

National Health Insurance Bill awaiting approval

By Faith Amongin

The common practice where a person falls sick and is required to pay for treatment out of their pocket may soon be history.

This is partly because the long awaited Health Insurance Bill 2012, which is supposed to birth the National Health Scheme (NHIS) was awarded a certificate of financial implication by the Ministry of Finance in April last year.

The long awaited bill presents a glimmer of hope to Ugandans and once it is enacted into law, the scheme will ensure accessible, affordable, acceptable and quality health services to citizens according to Dr Diana Atwine, the Permanent Secretary of the health ministry.

Some health experts are however concerned that if it passed in its current state it may not capture emerging trends since the bill was drafted in 2004.

Atwine says the bill has been discussed by Cabinet and is awaiting approval from where it will be re-tabled in Parliament. "We were waiting for the presentation from the regulatory authority which we have now got and are now waiting for cabinet to sit again where we shall eventually present it to Parliament to be re-tabled," Atwine explains.

She says the Ministry of Health plans to make it a policy in all health care centres to treat patients using the scheme.

Once the bill is enacted, health care centres will have to first be accredited by the ministry to operate the scheme.

"Some people are usually turned away from getting treatment in some health facilities because they don't have money. This will therefore, help improve access to health care," she says. Drafted 14 years ago, Ibrahim Kaddunabi Lubega,

the chief executive officer of the Insurance Regulatory Authority (IRA), says the Bill's first phase of implementation will cover formal sector employees who are about 6% of the population then later on cover those in the informal sector.

"This scheme has been long overdue; it's already working in other countries except Uganda. It is to help relieve Ugandans from getting stuck on how and where to go when they fall sick," Kaddunabi says.

"If enacted, we will start with the formal sector, people employed and earning salary and as time goes on, we shall also include the informal sector," he adds.

The cost

President Yoweri Museveni in his speech which was delivered by the Vice-President Edward Kiwanuka Ssekandi during the 44th Africa Insurance Organisation meeting last year at Speke Resort Munyonyo said, financing the National Health Insurance Scheme shall be from government (40.7%), insurance contributions (52.9%) and direct income (6.4%)

The President said the proposed plan will have the scheme financed 4% monthly contributions from an employee's earnings with an additional contribution of 4% from the employer.

"Health schemes have not only been limited to middle income countries such as China, India and South Africa. In Africa, economies like Ghana and our neighbour Rwanda have shown that national implementation of a universal health coverage policy are followed by efforts to expand social protection through the use of insurance," Museveni said.

When the Bill is enacted, Uganda will join Rwanda and Kenya who have already done so in the East African Community.

delivery is still lacking at most of these. "It is more than just being close to a health facility. The facility should be able to provide the services that they go

emergencies and other outbreaks

Priority areas

Dr Diana Atwine, the Permanent Secretary of the Ministry of Health