

Rules

for procuring services from healthcare entities for the provision of medical care within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance

Chapter 1. General provisions

1. These rules for procuring services from healthcare entities for the provision of medical care within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance (hereinafter referred to as the Rules) are developed in accordance with subparagraph 62) of Article 7 of the Code of the Republic of Kazakhstan “On Public Health and the Healthcare System” as of July 7 2020 (hereinafter - the Code) and paragraph 1 of Article 34 of the Law of the Republic of Kazakhstan “On Compulsory Social Health Insurance” as of November 16, 2015 (hereinafter - the CSHI Law) and establish the procedure for purchasing services from healthcare entities within the guaranteed volume of free medical care (hereinafter referred to as the GVPMC) and (or) in the system of compulsory social health insurance (hereinafter referred to as the CSHI).

2. Services are purchased within the GVPMC framework from healthcare entities by the social health insurance fund (hereinafter referred to as the fund) and (or) administrators of budget programs.

The services from healthcare entities in the CSHI system are purchased by the fund.

The services from healthcare entities within the GVPMC and (or) in the CSHI system are procured by selecting healthcare entities and placing the volume of services and (or) the amount of funds (hereinafter referred to as the procurement of services).

3. Basic terms used in these Rules are as follows:

1) the appeal commission - a permanent body set up by the fund or the administrator of budget programs to consider issues arising from the procurement of medical care services within the GVPMC and in the CSHI system;

2) co-executor - a healthcare entity included in the database of healthcare entities seeking to provide medical care within the GVPMC and (or) in the CSHI system (hereinafter referred to as the database), with which the supplier entered into a co-performance agreement to fulfill part of the supplier’s obligations under the concluded contract for the procurement of services ;

3) a regional long-term plan for the development of healthcare infrastructure - a long-term plan for the development of the regional infrastructure containing information on the existing

network of medical facilities, planned restructuring (opening, merging, closing, re-profiling), as well as information on the need for new healthcare facilities and investment planning;

4) the authorized body for healthcare (hereinafter referred to as the authorized body) - the central executive body that carries out management and inter-sectoral coordination in the field of health protection of citizens of the Republic of Kazakhstan, medical and pharmaceutical science, medical and pharmaceutical education, sanitary and epidemiological welfare of the population, turnover of medicines and medical devices, the quality of medical services (assistance);

5) healthcare entities – medical facilities, as well as individuals engaged in private medical practice and pharmaceutical activities;

6) medical facility – a legal entity carrying out activities in the field of healthcare;

7) database - a list of healthcare entities seeking to provide medical care within the GVFMC and (or) in the CSHI system, formed in accordance with the procedure for keeping records of healthcare entities providing medical care within the GVFMC and (or) in the CSHI system approved in accordance with subparagraph 67) of Article 7 of the Code (hereinafter - the Accounting Rules);

8) newly commissioned health facility – a facility included in the regional long-term plan for the development of healthcare infrastructure and first commissioned by building a new one or first opened by changing an existing facility in accordance with the Law of the Republic of Kazakhstan “On architectural, urban planning and construction activities in the Republic of Kazakhstan” as of July 16, 2001;

9) high-tech medical service - a service provided by specialized professionals for diseases requiring the use of innovative, resource-intensive and (or) unique methods of diagnosis and treatment;

10) a fund - a non-profit organization that accumulates deductions and contributions, and also purchases and pays for the services of healthcare entities providing medical care in the volumes and on the terms provided for by the contract for procuring medical services, and other functions determined by the laws of the Republic of Kazakhstan;

11) the fund’s assets - deductions and contributions, penalties received for late payment of deductions and (or) contributions, investment income less the commission for ensuring the activities of the fund, as well as other receipts to the fund not prohibited by the legislation of the Republic of Kazakhstan;

12) the fund’s reserve for unexpected expenses - money provided by the fund for the current financial year to finance unforeseen expenses during the coverage period, formed on a monthly basis;

13) a branch of a fund - a separate subdivision of a fund outside its location and performing all or part of its functions, including the functions of a representative office;

14) web portal for procuring services from healthcare entities (in relation to the Rules) - an information system that provides a single point of access to electronic services for

procuring services from healthcare entities within the GVFMC and (or) in the CSHI system (hereinafter referred to as the web portal);

15) electronic copy of a document - a document that fully reproduces the type and information (data) of the original document in electronic digital form;

16) supplier - a healthcare entity with whom the fund or the administrator of budget programs entered into a contract for procuring services in accordance with these Rules;

17) medical care in the CSHI system - the volume of medical care provided to consumers of medical services at the expense of the fund's assets;

18) medical information system - an information system that ensures the electronic conduct of processes of healthcare entities;

19) medical care - a complex of medical services aimed at maintaining and restoring the health of the population, including drug provision;

20) quality of medical care - the level of compliance of the provided medical care with the standards of medical care;

21) medical services - preventive, diagnostic, therapeutic, rehabilitation and palliative actions of healthcare entities in relation to a specific person;

22) a state body for medical services (assistance) - a state body in charge of the provision of medical services (assistance), performing control over the quality of medical services (assistance);

23) a healthcare entity providing primary healthcare (hereinafter referred to as the PHC entity) - a healthcare entity providing primary healthcare within the GVFMC and (or) in the CSHI system to the population registered in the "Register of registered population" portal (hereinafter - RRP portal);

24) public-private partnership agreement - a written agreement that defines the rights, obligations and responsibilities of the parties to a public-private partnership agreement, other conditions of a public-private partnership agreement within the framework of a public-private partnership project;

25) production base - the place of rendering medical services in accordance with the annex to the license issued in accordance with the legislation of the Republic of Kazakhstan on permits and notifications;

26) republican medical facilities – medical facilities controlled by the authorized body, medical facilities of an autonomous educational institution, medical educational institutions;

27) independent expert - an individual who meets the requirements determined by the authorized body and is included in the register of independent experts;

28) contract for the procurement of services for additional provision of GVFMC (hereinafter - the contract for the procurement of services) – a written agreement between the administrator of budget programs and the healthcare entity for the provision of medical care within the framework of GVFMC;

29) a contract for the procurement of medical services within the GVFCM or in the CSHI system (hereinafter - the contract for the procurement of services) – a written agreement between the fund and the healthcare entity for the provision of medical care within the GVFCM and in the CSHI system;

30) digital health facility (in relation to the Rules) - a legal entity that carries out activities or enters into public relations in the field of digital health in terms of information and technical support of health information systems, as well as ensuring information security and organizational and methodological work with healthcare entities;

31) electronic document - a document presenting information in electronic digital form, which is certified by an electronic digital signature;

32) electronic digital signature (hereinafter referred to as EDS) - a set of electronic digital symbols created by means of an electronic digital signature and confirming the authenticity of an electronic document, its ownership and invariability of its content.

Chapter 2.

The procedure for procuring services from healthcare entities for the provision of medical care within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance

4. Services from healthcare entities and non-medical organizations that provide services to prevent the spread of coronavirus COVID-19 and (or) treat patients with coronavirus COVID-19, with suspected coronavirus COVID-19 and (or) viral pneumonia, according to the list approved by the local public health authority (hereinafter referred to as the health authority) in agreement with the territorial subdivision of the body for the sanitary and epidemiological welfare of the population are procured by the fund without carrying out procedures for selecting healthcare entities within the framework of the plan for the procurement of medical services.

The health authority, within three working days of approval of the list specified in part one of this paragraph, sends it to the branch of the fund.

The contract for procuring services for the provision of services to prevent the spread of coronavirus COVID-19 and (or) the treatment of patients with coronavirus COVID-19, including those with suspected coronavirus COVID-19 and (or) viral pneumonia, is valid for the period from the date of commencement of provision services.

5. Services within the GVFCM and (or) in the CSHI system are procured in the following stages:

1) planning of the volume of procurement of services within the GVFCM and (or) in the CSHI system;

2) selection of healthcare entities for the provision of services within the GVFCM and (or) in the CSHI system;

- 3) conclusion of a contract for procuring services;
- 4) performance of a contract for procuring services.

6. Medical care services are procured on the basis of plans for the procurement of medical services within the GVFCM or in the CSHI system.

7. The rules for planning the volume of medical services within the GVFCM and (or) in the CSHI system are approved on the basis of subparagraph 63) of Article 7 of the Code.

8. For the selection of healthcare entities and placement of the volume of services with them, the fund or the administrator of budget programs set up commissions for the selection of healthcare entities and the placement of the volume of services (hereinafter - the commission).

The central office of the fund sets up a republican commission, the branches of the fund - regional commissions.

9. The total number of members of the commission shall be odd.

10. The composition of the commission is formed by the decision of the fund or the administrator of budget programs from among the representatives of:

- 1) the fund;
- 2) the authorized body for inclusion in the republican commission of the fund;
- 3) the health authority for inclusion in the commission under the administrator of budget programs or a regional commission;
- 4) the “Atameken” National Chamber of Entrepreneurs of the Republic of Kazakhstan (hereinafter – Atameken NCE) and (or) non-governmental organizations representing the interests of patients, healthcare entities or medical workers (hereinafter – NGOs);
- 5) the territorial subdivision of the state body for medical services (assistance) for inclusion in the regional commission and the commission under the administrator of budget programs;
- 6) digital health facility.

Candidates are presented by an official letter within five working days of receipt of the request for the formation of the composition of the commission for the next financial year.

11. During a year, members of the commission are introduced in it or removed from it on the basis of a written confirmation of the organization represented by the member of the commission.

12. A member of the commission, who has the right to make a decision and is (or his/her close relatives, spouse or in-laws) a founder, participant or shareholder of the healthcare entity applying for the procurement, submits a written statement to exclude him/her from the procedure for selecting healthcare entities and placing the volume of services for which an application has been submitted from this healthcare entity.

13. The chairman of the commission and the deputy chairman of the commission under the fund are the officials of the fund, for the commission under the administrator of budget programs - officials of the administrator of budget programs.

The chairman of the commission manages the activities of the commission, plans its work

When the chairman is absent, his/her functions are performed by the deputy chairman of the commission.

14. The organizational activity of the republican or regional commission is provided by the secretary from among the employees of the fund, of the commission under the administrator of budget programs - from among the employees of the administrator of budget programs. The secretary of the commission is not a member of the commission and does not have the right to vote when the commission makes decisions.

15. The decision of the commission is considered competent if two thirds of its members participated in the adoption of the decision.

The decisions of the commission are documented in the minutes.

The decision of the commission is adopted by voting and is considered adopted if a simple majority of votes from the total number of attending members of the commission are cast for it.

In case of an equal distribution of votes, the casting vote belongs to the chairman of the commission or a person acting for him/her.

A member of the commission, in case of disagreement with the decision of the commission, provides a dissenting opinion in writing or in electronic form.

16. If a member of the commission does not participate in voting more than three times in a row, the fund or the administrator of budget programs makes a proposal to the relevant representation to replace him/her with another candidate.

17. The selection of healthcare entities for placing the volumes of services within the GVFMFC and in the CSHI system is carried out among the healthcare entities included in the database, except for the cases specified in paragraph 19 of these Rules.

The procedure for the formation of the database is determined by the rules for keeping records of healthcare entities providing medical care within the GVFMFC and (or) in the CSHI system, approved in accordance with subparagraph 67) of Article 7 of the Code.

18. The selection of healthcare entities and the placement of volumes of services within the GVFMFC and (or) in the CSHI system is carried out through the web portal or in paper form.

19. The volume of services and (or) the amount of funds for the provision of medical care within the GVFMFC and (or) in the CSHI system is allocated without the procedure for selecting healthcare entities under the plan for the procurement of medical services in such cases as:

1) changes in tariffs for medical services provided within the GVFMFC and (or) in the CSHI system, which are approved in accordance with subparagraph 65) of Article 7 of the Code, when placed among healthcare entities with whom contracts for the purchase of services have been concluded;

- 2) implementation of pilot projects by decision of the authorized body;
- 3) the first participation in the procurement of services by a PHC healthcare entity that has a newly commissioned health facility included in the database and complying with the norms of regulatory legal acts in the field of healthcare for the provision of PHC services, services for screening and preventive medical examinations of target populations and services for consultative and diagnostic assistance, which are paid for per the registered population;
- 4) the reorganization of the healthcare entity that has entered into a service procurement contract, with the legal succession of the obligations of the reorganized healthcare entity in accordance with the Civil Code of the Republic of Kazakhstan as of December 27, 1994 to the healthcare entity with whom the service procurement contract has been concluded given a medical license for relevant sub-activities;
- 5) an increase in the size of the registered population and (or) a change in the age and sex structure of the population registered with a PHC entity, and (or) an increase in the number of schoolchildren registered with a PHC entity;
- 6) an increase in the number of patients in need of medical care paid for at an integrated rate or at a per capita rate;
- 7) an increase in the volume of services or funds included in the complex per capita standard, as well as services and expenses paid for on the basis of actual costs incurred when providing medical care, the payment for which is based on the integrated tariff or the per capita standard;
- 8) changes in the volume of services or funds for medical care in inpatient and (or) hospital replacing conditions provided to the population by a healthcare entity, which, according to the Law of the Republic of Kazakhstan “On the Administrative Territorial Structure of the Republic of Kazakhstan”, refers to a rural settlement, the payment for which is based on the integrated per capita basis standard;
- 9) procurement of services for the provision of medical care to citizens of the Republic of Kazakhstan for treatment abroad and (or) involvement of foreign specialists for treatment in domestic health centers within the GVFMC;
- 10) the provision of services by federal health centers of the Russian Federation to citizens of the Republic of Kazakhstan living in the city of Baikonyr, the villages of Toretam and Akai, who are not employees of the Russian organizations of the Baikonur complex, as well as to those temporarily staying in the territory of the Baikonur complex, in accordance with the Agreement between the Government of the Republic of Kazakhstan and the Government of the Russian Federation on the procedure for medical care of the personnel of the Baikonur cosmodrome, residents of the city of Baikonyr, the villages of Toretam and Akai under the conditions of the lease of the Baikonur complex by the Russian Federation, ratified by the Law of the Republic of Kazakhstan as of May 31, 2010;
- 11) provision of services by healthcare entities using the fund’s reserve for unexpected expenses;

12) provision of services to prevent the spread of COVID-19 coronavirus and (or) treatment of patients with COVID-19 coronavirus, with suspected COVID-19 coronavirus and (or) viral pneumonia;

13) provision of services during the period of the state of emergency throughout the territory of the Republic of Kazakhstan or in some of its localities;

14) by the decision of the local representative body, reimbursement of expenses for paying for the cost of goods, works and services from the funds of the local budget of regions, a city of republican significance and the capital in the event that the need for these expenses exceeds the amount of the contract for the purchase of services of healthcare entities in the organizational and legal form of state enterprises, with which the fund has concluded these contracts;

15) provision of services by military medical (medical) subdivisions of central executive bodies and other central state bodies and their territorial subdivisions, as well as military medical (medical) institutions (organizations), other subdivisions providing military medical (medical) support;

16) changes or additions to the list of GVFCM approved by Resolution № 672 of the Government of the Republic of Kazakhstan as of October 16, 2020, and (or) the list of medical care in the compulsory social health insurance system approved by Resolution № 421 of the Government of the Republic of Kazakhstan as of June 20, 2019. In this case the volume of services released in connection with the change in the above lists is placed with the same healthcare entities in the amount within the released funds.

The volume of services and (or) the amount of funds for the provision of medical care within the GVFCM and (or) in the CSHI system for the cases specified in part one of this article is placed in the form of concluding contracts for the purchase of services or an addendum for the purchase of services without a documented decision of the commission, except for the cases provided for in subparagraphs 3), 10), 15) and 16), for which the volume of services and (or) the amount of funds is placed pursuant to the decision of the commission.

20. The selection of healthcare entities to place the volumes of services within the GVFCM and (or) in the CSHI system from the database for the coming financial year is carried out annually and is a combination of the following successive stages:

1) at the first stage, the following activities are carried out:

conducting a registration campaign with the participation of PHC entities included in the database, and summing up the results of the registration campaign by the regional commission (when purchasing PHC services);

notification by announcing the procedure for placing the volume of services within the GVFCM and (or) in the CSHI system among healthcare entities included in the database;

submission by healthcare entities of an application for the planned volumes of services within the GVFCM and (or) in the CSHI system for the declared period with the attachment

of the documents specified in paragraph 27 of these Rules (hereinafter - the application for the planned volumes);

consideration by the commission of applications for planned volumes for compliance with the requirements specified in paragraph 3 of Article 34 of the CSHI Law (when submitting an application for services in the CSHI system) and the requirements specified in these Rules for admission to the procedure for placing volumes of services within the GVFCM and (or) in the CSHI system (hereinafter referred to as the requirements for admission to the placement of volumes) with drawing up a protocol of compliance (non-compliance) of healthcare entities with the requirements for admission to the placement of volumes;

second acceptance and registration of applications for planned volumes brought in line with the requirements for admission to the placement of volumes;

consideration by the commission of applications submitted by healthcare entities after their second acceptance and admission of healthcare entities to the placement of volumes of services within the GVFCM and (or) in the CSHI system;

2) at the second stage, the following activities are carried out:

placement of volumes of services and signing a protocol on the results of placement (non-placement) of volumes of services for the provision of medical care within the GVFCM and (or) in the CSHI system;

conclusion of contracts for the purchase of services with healthcare entities based on the protocol on the results of placement (non-placement) of the volume of services for the provision of medical care within the GVFCM and (or) in the CSHI system;

performance of the contract for the purchase of services.

21. When purchasing services from PHC entities, the placement of the volume of PHC services within GVFCM and (or) in the CSHI system includes an annual registration campaign with the participation of PHC entities included in the database from September 15 to November 15 of the year preceding the financial year in which PHC services are provided in accordance with the procedure for registering individuals with medical facilities providing primary health care, approved on the basis of paragraph 4 of Article 123 of the Code (hereinafter referred to as the Registration Rules).

22. Information on the commencement of the registration campaign is posted on the websites of the fund and health authorities.

23. Pursuant to the results of the registration campaign based on the data on the number of the registered population in the RRP portal confirmed by a digital health facility with each PHC entity that took part in the registration campaign, based on the order of the health authority on the distribution of the territory of service to the population in accordance with the Registration Rules, the regional commission of the fund, within ten working days of the end of the registration campaign, determines the list of PHC entities who are admitted (not admitted) to the procedure for selecting providers of medical care within the GVFCM and (or) in the CSHI system and the distribution of the volumes of these services, and makes a

decision in the form of a protocol on the results of the campaign of registering the population with healthcare entities providing primary health care, in accordance with the form in Appendix 1 to these Rules (hereinafter - the protocol of the results of the registration campaign).

24. On the basis of the order of the health authority on the distribution of the territory of service to the population among healthcare entities with newly commissioned PHC entities included in the database, the regional commission decides on the placement of the volume of services and the amount of funds with healthcare entities with newly commissioned PHC entities included in the database and complying with the relevant norms of regulatory legal acts in the field of healthcare, and documents this decision in the form of a protocol of the regional commission on the results of placement (not placement) of volumes of services for the provision of medical care in GVFCM and (or) in the CSHI system.

25. The fund or the administrator of budget programs on the web portal places an announcement on the procedure for placing the volumes of services for the provision of medical care within the GVFCM and (or) in the CSHI system among healthcare entities included in the database (hereinafter - the announcement).

When carrying out the procedure for placing volumes of services within the GVFCM and (or) in the CSHI system in paper form, the website of the fund or the administrator of budget programs posts an announcement about the procedure for placing volumes of services for the provision of medical care within the GVFCM and (or) in the CSHI system among healthcare entities included in the database of healthcare entities applying for the provision of medical care within the GVFCM and (or) in the CSHI system in accordance with the form in Appendix 2 to these Rules.

Health authorities inform healthcare entities about the procedure for placing volumes of services within the GVFCM and (or) in the CSHI system on their websites by posting a link to the web portal or the fund's website.

26. Healthcare entities, including PHC entities, who are admitted to the procedure for selecting healthcare entities by the protocol of the results of the registration campaign, submit applications for the planned volumes in electronic form, which shall be signed by the EDS of the head or authorized person of the healthcare entity via the web portal before the expiration of the deadline for their opening by the web portal.

The application for the planned volumes is considered accepted at the time of the automatic sending of the corresponding notification by the web portal to the healthcare entity who submitted the application.

In paper format, healthcare entities submit an application for the planned volume of medical care services within the GVFCM and (or) in the CSHI system in accordance with the form in Appendix 3 to these Rules.

27. The following documents are attached to the application for planned volumes:

1) a copy of the certificate (statement) of state registration (re-registration) of a legal entity (for a legal entity) or a copy of the certificate (statement) of registration as an individual entrepreneur and a copy of an identity document (for an individual);

2) a copy of the license for medical activities in accordance with the Law of the Republic of Kazakhstan “On Permits and Notifications” as of May 16, 2014 and annexes thereto for the corresponding sub-activities, for which an application for the planned volumes has been submitted;

3) a copy of the public-private partnership agreement (submitted by a healthcare entity, which is implemented within the framework of public-private partnership);

4) a copy of the accreditation certificate (submitted by the healthcare entity, if any);

5) a copy of an opinion on the compliance of a medical facility with the provision of high-tech medical care (hereinafter referred to as HTMC) issued in accordance with the procedure approved on the basis of paragraph 5 of Article 124 of the Code in relation to relevant technologies for which an application for the planned volumes has been submitted (submitted by the healthcare entity seeking to provide HTMC);

6) information on the volumes and amounts for the provision of medical care specified in the application for the planned volumes of services for the provision of medical care within the GVFMC and (or) in the CSHI system in the appropriate form in accordance with Appendix 4 to these Rules;

7) a copy of a permit in the field of sanitary and epidemiological welfare of the population (for an object of high epidemiological significance - a copy of a sanitary and epidemiological opinion on the compliance of an object of high epidemiological significance with regulatory legal acts in the field of sanitary and epidemiological welfare of the population or its electronic form from the state electronic register of permits and notifications; for an object of insignificant epidemic significance - an electronic form of notification of the commencement of the activity (operation) of an object of insignificant epidemic significance from the state electronic register of permits and notifications (for those who applied for the first time and have not previously entered into a procurement contract with the fund or with the administrator of budget programs of healthcare entities, and also for healthcare entities that have increased their production capacity or changed the profile of medical care within the previous year);

8) an obligation not to provide medical services within the GVFMC and (or) in the CSHI system on a paid basis;

9) a copy of the order for appointing the acting head (when acting for the head) (when submitting an application in paper form);

10) the original of the power of attorney (in the case of signing and (or) submission of the application by the head's attorney) (if the application is submitted in paper form).

The submission of the documents provided for in part one of this paragraph is not required if the fund or the administrator of budget programs have the opportunity to obtain

the information contained in these documents from the corresponding integrated information systems.

28. If healthcare entities are selected in paper form, the application for the planned volumes is submitted in a bound and numbered form, without corrections and blots, while the last page certified by the signature of the head or his/her attorney.

By the decision of the head of the healthcare entity, applications and the documents attached thereto are provided by the authorized person of the healthcare entity on the basis of a power of attorney issued for the right to submit an application for planned volumes, certified by the signature of the head or his/her authorized representative, or delivered using postal services.

29. The healthcare entity withdraws the application for the planned volumes before the deadline for its submission.

30. Members of the commission, healthcare entities who have submitted applications for the planned volumes are sent automatic notifications about the opening of applications for the planned volumes by the web portal.

31. In case of accepting applications in paper form, the fund or the administrator of budget programs register applications in the register of applications for the planned volumes of medical care services within the GVFMC and (or) in the CSHI system in accordance with the form in Appendix 5 to these Rules, which is maintained by calendar year, bound and numbered.

32. An application for planned volumes received after the deadline for their acceptance is not considered.

33. An application for the planned volumes is submitted to the republican commission by healthcare entities included in the database and seeking to provide HTMC.

34. Healthcare entities applying for placement of volumes of services within the GVFMC and (or) in the CSHI system, except for HTMC, submit an application for the planned volumes to the regional commission or to the commission under the administrator of budget programs at the location of the production base for the provision of services at the regional level for the services indicated in the corresponding announcement.

At the same time, healthcare entities that are under the jurisdiction of local executive bodies submit an application for the planned volumes to the regional commission or to the commission under the administrator of budget programs in the territory of local executive bodies, regardless of the location of the production base.

35. The commission places the volumes of services within the GVFMC and (or) in the CSHI system among the healthcare entities included in the database, based on the procurement plan for medical services. When placing the volume of medical services within the GVFMC and (or) in the CSHI system, it is necessary to take into account proposals of the health authority on the need (or no need) for the services of new providers by type of medical care and conditions of medical care.

36. When holding a meeting of the commission by gathering the members of the commission, the secretary of the commission shall notify the members of the commission in written (electronic) form about the meeting at least three calendar days before the date of the meeting of the commission.

37. The commission considers applications for planned services and documents attached thereto and rejects them in cases of:

1) submission of an application for the planned services and (or) documents attached thereto that do not meet the requirements for admission to the placement of volumes, and (or) in the case of submission in paper format – with the terms of the announcement;

2) a failure to submit the documents attached to the application in accordance with paragraph 27 of these Rules.

38. Based on the results of the commission's consideration of applications for the planned volumes and the documents attached thereto for compliance with the requirements for admission to the placement of volumes within ten working days of the day following the last day of accepting applications for the planned volumes, a protocol is drawn up and signed on the compliance (non-compliance) of healthcare entities with the requirements for admission to the procedure for placing volumes of medical care services within the GVFMC and (or) in the CSHI system in accordance with the form in Appendix 6 to these Rules (hereinafter referred to as the compliance (non-compliance) protocol).

An extract from the specified protocol is sent to healthcare entities that do not meet the requirements for admission to the procedure for placing volumes of services within one working day of its signing.

When healthcare entities are selected for the placement of volumes of services within the GVFMC and (or) in the CSHI system via the web portal, healthcare entities are automatically notified of the posting of the compliance (non-compliance) protocol.

39. Healthcare entities that do not meet the requirements for admission to the procedure for placing volumes are given the opportunity to bring applications for the planned volumes and the documents attached thereto in accordance with the specified requirements within three working days of receipt of an extract from the protocol or notification of the posting of the compliance (non-compliance) protocol.

40. If the re-submitted application and (or) the documents attached thereto again do not meet the requirements for admission to the volume placement procedure, the application is rejected on the grounds specified in paragraph 49 of these Rules.

The commission decides on the placement (not placement) of volumes of medical care services within the GVFMC with PHC entities for the coming financial year with account of the requirements for admission to the procedure for volume placement based on the procurement plan for medical services.

41. During the current year, procedures for the selection of healthcare entities are carried out in accordance with these Rules, except for the stage of the registration campaign which is

carried out for the coming financial year, among suppliers with whom contracts for the purchase of services for the current financial year have been concluded, and (or) with involvement of new healthcare entities from the database within the procurement plan of medical services in the following cases:

- 1) the presence of an unplaced volume of services;
- 2) the presence of released volumes of services;
- 3) changes in the plan for the procurement of medical services in the current financial year.

42. The commission for the placement of volumes of services within the GVFCM and in the CSHI system considers applications of healthcare entities or providers for the planned volumes of services within the GVFCM and in the CSHI system, who are admitted to the procedure for placement of volumes of services, within ten working days of the day following by the day of the end of second accepting of documents.

43. When selecting healthcare entities to place volumes of services within the GVFCM and in the CSHI system, the commission uses the data available in information systems, as well as information obtained through a request from healthcare entities, providers, state bodies and organizations if they are not available in the open information systems.

The commission is not allowed to make inquiries related to supplementing the application for planned volumes with missing documents and (or) replacing documents.

44. In order to obtain a competent opinion on the decision of the commission when choosing healthcare entities to place the volume of services within the GVFCM and in the CSHI system, independent experts, specialized health professionals (hereinafter referred to as experts) are involved.

45. The expert opinion is drawn up in writing, signed by the expert and attached to the minutes of the meeting of the commission.

46. The expert opinion is considered by the commission when considering applications, placing the volume of services.

47. Accredited medical facilities have the preferential right to conclude contracts within the GVFCM and (or) in the CSHI system in accordance with paragraph 6 of Article 69 of the Code.

Healthcare entities that have the preferential right when purchasing medical care services in the CSHI system are those:

- 1) accredited in the field of healthcare in accordance with the Code;
- 2) with experience in providing appropriate medical care in the territory of the Republic of Kazakhstan continuously for three years preceding the month of the procurement of the services.

48. The commission distributes the volume of services among healthcare entities taking into account:

1) the production capacity of healthcare entities, including the patient capacity of beds approved in the context of bed profiles by the health authority in the distribution of the volume of medical care in inpatient or hospital replacing conditions within the GVFCM and (or) in the CSHI system;

2) experience in the provision of services and data from health information systems or medical information systems that characterize the quality and availability of medical care;

3) the results of monitoring contractual obligations, including the quality and volume of medical services under contracts for the purchase of services;

4) a regional long-term plan for the development of health infrastructure;

5) the absence of substantiated complaints about the quality and availability of medical care lodged with healthcare entities in a previous year;

6) the presence of a higher category of accreditation in the field of healthcare (under equal conditions) in accordance with the procedure for accreditation in the field of healthcare, determined in accordance with subparagraph 9) of Article 8 of the Code;

7) the results of the registration campaign (when distributing the volumes of PHC services).

49. The grounds for non-placement by the commission of the volumes of services with healthcare entities after the implementation of the first-stage procedures specified in paragraph 20 of these Rules are:

1) non-compliance with the requirements for admission to the procedure for placing volumes;

2) presentation of inaccurate information in the application and (or) in the documents attached thereto;

3) non-compliance of healthcare entities with the requirements for the organization of medical care established by the Code and other regulatory legal acts in the field of healthcare;

4) evasion of the healthcare entity from signing the contract for the purchase of services (an addendum to the contract for the purchase of services) submitted by the fund or the administrator of budget programs within twelve months preceding the day of the procurement ;

5) the facility's non-compliance with the sanitary and epidemiological requirements for healthcare facilities approved on the basis of Article 94 of the Code.

In case of rejection of applications for the planned volumes of healthcare entities on the basis provided for in subparagraph 3) of part one of this paragraph, the protocol on the results of placement (not placement) of the volumes of medical care services within the GVFCM and (or) in the CSHI system indicates a link to a specific paragraph of the regulatory legal act in the field of healthcare.

50. The commission makes a decision in the form of a protocol on the results of placement (not placement) of volumes of services for the provision of medical care within the

GVFMC and (or) the CSHI system in accordance with the form in Appendix 7 to these Rules (hereinafter referred to as the protocol of placement of volumes of services).

51. At the request of a healthcare entity or its representative, on the basis of an appropriate power of attorney, the fund or the administrator of budget programs, within five working days of its signing, issues an extract from the protocol of placement of volumes of services and registers its issuance.

52. When choosing healthcare entities to place the volumes of services within the GVFMC and (or) the CSHI system via the web portal, the protocol for placing the volumes of services after signing is automatically transferred to information systems for concluding contracts for the purchase of services.

An extract from the protocol of placement of volumes of services is automatically sent to a healthcare entity.

The protocol for the placement of volumes of services is posted and available on the web portal.

In the case of procurement in a paper form, the protocol on the placement of volumes of services is posted and available on the website of the fund or the administrator of budget programs.

53. The contracts for the purchase of services are concluded on the basis of the protocol on the placement of volumes of services according to the standard form approved by the fund or the administrator of budget programs.

When concluding a contract for the purchase of services with the fund, the healthcare entity is considered to have adhered to the contract for adherence to the procurement of medical services within the GVFMC and (or) the CSHI system approved by the fund in agreement with the authorized body.

The specified adherence agreement is posted on the website of the fund or the administrator of budget programs and (or) the web portal.

54. By the decision of the commission, the contracts for the purchase of services within the GVFMC and (or) in the CSHI system are concluded:

1) for a period of one to three years with rural entities, which are the only service providers in the given administrative-territorial unit, and PHC entities;

2) for a period of three to five years:

with healthcare entities, which are implemented in the framework of public-private partnerships and included a regional long-term plan for the development of health infrastructure;

with healthcare entities for the provision of certain types of diagnostic and treatment services using medical equipment purchased within the framework of a public-private partnership and in accordance with the regional long-term plan for the development of health infrastructure.

In this case, the amounts of contracts for the purchase of services are determined annually.

55. The procedure for purchasing services for the coming year is carried out before the end of the current financial year.

56. The draft contract for the procurement of services within ten working days after the signing of the protocol on the placement of volumes of services is sent to the healthcare entity through information systems using EDS when purchasing on the web portal or sent by the fund or the administrator of budget programs when purchasing in paper format.

Within three working days of receipt of the said draft contracts for the purchase of services, the healthcare entity coordinates and signs them through information systems using EDS when conducting a purchase on the web portal or with the submission of signed contracts to the fund or the administrator of budget programs when conducting a purchase in paper form.

57. If the healthcare entity rejects the contract for the purchase of services within the period specified in paragraph 56 of these Rules, the healthcare entity is deemed to have evaded the conclusion of the contract for the purchase of services, and the volume of GVFMC and (or) in the CSHI system provided for under this contract refers to the unplaced volume.

58. The contract for the purchase of services is registered electronically automatically or in paper format.

59. The list of suppliers with whom contracts for the purchase of services have been concluded is posted and updated on the website of the fund and the administrator of budget programs on or before the tenth day of the month following the reporting month in accordance with the Registration Rules.

60. Suppliers for the performance of part of the services under the contract for the purchase of services enter into co-performance agreements with co-executors included in the database, except for healthcare entities provided for in paragraph 63 of these Rules, which are not included in the database, regardless of the location of their production base or production base their representative office (branch).

Such a supplier's choice of a co-executor from the database is considered to be coordinated with the fund or with the administrator of budget programs.

When choosing co-executors, the fund supplier is guided by the norms of these Rules.

61. Healthcare entities, as a co-executor, ensure the provision of services to patients under the GVFMC and (or) in the CSHI system when exercising their right to free choice of a health facility and a doctor, given indications and a referral from a PHC doctor or a specialized professional of this healthcare entity, except for cases of rendering services without a referral from a PHC specialist in accordance with the procedure for the provision of specialized medical care, determined in accordance with paragraph 5 of Article 124 of the Code, in the provision of which the services included in medical information systems are the basis for concluding a co-performance agreement.

If the PHC entity and the selected organization providing consultative and diagnostic assistance (hereinafter referred to as the CDA facility) have not entered into a co-performance

agreement to involve it as a co-executor, then a referral from a PHC doctor or a specialized professional of this PHC entity is the basis for concluding a co-performance agreement between the PHC entity and the CDA facility included in the database as a co-executor.

62. The co-performance agreement is not concluded by the supplier in the provision of services within the GVFCM and (or) in the CSHI system in cases of provision of:

1) services by PHC specialists in accordance with the procedure for the provision of primary health care approved on the basis of subparagraph 82) of Article 7 of the Health Code ;

2) HTMC, in the case when the provision of these services is the basis for placing volumes with the supplier, except for the provision of certain types of consultative and diagnostic assistance that are not provided in the Republic of Kazakhstan and are necessary for the provision of HTMC, including medical services when examining a bone marrow donor and (or) hematopoietic stem cells when selecting and activating a bone marrow donor and (or) hematopoietic stem cells;

3) programmed hemodialysis or peritoneal dialysis services, in the case when the provision of these services is the basis for placing volumes with the supplier;

4) specialized medical care in inpatient and (or) hospital replacing conditions, in the case when the provision of this assistance is the basis for placing volumes with the supplier.

In the case of the provision of the services provided for in part one of this paragraph, by the decision of the supplier, the supplier concludes an agreement with the co-contractor for the provision of certain types of services, consultative and diagnostic assistance and therapeutic measures that are not the basis for placing the volume of services with the supplier.

63. For the provision of certain types of services that are not provided in the Republic of Kazakhstan, the supplier engages foreign healthcare entities as co-executors.

Involvement of foreign healthcare entities as co-executors not included in the database is carried out in agreement with the fund or with the administrator of budget programs.

Approval is carried out within three working days and experts are involved by the decision of the fund or the administrator of budget programs.

64. The involvement of co-executors by the supplier does not relieve the supplier of obligations under the contract for the purchase of services and liability for its failure to perform, improper and untimely performance.

65. When changing or adding the norms of the current legislation of the Republic of Kazakhstan governing legal relations related to the procurement of services within the GVFCM and (or) in the CSHI system, the validity of the contract for the procurement of services is brought in line with these legal norms. In this case, the validity of the contract for the purchase of services is terminated or changed from the date of entry into force of such changes or additions unless otherwise established by the legislation of the Republic of Kazakhstan.

66. Execution of the contract for the purchase of services within the GVFCM and in the CSHI system includes the performance of contractual obligations:

1) by suppliers through the provision of services and compliance with the terms of the contract for the purchase of services;

2) a fund or an administrator of budget programs by paying for services to healthcare entities.

67. Services provided within the GVFCM are paid for by the fund and (or) administrators of budget programs.

Services provided as medical care in the CSHI system are paid for by the fund.

68. To resolve issues related to the procurement of services within the GVFCM and in the CSHI system, a permanent appeal commission is set up from among the representatives of the fund, the administrator of budget programs, the authorized body for the commission under the fund, Atameken NCE and NGOs representing the interests of patients or healthcare entities.

69. The appeal commission acts in accordance with the regulations approved by the fund or the administrator of budget programs.

Appendix 1
to the Rules for procuring services from
healthcare entities for the provision of medical
care within the guaranteed volume of free
medical care and (or) in the system of
compulsory
social health insurance
Form

**Protocol on the results of the campaign of registration
of the population with healthcare entities providing primary medical care**

_____ " " _____ 20__
(location)

1. The commission for selecting healthcare entities and placing the volumes of services (hereinafter – the commission) consisting of:

(surname, name, patronymic (if any) and position of the commission's chairman and other members)

has considered the results of the campaign of registration of the population with healthcare entities

providing primary medical care, which was carried out in accordance with the Rules for the registration

of individuals with medical facilities providing primary medical care, approved on the basis of part

three of paragraph 4 of Article 123 of the Code of the Republic of Kazakhstan

“On Public Health and the Healthcare system” provided by a digital health facility.

2. Pursuant to the consideration of the results of the registration campaign, the commission

on _____ by show of hands DECIDED:

(indicate the date)

to approve the below indicated list of healthcare entities providing primary healthcare (hereinafter – PHC entity) included in the database of these healthcare entities seeking to provide

medical care within the guaranteed volume of free medical care and in the system of compulsory

social health insurance (hereinafter – database) that are admitted to the procedure for selecting a

supplier of services for providing medical care within the guaranteed volume of free medical care and

in the system of compulsory social health insurance:

Item №	BIN/ IIN	Name of PHC entity	Legal address	Number of the registered population, who are registered in the “Register of the registered population” portal
1	2	3	4	5

3. Pursuant to the consideration of the results of the registration campaign, the commission

by show of hands DECIDED:

to approve the below indicated list of PHC entities included in the database that are not admitted to the procedure for selecting a supplier of services for providing medical care within the guaranteed volume of free medical care:

Item №	BIN/ IIN	Name of PHC entity	Legal address	Number of the registered population, who are registered in the “Register of the registered population” portal	Indicate reasons
1	2	3	4	5	6

The decision was voted as follows:

FOR _____ votes;

AGAINST _____ votes.

(surname, name, patronymic (if any), signatures of the commission’s chairman, other members and secretary)

Appendix 2
to the Rules for procuring services from
healthcare entities for the provision of medical
care within the guaranteed volume of free
medical care and (or) in the system of
compulsory
social health insurance
Form

Announcement of the procedure for placing the volume of services for the provision of medical care within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance among healthcare entities included in the database of healthcare entities seeking to provide medical care within the GVFMC and (or)) in the CSHI system within the guaranteed volume of free medical care and in the compulsory social health insurance system

(indicate the name of the fund (branch) or the administrator of budget programs) announces the procedure for placing the volumes of medical services in accordance with

(indicate the paragraph (subparagraph) and the legal act)

(indicate only the required: within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance) by type (s)/conditions for the provision of medical care/service:

for the year 20__ among healthcare entities with whom contracts for the purchase of medical services have been concluded within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance or contracts for the purchase of services for additional provision of the guaranteed volume of free medical care for the current financial year, and (or) with the involvement of new healthcare entities included in the database (specify the required option)

The specified types/conditions for the provision of medical care/services (hereinafter - medical services) are provided in the territory

(indicate the name of a region, a city of republican significance or the capital/district of a region)

at the production base (s) specified in the annex (es) to the license for medical activities.

Applications for the planned volumes of the specified medical services (hereinafter referred to as

applications) are submitted by healthcare entities included in the database of healthcare entities

seeking to provide medical care within the guaranteed volume of free medical care and in the system

of compulsory social health insurance in

(indicate the required: name of the fund/ branch of the fund or the administrator of budget programs)

at the address: _____ room № _____ (if any).

(indicate the address)

Start date of accepting applications is “__” _____ 20__ __ hrs __ min.

The deadline for submitting the applications for participation and the documents attached thereto

is until _____ hrs of “__” _____ 20__ .

Additional information and reference can be obtained by phone (s)

(area code and phone number (s))

Note*

Note:

* to be indicated if necessary.

Appendix 3
to the Rules for procuring services from
healthcare entities for the provision of medical
care within the guaranteed volume of free
medical care and (or) in the system of
compulsory
social health insurance
Form

Application for the planned volume of medical services within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance

At _____

(the name and location of the fund/branch of the fund or the administrator of budget programs)

— (name of the healthcare entity)
submits an application for the provision of services

— (indicate the required:
within the guaranteed volume of free medical care;
in the system of compulsory social health insurance for the following types/conditions for
the
provision of medical care *:

— (indicate the type (s) of medical care/conditions for the provision of medical care/services,
for the provision of which (s) the healthcare entity seeks).

With this application, the healthcare entity agrees to receive information thereon
confirming compliance with the norms and requirements established by regulatory
legal acts in the field of healthcare.

With this application, the healthcare entity confirms:

the reliability of the information provided;

compliance of the license for medical activities;

availability of human resources that meet the requirements of regulatory legal acts in
the field of healthcare required to fulfill the declared volumes of medical services;

availability of medical equipment necessary to perform the declared volumes of medical
services;

familiarization with the terms of the announcement.

This application will be valid for the period required by the announcement.

the following documents are attached to this application:

1. _____ (_____ sheets)
(indicate the name of documents) (indicate the number of sheets)

2. _____ (_____ sheets)

)

— (position, surname, name, patronymic (if any) of the head of the healthcare entity
or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Note:

* indicated according to the announcement of the procedure for placing the volume of services

within the guaranteed volume of free medical care and (or) in the system of compulsory social

health insurance among healthcare entities included in the database of healthcare entities applying

for medical care within the guaranteed volume of free medical care and in the system of compulsory social health insurance.

Appendix 4
to the Rules for procuring services from
healthcare entities for the provision of medical
care within the guaranteed volume of free
medical care and (or) in the system of
compulsory
social health insurance

Information on the volumes and amounts for the provision of medical care specified in the application

for the planned volume of services for the provision of medical care within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance

Information on the volumes and amounts for the provision of primary health care to the registered population

Item №	Volume and amount for a previous period						20__	
	20__		20__		20__			
	Number of the registered population	Value of the procurement contract, KZT	Number of the registered population	Value of the procurement contract, KZT	Number of the registered population	Value of the procurement contract, KZT	Declared number of the registered population, persons	Declared amount, KZT
1	2	3	4	5	6	7	8	9

The appendix to this information is on __ sheets.*

Note**

_____ / _____

(position, surname, name, patronymic (if any) of the head of the healthcare entity or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Note:

* the calculation of the declared amount is attached according to the appendix to this information in any form, indicating:

the declared number of the registered population;

tariffs for medical services provided within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance, approved in accordance with subparagraph 65) of Article 7 of the Code of the Republic of Kazakhstan “On Public Health and the Healthcare System” as of July 7, 2020 (hereinafter - tariffs);

the declared amount;

the total amount;

** to be filled in if necessary.

Information on the volumes and amounts for the provision of consultative and diagnostic assistance

Item №	Services code	Name of services of consultative and diagnostic assistance	Volume and amount for a previous period					
			20__		20__		20__	
			Number of provided services of consultative and diagnostic assistance	Amount in KZT	Number of provided services of consultative and diagnostic assistance	Amount in KZT	Number of provided services of consultative and diagnostic assistance	Amount in KZT
1	2	3	4	5	6	7	8	9
	Total							

The table continued

Declared volumes and amounts	
Number of services of consultative and diagnostic assistance	Amount in KZT
10	11
Total	

The appendix to this information is on __ sheets.*

/

(position, surname, name, patronymic (if any) of the head of the healthcare entity or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Note**

Note:

* the calculation of the declared amount is attached according to the appendix to this information in any form in the context of services, indicating:

- names of services;
- value of services according to tariffs (average price);
- amount of services;
- total amount of services;
- ** to be filled in if necessary.

Information on the volumes and amounts for the provision of high-tech medical care

Item №	HTMS code	Name of HTMS	Volume and amount of HTMC for a previous period						
			20__		20__		20__		
			Number	Amount in KZT	Number	Amount in KZT	Number	Amount in KZT	
1	2	3	4	5	6	7	8	9	
Total									

the table continued

Declared volumes and amounts	
Number	Amount in KZT
4	5
Total	

The appendix to this information is on __ sheets.*

Note**

Note:

* the calculation of the declared amount is attached according to the appendix to this information in any form in the context of services, indicating:

- names of HTMSs;
- value of services according to tariffs;
- amounts of HTMSs;
- total amount of HTMSs;
- ** to be filled in if necessary.

_____ / _____

(position, surname, name, patronymic (if any) of the head of the healthcare entity or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Information on the volumes and amounts for the provision of programmed hemodialysis services

Volume and amount for a previous period		
20__	20__	20__

Item №	Number of patients	Number of sessions	Amount in KZT	Number of patients	Number of sessions	Amount in KZT	Number of patients	Number of sessions	Amount in KZT
1	2	3	4	5	6	7	8	9	10
Total									

the table continued

Declared volumes and amounts		
Number of patients	Number of sessions	Amount in KZT
11	12	13
Total		

The appendix to this information is on __ sheets.*

/

(position, surname, name, patronymic (if any) of the head of the healthcare entity or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Note**

Note:

* the calculation of the declared amount is attached according to the appendix to this information in any form, indicating:

number of patients;

number of sessions;

price of services according to tariffs;

declared amount;

total amount;

** to be filled in if necessary.

Information on the volumes and amounts for the provision of peritoneal hemodialysis services

Item №	Volume and amount for a previous period								
	20__			20__			20__		
	Number of patients	Number of sessions	Amount in KZT	Number of patients	Number of sessions	Amount in KZT	Number of patients	Number of sessions	Amount in KZT
1	2	3	4	5	6	7	8	9	10
Total									

the table continued

Declared volumes and amounts		
Number of patients	Number of sessions	Amount in KZT
11	12	13

Total		
-------	--	--

The appendix to this information is on __ sheets.*

(position, surname, name, patronymic (if any) of the head of the healthcare entity
or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Note**

Note:

* the calculation of the declared amount is attached according to the appendix to this information in any form, indicating:

number of patients;

number of sessions;

price of services according to tariffs;

declared amount;

total amount;

** to be filled in if necessary.

Information on the volumes and amounts for the provision of specialized medical care *

Item №	Form of medical care	Volume and amount for a previous period **					
		20__		20__		20__	
		Number of cases treated/bed-days	Amount in KZT	Number of cases treated/bed-days	Amount in KZT	Number of cases treated/bed-days	Amount in KZT
1	2	3	4	5	6	7	8
Total							
Declared volumes and amounts							
Number of cases treated/bed-days					Amount in KZT		
9					10		
Total							

The appendix to this information is on __ sheets.**

(position, surname, name, patronymic (if any) of the head of the healthcare entity
or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Note***

Note:

* to be filled out in case of submitting an application for the provision of specialized medical care, which is paid for at the rate for the treated case by diagnosis-related groups, at the estimated average cost, by bed-days, at medical and economic rates; by actual costs;

** the calculation of the declared amount is attached according to the appendix to this information in any form, indicating:

number of cases (bed-days);

the cost of services according to tariffs (average cost);

the declared amount;

the total amount;

*** to be filled in if necessary.

Information on the volumes and amounts of emergency medical care or medical care associated with the transportation of specialists and (or) a patient by ambulance transport

Item №	Volume and amount for a previous period						Declared volumes and amounts	
	20__		20__		20__		20__	
	number of registered population	Amount in KZT	number of registered population	Amount in KZT	number of registered population	Amount in KZT	number of registered population	Amount in KZT
1	2	3	4	5	6	7	8	9
	Total							

The appendix to this information is on __ sheets.*

(position, surname, name, patronymic (if any) of the head of the healthcare entity or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Note**

Note:

* the calculation of the declared amount for the provision of emergency medical care or medical care related to the transportation of qualified specialists and (or) a patient by ambulance transport is attached in accordance with the appendix to this information in any form, indicating:

declared number of registered population;

the cost according to tariffs (average cost);

the declared amount;
 the total amount;
 ** to be filled in if necessary.

Information on the declared volumes and amounts for the provision of medical care, which is paid for at the integrated tariff *

Item №	Volume and amount for a previous period						Declared volumes and amounts	
	20__		20__		20__		20__	
	Headcount (number**) of registered patients (treated cases/bed-days)**	Amount in KZT	Headcount (number**) of registered patients (treated cases/bed-days)**	Amount in KZT	Headcount (number**) of registered patients (treated cases/bed-days)**	Amount in KZT	Headcount (number**) of registered patients (treated cases/bed-days)**	Amount in KZT
1	2	3	4	5	6	7	8	9
	Total							

The appendix to this information is on __ sheets.***

(position, surname, name, patronymic (if any) of the head of the healthcare entity or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Note****

Note:

* to be completed in case of submitting an application for the provision of medical care provided to cancer patients, patients with tuberculosis; HIV-infected and (or) patients with acquired immunodeficiency syndrome, persons with mental, behavioral disorders (diseases) associated with the use of psychoactive substances;

** for republican medical facilities;

*** the calculation of the declared amount for the provision of medical care, which is paid for at the integrated rate is attached in accordance with the appendix to this information in any form, indicating:

the declared number of registered patients;

cost according to tariffs (average cost);

the declared amount;

the total amount;

**** to be filled in if necessary.

Information on the declared volumes and amounts for the provision of services provided by the blood service*

Item №	Volume and amount for a previous period						Declared volumes	
	20__		20__		20__		20__	
	Number of services	Amount in KZT	Number of services	Amount in KZT	Number of services	Amount in KZT	Number of services	Amount in KZT
1	2	3	4	5	6	7	8	9
	Total							

The appendix to this information is on __ sheets.**

(position, surname, name, patronymic (if any) of the head of the healthcare entity or a person authorized by him/her, signature)

Stamp (if any) here

Filled out on _____

Note***

Note:

** the calculation of the declared amount for the provision of medical care provided by the blood service is attached in accordance with the appendix to this information in any form, indicating:

- the declared number of services;
- cost according to tariffs (average cost);
- the declared amount;
- the total amount;

*** to be filled in if necessary.

Appendix 5
to the Rules for procuring services from
healthcare entities for the provision of medical
care within the guaranteed volume of free
medical care and (or) in the system of
compulsory
social health insurance
Form

Log of applications for the planned volumes of services for the provision of medical care within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance*

Date, time	Number of sheets of the	Surname, name, patronymic (if any) of the	№ of the power of	№ of the identity document of the authorized	Signature of the head or authorized

Item №	(hrs, min)	BIN /IIN	Name of a healthcare entity	application and documents attached thereto	head or the authorized person of the healthcare entity	attorney and its validity (if any) **	person of the healthcare entity, issued by ..., the date of issue (if any)	representative of the healthcare entity	Signature of the commission's secretary	Note
1	2	3	4	5	6	7	8	9	10	11

Note:

* when submitting an application by mail, columns 1 to 6 are filled in, the number and date of registration of the postal item with the application in the office are registered in the note

** the power of attorney is valid if there is an identity document of the authorized person.

Appendix 6
to the Rules for procuring services from
healthcare entities for the provision of medical
care within the guaranteed volume of free
medical care and (or) in the system of
compulsory
social health insurance
Form

Protocol of compliance (non-compliance) of healthcare entities with the requirements for admission to the procedure

for placing volumes of medical care services within the guaranteed volume of free medical care and (or)

in the system of compulsory social health insurance

_____ " __ " _____ 20__
(location)

1. The commission for selecting healthcare entities and placing the volumes of services among healthcare entities (hereinafter – the commission) consisting of:

_____ (surname, name, patronymic (if any) and position of the commission's chairman and other members)

_____ has considered an application for the planned volumes of medical services within the GVFMC and

_____ (or) in the CSHI system (hereinafter - application) of the below indicated healthcare entity (ies):

Item №	BIN/IIN	Name of the healthcare entity
1	2	3

2. The application has been considered and it contains the documents failing to meet the requirements of the Procurement Rules, such as:

Item №	Name of the healthcare entity	Name of the document	Does not meet the requirements	note
1	2	3	4	5

3. Pursuant to the consideration of the application, the commission by show of hands DECIDED:

1) _____

_____ (name of the healthcare entity)

meets (does not meet) the requirements for admission to the procedure for placing volumes of medical services within the GVFMC and (or) in the CSHI system;

2) _____

_____ (name of the healthcare entity)

meets (does not meet) the requirements for admission to the procedure for placing volumes of medical services within the GVFMC and (or) in the CSHI system;

The decision was voted as follows:

FOR _____ votes;

AGAINST _____ votes.

_____ (surname, name, patronymic (if any), signatures of the commission's chairman, deputy chairman, other members and secretary)

Appendix 7
to the Rules for procuring services from
healthcare entities for the provision of medical
care within the guaranteed volume of free
medical care and (or) in the system of
compulsory
social health insurance
Form

Protocol on the results of placement (not placement) of volumes of medical care services within the guaranteed volume of free medical care and (or) in the system of compulsory social health insurance

_____ " __ " _____ 20__

(location)

1. The commission for selecting healthcare entities and placing the volumes of services (hereinafter – the commission) consisting of:

(surname, name, patronymic (if any)
and position of the commission's chairman and other members) has considered the
declared
volumes and amounts of medical services:

_____ ,
(underline as necessary: within the guaranteed volume of free medical care and (or) in
the system
of compulsory social health insurance) represented by healthcare entities included in the
database
of healthcare entities seeking to provide medical care within the guaranteed amount of
free medical
care (hereinafter - GVPMC) and in the compulsory social health insurance (hereinafter -
CSHI),
according to types/conditions of medical care:

2. The amount for distribution within the GVPMC

KZT. *

(_____)

(amount in figures and words)

The amount for distribution in the CSHI system _____ (_____
_____) KZT.*

(сумма цифрами и прописью)

3. Based on the calculation according to the appendix to this protocol, the commission
by show of hands DECIDED:

1) to place volumes and amounts for the provision of medical care within the GVPMC
and (or)
in the CSHI system for the following type (s)/conditions for the provision of medical
care: _____ ,

Item №	BIN /IIN	Name of the healthcare entity	Legal address of the healthcare entity	Place of rendering services (indicate a region , a city of republican significance, the capital)	Amount (KZT)	Volumes of medical services
1	2	3	4	5	6	7

2) _____

(name of the fund's branch or the administrator of budget programs)

until " ____ " _____ (year) to conclude contracts for procuring medical services within the

GVFMC or in the CSHI system (contracts for procuring services for additional provision of GVFMC);

3) not to place volumes of services for the provision of medical care within the GVFMC and (or) in the CSHI system):

Item №	BIN /IIN	Name of the healthcare entity included in the database	Legal address of the healthcare entity	Place of rendering services (indicate a region, a city of republican significance, the capital)	Types/conditions of provision of medical care	Reason (ground)
1	2	3	4	5	6	7

By type (s)/conditions for the provision of medical care, the amount and (or) volumes of medical services have not been placed

_____ KZT. *

(amount in figures and words)

The decision was voted as follows:

FOR _____ votes;

AGAINST _____ votes.

_____ (surname, name, patronymic (if any), signatures of the commission's chairman, other members and secretary)

Note: **

The calculations of _____ sheets are attached.

(indicate the number of sheets)

Note:

* to be filled in if necessary.

Appendix 2 to Order
№ KR DSM-242/2020
of the Minister of Healthcare
of the Republic of Kazakhstan
as of December 8, 2020

List of some invalidated orders of the Ministry of Healthcare of the Republic of Kazakhstan

1. Order № 591 of the Minister of Healthcare of the Republic of Kazakhstan as of August 7, 2017 "On approval of the Rules for procuring services from healthcare entities within the

guaranteed volume of free medical care and in the system of compulsory social health insurance” (registered in the State Registration Register of Regulatory Legal Acts under № 15604, published on September 6, 2017 in the Reference Control Bank of Regulatory Legal Acts of the Republic of Kazakhstan);

2. order № KR DSM-112 of the Acting Minister of Healthcare of the Republic of Kazakhstan as of August 12, 2019 “On amending Order № 591 of the Minister of Healthcare of the Republic of Kazakhstan as of August 7, 2017 “On approval of the Rules for procuring services from healthcare entities within the guaranteed volume of free medical care and in the system of compulsory social health insurance” (registered in the State Registration Register of Regulatory Legal Acts under № 19256, published on August 27, 2019 in the Reference Control Bank of Regulatory Legal Acts of the Republic of Kazakhstan);

3. order № KR DSM-145 of the Minister of Healthcare of the Republic of Kazakhstan as of November 20, 2019 “On amending Order № 591 of the Minister of Healthcare of the Republic of Kazakhstan as of August 7, 2017 “On approval of the Rules for procuring services from healthcare entities within the guaranteed volume of free medical care and in the system of compulsory social health insurance” (registered in the State Registration Register of Regulatory Legal Acts under № 19623, published on November 27, 2019 in the Reference Control Bank of Regulatory Legal Acts of the Republic of Kazakhstan);

4. paragraph 2 of the list of some orders in the field of healthcare, which are amended and supplemented by Order № KR DSM-21/2020 of the Minister of Healthcare of the Republic of Kazakhstan as of March 27, 2020 “On amending some orders in the field of healthcare” (registered in the State Registration Register of Regulatory Legal Acts No. 20182, published on April 2, 2020 in the Reference Control Bank of Regulatory Legal Acts of the Republic of Kazakhstan);

5. order № KR DSM-73/2020 of the Acting Minister of Healthcare of the Republic of Kazakhstan as of June 23, 2020 “On amending Order № 591 of the Minister of Healthcare of the Republic of Kazakhstan as of August 7, 2017 “On approval of the Rules for procuring services from healthcare entities within the guaranteed volume of free medical care and in the system of compulsory social health insurance” (registered in the State Registration Register of Regulatory Legal Acts under № 20895, published on June 24, 2020 in the Reference Control Bank of Regulatory Legal Acts of the Republic of Kazakhstan).