

GHS NHIS 2007 ACTIVITIES HEAD QUARTERS REVIEW

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INTRODUCTION

- After the Ghana Health Service National Health Insurance Oversight Support Team (GNOST) had worked from 2003-2006 it became necessary to have a permanent office that would handle issues of Health Insurance implementation.
- The GHS NHIS office for most part of the year also handled MOH issues on Health Insurance implementation.
- The prime duty has been concentrated on provider issues.

INTRODUCTION

- GHS response to NHIS implementation was the setting up of the Ghana Health Service National Health Insurance Oversight Team (GNOST).
- The team came out with six strategic areas which GHS roles was crafted around;
- GHS as a partner in facilitating scheme establishment.

INTRODUCTION

- GHS as a provider of high quality accredited services.
- GHS as manager of provider client relationships
- GHS as manager of provider insurer relationships
- GHS as employer of health workers
- GHS monitoring and evaluation.

THE ROLE OF GHS NHIS OFFICE

- To care out GHS strategic plan.
- Organize regularly GNOST (4) meetings and with regional co-ordinators and heads of clinical care (2) to take reports and assess implementation progress.
- Reviews implementation strategies and adopt measures for improved quality care
- GHS NHIS monitors and evaluates the process using designed tools.
- Make recommendations to GHS, MOH and NHIS

WHAT WAS PLANNED AND CARRIED OUT

- Setting up of the office. This has been partly done with a temporary one room office and equipped computers and printer, 3 staff (1 temporary 2 permanent).
- Wrote a project to DANIDA and got funds which enabled us to monitor NHIS activities nation wide.
- Planned 4 GNOST meetings and held 6 of them because tariffs preparations.

WHAT WAS PLANNED AND CARRIED OUT

- We supported NHIA and MOH to secure a 15 Million dollar loan to improve health providers engagement. Implementation is in progress but slow.
- We planned and carried out two regional coordinators and heads of clinical care meetings.
- Planned and carried out a seminar for the press to improve correct press reporting on NHIS.

WHAT WAS PLANNED AND CARRIED OUT

- Internal preparation and participation for tariffs and medicines list review. This is ready for implementation by April 2008.
- NHIS office was able to carry monitoring of the 10 regions and a documentary produced using Volta region. It would be shown at the SMMS and national TV.
- NHIS have completed facility mapping throughout the country and will be compared with CHIM work and finalization.

WHAT WAS PLANNED AND CARRIED OUT

- Providers' Capacity Building for regional, districts and health facility focal persons. This has not been carried out yet.
- Regional Stakeholders' meetings have been held and only one at National level.
- Data collection and compilation the regional and district level has been done but is currently poor. We are working to improve it.

CHALLENGES TO GHS

- Low resource availability and distribution
- Low quality of health care
- How to enforce the gatekeeper system in NHIS.
- Inadequate human resource particularly the professional groups to deliver quality services at lower levels.
- Lack of equipment, tools and essential supplies
- Inadequate infrastructure distribution, quality and lack of maintenance.

CHALLENGES TO GHS

- There is low education of health staff on NHIS for providers-Doctor/Nurses, members and the entire public.
- Health shopping is on the rise because of poor service at the lower levels.
- The situation of low and insufficient supply of medicines
- There is still outstanding exemptions not paid to providers.

THE WAY FORWARD

- To continue to monitor the implementation particularly the G-DRG tariffs and prompt review.
- To provide training for health staff on health insurance issues; topics to be based on level and capacity need.
- Work with CHIM on health facility mapping and their codes for NHIS use.
- To provide public education on NHIS to include what they should expect with new tariffs.

THE WAY FORWARD

- To design indicators that would show effectiveness and efficiency of NHIS.
- To continue to work to solve the problem of quality care, uniform use and storage of patient folders country wide.
- To work to improve the late submission of claims.
- How to get funds for regular monitoring, we may be asking health facilities to contribute for Health Insurance training and monitoring.

THE WAY FORWARD

- To secure permanent office and residential accommodation for staff.
- Work on the human resource issue of the unit.
- Continue to work closely with all departments on NHIS related issues.
- THANK YOU.