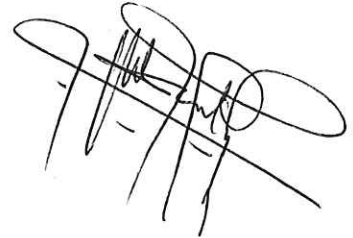


IN THE THIRD SESSION OF THE SEVENTH PARLIAMENT  
OF THE FOURTH REPUBLIC OF GHANA

REPORT



OF THE

COMMITTEE OF THE WHOLE

ON THE

PROPOSED FORMULA FOR THE DISBURSEMENT OF THE  
NATIONAL HEALTH INSURANCE FUND FOR 2019

MARCH, 2019

Acc No: 3046

Class No: CR/HTH/19

**REPORT OF THE COMMITTEE OF THE WHOLE ON THE  
PROPOSED FORMULA FOR THE DISBURSEMENT OF THE  
NATIONAL HEALTH INSURANCE FUND FOR 2019**

**1.0 INTRODUCTION**

1.1 On Friday, 22<sup>nd</sup> March, 2019, the Proposed Formula for the disbursement of the National Health Insurance Fund for 2019 was presented to Parliament. The Formula was referred to the Committee of the Whole for consideration and report in accordance with the Standing Orders of the House and Article 103 (3) of the 1992 Constitution of the Republic of Ghana.

**2.0 REFERENCE DOCUMENTS**

2.1 The Committee during its deliberations referred to the following:

- i. The 1992 Constitution of the Republic of Ghana
- ii. The Standing Orders of the House
- iii. The National Health Insurance Act 2012 (Act 852) as amended by the National Health Insurance (Amendment) Act, 2015 (Act 888)
- iv. The Formula for the Disbursement of the National Health Insurance Fund for 2018
- v. The Report of the Committee of the Whole on the Formula for the Disbursement of the National Health Insurance Fund for year 2018

**3.0 ACKNOWLEDGEMENT**

3.1 In attendance at the Committee's deliberations were Hon. Kingsley Aboagye-Gyadu, Deputy Minister for Health, Dr. Lydia Dsane-Selby, Acting Chief Executive Officer, National Health Insurance Authority (NHIA), Mr. Ahmed Imoro, Director of Finance, NHIA. The Committee is grateful to them for their assistance.

#### **4.0 BACKGROUND**

4.1 The Government of Ghana through the Ghana Poverty Reduction Strategy (GPRS) planned its policy strategies of the essential components of the GPRS. One of the strategies was aimed at delivering accessible and affordable healthcare to all residents in Ghana, especially the poor and vulnerable. In achieving the objective of the universal health care, the National Health Insurance Scheme (NHIS) was established by the enactment of the National Health Insurance Act, 2003 (Act 650) to provide financial risk protection against the cost of quality basic healthcare for all residents in Ghana. The NHIS introduced the district-wide mutual health insurance scheme to enable access to basic healthcare services without paying cash at the point of delivery. The National Health Insurance Act, 2003 (Act 650) was later repealed and replaced by the National Health Insurance Act, 2012 (Act 852).

4.2 The enactment of Act 852 brought the National Health Insurance Authority (NHIA) into being, to secure the implementation of a National Health Insurance Policy. The Law, Act 852 also established the National Health Insurance Fund (NHIF) under Section 39 and mandates the Council of NHIA to take charge of the responsibility of the management of the Fund. The National Health Insurance Act, 2012 (Act 852) was also later amended by the enactment of the National Health Insurance Act, 2015 (Act 888) to limit the scope of exemptions in respect of exempt supplies.

#### **5.0 OBJECT OF THE FUND**

5.1 The object of the Fund is to pay for healthcare services of members of the National Health Insurance Scheme (NHIS).

5.2 For the purposes of implementing the object of the Fund, Section 40 (2) of Act 852 stipulates that monies from the Fund shall be expended as follows:

- i. To pay for the health care costs of members of the National Health Insurance Scheme

- ii. To pay for approved administrative expenses in relation to the running of the National Health Insurance Scheme
- iii. To facilitate the provision of access to healthcare services
- iv. To undertake investments to promote access to health services as may be determined by the Minister for Health in consultation with the Board of the Authority

## 6.0 SOURCES OF THE FUND

6.1 The sources of the Fund as stipulated in Section 41 of Act 852 are as follows:

- i. The National Health Insurance Levy (NHIL)
- ii. Two and a one half per cent (2.5%) of each person's contribution to the Basic SSNIT Pension Fund
- iii. Monies approved for the Fund by Parliament
- iv. Moneys that accrue to the Fund from investments made by the Authority
- v. Grants, donations, gifts and any other voluntary contributions made to the Fund
- vi. Fees charged by the Authority in the performance of its functions
- vii. Contributions made by members of the Scheme, and
- viii. Monies accruing from the National Insurance Commission under Section 198 of the Insurance Act, 2006 ( Act 724)

## 7.0 RECEIPTS AND PAYMENTS FOR 2018

7.1 In respect of NHIL, the Authority received an amount of **GH¢1,473.28 billion** from the Ministry of Finance for the year ended 31<sup>st</sup> December, 2018. **Premium amounted to GH¢53.52 million, Processing Fee Income, GH¢49.72 million, Disinvestments, GH¢28.82 million and Donor Receipts and Other Income, GH¢14.19 million** during the period, bringing **total receipts to GH¢1,619.53 billion (amount available on cash basis at the close of 2018).**

7.2 Payments made during the period amounted to GH¢1,585.38 billion and it included claims payment of GH¢1,047.70 billion which translates into 66.1%. Excess receipts over payments therefore stood at GH¢34.15 million (operational surplus on cash basis). Details are in Appendix A attached to the Report.

#### 8.0 REVENUE AND EXPENDITURE FOR 2018

8.1 On accrual basis, the total budget expenditure for the year ending 31<sup>st</sup> December, 2018 was GH¢1,732.66 billion as against an annual budget of GH¢2,375.24 billion, resulting in a difference of GH¢642.58 million. Details are in Appendix B attached.

#### 9.0 COMPARATIVE ANALYSIS OF NHIL/SSNIT COLLECTIONS AND RECEIPTS

9.1 The Authority's Budget allocation from NHIL/SSNIT for 2018 was GH¢2,233.92 billion as contained in the Budget Statement and Economic Policy for the 2018 Financial Year. However, NHIL/SSNIT collections for the Year (including estimated NHIL collections for December 2018 and SSNIT collections from October to December 2018) was GH¢1,579.49 billion. Of the total collections, an amount of GH¢506.80 million constituting 32.1% had been received by the Authority as at 31<sup>st</sup> December, 2018.

#### 10.0 REVIEW OF INVESTMENT PERFORMANCE AND POSITION AS AT 31<sup>ST</sup> DECEMBER, 2018

10.1 Investments of the Authority are in fixed deposits largely with the banks. As at 1<sup>st</sup> January, 2018, investments valued GH¢73.16 million and the investment portfolio earned a total interest of GH¢10.98 million for 2018. The balance as at 31<sup>st</sup> December, 2018 stood at GH¢55.33 million. The decrease in the investment balance was largely due to disinvestments amounting to GH¢28.82 million applied to pay part of medical claims.

## 11.0 REVENUE PROJECTIONS FOR 2019

11.1 The Authority expects to receive a total amount of GH¢2,534.89 billion in 2019 from NHIL/SSNIT and other sources to be able to execute its mandate in the Year. The breakdown of the projections is shown in Table 1 as follows:

Table 1

SOURCES OF THE FUND	GH¢ Million	% of Total Amount from the Sources
Levies - NHIL	1,206.76	47.60
- SSNIT	485.92	19.16
Premium ( Informal)	62.20	2.50
Income on Investment	12.38	0.49
Processing Fees	65.63	2.58
Other Income	2.00	0.07
Mid-Year Gov't Budget Support (Funding Gap)	700.00	27.60
Total	2,534.89	100.00

- 11.2 The amount of GH¢62.20 million estimated to be received as premium from the informal sector represents an average premium of GH¢17.60 per member for a projected active membership of 3,534,346 in 2019.
- 11.3 The Authority expects to receive a total interest income of GH¢12.38 million based on an expected portfolio size of GH¢75 million at a projected return of 16.50% per annum.
- 11.4 Proceeds from processing fees from both the formal and informal sectors is projected at GH¢65.63 million. The estimate represents an average fee of GH¢6.18 per member for a projected membership of 10,619,128 from both sectors in 2019. The projected membership excludes pregnant women and the indigents categories.

## 12.0 PROPOSED ALLOCATION OR FORMULA FOR THE DISBURSEMENT OF THE FUND FOR 2019

12.1 The proposed Allocation or Formula for the disbursement of the Fund to the various activities to be undertaken by the Authority for 2019 are in Appendix C attached and the summary is indicated in Table 2 as follows:

**Table 2**

Expenditure Items	2019		2018	
	GH¢ million	% of Fund	GH¢ million	% of Fund
Claim Arrears- 2017	0.00	60.65	181.74	7.65
Claims- 2018	1,537.24		1,400.00	58.94
NHIA Operational Expenses	265.61	10.10	218.25	9.19
Support to District Offices	56.90	2.24	67.02	2.82
Support for MOH	238.65	9.43	164.81	6.94
Support for District Health Projects and MP's M & E	31.13	1.25	27.38	1.15
Per Capita Payment System	0.00	0.00	0.00	0
Claims Processing Centers and E-Claims	40.20	1.60	41.10	1.73
Biometric ID Cards and Authentication System	111.51	4.40	96.25	4.05
Nationwide ICT Network	81.38	3.22	52.09	2.19
Office Buildings	57.72	2.30	25.20	1.06
Call Center	1.00	0.06	0.70	0.03
Archival System and Document Digitisation	17.60	0.90	15.60	0.66
Support for NHIS Related Research	0.15	0.01	0.15	0.01
Sensitisation, Publicity and Marketing	7.60	0.31	7.60	0.32
Claims Data Capturing	42.00	1.67	25.00	1.05
NHIS Review/Reforms	10.00	0.39	7.00	0.3
NHIS Data Integration	12.00	0.50	24.95	1.05
Assurance Services for Claims & Control Systems Strengthening	8.10	0.33	6.90	0.29
Corporate Social Responsibility	5.11	0.21	3.00	0.13
Contingency	11.00	0.43	10.50	0.44
<b>Total</b>	<b>2,534.89</b>	<b>100.00</b>	<b>2,375.24</b>	<b>100.00</b>

## 13.0 OBSERVATIONS AND RECOMMENDATIONS

### Funding Gap

13.1 The Committee observed that, just as it was in 2018, no funding gap had been recorded at the time of the deliberations on the proposed Formula for the disbursement of NHI Funds. The Committee also observed that, contrary to Section 40(3) of the National Health Insurance Act, 2012 (Act 852), NHIA expended more than 10% (14.94%) of its annual funding amount (statutory and IGF) on non-core activities (support to the Ministry of Health and health projects) in 2018. The Committee was displeased with the NHIA and raised serious concerns about the issue. Table 3 below shows the trends in the proportion of annual funding amount allocated to non-core activities as trends in budgetary funding gap between 2015 and 2019.

**Table 3**

Item	2015 (GH¢)	2016 (GH¢)	2017 (GH¢)	2018 (GH¢)
Statutory Funds and IGF	1,285.16	1,669.83	1,882.05	2,375.24
MOH and Health Projects	64.88	166.55	163.27	354.854
<b>Proportion of Non-Core Expenditure</b>	5.05%	9.97%	8.68%	14.94%
<b>Funding gap</b>	887.35	337.06	379.69	0.00
Total Receipts	2,172.51	2,006.89	2,261.73	2,375.24
Total Expenditure	2,172.51	2,006.89	2,261.73	2,375.24

### Information and Communication Technology

13.2 Regarding Information and Communication Technology (ICT), it would be recalled that NHIA officially launched the NHIS Mobile Membership Renewal and Authentication Project in December 2018, to enable clients renew their membership from anywhere in the Country, using any mobile phone with a sim registered to any



mobile money service. The implementation of the Project is underway and clients who wish to do so under the system, can send a text message to the short code \*929#. Clients can even do the mobile renewal on behalf of others by sending a text message to the same short code \*929#. The Project seeks to reduce the waiting time for clients, reduce clients' transportation costs, reduce income losses as members of the Scheme can spend the time saved doing business or working. Clients are also expected to receive text messages periodically to remind or alert them of the expiration of their membership so they will not be taken unawares. The Committee also observed that service providers are among the beneficiaries of the Mobile Renewal System as it makes available to them, reliable digital verification of expiry dates, allows for the use of simple inexpensive devices with low maintenance costs, brings about improved claims management and also allows for easy collection of attendance records because they are digitised.

13.3 The Authority also expects to benefit from the Project since it seeks to reduce its operational costs, increase membership under the Scheme, reduce revenue leakages and enhance the processing of claims. The Committee commends NHIA for the effort and urges it to continue devising more innovative and technological means of improving service delivery in the execution of their mandate. The Committee also entreats the National Communications Authority and for that matter the National Information Technology Agency (NITA), telecommunication companies and service providers of the Scheme to cooperate effectively with NHIA to reduce drastically or eliminate fraudsters in the system entirely to ensure successful implementation of the Project.

13.4 The Committee further noted that, in 2019, NHIA projected an amount of GH¢81.38 million to be spent on ICT system compared with the 2018 estimate of GH¢52.09 million, an increase of GH¢29.29 million which translates into a percentage increment of 56.23%. The Committee was worried about the increment and raised serious concerns on it. The Officials of NHIA however explained that the estimate

was higher because the Authority needed an ICT infrastructure including Oracle (one of the soft wares used for data management), that would enable it manage the data it collects. The ICT infrastructure is also expected to facilitate the Authority's data base integration process with the National Identification Authority. The Officials further explained that though the system appeared expensive, the one being procured by NHIA was one of the cheapest in the Country, compared with the banks and some other business entities. The Committee was also informed that the Authority had one of the biggest data base in the Country and in the sub-Saharan Africa and therefore needed such a sophisticated and modern software. It was disclosed to the Committee that the Authority has a total of 19.7 million biometrics, processes a total of about 30 million claims a year and has 120,000 clients who access health care in the Country daily. The Committee was further informed that, all installations relating to the ICT infrastructure was soon to be completed so that the expenditure on ICT would decline in the years to come since it will be left with only the aspect of maintenance.

#### **Minister of Finance to Report on Releases to NHIA**

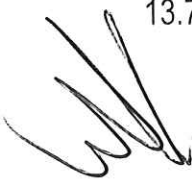
- 13.5 The National Health Insurance Law imposes an obligation on the Minister responsible for Finance to report to Parliament on funds released to the National Health Insurance Authority in respect of levies, every six (6) months. The Committee recommends that the provision be evoked to enable the House have knowledge of the financial situation of the Authority periodically, to help ensure the sustainability of the Scheme.

#### **Financing Policy for NHIS**

- 13.6 The Committee is aware that government intends developing a policy on NHIS financing to ensure the sustainability of the Scheme. The Committee expressed dissatisfaction about the delay in introducing the policy and urges the government to expedite action in that regard. The Committee is of the opinion that a National forum

would be necessary in finding the way forward to the issue of financing and the development of the policy.

### **Payments made to Nursing Trainees as Allowances**

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- 13.7 Included in the release of funds amounting GH¢358.85 million to the Ministry of Health, was an amount of GH¢163.66 million paid to nursing trainees as allowances. The Committee was displeased about the payment and requested the NHIA never to use NHIF for such purposes.

### **NHIA Regional and District Offices**

- 13.8 With the creating of the six (6) new Regions (Western North, Ahafo, Bono East, Oti, Savanna, North East Regions), NHIA needs to have six (6) more regional offices in addition to those already in existence, as part of its efforts aimed at providing a decentralised service to receive and resolve complaints by clients. The Authority has therefore made a provision of GH¢12 million for the establishment of six (6) regional offices to enhance its operations and an amount of GH¢25 million for the establishment of twenty (20) new district offices to enhance access to NHIA services.

### **Active Membership Coverage**

- 13.9 The Committee noted that the active membership coverage of the Scheme as at the end of 2018 was 10.4 million (34.7% of the estimated population of 30 million) and the Authority estimates to cover 12.4 million (41.3% of the estimated population) in 2019.

### **Prosecutions of Fraudsters**

- 13.10 As already mentioned, NHIA is gradually intensifying its ICT systems to help eliminate fraud in the Scheme to reduce revenue leakages to the barest minimum and possibly eliminate it entirely. Other efforts being made by the Authority to help save the situation, is collaborating with the Attorney-General and Minister for Justice to help train staff of its Legal Department to help with the prosecution of some of the

cases involving alleged fraudsters. This will expedite action and also serve as a deterrent.

### **Research**

13.11 It would be recalled that in 2018, no provision was made for research for purposes best known to the officials of the National Health Insurance Authority. In 2019 however, the Committee noted that an amount of GH¢0.15 million (GH¢150,000.00) is estimated to be spent on research. The Committee entreats NHIA to always make provision for research and carry it out periodically, as the findings would be very helpful for references and other purposes including enabling the Authority to draw useful lessons for redress and improvement.

### **Investments**

13.12 The issue of whether NHIA invested in Menzgold came up and the Committee was informed that the Authority's investments were only in fixed deposits with financial institutions excluding that of Menzgold. The Officials of NHIA explained to the Committee, they had never invested any funds belonging to the Authority in Menzgold.

## **14.0 CONCLUSION**

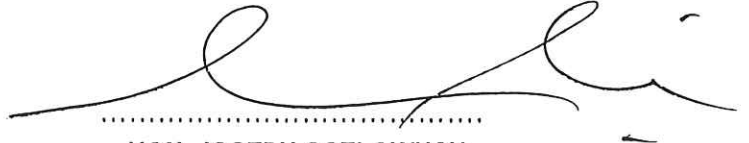
14.1 The sustainability of the National Health Insurance Scheme which bothers on funding, is very critical to Ghana's achievement of Universal Health Coverage. Unfortunately, NHIA continues to grapple with funding difficulties. It has already being mentioned that government intends developing a policy in this regard to sustain the Scheme, taking cognisance of the fact that funding is a major challenge for NHIA. The Committee has nothing more to recommend in that respect, except to say that government must expedite action to help save the situation permanently.

14.2 Based on the observations and recommendations made afore, the Committee recommends to the House to approve the Proposed Formula for the Disbursement of the National Health Insurance Fund for 2019.

Respectfully submitted.



MICHAEL AMOATENG  
ASST. CLERK TO THE COMMITTEE



HON. JOSEPH OSEI-OWUSU  
CHAIRMAN, COMMITTEE OF THE WHOLE

March 2019

# APPENDIX A

## ANALYTICAL REVIEW OF 2018 FINANCIAL PERFORMANCE & POSITIONS

### A STATEMENT OF RECEIPTS & PAYMENTS AS AT DECEMBER 31, 2018

Total amount of **GH¢ 1,473.28 million** was received from MOFEP for the year ending December 31, 2018. Other receipts during the period amounted to **GH¢ 146.25 million**, giving total receipts of **GH¢ 1,619.53 million** for the period. Total payments for the 12 months ending December 31, 2018 was **GH¢ 1,585.38 million**. Excess receipts over payments as at the period ending December 31, 2018 was **GH¢ 34.15 million**.

#### RECEIPTS & PAYMENTS – 2018

	GH¢ million	GH¢' million
<b>RECEIPTS</b>		
NHIL (VAT & SSNIT) Releases for 2018	1,473.28	
Premium	53.52	
Processing fee Income	49.72	
Disinvestments	28.82	
Donor Receipt & Other Income	14.19	
<b>Total Receipts</b>		<b><u>1,619.53</u></b>
<b>PAYMENTS</b>		
Claims Paid	1,047.70	
Support to MOH & Partner Institutions	190.23	
Support to District Health Project & M & E	22.08	
Admin. Support to District Offices	12.30	
Authority Operations	178.53	
Nationwide ICT	7.91	
Biometric ID Cards & Authentication	82.97	
Purchase of Investment	17.72	
Archival Services & Digitization	10.56	
Claims Processing Centers	0	
Call Center	0.01	
Support for NHIS Related Research	0	
Office Building & other Assets	6.82	
Capitation Rollout	0	
Publicity & Communication	0.87	
NHIS Review	0	
NHIS Data Integration	7.68	
Assurance Service for Claims & Control	0	
<b>Total Payments</b>		<b><u>1,585.38</u></b>
<i>Cash and Bank Balance as at Dec. 31, 2018</i>		<b><u>34.15</u></b>

# APPENDIX B

## REVIEW OF 2018 BUDGET ALLOCATION & PERFORMANCE

On accrual basis, total budget expenditure for the year ending December, 2018 was **GH¢1,732.66 million**, against an annual budget of **GH¢2,375.24 million**, resulting in a positive budget variance of **GH¢ 642.58 million**. This represents a budget execution rate of **73%** for the same period.

### 2018 BUDGET ALLOCATIONS & PERFORMANCE

	2018 Annual Budget	2018 Actual Dec 31	Budget Variance	Execution Rate
	¢'m	¢'m	¢'m	%
Subsidies & Claims	1,581.74	1,140.00	441.74	72%
Support to MOH & Partner Institutions	164.81	164.81	0.00	100%
District Health Projects & M&E	27.38	27.38	0.00	100%
Admin. Support to District Offices	67.02	26.13	40.89	39%
Authority Operations	218.25	181.93	36.32	83%
Nationwide ICT System	52.09	36.48	15.61	70%
Biometric ID Card, Equipment & Authentication System	96.25	96.25	0.00	100%
Claims Archival System & Digitization	15.60	9.58	6.02	61%
Claims Processing Center	41.10	0.00	41.10	0%
Call Center	0.70	0.01	0.69	1%
Office Building	25.20	3.67	21.53	15%
Health Related Research	0.15	0.00	0.15	0%
Sensitization, Publicity & Marketing	7.60	0.43	7.17	6%
Claims Data Capturing	25.00	25.00	0.00	100%
NHIS Review	7.00	0.00	7.00	0%
NHIS Data Integration	24.95	12.95	12.00	52%
Assurance Services for Claims & Cont.	6.90	6.90	0.00	100%
Corporate Social Responsibility	3.00	1.14	1.86	38%
Contingency	10.50	0.00	10.50	0%
	<b><u>2,375.24</u></b>	<b><u>1,732.66</u></b>	<b><u>642.58</u></b>	<b>73%</b>

# APPENDIX C

## DETAILS OF 2019 NHIF ALLOCATIONS

No.	ITEM	Amount GH¢ 'm	% of Fund	Details	2019 GH¢	2018 GH¢
1.0	Claims for 2019	1,537.24 ----- Total 1,537.24	60.64%	<i>Claims Arrears: 2019/2018</i>	0.00	181.74
				<i>Claims Payment for 2019</i>		
				1.1 Premium Subsidy- Formal	156.30	196.30
				1.2 Claims Subsidy	1,318.74	1,144.28
				1.3 Premium- Informal	62.20	59.42
2.0	NHIA Operational Cost	265.61	10.48%	2.1 Compensation 2.2 Goods & Services 2.3 Assets	211.78 49.24 4.59	168.10 44.76 5.39
3.0	Support to District Offices	56.90	2.24%	3.1 Admin Support to District Offices 3.2 District Staff Training & Dev't. 3.3 District Vehicles- 50 no.	41.62 4.42 10.86	51.62 6.00 9.40
4.0	Support to MOH	238.65	9.41%	<i>Public Health &amp; Preventive Care</i> 4.1 Malaria Contol Programs 4.2 Cancer Screening (Prostate, Cervical & Breast) 4.3 Sickle Cell Screening 4.4 ARV Medicines & Counterpart Funds 4.5 Ambulance Service 4.6 Support for Allied Health Professional Council Project 4.7 Expanded Prog on immune (EPI) Vaccines (Outstanding for 2016 & Addition for 2019) 4.8 Rabbies Vaccines 4.9 Malaria Vector Control: Labiofam 4.10 Psychotherapeutic Medicines 4.11 Contraceptives 4.12 Tetanus Immunization 4.13 Anti-snake W/African Polyvalent Sera (PFR) 4.14 CSM Vaccines & Medicines 4.15 Commodities for TB 4.16 Blood Clection Bags & Ragents For NBTS 4.17 Ebola Emergency Ope Centre 4.18 Fellowship for Continuining Students  <i>Health Service Investment</i> 4.20 Const. Health Training Schools 4.21 Supply of Lift to Hosp. (Finl Pmt) 4.22 Health Provider Sys. Integration	51.00 0.00 2.00 18.00 6.00 0.00 73.00 2.20 0.00 7.35 2.10 2.10 15.00 2.10 2.10 1.05 0.00 4.00	45.90 0.52 0.52 21.00 7.35 5.25 21.00 2.20 1.75 7.35 2.10 1.05 2.10 2.10 1.05 1.05 0.52
5.0	Support for District Health Projects	31.13	1.23%	5.1 District Health Projects 5.2 Special Projects 5.3 Monitoring & Evaluation	19.25 5.00 6.88	17.88 4.00 5.50
7.0	Claims Processing	40.20	1.59%	7.1 Const of Ultra Modern CPC	30.00	30.90



# APPENDIX C CONT.

No.	ITEM	Amount GH¢ 'm	% of Fund	Details	2019 GH¢	2018 GH¢
	Centers & E-Claims			7.2 CPC Software Enhancement & Support 7.3 CPC Data Center Maintenance	9.80 0.40	9.80 0.40
8.0	Biometric ID Cards & Authentication System	111.51	4.40%	8.1 Enrolment Kit & Smart Printers – 250 no. Scheme Reg. Set @ GH¢42,500.00 8.2 Colour Ribbons 8.3 Health Provider Auth. 8.4 Biometric ID Card (6.0 million) 8.4 ID Cards Printing Consumables - 9,000 no. ribbons @ Ghc 390 8.5 Rollout of Authentication Solution	10.60 13.90 2.00 81.50 3.51 0.00	6.80 0.00 6.75 65.00 8.70 9.00
9.0	Nationwide ICT Network	81.38	3.21%	<b>Licensing &amp; Application Support</b> 9.1 ERP & Application License 9.2 ISO Security Certification  <b>Nationwide Network Maintenance</b> 9.3 Document Management System  9.4 Infrastructure & SLA mgt tool & Hardware maintenance  9.5 ICT Solution (EBS, BMS,DC/DR  <b>ICT Equipment &amp; Accessories</b> 9.6 Computers & Access -500 no. 9.7 Mobile Platform 9.8 LAN switches & firewalls 50 no 9.9 VSAT relocation-new reg.centre 30 no. 9.10 Multi-Function Printer, Projectors and Scanners 9.11 WAN & Internet (MTN,Vodafon MAINONE and NITA) 9.12 Provider Stamp- M & D Council  9.13 Multi-year Reg. & E-Receipt 9.15 E-Claims/Claim IT Implementation  9.16 POS Printers (50 No), Net BK (20 No), & Consumables (Ghc 7,920/District Office. 9.17 System Modification for NIA Integration  9.18 License, Mainte & Support (SAGE Accounting Software	7.70 0.55  2.50  3.50 38.00  2.25 0.90 0.50 0.30 0.30 2.50 0.30  0.00 8.63  2.32 10.00  1.13	5.50 0.35  0.95  1.00 28.75  1.80 0.90 0.40 0.69 0.20 1.80 1.50  0.45 2.00  1.80 4.00  0.00
10.0	Office Buildings	57.72	2.28%	10.1 Ongoing Projects (9 no. District Offices, 6 no. District Offices Yet to be awarded and 4 Units Washrooms)  10.3 New Projects (6 no. Regional Offices) 10.4 New Projects (20 no. New District Offices)	20.72  12.00 25.00	25.20  0.00 0.00
11.0	Call Center	1.00	0.04%	11.1 Call Center Operational Cost	1.00	0.70

# APPENDIX C CONT.

No.	ITEM	Amount GH¢ 'm	% of Fund	Details	2019 GH¢	2018 GH¢
12.0	Archival System & Document Management	17.60	0.69%	12.1 Materials, Storage, & Services 12.2 Document Digitization	14.00 3.60	12.00 3.60
13.0	Support for NHIS Related Research	0.15	0.01%	13.1 Support for NHIS-related Research work	0.15	0.15
14.0	Sensitization, Publicity & Marketing	7.60	0.30%	14.1 Sensitization, publicity, publicity tools, and marketing programs	7.60	7.60
15.0	Claims Data Capturing	42.00	1.66%	15.1 To capture 60 million claims data	42.00	25.00
16.0	NHIS Restructuring	10.00	0.39%	16.1 Policy, Operational & System Reforms	10.00	7.00
17.0	Data Integration	12.00	0.47%	17.1 Data Integration (EDI Solution)	12.00	24.95
18.0	Assurance Services for Claims & Control Systems Strengthening	8.10	0.32%	18.1 Assurance Services for Claims & Control System Strengthening	8.10	6.90
19.0	Corporate Social Responsibility	5.11	0.20%	Corporate Social Responsibility	5.11	3.00
20.0	Contingency	11.00	0.43%	20.1 Amount allocated for contingencies	11.00	10.50
	<b>Total</b>	<b>2,534.89</b>	<b>100%</b>	<b>Total</b>	<b>2,534.89</b>	<b>2,375.25</b>