

Results/tables of the 5 dimensions of the 2020 FPSPA

1.1 Financing Sources from government: central and decentralized/local levels

Financing Source	Value (USD)	% of total
Central and sub national		
FS.1.1.1.5 Ministry of Finance	13,590,842	100%
Total (Central + Subnational)	13,590,842	100%

1.2 Family planning expenditures by financing agents in 2020

Financing Agents	Value (USD)	% of total
Central level		
FA 1.1.1.1 Ministry (or equivalent sector entity) of Health - Central Ministry of Health	1,921,416	14.1%
Subnational/provincial level		
FA 1.1.2.1 Ministry (or equivalent state sector entity) of Health - Regional Directorates of Health	11,669,426	85.9%
Total (Central + Subnational)	13,590,842	100%

1.3 Family planning expenditures by provider type in 2020

Financing Provider	Value (USD)	% of total
Central level		
PS.1.1.2 Public specialty hospitals - Obstetric units of the specialist hospitals	469728.4	3.5%
PS.1.13.1 National Family Planning Agency - Family Health Bureau	83993.13	0.6%
Subnational/provincial level		
PS.1.1.3 Public health centers -Medical officer of Health Family Planning Clinics	13037121	95.9%
Total (Central + Subnational)	13,590,842	100%

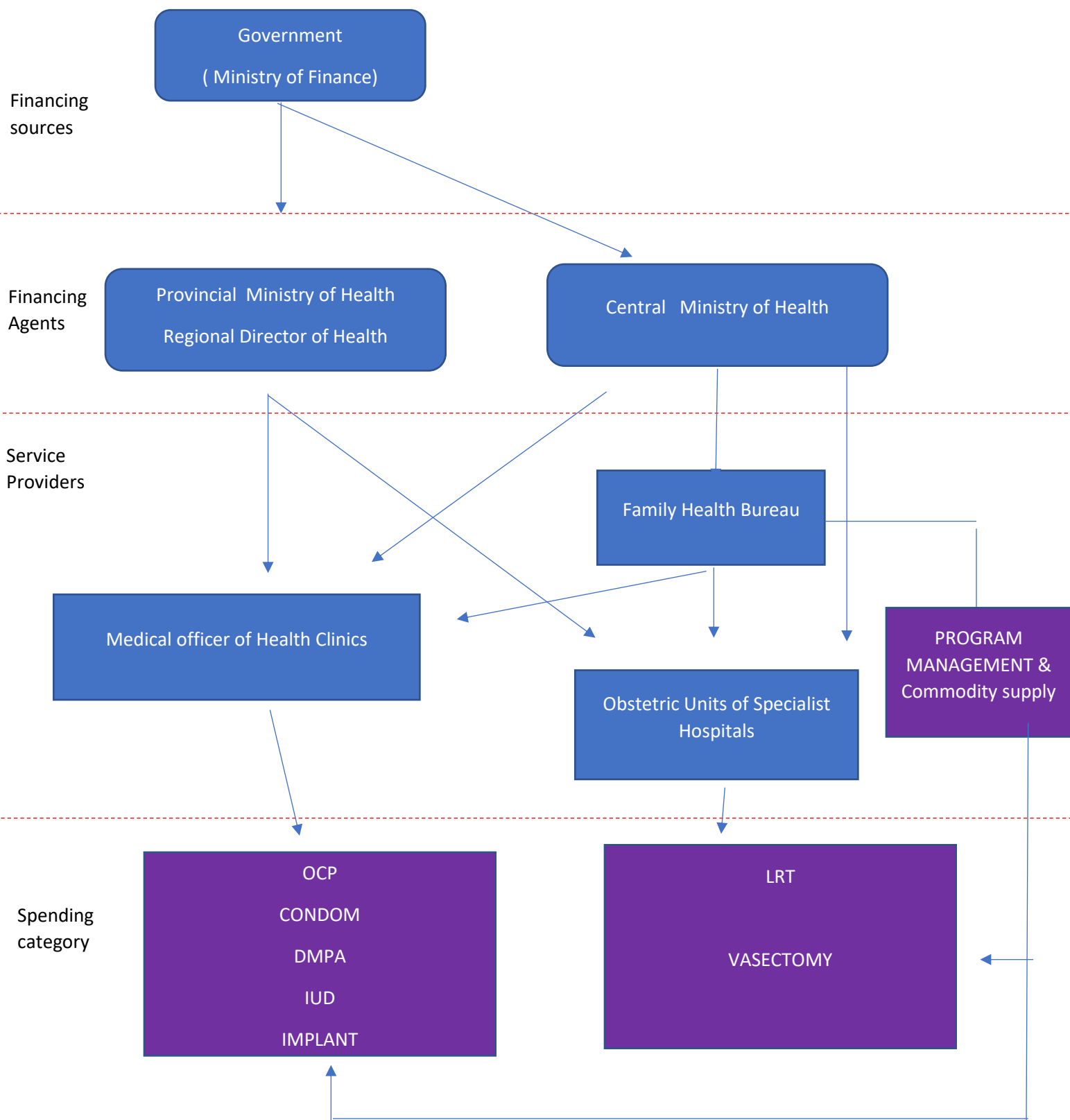
1.4 Family Planning Spending categories (FPSC) in 2020

Family Planning Spending Categories	Value (USD)	% of total
FPSC 1.21: Female sterilization (tubal ligation)	469,278	3.5%
FPSC 1.22: Male sterilization (vasectomy)	450	0.0%
FPSC 1.4: Prescription and provision of male condoms for FP	142,054	1.0%
FPSC 1.6: Provision of pills	234,032	1.7%
FPSC 1.7: Provision of injectables	310,783	2.3%
FPSC 1.8: Provision of IUD	47,584	0.4%
FPSC 1.9: Provision of implants	633,242	4.7%
FPSC 1.98: FP services not disaggregated by type (specify types of FP services included in the aggregate spending)- (Condoms,OCP,IUD,DMPA,Implant) Health system costs	11,669,426	85.9%
FPSC 2.6: Drug supply systems	2,263	0.02%
FPSC 2.98: Programme management and administration not broken down by type	77,876	0.6%
FPSC 2.99: Programme management and administration not elsewhere classified	3,853	0.03%
Total	13,590,842	100.0%

1.5 Inputs/Production Factors/objects of expenditures in 2020

Family Planning Production Factors	Value (USD)	% of total
FPPF 1.1.98: Staff cost not disaggregated by type	10,536,204	77.5%
FPPF 1.2.1: Pills	234,032	1.7%
FPPF 1.2.2: Injectables and related consumables	310,783	2.3%
FPPF 1.2.3: IUD and related consumables	47,584	0.4%
FPPF 1.2.4: Implants and related consumables	633,242	4.7%
FPPF 1.2.5: Consumables for tubal ligation	127,685	0.9%
FPPF 1.2.6: Consumables for vasectomy	58	0.0004%
FPPF 1.2.7: Male condoms for FP	142,054	1.0%
FPPF 1.21: Transportation, and distribution	328,076	2.4%
FPPF 1.5.2: Utilities – water, electricity, communication, and related	290,164	2.1%
FPPF 1.5.3: Repairs and maintenance of buildings related to FP services	94,764	0.7%
FPPF 1.5.4: Repairs and maintenance of FP equipment	71,573	0.5%
FPPF 1.5.5 Travel expenses	152,664	1.1%
FPPF 1.99: Current expenditure not elsewhere classified (n.e.c.): comprises current	621,959	4.6%
Total	13,590,842	100.0%

1.6 Fund flows for family planning service from government



2 Estimation methods

Based on the data availability, family planning expenditure data were estimated using two approaches.

1. The commodity costs were estimated as direct costs.
2. The health system costs were estimated as shared costs.

2.1 Estimation of commodity costs

The cost of commodities used was not available at the provider level. Hence, the commodity cost estimates were obtained by multiplying family planning commodity distribution/utilization numbers and the respective unit prices at which the Ministry of Health purchased them. All these data were available in the Family Health Bureau (the national Family Planning Program) databases. The following table shows the calculation process.

Type	Commodities / Items distributed & utilized in 2020	Unit cost	Expenditure (LKR)	Expenditure (USD)
Condoms	5,840,000	4.50	26,280,000.00	142,054
OCP	1,353,000	32.00	43,296,000.00	234,032
DMPA	363,891	158.00	57,494,778.00	310,783
IUDs	67198	131.00	8,802,977.30	47,584
IMPLANT	68309	1715.00	117,149,763.50	633,242
LRT (new acceptors) - Materials	33,130	713.00	23,621,690.00	127,685
Vasectomy (new acceptors)- Materials	38	284.00	10,792.00	58
Total commodity cost			276,656,000.80	1,495,438

2.2 Estimation of health system costs

Three types of government provider institutions are involved in the provision of family planning in Sri Lanka. They include

1. **Medical Officer of Health Family Planning Clinics:** These clinics are responsible for providing condoms, OCP, DMPA, IUD, and implants. Staffed by Midwives, medical officers of health, and other supervisory staff. They are a part of the PHC system

2. **Obstetric units of the specialist hospitals:** LRTS and Vasectomies are provided in these clinics.
3. **Family Health Bureau:** the National Family Planning Agency responsible for program management (Policy, strategy, technical guidance, research, M & E, etc.), coordination of commodity supply across subnational levels, and managing family planning information system, etc. The Family Health Bureau is also covering the other reproductive, maternal child adolescent health programs.

2.2.1 Health system cost estimation in Medical Officer of Health Family Planning Clinics:

The medical officer of health, FP clinic is a part of the primary health care (PHC) system of Sri Lanka. PHC system includes both The medical officer of health clinics and divisional hospitals. The expenditure accounting records are compiled for the whole PHC system, and they are available as disaggregated components that could be easily reassigned to production factors (FP) classification.

In filtering FP related costs, family planning share was identified as follows:

Total outpatients in PHC system	42,259,880.78	MIS data
Total inpatient days in PHC hospitals	6,492,994.50	Both inpatient counts and IPD days were Directly available from MIS data
OPD Equivalent of IPD days	32,270,182.67	Multiplication by 4.7 (WHO choice)
FP outpatients in clinics /Home visits by MOH	3,375,147.20	MIS data: Home visits and outpatient visits is assumed to be similar in terms of expenditure
Other Outpatient /home visits MOH	<u>25,732,077.71</u>	MIS data MOH system caters for other outpatient services (antenatal, nutrition, immunization etc..)
All outpatient visits	110,130,282.85	
FP share	0.0326 (3.26%)	

The family planning share of PHC expenditure was calculated as 3.26% based on the above logic. The following table shows the calculation.

PHC (DIVISIONAL HOSPITAL/ MOH CLINIC) HEALTH EXPENDITURE (TOTAL & FP SHARE) BY FPPF CATEGORIES (2020) : Covers health system expenses for : Pills, condoms, IUD, Implants, DMPA

FPPF category	2020 (LKR)	FP share (3.3%) (LKR)	202 FP share in USD
FPPF 1.1.98: Staff cost not disaggregated by type	57,707,987,777.10	1,879,371,377.42	10,158,764
FPPF 1.5.2: Utilities – water, electricity, communication, and related	1,540,890,024.70	50,182,040.99	271,254

FPPF 1.5.3: Repairs and maintenance of buildings related to FP services	538,318,099.77	17,531,362.08	94,764
FPPF 1.5.4: Repairs and maintenance of FP equipment	406,576,169.46	13,240,933.28	71,573
FPPF 1.5.5 Travel expenses	862,896,907.73	28,101,893.91	151,902
FPPF 1.21: Transportation, and distribution	1,850,817,924.58	60,275,437.88	325,813
FPPF 1.99: Current expenditure not elsewhere classified (n.e.c.): comprises current	<u>3,381,984,413.84</u>	110,140,813.28	595,356
	66,289,471,317.18	2,158,843,858.82	11,669,426.2639

(Commodity costs were separately estimated)

2.2.2 Health system cost estimation in Obstetric units of the specialist hospitals

The health system cost that can be attributed to family planning services provided by the obstetric units of specialist hospitals (LRT and & Vasectomy) were also estimated using the same approach described above. The FP % share was calculated as below:

Total Outpatients	19,625,751.00	Directly available from MIS data
Total inpatient days in S hospitals		Directly available from MIS data
OPD Equivalents of IPD days	70,863,403.10	Multiplication by 4.7 (WHO choice)
FP outpatients	33,168.00	Directly available from MIS data
	90,522,322.10	
FP share	0.0004	0.04%

Please note that the number of LRTS and VCTS conducted in 2020 was very low, and as a result, the % share for FP in the specialist hospital setup was very low. Then this share was further divided as LRT and VCT share based on LRT: VCT numbers.

In the hospital set up only 3 FPPF categories were relevant for family planning. The following table shows the calculation steps

FPPF Category	Total expenditure 2020	Total expenditure 2021	FP Share (0.00036640 6862203107)	LRT Share: (0.9988543 17414375)	VCT Share: (0.00114 5682585 6247)
	LKR	USD	USD	(USD)	(USD)
FPPF 1.1.98: Staff cost not disaggregated by type	154,419,043,331	834,697,532	305839	305,489	350
FPPF 1.5.2: Utilities – water, electricity, communication, and related	6,764,195,584	36,563,219	13397	13,382	15
FPPF 1.99: Current expenditure not elsewhere classified (n.e.c.): comprises current	11,486,206,024	62,087,600	22749	22,723	26
Total specialist hospital expenditure	172,669,444,939	933,348,351	341985	341,593.43	392

2.2.3 Health system cost of FHB

Family Health Bureau (FHB) is comprised of 14 RMNACH related units, and the Family Planning unit (National Family Planning Agency) is one of them. Since FHB does not provide clinical care, the OPD IPD statistics were not available. Therefore the Family planning share was assumed to be 7% (1/14th) of the total health system expenditure of FHB. The calculation is as follows:

FPPF category	Total expenditure of FHB 2020	FP share (7%), 2020	FP share (7%), 2020
	LKR	LKR	USD
FPPF 1.1.98: Staff cost not disaggregated by type	189,231,419.38	13,246,199.36	71,601.08
FPPF 1.5.2: Utilities – water, electricity, communication, and related	14,570,202.00	1,019,914.14	5,513.05
FPPF 1.5.5 Travel expenses	2,014,641.00	141,024.87	762.30
FPPF 1.21: Transportation, and distribution	5,981,499.00	418,704.93	2,263.27
FPPF 1.99: Current expenditure not elsewhere classified (n.e.c.): comprises current	10,184,070.43	<u>712,884.93</u>	3,853.43
Total FHB	221,981,831.81	15,538,728.23	83,993.13

3 Stakeholder comments

Three were comments on the estimation process. The program asks about the shared expenditure estimation process. It was explained and clarified.

The national program manager FP, Dr Loshan Moonasinghe thanked for conducting this study and mentioned that it is the first time such analysis is done to cover the expenditures from all health system block elements.

They also mentioned that expanding the analysis to cover the expenditure by beneficiary characteristics would be nice. However, they were aware of the data difficulties and cost implications of such an analysis.