

Country Profile Republic of Ghana

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Legal System

Ghana is a unitary republic and a constitutional democracy. It operates with a mixed system of English Common law and customary law. The 1992 Constitution is the highest legal authority. Ghana operates under a dualist system in regards to international treaties.

Health Care System

Prior to the National Health Insurance Act 2003, Ghana had a 'cash and carry' health delivery system, where all expenses were out of pocket and had to be paid prior to receiving any medical services.

The National Health Insurance Act 2003 established a universal health system (National Health Insurance Scheme), with particular attention paid to the poor and indigent population. The act also creates the National Health Insurance Fund and National Health Insurance Levy.

It is has now been replaced by the National Health Insurance Act 2012, with small but positive changes made to the new act to further the success of the universal health care system.

Treaty Ratifications

	Signed	Ratified	Acceded
International Convention on Economic, Social and Cultural Rights (ICESCR)	07 September 2000		07 September 2000
Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)	17 July 1980		02 January 1986
Convention of the Rights of the Child	02 September 1990	02 September 1990	-

(CRC)			
International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families	06 September 2000	06 September 2000	-

Constitution

The Constitution [1] does not specifically establish a right to health. However a number of health-related rights can be found throughout the constitution:
Article 13.

(1) No person shall be deprived of his life intentionally except in the exercise of the execution of a sentence of a court in respect of a criminal offence under the laws of Ghana of which he has been convicted.

Article 24.

(1) Every person has the right to work under satisfactory, safe and healthy conditions, and shall receive equal pay for equal work without distinction of any kind.

Article 26.

(2) All customary practices which dehumanise or are injurious to the physical and mental well-being of a person are prohibited.

Article 28.

(1) Parliament shall enact such laws as are necessary to ensure that -

(a) every child has the right to the same measure of special care, assistance and maintenance as is necessary for its development from its natural parents, except where those parents have effectively surrendered their rights and responsibilities in respect of the child in accordance with law;

(c) parents undertake their natural right and obligation of care, maintenance and upbringing of their children in co-operation with such institutions as Parliament may, by law, prescribe in such manner that in all cases the interest of the children are paramount;

(d) children and young persons receive special protection against exposure to physical and moral hazards;

(2) Every child has the right to be protected from engaging in work that constitutes a threat to his health, education or development.

(3) A child shall not be subjected to torture or other cruel, inhuman or degrading treatment or punishment.

(4) No child shall be deprived by any other person of medical treatment, education or any other social or economic benefit by reason only of religious or other beliefs.

(5) For the purposes of this article, "child" means a person below the age of eighteen years.

Article 34

(2) The President shall report to Parliament at least once a year all the steps taken to ensure the realization of the policy objectives contained in this Chapter and, in particular, the realization of basic human rights, a healthy economy, the right to work, the right to good health care and the right to education¹

Overview of Relevant Provisions

Indicator	National Legislation	National Regulation
Government Commitment Mandatory language	The National Health Insurance Act 2012 (Act 852) is an act to establish a National Health Insurance Authority to implement a National Health Insurance Scheme, establish a National Health Insurance Fund to pay for the cost of health care services to members of the Scheme, establish private health insurance schemes, and to provide for related matters. [2]	The National Health Insurance Authority was established by the National Health Insurance Act 2003 (repealed; now 2012 Act 852) to regulate the National Insurance Scheme. The object of the Authority is to secure the implementation of a national health insurance policy that ensures access to basic health care services to all residents. [3]
Sustainable Financing State reimbursement scheme	The National Health Insurance Act 2012 establishes a nationwide health insurance scheme that shall provide financial access to the basic healthcare services for residents of the country. [4]	The National Health Insurance Service covers primary healthcare services and the related drugs for their services which are listed on the NHIS Essential Medicines List; members of the National Health Insurance Scheme are provided free medicines and there is no copayment. [5]
Sustainable Financing State subsidy	A National Health Insurance fund is established within the National Health Insurance Act. The Fund is aimed at paying for healthcare services costs for members of the National Health Insurance Fund. It specifically precludes both private health insurance schemes and private mutual health insurance schemes, to the benefit of the State-run National Health Insurance Scheme. [6]	The National Health Insurance Fund sources its funds from: -Premiums from subscribers -2.5% National Health Insurance Levy -2.5% Social Security and National Insurance Trust -Funds from Government of Ghana, to be allocated by Parliament -Returns on Investment [7]

¹ This Article is only a Directive Principle and does not entail a legally enforceable right

<p>Rational Selection Essential medicines framework</p>	<p>The Authority shall in collaboration with healthcare providers and with the approval of the Minister develop a National Health Insurance Medicines List and Medicines Tariff derived from the Essential Medicines List approved by the Minister [8]</p>	<p>Essential Medicines List 2010</p> <p>The most recent EML is from 2010; the list is based on the revised Standard Treatments Guideline (2010). The criteria used for the selection of medicines are dependent on those used for the selection of medicines based on the World Health Organisation's Model List of Essential Medicines [9]</p>
<p>Affordable Prices Availability of generics</p>	<p>Each medicine on the Health Insurance Medicines List shall be referred to by the generic name of the medicine unless it is necessary to use the brand name of the medicine [10]</p>	<p>Ghana Essential Medicines List 2010</p> <p>All EMs contained in the list specify whether or not they are reimbursed by the National Health Insurance Scheme [11]</p>

Observations

<ul style="list-style-type: none"> ▪ A right to essential medicines, is not explicitly stated in the Ghanaian Constitution. ▪ Ghana has ratified a large number of rights-related Treaties, with many rights deriving from Treaty obligations embedded in the Constitution <ul style="list-style-type: none"> ▪ Being a developing country, Ghana faces additional challenges. This includes financial constraints coupled with a poor population that are exempt from making contributions to the NHIS and also infrastructure limitations that are not as present in developed countries. ▪ Ghana's move from a cash and carry health care system to one of universal coverage has been a very successful undertaking; under the cash and carry system much of the population, especially the poor, did not receive basic health care or access to essential medicines. For example, exemptions under the cash and carry system did exist for certain groups (those over 70, children under five, some communicable diseases, pregnant women and the indigent) to receive free healthcare, however they very rarely occurred due to identification issues and the government not reimbursing the services. Under the current system these groups are now entirely covered for the free healthcare services mentioned, as legislated in the National Health Insurance Act 2012 (s.29), and implemented through the National Health Insurance Authority. The current system is still evolving, but it has had an overall positive effect on the population's ability to access healthcare. [12] ▪ In general, the decentralisation established in the Constitution has not translated well in reality; this issue is somewhat peripheral- as the DMHISs are well established and independently operating- but the strong
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centralisation is prohibitive to effective and efficient government which affects all areas of government. For example, statistical data is a problem area, which is important for analysis in the assessment of health care services.

Government Commitment Overview

National Health Insurance Act 2012

Object of the Authority

2. The object of the Authority is to attain universal health insurance coverage in relation to

- (a) persons resident in the country, and
- (b) persons not resident in the country but who are on a visit to this country

And to provide access to healthcare services to the persons covered by the Scheme. [13]

Functions of the Authority

3. To achieve the object of the Authority, the Authority shall

- (a) implement, operate and manage the National Health Insurance Scheme;
- (b) determine in consultation with the Minister contributions that should be made by members of the National Health Insurance Scheme;
- (c) register members of the National Health Insurance Scheme;
- (d) register and supervise private health insurance schemes;
- (e) issue identity cards to members of the National Health Insurance Scheme;
- (f) ensure
 - (i) equity in health care coverage
 - (ii) access by the poor to healthcare services
 - (iii) protection of the poor and vulnerable against financial risk;
- (g) grant credentials to healthcare providers and facilities that provide healthcare services to members of the National Health Insurance Scheme;
- (h) manage the National Health Insurance Fund;
- (i) provide a decentralised system to receive and resolve complaints by members of the National Health Insurance Scheme and healthcare providers;
- (j) receive, process and pay claims for services rendered by healthcare providers;

- (k) undertake public education on health insurance on its own or in collaboration with other bodies;
- (l) make proposals to the Minister for the formulation of policies on health insurance;
- (m) undertake programmes that further the sustainability of the National Health Insurance Scheme;
- (n) develop guidelines, processes and manuals for the effective implementation and management of the National Health Insurance Scheme;
- (o) ensure the efficiency and quality of services under the national and private health insurance schemes;
- (p) protect the interest of members of private health insurance schemes;
- (q) identify and enrol persons exempt from payment of contribution to National Health Insurance into the National Health Insurance Scheme;
- (r) monitor and ensure compliance with this Act and any Regulations, guidelines, policies, processes and manuals made under this Act; and
- (s) perform any other function conferred on it by this Act or that are ancillary to the object of the Authority. [14]

Sustainable Financing (State Reimbursement scheme) Overview

National Health Insurance Act 2012

Establishment of the National Health Insurance Scheme

26. (1) There is established a nationwide health insurance scheme to be known as the National Health Insurance Scheme.

(2) The National Health Insurance Scheme shall provide financial access to the basic healthcare services specified under section 30 for residents of the country.

[15]

Membership of the scheme

27. (1) A resident of Ghana shall belong to the National Health Insurance Scheme.

(2) A member of the Scheme may belong a private health insurance scheme.

(3) Membership of the Scheme is by registration.

(6) Upon registration, the Authority shall issue a card with a unique permanent number to the registered member.

(9) A member of the Scheme who moves to reside in a district other than the district where the member enrolled shall update information on that person's membership at the office of the Authority responsible for the new district of residence.

(11) The Board shall give the necessary assistance to disadvantaged applicants to facilitate their registration as members.

(12) An employer shall ensure that a person employed by that employer is

registered under the National Health Insurance Scheme. [16]

Contributions

28. (1) A member of the National Health Insurance Scheme shall pay the contributions that the Board may in consultation with the Minister prescribe.

(2) Without limiting subsection 1, the time within which contributions shall be paid and the mode of payment shall be determined in accordance with Regulations made by the Minister acting on the advice of the Board.

(3) In determining the contributions to be paid by members of the Scheme the Board shall take into account the social nature of the Scheme. [17]

Exemptions to contributions

29. The categories of persons exempted from the payment of contributions under the Scheme include:

(a) a child;

(b) a person in need of ante-natal, delivery and post-natal healthcare services;

(c) a person with mental disorder;

(d) a person classified by the Minister responsible for Social Welfare as an indigent;

(e) categories of differently-abled persons determined by the Minister responsible for Social Welfare;

(f) pensioners of the Social Security and National Insurance Trust;

(g) contributors to the Social Security and National Insurance Trust;

(h) a person above seventy years of age; and

(i) other categories prescribed by the Minister. [18]

Benefits

30. (1) The Minister shall prescribe the healthcare benefits package including any relevant family planning package to be provided under the National Health Insurance Scheme.

(2) The Authority shall provide information at the point of member registration, about the benefits package, rights and responsibilities of members and complaints and dispute resolution mechanisms under the Scheme.

(3) The Authority shall assess the healthcare benefits package provided under the Scheme every six months and advise the Minister accordingly. [19]

Quality Assurance

31. (1) The Authority shall in collaboration with the relevant agencies ensure that healthcare providers operating under the Scheme implement policies that guarantee quality healthcare to members of the Scheme and carry out clinical audits. [20]

Sustainable Financing (State Subsidy) Overview

Establishment of a National Health Insurance Fund

39. There is established by this Act a National Health Insurance Fund. [21]

Object of the Fund

40. (1) The object of the Fund is to pay for the cost of healthcare services for members of the National Health Insurance Scheme.

(2) For the purpose of implementing the object, moneys from the Fund shall be expended as follows:

(a) to pay for healthcare costs of members of the National Health Insurance Scheme;

(b) to pay for approved administrative expenses in relation to the running of the National Health Insurance Scheme;

(c) to facilitate provision of or access to healthcare service; and

(d) to invest in any other facilitating programme to promote access to health service as determined by the Minister in consultation with the Board. [22]

Sources of money for the Fund

41. (1) The sources of money for the Fund are

(a) the National Health Insurance Levy provided for under section 47;

(b) two and one half percentage points of each person's contribution to the Basic National Social Security Scheme;

(c) moneys that are approved for the Fund by Parliament;

(d) moneys that accrue to the Fund from investments made by the Authority;

(e) grants, donations, gifts and any other voluntary contributions made to the Fund;

(f) fees charged by the Authority in the performance of its functions;

(g) contributions made by members of the Scheme; and

(h) moneys accruing under section 198 of the Insurance Act, 2006 (Act 724) [23]

Levy on the supply of goods and services

47. (1) There is imposed by this Act a National Health Insurance Levy charged at the rate of two and one half percent calculated on

(a) each supply of goods and services made or provided in Ghana,

(b) each importation of goods, and

(c) supply of an imported service,

Unless otherwise exempted in this Act or under the Regulations.

(2) The levy is payable at the time the goods and services are supplied or imported.

(3) For the purposes of the National Health Insurance Levy, the provisions on supply of goods and services in the enactment that establishes the revenue or collection of this levy by the Minister responsible for Finance shall apply.

(4) The Minister responsible for Finance may by Legislative Instrument amend the rate of the levy specified in subsection (1). [24]

Types of private health insurance schemes

53. The following types of private health insurance schemes may be established and operated in the country:

(a) private commercial health insurance schemes, and

(b) private mutual health insurance schemes [25]

Business Venture

71. A private commercial health insurance scheme is a business venture and is not entitled to a subsidy from the Fund [26]

No subsidy for private mutual health insurance scheme

83. A private mutual health insurance scheme is not entitled to receive subsidy from the National Health Insurance Fund established under this Act. [27]

Rational Selection Overview

National Health Insurance Act 2012, Act 852

33. (1) The Authority shall in collaboration with healthcare providers and with the approval of the Minister develop a National Health Insurance Medicines List and Medicines Tariff derived from the Essential Medicines List approved by the Minister.

(2) The Authority shall review the National Health Insurance Medicines List and Medicines Tariff each year in consultation with the healthcare providers and with the approval of the Minister

(3) The review of the Health Insurance Medicines List and National Health Insurance Scheme Medicines Tariff may involve the addition or deletion of medicines, classification and grouping of medicines and a review of medicine prices. [28]

Ghana Essential Medicines List 2010

The medicines listed in this document are derived from the revised Standard Treatment Guidelines (2010) of the Ministry of Health. The criteria used to guide the selection of medicines were dependent on those used for the selection of medicines for the World Health Organisation Model List of Essential Medicines

Drug selection should be based on the results of efficacy and safety evaluations obtained in controlled clinical trials and epidemiological studies, and on the performance in general use in a variety of medical settings [29]

Affordable prices Overview

National Health Insurance Act 2012, Act 852

33. (4) Each medicine on the Health Insurance Medicines List shall be referred to by the generic name of the medicine unless it is necessary to use the brand name of the medicine. [30]

35. (1) Each healthcare provider under the Scheme shall comply with the National Health Insurance Scheme Medicines List and Medicines Tariff and the National Health Insurance Scheme Service List and Service Tariff.

(2) The Authority shall undertake inspections to validate compliance with the Medicines List and Medicines Tariff and the Service List and Service Tariff. [31]

Ghana Essential Medicines List 2010

When several drugs are available for the same indication, only the drug and the pharmaceutical form that provides the more convenient benefit / risk ratio should be selected when two or more drugs are therapeutically equivalent, the selection should fall on:

- the drug that has been more thoroughly investigated,
- the drug with the most favourable pharmacokinetic properties,
- the drug with the lowest cost, calculated on the basis of the whole course of treatment,
- the drug with which health workers are already familiar
- the drug for which economically convenient manufacturing is available in the country,
- the drug which shows better stability at the available storage conditions [32]

References

- [1] 1992 Constitution of the Republic of Ghana
- [2] The National Health Insurance Act 2012 (Act 852), preamble
- [3] National Health Insurance Scheme 'National Health Insurance Authority'
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- [4] note 2, Section 2
- [5] note 3 'The Benefits of the National Health Insurance Scheme'
<http://www.nhis.gov.gh/Fags/the-benefits-of-the-national-health-insurance-scheme-2>
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- [6] note 2, Section 40, 71, 83
- [7] note 2, Section 41
- [8] note 2, Section 33
- [9] Ghana Essential Medicines List Sixth Edition 2010, Ministry of Health Ghana
National Drugs Programme, p.6
- [10] note 2, Section 33(4)
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- [12] Gajate-Garrido, G, Owusua, R, December 2013, 'The National Health Insurance
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- [13] note 2, Section 2
- [14] note 2, Section 3
- [15] note 2, Section 26
- [16] note 2, Section 27
- [17] note 2, Section 28
- [18] note 2, Section 29
- [19] note 2, Section 30
- [20] note 2, Section 31
- [21] note 2, Section 39
- [22] note 2, Section 40
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- [24] note 2, Section 47
- [25] note 2, Section 53
- [26] note 2, Section 71
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