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TRANSITION ROADMAP FOR INTEGRATING TB SERVICES INTO SHI AND SUSTAINABLE FINANCING FOR TB (2020–2025)

Local Health System Sustainability Project
Task Order I, USAID Integrated Health Systems IDIQ

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Local Health System Sustainability Project

The Local Health System Sustainability Project (LHSS) under the USAID Integrated Health Systems IDIQ helps low- and middle-income countries transition to sustainable, self-financed health systems as a means to support access to universal health coverage. The project works with partner countries and local stakeholders to reduce financial barriers to care and treatment, ensure equitable access to essential health services for all people, and improve the quality of health services. Led by Abt Associates, the five-year, \$209 million project will build local capacity to sustain strong health system performance, supporting countries on their journey to self-reliance and prosperity.

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ACRONYMS AND ABBREVIATIONS

DAV	Drug Administration of Vietnam
DOH	Department of Health
DHI	Department of Health Insurance
DPF	Department of Planning and Finance
M&E	Monitoring and Evaluation
MOH	Ministry of Health
NCET	National Committee to End Tuberculosis
NTP	National Tuberculosis Program
PSS	Provincial Social Security
SHI	Social Health Insurance
TB	Tuberculosis
USAID	United States Agency for International Development
VSS	Vietnam Social Security
WHO	World Health Organization

1. INTRODUCTION

The tuberculosis (TB) burden in Vietnam is high, with a total TB incidence rate of 176 per 100,000.¹ Currently, first-line TB drugs are procured annually using the state budget through the Health - Population National Target Program under the Ministry of Health (MOH) to provide free treatment to TB patients. Second-line TB drugs are procured using the Global Fund's international aid, which is planned to end by 2023. However, since 2019, the Global Fund has required a contribution from the government of Vietnam to support the acquisition of second-line TB drug treatment for about 10 percent of multidrug-resistant patients in the country. In this context, it is critical to ensure sustainable financing to acquire first- and second-line TB drugs to maintain free access to TB drugs for TB patients.

The government's strong political commitment to addressing TB has manifested in various ways: The Prime Minister issued Decision 1745/QĐ-TTg dated December 4, 2019, to establish the National Committee to End Tuberculosis (NCET). Deputy Prime Minister and NCET Chairman Vu Duc Dam has directed the MOH to ensure TB drugs for TB prevention and control activities. Specifically, at the NCET meeting on March 9, 2020, Deputy Prime Minister Dam asked the committee to "urgently make a plan and funding options to ensure [the] TB drug resource is regulated." Also, in the Official Letter 6908/VPCP - KGVX dated August 19, 2020, the Deputy Prime Minister gave directions on "Developing policies for [the] procurement and payment of TB drugs using the social health insurance (SHI) fund from 2022."

Pursuant to these directives, the National Tuberculosis Program (NTP) developed this roadmap to transition TB drugs, starting with first-line drugs, into the SHI scheme and ensure sustainable financing for the TB program. The roadmap is a living document that will be revised and updated to keep pace with changes in the context and implementation. A tracking tool also was developed to help the NTP manage and monitor the implementation process, changes, and impacts of the changes on the transition plan and update stakeholders on its progress.

2. PURPOSE

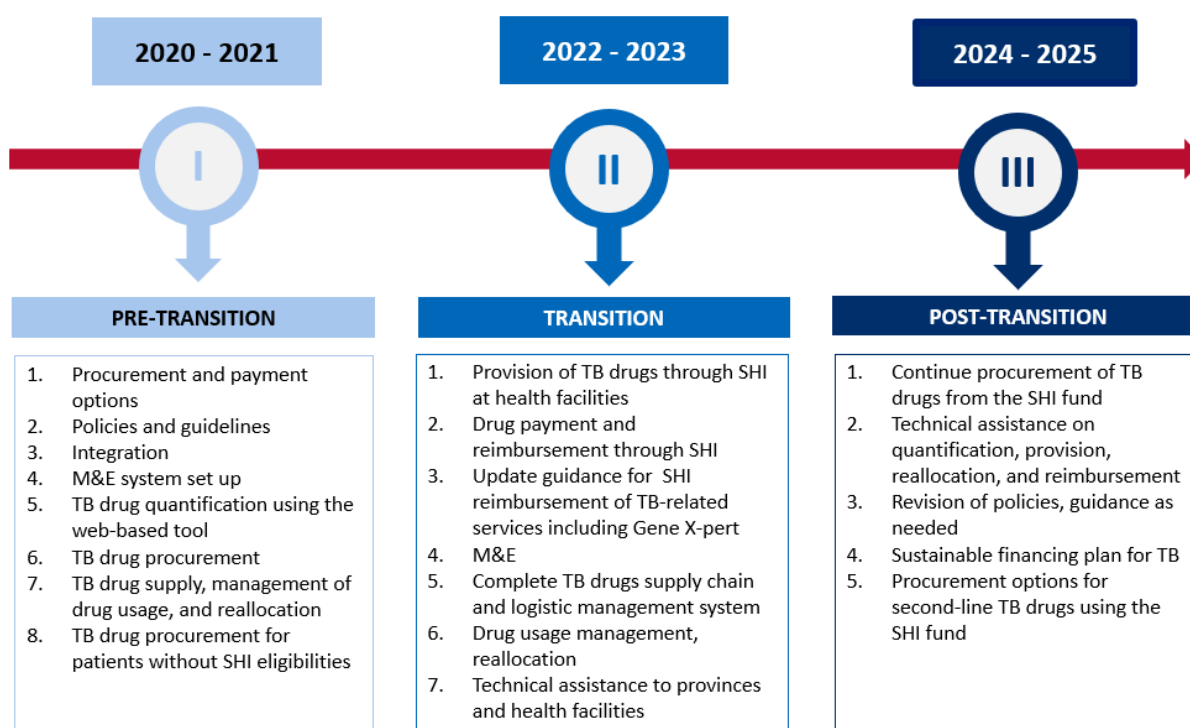
To identify the priorities, activities, and implementation measures required at this time to transition TB services, specifically first-line TB drugs, to the SHI scheme, and ensure sustainable financing for the TB program.

¹ World Health Organization, Vietnam country profile/Estimated TB burden 2019.

3. TRANSITION PHASES

The roadmap is divided into three phases (Figure I). The pre-transition phase activities are designed for the NTP to carry out at the central level. Activities include essential preparatory tasks such as the development of policies and procedures needed to conduct procurement. In the second phase, the transition implementation takes place at the health facility level and patients receive TB drugs through SHI. The focus of this phase is on the management of the drug supply, drug use, and drug reallocation as well as SHI reimbursement of TB drugs and related services. The final phase is post-transition, when any needed corrective actions will take place based on the review of the transition phase. This is also when processes for the transition of second-line TB drugs into SHI and a long-term financial sustainability plan for TB programs will be developed.

Figure I: Transition Roadmap for Integrating TB Services into SHI and Sustainable Financing for TB (2020–2025)



3.1 Pre-Transition Phase, 2020 – 2021

1. Proposal of procurement and payment options of first-line TB drugs using the SHI fund.
3. Integration of health facilities into SHI to enable the provision of the first-line TB drugs and related services through SHI.
4. Establishment of a monitoring and evaluation (M&E) system to track and monitor the transition process.

5. Guidance provided to provinces on TB drug quantification, and quantification using a web-based tool.
6. TB drug procurement and bidding.
7. TB drug supply, management of drug usage and drug reallocation, including the upgrading of the web-based tool to monitor the drug supply, management, and reallocation.
8. Guidance provided to provinces on budget planning for TB drug procurement for patients without SHI cards, and patients in prisons and reformatory centers.

3.2 Transition Implementation Phase, 2022 – 2023

1. Provision of the first-line TB drugs through SHI at health facilities.
2. Payment and reimbursement between health facilities, Vietnam Social Security (VSS), and TB drug suppliers, following the MOH's Circulars and VSS's guidance.
3. Update of guidelines on SHI reimbursement for Gene-Xpert test.
4. M&E of the transition process.
5. A complete TB drug supply chain and logistic management system.
6. Monitoring and management of TB drug use and reallocation.
7. Technical assistance by the NTP, in collaboration with VSS, MOH, Provincial Social Security (PSS), and Departments of Health (DOHs) for provinces and TB treatment facilities on drug quantification, supply, use, reallocation, and payment.

3.3 Post-Transition Phase, 2024 – 2025

1. Continuation of drug procurement, management, supply, reallocation, and use.
2. Support to provinces in TB drug quantification, supply, reallocation, and use.
3. Adjustment/addition/revision of related policies and guidelines.
4. Development of sustainable financing plan for TB program.
5. Development of procurement and payment options and a transition plan for second-line TB drugs into SHI.

4. ACTIVITIES

4.1 Pre-Transition Phase, 2020 – 2021

4.1.1 Proposal of procurement and payment options of the first-line TB drugs using the SHI fund

Proposed option: the National Lung Hospital does centralized, national procurement; health facilities sign contracts and pay suppliers directly.

4.1.2 Development and update of policies and guidelines on TB drug bidding and procurement, management, supply, use, and payment

- a) Upon the MOH's approval of TB drug procurement and payment option, the MOH issues a decision that assigns the centralized, national procurement to the National Lung Hospital.
- b) Circular 04/2016, which regulates SHI coverage of TB-related examinations, treatment, and reimbursement, has a new chapter to guide the supply, management, reallocation, use, and payment of first-line TB drugs through the SHI fund.
- c) Provinces/cities and health facilities receive guidance and training on implementing the Circular's new regulations.

4.1.3 Integration of TB treatment facilities into SHI to enable the provision of the first-line TB drugs and related services through SHI

- a) Health facilities mapped to inform the development of a database of facilities that provide TB treatment services and TB drugs from central to the district level. The main indicators include:

Provincial code	Name of province	Name of district	Name of health facilities at central, provincial, and district levels (that provide TB drugs)	SHI medical examination and treatment code	Level (central, provincial, district, etc.)	Type	Data of patients and patients with SHI cards
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- b) An MOH Directive issued guiding provincial DOHs to integrate TB treatment facilities into SHI, thus ensuring the facilities' eligibility to receive SHI reimbursement for TB examination and treatment fees.
- c) Guidance developed on TB examination and treatment that is reimbursable through SHI and on the integration of TB treatment facilities into SHI, to enable SHI to reimburse those facilities.
- d) TB treatment staff trained on TB care and treatment, and awarded training certificates as required for SHI reimbursement.

- e) Provinces receive monitoring and technical assistance on integrating TB treatment facilities that ensure the eligibility of at least one health facility per district for TB examination and treatment, and reimbursement through SHI.
- f) Health facilities receive guidance on disseminating information and advising patients on the shift from provision of donor-funded to SHI-covered TB drugs, and on the benefits and obligations of patients who get TB drugs through SHI (enrollment in SHI, co-payment, referral to other levels of care through SHI).

4.1.4 Establishment of an M&E system to track and monitor the transition process

Based on the developed database of TB treatment facilities, an M&E framework and processes will:

- a) Track proposed integration options and needed conditions for the provision of TB drugs through SHI to monitor the integration progress.

Health facilities providing TB examination and treatment through SHI		Health facilities not providing TB examination and treatment through SHI		
Reviewing/adding TB drugs to the pharmaceutical and medical-technical list if the drugs are not included in the list, and adding a contract appendix to the medical service contract with SHI	Doctors having appropriate practicing licenses and certificates of TB treatment training granted by the NTP	Making a list of health facilities expected to be eligible to admit TB patients and distribute drugs	Transferring patients	Re-organizing to provide TB examination and treatment through SHI

- b) Track the provision and reimbursement of SHI-covered TB drugs nationwide. It is necessary to connect with VSS to use available data in the VSS's system.

4.1.5 Guidance provided to provinces on TB drug quantification and quantification using a web-based tool

- a) A web-based tool developed to support TB drug quantification and aggregation of quantification at all levels, and guidance on using the tool.
- b) Health facilities quantify SHI-covered TB drugs, provinces consolidate and send the data to the NTP.
- c) The NTP aggregates TB drug demand nationwide.
- d) The NTP quantifies TB drugs for health facilities under ministries (Police, National Defense), prisons, and reformatory centers.

4.1.6 TB drug procurement and bidding

- a) A plan developed for procurement and bidding of TB drugs using the SHI fund for approval by the MOH/Department of Planning and Finance (DPF).
- b) Procurement and bidding of SHI-covered TB drugs follow the approved plan.

- c) Procurement and bidding of TB drugs use other funding sources for prisons and reformatory centers.

4.1.7 TB drug supply, management of drug usage and drug reallocation, including the upgrading of the web-based tool to monitor the drug supply, manage and reallocation

- a) A web-based system developed to monitor the supply and reallocation of TB drugs.
- b) Options determined for TB drug supply and reviewed with related stakeholders.
- c) Management of TB drug supply, drug use, and drug reallocation of SHI-covered TB drugs follows the approved option.
- d) Management of TB drug supply, drug use, and drug reallocation funded by other sources to health facilities under ministries, prisons, and reformatory centers.

4.1.8 Guidance provided to provinces on budget planning for TB drug procurement for patients without SHI cards, and patients in prisons and reformatory centers

This activity will be a consultative process between the NTP with the NCET and the MOH to request the allocation of either the central government budget or provincial budget to support these groups of patients.

- a) Notification on the status of state budget allocation for TB drugs and TB drug stock nationwide.
- b) Technical assistance to provinces on the development of a provincial budget.
- c) Technical assistance to provinces on procurement and bidding of TB drugs from suppliers.

Table 1: Activities planned for the Pre-Transition phase

No.	Activities	Expected results	Timeframe	Responsible by	Focal MOH departments	In collaboration with
1	Proposal of procurement and payment options of first-line TB drugs using the SHI fund.	MOH approval of the procurement and payment options.	Oct 2020 – Apr 2021	NTP, National Lung Hospital	Department of Health Insurance (DHI)	DPF, Drug Administration of Vietnam (DAV)
2	Development and updating of policies and guidelines on TB drug bidding and procurement, management, supply, use, and payment.	(a) MOH's decision to assign the National Lung Hospital to conduct nationally centralized procurement.	March 2021 – April 2021	NTP, Pharmaceutical Department of National Lung Hospital	DPF	DHI, DAV, Legal Department
		(b) Circular 04/2016 regulating TB-related examination and treatment, and reimbursement through SHI. Addition of a new chapter to guide the supply, management, reallocation, use, and payment of first-line TB drugs using the SHI fund.	October 2020 – September 2021	NTP	DHI	DAV, DPF, Legal Department, Medical Services Administration, VSS
		(c) Provinces/cities and health facilities receive the new regulations and guidance on their implementation.	October – December 2021	NTP	DHI	
3	Integration of health facilities into SHI to enable the provision of the first-line TB drugs and related services through SHI.	(a) Mapping of TB treatment facilities providing first-line TB drugs nationwide.	April – May 2021	NTP		Legal Department, DAV
		(b) MOH's Directive on the integration of health facilities providing first-line TB drugs into SHI,	April – July 2021	NTP	DHI	
		(c) Detailed guidelines on integration of TB facilities into SHI.	June – August 2021	NTP	DHI	

No.	Activities	Expected results	Timeframe	Responsible by	Focal MOH departments	In collaboration with
		(d) Monitoring and technical assistance to provinces on SHI integration.	July – December 2021	Provincial TB programs, Health facilities		DHI, DOH, PSS
		(e) Guidance for health facilities on disseminating and advising patients on the shift from provision of donor-funded TB drugs to SHI-covered ones, and patients' benefits and obligations as they get TB drugs through SHI.	July – December 2021	NTP, Provincial TB programs	DHI	DHI, DOH, PSS
		(f) TB treatment staff trained and provided with training certificates as required for SHI reimbursement.	July – December 2021	NTP, Provincial TB programs	DHI	DOH, PSS
4	Establishment of an M&E system to track and monitor the transition process.	(a) Inclusion of indicators to monitor the integration process.	August – November 2021	NTP		Provincial TB programs, DHI
		(b) Inclusion of indicators to monitor the provision and reimbursement of SHI-covered TB drugs.	August – November 2021	NTP		VSS
5	Guidance provided to provinces on TB drug quantification and quantification using a web-based tool.	(a) Development of a web-based tool to support TB drug quantification and aggregation of that quantification at all levels, and guidance in using the tool.	April – June 2021	NTP		
		(b) Health facilities quantify SHI-covered TB drugs; provinces consolidate and send the data to the NTP	June 2021	Health facilities		NTP, Provincial TB programs

No.	Activities	Expected results	Timeframe	Responsible by	Focal MOH departments	In collaboration with
		(c) Aggregation of TB drug demand nationwide.	June 2021	NTP		Provincial TB programs
		(d) Quantification of TB drugs for health facilities under ministries (Police, National Defense), prisons, and reformatory centers.	June 2021	Provincial TB programs		NTP
6	TB drug procurement and bidding.	(a) Bidding and procurement plan for TB drugs using the SHI fund submitted for the DPF's approval.	June – July 2021	Pharmaceutical Department of National Lung Hospital	DPF	NTP
		(b) Procurement and bidding of SHI-covered TB drugs follow the approved plan.	September 2021 – February 2022	Pharmaceutical Department of National Lung Hospital	DPF	NTP
		(c) Procurement and bidding of TB drugs use other funding sources for prisons and reformatory centers.	September 2021 – February 2022	Provincial TB programs	DPF	NTP
7	TB drug supply, management of drug use and drug reallocation, including the upgrading of the web-based tool to monitor the drug supply, management, and reallocation.	(a) Development of a web-based system to monitor the supply and reallocation of TB drugs – e-LMIS	September 2021 – April 2022	NTP		
		(b) Options determined for TB drug supply and consulting with related stakeholders – SOP	December 2021 – February 2022	Pharmaceutical Department of the National Lung Hospital, NTP	DHI	VSS, TB drug producers, and suppliers

No.	Activities	Expected results	Timeframe	Responsible by	Focal MOH departments	In collaboration with
		(c) Supply of SHI-covered TB drugs follows the approved option – SOP	December 2021 – February 2022	TB drug suppliers		Provincial TB programs,
		(d) Supply of TB drugs funded by other sources at health facilities of some ministries, prisons, and reformatory centers.	January – February 2022	Provincial TB programs		
8	Guidance provided to provinces on budget planning to procure drugs for patients without SHI cards, or in prisons and reformatory centers.	(a) Notification on the status of state budget allocation for TB drugs and TB drug stock nationwide.	May – June 2021	NTP		Provincial TB programs, DOH
		(b) Technical assistance to provinces on the development of a provincial budget.	May – July 2021	NTP		Provincial TB programs, DOH
		(c) Technical assistance to provinces on procurement and bidding of TB drugs from suppliers.	June – July 2021	NTP		Provincial TB programs, DOH

4.2 Transition Implementation Phase, 2022 – 2023

4.2.1 Provision of the first-line TB drugs through SHI at health facilities

- a) First-line TB drugs prescribed and dispensed at central/provincial/district-level health facilities.
- b) First-line TB drugs prescribed by district-level health facilities are dispensed at communal health stations, or eligible communal health stations self-prescribe and dispense.

4.2.2 Payment and reimbursement between health facilities, VSS, and TB drug suppliers, following the MOH's Circulars and VSS's guidance

- a) Reimbursement process implemented and facilities begin to receive reimbursement for TB drugs dispensed.

4.2.3 Update of guidelines on SHI reimbursement for Gene-Xpert tests

- a) Guidelines updated to allow for full SHI reimbursement of Gene-Xpert testing.

4.2.4 Monitoring and evaluation of the transition process

- a) Independent assessment to evaluate the provision of first-line TB drugs after six months or one year of implementation.
- b) Transition review workshop.

4.2.5 Complete TB drug supply chain and logistic management system

For monitoring and management of the use and reallocation of TB drugs

- a) Software developed for the reallocation of TB drugs from different funding sources.
- b) TB drug reallocation software connected with VSS's drug management system (e-LMIS).

4.2.6 Monitoring and management of TB drug use and reallocation

4.2.7 Technical assistance provided to provinces and health facilities on TB drug use, reallocation, and payment

During the implementation process, technical assistance to provinces and health facilities on TB drug use, reallocation, and payment.

Table 2: Activities planned for the transition phase

No.	Activities	Expected results	Timeframe	Responsible by	Focal agency from the MOH	In collaboration with
1	Provision of first-line TB drugs through SHI at health facilities.	a) First-line TB drugs prescribed and dispensed at central/provincial/district-level health facilities.	January 2022	Health facilities		NTP, Provincial TB programs, PSS
		b) First-line TB drugs prescribed by district-level health facilities are dispensed at communal health stations, or eligible communal health stations self-prescribe and dispense TB drugs.	March 2022	Health facilities		NTP, Provincial TB programs, PSS
2	Payment and reimbursement between health facilities, VSS, and the drug suppliers, following the MOH's Circulars and VSS's guidance.		As per the regular timeline	Health facilities, VSS, Suppliers		
3	Update of guidelines on SHI reimbursement for Gene-Xpert test	Detailed steps for SHI reimbursement of Gene-Xpert MTB/RIF for health facilities	February – May 2022	NTP	DHI	Provincial TB programs, DOH, VSS
4	Monitoring and evaluation of transition process	a) Independent assessment to evaluate the provision of first-line TB drugs after six months or one year of implementation.	August 2022	Independent evaluation team		Provincial TB programs, DOH
		b) Transition review workshops.	December 2022 April 2023	NTP	DHI	VSS
5	Complete TB drug supply chain and logistic management system	a) TB drug reallocation software completed	March – June 2022	NTP		Provincial TB programs
		b) TB drug reallocation software connected with the VSS drug management system (e-LMIS).	December 2022	NTP		VSS
6	Monitoring and management of TB drug use and reallocation.		Continued	NTP		Provincial TB programs, DOH

No.	Activities	Expected results	Timeframe	Responsible by	Focal agency from the MOH	In collaboration with
7	Technical assistance provided to provinces and health facilities on TB drug use, reallocation, and payment.		Continued	NTP		VSS, PSS, DOH

4.3 Post-Transition Phase, 2024 – 2025

4.3.1 Continued drug procurement, management, supply, reallocation, and use

Continue, refine, and optimize activities as necessary based on implementation phase review.

4.3.2 Continued technical assistance to provinces during the quantification, supply, reallocation, and payment of TB drugs

Continue, refine, and optimize activities as necessary based on implementation phase review.

4.3.3 Adjustment/addition/revision of related policies

- a) Develop guidance on TB care and treatment (Decision 1314).
- b) Develop guidance on TB examination and treatment and reimbursement through SHI and on integration.
- c) Develop circular on TB drug management, use, and payment through SHI.

4.3.4 Development of sustainable financing plan for TB program

Develop a plan for sustainable financing of all aspects of the TB program with no donor support.

4.3.5 Development of procurement and payment options for the transitioning of the second-line TB drugs into SHI

Incorporate lessons learned from the first-line TB drug transition experience into the development of SHI transition options for second-line TB drugs.

Note: Specific activities and timelines of this phase are to be determined.

4.4 Risks And Management For The Pre-Transition Phase

1. The integration of TB facilities into SHI is slow. For health facilities, especially those that deliver only preventive services, integration is not expected to be complete by the end of 2021. Suggested actions are:
 - Provincial TB programs assess the progress of integration in the province and proactively request funds from the provincial budget to support the procurement of TB drugs so that the drugs can be provided free of charge to patients in 2022 at health facilities that have not yet been integrated into the SHI scheme.
 - Provincial DOHs collaborate with PSS to arrange temporary transfer of patients from health facilities that provide only preventive services to nearby facilities that provide curative service so that the patients receive SHI-covered TB drugs.
2. Circular 04 revision/replacement might not be completed in 2021 to guide the procurement, supply, reallocation, management, and reimbursement of SHI-covered TB drugs. Suggested action is:
 - The NTP consults with the MOH/DHI and VSS to promptly procure and supply drugs in compliance with the current regulations.
3. Late procurement of SHI-covered TB drugs in 2021, leading to the unavailability of SHI-covered TB drugs for use in 2022. Suggested actions are:
 - The NTP proposes the NCET and MOH extend the coverage of the state budget for TB drugs for 2022.
 - The NTP requests the provincial TB programs to plan a budget for procuring TB drugs from the provincial budget, ensuring sufficient medicines for patients in their provinces.
4. There is not yet a government decision on using the central and provincial budget to procure drugs for patients without SHI cards or to subsidize SHI cards and TB drug co-payment: The NTP proposes the NCET and MOH allocate funds from the state budget for this, or request provinces to arrange a budget source for these activities.

ANNEX

Transition Tracker For Integrating TB Services Into SHI



TB transition
roadmap tracker.xlsx

A snapshot of the tracker

TRANSITION TRACKER FOR INTEGRATING TB SERVICES INTO SHI												
					PLAN							
					ACTUAL							
						PRE-TRANSITION PHASE						
No.	Main activities/results (as per Table 1, 2 of the roadmap)	MOH, VSS focal units	TA supported by	Status	2020							
					Nov	Dec	Jan	Feb	Mar	Apr	May	
A	PRE-TRANSITION PHASE											
1	Proposal of procurement and payment options of first-line TB drugs using the SHI fund.	DHI		Completed			25-Jan: MOH approved the option	✓				
2	Development and updating of policies and guidelines on TB drug bidding and procurement, management, supply, use, and payment.											
a	MOH's Decision to assign the National Lung Hospital to conduct nationally centralized procurement of the first-line SHI-covered TB drugs	DPF	LHSS	Completed						28-Apr: MOH's Decision 2020	✓	