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THE NATIONAL HEALTH INSURANCE FUND ACT

CHAPTER 255

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CHAPTER 255**NATIONAL HEALTH INSURANCE FUND ACT**

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CHAPTER 255

NATIONAL HEALTH INSURANCE FUND ACT

[Date of assent: 31st December, 1998.]

[Date of commencement: 15th February, 1999.]

An Act of Parliament to provide for the establishment of the National Health Insurance Fund; to establish the National Health Insurance Fund Management Board; to provide for mechanisms of contributions to and the payment of benefits out of the Fund; and for connected purposes.

[Act No. 9 of 1998, Legal Notice 23 of 1999, Act No. 18 of 2014, Act No. 1 of 2021, Act No. 1 of 2022.]

PART I – PRELIMINARY

1. Short title

This Act may be cited as the National Health Insurance Fund Act.

[Act No. 1 of 2022, s. 4.]

2. Interpretation

In this Act, unless the context otherwise requires:

"accreditation" means the formal recognition of a health care provider by the Board;

"beneficiary" means a person who—

- (a) has not attained the age of twenty-one years, has no income of his own and is living with the contributor;
- (b) has not attained the age of twenty-five years, is undergoing a full-time course of education at a university, college, school or other educational establishment or serving under articles or an indenture with a view to qualifying in a trade or profession and is not in receipt of any income other than a scholarship, bursary or other similar grant or award;
- (c) is a person with disability and is wholly dependent on and living with the contributor;
- (d) is a spouse; or
- (e) is a contributor;

"benefit" means a benefit payable under this Act;

"Board" means the National Health Insurance Fund Management Board established by section 4;

"Cabinet Secretary" means the Cabinet Secretary for the time being responsible for matters relating to health;

"card" *deleted by Act No. 1 of 2022, s. 5;*

"child" means a child of a contributor including a posthumous child, a stepchild, an adopted child and any child to whom the contributor stands in *loco parentis*, and who has not attained the age of eighteen years;

"contracting" means the entering into a formal agreement with an empaneled health care provider for purposes of provision of services;

"contributor" means a person liable to contribute to the Fund under section 15;

"empanelment" means enrolment of a health care provider into the list of health care service providers published in the *Gazette*;

"employer" means a person, national government or national government entity, county government or county government entity, firm, corporation or company who or which has entered into a contract of service with an individual;

"financial year" means a financial year within the meaning of section 33;

"Fund" means the National Health Insurance Fund established by section 3;

"health care provider" means the whole or part of a public or private institution, building or place, duly registered healthcare professional, whether for profit or not, that is operated or designed to provide in-patient or out-patient treatment, diagnostic or therapeutic interventions, nursing, rehabilitative, palliative, convalescent, preventative, promotive or other health service;

"hospital" *deleted by Act No. 1 of 2022, s. 5*;

"indigent" means a person who is poor and needy to the extent that the person cannot meet their basic necessities of life;

"inspector" means a person appointed to carry out an inspection under section 32;

"register" *deleted by Act No. 1 of 2022, s. 5*;

"risk spreading" means the transfer, sharing or distribution of the risk insured as between one or more insurance companies or other providers with a view to reducing the financial cost in the eventual happening of the insured event hereby referred as a loss for special, enhanced or negotiated scheme;

"spouse" means the wife or husband of a contributor and "named spouse" means, in any financial year, the spouse of the contributor who is for the time being named on the card issued to the contributor for that financial year;

"stamp" *deleted by Act No. 1 of 2022, s. 5*;

"vulnerable person" means a person who is in need of special care, support or protection, including the orphaned and vulnerable children, widows or widowers, person with disability, elderly persons or indigent due to a risk of abuse or neglect and who has been identified as such by the relevant government body.

[Act No. 1 of 2022, s. 5.]

PART II – ESTABLISHMENT AND MANAGEMENT OF THE FUND

3. Establishment of the Fund

(1) There shall be established a Fund, to be known as the National Health Insurance Fund which shall vest in and be operated and managed by the Board.

(2) There shall be paid—

(a) into the Fund—

(i) contributions under section 15;

- (ii) such monies as may be appropriated by the National Assembly, for indigent and vulnerable persons;
 - (iii) gifts, grants or donations;
 - (iv) funds from the national government, county governments and their respective entities for the administration of the compulsory public service employee's insurance benefit scheme or an employer who is not a national government, a county government or their respective entities, for the administration of employee benefits; and
 - (v) contributions from post retirement funds for provision of medical cover to retired employees, where the contributor has elected to do so.
- (b) out of the Fund, all benefits and other payments required by this Act to be paid out of the Fund.
- (3) The provisions of the First Schedule shall have effect with respect to the Fund.

[Act No. 1 of 2022, s. 6.]

4. Establishment of Board

- (1) The management of the Fund shall vest in a Board which shall consist of—
- (a) a Chairperson appointed by the President by virtue of his or her knowledge and experience in matters relating to insurance, financial management, economics, health or business administration;
 - (b) the Principal Secretary in the Ministry for the time being responsible for matters relating to health or a representative appointed in writing;
 - (c) the Principal Secretary in the Ministry for the time being responsible for matters relating to finance or a representative appointed in writing;
 - (d) one person nominated by the Kenya Medical Association;
 - (e) one person nominated by the Federation of Kenya Employers;
 - (f) one person nominated by the Central Organization of Trade Unions;
 - (g) two persons, not being Governors, nominated by the Council of County Governors;
 - (h) two persons, not being public officers, appointed by the Cabinet Secretary; and
 - (i) the Chief Executive Officer, who shall be an *ex officio* member of the Board.
- (1A) The persons nominated or appointed under paragraphs (e), (f), (g) and (h) shall have knowledge and experience in matters relating to finance, insurance, information, communication and technology, law, public health, business management, audit, economics or any other relevant field;
- (1B) The nominating body under paragraph (f) shall afford equal opportunity to men and women, youth, persons with disabilities and minorities and marginalized groups and ensure regional balance.
- (1C) The Cabinet Secretary responsible for matters relating to health shall publish the names of the persons nominated under paragraphs (d), (e), (f) and (g) in the *Gazette*.
- (2) Deleted by Act No. 18 of 2014, Sch.

(3) The Board shall be a body corporate with perpetual succession and a common seal, and shall, in its corporate name, be capable of—

- (a) suing and being sued;
- (b) taking, purchasing or otherwise acquiring, holding, charging and disposing of movable and immovable property;
- (c) borrowing or lending money; and
- (d) doing or performing all such other things or acts for the proper performance of its functions in the furtherance of the provisions of this Act, which may lawfully be done or performed by a body corporate.

[Act No. 18 of 2014, Sch., Act No. 1 of 2022, s. 7.]

5. Objects and functions of the Board

(1) The objects and functions of the Board shall be—

- (a) to receive all contributions and other payments required by this Act to be made to the Fund;
- (b) to make payments out of the Fund to empaneled health care providers in accordance with the provisions of this Act;
- (c) in consultation with the respective regulatory bodies specified under section 60 of the Health Act (Cap. 241), to set the criteria for the empanelment and contracting of health care providers for the purposes of this Act;
- (d) to regulate the contributions payable to the Fund and the benefits and other payments to be made out of the Fund;
- (e) to protect the interests of contributors to the Fund;
- (f) to advise the Cabinet Secretary on the national policy to be followed with regard to national health insurance and to implement all Government policies relating thereto;
- (g) to facilitate attainment of Universal Health Coverage with respect to health insurance;
- (h) to administer employee benefits as provided under this Act on behalf of employers in respect of their employees; and
- (i) to perform such other functions as are conferred on it by this Act or any other written law.

(2) The Board shall facilitate public participation and stakeholder engagement in the carrying out of its functions under this Act.

[Act No. 1 of 2022, s. 8.]

6. Powers of Board

The Board shall have all the powers necessary for the the performance of its functions under this Act and in particular, but without prejudice to the generality of the foregoing, the Board shall have power to—

- (a) manage, control and administer the assets of the Fund in such manner and for such purpose as best promotes the objects for which the Fund is established:

Provided that the Board shall not charge or dispose of any immovable property without the prior approval of the Cabinet Secretary;

- (aa) to determine the contributions to be made by contributors to the Fund;

- (b) receive any gifts, grants, donations or endowments made to the Fund or any other monies in respect of the Fund and make disbursements therefrom in accordance with the provisions of this Act;
- (c) determine the provisions to be made for capital and recurrent expenditure and for reserves of the Board;
- (d) open a banking account or banking accounts for the Fund; and
- (e) invest any monies of the Fund not immediately required for the purposes of this Act in the manner provided in section 34.

[Act No. 1 of 2022, s. 9.]

7. Conduct of business and affairs of the Board

The conduct and regulation of the business and affairs of the Board shall be as provided in the and Second Schedule, but subject thereto, they may regulate its own procedure.

8. Delegation by the Board

The Board may, by resolution either generally or in the any particular case, delegate to any committee of the Board or to any member, officer, employee or agent of the Board the exercise of any of the powers or the performance of any of the functions or duties of the Board under this Act.

9. Remuneration of members of the Board.

The Chairperson and members of the Board, other than the chief executive officer, shall be paid out of the moneys of the Fund such sitting allowances or other remuneration as the Board may, in consultation with the Salaries and Remuneration Commission, determine.

[Act No. 1 of 2022, s. 10.]

10. Chief Executive Officer

(1) There shall be a chief executive officer of the Fund who shall be appointed by the Board, through a competitive process, on such terms and conditions as the Board may, with the advice of the Salaries and Remuneration Commission, determine.

(2) A person is qualified for appointment as a chief executive officer if the person

- (a) has at least a Master's degree from a university recognized in Kenya;
- (b) has at least ten years' experience at a senior management level with skills in health insurance, health financing, financial management, health economics, healthcare, administration, law or business administration; and
- (c) meets the requirements of Chapter Six of the Constitution.

(3) The chief executive officer shall, subject to the directions of the Board, be responsible for the day to day management of the affairs and staff of the Board.

(4) The chief executive officer shall serve for a term of three years and shall be eligible for re-appointment for a further and final term of three years.

(5) The chief executive officer shall be an *ex officio* member of the Board.

[Act No. 18 of 2014, Sch., Act No. 1 of 2022, s. 11.]

10A. Corporation Secretary

(1) The Board shall competitively recruit a person qualified in terms of the law governing the practice of certified secretaries in Kenya, to serve as the Corporation Secretary of the Board.

(2) A person is qualified for appointment as a corporation secretary under subsection (1) if the person has been a member of the Institute of Certified Public Secretaries for at least ten years and the person is in good standing with the Institute.

(3) The Corporation Secretary shall be the Secretary to the Board and shall—

- (a) in consultation with the Chairperson of the Board, issue notices for meetings of the Board;
- (b) keep, in custody, the records of the deliberations, decisions and resolutions of the Board;
- (c) transmit decisions and resolutions of the Board to the Chief Executive Officer for execution, implementation and other relevant action;
- (d) provide guidance to the Board on their duties and responsibilities on matters relating to governance; and
- (e) perform such other duties as the Board may direct.

[Act No. 1 of 2022, s. 12.]

11. Staff of the Board

The Board may appoint such staff as are necessary for the proper discharge of its functions under this Act or any other written law, upon such terms and conditions of service as the Board may determine.

[Act No. 1 of 2022, s. 13.]

12. Common seal of the Board

(1) There shall be a common seal of the Board which shall be kept in the custody of the Corporation Secretary and shall not be used except on the direction of the Board.

(2) The affixing of the common seal of the Board shall be authenticated by the signatures of the Chairperson and the Chief Executive Officer and any document required by law to be made under seal and all decisions of the Board may be authenticated by the signatures of the Chairperson and the Chief Executive Officer.

(3) The Board shall, in the absence of either the Chairperson or the Chief Executive Officer, in any particular matter, nominate one member to authenticate the seal of the Board on behalf of either the Chairperson or the Chief Executive Officer.

[Act No. 1 of 2022, s. 14.]

13. Protection from personal liability

Subject to section 14, no matter or thing done by a member of the Board or any officer, employee or agent of the Board shall, if the matter or thing is done bona fide for executing the functions, powers or duties of the Board under this Act, render the member, officer, employee or agent or any person acting on their directions personally liable to any action, claim or demand whatsoever.

14. Liability of the Board for damages

The provisions of section 13 shall not relieve the Board of the liability to pay compensation or damages to any person for any injury to him, his property or any of his interests caused by the exercise of any power conferred by this Act or any other written law or by the failure, whether wholly or partially, of any works.

PART III – CONTRIBUTIONS AND BENEFITS**14A. Registration as a member of the Fund.**

(1) A person who has attained the age of eighteen years and is not a beneficiary shall register as a member of the Fund.

(2) The Cabinet Secretary may, in consultation with the Board, make regulations for the better carrying out of subsection (1).

[Act No. 1 of 2022, s. 15.]

15. Contributions to the Fund

(1) Subject to this Act, any person—

- (a) who is ordinarily resident in Kenya; and
- (b) who has attained the age of 18 years; and
- (c) whose total income, whether derived from salaried or self-employment, in the immediately preceding month, was not less than such amount as the Board, in consultation with the Cabinet Secretary, may prescribe,

shall be liable as a contributor to the Fund.

(1A) Subject to this Act—

- (a) the national government shall be liable as a contributor to the Fund in respect of all public officers, state officers and employees working in the national government and national government entities;
- (b) each county government shall be liable as a contributor to the Fund in respect of all public officers, state officers and employees working in the county government and county government entities; and
- (c) any other employer shall be liable as a contributor to the Fund in respect of its employees, subject to paragraph (2)(e).

(1B) Subject to this Act, the national government shall be liable as a contributor to the Fund on behalf of the indigent and vulnerable persons identified as such by the relevant government body.

(2) A person liable as a contributor under this section shall pay to the Board—

- (a) in the case of a person whose income is derived from salaried employment, a standard contribution; or
- (b) for persons whose income is derived from self-employment—
 - (i) in the case of a contributor who is a sole beneficiary; and
 - (ii) in the case of a contributor who is not a sole beneficiary,

a special contribution at such respective rates as may be determined by the Board;

- (c) in the case of an employer who is the national government or national government entity, a matching contribution, equal to that which their employee is liable to contribute under subsection (1)(c);

- (d) in the case of an employer who is the or county county governments or county government entity, a matching contribution, equal to that which their employee is liable to contribute under subsection (1)(c);
- (e) in the case of any other employer under subsection (1A)(c), a matching contribution equal to that which their employee is liable to contribute under subsection (1)(c), subject to subsection(2A) ; and
- (f) in the case of the national government under subsection (1B), a special contribution, as the Board, in consultation with the Cabinet Secretary, may determine.

(2A) An employer other than the national government or county governments or their entities liable to pay a matching contribution under section 15 may be exempted from paying such matching contribution, if that employer has procured a private health insurance cover for its employees and the benefits are equal to or better than the benefits that the employees are entitled to under this Act.

(2B) An employer who intends to be exempted under subsection (2A) shall submit an application to the Board in writing together with a certificate issued by the Insurance Regulatory Authority to that employer—

- (a) certifying that the respective employees have been insured by a private health insurer;
- (b) specifying the details of the cover and the benefits; and
- (c) specifying the validity period of the private health insurance cover.

(2C) The Board—

- (a) shall determine an application under subsection (2B) within thirty days of receipt; and
- (b) may grant the exemption if the Board is satisfied that the private health insurance is adequate.

(3) A contribution under subsection (2)(a) and (b) shall be at such rate, depending on the person's total income, as the Board, in consultation with the Cabinet Secretary may determine.

(3A) Subject to such guidelines as the Board may, from time to time issue, a person who wishes to receive an enhanced benefit under section 22(3) may make additional voluntary contributions to the Scheme.

(4) A person to whom this section applies shall pay the contribution to the Board on the ninth day of each month or on such later date as the Board, in consultation with the Cabinet Secretary, may prescribe.

(5) The contributions made to the Fund under subsection (2) shall be mandatory.

(6) The Cabinet Secretary shall, in consultation with the Board, make regulations for the better carrying out of this section.

[Act No. 1 of 2021, Sch., Act No. 1 of 2022, s. 16.]

16. Standard and matching contributions

(1) A person liable to pay a standard contribution under section 15 shall pay such contribution through monthly deductions from his salary or other remuneration and the employer of such person shall be liable to deduct and to pay the contribution to the Board on behalf of and to the exclusion of that person.

(1A) A person liable to pay a matching contribution under section 15 shall pay such contribution in their capacity as an employer and shall not deduct such contribution from the salary or other remuneration of the employee.

(2) An employer shall not be liable under this section to pay the standard and matching contribution in respect of any person employed by him for any month:—

- (a) in which he was not at any time the employer of that person (except where the employment is terminated in the month immediately preceding that month); or
- (b) in which he was not the employer on the first day of that month, unless that contribution has not been paid before the day in that month when he becomes the employer, in which case he shall only become liable seven days after that day;
- (c) *deleted by Act No. 1 of 2022, s. 17.*

(3) An employer shall be entitled subject to and in accordance with any regulations—

- (a) to deduct from the salary or other remuneration of any person employed by him, notwithstanding anything to the contrary in any other law, the amount of any standard contribution paid by him or to be paid by him within one month of such deduction, on behalf of that person.
- (b) *deleted by Act No. 1 of 2022, s. 17.*
- (c) *deleted by Act No. 1 of 2022, s. 17.*

(4) No sum deducted from the salary or other remuneration of an employee by his or her employer in accordance with the provisions of this Act shall be recoverable from the employer by that person once the contribution has been remitted to the Fund.

(5) If for any reason an employer is unable to ascertain whether any person employed by him is liable to pay the standard contribution for any month, he may apply to the Board for a decision, and, subject to the provisions of section 31, any decision given by the Board thereon shall be final and binding on that employer.

(6) Any person who—

- (a) fails without lawful excuse to pay, within the time and in the manner prescribed by this Act in relation to him, any standard or matching contribution which he is liable as an employer to pay under this Act; or
- (b) knowingly makes any deductions from the salary or other remuneration of any person employed by him, purporting to be a deduction in respect of any standard contribution, other than a deduction which he is authorised to make by this Act,

commits an offence and is liable on conviction to a fine not exceeding five hundred thousand shillings.

[Act No. 1 of 2022, s. 17.]

17. Persons to be treated as employers

In relation to contributors who work under the general control or management of a person other their employer, immediate and in relation to any other case of employment for which it appears to the Board that special provision is needed, the Board may, in regulations, provide that for the purposes of this Act, the prescribed person shall be treated as their employer; and such regulations may provide for

adjusting the rights between themselves of employers, persons prescribed as employers and employed persons.

18. Penalty for late payment of standard and matching contributions

(1) If a standard or matching contribution which a person is liable to remit under section 16, has not been remitted by the day on which the payment of the standard or matching contribution is due, the person shall be liable to pay a penalty equal to the lending rate of interest, of the amount of the contribution, as may published by the Central Bank of Kenya from time to time.

(2) If an employer fails to pay a standard contribution in respect of any person employed by him—

- (a) that employer shall be liable to pay the penalty prescribed in subsection (1) and pay the costs incurred by the employee that would have been covered by the Fund when seeking treatment from a contracted health care provider during the period when the contribution is due;
- (b) that employee shall not be liable to any penalty under this section for so long as he is employed by that employer;
- (c) where an employer is a national government, county government or a national or county government entity, the respective accounting officer shall be personally liable for the costs that would have been covered by the Fund and incurred by the employee when seeking treatment from a contracted health care provider during the period when the contribution is due.

(3) Where a contributor is outside Kenya on the day when a standard and matching contribution becomes payable by him, that contribution shall, for the purposes of this section, be deemed to become payable on the day of his return to Kenya.

(4) In this section, the expressions "micro enterprise" and "small enterprise" have the meanings assigned thereto respectively in the Micro and Small Enterprises Act (Cap. 499C).

[Act No. 18 of 2014, Sch. Act No. 1 of 2022, s. 18.]

19. Special contributions

(1) Every person liable to pay a special contribution under this Act shall pay the contribution to the Board on the first day of each month or on such later date as the Board may specify, in such manner and at such rate as may be prescribed.

(2) If a special contribution which any person is liable to pay under this section is not paid on or before the day on which the payment is due, a penalty equal to ten percent of the amount of the contribution shall be payable by that person for each month or part thereof during which the contribution remains unpaid, and any such penalty shall be recoverable as a sum due to the Fund and when recovered shall be paid into the Fund.

(3) *Deleted by Act No. 1 of 2022, s. 19.*

[Act No. 1 of 2022, s. 19.]

20. Voluntary contributions

The Board may make regulations in respect of voluntary contributions by unemployed persons, prescribing the manner of making such contributions, the procedure to be followed and the forms to be used.

[Act No. 1 of 2022, s. 20.]

21. Mode of identification of beneficiaries and payment of contributions.

(1) The Board shall prescribe the mode of identification of a beneficiary, taking into account the existing legal framework for national registration.

(2) The Board may require a person who is liable to remit a payment for a standard and matching contribution under section 16 to furnish such information or particulars, or to produce such documents, as the Board deems necessary for that purpose.

(3) A person who—

- (a) knowingly makes any false statement relating to a matter affecting his or her liability to remit a standard or matching contribution under section 16; or
- (b) being required under subsection (2) to furnish information or particulars, or produce a document, refuses or neglects to do so without reasonable cause,

commits an offence and shall be liable on conviction to a fine not exceeding one million shillings or to imprisonment for a term not exceeding twelve months, or to both.

(4) Evidence of the payment of contribution shall be deemed conclusive if the person liable to pay the contribution has —

- (a) a record of remittance of the contributions; or
- (b) in the case of a standard contribution, a record of the contributor's monthly pay-slip that the contribution has been deducted from his or her salary.

[Act No. 1 of 2022, s. 21.]

21A. Establishment of a centralized healthcare provider management system

(1) The Board shall cause to be developed a centralized healthcare provider management system.

(2) The centralized healthcare provider management system shall be installed and used by all empaneled providers for the purpose of management of claims, payments and data collection.

(3) The Board may publish guidelines on the use of the centralized healthcare provider management system by empaneled and contracted health care providers.

[Act No. 1 of 2022, s. 22.]

22. Payment of benefits

(1) The Board shall pay from the Fund, a benefit to an empaneled or contracted health care provider for an expense incurred by the provider, for the provision of health care services through the centralized healthcare provider management, to the number of beneficiaries determined by the Board.

(2) *Deleted by Act No. 1 of 2022, s. 23.*

(3) The Board shall, in consultation with the Cabinet Secretary prescribe benefits payable from the Fund including benefits available with respect to emergency treatment for—

- (a) primary angioplasty;
- (b) thrombolysis;
- (c) thrombolysis and rescue angioplasty; or
- (d) such other treatment as the Board may determine.

(3A) The benefits payable from the Fund shall be subject to such limits, and conditions as the Board may prescribe in regulations.

(3B) The Board shall determine and approve the applicable tariffs payable to the Fund under section 15(3A) and payable out of the Fund under subsection (1), to empaneled contracted health care providers for an expense incurred by the provider for the provision of healthcare services to the number of beneficiaries determined by the Board.

(3C) The Board shall, every two years, carry out a review of the applicable tariffs payable to the Fund under section 15 and payable out of the Fund to empaneled contracted health care providers.

(3D) The Board shall use the approved risk spreading mechanism, approved claims administration services on benefits of outpatient, inpatient and on employees' benefits scheme as provided for under sections 3(2)(a)(iv) and (v), 15, 22 and 43.

(4) *Deleted by Act No. 1 of 2022, s. 23.*

(5) Where a beneficiary has a private health insurance cover—

- (a) the private health insurance shall be liable for payment up to the limits the beneficiary is covered;
- (b) the Fund shall pay the daily rebate, for inpatient; and
- (c) the Fund shall cover the outstanding bill where private insurance cover's limits for various benefits have been exhausted subject to the Fund's applicable limits with respect to each benefit.

[Act No. 1 of 2022, s. 23.]

22A. Non-withdrawal of benefits

(1) The Board shall not withdraw the benefits of a person undergoing treatment for a chronic illness.

(2) The Board shall, in making regulations for determining benefits under the Fund ensure that the Fund shall meet the costs of a contributor accessing inpatient services at any empaneled health care provider.

[Act No. 1 of 2022, s. 24.]

23. Statements of account.

(1) The Board shall upon request avail a statement of accounts to a contributor, or a person who is liable to remit under section 16, with regard to their contributions.

(2) The Board shall make regulations for the better carrying out of the provisions of this section.

[Act No. 1 of 2022, s. 25.]

24.

[Repealed by Act No. 1 of 2022, s. 26.]

25. Offences relating to benefits

(1) Any person who, for the purpose of obtaining the payment of any benefit under this Act, knowingly makes any false statement, whether orally or in writing, commits an offence and is liable on conviction to a fine not exceeding one million shillings or to imprisonment for a term not exceeding sixty months, or to both.

(2) Any person who—

- (a) with intent to obtain the payment of any benefit under this Act, impersonates any person whether living or dead;
- (b) *deleted by Act No. 1 of 2022, s. 27;*
- (c) *deleted by Act No. 1 of 2022, s. 27;*

commits an offence and is liable on conviction to a fine not exceeding one million shillings or to imprisonment for a term not exceeding three years, or to both.

(3) *Deleted by Act No. 1 of 2022, s. 27;*

(4) A health care provider which knowingly or fraudulently alters or falsifies any information with intent to defraud the Board or to obtain any benefit that it is not entitled to under this Act, commits an offence and is liable on conviction to—

- (i) a fine not exceeding five hundred thousand shillings;
- (ii) removal from the register of empaneled and contracted health care providers.

(5) The Board shall cause the name of every hospital suspended under subsection (3)(ii) of this section to be notified in the *Gazette* and such institution shall not, during the suspension, be entitled to any benefit from the Fund.

(6) The Board shall cause the name of every health care provider removed from the register under subsection (4)(ii) to be notified in the *Gazette*, at least two newspapers of national circulation and at the official website of the Fund.

(7) A health care provider which has been removed from the register under section (4)(ii) shall not be entitled to receive any benefit from the Fund.

[Act No. 1 of 2022, s. 27.]

26. Regulations on contributions.

The Board may, in consultation with the Cabinet Secretary make regulations providing for—

- (a) any matters incidental to the payment and collection of any contributions under this Act;
- (aa) the amount and rates of contributions payable by contributors into the Fund;
- (b) the refund of any contributions paid in error;
- (c) the remission in whole or in part of penalties incurred under this Act, in such circumstances and subject to such conditions as may be prescribed;
- (d) the giving of such rebates as may be prescribed to contributors.

[Act No. 1 of 2022, s. 28.]

27. Regulations relating to benefits

Subject to the provisions of this Act, the Board, in consultation with the Cabinet Secretary, may make regulations prescribing the amount of any benefits and the period within which any benefits shall be payable out of the Fund for the time being and such regulations may provide for:—

- (a) any conditions or limitations subject to which any benefit shall be paid;
- (b) the manner of the making and determination of any claim to any benefit;
- (c) the postponement of any payment of benefit pending any relevant inquiry;
- (d) the authorisation of any person to claim a benefit on behalf of a contributor where such contributor is unable, for the time being, to do so.
- (e) the settlement of valid claims, which shall be within a period of one month from the date of submission of the claim.

[Act No. 1 of 2022, s. 29.]

28. Modification of Act in special cases

Regulations made by the Board may modify in such manner as the Board may deem proper, the provisions of this Act in their application—

- (a) to persons who are or have been outside Kenya while contributors to the Fund;
- (b) to persons who are employed on board any ship or aircraft.

29. General provision as to regulations

(1) Without prejudice to any specific power conferred by any provision of this Act, the Board may, in consultation with the Cabinet Secretary, make regulations facilitating the implementation of this Act, including in particular, regulations—

- (a) prescribing anything required to be prescribed under this Act;
- (b) prescribing the particulars, information, proof or evidence to be furnished as to any question or matter arising under this Act, including any question or matter relevant to the payment of contributions by or in respect of any person, or the making or validity of any claim or application for the payment of any benefit under this Act.
- (c) prescribing, in respect of any action required or permitted to be taken under this Act, the time and manner of taking that action, the procedure to be followed and the forms to be used.

(2) Any regulations made under this Act may make different provisions in respect of different cases or classes of cases and for different purposes of this Act, may impose conditions and make exceptions, and may contain such incidental or supplementary provisions as appear to the Board to be expedient for the purposes of the regulations.

(3) For the purposes of Article 94(6) of the Constitution—

- (a) the purpose and objective of the delegation under this Act is to enable the Board to make regulations for better carrying into effect the provisions of this Act;

- (b) the authority of the Board to make regulations under this Act will be limited to bringing into effect the provisions of this Act and fulfilment of the objectives specified under this section.

(4) The principles and standards applicable to the delegated power referred to under this Act are those found in —

- (a) the Statutory Instruments Act (Cap. 2A);
- (b) the Interpretation and General Provisions Act (Cap. 2);
- (c) the general rules of international law as specified under Article 2(5) of the Constitution; and
- (d) any treaty and convention ratified by Kenya under Article 2(6) of the Constitution.

[Act No. 1 of 2022, s. 30.]

30. Empanelment of Healthcare Providers

(1) The Board shall, in consultation with the relevant regulatory bodies specified under section 60 of the Health Act (Cap. 241), publish in the *Gazette*, the list of empaneled health care providers for the purposes of this Act.

(2) A notice in the *Gazette* under subsection (1) may be made subject to such conditions relating to the fees which may be charged by the health care provider to any contributor under this Act, including conditions as to the amount of such fees and the requirement of the Board's consent to any variation thereof, as the Board considers it necessary and where any such conditions are made—

- (a) the Board may publish such conditions in the *Gazette* or in such other manner considers it necessary; and
- (b) a health care provider shall not charge any fees to any contributor under this Act which is contrary to such condition.

(3) The Board may, at any time, revoke any empanelment under this section.

(4) Where the Board intends to revoke the empanelment of a health care provider under subsection (3), the Board shall notify the health care provider of the intended revocation, in writing, setting out the reasons for revocation of empanelment.

(5) A health care provider may, upon receiving a notification under subsection (4) submit a written response to the notification within seven days.

(6) A health care provider whose empanelment has been revoked under this section may apply to the Board for the review of the revocation in the first instance and, if dissatisfied by the decision of the Board upon review, appeal to the High Court against the revocation.

(7) The Board shall cause the name of every health care provider whose empanelment is revoked to be published in the *Gazette* and in at least three newspapers with nationwide circulation.

[Act No. 1 of 2022, s. 31.]

31. Determination of claims and questions

(1) Subject to the provisions of this Act, the Board, in consultation with the Cabinet Secretary, may make regulations for the determination by the Board or by any officer thereof, or by a person or body of persons appointed or constituted in accordance with the regulations, of any question arising under or in connection

with this Act, including any claim for a benefit, and subject to the provisions of the regulations, a decision in accordance therewith shall be final.

(2) Regulations under subsection (1) may provide—

- (a) for enabling appeals to be brought from the decisions of any officer, person or body of persons to any other person or body appointed or constituted in accordance with the regulations to hear such appeals;
- (b) for the reference to the High Court for decision on any question of law arising in connection with the determination of any question by any officer, person or body of persons and for appeals to the High Court from the decision of any such officer, person or body on any such question of law; and the Chief Justice shall have power to make rules of court for regulating such references and appeals, for empowering the court to make orders as to the costs of such references and appeals, and for limiting the time within which such appeals may be brought.

[Act No. 1 of 2022, s. 32.]

32. Inspection

(1) The Chief Executive Officer may, at any time and from time to time, and shall, if so directed by the Board cause an inspection to be made by an inspector authorised by him of—

- (a) any premises or places where an inspector reasonably believes that any persons are employed (excluding a private dwelling not used for the purpose of trade or business); or
- (b) any empaneled and contracted health care provider, for the purposes of ascertaining whether this Act is being or has been complied with, and the inspector shall, for the purposes of such inspection, have power to enter any such premises or place at all reasonable times, and to examine every person whom he finds therein.

(2) The occupier of any premises or place liable to inspection under this section and the servants and agents of the occupier or other person shall furnish to the inspector all such information and produce for inspection all such documents as the inspector reasonably requires for the purposes of ascertaining whether—

- (a) standard and matching contributions are or have been payable, or have been duly paid, by or in respect of any person; or
- (b) any benefit is or was payable to or in respect of any person; or
- (c) in the case of an empaneled health care provider, whether the conditions, if any, attached to the empanelment or contracting have been met.

(3) Any person who—

- (a) wilfully delays or obstructs an inspector in the exercise of his powers under this section; or
- (b) refuses or neglects to answer any question or to furnish any information or to produce any document when required to do so under this section,

commits an offence and is liable on conviction to a fine not exceeding one hundred thousand shillings or to imprisonment for a term not exceeding six months

and in the case of a conviction for making false claims or receiving illegal benefits shall be required to make good any moneys falsely received.

(4) Every inspector shall, before entering any premises or other place liable to inspection under this section, if so required by the occupier or other person authorised by him, produce a certificate of his appointment signed by or under the authority of the Board.

(5) Where any hospital is liable to be inspected by a public officer for the purposes of enforcing any law other than this Act, the Board may make arrangements for any of the powers and duties of inspectors under this section to be exercised or performed by the public officer and where such arrangement is made, that public officer shall have all the powers of an inspector under this section.

(6) Any inspector who, without any lawful excuse, gives false information in respect of the existence or non-existence of any fact in any hospital or other premises or places inspected under this section, commits an offence and is liable on conviction to a fine not exceeding ten million shillings, or to imprisonment for a term not exceeding sixty months or to both.

[Act No. 1 of 2022, s. 33.]

PART IV – FINANCIAL PROVISIONS

33. Financial year

The financial year of the Fund shall be the period of twelve months commencing on the 1st July in every year.

34. Investment funds

(1) All moneys in the Fund which are not immediately required to be applied for the purposes of this Act shall be invested—

- (a) in such investment in a reputable bank on the advice of the Central Bank of Kenya, being an investment in which trust funds, or part thereof, are authorised by law to be invested;
- (aa) in government securities as may be approved by the National Treasury.
- (b) *deleted by Act No. 1 of 2022, s. 34.*

(2) All investments made under this section shall be held in the name of the Board.

[Act No. 1 of 2022, s. 34.]

35. Annual estimates

(1) At least four months before the commencement of each financial year, the Board shall cause to be prepared estimates of the revenue and expenditure of the Board for that year.

(2) The annual estimates shall make provisions for all estimated expenditure of the Board for the financial year concerned, and in particular shall provide—

- (a) for the payment of the salaries, allowances and other charges in respect of the staff of the Board;
- (b) for the payment of the pensions, gratuities and other charges in respect of retirement benefits to staff of the Board;

- (c) for the payment of all the claims and benefits of the contributors in respect of medical and health care expenses incurred by them or their named dependants pursuant to the provisions of this Act;
- (d) for the proper maintenance of the buildings and grounds of the Board;
- (e) for the proper maintenance, repair and replacement of the equipment and other movable property of the Board;
- (f) for the creation of such reserve funds to meet future or contingent liabilities in respect of retirement benefits, insurance or replacement of buildings or equipment or in respect of such other matters as the Board may deem fit.

(3) The annual estimates shall be submitted for approval by the Board before the commencement of the financial year to which they relate:

Provided that once approved, the sum provided in the estimates shall not be increased without the prior consent of the Board. Provided that once approved, the sum provided in the estimates shall not be increased without the prior consent of the Board.

(4) No expenditure shall be incurred for the purposes of the Board except in accordance with the annual estimates approved under subsection (3) or in pursuance of an authorisation of the Board.

36. Expenses of administering the Fund

There shall be paid out of the Fund and in such manner as the Board, in consultation with the Cabinet Secretary may determine, such sum as the Board may estimate to be its expenditure in respect of any financial year in accordance with the provisions of section 35.

[Act No. 1 of 2022, s. 35.]

37. Accounts and audit

(1) The Board shall cause to be kept all proper books and records of account of the income, expenditure, assets and liabilities of the Fund.

(2) The accounts of the Board shall be audited and reported upon in accordance with the Public Finance Management Act (Cap. 412A) and the Public Audit Act (Cap. 412B).

[Act No. 1 of 2022, s. 36.]

PART V – MISCELLANEOUS PROVISIONS

38. Annual Reports

(1) The Board shall, within three months after the end of each financial year, prepare and submit to the Cabinet Secretary a report of the operations of the Board for the immediately preceding year.

(2) The Cabinet Secretary shall, within three months of submission of the report under subsection (1), transmit the report to Parliament.

[Act No. 1 of 2022, s. 37.]

39. Administrative regulations

(1) In the performance of its functions under this Act, the Board may, subject to this Act, make regulations generally for the governance, control and administration of the Board and in particular for—

- (a) the settlement of the terms and conditions of service, including the appointment, dismissal, remuneration and retirement benefits of the members of the staff of the Board; and
- (b) the constitution and procedure of meetings of the Board and the establishment, composition and terms of reference of committees of the Board.

(2) Regulations made by the Board under this section shall not be published in the *Gazette* but shall be brought to the attention of all persons affected thereby.

40. Exemption from stamp duty

No duty shall be chargeable under the Stamp Duty Act (Cap.480) in respect of any instrument executed by any person on behalf of or in favour of the Board or in respect of the payment of any benefit or in refunding any contribution under this Act in any case where, but for this exemption, the Board or any person acting on its behalf would be liable to pay such duty.

41.

[Repealed by Act No. 1 of 2022, s. 38.]

42. Proceedings to recover sums due to the Board

(1) The court before which any person is convicted of an offence under this Act may, without prejudice to any civil remedy, order such person to pay to the Board, as the case may be, the amount of any standard contribution or any other sum, together with any penalty found to be due from such person to the Board and any sum so ordered shall be recoverable as a fine and paid into the Fund.

(2) All sums due to the Board shall be recoverable as debts due to the Board, and without prejudice to any other remedy, may be recovered by the Board summarily as a civil debt.

(3) All criminal and civil proceedings under this Act may, without prejudice to any other power in that behalf, be instituted by any inspector or other officer of the Board.

(4) All sums recovered by legal proceedings in respect of monies which should have been paid into the Fund shall, when recovered, be paid into the Fund.

(5) Despite any other written law, the assets of the Fund shall not be liable to attachment under any process of law.

[Act No. 1 of 2022, s. 39.]

43. Recovery of compensation or damages

Where a contributor to the Fund is entitled, whether under the Work Injury Benefits Act (Cap. 236) or otherwise, to recover compensation or damages in respect of any injury or illness, he shall not, to the extent to which such compensation or damages are recoverable, be entitled to any benefits in respect of any treatment undergone by him as a result of such injury or illness, and any benefits paid in respect of such treatment, shall to the extent to which such compensation or damages have been recovered, be repaid to the Board;

Provided that the payment of any benefits as aforesaid shall not preclude the right of the contributor to recover any compensation or damages.

[Act No. 1 of 2022, s. 40.]

44. Evidence

In any proceedings under this Act, a copy of any entry in the accounts of, or any extract from the records or register of the Fund, shall, if stated to be a true copy by a certificate purporting to be signed by the Chief Executive of the Board, or a person authorized in that behalf by him, be received in evidence as prima facie evidence of the truth of the contents thereof.

45. General penalty

A person convicted of an offence under this Act for which no other penalty is prescribed shall be liable to a fine not exceeding one million shillings or, in the case of a natural person, to imprisonment for a term not exceeding two years, or to both.

[Act No. 1 of 2022, s. 41.]

45A. Application of Cap. 487.

The provisions of the Insurance Act shall apply to the Fund only in respect to risk spreading and claims administration services.

[Act No. 1 of 2022, s. 42.]

45B. Application of Cap. 197

The provisions of the Retirement Benefits Act (Cap. 197) shall apply to the Fund only with respect to post-retirement medical contributions under section 3(2)(a)(v).

[Act No. 1 of 2022, s. 42.]

46.

[Spent]

FIRST SCHEDULE

[s. 3(3)]

TRANSITIONAL PROVISIONS

[Act No. 1 of 2022, s. 43]

1. In this Schedule—

"appointed day" means the day appointed for the coming into operation of the National Health Insurance Fund Act (Cap. 255);

"Fund" means the National Health Insurance Fund existing immediately before the appointed day.

- 2.(1)** On the appointed day, all the funds, assets and other property movable and immovable which immediately before that day, were held for and on behalf of the Fund in the name of the Cabinet Secretary to the Treasury shall, by virtue of this paragraph and without further assurance, vest in the Board.
- (2)** Every public officer having the power or duty to effect or amend any entry in a register relating to property or to issue or amend any certificate or other document effecting or evidencing title to property, shall, without payment of a fee or other charge and upon request made by or on behalf of the Board, do all such things as are by law necessary to give final effect to the transfer of the property mentioned in sub-paragraph (1).

3. On the appointed day, all rights, powers, liabilities and duties, whether arising under any written law or otherwise, which immediately before the appointed day were vested in, imposed on or enforceable by or against the Government for and on behalf of the Fund shall, by virtue of this paragraph, be transferred to, vested in, imposed on or enforceable by or against the Board.

4. On and after the appointed day, all actions, suits or legal proceedings pending by or against the Government for and on behalf of the Fund shall be carried on or prosecuted by or against the Board.

5.(1) Subject to subparagraph (2), the officers, inspectors and servants appointed for the administration of the Fund in office on the appointed day shall be deemed to be officers, inspectors and servants appointed by the Board under section 11 of the Act.

(2) Notwithstanding the provisions of subparagraph (1), within twelve months after the appointed day, the Board shall review the qualifications of all persons deemed to be employees of the Board under subparagraph (1) and may retain those found suitably qualified for employment by the Board subject to—

- (a) such persons opting to remain in the service of the Board; and
- (b) such terms and conditions of service (not being to the disadvantage of such persons) as may be agreed with the Board.

(3) Any employee not retained by the Board under subparagraph (2) may exercise his option to either—

- (a) retire from the service of the Board; or
- (b) be redeployed within the public service.

(4) Where an employee enters into an agreement with the Board under subparagraph (2), his service with the Government shall be deemed to be terminated without the right to severance pay but without prejudice to all other remuneration and benefits payable upon the termination of his appointment with the Government.

6. The annual estimates for the Fund for the financial year in which the appointed day occurs shall be deemed to be the annual estimates of the Board for the remainder of that financial year:

Provided that such estimates may be varied by the Board in such manner as the Cabinet Secretary may approve.

SECOND SCHEDULE

[s. 7]

PROVISIONS AS TO THE CONDUCT OF BUSINESS AND AFFAIRS OF THE BOARD

[Act No. 1 of 2022, s. 44.]

1. Tenure of office

(1) A member of the Board other than an *ex officio* member shall, subject to the provisions of this Schedule, hold office for a period not exceeding three years, on such terms and conditions as may be specified in the instrument of appointment but shall be eligible for re-appointment for one more term of a period not exceeding three years.

- (2) The members of the Board shall be appointed at different times so that the respective expiry dates of the members' terms shall fall at different times.

2. Vacation of office

The office of a member of the Board, other than an *ex officio* member, shall become vacant if the member—

- (a) at any time resigns from office by notice in writing to the Cabinet Secretary;
- (b) has been absent from three consecutive meetings of the Board without the permission from the Chairperson;
- (c) is adjudged bankrupt enters into a composition scheme or arrangement with creditors;
- (d) is convicted of an offence involving dishonesty or fraud;
- (e) is convicted of a criminal offence and sentenced to imprisonment for a term exceeding six months or to a fine exceeding ten thousand shillings; or
- (f) is incapacitated prolonged by physical or mental illness.

3. Meetings

- (1) The Board shall meet not less than four times in every financial year and not more than four months shall elapse between the date of one meeting and the date of the next meeting.
- (2) The members of the Board shall, at the first meeting of the Board, elect from amongst their number, a vice-Chairperson from among members of the Board except *ex officio* members of the Board.
- (3) *Deleted by Act No. 1 of 2022, s. 44.*
- (4) The quorum for the conduct of the business of the Board shall be five members excluding the Chief Executive Officer.
- (5) The Chairperson shall preside at every meeting of the Board at which he is present but in his absence, the vice-Chairperson shall preside and, in his absence, the members present shall elect one of their number who shall, with respect to that meeting and the business transacted thereat, have all the powers of the Chairperson.
- (6) Unless a unanimous decision is reached, a decision on any matter before the Board shall be by a majority of votes of the members present and in the case of an equality of votes, the Chairperson or the person presiding shall have a casting vote.
- (7) Subject to paragraph (4), no proceedings of the Board shall be invalid by reason only of a vacancy among the members thereof.
- (8) Subject to the provisions of this Schedule, the Board may determine its own procedure and the procedure for any committee of the Board and for the attendance of any other persons at its meetings and may make guidelines in respect thereof.

4. Disclosure of interest

- (1) If a member is directly or indirectly interested in any contract, proposed contract or other matter before the Board and is present at a meeting of the Board at which the contract, proposed contract or other matter is the subject of consideration, he shall, at the meeting and as soon as practicable

after the commencement thereof, disclose the fact and shall not take part in the consideration or discussion of, or vote on, any questions with respect to the contract or other matter, or be counted in the quorum of the meeting during consideration of the matter:

Provided that if the majority of the members present are of the opinion that the experience or expertise of such member is vital to the deliberations of the meeting, the Board may permit the member to participate in the deliberations subject to such restrictions as it may impose.

- (2) A disclosure of interest made under this paragraph shall be recorded in the minutes of the meeting at which it is made.

5. *Deleted by Act No. 1 of 2022, s. 44.*

6. Minutes

The Board shall cause minutes of all proceedings of meetings of the Board to be entered in books kept for that purpose.

CHAPTER 255

THE NATIONAL HEALTH INSURANCE FUND ACT INDEX TO SUBSIDIARY LEGISLATION

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Regulations under section 15 & 26**THE NATIONAL HEALTH INSURANCE FUND (STANDARD
AND SPECIAL CONTRIBUTIONS) REGULATIONS**

[L.N. 14/2015]

1. These Regulations may be cited as the National Health Insurance Fund (Standard and Special Contributions) Regulations.

2. Regulation 3 of the National Health Insurance Fund Act (Standard Contributions) Regulations, 2003, Legal Notice No. 107 is amended by deleting paragraph (3) and substituting therefore the following:

3. The rate of contribution shall be graduated as follows—

<i>Gross Income (KSh.)</i>	<i>Proposed Premiums (KSh.)</i>
5,999	150
6,000-7,999	300
8,000-11,999	400
12,000-14,999	500
15,000-19,999	600
20,000-24,999	750
25,000-29,999	850
30,000-34,999	900
35,000-39,999	950
40,000-44,999	1,000
45,000-49,999	1,100
50,000-59,999	1,200
60,000-69,000	1,300
70,000-79,999	1,400
80,000-89,000	1,500
90,000-99,000	1,600
100,000-and over	1,700
Self-employed (Special)	500

This Legal Notice shall take effect from the 1st April, 2015

Regulations under section 15 & 26**THE NATIONAL HEALTH INSURANCE FUND (STANDARD
AND SPECIAL CONTRIBUTIONS) REGULATIONS**

[L.N. 185/2003, L.N. 107/2010, L.N. 14/2015, L.N. 82/2021]

1. These Regulations may be cited as the National Health Insurance Fund (Standard and Special Contributions) Regulations.

2. In these Regulations, except where the context otherwise requires—

"prescribed Form" means such as the Board may, from time to time, prescribe for the purposes of these Regulations;

"standard contributor" means a contributor under section 15(2)(a) of the Act;

[Subsidiary]

"special contributor" means a contributor under section 15(2)(b) of the Act;

3. The rate of contribution shall be graduated as follows—

<i>Gross Income (KSh.)</i>	<i>Proposed Premiums (KSh.)</i>
5,999	150
6,000-7,999	300
8,000-11,999	400
12,000-14,999	500
15,000-19,999	600
20,000-24,999	750
25,000-29,999	850
30,000-34,999	900
35,000-39,999	950
40,000-44,999	1,000
45,000-49,999	1,100
50,000-59,999	1,200
60,000-69,000	1,300
70,000-79,999	1,400
80,000-89,000	1,500
90,000-99,000	1,600
100,000 and over	1,700
Self-employed (Special)	500

[L.N. 14/2015.]

4. The Board may require an applicant under regulation (3) (2) to submit in respect of himself, his named spouse or named dependants, such evidence of identity, age, income, medical or mental conditions 4s may, in the Board's opinion, be necessary to determine the application to become a contributor.

5. (1) A standard contributor shall, through his or her employer, submit to the Fund, on the ninth day of the month following the one in which the deduction was made, his or her prescribed contribution.
- (2) An employer shall deduct the prescribed contribution from each employee and submit it to the Fund on the ninth day of the month following the one deduction is made.
- (3) The contribution referred to in this regulation shall be remitted in such manner as the Board may, from time to time, notify the employer.

[L.N. 82/2021, r. 2.]

6. Where as a result of late or delayed submission of standard contribution by an employer a contributor is unable to claim or obtain the benefits stipulated by the National Health Insurance Fund (Claims and Benefits) Regulations, the employer shall be liable to the contributor to the extent of the denied benefit and any other injury or inconvenience arising therefrom:

Provided that the liability stipulated in this regulation shall be without prejudice to any other liability and or penalty provided for in the Act.

Regulations under section 20**THE NATIONAL HEALTH INSURANCE FUND
(VOLUNTARY CONTRIBUTIONS) REGULATIONS**

[L.N. 187/2003, L.N. 83/2021]

1. These Regulations may be cited as the National Health Insurance Fund (Voluntary Contributions) Regulations.

2. In these Regulations, unless the context otherwise requires—

"prescribed Form" means such form as the Board may, from time to time, prescribe for the purpose of these Regulations;

"declared hospital" has the meaning assigned to it in the Act.

3. (1) Any person liable as a contributor under section 15(1) of the Act may apply to the Board to be a voluntary contributor so as to cover such other dependants as would otherwise not be entitled to the benefits under the standard or special contributions paid by the contributor.

(2) The application referred to in paragraph (1) for any year shall be in writing in the prescribed Form.

4. In determining whether to accept or reject an application under regulation 3, the Board may call for such evidence as may, in the Board's opinion, be necessary including evidence relating to—

- (a) the applicant's relationship to the person or persons to be covered as a dependant or dependants;
- (b) the identity, age, and income of the dependant; or
- (c) the medical condition of the dependant.

5. In determining the rate of contribution, the Board may take into account—

- (a) whether or not the voluntary contributor is already a contributor under standard or special contribution in accordance with the Act;
- (b) the contributor's appropriate rate of contribution as either standard or special contribution to the Fund; and
- (c) the financial implication on the contributor's total income:

Provided that the minimum rate of contribution shall be the sum of one hundred and sixty shillings (160) per month.

6. Prior to the acceptance of an application to become a contributor under these Regulations, the applicant shall be notified of the fact that—

- (a) an election to become a voluntary contributor for any dependant is irrevocable; and
- (b) the person on whose behalf a voluntary contribution is paid shall be registered as the contributor on the National Health Insurance Card.

7. A voluntary contributor shall pay the contribution to the Board on the ninth day of each month.

[L.N. 83/2021, r. 2.]

8. The National Health Insurance (Voluntary Contributions) Regulations are revoked.

[Subsidiary]

Regulations under section 27**THE NATIONAL HEALTH INSURANCE FUND (CLAIMS AND BENEFITS) REGULATIONS**

[L.N. 188/2003]

1. These Regulations may be cited as the National Health Insurance Fund (Claims and Benefits) Regulations.

2. In these Regulations, unless the context otherwise requires—

"prescribed Form" means such form as the Board may, from time to time, prescribe for the purposes of these Regulations;

"declared hospital" has the meaning assigned to it in the Act;

"hospital and medical treatment" includes food and bed, drugs, laboratory tests and diagnostic services, surgical or medical procedures or equipment, medicines, physiotherapy, and doctor's fees for both in-patient and out-patients in declared hospitals.

3. A claim for the payment of any benefits shall be made in writing in the prescribed Form, and shall be submitted to the Board within ninety days or such longer period as the Board may allow, from the date of discharge from the hospital and medical treatment in respect of which it is made.

4. The Board may require such further evidence of identity and of entitlement as is in its opinion necessary to substantiate the claim for benefit, including production by the contributor of his card.

5. Where a claim is lodged in respect of hospital and medical treatment received by a spouse who was not named on the contributor's card at the time of its issue, no benefit shall be paid in respect of hospital and medical treatment received by that spouse within twenty-eight (28) days immediately following the date upon which the name of that spouse was entered on the card if at that date such contributor had more than one spouse.

6. The maximum rate of daily allowance, which may be paid in respect of any declared hospital specified in the Schedule to these Regulations, shall be the rate respectively specified in the Schedule.

7. The maximum rate of benefit payable in respect of hospital and medical treatment to a contributor paying standard contribution shall be the maximum rebate payable to that hospital.

8. The maximum rate of daily allowance to be paid by the Fund in respect of treatment in declared hospital or medical facility shall not exceed the rate approved for that hospital by notice in the *Gazette*.

9. The National Health Insurance (Claims and Benefits) Regulations (Sub. Leg.), are revoked.

SCHEDULE

(r. 6)

DECLARED HOSPITAL AND APPROVED DAILY REBATE

<i>Declared Hospital</i>	<i>P.O. Box</i>	<i>Town</i>	<i>Approved N.H.I.F Daily Rebate</i>
A.I.C Kapsowar Hospital (Eldoret)	130	Eldoret	800
A.I.C Kijabe Medical Centre	20	Kijabe	1000

Declared Hospital	P.O. Box	Town	Approved N.H.I.F Daily Rebate
A.I.C Liten Cottage Hospital (Kericho)	200	Liten	800
A.I.C Githumu Hospital	41	Thika	700
Akemo Valley Maternity & Nursing Home	38	Nyangusu	700
Alpha Nursing Home	11	Mago, Kaimosi	400
Al-Shifaa Nursing Home	704	Garissa	600
Alupe Hospital (Busia)	33	Busia	600
Athi River Medical Services	336	Athi River	600
Avenue Hospital Ltd.	45280	Nairobi	800
Bakarani Maternity & Nursing Home (Mombasa)	12335	Mombasa	400
Baraka Maternity Nursing Home	2705	Nakuru	400
Baringo District Hospital (Amenity Wards)	21	Kabarnet	1000
Baringo District Hospital (Kabarnet)	21	Kabarnet	600
Barnet Memorial Hospital	490	Kabarnet	600
Bishop Kioko Catholic Hospital	2240	Machakos	1000
Bismillahi Nursing Home	429	Isiolo	400
Bondeni Maternity Hospital	124	Nakuru	600
Bondo District Hospital	89	Bondo	600
Bondo Medical Centre	600	Bondo	600
Bosongo Rural Nursing Home	2200	Kisii	600
Boya Rural Nursing Home	1207	Kisumu	800
Buffalo Nursing and Maternity	873	Suna-Migori	400
Bukaya Medical Centre	Imanga	Via Mumias	400
Bukura Community Maternity & Nursing Home	93	Bukura	400
Bungoma District Hospital	14	Bungoma	600
Bungoma Medical Centre	1229	Bungoma	400
Busia District Hospital	Private Bag	Busia	600
Busia District Hospital (Amenity)	Private Bag	Busia	800
Butula Mission Hospital (Busia)	Private Bag	Busia	600
Catholic Hospital Wamba via Maralal	281	Wamba via Maralal	800
Central Hospital, African Highland Produce	Private Bag	Kericho	600
Central Hospital (Brooke Bond)	57	Kericho	800
Central Maternity & Nursing Home	1144	Kakamega	800
Central Memorial Hospital (Thika)	1734	Thika	800
Changamwe Hospital Limited	98631	Mombasa	400
Chania Maternity and Nursing Home	3900	Thika	300
Charity Medical Centre	1710	Nyahururu	400
Cherengany Nursing Home	1881	Kitale	400
Chetambe Hills Nursing Home	878	webuye	400
Chiromo Lane Medical Centre	73749	Nairobi	600
Christa Marianne Hospital and Nursing Home	335	Kisii	100
Chuka District Hospital	8	Chuka	600

[Subsidiary]

<i>Declared Hospital</i>	<i>P.O. Box</i>	<i>Town</i>	<i>Approved N.H.I.F Daily Rebate</i>
Chuka District Hospital, Amenity Wing	8	Chuka	600
City Nursing Home (Nairobi)	14591	Nairobi	800
City Park Hospital	32009	Nairobi	400
Coast General Hospital (Mombasa)	90231	Mombasa	1000
Consolota Hospital (Nyeri)	25	Nyeri	1400
Consolota Hospital Chuka (Meru)	33	Meru	600
Consolata Hospital Kyeni (Embu)	6038	Runyenjes	800
Consolata Hospital Nkubu (Meru)	205	Meru	1000
Consolata Hospital Nkubu (Meru)	205	Meru	1000
Coptic Church Nursing	21570	Nairobi	800
Daraja Mbili Nursing & Maternity Home	716	Kisumu	600
Diani BEach Hospital Hospital	5074	Diani Beach	800
District Bospital Mandera	Private Bag	Mandera	600
Donyo Sabuk Maternity & Nursing Home	3601	Thika	400
Dr. Vibhakers Maternity & Nursing Home	90422	Mombasa	600
Dunga Maternity & Nursing Home	1534	Kisumu	800
Eastleigh Nursing Home	59328	Nairobi	400
Ediana Nursing Home	56270	Nairobi	400
Egerton University Health Centre	536	Njoro	600
Eldama Ravine District Hospital	102	Eldama Ravine	600
Eldoret Hospital	2234	Eldoret	1400
Elgon View Hospital	8406	Eldoret	700
Elgon Provincial Medical Cottage	1747	Bungoma	400
Embu Provincial Hospital	33	Embu	1000
Emmaus Innercore Nursing Home	78123	Nairobi	400
Emukaba Nursing Home	1211	Kakamega	400
Equator Hospital, Luanda	795	Luanda, Vihiga	600
Equator Nursing Home	44995	Nairobi	400
Eshisiru Maternity and Nursing Home	409	Kakamega	400
Evans Sunrise Medical Centre	15464	Nakuru	700
Foreign Claims	30443	Nairobi	1700
Friends Kaimosi Hospital	Private Bag	Tiriki	800
Friends Lugulu Hospital	40	Webuye	600
Gaichanjiru Catholic Hospital (Murang'a)	483	Thika	1000
Galana Hospital	47	Malindi	600
Gatundu District Hospital	84	Gatundu	600
Getrude Garden Childre's Hopital (Nairobi)	42325	Nairobi	1400
Gesusu Sub-District Hospital	92	Kisii	600
Gatembe Nursing Home	153	Kisii	800
Gilgil Hospital, Nakuru	P.O.	Gilgil	600
Glory Maternity & Nursing Home	2398	Kakamega	800
Good Hope Medical Centre	1267	Nyahururu	400
Greenview Nursing Home	868	Kericho	600

Declared Hospital	P.O. Box	Town	Approved N.H.I.F Daily Rebate
Gucha Cottage Maternity & Nursing Home	573	Keroka	400
Gucha District Hospital	6	Ogembo	600
Guru Nanak Ramgarhia Sikh Hospital	33071	Nairobi	1400
H.H. Agan Khan Khan Dispensary & Maternity Hospital, Kisumu	530	Kisumu	1400
H.H. Aga Khan Hospital, Mombasa	83013	Mombasa	1400
H.H. Aga Khan Hospital, Nairobi	30270	Nairobi	1400
Hema Hospital	2	Kisii	800
Hola District Hospital	38	Hola	600
Holy Family Hospital Nangina	57	Funyula	800
Homa Bay District Hospital	52	Homa Bay	600
Homa Bay District Hospital (Amenity Ward)	52	Homa Bay	800
Home Confinement	30443	Nairobi	400
Huruma Nursing & Maternity Home	72934	Nairobi	400
Immaculate Heart of Mary Hospital	7	Thika	800
Inder Nursing Home	31416	Nairobi	1000
Isana Maternity & Nursing Home	2482	Kisii	400
Ishiara District Hospital, Embu	125	Ishiara	600
Isiolo District Hospital	3	Isiolo	600
Isiolo District Hospital (Amenity)	42	Isiolo	800
Iten District Hospital	332	Iten	800
Iten District Hospital Hospital (Elgeyo Marakwet)	0	Iten	600
Itiero Maternity & Nursing Home	874	Kisii	400
J.K.U.A.T. Hospital	62000	Nairobi	600
Jalaram Nursing & Maternity Home	990	Kisumu	800
Jamaa Home & Maternity Hospital, Nairobi	17153	Nairobi	600
Jamii Maternity Nursing Home	1230	Karatina	800
Jocham Hospital	88984	Mombasa	1000
Jordan Hospital	1143	Kitui	400
Joy Kim Nursing Home	1050	Embu	700
Kajiado District Hospital	31	Kajiado	600
Kamiti Hospital	40061	Nairobi	600
Kanan Medical Centre	1029	Nyahururu	600
Kangundo District Hospital	1002	Kangundo	600
Kapenguria District Hospital	63	Kapenguria	600
Kapkatet District Hospital	Private Bag	Kericho	600
Kapsabet District Hospital	5	Kapsabet	600
Kapsabet District Hospital (Amenity)	5	Kapsabet	800
Kapsabet Nursing Home	332	Kapsabet	400
Karatina District Hospital	133	Karatina	600
Karatina Maternity & Nursing Home	16	Karatina	600
Kasarani Nursing & Maternity Home	31524	Nairobi	600
Kathiana Hospital, Machakos	Private Bag	Kathiana	600

[Subsidiary]

<i>Declared Hospital</i>	<i>P.O. Box</i>	<i>Town</i>	<i>Approved N.H.I.F Daily Rebate</i>
Kayole Hospital	67617	Nairobi	800
Kendu Mission Hospital, Kendu Bay	20	Kendu Bay	1000
Kenyatta National Hospital, Amenity Wing	20723	Nairobi	2000
Kenyatta National Hospital , General Ward	20725	Nairobi	1000
Kenyatta National Hospital, Maternity Ward	20723	Nairobi	800
Kericho District Hospital	11	Kericho	600
Kericho Nursing Home Limited	510	Kericho	800
Kerugoya District Hospital	24	Kerugoya	600
Kerugoya District Hospital, Amenity	24	Kerugoya	800
Ketri, Alupe Hospital	399	Busia	400
Kiambu Cottage Hospital	1241	Kiambu	300
Kiambu District Hospital	39	Kiambu	600
Kiambu District Hospital, Amenity Wing	39	Kiambu	800
Kibos Road Maternity & Nursing Home	283	Kisumu	600
Kikoko Mission Hospital, Machakos	122	Nunguni	600
Kikuyu Nursing Home	305	Kikuyu	800
Kilifi District Hospital	9	Kilifi	600
Kilimanjaro Maternity & Nursing Home	43920	Nairobi	600
Kima Mission Hospital	410	Kisumu	800
Kimilili Medical Centre	320	Kimilili	400
Kimini Cottage Hospital	3936	Kitale	400
Kinango Hospital, Kwale	84	Kinango	600
Kipchimchim Mission Hospital	31	Kericho	600
Kipini District Hospital	Private bag	Kipini	600
Kiriaini Consolata Hospital, Murang'a	239	Kiriaini	800
Kirinyaga Nursing Home	598	Kerugoya	400
Kisii District Hospital	92	Kisii	600
Kisumu District Hospital	1818	Kisumu	600
Kisumu District Hospital, Amenity	1818	Kitale	800
Kitale District Hospital	98	Kitale	600
Kitale District Hospital, Amenity	98	Kitale	800
Kitale Nursing Home	1825	Kitale	600
Kitui District Hospital	22	Kitui	600
Komarock Nursing Home	19749	Nairobi	400
Koru Nursing Home	151	Koru	800
Kwale District Hospital	9030	Kwale	600
Lady Griggs Maternity Hospital	90231	Mombasa	1000
Lady Tharau Hospital	456	Kakamega	700
Laikipia Maternity and Nursing Home	168	Nanyuki	400
Laisamis Catholic Hospital	74	Isiolo	400
Lamu District Hospital	45	Lamu	600
Lamu Nursing Home	359	Limuru	800
Lodwar District Hospital	Private Bag	Lodwar	600

Declared Hospital	P.O. Box	Town	Approved N.H.I.F Daily Rebate
Loitoktok District Hospital	Private Bag	Loitoktok	600
Loikitang Hospital, Lodwar	P.O.	Loitang	600
Londiani District Hospital	54	Londiani	600
Longisa District Hospital	393	Bomet	600
Lumboka Memorial Hospital	260	Bungoma	600
Lumino Maternity & Nursing Home	908	Mumias	600
Lumino Maternity & Nursing Home	310	Vihiga	400
Maasai Nursing Home	237	Narok	400
Machakos Healthcare Centre	826	Machakos	400
Machakos Nursing Home, Machakos	456	Machakos	800
Madina Nursing Home	78370	Nairobi	800
Magadi Soda Company Hospital, Magadi	10	Magadi	800
Makindu District Hospital	81	Makindu	600
Makueni Hospital, Machakos	95	Makueni	600
Makupa Maternity & Nursing Home	99996	Mombasa	800
Makutano Maternity Nursing Home Meru	1435	Meru	400
Malindi District Hospital	4	Malindi	600
Mandera Nursing Home	52	Mandera	400
Maralal District Hospital	12	Maralal	600
Maria Immaculate Hospital	57216	Nairobi	600
Maria Maternity & Nursing Home	34736	Nairobi	400
Mariakani Cottage Hospital Limited	12535	Nairobi	400
Marie Stopes Hospital (K) Ltd.	887	Murang'a	300
Maries Stopes Hospital (K) Ltd.	84771	Mombasa	500
Marsabit District Hospital	Private Bag	Moyale	600
Marura Nursing Home	75520	Nairobi	400
Mary Help of the Sick Mission Hospital	792	Thika	800
Mary Immaculate Hospital	369	Mweiga	800
Mary Immaculate Maternity and Dispensary, Mombasa	98435	Mombasa	600
Mary Immaculate Ndundu Health Center	550	Ruiru	4000
Masaba Hospital	53648	Nairobi	800
Masaba Nursing Home, Nairobi	53648	Nairobi	400
Maseno Hospital	116	Maseno	800
Masogo Maternity & Nursing Home	366	Oyugis	600
Matasia Health Clinic	185	Kiserian	400
Matata Nursing & Maternity Home	27	Oyugis	800
Mater Misericordiae Hospital, Nairobi	30325	Nairobi	1400
Mathare Mental Hospital (General Ward)	40663	Nairobi	800
Mathare Mental Hospital (Extension)	129	Gilgil	600
Matuu Nursing Home	2695	Matuu	400
Maua Methodist Hospital, Meru	63	Maua	1000
Mbagathi District Hospital	20725	Nairobi	1000
Menengai Nursing and Maternity Home	2811	Nakuru	800
Mercy Hospital, Eldama Ravine	10	Eldama-Ravine	1000

[Subsidiary]

<i>Declared Hospital</i>	<i>P.O. Box</i>	<i>Town</i>	<i>Approved N.H.I.F Daily Rebate</i>
Meru District Hospital	8	Meru	600
Meru District Hospital, Amenity	8	Meru	800
Metro Politan Hospital	33080	Nairobi	600
Mewa Medical Care	98591	Mombasa	800
Midhill Materniy & Nursing Home	21138	Nairobi	400
Migori District Hospital	200	Suna-Migori	600
Milimani Maternity & Nursing Home, Meru	326	Meru	700
Milimani Maternity and Nursing Home	441	Kisumu	400
Misikhu Mission Hospital	129	Webuye	1000
Mlaleo Health Centre	40951	Mombasa	400
Moi National Referral & Teaching Hospital (General Ward), Eldoret	3	Eldoret	1400
Moi National Referral & Teaching Hospital (Amenity), Eldoret	3	Eldoret	2000
Moi's Bridge Maternit and Nursing Home	482	Moi's Bridge	600
Molo District Hospital	156	Molo	600
Mombasa Hospital Association	90294	Mombasa	1400
Mother and Child Maternity & Nursing Home	12658	Nairobi	400
Mount View Maternity and Nursing Home	544	Voi	400
Moyale District Hospital	Private Bag	Moyale	600
Msambweni District Hospital	8	Msambweni	600
Mt. ELgon Hospital, Kitale	339	Kitale	600
Mt. Kenya Hospital	201	Nyeri	800
Mt. Longonot Maternity and Nursing Home	1840	Naivasha	400
Muhoroni Nursing & Maternity	4138	Kisumu	400
Mukurwe-ini Sub District Hospital	27	Nyeri	600
Mumias Maternity and Nursing Home	534	Mumias	600
Murang'a District Hospital	69	Murang'a	600
Muriranja District Hospital	Private Bag	Murang'a	600
Muthale Mission Hospital, Kitui	532	Kitui	600
Mutomo Mission Hospital, Mutomo	16	Kitui	600
Mwea Medical Centre	187	Wanguru	800
Mwea Mission Hospital, Yala	8	Khwisero	800
Mwingi Hospital, Kitui	8	Kitui	600
Nairobi Equator Hospital	44995	Nairobi	400
Nairobi Hospital, Nairobi	30026	Nairobi	1400
Nairobi West Hospital	43375	Nairobi	1000
Nairobi women's Hospital	10552	Nairobi	700
Naivasha District Hospital	141	Naivasha	600
Nakuru Maternity and Nursing Home	1769	Nakuru	1000
Nakuru Prison Hospital Nakuru	14	Nakuru	600
Nakuru War Memorial Hospital, Nakuru	240	Nakuru	1000
Nala Maternity & Nursing Home	560	Kakamega	400

Declared Hospital	P.O. Box	Town	Approved N.H.I.F Daily Rebate
Nandi Hills District Hospital	84	Nandi	600
Nanyuki Cottage Hospital, Nanyuki	95	Nanyuki	800
Nanyuki District Hospital	66	Nanyuki	400
Nanyuki Maternity and Nursing Home	20	Nanyuki	400
Narock District Hospital	11	Narok	600
National Spinal Injury Hospital	20906	Nairobi	1000
Nazareth Hospital, Riara Ridge	49682	Nairobi	1000
New Busia Maternity and Nursing Home	418	Busia	400
New Mvita Nursing Home	81477	Mombasa	400
New Ngei Road Maternity & Nursing Home	754	Machakos	400
Ngao Hospital, Tana River	P.O	Tarasaa	600
Ngong Hills Maternity	572	Ngong	400
Nightingale Maternity & Nursing Home	1971	Kisumu	800
North Kinangop Catholic Hospital	88	North-Kinangop	800
Nyahururu District	86	Nyahururu	600
Nyambane District Hospital	481	Maua	600
Nyamira Adventist Medical Center	285	Nyamira	400
Nyamira District Hospital, Kisii	3	Nyamira	600
Nyamira District Hospital, Kisii (Amenity)	Private Bag	Nyamira	800
Nyamira Maternity & Nursing Home	143	Nyamira	600
Nyangena Hospital	3492	Kisii	600
Nyar Alego Nursing Home	76	Siaya	400
Nyasiongo Maternity and Nursing Home	358	Nyasiongo	400
Nyeri Nursing Home (2001) Limited	1205	Nyeri	800
Nyeri Prison Hospital, Nyeri	27	Nyeri	600
Nyeri Provincial General Hospital	27	Nyeri	1000
Nyina wa Mumbi Maternity Hospital	21283	Nairobi	600
Ojele Memorial Hospital	355	Suna-Migori	600
Ol'Kalou District Hospital	221	Ol'Kalou	600
Ol'Kalou District Hospital (Amenity)	221	Ol'Kalou	800
Ortum Mission Hospital, Kitale	1312	Kitale	800
Oruba Nursing and Maternity Home Ltd.	162	Suna	800
Outspan Hospital	2058	Nyeri	800
Owens Maternity and Nursing Home	134	Bondo	400
P.C.E.A Hospital, Tumutumu Karatina	Private Bag	Karatina	800
P.C.E.A Hospital, Kikuyu	45	Kikuyu	1000
P.C.E.A Orthopaedic Centre	1010	Kikuyu	1000
P.C.E.A Chogoria Hospital, Meru	35	Chogoria	1000
Pacifica Hospital	2902	Eldoret	800
Pandya Memorial Hospital, Mombasa	90434	Mombasa	1400
Parkroad Nursing Home, Nairobi	19850	Nairobi	600
Pastor Machage Memorial Hospital	388	Suna-Migori	600
Pine Breeze Hospital	3116	Nakuru	1000
Plateau Mission Hospital, Eldoret	724	Eldoret	600

[Subsidiary]

Declared Hospital	P.O. Box	Town	Approved N.H.I.F Daily Rebate
Poly-Clinic Hospital	1503	Naivasha	300
Port Reitz Chest Hospital	90502	Mombasa	600
Port Victoria Sub-District Hospital	19	Port Victoria	600
Prime Care Hospital	75209	Nairobi	400
Provincial General Hospital Annex, Nakuru	675	Nakuru	1000
Provincial General Hospital (Machakos)	19	Machakos	1000
Provincial General Hospital, Garissa	23	Garissa	1000
Provincial General Hospital, Kakamega	15	Kakamega	1000
Provincial General Hospital, Kisumu	849	Kisumu	1000
Pumwani Maternity Hospital, Nairobi	30108	Nairobi	800
Pwani Maternity and Nursing Home	114	Kilifi	400
Rachuonyo District Hospital	42	Oyugis	600
Ram Memorial Hospital	554	Kisii	700
Rift Valley Provincial General Hospital, Nakuru	71	Nakuru	1000
S.S. League M.P.Shah Hospital, Nairobi	14497	Nairobi	1400
Sabatia Eye Hospital	214	Wodanga	700
Sagam Community Hospital	888	Yala	700
Sally Nursing Home	307	Sare	400
Sega Cottage Hospital	145	Sega	400
Sega Mission Hospital	4	Sega	600
Shalom Hospital	1513	Machakos	800
Sharlom Maternity and Nursing Home	83460	Mombasa	600
Sher Agencies Hospital	729	Naivasha	400
Shimo la Tewa Hospital, Mombasa	90152	Mombasa	600
Siaya District Hospital	Private Bag	Siaya	600
Siaya District Hospital (Amenity Ward)	144	Siaya	800
Siaya Medical Centre	1120	Siaya	800
Siloam Hospital	2181	Kericho	600
Sinai Mt. Hospital	52874	Nairobi	600
Sister Fridas Medical Centre	696	Kitale	600
Sololo Mission Hospital, Sololo	Via	Isiolo	600
Sot Nursing Home	258	Bomet	400
South "B" Nursing Home	49255	Nairobi	400
St. Anne Hospital Egoji, Meru	24	Meru	600
St. Annes Maternity Home, Nairobi	54337	Nairobi	400
St. Clares Mission Hospital, Kaplong	4	Sotik	1000
St.Elizabeth Hospital, Mukumu	127	Mukumu	1000
St. Elizabeth Hospital Lwak	18	Nyilima	600
St. James Hospital	46024	Nairobi	800
St. James Medical Centre	10275	Nairobi	600
St. John Health Clinic	51754	Nairobi	400
St. Joseph's Hospital, Kilgoris	40	Kilgoris	800
St. Joseph's Hospital, Nyabondo	341	Sondu	800
St. Joseph's Mission Hospital, Migori	250	Migori	800

Declared Hospital	P.O. Box	Town	Approved N.H.I.F Daily Rebate
St. Joseph's Nursing and Maternity Home	713	Molo	400
St. Leonards Maternity and Nursing Home	128	Kericho	800
St. Lucies Hospital	125	Chuka	400
St. Luke Hospital Kaloleni, Mombasa	16	Kaloleni	800
St. Luke's Maternity and Nursing Home	1431	Thika	600
St. Mary's Hospital, Mumias	250	Mumias	1000
St. Matia Mulumba Hospital	3365	Thika	800
St. Michael Nursing Home	2271	Embu	600
St. Monica's Hospital	523	Kisumu	800
St. Teresa Maternity and Cottage Hospital	2095	Meru	600
St. Theresa's Maternity and Nursing Home	12	Asembo Bay	300
St. Camillus Mission Hospital	119	Karungu	1000
St. Joseph Cottolengo Hospital	1426	Meru	600
St. Martins Cottage Hospital	4477	Kitale	400
St. Theresa Maternity Home	1370	Kikuyu	700
Star Children Hospital	4516	Kisumu	400
Star Hospital	677	Malindi	700
Suba District Hospital	50	Mbita	600
Sulmac Cottage Hospital	314	Naivasha	400
Suna Nursing and Maternity	977	Suna-Migori	400
Tabaka Mission Hospital, Kisii	955	Kisii	1000
Tambach District Hospital	Private Bag	Tambach	600
Tanaka Nursing Home	485	Busia	400
Taveta District Hospital	31	Taveta	600
Tawfig' Muslim Health Centre	629	Malindi	400
Teminas Hospital	561	Suna-Migori	400
Tenwek Hospital Bomet (Sotik)	39	Bomet	1400
Teso District Hospital	99	Amagoro	600
The Kitui Hospital (Kitui)	44	Kitui	400
The Radiant Health Clinic (Nairobi)	31278	Nairobi	600
Thika District Hospital	227	Thika	600
Thika Family Hospital	4577	Thika	600
Thika Nursing Home, Thika	429	Thika	600
Tigania Hospital, Meru	553	Meru	800
Tigoni District Hospital	124	Tigoni	600
Tumbe Hospital, Kwale	P.O.	Kwale	600
Uasin Gishu Memorial Hospital, Eldoret	180	Eldoret	1400
Valley Hospital Limited	16243	Nakuru	800
Vicktoria Hospital, Kisumu	49	Kisumu	1000
Vihiga District Hospital	1069	Maragoli	600
Voi District Hospital	18	Voi	600
Wajir District Hospital, Wajir	29	Garissa	600
Walon Hospital	561	Rongo	400
Waso Medical Services & Nursing Home	265	Isiolo	600

[Subsidiary]

Declared Hospital	P.O. Box	Town	Approved N.H.I.F Daily Rebate
Webuye District Hospital	25	Webuye	600
Webuye Nursing Home	1122	Webuye	400
Western Maternity and Nursing Home	168	Matunda-Kita	300
Westlands Cottage Hospital	28367	Nairobi	800
Wesu District Hospital	1022	Wundanyi	600
Whitestone Hospital	4711	Kisumu	800
Woodlands Hospital, Meru	497	Meru	1000
Yala Sub-district Hospital	302	Yala	600

Regulations under section 30**THE NATIONAL HEALTH INSURANCE FUND (ACCREDITATION) REGULATIONS**

[L.N. 186/2003, L.N. 17/2005]

1. These Regulations may be cited as the National Health Insurance Fund (Accreditation) Regulations.

2. In these Regulations, unless the context otherwise requires—

"prescribed Form" means such form as the Board may, from time to time, prescribe for the purposes of these Regulations;

"District Health Management Board" means the District Health Management Board existing administratively under the Ministry of Health.

3. (1) Every hospital or health care facility wishing to avail itself of the claims and benefits from the Fund shall apply to the Board for accreditation, registration and gazettelement, by filling the prescribed Form.

(2) The prescribed Form shall contain information on, such facilities and issues as are necessary for the delivery of the services for which the institution seeks accreditation, registration and gazettelement.

(3) The information referred to in paragraph (2) shall include—

- (a) general information on the type of buildings, environmental, suitability, floor area and such other information etc;
- (b) facilities such as wards, pharmacy, laboratory, theatres, ear, nose and throat clinic, dental services, drug store, service room and, toilets;
- (c) servicing such as training school, ambulance, family planning, and maternal child health;
- (d) equipment such as x-ray, standby generator, scanning machine, test equipment, incubator, radiological unit, wheelchair, stretcher and, trolley;
- (e) staff; and
- (f) bed capacity, including baby cots.

4. (1) Upon receipt of the filled application form, the Board shall cause the institution to be examined by the District Health Management Board or such other body as the Board may deem appropriate, for the purposes of verifying the information in the application form, and determining whether or not to accredit the institution and its category for the purposes of ascertaining the daily claim rates to be applicable.

(2) No benefit shall be payable to a hospital or health care facility that is not accredited in accordance with these Regulations, except as may be provided for in the National Health Insurance Fund (Claims and Benefits) Regulations.

5. An institution whose accreditation and registration is obtained through false or fraudulent information, or violates the provisions of the Act or any of the Regulations made there under, shall—

- (a) be de-registered by the Board;
- (b) be liable to the penalty provided for by section 25(4) of the Act

6. (1) Where an institution has been de-registered under regulation 5, it may apply for fresh accreditation and registration, at the end of two years from the date the de-registration takes effect.

(2) An institution seeking accreditation under paragraph (1) may be accredited and registered under such terms and conditions, as the Board may deem appropriate.

7. The Board shall, at least once every year, inspect every accredited institution to ensure compliance with the provisions of the Act and these Regulations:

Provided that for the purpose of this regulation, the Board may appoint, as its agent, any competent person, institution or authority, and such person, institution or authority shall have the same powers as those of an inspector under section 32 of the Act.

8. The Board shall order for a comprehensive inspection report to be done on any institution applying for accreditation by the management.

9. *Repealed by L.N. 17/2005, r. 2.*
