



Linking Social Franchising Clinics to Health Financing Mechanisms

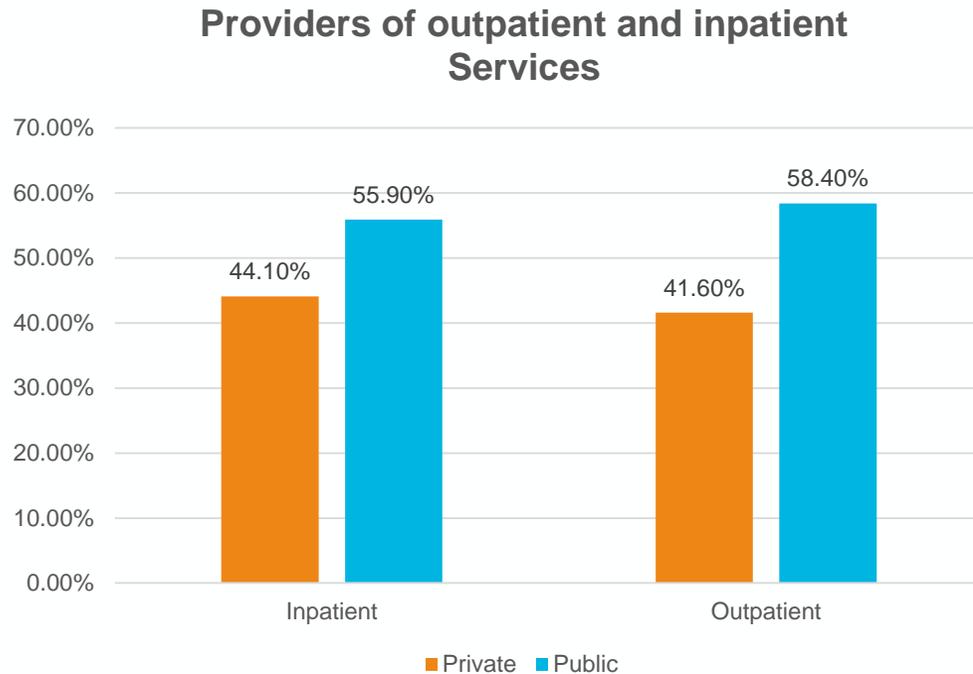
Joyce Wanderi- Maina – PS Kenya



Context – Kenya

- Universal health coverage is a government priority in Kenya
- Decision made to anchor the country's UHC aspirations on the National Hospital Insurance Fund (NHIF)
- Only 1 in every 5 Kenyans has some form of health insurance coverage
- NHIF covers 88% of those insured, private insurance – 9%, while community based/other 3% of the population
- High out of pocket spending denying poor access to health care

Private sector role



- Approximately 41% of all outpatient services are through private sector
- UHC commitments require wider geographical foot print
- Social insurance traditionally biased towards accrediting public sector facilities
- Organized private sector – (social franchising) provides an opportunity to achieve scale and quality

Our contribution towards meeting Kenya's UHC goals

- Creating demand for enrolment into social health insurance
- Facilitating empanelment and quality assurance
- Advocating on policy issues with the public sector

Creating demand for enrollment into social insurance

- Uptake of social insurance is a behavior change issue requiring intensive consumer education
- Development and implementation of a marketing strategy to drive awareness of social insurance & product benefits
- Improve product accessibility by simplifying registration process
- Business case for providers



Key Successes - National scheme (Supacover)

370,000

New H/Holds registered in
12 months

Ease of Registration

- ✓ Mobile phone registration
- ✓ NHIF e-wallet App
Online/NHIF website
- ✓ Premium remittance
through mobile money

- Enrolment numbers continue to grow at an average of 50,000 new members per month
- Ownership of marketing strategy and communication by NHIF beyond the initial catalytic phase
- Integrating demand creation and enrolment into other health outreach activities
- Use of feedback for continued improvement of the product offering

Key Successes – Health Insurance Subsidy program (HISP)

Beneficiary perception HISP

87%

Attended to by medical staff

74%

Got prescribed drugs at facility

92%

Described staff at facility as friendly

- Franchise providers contracted to provide services to the indigents in priority regions
- Customer education, push for registration and utilization stimulation in 8,500 households in 17 counties
- 96% of households registered by end of pilot
- Service utilization at 63%
- Customer feedback to NHIF to advice scale up

Facilitating empanelment and quality assurance

- Demystification of accreditation for providers
- Quality improvement plans geared towards improving facility readiness
- Application of comprehensive quality tools to assure quality of services and accelerate accreditation process
- Collaboration with national and regional branches to pitch franchises on premise of quality services



Progress to date: Tunza

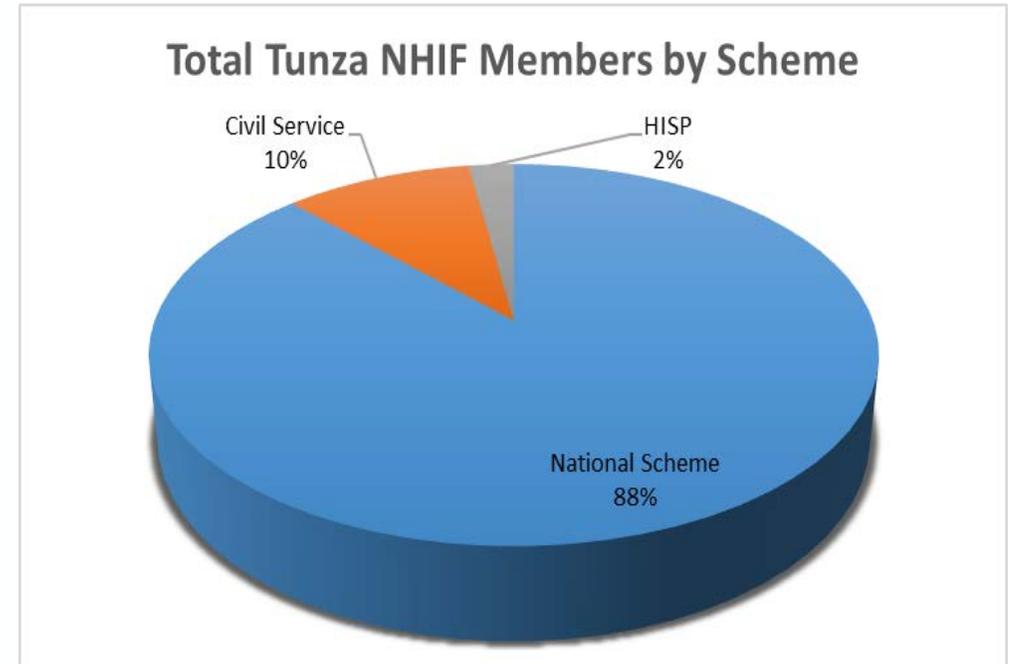
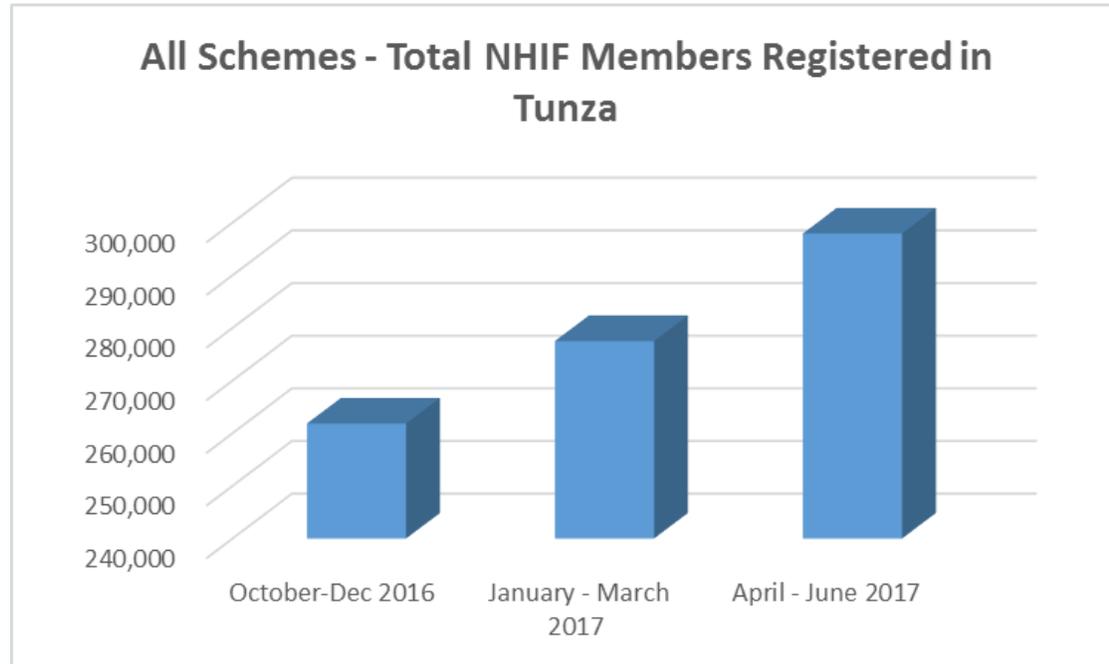
- 173 providers empaneled to NHIF
- Target is to get 60% of Tunza facilities empaneled by 2019
- Working towards fast tracking contracting for various schemes

46%

of Tunza facilities are
NHIF empaneled



NHIF members registered in Tunza facilities for OP services



\$ 1,003,562 Capitated value

Advocating on policy issues



Growing recognition of franchises and notable readiness to work with organized private sector



- Contracting of small private sector providers – preference was larger facilities
- Systems to measure and regulate service quality
- Recognition of other QA systems such as franchise standards and external accreditation
- Balanced tariffs and efficient payment mechanisms e.g. capitation amounts
- Advocacy for inclusion of comprehensive FP/RH services and creating awareness of benefits

Opportunity: Using provider and customer feedback to strengthen national schemes

- Increasing registration of dependents - lack of required documents results to partial registration
- Clear communication on penalties and how they accrue to reduce attrition as well as exclusions
- Simplification of benefits package to reduce subjective interpretation by providers and clients
- Significance of the membership cards at the point of service

Opportunity: Public sector contracting (Linda mama) – skilled delivery



The poster features a smiling woman in a blue and yellow patterned dress holding a newborn baby. At the top, there is a logo with a white silhouette of a woman and a child inside a green and red circle. Below the logo, the text reads 'LINDA MAMA' in bold, with 'BORESHA JAMII' underneath. To the right of the woman, the text says 'You can get these services for free:' followed by a bulleted list of services. At the bottom left is the Kenyan coat of arms and the text 'REPUBLIC OF KENYA' and 'MINISTRY OF HEALTH'. At the bottom right is the NHIF logo with the text 'Linda Mama, Boresha Jamii ni mpango wa Serikali kupitia NHIF' and 'NHIF' in large letters with 'Kipa Hauli, Bina Hauli' below it.

LINDA MAMA
BORESHA JAMII

You can get these services for free:

- Antenatal care
- Delivery including Caesarean Section
- Postnatal care and care for the newborn

REPUBLIC OF KENYA
MINISTRY OF HEALTH

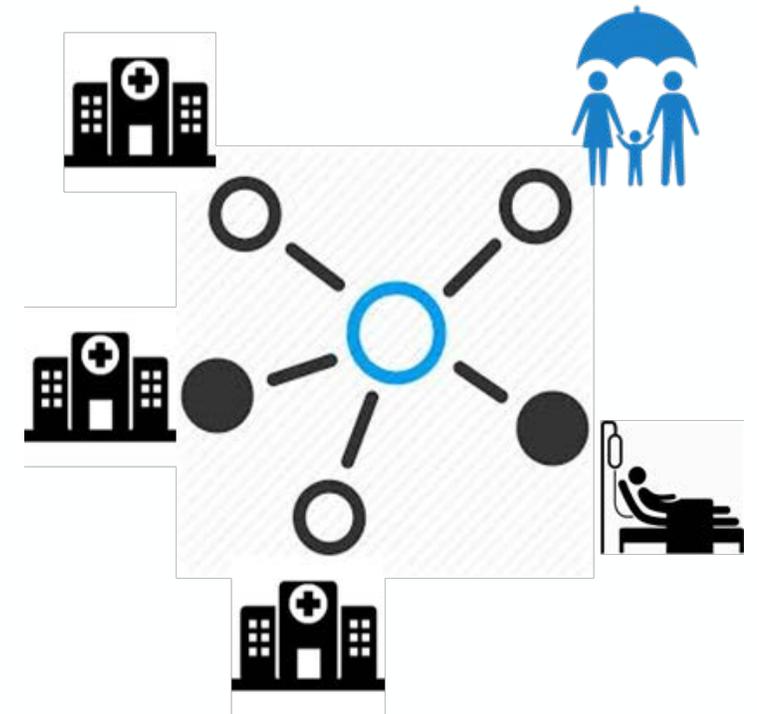
Linda Mama, Boresha Jamii ni mpango wa Serikali kupitia NHIF

NHIF
Kipa Hauli, Bina Hauli

- Government in the process of rollout FMS in 2,458 private and faith based (FBOs) facilities in a phased approach
- Linda Mama comprises of an **expanded package of benefits** to pregnant women and their newborns for periods of one year
- The cover **expires 90 days after delivery**

The future - Aggregation of providers

- **Customers:** access to a panel of quality providers, lower premiums or lower out-of-pocket costs.
- **Providers:** Increased client volumes (profitability)
- **Insurance Companies:** healthcare services which meet a pre-defined set of standards, lower administration fee



Network Management Organization :An organization that aggregates healthcare providers into a structured network and presents this network to payers and healthcare consumers.

Thank you

