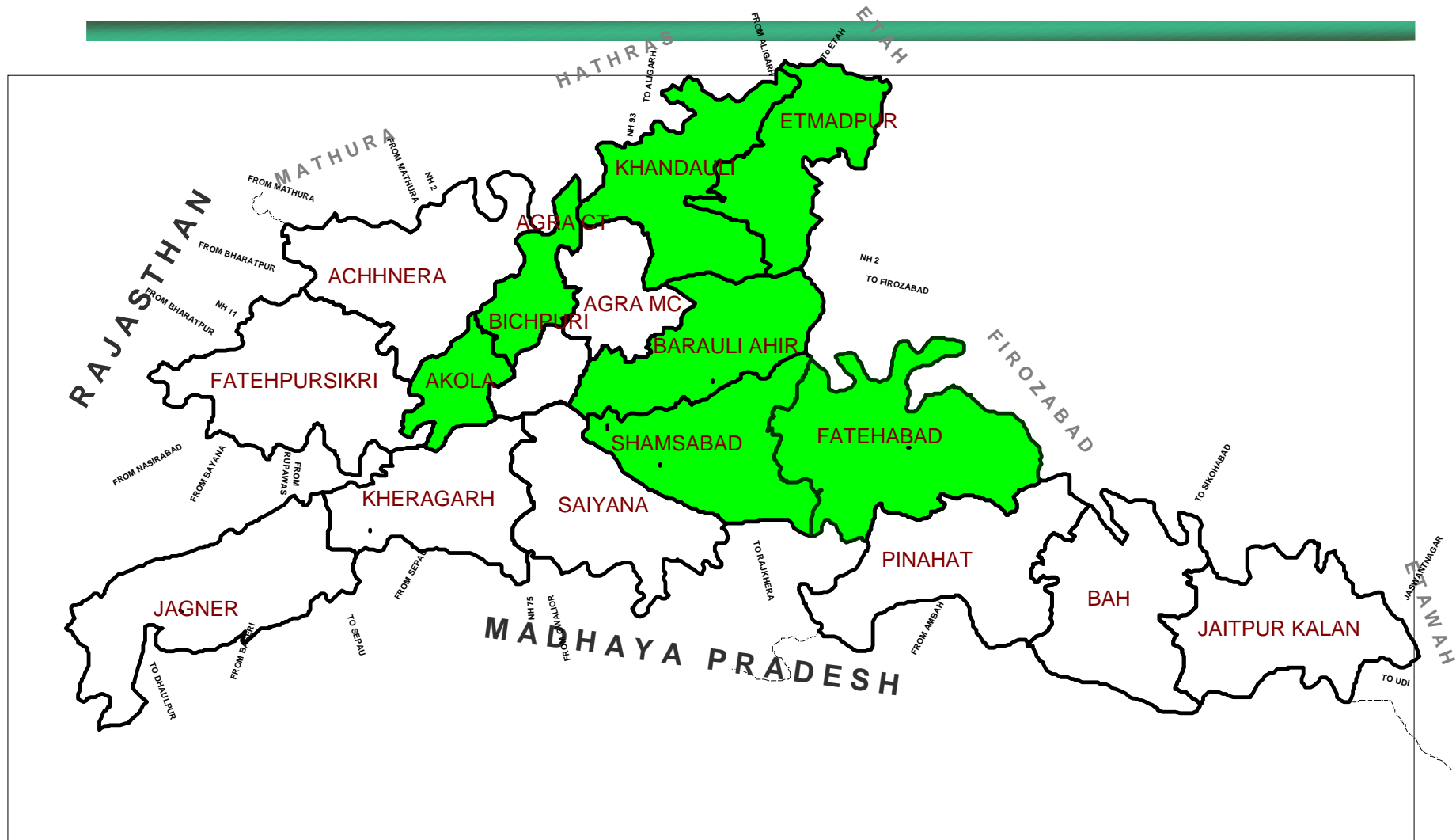
- **ANC-3 visits (ANC check up, TT Injection, IFA tablets, Nutrition advice)**
- **Deliveries (Normal and complicated)**
- **PNC (2 check ups, breast feeding counseling and FP counseling)**
- **Family Planning (Sterilization, IUCD, Condoms and Pills)**
- **Child Immunization (free of cost—supplies from CMO)**
- **RTI/STI (check ups, treatment, partner counseling)**

Agra Voucher System: Cost of Services

Cost of services
are at least
35-50 percent
less than prevailing market prices

ANC check up	Rs 25 per visit
Normal delivery	Rs 1,500 inclusive of medicines, one day hospital stay and pediatrician visit
Caesarian delivery	Rs 5,000 inclusive of medicines, anesthetist charges, 5/6 days hospitalization, pediatrician visit
PNC	Rs 25 per visit
FP Services	Rs 1,500 per sterilization and Rs 100 per IUCD
STI/RTI	

7 Blocks Covered for Voucher System in Agra District



Average expenditure incurred on antenatal services in UP and India

	Govt	Private	All
Rural			
UP	109	556	316
India	230	918	499
Urban			
UP	225	665	468
India	356	1377	905

Source: NSSO, 2004

Average Expenditure Per Child Birth By Place Of Delivery In UP and India

	Govt	Private	Home	All
Rural				
UP	1,725	4,008	505	856
India	1,165	4,137	414	1,169
Urban				
UP	1,688	4,361	643	1,851
India	994	5,480	552	2,806

Source: NSSO, 2004

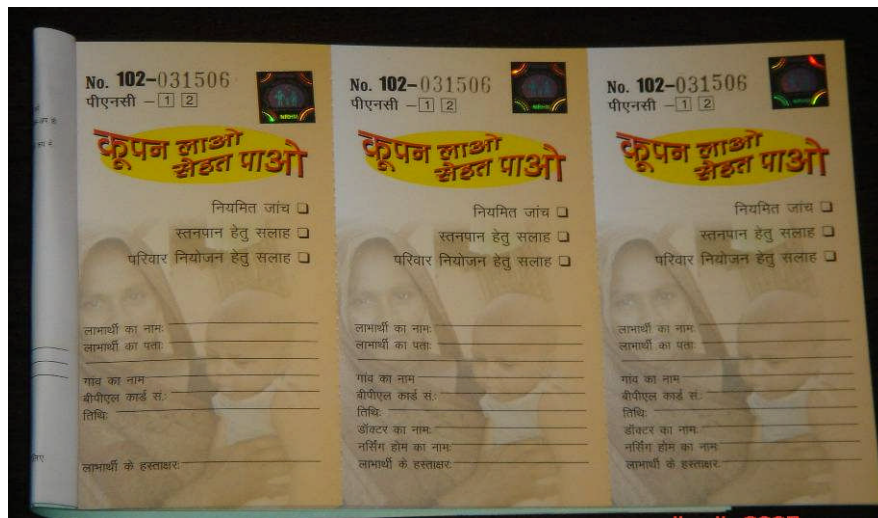
Activities Completed for Establishing the System

- Preparation of quality std. guidelines for private nursing homes
- Assessment and accreditation of private nursing homes
- Contractual agreements with nursing homes and Medical College
- Design and printing of vouchers with holographic stickers and serial numbers
- Preparation of monitoring records and reports
- Preparation of referral slips, discharge slips and case sheet formats

Activities Completed for Establishing the System

- **Basic IEC material for clients**
- **Preparation of a list of ASHA in each subcentre**
- **Orientation programs to ASHA, ANMs and supervisors**
- **Distribution of vouchers to ASHA**
- **Design of monitoring systems**

Voucher and Voucher Materials



The First Voucher Baby - Rachna



The Beneficiary Family

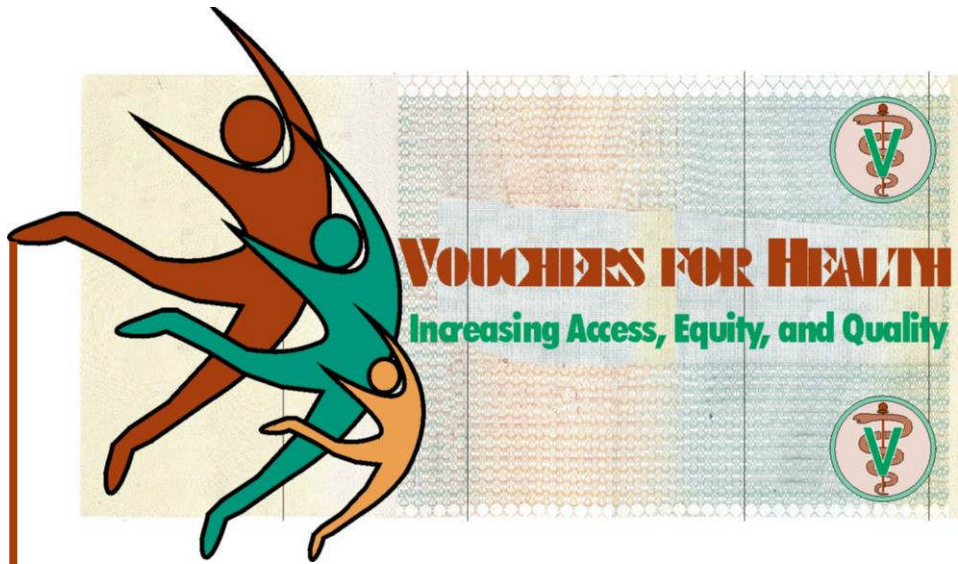


First 15 Days Performance: March 15-31, 2007

Sr #	Services Provided	Total Number
1	ANC	44
2	Normal delivery	4
3	Caesarian/complicated delivery	3
4	PNC	2
5	Sterilization	2
Diagnostic Services		
1	HB test	35
2	Blood group with RH factor	35
3	Blood sugar	35
4	Urine examination	35
5	WR VDRL	35
6	Ultra sound	38
7	RTI/STI	1

Issues and Challenges

- **Identification of BPL families**
- **Exclusively targeting BPL families**
- **Managing environment**
- **Creating demand for all services in voucher scheme**
- **Ensuring same quality of services in all nursing homes**
- **Establishing easy system for flow of financial resources**
- **Ensuring coordination between public & private sectors**
- **Ensuring regular supplies of vaccines, IFA tablets, condoms, oral pills etc**
- **Providing linkages to blood banks and referrals**



April 12 - 13, 2007 | Best Western Resort Country Club | Gurgaon, India

Thank you



CONSTELLA FUTURES