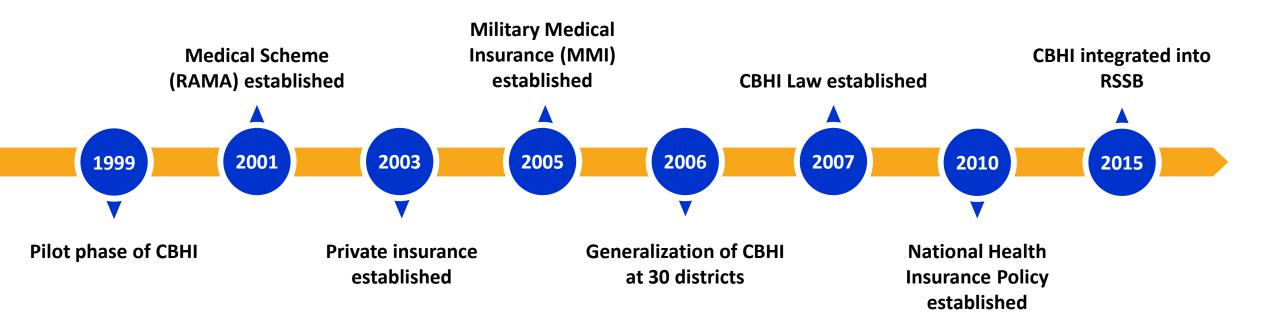
Community Based Health Insurance (CBHI): An Overview

August 2023

Community Based Health Insurance (CBHI - Mutuelle de santé) in Rwanda is based on the traditional Rwandan values of mutual aid and community solidarity

The scheme has grown significantly since its inception in 1999, when it covered only 7% of the population in three pilot districts

Rwanda's CBHI is one of the most successful CBHI schemes in Africa, thanks to government support and commitment to its expansion The health insurance landscape in Rwanda has undergone significant changes over the past 16 years, with the CBHI scheme being fully integrated into RSSB in 2015





Law No 04//2015 of 11/03/2015 that gives RSSB the responsibility to manage CBHI.

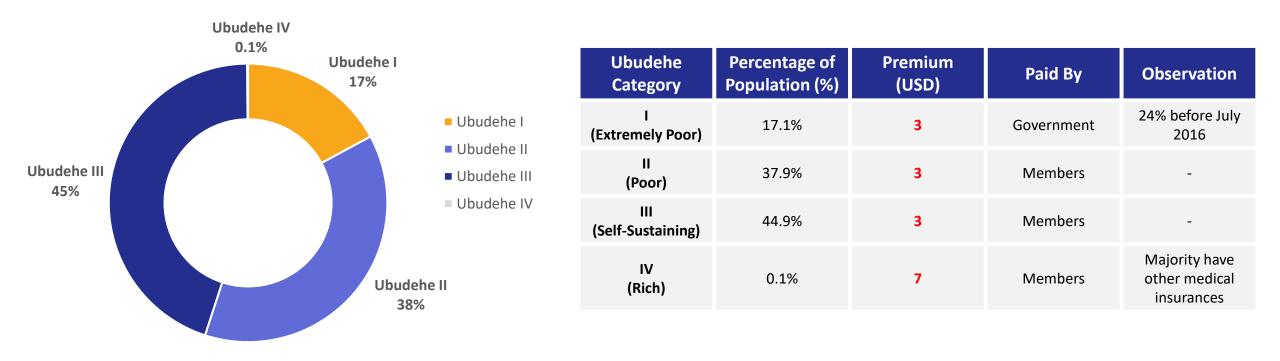
Law No 03/2015 of 02/03/2015 governs the organization of CBHI.

Implementing Orders

- Prime Minister's Order: Additional sources
- Ministerial Instructions: Mobilization committees
- Ministerial Order: CBHI members' contributions
- Ministerial Order: Medical services provided to CBHI members



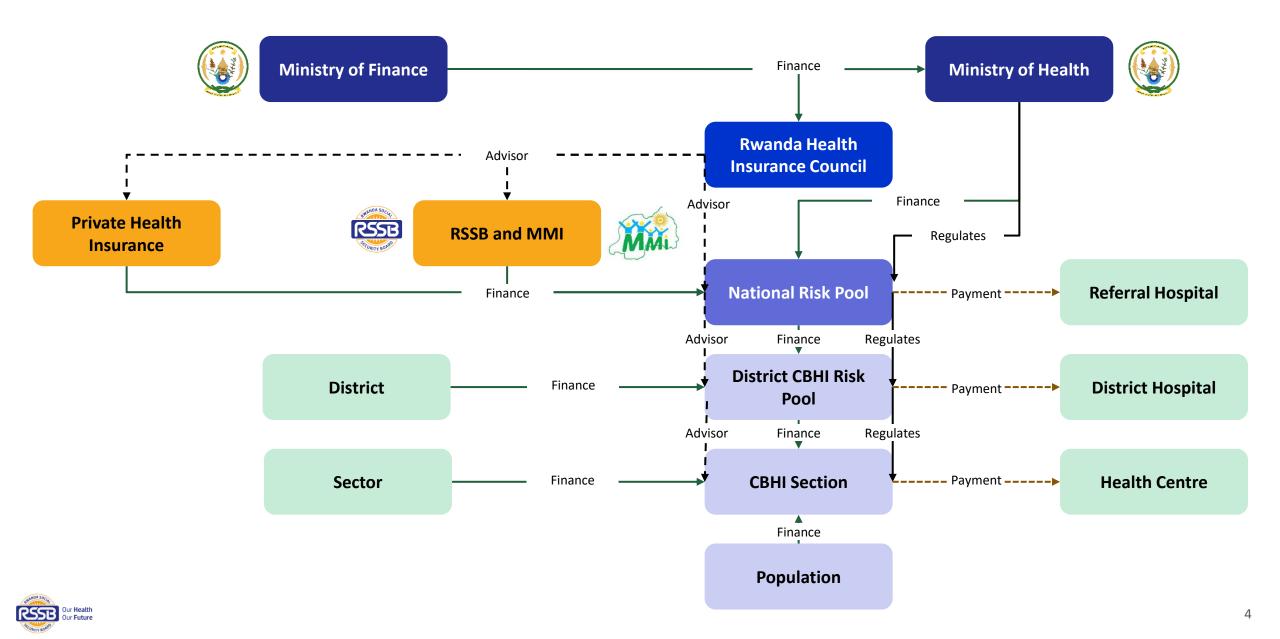
About 83% of the population belongs to Category II and III of the Ubudehe categorization, and they pay for their own CBHI premiums



The national socio-economic categorization, Ubudehe, classifies Rwandans into four groups based on their economic status.

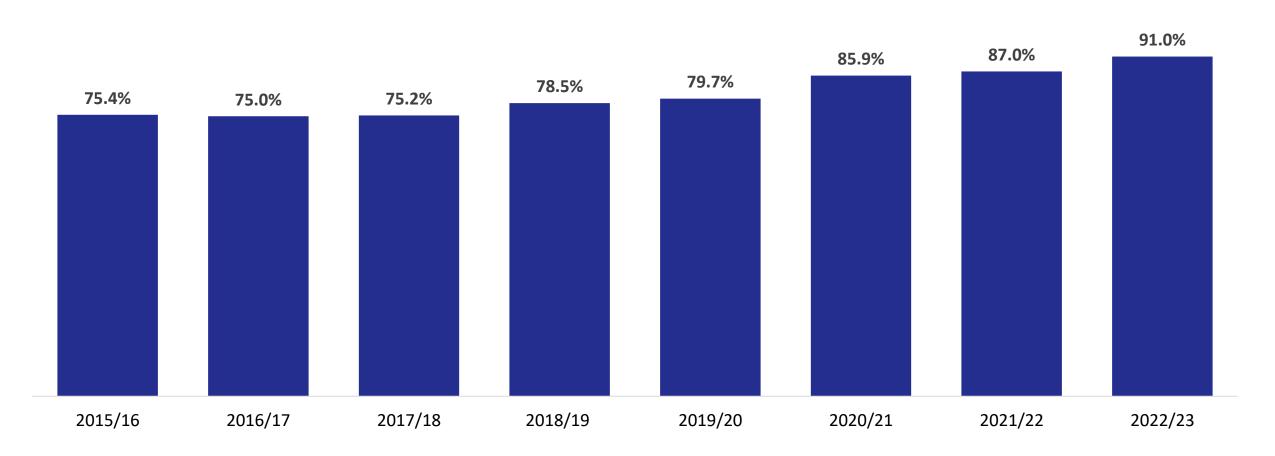


The structure of Rwanda's health insurance is as below:



The coverage rate of CBHI has increased from 75% in FY 2016 to 91% in FY 2023, a significant increase in just 8 years

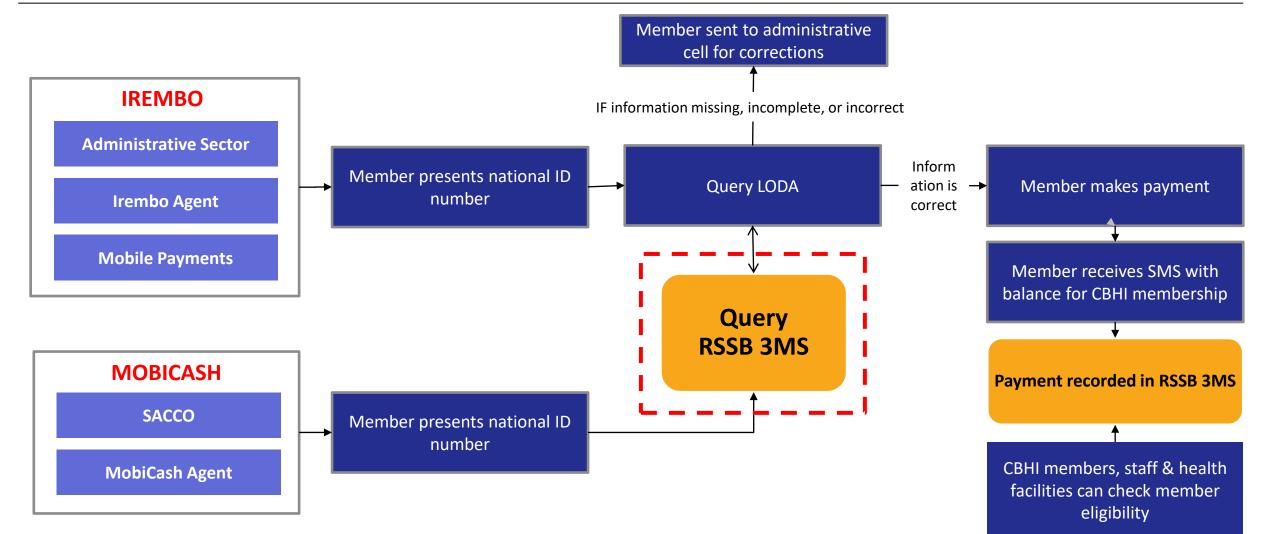
CBHI Coverage Rate , 2015 – 2023 Percentage





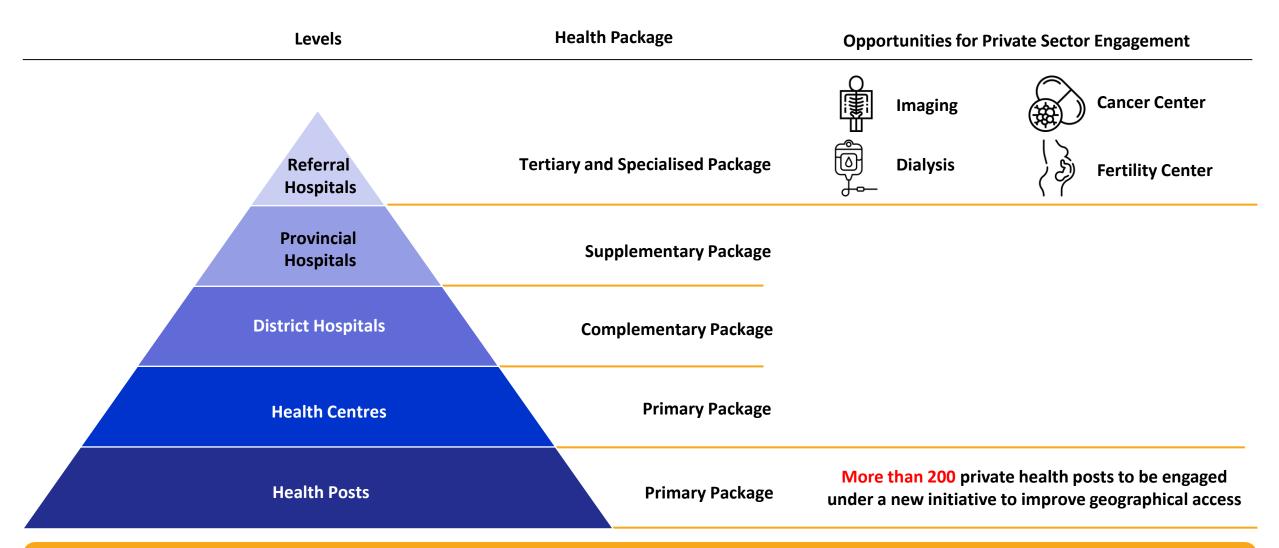
CBHI's digitalization of revenue collection system has made it easier and more efficient for members to pay their premiums, improving the scheme's financial sustainability

CBHI Digital Revenue Collection System





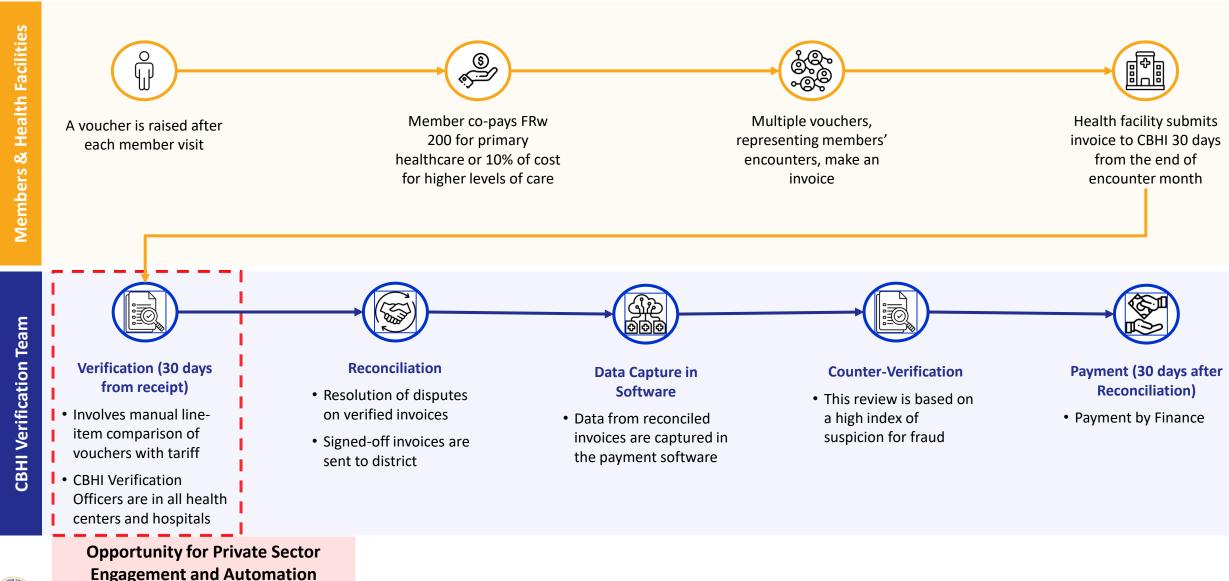
There are many opportunities for the private sector to engage in Rwanda's health sector



With the exception of one private national referral hospital and more than 200 health posts under the new initiative to improve geographical access, all health facilities utilized by CBHI members are public sector-operated. A strict referral system controls the movement of patients from one level of care to another.



The payment process for service providers requires the cooperation of both health facilities and CBHI verification teams.



Our Health Our Future The success of CBHI depends on the close collaboration of all five major stakeholders, stated below



- 1 Ministry of Finance and Economic Planning (MINECOFIN)
- Funds mobilization
- Overall supervision of RSSB as line Ministry



- 2 Ministry of Health (MINISANTE)
- Payment of subsidies provided by the Law (13% of the MoH budget)
- Elaboration of the Health policy (Medical acts & service package, prices , coding.....)

- Ministry of Local Government (MINALOC)
- Mass mobilization & sensitization,

3

- Ubudehe (LODA) and NIDA databases management,
- To issue Ubudehe certificate for those who are not in the database



- 4 National Bank of Rwanda (BNR)
- Regulator of insurance industry



- 5 Rwanda Social Security Board (RSSB)
- Full management of CBHI scheme:
 - Collection of contributions
 - Registration & membership management
 - Benefits provision
 - Payment of service providers

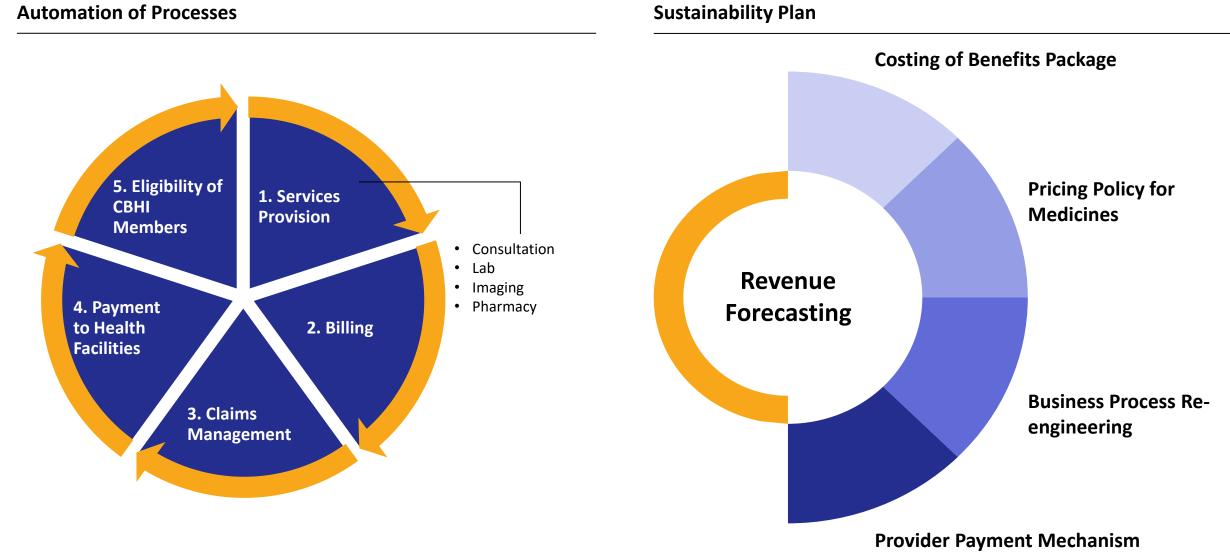


CBHI scheme faces a variety of challenges that require a multistakeholder approach to overcome them



The struggle between high coverage and limited resources in CBHI

CBHI is now focusing on automating processes and forecasting revenue in order to achieve financial sustainability and better serve our members







Thank You!

