



**APPROVED  
MEDICAL INSURANCE SCHEME FOR**

**STAFF OF KYAMBOGO UNIVERSITY**

**AUGUST 2017**

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## **DEFINITIONS OF KEY TERMS**

**In this document, unless otherwise stated the following terms shall mean:**

**University Council** means the Council set up under section 38 of the Universities and Other Tertiary Institutions Act as the supreme policy making organ of the University.

**Medical Insurance** is a type of insurance coverage that covers the cost of an insured individual's medical and surgical expenses.

**Premium** is the price of insurance or the amount paid for insurance

**Employee** means a person employed by the University on permanent and contractual terms.

**Permanent terms of employment** is a type of employment where an individual is offered an opportunity to serve the University in a specified position up to the mandatory retirement age of 60 years

**Contract terms of employment** is a type of employment in which a specific period of employment and terminal gratuity is defined in the letter of offer.

**Spouse** means a husband or wife of an employee

**Child** means a son or daughter of an officer (including a lawfully adopted child of the officer or his or her spouse) who has not attained his or her 18th birthday and is dependent upon the employee

**University** means Kyambogo University.

**Management** means the committee of Top Management set up by the Vice-Chancellor to advise him/ her on administrative matters.

## **ACRONYMS**

**KYUASA:** Kyambogo University Academic Staff Association

**KYUSASA:** Kyambogo University Senior Administrative Staff Association

**MOU:** Memorandum of Understanding

**NUEI:** National Union of Education Institutions

**OPD:** Outpatient Department

## **1.0 Introduction**

The University has a Medical Centre which provides health services to both staff and students. It also provides referrals to both staff and students to other designated health facilities on cases which cannot be provided for at the Centre.

However, the Centre does not have capacity to deal with all the medical needs for most of the staff. Consequently, the staff are referred to designated health facilities and hospitals. This arrangement has become a challenge in the provision of medical services to staff due to the fact that one has to pay all the medical bills and claim 80% of the total cost from the University later. It undermines the provision of proper and timely health services since many staff members may not afford to pay before accessing medical services. In addition, some of the designated health facilities where staffs are referred lack specialized medical services. This in most cases leads to another referral. It is also a requirement that staff obtain a referral letter from the University medical centre before receiving treatment elsewhere. If one stays far from the University, he or she cannot be able to claim if s/he gets treated elsewhere without such referrals. Staff who fall sick while on official duty outside the University premises face limitations in accessing medical services since they may not be able to obtain referrals.

Furthermore, the re-imburement of claims on medical expenses is difficult due to the bureaucracies involved. The medical expenses for treating staff at the Medical Centre and medical refund claims in FY 2015/16 was UGX 383 Million. It is also important to note that a small fraction of staff actually submit claims for a refund.

In view of the above, Kyambogo University shall acquire and implement a family medical insurance cover scheme in order to improve health service delivery for staff and their dependents.

## **2.0 The Purpose**

To enable University provide affordable, accessible, reliable, flexible, equitable, quality and sustainable health services for its staff.

## **3.0 Objectives**

- a) To enhance quality of life and productivity of staff
- b) To enable University put in place a reliable and affordable medical insurance Scheme.
- c) Identify appropriate Medical Insurance Products for staff of Kyambogo University.
- d) To put in place an effective management mechanisms for implementation of the medical Insurance Scheme

## **4.0 Eligibility**

Enrolment shall be mandatory for all staff employed by the University on permanent and on contractual terms.

The following conditions shall guide eligibility:

- a) Minimum age of joining the scheme shall be zero (0)
- b) Maximum age for being a member of the medical insurance scheme shall be seventy four (74) years
- c) The beneficiaries shall officially register with the Directorate of Human Resource.
- d) Registered Spouse
- e) Registered Children
- f) The staff member shall be required to show proof of employment with the University

- g) The staff shall pay contribution to the medical insurance scheme

## **5.0 Beneficiaries**

Kyambogo University staff insurance scheme shall cater for the following:

- a) Members of staff on permanent and contractual terms
- b) One registered spouse with the University of the above
- c) Up to four (4) biological children or legally adopted 21 years and below who are registered with the University

## **6.0 Termination of membership**

An employee shall cease to be a member under the following conditions;

- a) On resignation from the University
- b) On dismissal from the university
- c) Death of the employee

In case of death, registered dependants shall continue to benefit from the scheme up to 1 month from the date of his/ her demise as long as the membership is still valid.

## **7.0 Governance and management**

The governance structure shall consist of the University Council, Top Management, Directorate of Human Resource and Medical Centre as elaborated below:

### **7.1 University Council**

The University Council as the supreme organ shall be responsible for overall monitoring of the scheme. The Council shall:

- a) Approve and review the scheme
- b) Approve budgets and work plans
- c) Provide an oversight role



## **7.2 Top Management**

Top management shall be responsible for the following;

- a) Monitor and evaluate scheme implementation
- b) Review budgets and work plans
- c) Resource mobilization for funding the scheme
- d) Appointing Medical Insurance Committee members
- e) Report to University Council on quarterly basis

## **7.3 Directorate of Human Resources**

The Directorate of Human Resources will lead in day to day implementation of scheme.

The Directorate of Human Resources shall be responsible for assigning a Focal Person who shall have the following roles;

- a) Validate information on beneficiaries
- b) Link with the Service provider on members who cease to be employees of the University
- c) Handle issues that staff find while seeking treatment
- d) Track performance of the provider and submitting reports to management
- e) Conduct induction of new staff on the scheme and sensitization of staff on the scheme

## **7.4 Medical Centre**

The University Medical Centre shall:

- a) Provide technical support
- b) Provide Secretariat of medical insurance scheme committee
- c) Link with the Service provider on technical issues
- d) Continue to provide medical services to the students

## **7.5 Medical Insurance Committee**

Top Management shall establish a Medical Insurance Committee to oversee implementation of the policy.

**7.5.1** The role of the committee shall be:

- a) Compile and submit monthly reports to management

- b) Monitor and evaluate the scheme
- c) Advise Top Management on implementation of the scheme
- d) Advise on medical products
- e) Receive feedback from staff
- f) Mobilizing resources to support the scheme

**7.5.2** The composition of the Committee shall be:

- a) Deputy Vice Chancellor- Finance and Administration (Chairperson)
- b) Director Human Resource
- c) Rep. KYUASA
- d) Rep KYUSASA
- e) Rep. NUEI
- f) Director Medical Services-(to provide secretariat)

**7.5.3** The tenure of the committee shall be three (3) years

## **8.0 Roles and responsibilities of the University and the employees**

### **8.1 Responsibility of Kyambogo University**

The University shall;

- a) Ensure the scheme is made available to all employees that meet the eligibility criteria
- b) Sensitize staff on scheme benefits and expectations from service providers.
- c) Always update the list of staff that are beneficiaries and communicate to both the staff and service providers
- d) Assign responsibility to the Focal person
- e) Budget and pay for the scheme as agreed in the signed MOUs.
- f) Continue to support the Centre to effectively work in partnership with medical insurance service provider to provide proper health care.
- g) Continue to budget annually for funds for the Medical Centre.

## **8.2 Employee responsibilities**

The employees as their individual responsibility shall;

- a) Ensure that they update their records with Human Resource Directorate
- b) Register with service providers as guided in the signed MOUs
- c) Comply with standing orders in accessing services as provided by the insurers
- d) Liaise with the Focal Person to receive feedback on challenges encountered in accessing services
- e) Give feedback to the University on challenges encountered in accessing services through the medical Insurance Committee

## **9.0 Medical Insurance Products and Services**

The University shall acquire a family medical insurance cover at an appropriate limit of outpatient and inpatient services that would cater for each individual staff and his/her dependants for a given year.

The minimum proposed services are listed in **schedule I**.

## **10.0 Medical Services and Products Acquisition**

The University shall be guided by the existing regulations of procurement to acquire the medical insurance scheme. In acquisition of medical services and products the University shall go through competitive bidding process. The specifications and medical insurances acquisition procedure are listed in **schedule II**.

## **11.0 Equity**

In regards to equal access to services, the University shall have two categories of covers as indicated below:

- a) Cover 1 for M1-M3
- b) Cover 2 for M4-M15

## **12.0 Resource Mobilization and Funding**

Acquisition of the scheme for treatment of staff shall call for commitment by the University to set aside funds to support services. The scheme is funded through a contributory basis by both the staff and the University. The University's contribution shall be determined every year based on negotiation between Management and staff association representatives and NUEI representatives.

The staff shall be expected to contribute 2% of monthly gross salary towards the agreed premium deducted directly from source. Each staff both permanent and those on contract terms shall be obliged to contribute. External source of funding for scheme shall also be sought.

## **13.0 Treatment Abroad**

Kyambogo University Human Resources Manual under **section 18.2**. provides for referral abroad. In order to facilitate treatment abroad the University will;

- a) Establish a medical fund for treatment of complicated illness not covered by medical insurance Service Providers.
- b) When referred abroad for treatment the clearance process to access University funds shall follow guidelines as laid out in the Human resource manual.

## **14.0 Role of the University Medical Centre**

It is important to note that the University population is mostly clustered around the University which makes the University Medical Centre accessible to most staff and students. University Medical Centre has what it takes to meet accreditation requirements including OPD services, laboratory, Basic dental, minor surgery, observation wards and 24hour ambulance services.

- a) Therefore the University Medical Centre shall apply for accreditation by the insurance service provider to handle access of services where staff shall be presenting insurance scheme cards for the services.

- b) The centre shall then claim for payment of staff bills from the insurance service providers periodically as agreed in MOUs.

### **15.0 Monitoring & evaluation Frame work**

The medical insurance committee shall develop the monitoring and evaluation framework.

### **16.0 Proposal review**

Given the changing nature of the health concerns and the work dynamics in the University, this proposal shall be reviewed every after 2 years to draw lessons for improvement. The medical insurance committee shall initiate the review and forward them to Management for recommendation to council for approval.

### **17.0 Start date**

The start date for this proposal shall be FY 2017/18.

Date of approval by Council on **24<sup>th</sup> August, 2017**

Signature:

.....  
Prof. John Okedi  
**CHAIRPERSON UNIVERSITY COUNCIL**

Signature:

.....  
Charles Okello  
**SECRETARY COUNCIL**

## **SCHEDULE I**

### **MEDICAL INSURANCE PRODUCTS & SERVICES**

#### **Outpatient services**

The Outpatient services shall cover the following:

1. Routine outpatient consultation,
2. Diagnostic Laboratory and Radiology services, including CT/MRI Scans.
3. Prescribed physiotherapy up to set limits
4. Prescribed drugs and dressings.
5. Routine Dental services (excluding dentures, braces, crowns and bridges).
6. Optical Services (Only one frame allowed per annum).
7. HIV/AIDS related conditions and Prescribed ARV's up to the prescribed sublimit.
8. Routine Antenatal check-ups.
9. Postnatal care up to six weeks post-delivery.
10. Chronic and recurring conditions and genetic/congenital disorders
11. Ambulance Services and evacuation services
12. Any other products and services agreed on from time to time

#### **Inpatient services**

The inpatient services shall include the following:

1. Hospital Accommodation Charges
2. Professional fees – For all cadres of Doctors and other Healthcare Professions involved in inpatient care;
3. Intensive Care Unit (ICU and Theatre charges);
4. Prescribed Drugs/Medicines, Dressings and Internal Surgical appliances;
5. Pathology (Diagnostic Lab Tests), X-ray, Ultrasound, ECG, Computerized Tomography, MRI Scans;

6. Inpatient and Day Care Radiotherapy and Chemotherapy;
7. Prescribed In-patient Physiotherapy;
8. Day care surgery;
9. Hospital accommodation for accompanying parent and/or guardian for hospitalized children below seven (7) years;
10. Option of Overseas Referral in case need arises
11. Ambulance and evacuation services
12. Any other specifications agreed on from time to time



## **SCHEDULE II**

### **MEDICAL SERVICES AND PRODUCTS ACQUISITION PROCEDURE**

The following recommendations should be followed while conducting the process;

- 1) The Director Human Resources in liaison with the Director Medical Services should seek for guidance from Procurement and Disposal Unit on how to improve on specifications for medical insurance services in order to get the best provider and in accordance with the PPDA Act.
- 2) The successful bidder shall be able to provide the services across the country or provide evidence of partnership with other providers in form of memorandum of Understanding (MOU's).
- 3) The provider shall have alternative provisions in cases where the services cannot be fully provided at the accredited hospital / clinics
- 4) The scheme shall cover the principal member and dependants registered with the service provider in reference with guidelines in the Human Resource manual
- 5) The duration of the contract shall be one year renewable subject to mutual consent by the parties and performance of the services providers. If the provider does not meet the required standard, the contract shall be terminated after giving due notice.
- 6) The bidder shall quote month and annual premium for the health insurance services
- 7) The bidder shall submit / provide the following:
  - a) Audited books of accounts for the last three years
  - b) Evidence of managing a similar health insurance scheme worth the estimated cost
  - c) Evidence of managing a similar health insurance scheme in at least three large organizations. Evidence of proving similar health insurance services in a public and / or academic institution will be an added advantage.

- d) Brief description of IT system used in data management of health insurance services
- e) Curriculum Vitae (CV's) of relevant staff to work on the scheme (at least 10 doctors) in different specialists.
- f) The bidder should describe any extra services related to the medical scheme packages that they have been providing to their clients.
- 8) The University reserves the right to select one or more providers for the health insurance.
- 9) The University shall not be obliged to choose the lowest bidder