



Insurance Management Information System for the new Community Health Fund structure

Newsletter 2 Support for matching funds

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Abbreviations

CHF Community Health Fund

IMIS Insurance Management System

TZS Tanzanian Shilling

1 Introduction

The purpose of this newsletter is to provide information to users on functionality of IMIS relating to matching funds. The full functionality for support of matching funds is available to IMIS user since June 2015.

The CHF schemes can acquire from public budgets so called matching funds that should motivate to enrolment to the CHF scheme by subsidization of premiums. . The amount of matching funds is derived from the amount of premiums paid by families to a CHF scheme (in IMIS terms for an insurance product) in some period. There is an obvious rule that it is possible to ask for a matching fund payment only once for each payment of premiums.

The functionality of IMIS associated with matching funds has two parts. The first part is creation of reports needed for public funding authorities that lists all payments of premiums including all details of families within a specific period. IMIS keeps track for which periods the reports were generated and which payments of premiums were included in the generated reports. If the report will be produced for the same or overlapping period of time second time, the payments of premiums included in previous reports will be not included again. Reason for repetitive generating of reports on matching funds for the same period may be delays in recording of enrolments of some families and payments of their contributions. The first part of the functionality is sufficient for acquiring of matching funds from public funding authorities.

The second part is needed if a CHF scheme uses relative prices (see the Newsletter 1) for health care remunerated from the scheme. In this case actual prices for health care are ultimately determined according to the amount of contributions allocated for each calendar period (month, quarter). Matching funds acquired from public sources are part of the disposable amount based on which the relative prices are calculated. If the relative pricing is not used still the second part of functionality may be used for getting a precise picture how much could be spent for health care in each period¹. The second part of the functionality allows entering of matching funds into IMIS and using them as just another form of premiums for calculation of relative prices.

The following typographic conventions are used in the text:

Labels of fields for entering data or buttons in forms (screens) for clicking are in **bold**.

Headings of sections in the forms o names of applications are in *italics*.

¹ IMIS provides the report on distribution of premiums for each calendar month for a scheme (insurance product) that takes into account the length of an insurance period and actual dates of payment of premiums by each family. The second part of the functionality allows distribution of matching funds taking into account analogic parameters- the length of an insurance period and actual dates of acquiring of matching funds.

2 Generating reports for funding authorities

The reports for funding authorities on matching funds should be generated by CHF staff regularly after each period (e.g. calendar month or other period according to agreement with the funding authority).

The form for generating of the report can be reached as follows:

Select **Tools** in the menu bar then select **Reports** and select **Matching funds** in the list of available reports. The form for generating of the report contains the following fields (see Figure 1):

- **District** –obligatorily select one district from a drop down list. The drop down list contains district for which the user is entitled.
- **Insurance product** –obligatorily select one insurance product from a drop down list. The drop down list contains insurance products belonging to the selected district.
- **Payer**-a drop down list that contains all institutional payers associated with the selected district. If not given payments of premiums by families themselves will be taken including all payments from institutional payers.
- **Start** – obligatorily determine the start date of the period, in which payments of premiums took place.
- **End**- obligatorily determine the end date of the period, in which payments of premiums took place.
- **Previous**- the time and the date from perspective of which the report is generated. Default value is the actual date and the actual time. The drop down list contains dates and times of generating previous (non-empty) reports and

The screenshot shows a web application interface for generating reports. At the top, there is a navigation bar with links: Home, Insurees and Policies, Claims, Administration, Tools, and Logout. Below this is a search bar labeled 'Search CHF'. The main section is titled 'Reports'. It contains several dropdown menus: 'Start' (01/01/2012), 'End' (31/01/2012), 'District' (Kondoa), 'Product' (3014PS - Primary an...), and 'Payers' (Select a Payer). There is also a 'Previous' dropdown menu showing 'Dec 10 2014 12:59PT'. On the left side, there is a list of reports: Primary Operational Indicators-policies, Primary Operational Indicators-claims, Derived Operational Indicators, Premium Collection, Product Sales, Premium Distribution, User Activity Report, Enrollment Performance Indicators, Status of Registers, Insurees without photos, **Matching funds** (highlighted), Claim Overview, Families And Insurees Overview, and Pending Insurees. At the bottom, there are 'Preview' and 'Cancel' buttons.

Figure 1 Form for generating of the report on matching funds

an indication of periods for which they were generated. By selecting one of them the corresponding report is re-generated from the perspective of the indicated past date and time. A warning and a prompt appears- *Generating of the report from past perspective may result in duplication of request for matching funds. Do you want to continue Yes/No.*



CHF Number	Full Name	Birth Date	Ward	Village	Enrol Date	Payment Date	Receipt no.	Payer	Payment
00549206	IRFIE MUKUNA ISMAIL	04/01/1982	Kilimanjaro	Vila kwana	25/09/2014	25/09/2014	81245		
00549305	BURA MARIAMU KIMOLLO	01/01/1929	Kilimanjaro	Vila kwana	25/09/2014				
00549311	ABDULLA ABDULAH RAMADHAN	01/07/1982	Kilimanjaro	Vila kwana	25/09/2014				
00549322	KIMOLLO ENALIA MAULIDI	01/07/2007	Kilimanjaro	Vila kwana	25/09/2014				
00549333	GORA ELALI RASHIDI	06/06/2007	Kilimanjaro	Vila kwana	25/09/2014				
00549344	GOZI ADIZA ISA	04/05/1984	Kilimanjaro	Vila kwana	25/09/2014				
00549485	JUMA MASHA BRAMBU	04/07/1981	Kilimanjaro	Vila kwana	25/09/2014	25/09/2014	81245		
00549488	ATHUMANI ADHA MAULIDI	01/06/1980	Kilimanjaro	Vila kwana	25/09/2014				
00549470	ALI MUKAJUMA ATUMANI	01/07/1984	Kilimanjaro	Vila kwana	25/09/2014				
00549481	ISA SURAFYA BRAMBU	01/06/2008	Kilimanjaro	Vila kwana	25/09/2014				
00549482	MADUGA MIMAMBU SYASA	01/07/2007	Kilimanjaro	Vila kwana	25/09/2014				
00549493	IREMBE BRAMBU JUMA	01/06/2007	Kilimanjaro	Vila kwana	25/09/2014				
00549515	GORONWA ABASA ALI	04/01/1955	Kilimanjaro	Vila kwana	25/09/2014	25/09/2014	81245		
00549528	OSARI KUMBA RAMADHAN	03/01/1981	Kilimanjaro	Vila kwana	25/09/2014				
00549530	JABU SHAFI ISA	03/07/2000	Kilimanjaro	Vila kwana	25/09/2014				
00549541	JUMA YAZIRI HALIFA	01/07/1988	Kilimanjaro	Vila kwana	25/09/2014				
00549552	DAUDI MASHA CHARI	01/01/1990	Kilimanjaro	Vila kwana	25/09/2014				
00549563	OSARI LATIYA MASHAKA	01/07/2000	Kilimanjaro	Vila kwana	25/09/2014				
00549586	JAFARI MIMAMBU MASHA	04/07/1984	Kilimanjaro	Vila kwana	25/09/2014	25/09/2014	81245		
00549590	JAFARI SALIMU MASHA	01/07/1979	Kilimanjaro	Vila kwana	25/09/2014				
00549591	JAFARI ALIYI SALIMU	06/12/2012	Kilimanjaro	Vila kwana	25/09/2014				
00549592	JAFARI ADHA SALIMU	10/10/2009	Kilimanjaro	Vila kwana	25/09/2014				
00549593	KILIA MAULIDI MASHA	08/06/1980	Kilimanjaro	Vila kwana	25/09/2014				
00549594	SHAMBA SOPA JOSEPH	02/08/1981	Kilimanjaro	Vila kwana	25/09/2014				
00549595	MUNDA ANTONY JOHN	04/07/1983	Kilimanjaro	Vila kwana	25/09/2014	25/09/2014	81242		
00549596	OSARI ADHA MASHA	01/08/1983	Kilimanjaro	Vila kwana	25/09/2014				
00549597	OSARI ADHA MASHA	01/07/2002	Kilimanjaro	Vila kwana	25/09/2014				

Figure 2 Report for acquiring of matching funds

The families that have at least one payment of premiums in given period of time are included in the report (see Figure 2).

The report contains in the title:

- Code and name of the insurance product
- District
- Period

For each payment of premiums the following data items are included in the report:

- CHF number of the head of the family
- Full name of the head of the family
- Birth date of the head of family
- Ward of residence (of the family)
- Village of residence
- Date of enrolment of the family
- Date of payment of premiums
- Receipt code of the payment
- Payer (if blank the family is a payer)
- Amount of payment
- List of all other members of the family (CHF number, full name and birth date for each member, ward and village of residence and enrolment date)

The total amount of paid premiums is placed at the end of the report.

3 Entering of matching funds

This step is ultimately needed if matching funds should be engaged in determination of prices for health care in case so called relative pricing is used. If a matching fund is received it is known for

which insurance product (CHF scheme) should be used for and based on which period it was granted. The matching fund can be entered into IMIS in the following way:

Select **Tools** in the main menu and then **Funding**. The form as in the **Error! Reference source not found.** appears. You enter **District** for which a matching fund is used. Based on the district a drop down list of available insurance products appears in the field **Product**. Further, select the payer of the matching fund (the funding authority that provides matching funds should be entered into the register

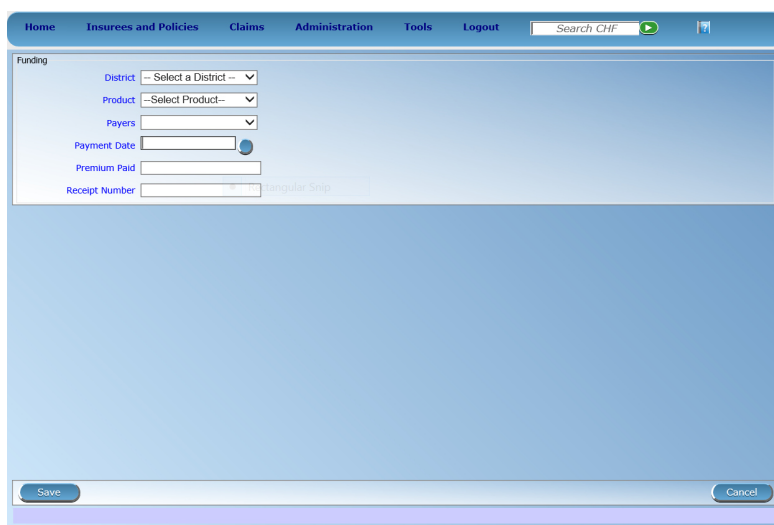


Figure 3 Form for entering of matching funds

of institutional payers ahead). The date of receiving of the matching fund from the funding authority should be entered in the field **Payment Date**. Enter the amount of the received matching fund in the field **Premium Paid**. The field **Receipt Number** allows an identification of this concrete payment of the matching fund. It makes sense to define a separate structure for receipt numbers used for matching funds. It allows easy searching for payments of matching funds by means of standard IMIS tools later on.

What happens when a matching fund is entered? IMIS creates internally one fictive family (CHF

code of the head of the fictive family is 999999999, the name is *Funding* and the other name is *Funding* as well) district. Each entering of a matching fund results in creation of a fictive policy for the corresponding fictive family with paid premium in the amount of the matching fund. The fictive policy is active since the date of payment of the corresponding matching funds. These fictive policies are overpaid as matching funds are much bigger than the premium rate for a single family but it doesn't matter. Have in mind that a matching fund corresponds to payment of premiums for many families in some period. IMIS can regard matching funds as standard premiums and its standard functionality can be used for handling of matching funds. One distinctive feature of payment of matching funds by means of the fictive policies is that the payments of matching funds don't appear in the reports on matching funds generated for funding authorities. So, there is no danger that a CHF office would acquire new matching funds based on payments of matching funds already acquired.

For better understanding what IMIS does with matching funds see the following example: Let a funding authority pays 120,000,000 TZS to a CHF office for its health insurance scheme (insurance product) on February 1, 2015 and another matching fund in the amount 240,000,000 TZS on October 1, 2015. Let's suppose that the insurance period is 12 month for given insurance product. Provided both payments of the matching funds were entered in IMIS then the following allocation of matching funds is made by IMIS in subsequent months on top of allocation of standard premiums paid by families:

Month/Year	Payment of matching funds	Allocation of matching funds
January/2015		
February/2015	120,000,000 TZS	10,000,000 TZS ²
March/2015		10,000,000 TZS
April/2015		10,000,000 TZS
May/2015		10,000,000 TZS
June/2015		10,000,000 TZS
July/2015		10,000,000 TZS
August/2015		10,000,000 TZS
September/2015		10,000,000 TZS
October/2015	240,000,000 TZS	30,000,000 TZS ³
November/2015		30,000,000 TZS
December/2015		30,000,000 TZS
January/2016		30,000,000 TZS
February/2016		20,000,000 TZS
March/2016		20,000,000 TZS
April/2016		20,000,000 TZS
May/2016		20,000,000 TZS
June/2016		20,000,000 TZS
July/2016		20,000,000 TZS
August/2016		20,000,000 TZS
September/2016		20,000,000 TZS
October/2016		0 TZS
November/2016		0 TZS
December/2016		0 TZS

Table 1 Allocation of matching funds

² 10,000,000 = 120,000,000/12

³ 30,000,000 = 120,000,000/12 + 240,000,000/12

4 Searching for paid matching funds

The standard searching capabilities can be used for searching/monitoring which matching funds were entered into IMIS. Either you find the fictive family for a district by searching for CHF number 999999999 and/or the head of family with the name (or other name) *Funding* in the given district.

Family

CHF Number 999999999 District Bahl Phone Number
Last Name Funding Ward Funding Has Poverty Status? ☐
Other Names Funding Village Funding

Insurees

CHIFID	LAST NAME	OTHER NAMES	GENDER	BIRTH DATE	CARD
999999999	Funding	Funding	M	01/10/2015	<input checked="" type="checkbox"/>

Policies

ENROL DATE	EFFECTIVE DATE	START DATE	EXPIRY DATE	PRODUCT	ENROLLMENT OFFICER	POLICY STATUS	POLICY VALUE	VALID FROM	VALID TO
01/10/2015	01/10/2015	01/10/2015	01/10/2016	3101PS		Active	10,000.00	14/12/2015	
01/09/2015	01/09/2015	01/09/2015	01/09/2016	3101PSL		Active	5,000.00	14/12/2015	

Premiums

DATE OF PAYMENT	PAID BY	AMOUNT	PAY METHOD	RECEIPT
01/10/2015		1,000,000	Mobile Payment	MF2

Cancel

Figure 4 List of all payments of matching funds for a district

When you get on the overview form for the fictive family you get in the section Policies and Premiums a list of all matching funds entered for given district-see Figure 4. Each policy in the section *Policies* corresponds to one payment of a matching fund. The *Product* column indicates for which insurance product the matching fund was allocated and selecting a policy in the section shows in the section Premiums the details of the payment of the matching fund.

Select Criteria

Premium

Payers: -- Select a Payer -- Date of Payment: / / X District: -- Select a District --
Type: -- Payment Type -- Premium Paid: Receipt no: MF Historical ☐ Search

3 Premiums Found

DATE OF PAYMENT	PREMIUM PAID	PAYERS	TYPE	RECEIPT NO.	VALID FROM	VALID TO
01/11/2015	1000000.00		Bank Transfer	MF1	14/12/2015	
01/10/2015	1000000.00		Bank Transfer	MF2	14/12/2015	
01/09/2015	2000000.00		Bank Transfer	MF4	14/12/2015	

Cancel

Figure 5 Form for searching form premiums

Alternatively, if a convention for constructing of receipt numbers for payment of matching funds will be adopted then payments (it should have a common and distinctive prefix) then the searching capability for premiums may be used by putting of the common prefix into the search field-see Figure 5 where the common prefix *MF* for all receipt numbers for matching funds was used.

5 What not forget?

- **Entering of public authorities providing matching funds in the register of institutional payers.**
- **Devising a suitable convention (especially some common prefix) for numbering of received matching funds that would be used in the position of receipt numbers for matching funds.**
- **Regular producing of matching funds in frequency agreed with funding authorities but with sufficient distance from the reported period in order to ensure that all payments of premiums are recorded in IMS. Avoid repeated creation of reports for matching funds as much as possible.**
- **Entering of matching funds immediately after confirmation of their provision to engage them into calculation of relative prices as soon as possible.**