Committee on Economic, Social and Cultural Rights

Information received from the Republic of Moldova on follow-up to the concluding observations on its third periodic report*

[Date received: 1 December 2020]
Follow-up information relating to paragraph 59 of the concluding observations (E/C.12/MDA/CO/3)


2. The Ministry of Health, Labor and Social Protection works according to the “Regulation on the organization and functioning of the Ministry of Health, Labor and Social Protection, approved by Government Decision no. 694 of August 30, 2017, as a result of the governmental structural optimization reforms within the specialized central public authorities and other central administrative bodies and, respectively, promotes and realizes the state policies in the field of public health, labor, demography and social protection.

3. The policies promoted by the Ministry of Health, Labor and Social Protection, during the reporting period were focused on improving the quality of the health services offered to the population, ensuring the highest level of sustainable employment, implementing the new social protection formulas of the socially disadvantaged population categories and new tools for ensuring the social welfare of citizens.

4. In the context of the CESCR requests regarding the evolutions in the sphere of health, to Art.56 (c) – ensuring the “Right to health”, we communicate the following.

5. In order to improve the access of the population to quality and safe services, provided according to the normative acts of standardization of the health services, for the priority diseases that determine the population health indicators, during the reference period (after 19.10.2017 until now), they have been elaborated/updated and approved by MHLSP orders:
   • 72 newly developed national clinical protocols and 43 updated national clinical protocols;
   • 35 newly developed standardized clinical protocols and 3 updated standardized clinical protocols;
   • 13 behavioral algorithms in medical emergencies;
   • 12 practical guides for different fields, including the Guide on the application of the procedure of communication and counseling of patients.

6. At the same time, in order to standardize and align this process with the international best practices, the approval, by consensus, by all interested parties (regulators, providers, financers, etc.) of the requirements regarding the organization and the provision of the medical assistance at national level, has been updated and approved, by the order of the MHLSP no. 1540 of 27.12.2018, the Methodology of elaboration, approval and implementation of the national clinical protocols in the Republic of Moldova.

7. Also, in order to evaluate the functionality of the institutional quality management system, set up by the Order no. 139 of 03.03.2010 “Regarding the quality assurance of the medical services in the medical-sanitary institutions”, the mapping was carried out including 26 public and private hospitals, of the activity of Quality Councils, which coordinates this system aimed at ensuring, monitoring and evaluating the quality of services and patient safety.

8. In the same context, following the conclusions and recommendations of the aforementioned evaluation, the international practice regarding the quality management systems of the medical services at the institutional level was studied and, by the order of the MHLSP no. 1363 of 29.11.2019, the initiation was approved, starting with 02.01.2020, piloting the Quality Management structure of the medical services, as a distinct structural subdivision of the hospital medical-sanitary institution, created in order to coordinate and consolidate the process of continuous improvement of the quality of the medical services provided within the institution.

9. In order to comply with Art.2 (2), with reference to the implementation of the International Covenant on Economic, Social and Cultural Rights, during the year 2018 the new national clinical protocols were implemented regarding the treatment of adults, children,
prevention of HIV transmission from mother to fetus, pre-exposure HIV prophylaxis (PrEP) and post-exposure HIV prophylaxis (PEP), which stipulate that all HIV-infected persons have universal access to antiretroviral treatment (ARV), HIV diagnostic services, efficacy monitoring services ARV treatment, psycho-social support services, regardless of race, ethnicity, gender and the status of the presence or absence of health insurance, in 8 ARV treatment centers (including in the penitentiary system).

10. The general objectives in the field of health are:
   • Ensuring and guaranteeing the access of citizens to quality public health, medical and pharmaceutical services;
   • Increasing the quality of the medical services provided to the population, by strengthening the human potential, technical-material, equipping with medical devices, laboratories, medicines, performing technologies of the medical institutions and of state surveillance of the public health;
   • Increasing the performance of medical service providers by applying minimum quality standards;
   • Development of health care in rural areas, etc.

11. In the context of the CESCR requests regarding the evolutions in the field of health in 2018, we communicate the following.

12. In 2018 there was initiated (Source: Implementation Report, 2018) the reform of the primary health care system (MPA). The purpose of the reform is to connect the primary health care system to the European model, to create more attractive conditions for family physicians, to make the healthcare system more efficient, to increase the degree of initiative but also the responsibility of the family doctor, which will contribute to ensuring the population’s access to qualitative services closer to home and, respectively, to increase the level of satisfaction of patients.

13. In this sense, during the year 2018, the normative framework was modified and a series of legislative acts was adopted, as follows: Law no. 191 of 27.07.2018 for the modification of some legislative acts, the Government Decision no. 988 of October 10, 2018 for the approval of the Rules for organizing the primary health care. The Government Decision no. 1020 of October 24, 2018 regarding the approval of the changes that are being made in some Government Decisions.

14. By Law no. 175/2018 of September 2018, the obligation to keep the medical insurance policy on paper was cancelled. Thus, the insured persons are no longer required to present the health insurance policy in order to receive medical services or compensated drugs.

15. In order to prevent developmental disorders and disabilities of children starting from 2018, within the Republican Center for Rehabilitation for Children, the section “Early intervention in children” operates. Based on the established priorities and the allocations of the compulsory health care insurance funds available for 2018, for the provision of early intervention services to children in the republic, the Early Intervention Center “Voinicel” was contracted by the National Medical Insurance Company with 535,4 thousand lei, or an increase of 162,4 thousand lei (+ 42.8%) compared to the amount contracted in 2017.

16. By the Order of the MHLSP no. 710 of June 7, 2018 “On the way of organizing the treatment in the Special Programs”, the Regulation on the way of organizing the treatment in the Special Programs was approved, including the cataract patients. During 2018, 3973 patients received cataract surgical treatment (compared to 2017 – 3707 patients).

17. In order to reduce the waiting list of patients for hip and knee endoprosthesis, the Regulation on the way of organizing the treatment in the Special Programs was approved, by the Order of the MHLSP no. 710 of June 7, 2018 “On the way of organizing the treatment within the Special Programs”.

18. During the year 2018 by the specialists of the Institute of Urgent Medicine, the Clinical Hospital of Traumatology and Orthopedics, the Municipal Clinical Hospital Balti and 9 rayon Hospitals: Cahul, Causeni, Comrat, Edinet, Hincesti, Floresti, Orhei, Soroca and Ungheni, by the doctors-trained traumatologists in the field of hip/knee arthroplasty,
including abroad (Romania and Turkey), overall 1246 prostheses of large joints (2017 – 1021), thus ensuring decentralization and accessibility of specialized medical services as close as possible to patients.

19. By the Order of the MHLSP no. 620 of May 18, 2018 “On the distribution of breast exoprostheses”, the algorithm for distributing breast exoprostheses to patients with mammary gland cancer was approved after mastectomies, included in the waiting list for the year 2018. At the same time, the Distribution Plan was approved, to the oncologists specialists in the administrative territories of the breast exoprosthesis, for the patients included in the waiting list, thus ensuring their exoprosthesis at the place of residence. During 2018, 1563 exoprostheses were distributed to 1538 women (25 patients received two prostheses due to bilateral mastectomy).

20. In 2018, greater attention was paid to the provision of patients with medicines. The volume of financial allowances for the compensated drugs was increased by 34%, or by 172 million lei more compared to 2015 and constituted 505 million lei in 2018. The list of compensated drugs has been expanded by 59 international common names (from 88 names international communes in 2015 to 147 international common names in 2018).

21. The legal framework regarding the conditions for placing medical devices on the market has been updated in accordance with the European acquis (Government Decision No. 702 of July 11, 2018, Government Decision No. 703 of July 11, 2018 and Government Decision No. 704 of July 11 2018), and proposed for harmonized 8 EU acts in the field of public health (on 30.11.2018 the draft Law on drinking water quality (adopted by Parliament- II reading, 2018), Government Decision no. 945 from October 3, 2018, Decision To the Government No. 179 of February 27, 2018, on 19.12.2018, the Government approved the GD project regarding the approval of the sanitary regulations regarding the flavorings and certain food ingredients with flavoring properties intended for use in / and on the food products and on the flavorings of smoke used or intended for use in/or on food).

22. In April 2018, by the Government Decision No. 301/2018 the monthly salaries of employees of the public medical-sanitary institutions classified in the compulsory health care insurance system were indexed by 4,1%. In 2018, about 1280 young specialists benefited from the allowance, and the allocated amount is 11,5 million lei, compared to 2017 when the allocated amount was 6,7 million lei, for 867 persons, who benefited of this financial support. At the same time, the draft Government Decision was drafted and submitted for approval, which envisages the increase of the salaries of the personnel employed in the public medical-sanitary institutions, framed in the system of compulsory health care insurance as follows (dates 2018): for doctors – with 20%, for the other staff (average, inferior and other staff) – with 10%.

23. Through the Law no. 155 / 2017 and Law no. 85 / 2018 amending the Labor Code were transposed 5 European Directives, as follows: regarding the work on part-time; relating to the maintenance of workers’ rights in the case of the transfer of undertakings, units or parts of undertakings or units; on the general framework for informing and consulting workers; on introducing measures to promote the improvement of safety and health at work in the case of pregnant women, who have recently given birth or are breastfeeding; regarding collective redundancies.

24. In order to increase the state social allowances for disabled persons and disabled children, changes were made to the legislation in force, as follows: from January 1, 2018, the amount of state social allowances for persons with severe disabilities was increased by 20% and childhood averages (about 27,300 people) and children with severe, emphasized disabilities and children up to 18 years old (about 12100 children) – at present it constitutes 100% of the minimum pension amount for people with severe, emphasized and average disabilities, established annually by the Government.

25. Starting with April 1, 2018, the amount of state social allowances was increased by 10% for persons with severe, accentuated and average disabilities (about 10500 people) – constituting 40% of the minimum pension amount for persons with severe, accentuated and average disabilities, established annually by the Government; was increased by 5% the amount of the allowance for care, accompanying and supervision (about 15200 people) – and constitutes 80% of the amount of the minimum pension for the age limit, established annually
by the Government. Overall, about 65,100 disabled persons benefited from increases, about 68,500 thousand lei were allocated from the state budget.

26. By the Government Decision no. 893 of October 12, 2018 was approved the National Program for deinstitutionalization of persons with intellectual and psychosocial disabilities from residential institutions managed by the National Social Assistance Agency, for the years 2018–2026, which aims to reform the residential system for the care of persons with disabilities and intellectuals psychosocials from residential institutions managed by the National Agency for Social Assistance (NASA), through the development and provision of social services at community level, in order to ensure the right to independent life and to live in their community.

27. Objectives achieved in the field of health in 2018 are:

- Developed and approved: The sectoral plan of anti-corruption actions in the field of health and compulsory health care insurance for the years 2018–2020 (Government Decision no. 892 of September 12, 2018);
- The draft Sectoral Strategy for expenditure in the field of health and social protection for the years 2019–2021, was elaborated and presented to the Ministry of Finance (writing no. 01-1654 from 02.04.2018). (Note: The reports on the implementation of the Sectoral Strategy for expenditure in the field of health and social protection for 2017 were submitted to the Ministry of Finance (writing no. 02/821 from 05.04.18) and published on the MHLSP website.);
- The draft law of the state social insurance budget for 2019 was adopted by the Parliament on November 30, 2018 (Law no. 300/2018). The Law no. 107 of June 14, 2018 for amending the Law of the state social insurance budget for the year 2018, no. 281/2017;
- The Law No. 108 of June 14, 2018 for amending the Law on compulsory health insurance funds for the year 2018, no. 280/2017. The draft law on compulsory health insurance funds for 2019 was adopted by Parliament on 30.11.2018 (Law no. 301/2018);
- The MHLSP submitted to the Ministry of Finance proposals for rectification (writing No. 01-5243 of 17.07.2018, No. 21/1878 of 23.07.2018, No. 21/2002 of 02.08.2018, No. 21/2475 of 24.09.2018);
- Approved the Government Decision no. 747 of July 20, 2018 “On the modification of the Government Decision no. 1016/2016 for the approval of the Regulation regarding the appointment on the basis of competition of the leaders of the public medical-sanitary institutions and of the type-contract of management of the institution”.

28. The general indicators of product/result in the field of “Public Health” were established, as follows: 1) Number of normative acts elaborated and approved; 2) 10 public health centers of functional performance, including laboratory services; 3) 34 functional public health territorial councils; 4) Vaccine coverage of the population with 92%; 5) Reduction by 2% of mortality due to non-communicable diseases.

A. Objectives set in the field of health and the level of achievement

Objective 1. Harmonization of the national legal framework with the provisions of the Community acquis in the field of public health

- At the date of 30.11.2018 the draft law on the quality of drinking water was adopted by the Parliament in the second reading;
- The draft Government decision on the approval of the sanitary regulation for monitoring the quality of drinking water was not implemented. Drafted project. It was to be submitted for approval, after the publication of the Law on the quality of drinking water in the Official Gazette of the Republic of Moldova;
• Elaboration of the National Program to reduce the diseases caused by the deficiency of iron and folic acid. Implemented. The Government Decision no. 284 of April 4, 2018 “regarding the modification and completion of Government Decision no. 730 of September 8, 2014”;

• Implementation of legislation on tobacco control. Implemented. The report on the implementation of the tobacco legislation was submitted to the Government on 27.04.2018 with no. 04/1065;

• The package of laws regarding the control of alcohol was adopted by Parliament in the second reading on December 23, 2017, but was not promulgated by the President;

• The draft Government Decision on smoke flavorings used or intended for use in / or on food. Implemented. The project was approved by the Government on 19.12.2018;

• Draft Government Decision on flavorings and certain food ingredients with flavoring properties intended for use in/and on food. Implemented. The project was approved by the Government on 19.12.2018;

• Draft Government Decision to establish transitional measures regarding the list of flavors and raw materials. Implemented. The project was approved by the Government on 19.12.2018;

• The draft Government Decision to establish the list of primary products of smoke flavors authorized for use as such in or on foodstuffs and / or for the production of derived smoke flavors. Implemented. The project was approved by the Government on 19.12.2018;

• The draft Government Decision for the approval of the Sanitary Regulation regarding the active and intelligent materials and objects intended to come into contact with food products. Implemented. The Government Decision no. 945 of October 3, 2018 for the approval of the Sanitary Regulation regarding the active and intelligent materials and objects destined to come in contact with the food products;

• The draft Government Decision for the approval of the Health Regulations on foods for infants and young children, foods for special medical purposes and substitutes for a total diet for weight control. Implemented. Approved Government Decision no. 179 of February 27, 2018 “On the approval of health regulations regarding foods intended for infants and young children, foods intended for special medical purposes and substitutes for a total diet for weight control”;

• Draft Government Decision for the approval of the Health Regulation regarding the composition and information of foods intended for special medical purposes. Implemented. Approved Government Decision no. 179 of February 27, 2018 “On the approval of health regulations regarding foods intended for infants and young children, foods intended for special medical purposes and substitutes for a total diet for weight control”;

• Draft Government Decision on the exploitation and commercialization of natural mineral waters. Partially implemented. The draft Government Decision was submitted to the judicial expertise, following the finalization of the divergence table;

• Draft Government Decision on the establishment of the list, concentration limits and labeling requirements for the constituents of natural mineral waters, as well as, the conditions of use of ozone enriched air for natural mineral waters and spring waters. Partially implemented. The draft Government Decision was submitted to the judicial expertise, with the finalization of the divergence table;

• Draft Government Decision on establishing the conditions for the use of activated alumina for the elimination of fluorides from natural mineral waters and spring waters. Partially implemented. The draft Government Decision was submitted to the judicial expertise, with the finalization of the divergence table;

• Elaboration and promotion of the draft Government Decision on the minimum requirements of safety and health at work for the protection of workers in the surface and underground extractive industry (Transposition of Council Directive 92/104/EEC
of 3 December 1992). Implemented. On 02.01.2019 the project was submitted to the Government for examination and approval (writing no. 09/22).

**Objective 2. Ensure the optimization and modification of the regulations of the national legislation according to the requirements recorded in the working group for reducing the regulatory burden in the field of safety and health at work**

29. Elaboration of the draft decision for the modification of the Regulation on the way of organizing the activities of protection of the workers in the workplace and prevention of professional risks, approved by the Government Decision no. 95 of 05.02.2009. Not implemented. The project was sent to the Government for examination on May 29, 2018, scr.09/1304, but by letter of the State Chancellery no. 31-06-5299 from 28.06.2018 the project was submitted again for further examination. On October 3, 2018, the project was presented to the Economic Council with the Prime Minister, who subsequently submitted proposals on its side.

**Objective 3. Modernization of public health**

- Ensuring the functionality of ten regional performance centers of laboratory services. Implemented. According to the Order of MH no. 184 of March 25, 2016 “regarding the modernization and reorganization of the laboratory service of the Surveillance State Service of Public Health”, 10 Centers of regional performance of the laboratory services were established. Currently, the Centers are functional, they are financed from the sources of the state budget;
- Modernization of health services, including the state health service of public health, through its regionalization, improving coordination at local level between all levels of healthcare. Implemented. In the context of the provisions of the GD no. 1090 of 18.12.2017, by the Order no. 932 of August 17, 2018, the Nominal Composition of the Public Health Councils was approved. Thus, the Councils are functional;
- Ensuring effective prophylaxis and control of infectious diseases with social impact, control of non-communicable diseases, occupational diseases, promotion and early education of the healthy way of life through the adoption of new national cross-sectoral programs. Implemented. The indicator is accomplished. The vaccine coverage of the population constitutes 92%.

**B. The component “Healthcare”**

30. In order to achieve the objective, the general product/result indicators were established:

1. Number of Government Decisions approved;
2. Order number of the Ministry of Health, Labor and Social Protection approved;
3. Collaboration agreement signed between MHLSP and TUM;
4. Training process regarding the use of initiated medical devices and the number of trained users;
5. The number of medical devices monitored by the Information System – Management of Medical Devices;
6. Number of incidents involving the reported medical devices;
7. Number of compensated international common names;
8. Number of beneficiaries of compensated drugs.

**Objective 1. Development of the quality management system of medical services**

- Elaboration of indicators for monitoring the activity of youth friendly and mental health centers. Implemented. Approved the joint Order of the MHLSP/National Medical Insurance Company no. 786 / 245A of June 22, 2018 “On the approval of the
performance indicators for piloting the financing based on the performance within the Youth Friendly Health Centers”;

• The revision of the normative framework regarding the issuance of the death certificate. Implemented. The draft order was drafted and submitted for approval on December 27.

Objective 2. Improving the availability and quality of pre-hospital emergency care services

31. The strategic planning and procurement, in accordance with the international recommendations, of the sanitary transport units. Implemented. 69 ambulances were procured. In the third quarter, 52 ambulances were assigned to the substations and urgent medical assistance units in Soroca, Vulcanesti, Molovata (Cosnita), Nenteni, Bobeica and Carpineni (Hincesti), Bardar (Ialoveni), Susleni (Orhei), Lozova (Straseni) Lipcani (Briceni), Pelinia (Drochia), Brinzeni and Cupcini (Edinet), Risipeni and Glingeni (Falesti), Sturzovca (Glodeni), Saptebani (Riscani), Badiceni (Soroca), Gavanoasa (Cahul), Iargara (Leova) Valea Perjii (Taraclia), Baurci, Cazaclia (Ceadir-Lunga), Speia (Anenii Noi), Oniscani, (Calarasi), Caimari (Causeni), Dubasarii-Vechi (Cosnita), Bujor (Hincesti), Olanei (Stefan-Voda), Talmaza (Stefan-Voda), Zubresti (Straseni), Cornesti (Ungheni), Sculeni (Ungheni), Corjuti (Briceni), Larga (Briceni), Cuhuresti (Floresti), Tirgul Vertujeni (Floresti), Zaicani (Alexandreni) (Singerei) and Coscodeni (Singerei) will benefit from improved quality and prompt emergency services, Edinet, Donduseni (Sudarcu), Briceni, Rezina, Rezina (Pripiceni), Soldanesti (Cotuijenii Mari), Orhei (Malaeesti), Orhei (Branesti), Ialoveni, Nisporeni (Grozesti), Cosnita (Cocieri), Causeni. The units of sanitary transport procured correspond to the international standards in the field, and the medical equipment provided allows to provide emergency medical assistance at the highest level.

Objective 3. Modernize primary care for family and community

• Elaboration of the normative framework regarding the individual practice of the family doctor. Implemented. Adopted Law no. 191 of 27.07.2018 for the modification of some legislative acts. Thus, the following normative acts were approved:
  
  • Government Decision no. 988 of October 10, 2018 for the approval of the Rules for the organization of primary health care;
  
  • The Government Decision no. 1020 of October 24, 2018 regarding the approval of the modifications that are operative in some Government Decisions;
  
  On November 7, 2018, the Ministry of Health, Labor and Social Protection initiated the procedure for awarding the practices of family doctors;

• Ensuring the vulnerable population with modern contraception methods. Implemented. 5 National Clinical Protocols have been approved in the field of family planning for family physicians and specialists;

• Eliminating bureaucracy of the activity of family physicians, by implementing the AIS “Primary Health Care”. Implemented. On March 30, 2018, the Agreement on the exchange of data between the Ministry of Health, Labor and Social Protection and the National Insurance Company in Medicine was signed, which aims to exchange data effectively, quickly and securely between the Information System. of family physicians within the MSI providing PHC within the Compulsory Health Insurance System, the Automated Information System “Compulsory Health Insurance”, the Informational System of Reporting and Evidence of Medical Services (DRG Online), the Automated Information System Primary Health Care and the Automated Information System Hospital Healthcare;

In order to adjust the normative framework to the requirements regarding the implementation of the information systems that include the processing of personal data, the Government Decision no. 283 of 04.04.2018 regarding the modification and completion of Government Decision no. 586 of July 24, 2017;
Also, for the purpose of national use of AIS PHC, Order no. 1497 of 14.12.18 “Regarding the use of SIA AMP in the medical service providers in the Republic of Moldova”, Order no. 1498 of 14.12.18 Regarding the approval of the forms of primary medical record, the statistical reports generated by AIS PHC, Order no. 1499 of 14.12.18 Regarding the use of AIS PHC within the Medical Service Providers of the Republic of Moldova. In this context, the Project for the allocation of qualified advanced electronic signatures of AIS PHC users was elaborated and submitted for approval;

• Review of the list of performance indicators in the AMP based on the result. Done. The following were approved: Order MHLSP no. 515 / 130A of April 13, 2018 “On the performance indicators in Primary Health Care”; The Order of the MHLSP no. 516/131A of April 13, 2018 “On the modification of the Order no. 205/94-A of 19.03.2015” On the approval of the forms of primary medical record and the reports in the compulsory health care insurance”; MHLSP Order no. 516 / 132A of April 13, 2018 “On establishing the value of a point for achieving the performance indicators in primary health care for the year 2018”;

• Revision of the Regulation on the mode of alcohol testing and medical examination to establish the state of intoxication and its nature. Implemented. The draft Government Decision “On the modification and completion of the Government Decision no. 296 of April 16, 2009” was elaborated, which is in the process of being finalized on the basis of the recommendations of the State Chancellery;

• Review of the unique compulsory health insurance program. Implemented. By the Government Decision no. 1020 of 24.10.2018, regarding the approval of the changes that are made in some Government Decisions, modifications were made to the unique Program of compulsory health care insurance;

• Development of community mental health services. Implemented. According to Provision of May 11, 2018 the activity of the Community Mental Health Centers (CMHC) was evaluated in 8 districts (4 pilot and 4 non-pilot districts). The data obtained during the evaluation of the CMHC were analyzed, elaborated recommendations for the CMHC and the PHC, in order to improve the service provision 41 Community Mental Health Centers are active in the Republic of Moldova, with 243 thousand people annually benefiting from their services;

• Elaboration of the National Communication Strategy for Social Change and Behavior in Adolescent Health. Implemented. By the Provision no. 48-d of February 9, 2018, the Coordination Group in Communication in the field of Adolescent Health was established, to facilitate the elaboration and implementation of the Communication Strategy. The draft National Communication Strategy for Social Change and Behavior in Adolescent Health was developed;

• Organization of the International Conference on adolescent health. Implemented. Between October 3-5, 2018, were organized: The 21st European Conference IAAH 2018; The Third National Conference on adolescent health “Equal opportunities for healthy development for all adolescents” (MHLSP Order no. 1102 of 02.10.2018).

Objective 4. Elaboration and promotion of policies and normative framework in the field of medical and social personnel management, medical and pharmaceutical education and science

• Elaboration and approval of the modifications and completions to the Government Decision no. 884 of December 28, 2015 “For the approval of the Regulation regarding the organization of residency studies”. Implemented. Approved the Government Decision No. 1162 of 28.11.2018 on the modification of the Government Decision no. 884/2015 for the approval of the Regulation regarding the organization of residency studies;

• Elaboration and approval of the modifications of the Statutes of the Medical Colleges, according to the provisions of the new Education Code. Implemented. The Order of the MHLSP no. 780 of June 21, 2018 regarding the change of the status of the Balti Medical College, the Order of the MHLSP no. 664 of May 28, 2018 regarding the
change of the status of the Orhei Medical College, the Order of the MHLSP no. 564 of May 4, 2018 regarding the change of the status of the College was approved of Cahul Medicine;


- Organizing the distribution and placement in the field of work of graduates of residency studies, the promotion of the year 2018. Implemented. Approved the MHLSP Order no. 94 of October 19, 2018 “regarding the distribution of the residents enrolled in the first year of studies 2018–2019”. Approved the Order of the MHLSP no. 1411 of December 4, 2018 “regarding the distribution for placement in the field of work of USMF graduates “Nicolae Testemitanu”, in the surgical, therapeutic and dental specialties, the promotion of 2018;

- Elaboration and approval of the amendments and completions to the Order of the MHLSP regarding the Commissions for the certification of doctors and medical workers with secondary education. Implemented. Approved the MHLSP Order No. 386 of March 7, 2018 “On the certification of physicians and pharmacists” and the MHLSP Order No. 394 of March 13, 2018 “On the certification of medical and pharmaceutical personnel with specialized secondary education”;

- Organizing the certification of doctors, pharmacists and medical personnel with high education. Done. 32 MHLSP orders regarding the certification of medical workers were elaborated and approved;

- Expertise and approval of the Program for the continuous professional training of doctors, pharmacists and medical and pharmaceutical personnel with average education for 2019. Implemented. On September 14, the Ministry’s management approved the Program for the continuous professional training of medical and pharmaceutical personnel with average education for 2019.

Objective 5. Evaluation and monitoring of the implementation of policies in the field of medical and social personnel management, medical and pharmaceutical education and science

32. Elaboration of the report on the implementation of the Strategy for the development of human resources in the health system for the years 2016–2025. Implemented. On March 3, 2018, the information on the implementation of the Action Plan regarding the implementation of the Strategy mentioned above was presented to the Government (letter of the MHLSP no. 05 / 509).

C. The objective of “Hospital Reform” – 2018

- Creation of Balti Regional Hospital. Presentation of the Feasibility Study to the Ministry of Finance for financing approval. Ongoing;

- Reducing the waiting list for cataract intervention. Implemented. By the Order of the MHLSP no. 710 of June 7, 2018 “On the way of organizing the treatment within the Special Programs”, the Regulation on the way of organizing the treatment within the Special Programs was approved. including cataract patients. During 2018, 3973 patients benefited from surgical treatment of cataract (compared to 2017 – 3707 patients);

- Reducing the waiting list for the stent intervention. Implemented. In order to reduce the waiting list of patients for endoprosthesis of the hip and the knee, the Regulation on the way of organizing the treatment in the Special Programs was approved, by the
Order of the MHLSP no. 710 of June 7, 2018 “Regarding the way of organizing the treatment within the Special Programs”. Waiting lists of patients requiring prosthesis of large joints have been revised;

During the year 2018 by the specialists of the Institute of Urgent Medicine, the Clinical Hospital of Traumatology and Orthopedics, the Municipal Clinical Hospital Balti and 9 rayon Hospitals: Cahul, Causeni, Comrat, Edinet, Hincesti, Floresti, Orhei, Soroca and Ungheni, by the doctors-trained traumatologists in the field of hip/knee arthroplasty, including abroad (Romania and Turkey), totaled 1246 prostheses of large joints (a. 2017 – 1021), thus ensuring decentralization and accessibility of specialized medical services as close to patients;

• Make the oncology services more efficient. Implemented. By the MHLSP Order no. 620 of May 18, 2018 “On the distribution of breast exoprostheses”, the algorithm for distributing breast exoprostheses to patients with mammary gland cancer was approved after mastectomies, included in the waiting list for the year 2018. As well, it was approved the distribution Plan, by the oncology specialists in the administrative territories of the mammary exoprosthesis, for the patients included in the waiting list, thus ensuring their exoprosthesis at the place of life. Thus, during the year 2018, 1563 exoprostheses were distributed to 1538 women (25 patients received two prostheses due to bilateral mastectomy). During the campaign “A doctor for you!” The mammography screening of the female population was carried out in over 8 administrative territories (4083 mammograms performed / 344 pathologies detected);

• Approval of the National Program in Health and Sexual and Reproductive Rights 2018–2022. Implemented. The Government Decision no. 681 of July 11, 2018 “For the approval of the National Program in sexual and reproductive health and rights for the years 2018–2022”;

• Increased population access to in vitro fertilization services. Implemented. In order to increase the accessibility of the population to medical assisted human reproduction services (“In vitro fertilization”), services included in the unique Program of compulsory health insurance, in 2018 the number of scheduled cases has increased, compared to the previous year, from 30 to 60. By the Commission for the evaluation of the insured couple, 60 were found to correspond to the requirements of the documents in force and the couples were issued the evaluation sheets with the respective selection of specialized clinics;

• Elaboration and approval of the Model of organization of the Early intervention service for children in the health system, according to the specific and the level of the public medical institutions. Implemented. With the support of the Moldovan Branch of the “Lumos Foundation” Organization in the United Kingdom, the creation and development of early intervention services in 2 pilot regions was initiated: Ialoveni and Floresti: Collaboration Contracts were signed with the rayon councils and the district hospitals in Ialoveni and Floresti “On the creation and ensuring the functionality of the Early Intervention Center for Children within the Public Medical-Sanitary Institution “district Hospital”. In cooperation with the management of the PMSI District Hospitals from Ialoveni and Floresti, the spaces necessary to initiate the process of setting up the Early Intervention Centers were identified. The model for the organization of the Early Intervention Service for Children in the health system was developed and approved, according to the specific and the level of the public medical institutions, which includes: Regulations of activity; Staffing States; Job descriptions of Early Intervention for Children Service specialists, etc;

• Implementation of the approved Model of the Early Intervention Service for Children. Partially implemented. The model of the Early Intervention Service for children approved, being implemented, with the support of the Branch of the Republic of Moldova of the “Lumos Foundation” Organization in the United Kingdom, in 2 pilot districts: Ialoveni and Floresti. By the implementers were signed Collaboration Contracts with the Rayonal Councils and the rayon Hospitals in Ialoveni and Floresti “On the creation and ensuring the functionality of the Center for early intervention in children within the Public Medical-Sanitary Institution “District Hospital”. Together
with the management of the PMSI Hospitals Ialoveni and Florești hospitals, the necessary spaces for the Early Intervention Service were identified, which were redesigned and adapted to the needs of the Service;

• Training of interdisciplinary teams for the provision of early intervention services for children. Implemented. In accordance with the provisions of the MHLSP Provision no. 55-d of January 11, 2018, the training schedule for the year 2018 was established for the teams from 11 districts. Thus, during the year 2018, with the support of the specialists of the Early Intervention Center “Voinicel”, over 110 specialists (pediatric doctors, pediatric neurologists, rehabilitologists, family doctors, speech therapists, psychologists, nurses, etc.) were prepared and approved, at all levels, the Curriculum for university and postgraduate training of specialists in Early Childhood Intervention. The Course Support in Early Childhood Intervention is developed. With the completion of the training of medical personnel throughout the country, the approved Model of the Early Intervention Service for Children will be approved and implemented at national level;

• Establishment of the University Hospital. Not implemented, during the reporting period.

Objective 8. Adjusting the national regulatory framework in the field of medicines to EU standards and WHO recommendations

<table>
<thead>
<tr>
<th>Transposition into national legislation of the provisions of EU Directives and Regulations on medicinal products for human use, through the elaboration and approval – of the new draft law on medicine.</th>
<th>Partially implemented. The project was positively endorsed at the meeting of the Working Group on Regulation of Entrepreneurial Activity from 26.09.2018. At the same time, the project was endorsed by the National Anticorruption Center and the Ministry of Justice. It is to be submitted to the Government for approval.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elaboration of the draft Government Decision for the implementation of the provisions of the new legislative act Law of the medicine through the corresponding normative acts set by the law.</td>
<td>Not implemented. The corresponding normative acts stipulated in the law (which are also provided by Law 1409/1997 on medicines) are approved and are in force, including the Regulation on the ethical promotion of medicines, which was approved by Government Decision no. 944 of 03.10.2018.</td>
</tr>
<tr>
<td>Elaboration of the draft Government Decision on the transparency of the measures that regulate the setting of prices of medicines for human use.</td>
<td>Implemented. Approved the Government Decision no. 748 of July 25, 2018 “On the modification of the Government Decision no. 525 of June 22, 2010 for the approval of the Regulation regarding the approval and registration of producer prices for medicines”.</td>
</tr>
<tr>
<td>Elaboration and approval of the draft order regarding the transfer of the authorizations placed on the market of medicines for human use.</td>
<td>Not implemented. The procedure for issuing the authorizations placed on the market of medicinal products for human use is the responsibility of the Medicine And Medical Devices Agency, according to GD 1005 of November 21, 2017 amending and supplementing GD no. 71 of 23.01.2013 regarding the approval of the Regulation, structure and limitation of the Agency for Medicines and Medical Devices. At the same time, the provisions of Regulation no. 2141/96 / EC are transposed into the draft Law on medicines.</td>
</tr>
</tbody>
</table>
Approval of the draft Government Decision on the Regulation of ethical promotion of medicines.

**Implemented.** The Government Decision no. 994 of October 3 for the approval of the Regulation on the ethical promotion of medicines.

**Objective 9. Increase the population’s access to compensated medicines from the Compulsory Health Insurance Funds**

33. Review of the list of compensated drugs. Implemented. The provisions of MHLSP no. 323/A of July 3, 2018 “On the revision of the regulatory framework regarding compensated medicines”. During the year 2018, 11 new ICDs were included in the list of compensated drugs.

**Objective 10. Adjustment of the national regulatory framework in the field of medical devices to EU standards and WHO recommendations**

| Promotion of the draft Government Decision for the approval of the draft law on the modification of the Law no. 102 of June 9, 2017 on medical devices. | **Implemented.** The Government Decision no. 845 of August 20, 2018 “On the approval of the draft Law for amending Law no. 102/2017 on medical devices”. The draft law for amending Law no. 102/2017 on medical devices (under examination by parliamentary committees) (in 2018 it was examined by 6 committees). |

| Promotion of the draft Government Decision for the approval of the Regulation regarding the conditions for placing medical devices on the market. | **Implemented.** Approved Government Decision no. 702 of July 11, 2018 “On the conditions for placing medical devices on the market”.

| Promotion of the draft Government Decision for the approval of the Regulation regarding the conditions for placing active implantable medical devices on the market. | **Implemented.** Approved Government Decision no. 704 of July 11, 2018 “On the conditions of placing active implantable medical devices on the market”.

| Promotion of the draft Government Decision for the approval of the Regulation regarding the conditions for placing medical devices for in vitro diagnosis on the market. | **Implemented.** The Government Decision no. 703 of July 11, 2018 “On the conditions of placing medical devices for in vitro diagnostics on the market”. |
**Objective 11.** To make the management system of medical devices more efficient and to strengthen the capacities in the field of medical device management of medical and technical personnel within the medical-sanitary institutions, in order to use the cost-efficient, qualitative, safe and maximum potential devices provided by the manufacturer

<table>
<thead>
<tr>
<th>Activity</th>
<th>Implementation Details</th>
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<tbody>
<tr>
<td>Promotion of the draft Government Decision for the approval of the Medical Device Management Program for the years 2018–2022</td>
<td>Implemented. The project was included in the Development Strategy “Moldova 2030”.</td>
</tr>
<tr>
<td>Approval of the draft of the Order regarding the specific procedures for periodic verification of the medical devices put into operation and in use.</td>
<td><strong>Implemented.</strong> Approved the MHLSP Order no. 30 of January 12, 2018 “On specific procedures for periodic verification”.</td>
</tr>
<tr>
<td>Approval of the draft of the Order regarding the surveillance system of medical devices.</td>
<td><strong>Implemented.</strong> Approved the MHLSP Order no. 211 of March 21, 2018 “On the surveillance system of medical devices”.</td>
</tr>
<tr>
<td>Elaboration and promotion of the draft Order on the procedure for registration of medical devices that do not have the CE marking.</td>
<td><strong>Implemented.</strong> The Order of the MHLSP no. 212 of March 21, 2018 “On the procedure of registration of medical devices that do not have the CE mark”.</td>
</tr>
<tr>
<td>Elaboration and approval of the draft of the Order for the approval of the Guide for setting up biomedical engineering structures within medical institutions.</td>
<td><strong>Implemented.</strong> The Order of the MHLSP no. 92 of January 25, 2018 “For the approval of the Guide for establishing biomedical engineering structures in medical institutions”.</td>
</tr>
<tr>
<td>Establishing the collaboration between the Ministry of Health, Labor and Social Protection and the Technical University of Moldova.</td>
<td><strong>Implemented.</strong> On February 2, 2018, the Collaboration Agreement between the Ministry of Health, Labor and Social Protection and the Technical University of Moldova was signed.</td>
</tr>
<tr>
<td>Elaboration and approval of the draft Order on how to train users of medical devices.</td>
<td><strong>Implemented.</strong> The joint Order between the MHLSP and the MECR no. 920 1165 from 27.07.2018 “On the training of users of medical devices”.</td>
</tr>
</tbody>
</table>
The objective – Elaboration and promotion of the legislative and normative framework in the field of financing the compulsory health insurance system

<table>
<thead>
<tr>
<th>Objective</th>
<th>Implementation Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Excluding the obligation to hold the insurance policy on paper</td>
<td>Implemented. By the Law no. 175/2018 (published in the Official Gazette no. 398-399 / 620 of 19.10.2018), modifications were made to the Law no. 1585/1998, by which the policy on paper support was canceled.</td>
</tr>
<tr>
<td>Develop and promote the contracting criteria for 2019</td>
<td>Implemented. The joint Order of the MHLSP and CNAM no. 1592/594-A of 28.12.2018 regarding the approval of the Criteria for contracting the medical service providers within the system of compulsory health care insurance for 2019 has been elaborated and approved.</td>
</tr>
<tr>
<td>Improving the mechanisms for payment of contributions to the compulsory health insurance fund and eliminating inequalities in determining their size by re-evaluating income as a basis for calculation.</td>
<td>Implemented. The following law documents were adopted: Law no. 145 of 14.07 2017 for amending and supplementing certain legislative acts; Law no. 118 of 05.07.2018 for amending and completing some legislative acts; Law no. 178 of 26.07.2018 on the modification and completion of some legislative acts; Law no. 175 of 27.09.2018 for the modification and completion of some legislative acts.</td>
</tr>
<tr>
<td>Stimulating investments in the modernization of medical technologies, including from resources formed by institutions for it, but also increasing the percentage of the financial contribution of the founders of public medical-sanitary institutions.</td>
<td>Implemented. In 2018 (9 months): 48 PMSI used 110,6 million lei, including 7 PMSI with the amount of 7,3 million lei from the founder’s account.</td>
</tr>
</tbody>
</table>

34. In the same context, regarding the objective “Planning social and medical insurance”, in order to achieve universal coverage with medical services of the population of the Republic of Moldova, through the system of compulsory health insurance, the following measures were taken:

- According to the provisions of the Law no. 1585/1998 regarding the compulsory insurance of medical assistance, as well as of the Government Decision no. 1387 / 2007 “On the approval of the Unique Program of compulsory medical assistance insurance”, in the case of the uninsured persons, the expenses for pre-hospital emergency medical care, for primary health care, as well as for specialized outpatient and hospital care, in the case of socially-conditioned illnesses with major impact on public health, they are covered by means of compulsory health insurance funds;

In the case of socially-conditioned illnesses with major impact on public health, uninsured persons benefit from free in-patient investigations, consultations and treatment, including post-therapeutic supervision of specialized medical professionals, according to competence, and family doctors for the treatment of the following diseases: tuberculosis, psychoses and other mental and behavioral disorders, alcoholism and drug abuse, confirmed oncological and hematological malignancies, HIV/AIDS and syphilis, acute viral hepatitis A, botulism, meningitis and meningoencephalitis, viral, bacterial and parasitic, pandemic influenza, varicella, varicella leptospirosis, malaria, typhoid and paratyphoid fever, exanthematic typhus, cholera, tetanus, anthrax, brucellosis, hemorrhagic fever, Q fever, epidemic parotiditis, rabies, trichinellosis, plague, hysteresis, tularemia, diphtheria, poliomyelitis, rubella;

- The compulsory insurance premium for medical assistance calculated in a fixed amount is maintained in the amount of 4056 lei over six years (2014–2019) for the categories of payers, who have the obligation to insure individually;
• Annually, the categories of payers, who have the obligation to insure individually benefit from a reduction from the compulsory health insurance premium calculated in a fixed amount:
  • 75% reduction for owners of agricultural land,
  • 60% discount for natural persons, who carry out independent activities in the field of retail trade,
  • 50% discount for other citizens of the Republic of Moldova, who are not employed and are not insured by the Government.

D. Objective: Mother and Child Health

35. In the last years in the republic, a series of measures have been taken aimed at improving the health of the mother and child, including by developing the legal and normative framework in the field.

36. A number of important interventions have been initiated and implemented, to improve the healthcare provided to women of reproductive age, pregnant women and children, in order to achieve the UN global initiative under the 2015–2030 Sustainable Development Goals.

37. The target objectives are:
   • Reduce the maternal mortality rate to less than 13.3 cases per 100,000 alive newborns;
   • Reduction of neonatal mortality to 6 deaths per 1,000 alive newborns;
   • Reduce the mortality of children up to 5 years old to 10 deaths per 1,000 alive newborns.

38. The Ministry of Health, Labor and Social Protection is currently developing the chapter “Mother and child health” in the Strategy for developing the health system 2020–2030, which aims to improve the health of women, children and teenagers, through access to quality preventive, emergency, curative and rehabilitation services, provided the efficient use of available resources and the promotion of high standards, as well as, good practices.

39. Maternal mortality is an integrated indicator, which characterizes both the existing health system and the level of development of the entire country.

40. In order to continuously improve the quality of monitoring the health status of pregnant women, in order to reduce the risk of maternal deaths, including direct obstetric causes, a series of measures have been taken:
   • Pregnant women are included in the category of persons insured by the state and benefit from the full spectrum of medical services provided in the unique Program of compulsory health insurance, including folic acid insurance and iron preparations, compensated;
   • The Guide on nutrition in the pre-conception period, pregnancy and lactation was approved (Order of the Ministry of Health, Labor and Social Protection no. 749 of 15.06.2018);
   • The new Standards for the supervision of pregnant women under outpatient conditions, as well as the Perinatal Medical Card, are being finalized;
   • The activity of the Perinatal Centers of level I, II is being evaluated, in order to optimize their activity.

41. In order to reduce child mortality, the following interventions have been carried out:
   • Children are included in the category of persons insured by the state and benefit from the full spectrum of medical services provided in the Unique Program of compulsory health insurance;
• Children are insured with fully compensated medicines, for the most frequent illnesses, up to the age of 18, from the means of the compulsory health insurance funds;

• Are supervised according to the new Standards for the supervision of children under ambulatory conditions and the Child Development Card (Order no. 964 of September 2, 2019).

42. In order to prevent disabilities in children, as well as, to prevent the institutionalization of children with disabilities, through the Government Decision no. 816 of June 30, 2016 were approved:

• The framework regulation on the organization and functioning of the Early Intervention Services, which establishes the financing framework for these services, which allows the organization and provision of early intervention services in each administrative territory, ensuring the access of any child to these services, close to the family;

• Minimum quality standards for Early Intervention Services.

43. At the same time, the Regulation on the organization and functioning of the Early Childhood Intervention Center (Order of the Ministry of Health, Labor and Social Protection, no. 1535 of 27.12.2018 “On the organization and functioning of the Early Childhood Intervention Center” was approved).

44. At the country level, the Early Intervention Services for Children are being implemented. The initial training of the teams of specialists from the administrative territories is carried out, the completion of which is expected by 2021.

45. In order to prevent and reduce the rate of maternal, infant and child mortality up to 5 years at home, through the Government Decision no. The Inter-sectoral Cooperation Mechanism for the identification, evaluation, referral, assistance and monitoring of child victims and potential victims of violence, neglect, exploitation and trafficking has been established.

46. In accordance with the provisions of Government Decision no. 1182 of 22.12.2010, children from disadvantaged families are provided with milk mixtures adapted from the local public administration funds.

47. New alternative services to institutionalization are developed within the Placement and Rehabilitation Centers for children, to meet the medical and social needs of families with children with disabilities and to prevent them from being placed in residential institutions (“Respiro” Service, “Day Department for children with disabilities”, “Surveillance, care, rehabilitation of children with low and very low birth weight”, “Day section for children under 3 years of age with special needs”, “Maternal section”, etc.).

48. There are 3 Rehabilitation Centers for children, including the Republican Center for Rehabilitation for Children, in which children with neuromotor disorders aged 0–18 are treated. The Rehabilitation Center for Children “Sergheevca” and the Recovery Center for Children “Ceadir-Lunga” are intended for children between the ages of 2–15 years, with respiratory, neuromotor, cardiorheumatic and gastrointestinal disorders. In all these centers, over 8000 children are treated annually.

49. In the Republic, immunization of children is recognized as a priority in public health, in order to prevent cases of deaths among children, caused by the airway infections. The health system carries out intense activities to expand the vaccination coverage of the entire population of children, according to the National Immunization Program, approved by the Government Decision no. 1113 of 06.10.2016. New vaccines, with proven efficacy in preventing pneumonia and cervical cancer, are being actively introduced. Since 2013, the Republic of Moldova has introduced the mandatory vaccination of children in the first year of life against pneumococcal infection, and in the years 2017–2018, within the Global Alliance for Vaccines and Immunization Demonstration (GAVI) Campaigns have been carried out to vaccinate girls with the human papillomavirus (HPV) vaccine.
E. **Objective To promote the “Health Code”**

Not implemented

50. Currently, the draft Health Code is under review, following the reform of the central public administration specialized during 2017–2019, as well as, based on the previously received opinions, so that the project will be approved and expertized repeatedly, through the change of structure within the national health system, as well as, the medicine component, approved and expertized repeatedly, by the concerned authorities. The project will be readjusted including the provisions of the recommendations of the Committee, mentioned in point 56.

F. **International participation**

51. In the context of the accession of the Republic of Moldova to the Cairo Declaration, in 1994, during the International Conference on Population and Development, our country has undertaken a series of commitments, implicitly the obligation to achieve the objectives of the Action Program of the International Conference on Population and Development (ICPD) from Cairo, established worldwide, to ensure respect for fundamental human rights, reduce poverty, strengthen the capacities of state institutions for universal access to information and services in the field of reproductive health and other quality public services, contributing implicitly in the development of the family and human capital.

52. The Cairo conference was a revolutionary one for rights and sexual and reproductive health, including women’s rights and gender equality, as it emphasized the free choice of each person to plan their family and life. The event then brought together delegates from 179 countries, including from the Republic of Moldova.

53. During the implementation of the Program of Actions of the International Conference for Population and Development, in the Republic of Moldova important progress was made in the field of sexual and reproductive health: the maternal and infant mortality rate was reduced, the national network of reproductive health services was created and family planning and the network of youth-friendly health services, which has helped to reduce the rate of abortions, sexually transmitted infections, prevent unwanted pregnancies and abortions, including among adolescents, etc.

54. At the same time, it is important to mention that the rate of use of modern contraception methods remains at a lower level than the average for the countries of Eastern Europe, the unmet need for contraception constitutes ten percent. In this context, in 2019, from the State Budget, within the National Program of health and sexual and reproductive rights for the years 2018–2022, modern contraceptives have been procured for vulnerable groups with special needs, including persons with disabilities, who they are distributed free of charge in primary health care institutions.

55. During the recent years, significant efforts have been made to prevent and control HIV infection and sexually transmitted infections, with a significant increase in the budget for prevention and control activities. Due to this fact, during the last decade there has been a positive dynamics in the reduction of sexually transmitted infections, including HIV, it is also important to mention that the incidence of HIV infection remains higher compared to other states in the region, being concentrated in the groups, with increased risk of infection. Most HIV positive people are young people, of reproductive age.

56. Significant progress has also been made in combating cervical and breast cancer by implementing several special programs. Although over the past 15 years, there has been an increase in the morbidity of the population through malignancies, including the mammary gland and genital organs, which is largely explained by the better diagnosis of the diseases.

57. The intensification of the process of declining birth has mobilized the authorities to undertake changes in social policy in relation to motherhood and childhood, as well as, to promote family-friendly policies. One of the important steps in promoting the participation of fathers in raising and educating children is the introduction of 14 calendar days parental leave (2016); child care leave was reduced to four years, of which 3 years-paid leave (2017);
In order to maintain an adequate material level of families with children and to create favorable conditions for the reintegration of women into the labor market, the payment of a monthly childcare allowance does not stop if the mother or father returns to work (2019).

58. In this context, the Ministry of Health, Labor and Social Protection intends to update social and health policies, to extend services for young people and families, to prevent behaviors at risk to health, to increase equitable access to quality reproductive health services and family planning, based on human rights, supporting the course of the Republic of Moldova to implement demographic policies and family-friendly policies, centered on people, for the continuous increase of the demographic indices and the well-being of the population, in accordance with the National Development Strategy “Moldova 2030” and the National Strategic Program in the field of security statistics for the period 2011–2025.

G. Development objectives in the field of health care (2019–2020)

- Consultation and approval of the Law on compulsory health insurance funds for 2020;
- Approval of the necessary normative framework for contracting medical service providers within the system of compulsory health care insurance for 2020;
- Undertaking the necessary measures to amend the normative framework in order to increase the salaries of the employees from the public medical-sanitary institutions included in the compulsory health care insurance system;
- Restoring social programs (previously canceled), including the program “A doctor for you”, etc.

H. In the chapter “Reporting” in the health system (Reporting period 19.10.2017–2018)

59. The reporting exercise is carried out by the medical institutions, which present the periodic reports of the MHLSP and in the system of the National Bureau of Statistics.

60. Accordingly:

1. By the Order of the MHLSP No. 1427 of “05” December 2018 “On the preparation and presentation of the annual medical statistical reports by the medical-sanitary institutions for the year 2018”, in order to evaluate the annual balance of the activity of the medical-sanitary institutions, to elaborate the statistical reports, the activity indicators of the medical institutions and population health indicators, pursuant to the Law on official statistics No. 93 of May 26, 2017, Government Decision of the Republic of Moldova No. 1039 of December 3, 2017 “On the approval of the Statistical Works Program for the year 2018” And the Regulation on the organization and functioning of the Ministry of Health, Labor and Social Protection, approved by Government Decision No. 694 of August 30, 2017, were approved:

   - The methodical instructions for the elaboration of the annual medical statistical reports;
   - The submission schedule of the annual medical statistical reports by the medical-sanitary institutions for the year 2018;
   - The submission schedule of the statistical report, regarding the states of functions and the cadres of the medical-sanitary institution (form no. 17-health) by the medical-sanitary institutions for 2018;
   - The submission schedule of the statistical report, regarding the list of positions and personnel of the medical-sanitary institution (form no. 17-health.) And on the states of functions of the primary health care institutions at the end of the management year (form no. 17a-health.) by the public medical-sanitary institutions in the municipality of Chisinau in 2018;
   - List of medical-sanitary institutions and statistical reports, submitted for 2018;
• The list of the republican medical-sanitary institutions responsible for receiving the statistical reports for 2018;

• The order and the deadlines for presenting to the National Agency for Public Health (ANSP) the centralizers of the medical statistical reports for 2018 and the indicators for the “Statistical Yearbook of the health system in Moldova”;

• The code of the district/municipality and the number of copies of the centralizers of the statistical reports for 2018;

2. The heads of the General Directorate of Social Assistance and Health of the Chisinau Municipal Council, of the Health and Social Protection Directorate of UTA Gagauzia, of the Health Service of the City Hall of Balti, of the republican/municipal/rayon public-sanitary institutions, of the National Agency for Public Health, National Center on Emergency pre-hospital Medical Assistance, Legal Center, trained to provide:

• The preparation and presentation of the medical statistical reports for the year 2018 according to the methodical instructions for drawing up the annual medical statistical reports, approved by the order of the Ministry of Health, Labor and Social Protection no. 1269 of November 6, 2018;

• The managers of the Health Centers at the district level had the mission to:
  • Nominate by order the person responsible for the elaboration of the annual statistical reports for the institutions in the territory, including establishing the terms for the collection and verification of the reports prepared by the autonomous Health Centers and the private medical-sanitary institutions in the territory, which provide primary health care;
  • Ensures the collection of the annual statistical reports from the autonomous Health Centers and the private medical-sanitary institutions, which provide primary health care, within the terms established by the Health Center at the district level, according to the graph of the annual medical statistical reports presented by the medical-sanitary institutions for the year 2018;
  • To ensure the thorough control of the correctness of the preparation of the annual statistical reports presented by the autonomous Health Centers and the private medical-sanitary institutions, which provide primary health care, with the common liquidation of the reporting errors;
  • Together with the heads of the autonomous Health Centers and the private medical-sanitary institution in the territory, who provide primary health care, organize and ensure the presentation to the National Agency for Public Health, the annual statistical reports, separately for each medical-sanitary institution in the territory;
  • To inform the Ministry of Health, Labor and Social Protection (Directorate of policies in the field of primary, urgent and community health care) about cases of delay in presenting the annual statistical reports by the rural autonomous Health Centers, the measures taken to overcome the problems.

3. The heads of the General Directorate of Social Assistance and Health of the Chisinau Municipal Council, of the Health and Social Protection Directorate of ATU Gagauzia, of the Health Service of the City Hall of Balti, of the republican/municipal/district public health-medical institutions, of the National Agency for Public Health statistical reports from all private medical institutions, according to the form. “Statistical report regarding the activity of the private economic agent in the provision of medical services” on paper and in electronic format and to present them to ANSP, according to the graph of the presentation of the annual medical statistical reports by the medical-sanitary institutions for 2018;

4. The managers of the ME district Dental Centers, rayon hospitals, which provides dental services, organize the reception of statistical reports from all the private medical institutions, which provide dental medical assistance and ensure the
thorough control of the correctness of the preparation of the annual statistical report, according to the form. “Statistical report on the agent’s activity private economy in the provision of medical services” on paper and in electronic format and submit it to ANSP, according to the graph of the presentation of the annual medical statistical reports by the medical-sanitary institutions for 2018;

5. The heads of the General Directorate of Social Assistance and Health of the Chisinau Municipal Council, of the Health and Social Protection Directorate of ATU Gagauzia, of the Health Service of the City Hall of Balti, Health Centers at district level to organize the receipt of the statistical reports according to the form no. 10 “Statistical report on the activity of the medical service near companies and institutions” from all the medical points besides the companies and institutions, which have medical services and the statistical reports according to the form “Statistical report on the medical assistance granted to children in the homes of children and schools – hospitalized”, who have medical services, on paper and in electronic format, and to present to ANSP, according to the chart of the presentation of the annual medical statistical reports by the medical-sanitary institutions for the year 2018;

6. The heads of the General Directorate of Social Assistance and Health of the Chisinau Municipal Council, of the Health and Social Protection Directorate of ATU Gagauzia, of the Health Service of the Balti City Hall, Health Centers at district level, the territorial subdivisions of the National Agency for National Public Health Agency, rayon hospitals, which has in its composition the dental service to inform private medical institutions, companies and institutions, which have medical points and provide medical assistance to employees, children’s homes and boarding schools, in which children receive medical care in the territory of serving the medical-sanitary institution, about accessing the statistical reports forms (the list of these institutions and the statistical forms are placed on the WEB page http://www.ansp.md “Management da compartment” you in health / Statistical reports 2018”);

7. The leaders of private medical institutions, companies and institutions, which have medical points and provide medical assistance to employees, children’s homes and boarding schools, in which children receive medical assistance, to access the report forms on the website (WEB page ) http://www.ansp.md compartment “Health data management / Statistical reports 2018”;

8. The leaders of the public medical-sanitary institutions in the municipality of Chisinau to present the statistical report on the function states and cadres of the medical health institution and on the function states of the primary health care institutions at the end of the management year on paper (forms) and electronic version;

9. The directors of:

• The spa resorts (sanatoriums) submit the statistical reports to the National Agency for Public Health on January 28, 2019;

• Rehabilitation centers for children and phthisiopneumological rehabilitation for children – to present statistical reports. within the National Agency for Public Health on January 29, 2019;

10. The heads of the medical-sanitary institutions from other Ministries and private hospitals will draw up statistical reports on the activity of its institutions;

11. The leaders of the republican medical-sanitary institutions:

• To delegate from January 10 to February 5, 2019 in ANSP (3 Cosmescu Street) during the period of presenting the statistical reports, the persons responsible for receiving the corresponding chapters of the medical statistical reports;

• To ensure the presentation of centralized statistical reports and tables with activity indicators for the year 2018 in the National Agency for Public Health;

• The National Agency for Public Health shall perform the following:

• Organize the preparation and presentation of the statistical reports of the branch in the field of public health, according to the methodical instructions
for the elaboration of the annual medical statistical reports in all the territorial subdivisions.

- Elaborate the graph of the presentation of the annual medical statistical reports of the branch in the field of Public Health of all the territorial subdivisions.

- Ensure the placement on the website (WEB page) http://www.ansp.md compartment “Health data management/Statistical reports 2018” of the models of the statistical reports forms in electronic version until December 6, 2018.

- It ensures the thorough control of the medical statistical reports of the medical-sanitary institutions with the liquidation of the errors during the reporting period.

- Inform the leaders of the medical-sanitary institutions in the case of the non-qualitative preparation of the medical statistical reports.

- Presented the centralized information of the statistical reports in the National Bureau of Statistics of the Republic of Moldova within the deadlines set by the NBS.

- Ensure, by June 28, 2019, the placement on the website (WEB page) of the Ministry of Health, Labor and Social Protection and of the National Agency for Public Health, the electronic version of “Statistical Yearbook of the Health System of Moldova for 2018”.

I. Implement recommendations of point 61, Concluding remarks, the right to health in the field of tobacco control, especially for combating excessive tobacco consumption among women from the Roma community

61. In the Republic of Moldova the studies regarding the consumption of tobacco products/prevalence of smoking were carried out among the general population without specifying the ethnic groups, including the Roma community in the country. The Republic of Moldova pays major attention to the full implementation of measures to prevent and reduce the consumption of tobacco products and exposure to tobacco smoke focused on the general population, including all ethnic groups, through the implementation of concrete measures, including in the context of implementing the recommendations of the Convention-framework for WHO Tobacco Control, to which the Republic of Moldova acceded in 2009, the alignment with the EU legislation, by implementing the provision 2014/40 / EU of the European Parliament and of the Council of April 3, 2014, regarding the approximation of the acts with power of law and administrative acts of the Member States regarding the manufacture, presentation and sale of tobacco products and related products.

62. In 2015, the Parliament approved the modifications and completions made in the legislative acts in the field of tobacco control: Law No. 278 of 14.12.2007 on tobacco control, in line with the obligations of the Republic of Moldova to the ACTC, to the contraventional Code of the Republic of Moldova, the Law on State Supervision of public health, based on the changes made to the Law on tobacco control.

63. As a result, as of January 1, 2016, any form, direct or indirect, of advertising in favor of tobacco products and related products, the promotion of tobacco products, including by sponsoring or otherwise supporting public or commercial actions or initiatives, is completely prohibited, and as of May 31, 2016, the ban on smoking bans is applied in all public places, including public eating objectives.

64. From September 19, 2017, the provisions of 3 Sanitary Regulations regarding the ingredients of tobacco products are implemented: reporting on tobacco products and related products and on the marketing of tobacco products and related products, approved by Government Decision no. 1065 of September 19, 2016, in force from September 20, 2017 (Official Gazette no. 314 / 1143 of September 20, 2016), and from January 1, 2018, the
provisions of the Health Regulations on health warnings and labeling of tobacco products, tobacco intended for rolling in cigarettes and related products and the Electronic Library of health warnings for placement on the unit packaging and the outer packaging of the products tobacco, tobacco intended for rolling in cigarettes and related products, approved by Government Decision no. 613 from 01.08.2017 and concrete measures are being implemented to apply their provisions.

65. The fulfillment of the provisions of the mentioned Sanitary Regulations ensures the application of the regulations for the ingredients of the tobacco products and related products, regarding the notification and reporting of the information on the tobacco products and the related products, the emissions of tobacco and related products, on the evaluation of their attractiveness, their dependency and toxicity potential, to reduce the undesirable effects of their consumption and exposure to tobacco smoke, in particular children and young people, on eliminating illicit trade in such products, tobacco products and certain products that are similar to tobacco products, so-called related products, namely electronic cigarettes and refill bottles for them and herbal products for smoking, produced in the Republic of Moldova and imported for marketing in the Republic of Moldova, adequately informing the population about the consequences of smoking by placing health warnings combined labeling on the unit packets and on the outer packaging of tobacco products, tobacco intended for rolling in cigarettes and related products aimed at a high level of health protection, especially for young people.

66. By Law no. 97 of July 26, 2019 for the modification of some legislative acts were made modifications and completions to the Law no. 278 of 14.12.2007, with the extension of the provisions and restrictions for tobacco products and for non-burning tobacco products and related products, including electronic cigarettes, and restrictions on the prohibition of their consumption in educational and medical-sanitary institutions, at workplaces, in all public places, public transport, etc.

67. The aforementioned law prohibits advertising for all tobacco products and related products, introduces amendments to the Tax Code by increasing taxes and matching them for all tobacco products, including tobacco products that do not burn.

68. The provisions of the Contraventional Code of the Republic of Moldova no. 218 of October 24, 2008 were extended for the violation of the legislation in the field of tobacco control, including related products, for advertising in favor of tobacco products, related products, devices and accessories, recharging or heating them and promoting them through sponsorship, etc.

69. At the Republican Dispensary of Narcology, the Advisory and Treatment Service for smoking cessation was instituted, starting with April 2017, the operation of the green line on tel. 080010001, applied to all cigarette packages.

70. For the execution of the provisions of the Law no. 278/2007 on tobacco control through the Government Decision no. 1015 of November 23, 2017, the National Program on the control of tobacco for the years 2017–2021 and the Action Plan for its implementation were implemented.

71. In cooperation with the Ministry of Finance, the planned program of increasing the excise duties on tobacco products is implemented in the following years so that by 2025 the rate of excise duty will constitute at least 90 EURO per 1000 cigarettes provided by the Association Agreement between the Republic of Moldova and the Union. European, regardless of the average retail price, which will help increase the prices for tobacco products, and as a result, reduce their accessibility.

72. There is monitored the production, promotion, marketing, pricing and taxation policies of tobacco articles and sanctions for violating the legislation in the field.

73. Measures are being made to inform and educate the population regarding several health, social and economic aspects, related to tobacco consumption through Information campaigns also focused on the general population and the target groups at national and local level, for students in schools, youth, pregnant women, etc.