

if international technical support could be mobilised, then Yemen could offer all its citizens in a foreseeable future good health care in case of need and not only according to their ability to pay. This is, what social health insurance intends to achieve.

7. Literature²²

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²² A full list of literature is included in part 1 of our study report.

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Annex 1 Comments on the social health insurance law proposal

<u>Republic of Yemen</u> Social Health Insurance law (Final draft)	<u>Comments</u> ²³ Social Health Insurance law (Final draft)
<p>Article (1) This Law is nominated (Social Health Insurance Law)</p>	<p>Additional article: In the spirit of national solidarity and for the mutual benefit of all citizens the main aim of this law to reduce the high burden of out-of-pocket spending in case of diseases, especially for the poor and the vulnerable parts of population. Social health insurance intends to contribute to a sustainable financing of a high quality of health care for all and everybody. Each member of our Yemeni society shall get good health care according to need and not according to capacity to pay. Pre-payments for health care will substitute cost-sharing in case of illness.</p>
<p>Article (2) Definitions Republic: Republic of Yemen Ministry: Ministry of public Health and population Minister: Minister of public Health and population Law: Law of social Health Insurance Board: Board of Health Insurance Organization Organization: Health Insurance Organization Chief of the Board: . The Minister of public Health and Population, the chief of the board of Health Insurance Organization Employer: Administrative system of the government and units of both public and mixed sectors also any person or representative recruit a worker or more for a wage. Insured: Employee or worker or beneficiary benefiting from Health Insurance system paying the contributions stipulated in the social Health Insurance Employee: The person recruited in a job to do any intellectual, professional or technical or other works, the job which is approved in the balance of the government , public sector or mixed sector. Labour: Any person male or female working at a self-employer under his supervision and administration for a wage. Pensioner: Retired person having a pension according to social security laws and pension laws. Contributions: Premiums of both employer and employees stipulated in the articles of this law. Whole wage: The wage of the insured considered as the basis upon which the percentage of subscriptions are calculated. All incentives and benefits are taken in consideration. Employment injury: Injury with one of the occupational diseases listed in the table of the occupational diseases annexed to the executive bylaw of this law, all injuries</p>	<p>OK</p>

²³ The modification of the law and its fine-tuning according to the recommendations of the study on a national health insurance system still needs quite some consultations with the advisory board that was recommended. All stakeholders shall be included as well as representatives of the civil society.

<p style="text-align: center;">Republic of Yemen Social Health Insurance law (Final draft)</p>	<p style="text-align: center;">Comments ²³ Social Health Insurance law (Final draft)</p>
<p>happening during work and due to it including related road injuries also injuries resulting from stress and exhaustion according to conditions and rules issued from the Minister of public Health and population.</p> <p>Injured insured: The insured covered by employment injury insurance and suffered from the injury.</p> <p>Re-Suffering: The injured insured complaining from the same employment injury after returning back to work approved by the medical authority based on medical data.</p> <p>Sick person: Who injured by a sickness or an injury which is not employment injury.</p>	
<p>Article (3) A system of social Health Insurance is instituted, it includes:</p> <p>(A) Sickness Insurance</p> <p>(B) Employment Injuries Insurance</p> <p>The system according to the stipulations of this law is compulsory.</p>	<p>Replacement: A system of social health insurance is instituted. It will cover sickness insurance first and might expand later on into work injuries insurance, according to decision of the cabinet. It will design, develop, test, recognize, support and step-by-step harmonize all health insurance endeavours of public and private agencies and companies, of communities, for the self-employed, the unemployed and for those who can not afford paying insurance contributions by themselves. For the employees of the formal public and private employment sectors membership will be compulsory. For other sectors of society it will be decided by board decision, if membership is compulsory or voluntary.</p>
<p>Article (4) The stipulations of this law covers</p> <p>1- Workers covered by the law No. (19) for the year 1991 concerning civil services.</p> <p>2- Workers covered by the labour law No. (5) for the year 1995 and it's amendments. Keeping the stipulations of the international agreements, approved by the republic active, foreigners covered by labour law, to be covered by this law, they must have a contract not less than one year and the same situation is adopted by their countries</p> <p>3- Any other sectors, the Council of Ministers approve their coverage by this law who are not covered by the stipulations of the two laws mentioned in items (1) and (2) of this article.</p> <p>4- Pensioners who retired according to civil law.</p> <p>5- The rest of republic citizens who approves the council of ministers to be covered by this law.</p>	<p>To be added: Family members of the insured will receive the same benefits stipulated by the law. Family members include wife/husband/partner and children below legal age. For fathers, mothers and other family members living in the household of the insured special arrangements will be developed.</p>
<p>Article (5) The stipulations of this law covers who are mentioned in article (4), gradually, sectorially or geographically.</p>	<p>OK</p>
<p>Article (6) Exemption from the stipulations of article (4) of this law, employment injuries insurance covers workers who are less than 18 years of age.</p>	<p>OK</p>
<p>Article (7) The provided services of health insurance to insured includes the services of prevention, treatment and rehabilitation with their different levels and the medical investigations needed for them as</p>	<p>To be added: A comprehensive and cost-effective benefit package shall be given. Details of the benefit package will be developed and tested based on actuarial</p>

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<p>what specified in the executive bylaw of this law.</p>	<p>studies, the availability of providers, as well as on negotiations for public subsidies to be given in cash or kind by the government or public health facilities. Prevention and basic primary health care for all citizens will be the continued responsibility of the Ministry of Public Health and Population until a Health Insurance Authority can take over all health care. It will be decided later, if sick-leave-payment and related benefits shall be included and when this will start.</p>
<p>Book Two Sickness Insurance</p> <p>Section one Financing and scope of implementation</p>	
<p>Article (8) Sickness Insurance is financed from these resources</p>	
<p>First: Monthly contributions which include (A) Contribution of the employer constituting 6% of insured wages covered by stipulations of this law according to items (1),(2) of article(4)of this law (B) Contribution of the government constituting 6% of the pension for the pensioners retired according to item (4) of article (4) of this law. (C) Contribution of the insured constituted of: (1) 5% of the wages for those covered according to the items (1) , (2) of the article (4) of this law (2) 5% of the pension for those retired according to item (4) of the article (4) of this law.</p>	<p>To be added: (D) Basis, size and periodicity of contributions of other population groups to be included in social health insurance will be determined in the process of developing and testing appropriate health insurance schemes for them</p>
<p>Second: Co-payments of the insured (1) Co-payment of the insured by third of the price of drugs outside hospitals except for chronic diseases which decided by a decree from the Minister of Public Health and population. (2) Co-payment of the insured from the cost of service outside the hospital by a percent not exceeding the third of the price of the service approved by the organization or third of it's cost, which is possible and the Minister of Health and populations issues a decree deciding the value of this, co-payment and it's conditions according to a proposal from chairman of the organization.</p>	<p>Replacement: Co-payments will be charged only to avoid moral hazard. Its amounts will be decided during the implementation process. For one serious illness episode co-payment should not exceed one monthly per capita income of the insured</p>
<p>Third: Other revenues: Revenue of a cigarette tax equals to (5 Rials) on each 20 cigarettes, local or foreign, soled in the local market. This tax is collected through a decree from the Minister of finance after coordination with the Minister of public Health and population.</p>	<p>To be added: Further revenues from taxes on qat and other consumer goods or commodities will be negotiated. Raising additional funds for paying the contributions of the poor and vulnerable from Zakat and Endowment funds will be strongly advocated and partners linked to these sectors will be</p>

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	invited to participate in the spirit of solidarity for all.
<p>Fourth: The yield of investment of the above mentioned resources</p>	<p>To be added: The principle of collective equivalence should prevail. At least 90% of the regular revenues should be spend for health benefits of the insured.</p>
<p>Article (9) The Council of Ministers, by a proposal from the Minister of Public Health and population, may extend the coverage according to article (4) by adding new sectors and deciding the value of contributions and co-payments and the sponsors by not more than double of values decided in this law.</p>	<p>To be deleted: 11 last words of article</p>
<p>Article (10) The stipulations of this book cover the insured gradually according to article (4) of this law by a decree from the Minister of public Health and population after presenting to the Council of Ministers</p>	<p>To be added after MoPH&P: or other stakeholders</p>
<p>Article (11) The Minister of Public Health and population may issue a decree to implement the stipulations of this insurance on wife of the died pensioner (the widow) after presenting to the council of Ministers and coordination with the Minister of Insurance. This decree states the conditions and situations of benefiting by this insurance and the percentage of contribution</p>	<p>To be added after MoPH&P: or other stakeholders</p>
<p>Article (12) Health Insurance organization is responsible for providing health insurance services stipulated in this law, through the providers it decides, inside or outside it's facilities and according to the levels of medical care and the rules issued by a decree from the Minister of Public Health and Population.</p>	<p>To be modified: The Health Insurance organization is responsible for contracting the best cost-effective and high-quality health services available in public, private or mixed sectors of providers. Quality assurance and cost-containment programmes will be a prerequisite for contracting health services.</p>
<p>Article (13) The coverage by this insurance is stopped through these situations</p> <p>(1) working period of the insured by an employer not covered by this insurance.</p> <p>(2) periods outside the country for any reason.</p> <p>(3) period of special leaves, educational leaves, scientific missions, which are used by the insured outside the country.</p> <p>(4) conditions of pension stopping for the widow.</p>	<p>To be added: (5) Coverage can be prolonged by voluntary contributions to be calculated.</p>
<p>Section Two Services of Health Insurance provided to Insured</p>	
<p>Article (14) Services of health Insurance provided to insured means the preventive, treatment , rehabilitation and medical investigation services as specified in the executive bylaw of the law and specially the following services:</p> <p>(1) Medical services provided by the general practitioner.</p> <p>(2) Medical services at the level of the specialist</p>	<p>To be deleted: Already contained in article (7)</p>

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<p>including dental specialist. (3) Treatment and inpatient care of hospital , chronic disease institution or specialized centre. (4) Surgical operations and other kinds of treatment as needed. (5) x-ray and lab investigations and the other medical investigations or alike (6) Diagnostic and treatment investigations and alike. (7) Drug dispensary needed in all cases mentioned above. (8) Care <i>for</i> the insured female during pregnancy and delivery (9) Provision of the rehabilitation services , appliances and prosthesis according to the conditions and situations decided by a decree from the Minister of public Health and population.</p>	
<p>Article (15) Health Insurance organization takes the responsibility of treating the insured and caring for them medically in the providing facilities which specified for them by the organization and it is not accepted to provide that treatment or medical care in clinics or chronic disease institutions or hospitals or specialized centers except under special agreements activated for that purpose, specifying the minimum standard for the levels of medical care and it's price and it is not accepted for the standard of the medical services , in this case , to be less than the minimum standard issued in the decree of the Minister of public Health and population.</p>	<p>To be deleted: Already contained in article (12)</p>
<p>Book Three</p> <p>Employment Injuries Insurance Financing, Health Insurance services provided and executive stipulations</p>	
<p>Article (16) Employment Injuries Insurance is financed by (1) Monthly contributions for which the employer is held responsible according to a percent of 2% of the wages of insured referred to them by article (4) of this law. (2) Yield of investment of contributions referred to. Employers are exempted from contributions of insured referred to them in article (6) of this law if they are ruled out of wages.</p>	<p>To be postponed</p>
<p>Article (17) It is meant by the health insurance services provided to who are covered by employment injuries insurance, all what is mentioned in article (14) of this law and it's executive bylaw.</p>	<p>To be postponed</p>
<p>Article (18) Employer is held responsible , in case of employment injury, to transport the insured to</p>	<p>To be postponed</p>

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<p>treatment facilities specified by the health insurance organization and a decree from the Minister of public Health and population is issued in cooperation with the Minister of Insurance deciding the executive stipulations of employment injuries insurance concerning procedures of treatment , medical care and cases of re-suffering or complications resulting from the employment injury and settlement the cases of permanent disability.</p>	
<p>Article (19) It is considered as an employment injury each case of re-suffering <i>from</i> the same previous employment injury or a complication resulting from it.</p>	<p>To be postponed</p>
<p>Article (20) It is decided by a decree from the Minister of public Health and population in cooperation with the Minister of Insurance , the procedures should be taken by the insured in case of requesting to re-evaluate the decision of treatment provider by ending the treatment and returning back to work or by denying the affection with an occupational disease or unsettlement of a disability or it's estimated percent.</p>	<p>To be postponed</p>
<p>Article (21) The conditions and situations of considering the injury resulting from stress or exhaustion from work an employment injury are issued by a decree from the Minister of public Health and population in cooperation with the Minister of Insurance</p>	<p>To be postponed</p>
<p>Book Four</p> <p>Institution of a fund for sickness Insurance and Employment Injuries Insurance. It's Financing, Administration, Duties and Responsibilities</p>	
<p>Article (22) A fund is instituted for financing services of health insurance and all it's affairs and specially fulfilling these requirements</p> <p>(1) Considering the principal standards of total quality in doing contracts with providers, achieving the economic performance in provision of service and supervising it's accomplishment.</p> <p>(2) Putting the financial basics for fund expenditure.</p> <p>(3)Financial control and complete follow up for all items of service provision.</p>	<p>Title to be modified: “and employment injuries insurance” to be deleted</p> <p>Replacement of all articles: An independent health insurance authority will be designed and instituted later. Preparation for this will be done by a Centre for Health Insurance Competence and its multi-sectoral advisory council to be build up by a Cabinet decree.</p>

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<p>Article (23) The fund is administered by a general organization called Health Insurance Organization , has it's own entity and it's chief of board is the Minister of public Health and population assisting him a chairman and a vice —chairman, it has it's own balance which is a part of the general balance of the state. The members of the board, it's duties and responsibilities are decided by a presidential decree by the presentation of the Minister of public Health and population.</p>	<p>The design should follow the example of the Social Development Fund. It has to be an autonomous institute with highest credibility, transparency and accountability under the rule of a performance oriented incentive and penalty system. It shall be the best example of good governance and stewardship in the Republic of Yemen. International advise, cooperation and auditing is welcome.</p>
<p>Article (24) The Health Insurance Organization is responsible for the treatment of the injured or the sick insured and carrying medically for them till cured or settled by a disability. The organization have the right to observe the injured or sick insured in any site to be under treatment. It is meant by treatment and medical care what is stipulated in the article (14) of this law.</p>	
<p>Article (25) The fund's money are composed of: (1) Revenues stipulated in this law (2) Subsidies , donations and grants which the board of the fund decides to accept. (3) Yield of investment the fund's money. (4) Other revenues resulting from fund activities.</p>	
<p>Article (26) By a decree from the Council of Ministers, by a presentation from the Minister of Public Health and Population, the value of contributions and co-payments can be changed according to the result of investigating the financial situation of the fund every five years.</p>	
<p>Article (27) In case of the presence of surplus in fund's money ,this surplus is kept in a special account and it's expenditure is only by approval of the board for these objectives specially 1- Upgrading the level of health insurance services provided to the insured. 2- Expansion of coverage in the health insurance system stipulated upon in this law 3- Financing building and investment programs, training and research programs and different systems related to organization activities</p>	
<p>Book Five General stipulations</p>	
<p>Article (28) The services of health insurance to injured or sick insured are provided inside the country till to be cured or a disability is settled. The organization and it's branches in governorates has the right to observe the injured or sick insured in any place to be treated . The level of health insurance services shall not be lower than the minimum level mentioned in the Minister of Public Health and Population issue . The</p>	<p>To be modified: The word “minimum” shall be replaced by “cost-effective”</p>

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<p>injured or sick insured can ask for medical care in a higher level than the insurance level decided and paying the extra cost out of his pocket.</p>	
<p>Article (29) The provider is held responsible to inform both the insured and the employer at the end of treatment of the insured injured and the period of sick leave documented by the forms approved from the board by an issue according to the conditions and situations decided by that issue . The period of sick leave is compulsory to the employer.</p>	<p>OK</p>
<p>Article (30) The employer is held responsible to do a pre-employment medical examination for candidates supposed to be employed, this examination is done by the organization or it's branches in governorates according to the conditions situations and stipulations of medical fitness issued by a decree from the Minister of Public Health and Population in cooperation with the Minister of Insurance. The cost of this examination is paid according to it's actual cost by the price list of the organization.</p>	<p>To be postponed</p>
<p>Article (31) The employer is held responsible to do a periodic medical examination for the employees who are exposed to occupational hazards and may be injured by any of the occupational diseases listed upon in table (1) of the occupational diseases, stipulated in the executive bylaw of this law. This examination is done by the organization or it's branches in governorates according to it's actual cost by the price list of the organization The Minister of public Health and population issues a decree of the conditions and situations of performing these examinations. The employer is held responsible to offer all the documents, information and facilities needed to perform these examinations in it's timing. The organization in doing this examination is held responsible to inform all concerned authorities with discovered occupational diseases among workers and the resulted deaths</p>	<p>To be postponed</p>
<p>Article (32) Disabled cases are documented by a certificate from the organization, it's items are decided by a decree from the Minister of public Health and population in coordination with the Minister of Insurance. The medical committees specified by the organization issue the reports verifying residual disability occurring to insured in cases of employment injury and sickness, it's date and percentage. The medical committees are held responsible in cases of employment injury and sickness, to inform social insurance authority and the insured with the residual disability and it's percent . The insured may ask for re-evaluation of the medical decision according to article (20) of this law.</p>	<p>OK</p>

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<p>Article (33) In case of estimating the degree of residual disability from employment injury , the rules and regulations mentioned in table (2) concerning estimation the degrees of residual disability of employment injury shall be adopted as mentioned in details in executive by law of this law, also to take into consideration, in case of estimating the residual permanent disability for cases of sickness, to document whether the case is complete or partial disability.</p>	<p>To be postponed</p>
<p>Article (34) Contributions revenued to the organization and it's branches are exempted, according to the stipulations of this law, from all kinds of taxes, also all documents, forms, cards, contracts, certificates, printers and all other writable works needed to implement this law, are exempted from any taxes.</p>	<p>OK</p>
<p>Article (35) All kinds of finance of the organization and it's branches, fixed or transferred and all it's investment activities, are exempted from all kinds of taxes, also, all the activities of the organization and it's branches are exempted from being covered by stipulations of laws governing supervision and control over insurance institutions.</p>	<p>OK</p>
<p>Article (36) Exempted from court fees all levels of justice claims related to implementing stipulations of this law either from the side of organization and it's broaches or from insured.</p>	<p>OK</p>
<p>Article (37) Staff of the organization or it's branches, who are directed to investigate it's activities, have the right to enter work places during regular work times, to do the needed investigations, review the documents, books, work papers, writings, files and documents needed to implement the stipulations of this law. A decree from the Minister of public Health and population in cooperation with the Minister of justice, is issued concerning the conditions, situations and authorities of this mission</p>	<p>To be postponed</p>
<p>Article (38) Governmental and administrative facilities have to supply the organization and it's branches with needed data about the number of those who are covered by stipulations of this law, their geographical distribution, situations, professions and all what is needed to implement it's activities</p>	<p>OK</p>
<p>Article (39) All finance revenued to the organization or it's branches according to stipulations of this law have the priority over all other kinds of finance either transferred or fixed and revenued directly after justice fees.</p>	<p>OK</p>

Annex 2 Recommendations of members of Al-Shura Council, Parliament, Political Parties and Ministry of Public Health and Population regarding the introduction of a national health insurance system in Yemen – 3rd October 2005

Towards a national health insurance system in Yemen Political summary of findings and recommendations

1. A national health insurance system should be supported. This is the result of the independent expert study contracted to a German Consultancy firm (GTZ) in cooperation with World Health Organization (WHO) and International Labour Office (ILO). Real actions and allocations for building up health insurance should be undertaken now, e.g. for setting up a centre for health insurance competence.
2. Government health expenditure declined during the last years in comparison to GDP and overall government expenditure. Therefore additional support by the Ministry of Finance has to be given for attacking avoidable and infectious diseases (e.g. malaria, ARI, diarrhoea), supporting primary health care and strengthening prevention and health promotion. At least an 100% increase is needed or even significantly more. The role of the Ministry of Finance is very important for improving the health system in Yemen and for making it effective and efficient and to overcome the difficulties of the heavy underfunding of current costs of public health facilities and to improve women's access to health services, especially. The MoF should facilitate the restructuring of health care by supporting health insurance from its beginning.
3. Regarding health insurance, a step by step approach is recommended starting with the government sector, either (a) with the security sector (military, police, and security police) and the educational sector, or (b) with all government sectors in Sana'a and Aden. Furthermore (c) the existing health benefit schemes of private and public companies should be networked.
4. The health insurance law proposal should be approved with some minor modifications.
5. An independent and autonomous centre for health insurance competence should be build up with (a) a cabinet decree for instituting it, (b) a yearly budget of 200 million YR given by the Republic of Yemen, and (c) with additional international support from the World Bank funds.
6. Step by step a national health insurance authority has to be build up that replicates the good experiences of the Social Development Fund and adapt them to an independent, credible, accountable and transparent Health Insurance Authority. This authority will guide the incremental approach towards social and national health insurance in Yemen.
7. At the beginning this centre will (a) strengthen all health insurance endeavours in Yemen, (b) discover, analyse and support existing health insurances in the private and public sectors, (c) contract studies on the situation of health and health care, accreditation of providers, and other relevant topics for supporting the step by step introduction of health insurance, and especially (d) design and conduct training on health financing, health economics, health management and health insurance management together with other partners (e.g. University of Sana'a, CSHS in Syria). (e) Public awareness campaigns and health education will be supported, too.

8. A Fatwa for supporting health insurance for the poor and the needy should be advocated for, to be able to use in the future some Zakat and Endowment funds to support health and health care. A nationwide campaign for health insurance should disseminate the basic ideas of the importance of health insurance and about health and education as essential drivers for macroeconomic and social development.
9. In the context of introducing health insurance a number of laws and decrees have to be reviewed and revised, especially the decrees on cost-sharing for health care in public facilities, the 1% salary deduction for work injuries, and various tax laws.
10. Setting up of social health insurance is a social process. All stakeholders and the many experts on public health and health insurance should be involved, especially the Al-Shura Council, members of the Parliament, political parties and
 - solidarity schemes, health insurance projects, employers' and employees' associations or unions, civil society organisations, universities, women organisations and other outstanding experts, partners and stakeholders supported by
 - ministries, especially those responsible for finances, health, social affairs, civil services, endowment, and those that might adopt health insurance soon, e.g. defence, interior, education.
 They should form an advisory board of a Centre for Health Insurance Competence.

Sana'a, 3rd October 2005

Participants of the Health Insurance Conference of Al-Shura Council, Parliament, Political Parties and Ministry of Public Health & Population:

Al-Shura Council	Mr. Ali Ahmed Al Salami Dr. Ahmed Makki Mr. Abdulwali Al Shargabi
Parliament	Dr. Abdulbari Doughaish Dr. Naser Mohammed Thabet Mr. Abdulla Al Maktari Mr. Abdo Al Awdi
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