## With Drawing the National Health Insurance Bill in the Wake of Covid-19 is a Step in the Wrong Direction

My attention has been drawn to the intention of government to withdraw the National Health Insurance Scheme Bill, despite the parliamentary health committee making intimation that it is in its final stages of preparing a report on the bill to table it before the house for debate.

Am lucky to have been among the few Patients' rights centered activists that had an interface with the Parliamentary health Committee of parliament to make my submissions regarding the medical —legal implication of the bill. The bill could be lacking in some sense but this can be improved over time and by the time it passes as an act of Parliament we have the best Health insurance Law

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It is very unfortunate that such thoughts by government to withdraw the Health bill are coming up in the wake of COVID-19 that has led to unprecedented financial meltdown and economic catastrophe. This Pandemic has demonstrated to us clearly that this bill should have been passed into law many years ago because failure to access health care service does not only violate human rights but has negative implications to the economy.

The reason so far enumerated is that the cost implication that the bill has on an average Ugandan citizen is not feasible, with the certificate of financial implication being issued by the Ministry of Finance, planning and Economic development that showing the capacity of government to fulfill its part in rolling out the scheme and the big out of pocket expenditures by Ugandans as demonstrated in the subsequent paragraphs of this write up, the cost implication on an average Ugandan does not stand out as the most credible and best interest reason for the withdraw of this bill that Ugandans have been waiting for a long period of time.

The National Health Insurance Bill provides for a contributory mechanism whereby the scheme would pool resources where the rich subsidize the treatment of the poor and the healthy subsidize the treatment of the sick, young and elderly.

The Scheme would have assisted in improving universal Health coverage and accessibility to health care services, regulate health insurance across the country and avert financial risks that arise from high out of pocket expenditure on sickness, disability and others

The National Health Insurance bill envisaged realization of universal healthcare in Uganda hence giving life to objective XIV, XX of the National objective and directive principles of state policy and article 8A of the constitution of Uganda that mandates the state to take all practical measures to ensure the provision of basic medical services to the population and Goal 3 of the Sustainable Development Goals that aims at ensuring healthy lives and promotion of wellbeing for all at all stages.

Looking at the National Household survey of 2016/17 data showed that 14.2% percent of Ugandan Households incur catastrophic health expenditure due to direct household out of pocket payments which compromises the household welfare and affects their ability to consume other basic needs such as food, Education and Shelter hence driving them into absolute poverty. In the wake of COVID-19 that has caused unprecedented economic meltdown in the country, unless the National Health insurance bill is passed into law Ugandans may not be in position to afford out of pocket payments for Health services and other basic needs.

According to the National Health account report FY 2016/2017 the annual per capita expenditure on health in Uganda is USD 53. This is still far below the recommended minimum of USD 84 per capita expenditure on Health. The total annual health expenditure is Ushs 7.5 trillion. Of this 15% is from government funding, 42% from donors, 41% from individuals (out of pocket) when they fall sick and only 2% from pre-payment mechanisms like Health Insurance, community payment mechanisms.

It is thus convincing that we needed a law addressing cost as one of the barriers to accessing quality health care in Uganda and a means by which government fulfills its obligation to provide citizens with the highest attainable standard of health ultimately contributing to healthy human capital that will facilitate social and economic development.

The National Health insurance scheme would have benefited the indigent on the solidarity principle where the rich subsidize the treatment of the poor and the healthy subsidize the treatment of the sick, young and elderly.



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