

Mutual Health Organizations

BACKGROUND

The issue of health financing in Ghana has become of great importance in our daily lives when cash and carry measures were instituted in our health facilities due to the severe economic recession facing the government. Though it may have saved the health facilities from collapsing, it has brought untold hardship to many Ghanaians. Many patients have resulted to:

- Delaying and non-adherence to treatment
- Self-medication, which may lead to complications
- Patronage of road side prescribers and
- High unpaid medical bills as a result of “Runner-away patients”

Most people living in Ghana do not seek preventive check ups or see a doctor early enough to treat their illness until it has reached crisis point, due to economic reasons. Many people are walking around in Ghana with devastating but preventable and manageable diseases like High Blood pressure with potential complication of stroke and sudden death, and they don't know it. The collective effect of these is high premature deaths and higher health care cost due to delay in treatment. Government alone cannot solve this problem. This calls for the introduction of innovative health financing schemes.

OPTION 1 GHANACARE

This is a healthcare service that covers family members and loved ones living in Ghana. Sponsors are generally Ghanaians living abroad who buy into this service in abroad by selecting one of the three plans through a form that can be registered in the United States or locally at Aninwah Medical Centre. The premiums are paid yearly with quarterly statements sent to the sponsors for the balance after all the discounts are made to be paid by the sponsors abroad. An initial deposit is paid to expedite the service.

The beneficiary (member) do not have to pay at this time of service. Beneficiaries are given an ID card and are not transferable. The service can be renewable on yearly basis.

TARGET

- Ghanaians whose relatives live abroad.
- Ghanaians residents
- Individuals
- Family members

OPTION 2 CHIS

Community Health Insurance Scheme is a mutual health risk-financing program. This refers to a group of people coming together to contribute towards meeting the cost of their health care needs. The members contribute an agreed sum into a common fund and each time a member falls sick the cost of treatment is paid from the common fund. The

group makes all the decisions about the scheme. This scheme is community based, managed and administered themselves.

TARGET GROUP

- Village communities
- Market women
- Associations
- Schools
- Churches

**OPTION 3
PAY PER SERVICE**

This scheme is like a bank account where you put a sum of money into it and utilize it as and when the need arises. First you present a list of all the participants or beneficiaries you want to benefit from the scheme and whenever each one needs medical attention, all payments are prepared and deducted from the account. Quarterly statements are sent to the sponsor.

This scheme has no discounts, no time bound, and no limitations. It has all the flexibilities one needs. You can replenish the account as and when the need arises.

TARGET GROUP

- Family Members
- Individuals
- Friends

**OPTION 4
COC**

This system is set-up to assist companies who needs to monitor their employee's medical practices and minimize high cost of healthcare. The company fills an agreement form with a list of all employees, spouses and dependants that are covered under the company's policy to the service provider. The company submits its own identifications guidelines to the provider to screen for possible fraudulent cases. The company negotiates the service and the cost of care with the provider prior to the signing of the agreement. At the end of the month a monthly statement is prepared based on the agreement signed and sent for payment.

TARGET GROUP

- Companies

**OPTION 5
SUSU SCHEME**

This scheme is based on the traditional susu in the communities. They payment can be made daily, weekly or monthly. A savings book is issued and entered, any contribution one makes to the scheme. This scheme has no time bound, no minimum payment at a

time. The contributed amount is for medical expenses. After medical treatment the bill is forwarded for payment on behalf of the patient. This eliminates having to look for money to go for medical treatment.

TARGET GROUPS

- Pregnant women
- Women with babies
- Individuals
- Family members

OPTION 6 BUDGET FINANCING

This service is a prepared health cost per year for a group that is negotiated between the members and the service provider. It is a proposed estimate of the health cost for a particular group. After the agreement is reached between the members and the service providers, the total amount is released to the Health provider. In return the listed members can go to that particular service provider for the services agreed upon for the year. There is no guarantee on the number of members who'll seek health care in a particular year.

TARGET GROUP

- Churches
- Schools
- Associations
- SBA's
- SME's

These options can be tailored to suit each particular group where necessary. These are no one formula for mutual health. This calls for innovative health financing schemes.