

За рубежом

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THE MEDICAL INSURANCE IN THE KYRGYZ REPUBLIC AT THE PRESENT STAGE

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The article describes system of compulsory medical insurance and voluntary medical insurance in the Kyrgyz Republic nowadays. The becoming of medical insurance as system of access for citizens to preferential medical services and medications is considered. The State Guarantees Program offers equal conditions for entire population to access free medical services and particular medications, especially for certain category of citizens with chronic, age-related or individual physical characteristics.

Key words: medical insurance; medical services; preferential medicine; deductions from employers.

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Taking care of one's own health is the responsibility of every sane person, as well as any sovereign state. The state is trying to create a system of providing medical services to its citizens based on accessibility and low cost. This is due to the introduction of various programs in the healthcare system in Kyrgyzstan.

Compulsory medical insurance (CMI) in Kyrgyzstan was established on January 1, 1997 by Resolution No. 298-1 of the Legislative Assembly of the Jogorku Kenesh (Parliament) of the Kyrgyz Republic dated January 16, 1996. This was preceded by the introduction of the National Health Care Reform Program of the Kyrgyz Republic, namely:

- The “Manas” program (1996–2005);
- The “Manas Taalimi” program (2006–2011);
- The “Health” program (2012–2016).

The primary task of these programs was to create a “Single Payer” system in the healthcare of the Kyrgyz Republic [1].

The compulsory health insurance system is formed at the expense of employers' deductions from the salary fund.

The Program of State Guarantees (PSG) for the provision of free and preferential medical care for the population of the republic was founded in 2001 by a Decree of the Government of the Kyrgyz Republic [2].

In fact, the PSG is a set of rules and procedures for providing medical care to citizens of the country, where the volume, types and conditions of medical services are clearly prescribed, as well as which category of citizens has the right to receive free medical services and medicines in healthcare organizations, regardless of the forms of ownership involved in this program. If the volume of medical care exceeds the limits of certain

amounts of funding under the PGG program, then the patient is co-paid, i.e. the patient contributes his own financial resources to cover the cost of the medical services he receives [3]. An example of the co-payment amount for planned inpatient treatment is shown in Table 1.

Table 1 shows the amount of co-payment for planned inpatient treatment, expressed in Soms, if there is a referral for hospitalization in three level categories [4].

Currently, citizens of the republic seek medical help from Centers of General Medical Practice (CGMP) and Centers of Family Doctors (CFD). In total, there are 26 CGMPs in the country, and 17 CFDs.

The state body responsible for the organization and control of the compulsory health insurance system in the country is the Compulsory Health Insurance Fund (CHIF) under the Government of the Kyrgyz Republic. It is the CHIF that issues a compulsory health insurance Policy to citizens to receive medical services in accordance with the PSG.

Table 1
Co-payment amounts for planned inpatient treatment (Som is the national monetary unit of the Kyrgyz Republic)

Types of co-payment			Hospitals, with the exception of republican ones	Republican hospitals
Co-payment of the therapeutic profile	If there is a referral for hospitalization	Minimum level	330	330
		The average level	840	1160
		Maximum level	8400	11 170
Surgical co-payment	If there is a referral for hospitalization	Minimum level	430	430
		The average level	1090	1510
		Maximum level	9170	14 310

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Table 2

Norms for the release of medicines by preferential prescriptions

#	Name of the disease	Name of the medicinal product and medical device	The rate of issue per patient per year
1	End-stage oncological diseases	Ketoprofen, ampoules for injection, tablets	49 000 mg
		or Morphine hydrochloride, ampoules for injection, tablets	5000 mg
2	patients with mental disorders (epilepsy, schizophrenia, affective disorders)	or Tramadol, ampoules for injection, tablets	44 000 mg
		Galaperidol, ampoules for injection, tablets	3200 mg
		Trigekcifinidil, tablets	1000 mg
		Klozapin, tablets or Hlorpromazin, tablets	17 000 mg
		Amitriptilin, tablets	14 500 mg
		Clonazepam, tablets	560 mg
		Fenolbarbetal, tablets	38 000 mg
3	Bronchial asthma	or Karbamazepin, tablets	140 000 mg
		Salbutamol, an aerosol for inhalation	100 mg
		Beclametazon, an aerosol for inhalation	200 mg for adults/ 100 mg for children
4	Hypertonic disease	Prednizolon, tablets	4100 mg
		Bisoprolol, tablets	3600 mg

One of the important points of the PSG is the provision of medicines to privileged citizens, certain types of diseases. Table 2 shows the norms for the release of medicines for beneficiaries.

Unfortunately, due to the limited budget of the Ministry of Health of the Kyrgyz Republic, the list of medicines is very limited and cannot provide all citizens in need for other types of diseases, in addition to those listed in Table 2. Only patients with the following diseases can receive preferential medicines:

- paranoid schizophrenia;
- affective disorders of various origins;
- epilepsy;
- bronchial asthma;
- hypertension;
- cancer in the terminal stage.

Compulsory medical insurance has become mandatory for all citizens of the Kyrgyz Republic since April 2023. Despite all attempts by the state to force people to buy a one-year compulsory health insurance policy for 1.722 soms (US \$19.19). There are 5.5 million citizens with compulsory medical insurance, but 2.7 million citizens still do not have compulsory medical insurance. This has become a challenge for the CMI system, which is explained by the fact that the level of quality of medical care in public hospitals remains low and many citizens prefer to go to private medical clinics for more expensive payments, where they are sure that the level of medical services will be much higher than the state ones.

Anyone can apply for an CMI policy by registering on the portal of state electronic services.

In addition to compulsory medical insurance in Kyrgyzstan, there is also voluntary medical insurance (VMI).

In Kyrgyzstan, 11 insurance companies are engaged in providing insurance services, only the following four companies provide VMI services:

- CJSC Insurance Company “Kyrgyzstan”;
- “Jubilee Kyrgyzstan” Company;
- CJSC “NSK”;
- CJSC IC “ATN Polis”.

Only legal entities in Kyrgyzstan have the right to sign a VMI agreement. Insurance companies provide the following rates: standard, gold and platinum. For example, with the number of 15 employees of a private company at the “standard” tariff per employee, the company pays the insurance company 10 thousand soms per year. The maximum total coverage of VMI insurance cases is only 150 thousand soms per year. For each family member, an employee of the company pays out of his own funds 3 thousand soms per VMI [5].

- The medical services covered by VMI include:
- Emergency medicine;
- Hospital stay;
- Dentistry;
- Medical research and tests;
- Consultations with doctors.

Each insurance company has its own list of clinics that provide medical services for VMI, with which they have customer service agreements with the company.

However, VMI is not popular among the population of the republic, since the general low income of citizens does not allow them to spend their financial resources on taking care of their own health. Usually, people face health problems in fact, when it is already necessary to take emergency measures. Absolutely no measures are being taken in the field of prevention of various diseases among citizens, and this is the reason for the large increase in various infectious and other diseases. In particular, the number of patients with infectious diseases, diseases of the nervous system, eye diseases, respiratory and digestive diseases, etc. has increased recently. Table 3 shows data on the growth of diseases by major groups of diseases from 2017 to 2022.

The reason for the growth of these diseases is environmental pollution and low income of the population. People cannot afford to carry out preventive examinations every year and this has resulted in a large increase in the number of patients in the main groups of diseases.

For the development of the CMI system, it is necessary to make the work of the CHIF more transparent and open so that people can see that this system really works for the benefit of citizens. In this regard, employers have no incentive to deduct more for compulsory medical insurance, many even try by any means to reduce the number of deductions by artificially reducing the number of their employees, i.e. reducing the amount of the salary fund. The percentage of contributions to the compulsory medical insurance is included in the total amount of contributions to the Social Fund of the Kyrgyz Republic by the employer. Thus, contributions to the Social Fund of the Kyrgyz Republic amount to 10%, of which 2% are contributions to the CMI, which make up the budget of the CHIF.

In practice, a very small percentage of citizens receive free medical care and benefits. Mostly, retirees and disabled people who have stood in long queues and pa-

Table 3

Number of diseases by major groups of diseases (cases) [6]

Items	2017	2018	2019	2020	2021	2022
Number of cases diagnosed for the first time	1 590 013	1 584 639	1 553 429	1 104 772	1 450 017	1 690 979
Infectious and parasitic diseases	88 420	89 591	93 560	90 609	107 326	95 035
Neoplasms	10 203	10 356	9 973	6 736	7 884	9 517
Diseases of the endocrin system, digestion disorders, disorders of metabdism and immunity	28 002	25 982	23 920	18 934	18 092	20 730
Blood circulation diseases and other hematogenic	64 522	55 989	50 578	28 768	34 770	49 684
Mental and behavioral disorders	11 979	10 894	10 096	6 569	8 530	10 796
Diseases of nervous sistem and sense organs	44 895	46 538	44 514	29 026	40 696	45 892
Diseases of the eye and its appendages	83 580	89 916	89 323	50 674	64 526	87 930
Diseases of the ear and mastoid	56 973	54 856	58 058	33 784	40 205	53 013
Blood circulation diseases	58 877	53 565	56 739	41 213	37 032	43 293
Respiratory diseases	574 088	593 804	531 940	406 435	596 442	687 141
Digestive diseases	132 958	127 867	188 301	126 491	174 307	192 068
Urogenital diseases	121 509	112 570	104 086	75 719	86 176	98 974
Reproductive sistem	69 571	66 301	50 540	33 245	45 902	61 908
Skin infections and underskin fat	79 335	79 206	77 686	46 426	56 875	74 515
Osteo-muscular and connective tissue disorders	55 468	56 351	55 000	37 751	46 593	57 273
Congenital anomalies (developmental defects)	5 292	5 789	6 327	3 562	4 321	6 026
Symptoms, signs and ill-defined state	6 010	6 183	7 814	4 430	5 674	7 987
Certain conditions originating in the perinatal period	9 420	7 022	7 596	5 242	7 560	10 031
Injuries and poisonings	88 911	91 859	87 378	59 158	67 106	79 166

tiently waiting for the delivery of medicines in limited quantities receive preferential medicines in the Centers of Family Doctors.

Thus, health insurance in Kyrgyzstan is at an early stage of development and has yet to overcome many challenges. The beginning has already been laid in the creation of CMI and VMI systems for the development of access to medical services for citizens of the country.

It is also necessary to take into account the low level of awareness of citizens about the list of medical services and medicines provided free of charge under the com-

pulsory health insurance system. Many people do not know that they have the right to receive certain procedures free of charge in polyclinics at their place of residence. Informing the population about free medical services is a direct and joint responsibility of the Compulsory Health Insurance Fund and the Centers of Family Doctors of the Kyrgyz Republic.

All these urgent problems must be solved immediately, since this is a matter of «the health of the nation.» How healthy the future generation will be mentally and physically depending on the level of health insurance.

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