A review of countries pursuing universal health coverage (UHC) suggests greater collaboration between public and private actors can accelerate the advancement of UHC. Four roles in which health microinsurance schemes can be leveraged to promote UHC were identified: substitute, foundation, partnership and supplement (see figure below). The nature of collaboration between the government and private actors evolves over time and can differ according to context.

Ghana is an example where private sector health insurance schemes formed the foundation of a national health insurance scheme. Community-based health insurance schemes proliferated in Ghana from three schemes in 1999 to 259 in 2003. These schemes were primarily motivated by community solidarity principles that are crucial to fostering a culture of insurance. In 2000, the government passed reforms, establishing a national health insurance scheme with a standard benefit package, available to all citizens, that was administered at the district level. The existing community-based schemes were offered a choice of affiliating with the national scheme and receiving government subsidies and other support, or remaining independent and modifying their benefits package to meet the new regulations. Given the financial incentives, most schemes chose to affiliate with the government's plan. The others scaled back coverage to provide supplementary products, such as medicines or cash for transportation. This melding of existing CBHI capacity with a national framework increased coverage rates 30-fold over a relatively short period of time to reach the present level of 35 per cent.

There are many such opportunities for governments to leverage private health microinsurance schemes to increase coverage. While there is no silver bullet to achieve UHC, countries that have significantly expanded coverage, particularly to individuals in the informal economy, have extended benefits, increased subsidies and enacted compulsory enrolment, while improving healthcare infrastructure.

To learn more, see Microinsurance Paper 23: Leveraging health microinsurance to promote universal health coverage [1].