

By Healthix Solutions Kenya Limited

Overview

FORMAL SECTOR REGISTRATION & LINKAGES TO PAYMENT GATEWAYS

The goal of the Support for Health Insurance Schemes in the Formal Sector is to **expand the scope** of the insurance members covered from informal sector into the formal sector; which includes employers, Sacco and other organized groupings. The process is best combined with the Payment workflow to ensure linkages to an accounting system and mobile payment gateways.

In that respect, the two processes combined **drive a better user experience** for the informal and formal sector signups and payment for the insurance services, **reducing paperwork** filled by the members and agents and hampering the **Turn Around Timelines (TAT)** for the issuance of the policy details to the member (to be **made electronic** and **near real-time**).

The current Beneficiary Enrolment module is monolithic and unable to scale and the migration to a new platform makes it agile. With the above changes the process of will also be shortened to a same day processing TAT.

Executive Summary

The goal of the Support for Health Insurance Schemes in the Formal Sector is to **expand the scope** of the insurance members covered from informal sector into the formal sector; which includes employers, Sacco and other organized groupings. The process is best combined with the Payment workflow to ensure linkages to an accounting system and mobile payment gateways.

In that respect, the two processes combined **drive a better user experience** for the informal and formal sector signups and payment for the insurance services, **reducing paperwork** filled by the members and agents. Better **Turn Around Timelines (TAT)** for the issuance of the policy details to the member (to be **made electronic** and **near real-time**) **is critical to the process**.

The current Beneficiary Enrolment module is monolithic and unable to scale and the migration to a new platform makes it agile. With the above changes the process of registration can also be shortened to a same day processing TAT. The formal sector will also have greater control on their membership's enrolment and deletions.

The Beneficiary Enrollment module & redesign and migration is critical to the project, as it entails an easier process of onboarding formal sector members, dependents, the scheme benefits and exclusions, the limits and Network of providers that the members can attend.

The process of informal sector member/ Beneficiary enrolment is full of paperwork and needs to be made easier for the agents and also the members joining the scheme.

Consortium Team

Healthix Solutions registered in Kenya is the lead in this development and deployment of digital health insurance solutions. Healthix is a technology company specializing in Healthcare (Providers) and Insurance (Payers) industry; connecting Insurance/Payers and Providers with a focus to improve patient care. We are enabling a vibrant Healthcare Ecosystem through a Shared Exchange platform (Enterprise Bus) we have developed (seamless integrated exchange services between all Healthcare players).

We provide value in Claims submission, Referral management, Preauthorization requests & responses, member eligibility verification and tracking, Claims adjudication and payment management amongst other services. The shared enterprise gateway makes it possible for the different players to exchange data real-time.

Our team is versatile and well blended to provide expertise in medical health, insurance segment, analytics and visualizations. Our experience spans more than 20 years in senior Level management and technology deployment with specialty is in the development and operationalization of digital health platforms. We have project management, Product Architects, Account Managers, Terminology specialists, Software Developers and Payer expertise.

Project Description

Problem Statement

The main objective of the OpenIMIS project is to offer medical insurance to all at a rate that is affordable. OpenIMIS's current functionality for membership enrolment is geared towards the informal sector with enrolment agents going door to door to collect beneficiary data and contributions from individuals/families. The payment process is prone to misappropriation by the agents which might include non-submission of funds.

Member Enrolment is a demanding and expensive processes in the workflow of providing insurance cover to the larger population. From our experience, member enrollment is expensive largely driven by the fact that it is paper-based, agents have to collect the details for signup from the payer and send them to the Insuree, the collection and confirmation of funds receipted is laborious and the systems to capture the documentation are not fully automated with the different checks and controls to weed out un-authorized fraudulent transactions from being introduced into the system.

The current membership enrolment functional design is not efficient if the scheme operator wishes to expand coverage to formal employers and a large number of employees and their families need to be enrolled at once. OpenIMIS would need functionality to consume large amounts of beneficiary data (ideally with synchronous interoperability with human resource IT systems) at once and assign respective policies to the individual/family, while also keeping track of the contributions requirements and the corresponding incoming payments for those policies.

For every member enrolment submission a corresponding payment confirmation is critical and needed to authorize cover by the insurance company. The mobile money payment automation and accounting system integration is vital and will be handled in this project to benefit the OpenIMIS project.

If the above changes are not effected the cost element of the insurance premiums will increase and thereby reducing the propensity of Insurance sales to the larger population.

Current challenges with the current member platform

The current setup has several challenges that need to be done away with in the new development and they include;

1. Reduced paperwork especially with the forms, membership cards
2. Combine mobile phone numbers as part of the member identification process and verification at the service points.

Current challenges with the current payment model

Contributions are collected by the enrolment agent directly. The enrolment agent transfers the cash collected to the accounting person at the SHI office. In remote areas, the collected money and forms can also be given to the enrolment officer in charge (staff of SHI Board). The officer will enter the data directly into OpenIMIS. Cash will be transferred to a SHI Bank account. The enrolment officer then drives to the villages and collect the forms and cash from the enrolment assistants. This alone presents a lot of challenges which are listed but not limited to below;

- Manual application and payment process
- Difficulty in integrating the manual processes with other systems.
- No coherent and unifying data structures.
- Difficulty sharing information

Some of the expected benefits from the mobile payment and accounting system integration are;

1. Reduce the amount of time it takes to pay for premiums
2. Reduce the amount of time it takes to reimburse individual members for claims already processed
3. Reduce fraudulent transactions perpetuated by the agents either – not remitting all the cash paid by the member
4. Allow users to pay premiums directly from their mobile phones and check their transaction balances

Community Feedback

The following schedule is proposed to ensure that all the project outcomes are achieved:

Time Driven Activities

Deliverable	Timeline	Responsible
Inception Evaluation and reporting	2 weeks after project kick off	Lead Expert
Status updates on the designs & progress	Every 2 weeks	Lead Expert
Monthly publishing of the completed modules and source Code	Monthly updates on Atlassian	Lead Expert
Quarterly reports and updated work plans	5th day of every month	Project Team
Final report	Oct.2020	Lead Expert

Event Driven Activities

Deliverable	Event	Responsible
Conceptual Design of the new modules and the migration path	Review of the different deployments and any enhancements.	Project Team
Review and monthly discussions of Designs of the API endpoints	After conceptual review of the new system & monthly reviews	Project Team
Gap Analysis	After collective review of the new system architecture	Project Team
Design and Testing of the APIs	After agreed design is commissioned	Healthix Team
OpenMIS modules Appended to the new architecture	After new system has been deployed and is operational	Project Team
Project Completion	After the system architecture has been adopted and deployed.	Healthix Team

Schedule

The following is a high-level work plan.

Activity	Team
	Location
	Month/ Quarter
	Quarter
Payment Integration	
Explore the selected mobile wallets architecture	[Healthix, TZ, Nepal]
Design Mpesa & Airtel integration	[Healthix, Kenya]
Design APIs into the Mifos system	[Healthix, Kenya]
Linking of the MNO API to mobile wallets	[Healthix, TZ, Nepal, Kenya]
Linking the Mifos system to openIMIS - HL7FHIR design and configuration	[Healthix, Kenya]
	[Healthix, Kenya]
Formal Sector Member Registration	
Research, design and signoff of the Formal sector needs	[Healthix, TZ, Nepal]
Redesign of the UIs and Backend of the - APPs, Web	[Healthix, Kenya]
Digitizing the current physical forms and Output files	[Healthix, Kenya]
Connect to the respective Backend processes for calculation of Premiums	[Healthix, Kenya]
Facility and product Registry integration	[Healthix, Kenya]
Commission for agents	[Healthix, Kenya]
Payment & Formal Sector Activities	
synchronise member enrolment to payments	[Healthix, Kenya]
Notifications on SMS, email, APPs	[Healthix, Kenya]
UATs with other platforms	[Healthix, TZ, Nepal]
End user acceptance tests & Signoffs	[Healthix, TZ, Nepal]