



**National Health Insurance Scheme**

# MEMBERSHIP HANDBOOK

*A Guide for enrolees on the Operations  
of the NHIS Formal Sector Programmes*





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## 1.0 *Introduction*

Health Insurance is a social security system that guarantees the provision of needed health services to persons on the payment of token contributions at regular intervals.

The National Health Insurance Scheme (NHIS) is a body corporate established by Cap No 42, LFN 2004 by the Federal Government of Nigeria to improve the health of all Nigerians at an affordable cost.

The National Health Insurance Scheme is funded from the following sources:

- Contributions from participants from the various sectors
- Fees charged by the Agency in carrying out its functions
- Returns on investments made by the Scheme
- Appropriations from the National Assembly and funds from any other sources.

### 1.1 *Why NHIS?*

The establishment of the Scheme was informed by the following factors:

- i. The general poor state of the nation's healthcare services
- ii. The excessive dependence and pressure on government provided health facilities.
- iii. Dwindling funding of healthcare in the face of rising costs.

- iv. Poor integration of private health facilities in the nation's healthcare delivery system.

## 1.2 *NHIS Vision*

A leading Agency committed to Achieving financial Access to quality healthcare for all Nigerians.

## 1.3 *NHIS Mission*

To mobilize and pool financial resources for strategic purchasing of affordable and quality healthcare for all Nigerians.

## 1.4 *The Objectives of the Scheme*

- i. To ensure that every Nigerian has access to good healthcare services
- ii. To protect families from the financial hardship of huge medical bills
- iii. To limit the rise in the cost of healthcare services
- iv. To ensure equitable distribution of health care costs among different income groups.
- v. To ensure high standard of healthcare services delivery to Nigerians
- vi. To ensure efficiency in healthcare services
- vii. To improve and harness private sector participation in the provision of healthcare services
- viii. To ensure equitable distribution of health facilities within the Federation
- ix. To ensure appropriate patronage of all levels of healthcare
- x. To ensure the availability of funds to the health sector for improved services.

## 2.0 Programmes under the NHIS

In order to ensure that every Nigerian has access to good healthcare services, the National Health Insurance Scheme has developed various programmes to cover different segments of the society.

Formal Sector	<ul style="list-style-type: none"><li>❖ Public Sector (Federal, State, Local Government, Armed Forces, Police and other Uniformed Services)</li><li>❖ Organized Private Sector</li><li>❖ Group, Individual and Family Contributors</li></ul>
Informal Sector Programmes	<ul style="list-style-type: none"><li>❖ Community Based Health Insurance</li><li>❖ Educational Institutions</li></ul>
Vulnerable Group	<ul style="list-style-type: none"><li>❖ BHCPCF</li></ul>

## 3.0 Formal Sector Social Health Insurance Programme

This programme covers employees in the formal sector (public and the organized private sectors) employment. It is for every organization with ten (10) or more employees and Individual voluntary contributors desiring to access the NHIS Standard Benefit Package.

### 3.1 Membership

NHIS Formal Sector members include contributing members from:

1. The Federal Public Service
2. The Organized Private Sector
3. Individuals, families and groups as voluntary contributors

4. Adoption (contributions made on behalf of individuals by other persons).

### 3.2 Contributions

1. For employees in the Public or Organized Private sector, contributions are earning-related and currently 15% of basic salary or 5% of the consolidated salary. The employer pays 10% of basic salary or 3.5% (consolidated salary) while the employee only contributes 5% of basic or 1.5% (consolidated salary) to enjoy healthcare benefits. The contributions made by/for an insured person entitles himself or herself, a spouse and four (4) biological children under 18 years of age, to health benefits as contained in NHIS health benefits package. Additional contributions will be required for extra dependants.
2. GIF-SHIP contributors, the rates of contributions are as follows:
  - i. An individual pays the sum of N45, 000 to participate as a single individual.
  - ii. A family of four contributes the sum of N60, 000 for the contributor and three (3) other members of the family.
  - iii. Group contributors (>10) pay N15, 000 for each participant.
  - iv. These rates are subject to changes as may be determined from time to time by the NHIS.

### 3.3 *Service delivery under the Scheme*

There are three (3) levels of service delivery in the NHIS. These are:

- i. Primary level
- ii. Secondary level; and
- iii. Tertiary level

The primary level, is your first level of contact with the NHIS System. It is from this level that you are referred to other levels as the need arises.

### 4.0 *NHIS Standard Benefit Package*

Healthcare Facilities under the Scheme shall provide the following benefit package to the enrollees:

- i. Out-patient care, including necessary consumables as in NHIS Standard Treatment Guidelines and Referral Protocol
- ii. Prescribed drugs, pharmaceutical care and diagnostic tests as contained in the NHIS Drugs List and NHIS Diagnostic Test Lists.
- iii. Maternity (ante-natal, delivery and post-natal) care for four pregnancies ending in live births under the NHIS for every insured enrollees in the Formal Sector Programme. Additional care if any still birth.
- iv. All live births eligible to cover will be covered during the post-natal period of twelve (12) weeks from the date of delivery.
- v. All preterm/premature babies eligible to cover shall be covered for twelve (12) weeks from the

- date of delivery.
- vi. Preventive care, including immunization, as it applies in the National Programme on Immunization, health and family planning education. Adult Immunizations viz. HPV, Hepatitis etc.
  - vii. Consultation with specialists, such as physicians, paediatricians, obstetricians, gynaecologists, general surgeons, orthopaedic surgeons, ENT surgeons, dental surgeons, radiologists, psychiatrists, ophthalmologists, physiotherapists, etc.
  - viii. Hospital care in a standard ward for a stay limited to cumulative 21 days per year following referral.
  - ix. Eye examination and care, the provision of low priced spectacles but excluding contact lenses.
  - x. A range of prostheses (limited to prosthesis produced in Nigeria).
  - xi. Dental care (excluding those on the Exclusion list).
  - xii. Annual medical check-up unrelated to illness

#### 4.1 Exclusions

The following conditions are excluded from the benefits package of the NHIS:

##### i. Total Exclusions

- Occupational/industrial injuries to the extent covered under the Workmen Compensation Act.
- Injuries resulting from Natural disasters, e.g.

earthquakes, landslides; Conflicts, social unrest, riots, wars.

- Epidemics
- Family planning commodities, including condoms
- Injuries arising from extreme sports, e.g. car racing, horse racing, polo, mountaineering, boxing, wrestling, etc.
- Drug abuse/addiction
- Domiciliary visit
- Mammoplasty
- Provision of contact lens
- Anti-tuberculosis drugs
- Treatment of congenital abnormalities requiring advanced surgical procedures e.g. TOF, ASD, VSD
- Artificial insemination, including IVF and ICSI
- Dental Care: Crowns and bridges, Bleaching, Implants
- Post Mortem examination

## ii. Partial Exclusions

- High technology investigations e.g. CT scan, MRI: the HMO would pay 50% of cost.
- Dialysis for acute renal failure (max. 6 sessions)

## 5.0 *How to enroll in the Programme*

### 1. **Employees of Public and Organized Private Sectors**

- An employer registers itself and its employees with the Scheme.
- Thereafter, the employer chooses a Health Maintenance Organization (HMO) from the list of NHIS accredited HMOs, who will be responsible for managing the health needs of the enrollees of the MDA or OPS Company.
- The employee registers him/herself and dependants with a Provider of his/her choice from the list of NHIS accredited Health Care Providers (HCPs).

### 2. **Group, Individual and Family Contributions, including those on adoption**

- For group, individual and family contributors, the individual registers self or family with the NHIS following the payment of the required contribution(s)
- The contributor chooses his HMO from the list of NHIS accredited HMOs and HCF from the list of NHIS accredited HCF.
- For persons under adoption, the contributions are made by the benefactors (philanthropist, organizations etc.)
- For specific adoption, the contributor defines the persons being paid for and NHIS

- will go and enroll them into the programme.
- For non- specific adoption, the contributor allows the NHIS to move into the location of choice and enroll the number being paid for.
- A waiting time of Ninety (90) days before accessing care shall be implemented for contributors.

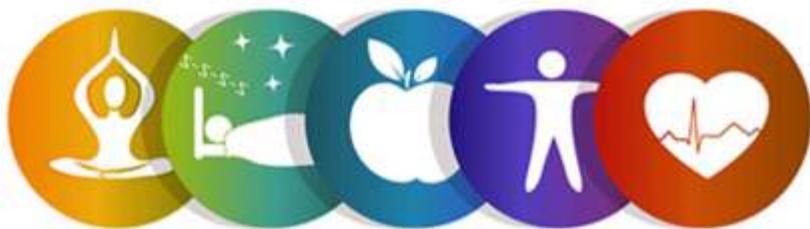
### **3. Renewal of Enrolment by Group, Individual and Family Contributions, including those on adoption**

- Enrolment of group, individual and family contributions is valid for a duration of one year.
- Subscribers are advised to notify the Scheme three months to the expiration of current enrollment.
- A subscriber that renews before expiry of current subscription will not observe a waiting time after renewal.
- Renewal of subscription must be done two months before expiry of current payment.
- A subscriber who renews after expiration of previous subscription will follow all the rule of the waiting time. Such subscriber will be required to pay for the period that she/he failed to renew

## 6.0 *Complaints Resolutions*

An enrollee who has complaints/challenges at healthcare facility on issues relating to service delivery/access should first contact his/her HMO either by phone, email, sms, writing or visits to the HMO Office.

If complaint is not resolved quickly or the case is of emergency in nature, the enrollee should register the complaint with the nearest NHIS State Office by phone call, email, sms, writing or visit the NHIS State Office or reach the NHIS Call Centre, NHIS website or other social media handles.



***National Health Insurance Scheme***

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