Progress towards Universal Health Coverage in Kenya

Perspectives on Healthcare System and Financing Reorganization and Distributive Justice

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Outline

- The Kenya Health care System
- Universal Health Care Concept
- Health Financing Reforms in Kenya

Key Statistics Challenges Opportunities

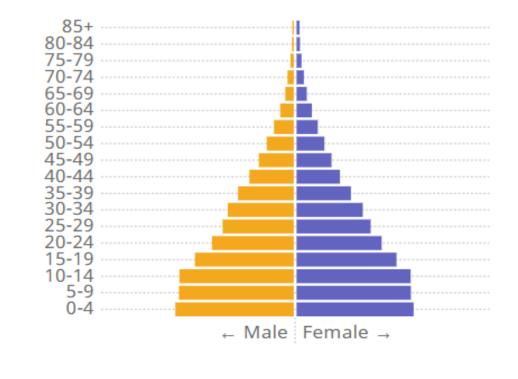
Climate setting

- In my family, we have never been sick
- In my family we have always had an easy access to quality health services we needed (Timely, safety, distance).
- In my family we have never had difficulties paying for health services
- I have never contributed to support a friend or family towards medical costs



Country Profile

2020 Population pyramid



Increasing total Population- Approx.. 55.1 Million

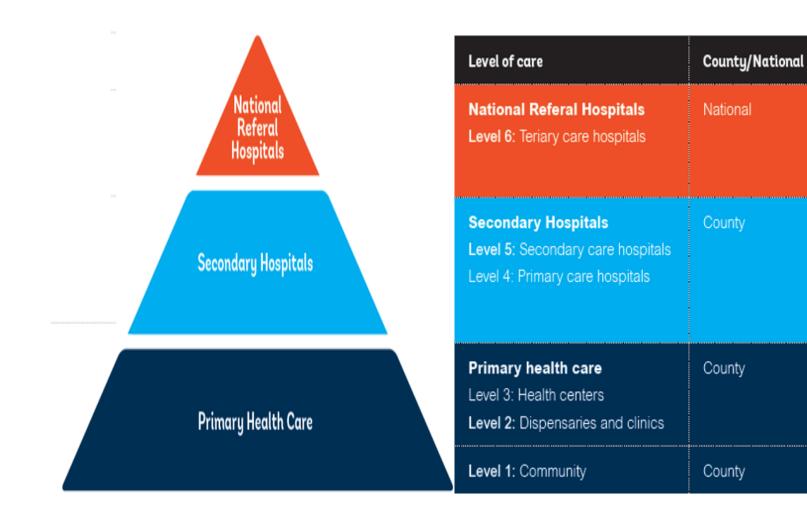
Decreasing Fertility rate- 3.4 per woman

Increasing Life expectancy- 66.1 (▲ 12.2 years from 2000)

Increasing healthy life expectancy- 57.7 (10.7 years from 2000)

37.3 % living below the poverty line

Health system Structures in Kenya



- Organized in 6 Levels
- Devolved system
- Health workforce (Physicians, Nurses, midwives)-13.8 per 10,000 population

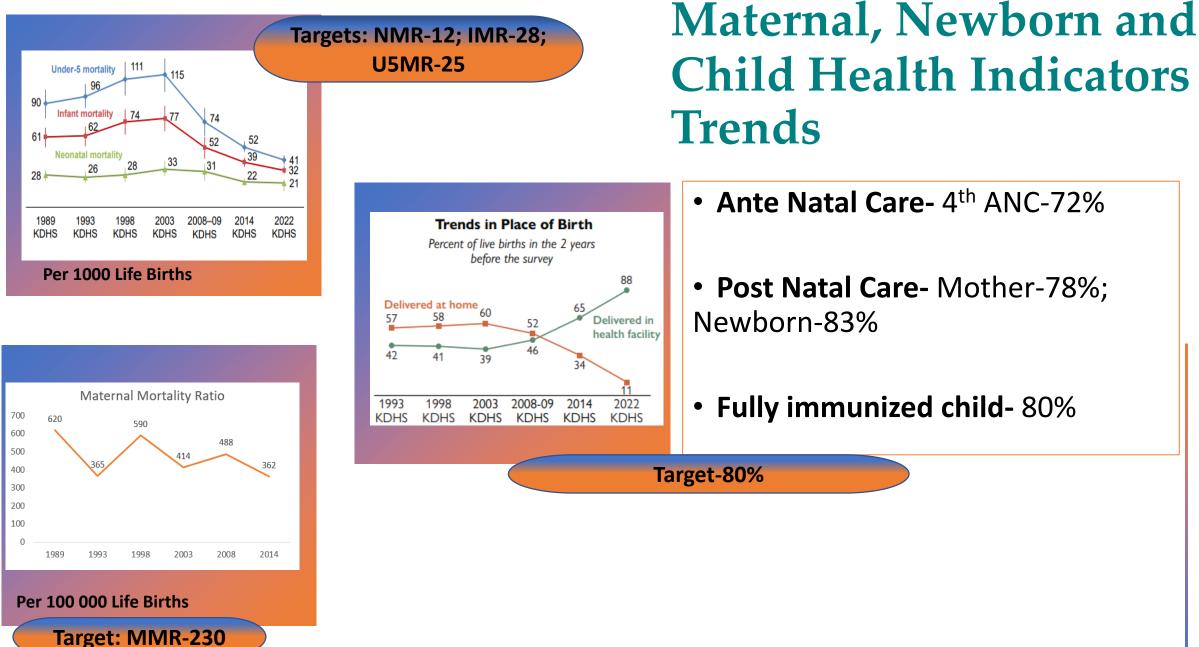
Disease Burden in Kenya-Top Causes of Death

Female

Male

Neonatal conditions	42.5
Lower respiratory infections	39.3
HIV/AIDS	35.1
Stroke	29.8
Diarrhoeal diseases	25.9
Tuberculosis	24.6
Malaria	21.8
Maternal conditions	21.3
Cirrhosis of the liver	20.4
Ischaemic heart disease	20.4

Neonatal conditions	55.2	
Tuberculosis	50.3	
Lower respiratory infections	46.6	
HIV/AIDS	44.4	
Road injury	42.4	
Diarrhoeal diseases	32.8	
Cirrhosis of the liver	30.6	
Stroke	30.6	
Malaria	26.3	
Ischaemic heart disease	25.2	



ARE YOU....

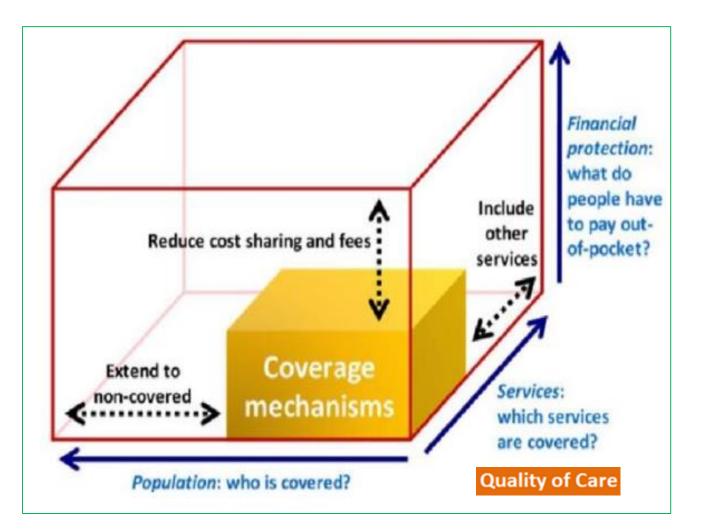
UNDERCOVER?



UNDER the COVER?



Universal Health Coverage



Services:

 Preventive, Promotive, treatment, rehabilitative, palliative

Principals:

 Financial protection, Equity Quality, Accountability, Responsiveness

Global Efforts

How Does it Link to Sustainable Development Goals?



SDG Target 3.8 :

Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all

Indicators

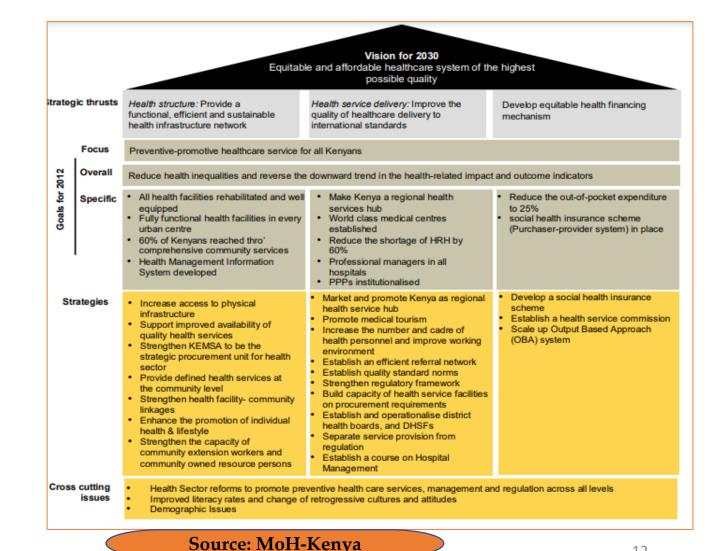
- 3.8.1-Access to essential health services
- 3.8.2-Reduction of financial hardship.

How has Kenya Domesticated the UHC Concept?

• The Big four agenda

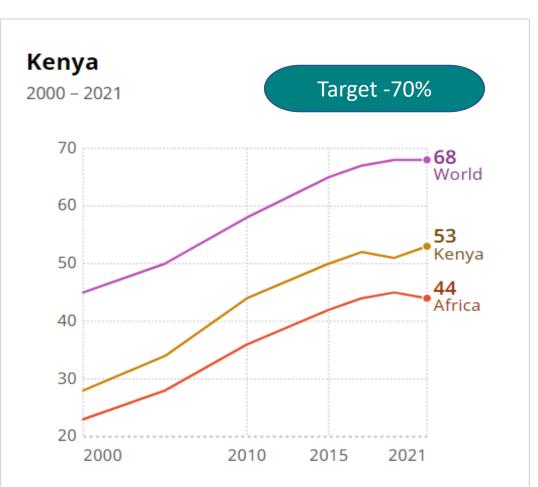
- Food Security;
- Affordable Housing;
- Manufacturing and
- Affordable Healthcare



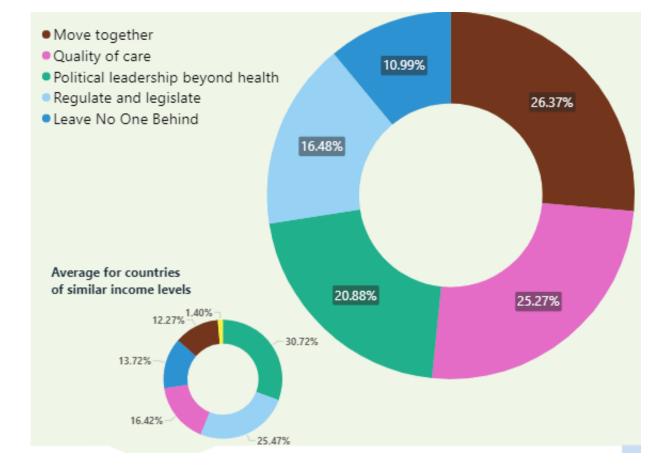


UHC Indicator progress

UHC service coverage index : SDG Indicator 3.8.1.



Performance Areas-Kenya



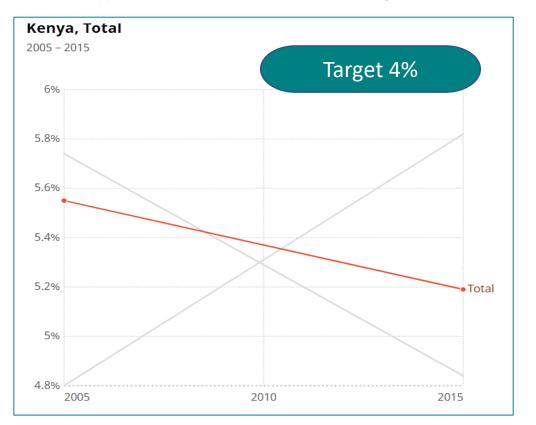
Source: https://data.who.int/indicators/i/9A706FD

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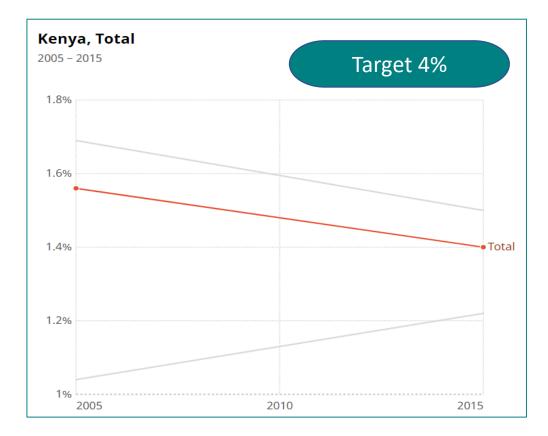
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UHC Indicator Progress

SDG 3.8.2: Household expenditure exceeding 10%



SDG 3.8.2: Household expenditure exceeding 25%

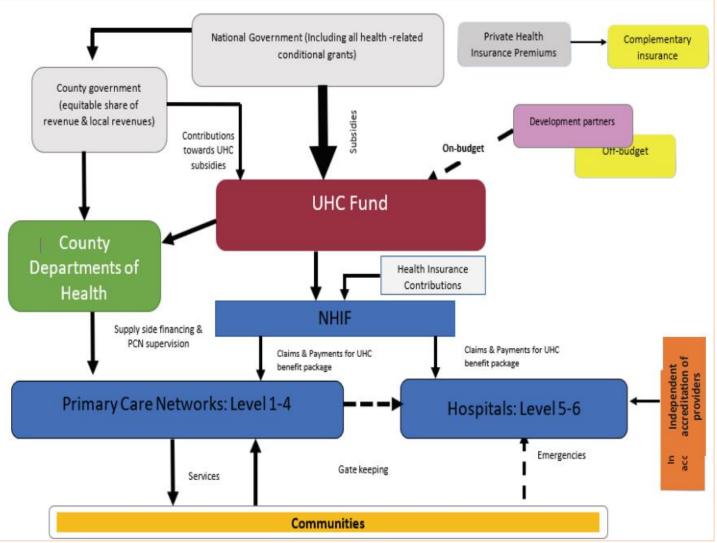


Source: https://data.who.int/indicators/i/9A706FD



Financing Health.....

UHC Health Financing Model



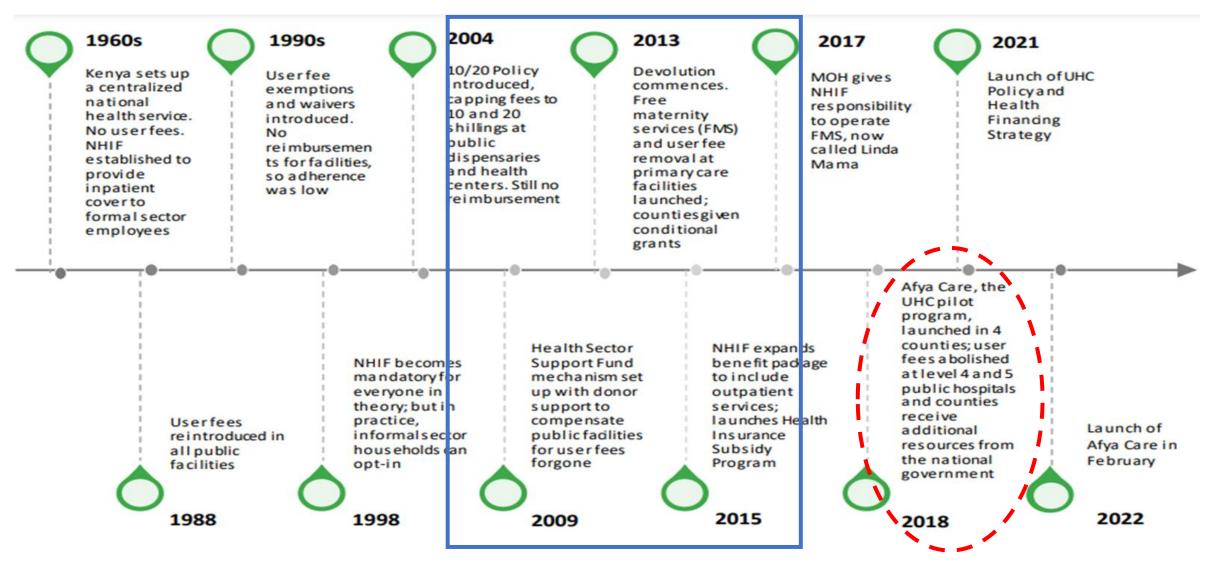
Source: Ministry of Health, Kenya 2019

Approaches

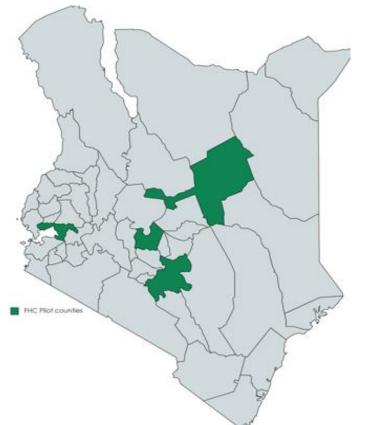
- Government -46%
- Donor -19%
- Private -35%
 - Health insurance-9%
 - Out of pocket (24%)
- Health- 8% of government expenditure

https://data.worldbank.org/indicator/SH.XPD.CHEX. PC.CD?locations=KE Global health expenditure Database 2022

Kenya's Journey Towards Universal Health Coverage



The Afya-care, Free Health Policy Pilot



- Launched in FY2018/19, implemented for 1 year
- 4 purposively selected counties (Kisumu, Nyeri, Machakos, Isiolo)
- Characteristics:
 - Government took over financing of health services
 - Involvement of Community Health Volunteers
- Beneficiaries
 - Open to all residents
 - No direct registration cost/premium required

Post implementation- Transition to Mandatory Social Health Insurance through NHIF to achieve UHC

Health Insurance in Kenya



Private

Community /Micro /County

National Health insurance Fund (NHIF)

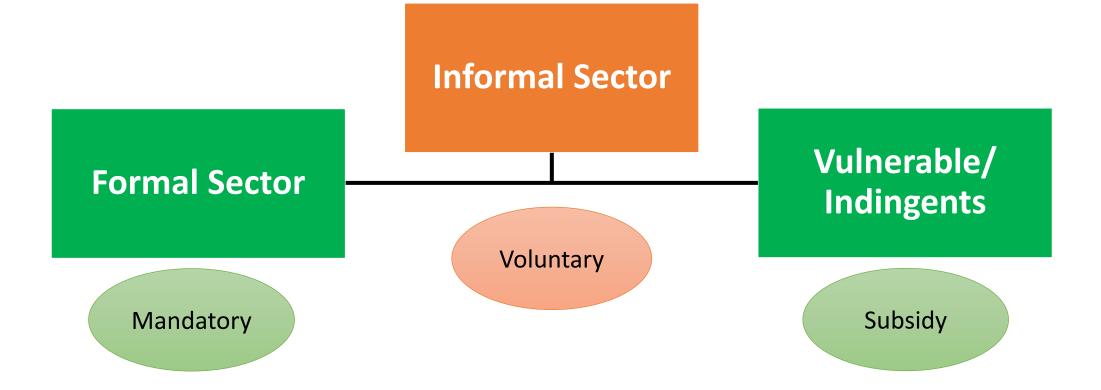
NHIF

- One of the oldest NHIS in SSA
- Countrywide Network (*Administrative cost*)
- Who is enrolled?

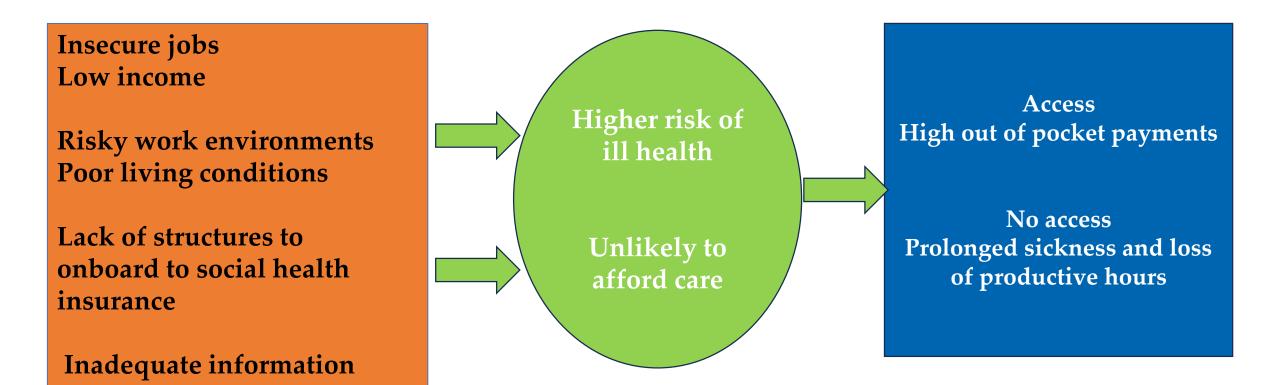
 ~80% Formal sector
 ~2% Vulnerable Indigents
 <20% Informal sector



Structure of National Health Insurance (NHIF in Kenya)



Why A Focus On The Informal Sector Workers?



89% in Kenya- (*khhues 2018 report*)



Unemployment



Education



Agric Sector

25

Youth



Urban



Who remains uninsured among informal sector workers?



Female

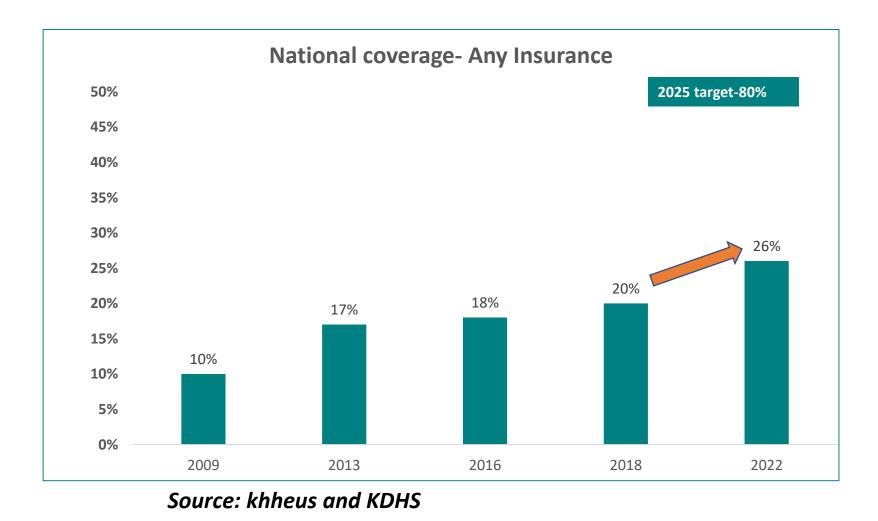
2022 NHIF Amendments

- Beneficiaries:
 - Age -18 years to 21 years ;no income
- Matching of Contributions:
 - Equal to what employee legally pays.
 - Exempted if providing better private cover.

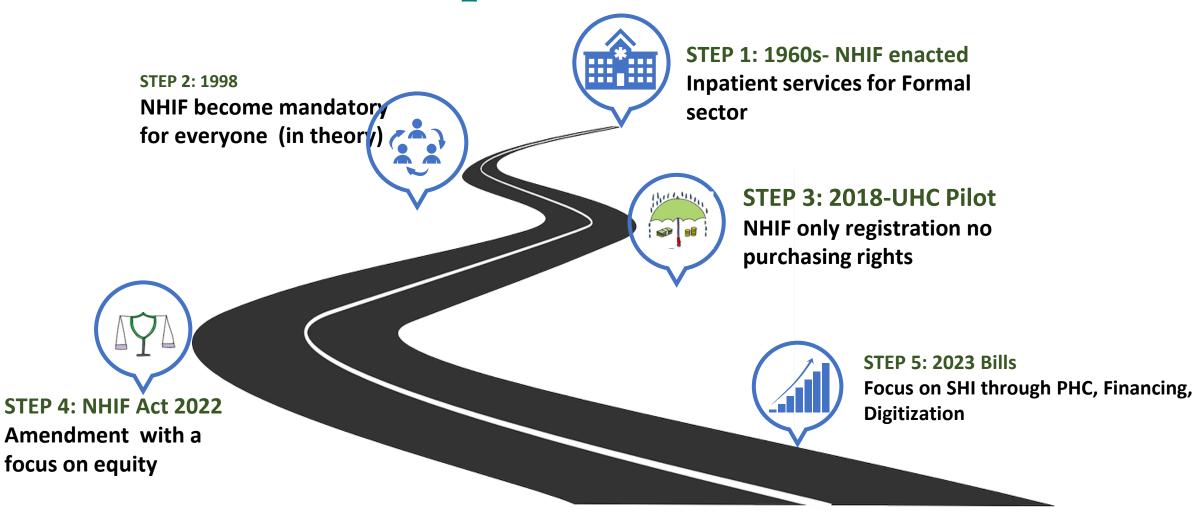


- Private Insurance:
 - Individual declaration
- Enhanced Benefits:
 - Optional to onboard
 - Additional contribution
 - No employer matching
- Private cover:
 - NHIF to pay after the private Health cover has been exhausted.

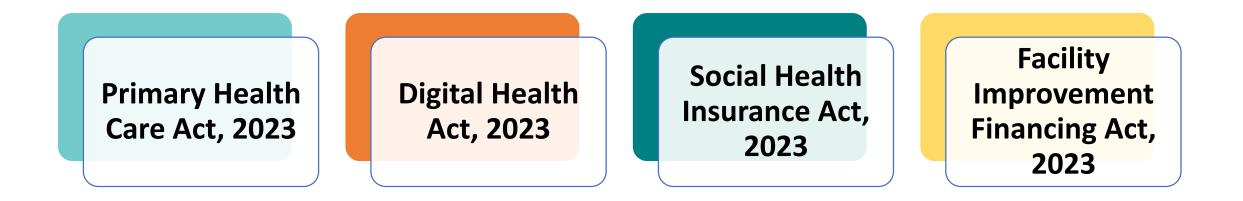
Health Insurance in Kenya



NHIF Roadmap to SHI: Misses and Gains

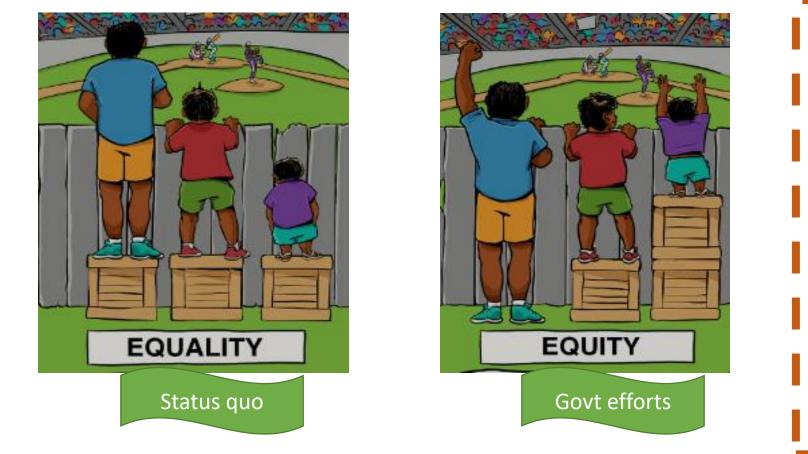


From NHIF to SHIF: New Bills



Distributive Justice

Equitable allocation of resources in society



It does not guarantee that all members of society will receive the same number of goods

LIBERATION

SHI goal

1. Primary Health Care Act, 2023

Emphasis on PHC

Legal framework to ensure proper **remuneration** for CHV/CHW/CHP

EMPOWERING

the community



2. Digital Health Act, 2023



Legal foundation for healthcare financing, service provision and UHC

Comprehensive Integrated Health Information System 3. Facility Improvement Financing Act, 2023

Facility Autonomy

Accountable mechanism for the collection, retention and management of revenue



4. The Social Health Insurance Act, 2023



A comprehensive scheme for social health insurance

Aim to provide financial protection and equal access to healthcare services

The Social Health Insurance Act, 2023

The Social Health Authority

- Register the beneficiaries
- Manage certain funds
- Pool funds
- Empaneling of healthcare facilities /Providers
- Purchasing and payments to contracted healthcare providers and healthcare facilities out of the funds



The Social Health Insurance Act- Funds (1)

Primary Healthcare Fund:

• For procuring primary services from healthcare facilities.

Emergency, Chronic, and Critical Illness Fund:

- Address emergency and chronic illness costs once the SHI are exhausted.
- Safety net for huge healthcare expenses due to long-term chronic conditions.

Funding sources:

- Monies appropriated by the National Assembly
- Grants, gifts, donations or bequests
- Monies allocated for those purposes from fees or levies administered
- Monies accruing to or received by the Fund from any other source

No individual contribution

The Social Health Insurance Act- Funds (2)

Social Health Insurance Fund

- The Social Health Insurance Fund will cover services provided by healthcare facilities
- Who can register
 - Every Kenyan
 - A non-Kenyan who is ordinarily resident in Kenya
 - Any **non-Kenyan** less than 12 months must be in possession of **travel** health insurance coverage

The Social Health Insurance Fund- Sources

By individuals

- Formal employment- monthly statutory deduction
- Non-salaried employment- a % of household income as determined by the means-testing instrument
- A permanent resident -in Kenya at a rate as may be prescribed under the Act
- Any other person -in the manner prescribed under the Act

By Government

- For households that need financial assistance by the means-testing instrument
- For persons under lawful custody, at a rate prescribed under the Act

Unresolved Challenges

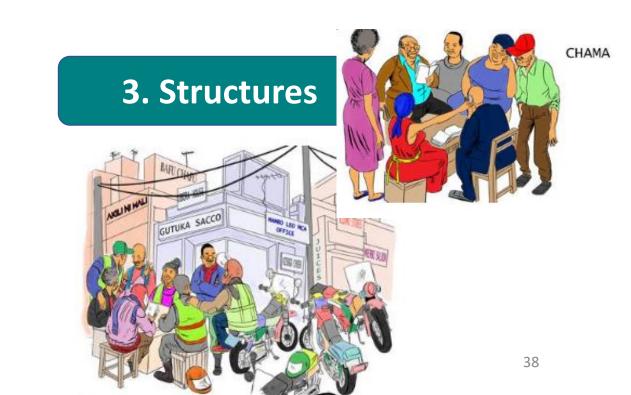
- Effective communication channels
- How to collect premiums to pool resources
- How to classify ISWs to assign premiums
- Cost of premium
- Enrolling the youth (Adverse selection)
- Incomprehensive package



1. Priority benefit package



2. Information



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Conclussion

What people desire



What exist



