



The Essential Package of Health Services and Health Benefit Plans in Ethiopia



About the health benefit plan crosswalk analysis

An Essential Package of Health Services (EPHS) is a broad policy statement that identifies the services that a government has prioritized. The government seeks to ensure that these essential services reach the population equitably. A health benefit plan (HBP) specifies an explicit set of services and the cost-sharing requirements for beneficiaries to access those services.

In 2015, the USAID-funded Health Finance and Governance (HFG) project completed a landscape analysis of the EPHS in the 24 USAID priority countries for Ending Preventable Child and Maternal Deaths (EPCMD). The analysis found that the government in most of the countries intends for the public and/or private not-for-profit facilities in the country to deliver the services in the EPHS. It also showed that several governments were implementing major HBPs (such as social health insurance schemes) as a primary strategy for moving toward universal health coverage. Yet it remained unclear how the EPHSs and HBPs are formulated, how they are modified, and the extent to which they overlap.

HFG conducted a second landscape analysis in 2016 to identify existing HBPs in the countries, and the services they cover. It then did a crosswalk analysis – a mapping of items on one list to equivalent items on another list – of the services specified in the country's EPHS and those identified in an HBP. This companion analysis to the EPHS country snapshot documented the degree of alignment between the EPHS and HBP.

This brief presents HFG's findings and observations for policymakers and program managers seeking to promote alignment of services in the EPHS with services covered in the HBP and move toward universal health coverage.

Contents

| About the health benefit plan | |
|--------------------------------------|----|
| crosswalk analysis | I |
| Health benefit plans in Ethiopia | |
| Methodology | 2 |
| Main observations from the crosswalk | 3 |
| Sources | 16 |

Health benefit plans in Ethiopia

Community-Based Health Insurance

Ethiopia's community-based health insurance (CBHI) is a publicly subsidized scheme in which households pay into community funds. Each household must pay an annual contribution that varies by region, from US\$6.72 to US\$9.60 per household per year. Regional governments finance their own solidarity fund for indigents.

CBHI is managed by the Ethiopian Health Insurance Agency's CBHI National Coordination Unit. At the woreda (district) level, three officers administer the fund, manage user databases, and reimburse health care providers. At the kebele (neighborhood) level, the executive body registers members and collects premiums. The size of the potential risk pool varies based on the population of the community, from about 15,000 to 67,000 people. All CBHI members receive a 25 percent total premium subsidy from the federal government. CBHI covers outpatient and inpatient care in public facilities.

CBHI targets community members in the informal sector. CBHI was piloted in in 2011 in 13 woredas and enrolled nearly 158,000 households (52 percent of the target population). Of those enrolled, 85 percent were paying members; the scheme collected Birr 30 million in 2011–2014. In that three-year period, roughly one million CBHI beneficiaries used a health care service; the poorest 20 percent of enrollees made up the largest share of beneficiaries. The Ethiopian government hopes to expand the program to 80 percent of people living in 80 percent of woredas by 2020 in an effort to achieve universal health coverage.

Social Health Insurance

The Social Health Insurance (SHI) scheme was established under an SHI law sponsored by the Ethiopian Health Insurance Agency (EHIA). When operational, this scheme will be financed through payroll and pension contributions made by formal sector workers and their employers. Contributions will be based on a fixed rate of the worker's salary, typically 3 percent, with equal contributions from the employers. Eleven percent of Ethiopia's population – those working in the formal sector and their family members – are eligible for this scheme.

The EHIA will contract with public and private health service providers to provide services to SHI members. The EHIA is also responsible for collecting and administering monthly SHI contributions and monitoring scheme performance.

SHI will be mandatory for formal sector workers, defined as any individual who works for a public enterprise, public office, or at a business with at least 10 employees. The government estimates that SHI contributions will total US\$410 million over the next five years, though its annual operating budget will vary. Although the Ethiopian government must build capacity to administer the SHI scheme, it aspires to eventually cover 10 million formal sector beneficiaries.

Methodology

HFG identified all major HBPs operating in the country through a desk review of public domain sources found through web-based searches, including: government strategy documents, studies and reports, peer-reviewed journal articles, news articles, and gray literature. A list of sources reviewed is at the end of this document. We collected information across all 24 countries using a common template. We analyzed the HBPs operating in the country which:

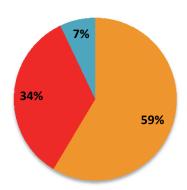
- are fully or partially publicly financed.
- employ a risk-pooling mechanism to provide financial protection to beneficiaries when they access covered services.

HFG determined whether the HBP had an explicit, published list of covered services. We compared services included in the government's EPHS to those in the HBP using Microsoft Excel. To indicate how each service included in the EPHS relates to those in the HBP, we established a color-coded system as follows:

TABLE I: CLASSIFICATION SYSTEM FOR THE CROSSWALK ANALYSIS

| Service included in EPHS matches service included in HBP | | |
|---|---|--|
| Service included in HBP fits within a broader category of services included in EPHS | Service included in EPHS fits within a broader category of services included in HBP | |
| Service included in EPHS but not included in HBP | Service included in HBP but not included in EPHS | |
| Service explicitly excluded from EPHS | Service explicitly excluded from HBP | |

Main observations from the crosswalk



- ► HFG found an HBP only for the SHI scheme. There was no HBP for CBHI.
- ► The HBP for SHI uses vague terms for services and lists items such as "outpatient care."

- The ambiguity of the HBP for SHI makes it difficult to determine the alignment between the EPHS and the HBP for SHI.
- Delivery services are the only reproductive, maternal, neonatal, and child health (RMNCH) services listed explicitly in the HBP.
- The HBP is more explicit in naming excluded services, including dental procedures, transplants, and addiction treatment.

The detailed crosswalk is shown below. The tables present the health services essentially as written in the official health policy documents, although HFG has edited them where necessary to maintain a consistent style across this series of country briefs.

TABLE 2: SHI CROSSWALK ANALYSIS

| Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP | |
|---|--|--|--|
| Provision of condom, mini pills, combined pills and injectable contraceptives | Service included in EPHS fits within a broader category of | | |
| Provision of long-term contraceptives including Norplant, IUD, and injectable | | Diagnostic tests and generic drugs included in | |
| Laboratory diagnosis and treatment of sexually transmitted infection (STI) | | the drug list of the Agency, and prescribed by medical practitioners | |
| Syndromic prescription of STI based on laboratory tests | | | |
| Post-abortion care including manual vacuum aspiration (MVA) | | | |
| Provision of all forms of family planning including permanent methods | | | |
| Treatment of abnormal menstruation including dilation and curettage (D&C) | | Outpatient care | |
| Provision of condom | | | |
| Management of referred complicated cases | | | |
| Management of abortion including MVA | | | |
| Family planning | | | |

| Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|---|--|---------------------------|
| Information, education, and counselling (IEC) on sexuality-related issues, including the problem of HIV/AIDS and HTP* | Service included in EPHS but not included in HBP | |
| IEC and counselling on family planning | Service included in EPHS but not included in HBP | |
| Promotion and advice on family planning and Expanded Program on Immunization (EPI) | Service included in EPHS but not included in HBP | |
| Individual advice, counselling contract tracing of STI and treatment | Service included in EPHS but not included in HBP | |
| IEC and encouragement of contact treatment for STI | Service included in EPHS but not included in HBP | |
| Advice, counselling, and linking of STI cases to health center | Service included in EPHS but not included in HBP | |
| | Service explicitly excluded from HBP | In vitro fertilization |

 $^{*\,\}mathsf{Acronym}\;\mathsf{undefined}$

| Malaria Malaria | | |
|---|---|---|
| Treatment of malaria | | |
| Malaria clinical diagnosis and treatment | | |
| Treatment of malaria with oral drugs | | |
| Laboratory diagnosis of malaria, rheumatoid factor (RF), typhoid fever, and helminthiasis and proper treatment, including short-term inpatient care of RF and malaria | Service included in EPHS fits within a broader category of services included in HBP | Diagnostic tests and generic drugs included in the drug list of the Agency, and prescribed by medical practitioners |
| Treatment of malaria and hook worm in pregnancy | | |
| Treatment of malaria [in children] (ed note – explicitly listed under "child health" in Ethiopia EPHS) | | |

| Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|---|---|---|
| | Tuberculosis | • |
| Follow-up treatment to TB and leprosy patients | | |
| Follow-up for reactions and complications, timely transfer | Service included in EPHS fits within a broader category of services included in HBP | Outpatient care |
| Free treatment of all TB and leprosy patients at outpatient department level | | |
| Case diagnosis (clinically and AFS [acid-fast smear]) and initiation of treatment of TB and leprosy | Service included in EPHS fits within a broader category of services included in HBP | Diagnostic tests and generic drugs included in the drug list of the Agency, and prescribed by medical practitioners |
| Case diagnosis with AFS, X-ray support | services included in Fibi | medicai practitioners |
| Inpatient treatment of complicated TB and leprosy patients, and those who develop reactions | Service included in EPHS fits within a broader category of services included in HBP | Inpatient care |
| IEC, and referral of suspected cases to health center | Service included in EPHS but not included in HBP | |
| Defaulter tracing of [tuberculosis] | Service included in EPHS but not included in HBP | |
| | HIV/AIDS | |
| Prevention of mother-to-child transmission (PMTCT) and counselling | | |
| Treatment of opportunistic infection in diagnosed HIV/AIDS cases | Service included in EPHS fits within a broader category of services included in HBP | Outpatient care |
| Treatment of all forms opportunistic infections | | |
| PMTCT | | |
| Screening and counselling on STI/HIV/AIDS | | |
| IEC, encouragement and transfer to health center including individuals planning marriage for voluntary counseling and testing (VCT) | | |
| VCT testing services | Service included in EPHS fits within a broader category of | Diagnostic tests and generic drugs included in the drug list of the Agency, and prescribed by |
| VCT services | services included in HBP | medical practitioners |
| ARV [antiretroviral] prescription of diagnosed AIDS patients | | |
| Diagnosis and ARV treatment | | |

| Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|---|---|---------------------------|
| Condom promotion and distribution | Service included in EPHS but not included in HBP | |
| Support and guidance to families on home-based care | Service included in EPHS but not included in HBP | |
| | Maternal Health | |
| Care and activities during pregnancy | | |
| Clean and safe delivery at health center and/or at home | | |
| Destructive delivery | | |
| Provision of assisted delivery (episiotomy, instrumental delivery) services | Service included in EPHS fits within a broader category of services included in HBP | |
| Clean and safe delivery, basic essential obstetric care (BEOC) at health center | | Delivery services |
| Treatment of breast infections and puerperal sepsis | | , , |
| Diagnosis, referral, and facilitation of early transfer of severe forms of infection and puerperal problems | | |
| Treatment of all forms of puerperal problems including infections, psychosis, and fistula | | |
| Manual removal of placenta | | |
| Comprehensive antenatal care services on daily basis | | |
| Management of cases of pre-eclampsia, eclampsia, and malaria in pregnancy | Service included in EPHS fits within a broader category of services included in HBP | Outpatient care |
| Antenatal care and follow-up of pregnant women | | |
| Diagnosis, referral, and transportation of antepartum hemorrhage cases | | |
| Skilled intervention of high risk mothers including inpatient and at maternity waiting area | Service included in EPHS fits within a broader category of services included in HBP | |
| Management of postpartum hemorrhage in mothers | | Inpatient care |
| Where there is no DH [district hospital] in the district, one health center will be upgraded to give Comprehensive Emergency Obstetric Care (CEOC) | | |

| Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|---|---|--|
| CEOC | | |
| Management of all forms of retained placenta including hysterectomy | Service included in EPHS fits within a broader category of services included in HBP | Inpatient care |
| Immunization of mothers and children | | |
| Tetanus immunization [†] | Service included in EPHS fits | Diagnostic tests and generic drugs included in |
| Provision of iron and folate supplementation | within a broader category of services included in HBP | the drug list of the Agency, and prescribed by medical practitioners |
| Screening and management of syphilis and other problems in mothers | - services included in 1 lbi | medical practitioners |
| IEC on balanced diet | Service included in EPHS but not included in HBP | |
| Breast feeding | Service included in EPHS but not included in HBP | |
| HTP* | Service included in EPHS but not included in HBP | |

 $[\]dagger$ This was explicitly included in the "Family Health/Antenatal Care" portion of Ethiopia's EPHS

^{*} Acronym undefined

| Newborn Health | | |
|--|---|--|
| Basic resuscitation, prevention of hypothermia, ophthalmia neonatorum, and cord infections of newborn | | |
| Identification, referral, and facilitation of transfer of prolonged labor, fetal distress, bleeding, and retained placenta | Service included in EPHS fits within a broader category of services included in HBP | Inpatient care |
| Management of complications in the neonate (sepsis without severe manifestation, local infections, etc.) | | |
| Treatment of premature births and those with birth injury | | |
| Management of neonatal hypothermia and all forms of neonatal infections | Service included in EPHS fits within a broader category of services included in HBP | Outpatient care |
| Immunization of newborn | Service included in EPHS fits within a broader category of services included in HBP | Diagnostic tests and generic drugs included in |
| Provision of iron and Vitamin A supplements | | the drug list of the Agency, and prescribed by medical practitioners |

| Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|--|---|---|
| Birth weight recording of all newborns | Service included in EPHS but not included in HBP | |
| Initiation of breast feeding by immediately putting the newborn on breast | Service included in EPHS but not included in HBP | |
| Promotion of Essential Nutrition Action (ENA) | Service included in EPHS but not included in HBP | |
| Promotion of breast and complementary feeding | Service included in EPHS but not included in HBP | |
| | Child Health | |
| Treatment of all forms of febrile illnesses referred from health practitioners (including malaria, pneumonia, meningitis, and measles complications) | | |
| Treatment of anemia, diarrhea, intestinal helminths based on laboratory diagnosis | Service included in EPHS fits | |
| Supplementary feeding during emergencies | within a broader category of services included in HBP | Outpatient care |
| Treatment of children with moderate to severe malnutrition | | |
| Outpatient and inpatient treatment of all complicated and/or referred cases of infections supported by laboratory and X-ray diagnosis | | |
| Outpatient and inpatient treatment of all complicated and/or referred cases of infections supported by laboratory and X-ray diagnosis | Service included in EPHS fits within a broader category of services included in HBP | Inpatient care |
| Inpatient treatment of all forms of malnutrition | | |
| Immunization of mothers and children | | |
| Treatment of eye and skin infections with ointments | | |
| Treatment of common intestinal helminths with broad spectrum drugs | Service included in EPHS fits within a broader category of | Diagnostic tests and generic drugs included in the drug list of the Agency, and prescribed by |
| Vitamin A and iron supplementation | services included in HBP | medical practitioners |
| Vitamin A supplementation to mothers and children | | |
| Vaccination according to national guideline | | |

| Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|---|---|--|
| Daily integrated immunization services at health center and at outreach sites | Service included in EPHS fits | Diagnostic tests and generic drugs included in |
| Initial immunization at birth and follow-up doses to those coming for other services and from catchment | within a broader category of services included in HBP | the drug list of the Agency, and prescribed by medical practitioners |
| Assessment and classification of common childhood illnesses using the integrated management of childhood illness (IMCI) guideline and provision of treatment for malaria and diarrhea with new oral rehydration solution (ORS) and zinc | Service included in EPHS but not included in HBP | |
| Promotion of appropriate feeding practices | Service included in EPHS but not included in HBP | |
| Growth monitoring based on national guidelines | Service included in EPHS but not included in HBP | |
| Promotion of Essential Nutrition Action (ENA) | Service included in EPHS but not included in HBP | |
| Rapid test of edible salt for iodine | Service included in EPHS but not included in HBP | |
| Promotion of complementary feeding including demonstration of food using locally available items | Service included in EPHS but not included in HBP | |
| Regular growth monitoring | Service included in EPHS but not included in HBP | |
| Supplementary and therapeutic feeding | Service included in EPHS but not included in HBP | |
| Micronutrient complementary supply | Service included in EPHS but not included in HBP | |
| Test of household salt for iodine at outreach sites | Service included in EPHS but not included in HBP | |
| Surveillance of vaccine preventable diseases | Service included in EPHS but not included in HBP | |
| Defaulter tracing | Service included in EPHS but not included in HBP | |
| Other Communicable Diseases | | |
| Clinical and X-ray diagnosis of all forms of respiratory infections including pneumonia at | Service included in EPHS fits within a broader category of services included in HBP | Outpatient care |
| inpatient and outpatient departments | Service included in EPHS fits within a broader category of services included in HBP | Inpatient care |

| Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|---|---|---|
| Inpatient isolated care to clinical rabies cases | Service included in EPHS fits within a broader category of services included in HBP | Inpatient care |
| Provision of full course of anti-rabies vaccination | | |
| Provide anti-rabies vaccine | | |
| Treatment of diarrhea with some dehydration using oral rehydration solution (ORS) | within a broader category of the drug list of the Agency, and pre | Diagnostic tests and generic drugs included in the drug list of the Agency, and prescribed by medical practitioners |
| Treatment of intestinal parasite infestation with broad-spectrum antihelminthics | | |
| Urine test and antibiotic treatment of UTI | | |
| Follow-up and support to leprosy patients | Service included in EPHS but not included in HBP | |
| Defaulter tracing of [leprosy] | Service included in EPHS but not included in HBP | |
| Follow-up for reactions and complications, timely transfer [leprosy] | Service included in EPHS but not included in HBP | |
| Training, advice, and treatment of leprosy patients on disability prevention | Service included in EPHS but not included in HBP | |
| IEC and monitoring of the occurrence of rabies | Service included in EPHS but not included in HBP | |
| Organizing control of rabid animals in collaboration with agriculture sector during epidemics | Service included in EPHS but not included in HBP | |
| | Drugs | |
| Immunization and chemoprophylaxis | Service included in EPHS fits within a broader category of services included in HBP | Diagnostic tests and generic drugs included in the drug list of the Agency, and prescribed by medical practitioners |
| Non-Communicable Diseases | | |
| Outpatient department and inpatient management of complicated hypertension | Service included in EPHS fits within a broader category of services included in HBP | Inpatient care |
| Treatment and follow-up of epilepsy patients | Service included in EPHS fits within a broader category of services included in HBP | Outpatient care |

| | Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|--|--|---|---|
| Treatme ointmer | ent of acute eye infections with eye | Service included in EPHS fits within a broader category of services included in HBP | Diagnostic tests and generic drugs included in the drug list of the Agency, and prescribed by medical practitioners |
| | tics and fluid treatment of acute en, referral and facilitation of rtation | | |
| blood s | sis of new cases of diabetes with fasting ugar (FBS), referral for initial ent, follow-up, and drug refill | | |
| | sis of hypertension and treatment of olicated cases on ambulatory basis | | |
| Diagnos | sis and treatment of bronchial asthma | | |
| Clinical | diagnosis and treatment of pneumonia | | |
| Clinical diagnosis and treatment of complicated cases of severe pneumonic bronchial asthma with O2 support and steroid if needed | | | |
| Diagnosis, initiation of treatment, and follow- up of diabetes patients | | | |
| School health education and screening students for major chronic problems and disability | | Service included in EPHS but not included in HBP | |
| IEC on | diabetes mellitus, hypertension | Service included in EPHS but not included in HBP | |
| | | Other | |
| - F 4 | Antibiotic treatment of acute gingival periodontal infections and tooth extractions | Service included in EPHS fits within a broader category of services included in HBP | Outpatient care |
| Denta health | Treatment of all forms of dental problems including tooth extraction | | |
| | IEC on oral hygiene and referral of patients | Service included in EPHS but not included in HBP | |
| E mergency care | Arresting bleeding of all cases | Service included in EPHS fits within a broader category of services included in HBP | Surgical services |
| | Blood transfusion services | | |
| | Public education on common emergency conditions | Service included in EPHS but notincluded in HBP | |

| | Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|-----------------------------------|--|--|---|
| | Treatment of allergic conjunctivitis | Service included in EPHS fits within a broader category of services included in HBP | Outpatient care |
| | Oral or IV rehydration of all stages of dehydration | | |
| | Removal of foreign body in the eye, nose, and ear | | |
| | Antihistamine treatment and follow- up of victims of snake and insect bite | | |
| vices | Stabilization of fractures with splint | Service included in EPHS fits within a broader category of services included in HBP | Surgical services |
| Other public health interventions | Application of splint for fractures and referral | | |
| | Management of complicated eye infections including minor surgical intervention | | |
| | Surgical treatment of acute abdomen and injury | | |
| | Provision of anti-pain to cases of severe pain | Service included in EPHS fits within a broader category of services included in HBP | Diagnostic tests and generic drugs included in the drug list of the Agency, and prescribed by medical practitioners |
| | Clinical diagnosis and antibiotic prescription of trachoma and other eye infections | | |
| | Specific diagnosis of fractures with X-ray support and immobilization including by plaster of paris (POP) application | | |
| | Delousing during epidemics | Service included in EPHS fits within a broader category of services included in HBP | Outpatient services |
| | Education, inspection, and screening of students for contagious eye and skin diseases and provision of appropriate treatment | Service included in EPHS fits within a broader category of services included in HBP | Diagnostic tests and generic drugs included in the drug list of the Agency, and prescribed by medical practitioners |
| | Inspection, screening, and treatment of students for contagious eye and skin diseases | | |

| | Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|-----------------------------------|---|---|---------------------------|
| | Surveillance, reporting, and organizing epidemic control | Service included in EPHS but notincluded in HBP | |
| | IEC on suspected epidemics, and surveillance | Service included in EPHS but notincluded in HBP | |
| | Epidemic investigation | Service included in EPHS but notincluded in HBP | |
| | Free treatment of epidemics | Service included in EPHS but notincluded in HBP | |
| | Confirmatory investigations on epidemics | Service included in EPHS but notincluded in HBP | |
| _ | IEC and demonstration of small do- able environmental health actions | Service included in EPHS but notincluded in HBP | |
| Other public health interventions | School health education | Service included in EPHS but notincluded in HBP | |
| | Water source identification, management of contamination and monitoring | Service included in EPHS but notincluded in HBP | |
| | Site selection and demonstration of protection, purification, and handling of water | Service included in EPHS but notincluded in HBP | |
| | IEC and demonstration of proper housing | Service included in EPHS but notincluded in HBP | |
| | Organizing and coordination of sanitation campaigns | Service included in EPHS but notincluded in HBP | |
| | Promotion and demonstration of proper solid waste disposal | Service included in EPHS but notincluded in HBP | |
| | Inspection of household sanitation practices | Service included in EPHS but notincluded in HBP | |
| | Demonstration of appropriate drainage | Service included in EPHS but notincluded in HBP | |
| | Education on personal and food hygiene | Service included in EPHS but notincluded in HBP | |
| | Prison health service, control of rodents and insects, and delousing when needed | Service included in EPHS but notincluded in HBP | |
| | Demonstration on insecticide handling and use | Service included in EPHS but notincluded in HBP | |
| | Water quality control | Service included in EPHS but notincluded in HBP | |

| | Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|-------------------------------------|--|---|---|
| Other public health Intervention | Collection and testing at (public health lab) of food samples during food-borne [illness] outbreaks and remedial actions according to the result | Service included in EPHS but notincluded in HBP | |
| | Organization and follow-up of regular medical and physical examination of food and drink handlers working in food and drinking establishments, and at mass catering places | Service included in EPHS but notincluded in HBP | |
| | Disease surveillance and feedback to health practitioner and health center | Service included in EPHS but notincluded in HBP | |
| | Inspection of food and drinking establishment | Service included in EPHS but notincluded in HBP | |
| | Health education - community mobilization and sensitization | Service included in EPHS but notincluded in HBP | |
| | Health education - counselling service | Service included in EPHS but notincluded in HBP | |
| | Health education - distribution of IEC materials | Service included in EPHS but notincluded in HBP | |
| | Health education - group and individual IEC in community and at home | Service included in EPHS but notincluded in HBP | |
| | Health education - provision of IEC | Service included in EPHS but notincluded in HBP | |
| | Health education - IEC material development and provision to health practitioner | Service included in EPHS but notincluded in HBP | |
| | Health education - IEC to individual patients and clients and to groups | Service included in EPHS but notincluded in HBP | |
| Exclusions | | Service explicitly excluded from HBP | Any treatment outside Ethiopia |
| | | Service explicitly excluded from HBP | Treatment of injuries resulting from natural disasters, social unrest, epidemics, and highrisk sports |
| | | Service explicitly excluded from HBP | Treatment related to drug abuse or addiction |
| | | Service explicitly excluded from HBP | Periodic medical check-up unrelated to illness |
| | | Service explicitly excluded from HBP | Occupational injuries, traffic accidents and other injuries covered by other laws |

| 4 | | |
|----|----|--|
| | | |
| | - | |
| V. | ` | |
| - | ۲. | |
| | | |

| | Service listed in the EPHS | Degree of alignment between EPHS and HBP | Service listed in the HBP |
|------------|----------------------------|--|--|
| Exclusions | | Service explicitly excluded from HBP | Cosmetic surgeries |
| | | Service explicitly excluded from HBP | Organ transplants |
| | | Service explicitly excluded from HBP | Dialysis except acute renal failure |
| | | Service explicitly excluded from HBP | Provision of eyeglass and contact lenses |
| | | Service explicitly excluded from HBP | Hip replacement |
| | | Service explicitly excluded from HBP | Dentures, crowns, bridges, implants, and root canal treatments except those required due to infections |
| | | Service explicitly excluded from HBP | Provision of hearing aids |
| | | Service explicitly excluded from HBP | Health services provided to any beneficiary free of charge |



About HFG:

A flagship project of USAID's Office of Health Systems, the Health Finance and Governance (HFG) project supports its partners in lowand middle-income countries to strengthen the health finance and governance functions of their health systems, expanding access to life-saving health services. The HFG project is a six-year (2012-2018), \$209 million global health project. The project builds on the achievements of the Health Systems 20/20 project. To learn more, please visit www.hfgproject.org.

The HFG project is led by Abt Associates in collaboration with Avenir Health, Broad Branch Associates, Development Alternatives Inc., Johns Hopkins Bloomberg School of Public Health, Results for Development Institute, RTI International, and Training Resources Group, Inc.

Cooperative Agreement Number: AID-OAA-A-12-00080

Agreement Officer Representative Team: Scott Stewart (GH/OHS) sstewart@usaid.gov Jodi Charles (GH/OHS) jcharles@usaid.gov



Abt Associates abtassociates.com 4550 Montgomery Avenue, Suite 800 North Bethesda, MD 20814

June 2017

DISCLAIMER

The author's views expressed here do not necessarily reflect the views of the U.S. Agency for International Development or the U.S. Government.

Sources

Alebachew, Abebe, Laurel Hatt, and Matthew Kukla. 2014. "Monitoring and evaluating progress towards universal health coverage in Ethiopia." *PLoS Med* 11.9. 2014.

Ashenafi, Neamin. 2015. "Ethiopia: Social Health Insurance to Be Applied." All Africa.

Center for Health Market Innovations. N.d. "Ethiopia Community-Based Health Insurance."

Ethiopian Health Insurance Agency. 2015. Evaluation of Community-Based Health Insurance Pilot Schemes in Ethiopia: Final Report.

Ethiopian Ministry of Health. 2015. "Health Sector Transformation Plan."

Ethiopian Ministry of Health. N.d. "Overview of the Ministry." Accessed July 2016. Article.

Feleke, Solomon. 2015. Ethiopia's Community-based Health Insurance: A Step on the Road to Universal Health Coverage. Bethesda, MD: Abt Associates, Health Finance and Governance project.

Government of Ethiopia. 2010. Proclamation No. 690/2010.

Health Finance and Governance project. 2014. Ethiopia Scales Up Community-Based Health Insurance. Bethesda, MD: Abt Associates.

Impact Insurance. 2013. "Social Health Insurance Scheme (Ethiopia)."

Mebratie, Anagaw D., et al. 2015. "Enrollment in Ethiopia's Community-Based Health Insurance Scheme." World Development.

Reich, Michael R., et al. 2015. "Moving towards universal health coverage: lessons from 11 country studies." *The Lancet*.

Wang, Huihui and G.N.V. Ramana. 2014. "Universal Health Coverage for Inclusive and Sustainable Development: Country Summary Report for Ethiopia." Health, Nutrition and Population Global Practice World Bank Group Report.

Recommended Citation: Windmeyer, Lauren. June 2017. The Essential Package of Health Services and Health Benefit Plans in Ethiopia. Bethesda, MD: Health Finance and Governance project, Abt Associates Inc.