

Denis Garand, Donna Swiderek, 2008

The objective is to provide social protection coverage including a health component and a personal accident component to the informal economy and rural workers.

The **health insurance product** covers primary and secondary health care for listed illnesses only, the coverage rate is 75% up to an annual ceiling of Rs. 20,000 per family. The DRG Diagnosis Related Group list includes deliveries, pregnancy and coverage for hysterectomies. In the second year enhancements were made to the policy: wage compensation was increased from Rs50 to Rs100 per day; a transportation benefit of Rs 300 for tribal populations was added; hysterectomy, post hospitalization drug cover and pre hospitalization examinations leading to admission were included.

The **personal accident coverage** covers the member and his or her spouse ; the capital sum on partial disability is Rs.12,500 and on total disability is Rs.25,000; in case of accidental death the capital sum is Rs.25,000, and Rs.5,000 per surviving child for up to 3 children- either to pay for their education (option a) or to pay for their marriage (in case of girls) (option b).

- 1) HF designs the benefit package
- 2) HF develops the network of hospitals and negotiates with them a discounted rate for the treatment of selected illnesses using Diagnostic Related Groups (DRGs) (75% deduction) and a cash less payment system (when a patient arrives at the hospital he/she only disburses 25% of the treatment cost as co-payment). HF facilitates the hospitalization and claims process with facilitators that provide assistance to the patients at the hospital level.
- 3) HF has developed a network of NGO partners that promote the product, facilitate communication and raise awareness among the communities, enrol members, collect the premiums and membership forms.
- 4) HF invests a tremendous amount of time in providing the NGOs and members with health care and prevention education. HF has also reduced some public health risks through claims analysis (e.g. Typhoid cases).
- 5) HF contracted with a private insurance company and endorses several functions (marketing and sales, management of enrolment and renewals, maintenance of health profiles for each member, claims management).

The flowchart illustrates the 'Saheli concept' and the interactions between various stakeholders. The central flow involves 19 NGOs, the Healing Fields Foundation, 39 Hospitals, and Members.

- 19 NGOs** and **Healing Fields Foundation** interact through:
 - 1. Product design, Education, awareness
 - 2. Promotion of the product
 - 3. Issue ID Cards
 - 4. Photo ID & info on members, enrolment fees
 - 5. Enrolment, Payment of premium Rs.336 per family of 5 & enrolment fees Rs.10→50, Photo ID
 - 6. Policy insurance
 - 7. MoU (Rates, cashless) Preamuthorization process
 - 8. Health services 25% copayment
 - 9. Claims management
 - 10. Claims payment
- Members** (represented by icons) interact with:
 - 19 NGOs** (4. Premiums)
 - Healing Fields Foundation** (2. Promotion of the product, 1. health education training per month)
 - 39 Hospitals** (8. Health services 25% copayment)
 - Nurse manned dispensaries** (in one tribal area, 9 diseases)
- 39 Hospitals** interact with:
 - Healing Fields Foundation** (6. Facilitator Collects Claims documentation)
 - Members** (Referral)
- Healing Fields Foundation** interacts with:
 - 19 NGOs** (3. Issue ID Cards)
 - 39 Hospitals** (7. MoU (Rates, cashless) Preamuthorization process)
- Members** interact with:
 - 19 NGOs** (2. Promotion of the product, 1. health education training per month)
 - Healing Fields Foundation** (5. Enrolment, Payment of premium Rs.336 per family of 5 & enrolment fees Rs.10→50, Photo ID)
 - 39 Hospitals** (8. Health services 25% copayment)
 - Nurse manned dispensaries** (in one tribal area, 9 diseases)

1) Nurse manned dispensaries

In one of the tribal areas where the nearest network hospital is about 60Km away from the hamlets, the partner NGO runs the dispensary with nurses. A list of 9 diseases can be treated at this level and the nurses refer the patients to the partner hospital for complicated cases. The creation of this dispensary has increased accessibility of care to the community and helped in reducing the cost of care.

2) Saheli concept

Members from the community are given intensive training on the product, policy and health education. They then communicate on the product across their hamlets and receive a fee of Rs.10 for every enrolment. The Saheli concept helps with accessibility and overcoming communication barriers in these remote tribal areas.

3) Prevention of epidemics through claims management

Monitoring of claims helped to identify 4 typhoid cases from the same geographical area. Healing fields' medical management team immediately notified the local public health officials who closed down the water source. This prevented further infections.

4) A strong “Client servicing”

In each network hospital a facilitator accompanies patients in consultation with a doctor, handles the pre authorization process and sends all relevant information and documents to facilitate the claims processing.

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Member feedback is also captured through post hospitalization visits (on the 3rd day and on the 10th day after the patient

is discharged from the hospital) and through two types of surveys (a patient satisfaction survey and a post insurance survey).

However Healing Fields faces **several challenges** that need to be overcome in the coming years:

- 1) Cost of administration is very high and it will be necessary to find ways of reducing the cost of delivering the programme.
- 2) Renewal rates (15%) are very low with great differences between NGOs (rates vary from 0% to 71%).

{Contribution from Mukti Bosco, Healing Fields Foundation, and Denis Garand, Consultant}