



ECWA HEALTH INSURANCE SCHEME (EHIS)

FREQUENTLY ASKED QUESTIONS (FAQs)

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Background: *The ECWA Health Insurance Scheme (EHIS) was established by the ECWA General Council (GCC) in April 2018. It serves as a health financing scheme for ECWA employees and their families, ECWA members and the general public and ECWA Health facilities. It uses the principles of health insurance to pool contributions from groups and individuals and distributes same for the health benefit of those who need it whenever and wherever the risk of illness is pronounced. It also uses the principles of managed care to ensure cost containment and quality improvement in the delivery of health services.*

Q1. What is Health Insurance?

Ans. Health Insurance is a fund pooling mechanism where the rich and the poor, as well as the healthy and the sick contribute small tokens proportionately, to a pool. It is a solidarity and social security system that dates back to the early Christians in Acts 2:42-47; 4:32-37;

Q2. Why does ECWA need a Health Insurance Scheme?

Ans. We are aware that the Federal and some State Governments have set up health insurance schemes, however the effect of these programmes have not been felt by the generality of the people. Moreover, in accordance with the National Health Insurance Act 35, 1999; every employer with 10 or more employees is obligated to provide a health insurance cover for them.

Q3. Who does the Scheme Cover?

Ans. Once the appropriate yearly contribution (premium) for a desired programme is made, the contributor and/or family is/are covered for a one-year period after a waiting period of 30 days for administrative purposes. This only happens for the first-year premium payment as long as the yearly renewal contribution is received 3 months before the expiration of the current contract year.

Q4. Are there specific programmes in the Scheme?

Ans. A formal sector programme covers employees of ECWA, a spouse and four biological children below the age of 18 years. An informal sector programme covers individuals, students, self-employed and communities. The formal sector contributions are a part of employee salary, while the informal sector contributions are fixed annual rates.

Q5. As a formal sector employee, what happens if I have more than four (4) biological children or those above the age of 18 years?

Ans. You could make contributions for them as extra dependants or allow them to make contributions depending on the sector – students and general public.

Q6. As formal sector employees of ECWA, will my spouse and I be required to make contributions to the pool?

Ans. When a couple is employed by ECWA, the employee with the higher emolument will make the mandatory contribution and the spouse and children will be registered as family members.

Q7. As an employee of ECWA, if my spouse works with the Federal or State Government where deductions are made for health insurance, do I

need to contribute to the ECWA Healthcare Initiative?

Ans. The contribution is mandatory for all employees of ECWA, except as explained in the case of a couple employed by ECWA.

Q8. What do I benefit after the appropriate contribution has been made?

Ans. There are different plans you may wish to subscribe to. Each plan has its benefit package attached. You can download a copy from the EHI website or pick a copy from your DCC, LCC or Local Church office.

Q9. What are the premiums/contributions payable for the different programmes of the Scheme?

Ans. A separate Premium Schedule (PS) and HCBP is made available on request from the EHIS Website, Offices or ECWA District Church Council (DCC) Offices.

Q10. After the payment of an appropriate contribution, am I restricted to only ECWA Health facilities?

Ans. No! You are entitled to choose a health facility in the network of EHIS that is closest to your residence or work place. However, ECWA health facilities, where available, should be the prime choice of ECWA employees and members. Students will be required to choose the health facility within their campus as the primary provider.

Q11. What is a Primary Healthcare Provider or Facility?

Ans. A Primary Healthcare Provider or Facility is the health provider to which every contributor must choose at the time of registering for a programme after the appropriate premium has been paid. All illnesses are first seen by the Primary Provider who decides whether the enrollee (contributor/beneficiary) needs referral to a higher level of care.

Q12. How do I access a health care provider when I am far from my Primary Provider?

Ans. You are obliged to receive care only from your Primary Provider, except in emergency situations, where you can access care within the network of EHCI providers. Accessing care outside the network of EHI may not be reimbursed except a prior authorisation has been obtained.

Q13. When premium is paid, will EHIS take care of all my health challenges?

Ans. No! Like every social security programmes, EHIS will be unable to cover all health challenges. There are Exclusions – Partial and Total (please ensure you understand the HCBP attached to your premium and the exclusions thereof).

Q14. Will I be required to make any monetary contribution to the health facility after the payment of my premium?

Ans. Yes! You will be required to make a 10% Co-payment on the cost of prescribed drugs ONLY. You may also be required to make additional payment for bed space, if your ‘annual admission days’ limit is exhausted.

Q15. If after I pay my full yearly premium and I don’t access care in a hospital, will I get a refund of my money?

Ans. No! The principles of insurance negate such refund. However, depending on your premium and HCBP, you will be entitled to an Annual Medical Check-up.

16. When will the scheme expected to take off?

Ans. Contributions from employers and members are expected to commence from July 2021. The EHCI expects, at least, a pool of three months before healthcare delivery begins in October 2021.

Q17. Who/where can I contact if I have further questions?

Ans. For further inquiries, please contact:

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