SIGNIFICANT CHANGES IN THE NHIF BENEFITS PACKAGE 2022

NHIF launched the benefits package for the 2022/2024 contracting cycle effective 1st July 2022.

In this paper, we provide a summary of significant changes in the expanded benefits offered under NHIF in light of the NHIF Amendments Act 2022 which is a key instrument to augment Universal Health Coverage (UHC) in Kenya.



Key Features in the Expanded Benefits Package

- Covers pre-existing conditions
- No age limits
- Family-based
- Focused on emerging health needs
- Focused on prognosis and screening for early detection and treatment
- Non-discrimination in terms of ailment
- No medical examinations are required
- Few exclusions e.g. cosmetic procedures, fertility treatment, home-based care, some management of diseases and programs funded by the Government.



Significant Additions to the Overall Inpatient & Outpatient Benefit Packages



Benefit	Significant Addition
Inpatient	Reimbursement rate for inpatient services increased by 12%. Initially, facilities were reimbursed between Kshs. 1,800 up to Kshs. 4,000 per day depending on the level of the facility.
	Chronic conditions shall include Asthma, Hypertension, Sickle cell diseases, Diabetes & Mental illness.
Outpatient	 Those with chronic conditions are encouraged to enrol in Government facilities or Level IV and V Private and Faith-based comprehensive hospitals. (Facility list is available on www.nhif.or.ke)
	 Additional capitation amount paid to Level IV and V hospitals to cater for beneficiaries with chronic illness comprehensively.
	Additional benefits of up to 7 categories of essential lab tests included.
	• Beneficiaries will be allowed to choose any hospital of their choice from Level II to V comprehensive hospitals.
	 Beneficiaries are no longer restricted to one outpatient facility if they choose County facilities and can also seek services in any of the County facilities.



Benefit	Enhancement				
Surgical		d by 25% and the scope a radiology, cardiology, a	•		
				Cover Limit In Facilities	
	Category of Surgeries	Offered in	Comprehensive (Up to)	Non-Comprehensive (Without limits)	Non-Comprehensive (With limits)
	Specialized	Level 4 specialized hospitals, 5 and 6 at comprehensive and non-comprehensive facilities	Kshs. 480,000	Rebate for 1 day	FFS
	Major	Level 4 hospitals (with 2 or more theatres), 5 and 6 in comprehen- sive hospitals	Kshs. 240,000	Rebate for 3 days	FFS
	Minor	Level 3B (with 1 thea- tre), 4 (with 2 or more theatres), 5 and 6 in comprehensive hospi- tals	Kshs. 40,000	FFS*	FFS
	*FFS – Fee For Se	rvice			
Oncology	Expanded to inclu	ude bone scans, PET sca	ns and radionuclide	therapy.	
Radiology		trasounds, Fluoroscopy,		py, Mammography, EEG ar Echocardiogram will be li	•





Benefit	Enhancement
Mental & behavioral health	 Common mental disorders including depression and anxiety as well as severe mental disorders such as psychosis, schizophrenia and bipolar disorders. Neurological disorders such as epilepsy and dementia. Childhood disorders. Drug and substance abuse disorders.
Renal dialysis	 Includes registration, triaging, consultation and specialists reviews; nursing and dialysis services; cost of a temporary catheter; catheter insertion or removal; routine lab investigations; medication; counseling; and follow-up. Comprehensively covers a maximum of 2 sessions only per week for National scheme beneficiaries, and the full number of sessions prescribed per week for enhanced scheme beneficiaries.



Standardized Provider Payment Mechanisms under the Specialized Benefit Packages

Health care providers have been categorized under the Kenya Essential Package for Health (KEPH) levels of care starting from Level II to VI based on the services offered. In the recent amendments, NHIF has standardized provider payment rates for similar services.

The following reimbursement rates shall apply to providers under the national scheme;

Benefit	Reimbursement Limit (U	p to)
Oncology		
Cheology	Radiotherapy	Kshs. 3,600 per session for up to 20 sessions
	Brachytherapy	Kshs. 40,000 per session up to 2 sessions
	Bone scan	Kshs. 15,000 for 1 image p.a.
	Radio nucleoids scan	Kshs. 9,600 for 1 image p.a.
	PET scan	Kshs. 50,000 for 1 image p.a.
		l post-mortem) per session up to 6 sessions (from 4 sessions) ns. 100,000 per session up to 6 sessions



Benefit	Reimbursement Limit (Up to)			
Radiology	Procedure	Comprehensive Facilities	Non-Comprehensive Facilities	
	CT scan	6000	6000	
	Fluoroscopy	4000	-	
	Mammography	4000	-	
	MRI	9600	9600	
	Specialized ultrasound	5000	-	
	Echo Adults	5000	-	
	Echo Paeds	8000	-	
	EEG Adults	5000	-	
	EEG Paeds	8000	-	
Mental & behavioral health	Under both comprehensive and drug & substance abuse and Ks	-	Kshs. 60,000 for rehabilitation for Ital disorders.	
Renal dialysis	Kshs. 9,500 in all Level 3B, 4, 5, and 6 providers comprehensively. Non-comprehensive hospitals will als dialysis services on a comprehensive basis.			



Difference Between Comprehensive and Non-Comprehensive Facilities

Comprehensive facilities are hospitals offering all-inclusive services of all the packages to beneficiaries without pay i.e. without out-of-pocket payment.

It is important to note that there are instances where a member may be required to copay in a comprehensive facility, especially for services not provided under the UHC benefit package e.g. critical care services like HDU & ICU. NHIF only reimburses the daily rebate amount and the member will have to top up the difference for the days they have been admitted to such facilities.

In non-comprehensive facilities, members will be required to top up the amount paid for services offered to access rebates and specialized treatment and certain packages like radiology, optical, dental, and upon referral and pre-authorization rates.

Challenges & Way Forward

Currently, some of the challenges being faced include delayed approvals from NHIF which take between 48 to 72 hours with the enhanced benefits being mostly accessible in public hospitals. In addition, approvals for surgical benefits are mostly being done for mission hospitals with the amount allowable for clients with private insurance lower than that of clients making cash payments due to copayment. This notwithstanding, Zamara will keep advising you on these progressive guidelines noting we have no control over NHIF operations.



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