

Kingdom of Cambodia National Religion King

Prakas On Health Insurance Benefit 7

Ministry of Labour and Vocational Training

- Having seen the Constitution of Kingdom of Cambodia
- Having seen the Royal Decree No ns /rkt 0908/1055 dated on 25 September 2008 on the appointment of Royal Government of Kingdom of Cambodia
- Having seen the Royal code No 02 /ns / 94 dated on 20 July, 1994 promulgated on arrangement and process of the Council of Minister
- Having seen the Royal code no.ns / rkm / 0105 / 003 dated on 17 January, 2004 promulgated on the organizing of Ministry of Labour and Vocational Training
- Having seen Royal Code No ns / rkm 0902 / 018 dated on 25 September, 2002 promulgated by the law on National Social Security Schemes for persons defined by the provisions of Labour Law
- Having seen Royal Decree No ns/ rkt / 1297 / 91 dated on 31 December, 1997 on Judicial Statute of Public Establishment
- Having seen Sub-Decree No 52 rnk-bk dated on 01 April, 2005 on the arrangement and process of Ministry of Labour and Vocational Training
- Having seen Sub-Decree No 16 rnk-bk dated on 02 March, 2007 on the establishment of the National Social Security Schemes
- Having seen Sub-Decree No..... Date.....on the establishment of Health care for worker under the provision of Labour Law.
- According to request of Government Body of National Social Security Fund

HEREBY DECIDES

Article 1 Purpose

This Prakas aims to determine Health Insurance benefit for insured person under the provisions of the labor law.

Article 2 Health Insurance Benefit

Health insurance Benefits includes medical treatment, preventive services, health promotion services and daily allowances.

2.1 Medical treatment:

a Inpatient hospital care (IPD)

- 1 Room and board that provided by health facilities
- 2 Service of health care professionals
- 3 Diagnostic, laboratory, and other medical examination services
- 4 Use of surgical or medical equipment and facilities
- 5 Prescription drugs and biological

b Outpatient care (OPD)

- 1 Services of health care professionals
- 2 Diagnostic, laboratory and other medical examination services
- 3 Use of surgical or medical equipment and facilities
- 4 Personal preventive services in case of communicable diseases (isolated)
- 5 Prescription drugs and biological.

c Ambulance and transfer services in case of an emergency.

d **Maternity and medical care service before and after delivery**
e **Physiotherapy and Kinesitherapy**

2.2 Preventive Services:

- Anti-tetanic serum in case open wound
- Anti-rabic vaccination in case of animal bite
- Venimeuse serum in case of snack bite.
- Other preventive services determine by the Prakas of the Ministry of Labour and Vocational Training according to Governing Board of NSSF suggestion.

2.3 Health Promotion Services:

Consultation services for diabetes, high blood, hard diseases and HIV.

2.4 Daily allowance is the benefit that provided for the period of medical treatment, sickness and maternity leave.

Article 3 Services Provide by Co-payment method 50% (fifty percent) between NSSF and members

1. Brain Surgery
2. Diabetes treatment
3. Hemodialysis
4. Thalassemia
5. Chemo therapy and radio therapy for cancer treatment
6. Open heart Surgery and coronary heart diseases.

Article 4 Excluded medical services

1. Any medical treatment which are determined in national programs
2. Dental care (except extraction and pain kill, tooth cement filling)
3. Sex interchange or transsexual surgery
4. Organs transplantation
5. Artificial Insemination in case of infertility
6. Self-treatment (Medicine and medical equipment which is not recommended by doctor)
7. Cosmetic Surgery and medical implants
8. Contact lens and eye-laser treatment
9. Treatment of alcoholism or drug abuse.

In emergency cases, the services that not included in point 2, dental care and point 7, Cosmetic Surgery and medical implants that have mentioned above are provided.

Article 5. Requirement and Entitlement to Benefit

- 5.1 All worker and employees should fulfill the conditions listed below in order to obtain the medical treatment:
- Having a valid work contract, in the enterprise registered at NSSF, at the date of the treatment.
 - Having registered in National Social Security Fund (NSSF)

-Having paid health insurance contribution at least 3 months subsequently or at least 5 months within 12 months prior to the incident. The change of employer will have no influence on this prerequisite.

5.2 In order to get daily allowance, all insured persons should fulfill the following conditions:

-Having fulfilled the requirements as mentioned in 5.1 above

-Having sick leave from the employer;

-Having continuously paid contribution at least 12 (twelfth) months in case of the daily allowance for maternity leave.

-Illness or injury cannot be a result of alcoholism or drug abuse.

5.3 Employee that fulfills the requirement as mentioned 5.1 and 5.2 will have right to receive:

-Free medical treatment at health facilities recognized by the National Social Security Fund (NSSF), excepted medical treatment services that mentioned in article 3 and 4 of this Prakas no longer then 180 (One hundred eighty) days per twelve months including the period of inpatient and outpatient treatment.

-In case where contribution payment has been stopped, the employee has right to get medical treatment with in 90 (ninety) days subsequently after the date of contract termination. But daily allowance is not provided.

-Daily allowance is 70 (seventy) percent of the daily average wage of an employee for the duration of sickness or injury leave. For the period of 15 days and less, the wage of the insured person shall be borne by the employer. From 16th day onwards, only NSSF is in charge of paying up to the maximum of 165 (one hundred sixty five) days.

-Daily allowance is 70 (seventy) percent of daily average wage of employee for 90 (ninety) days of maternity leave.

Article 6: Calculation of Daily Average Wage

The daily average wage that is stated in this Prakas shall be calculated, according to the Prakas on Benefits of Occupational risks.

Article 7: The formalities and procedure to receive medical care

1. Members of the National social security fund (NSSF) who get an accident, sickness or maternity leave should go to hospital or health facilities recognized by National social security fund;
2. Members of National social security fund (NSSF) must show identification controlling by the figure print of IT system or NSSF member card. In case the figure print cannot identify or NSSF member card has loss, the member shall complete the form "Health Insurance Information" or Form "4.01" that has mentioned in Annex 1 of this Prakas and have to show other legal identification to NSSF agency or the physicians.
3. In case of emergency, the patient must seek for the nearest health facilities, if the nearest health facilities is not recognized by National social security fund the employee or representative shall inform to NSSF by the form "Health

Insurance Information” or Form “4.01” no longer than 48 (forty eight) hours after get sick.

4. In case used of the medical treatment services at health facilities have not recognized by NSSF and missed inform duration 48 (forty eight) hours after have accident or sickness to NSSF, all payment of the employee NSSF not pay.
5. NSSF will pay in case of emergency to employee or hospital has treatment NSSF members based on qualification and price of services recognized by NSSF in this area.
6. In cases where the employee is unable to inform the employer or in case of emergency, a representative of the employee shall inform the employer within 48 hours working day for sick leave.

Article 8. Claim of benefits

8.1 In case of emergency, the insured person or his/her representative can claim benefits for medical treatment for health insurance provided by the health facilities which are not contracted with NSSF. This claim shall be made through the “medical treatment form in case of emergency” or form “4.02” stated in annex 2 of this Prakas. The form of these claims shall be attached with prescription, invoices and other necessary document.

8.2 Claiming of daily allowance shall be made by insured person or representative through the “temporary health insurance benefit claim” or form “4.03” stated in annex 3 of this Prakas. The form of these claims shall be attached with sick leave issued by health facilities recognized by NSSF that insured person have treatment. In case the sick leave issued by enterprises doctor shall be agree by the employers or enterprises representative.

8.3 The right to claim benefits shall be prescribed within a period of one year from the initial day of sickness.

Article 9

All kind of diseases, stated in article 3 of this parka can be re-checked and modified according to the request from the governing body of the National social security fund through the evaluation and assessment of the medical committee of National social security fund.

Article 10. Final Provision

This Prakas takes into effect from the date of signature.

Phnom Penh, Date Month 2012
Minister

Copied to:
General Secretariat of the Constitutional Council
General Secretariat of the Senate
General Secretariat of the Assembly
General Secretariat of the Royal Government
Cabinet of Samdach Techo Hun Sen
Cabinet Chom Tiev deputy prime minister
Council Ministers
Ministry of Economic and Finance
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Ministry of Health
Advisor committee of National social security fund
NSSF

