

A milestone for sustainable NCDs and health financing: Government of Ghana uncaps National Health Insurance Levy

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Domestic resources are widely considered to be the most sustainable source of public health financing, and the government of Ghana aims to leverage this revenue by removing the limit on the National Health Insurance Levy (NHIL), a tax on specific goods and services which was set at 2.5%. The NHIL was designed to help fund the National Health Insurance Scheme (NHIS), and removing the tax limit provides an opportunity to increase the revenue that is allocated to the equitable provision of health services. The Ghana NCD Alliance (GhNCDA) commends this bold decision as a pivotal step towards sustainable financing for population-wide health care, including for noncommunicable diseases (NCDs). This move follows years of civil society advocacy and reflects increasing national leadership in addressing the growing burden of NCDs.

As part of its advocacy efforts, GhNCDA developed and launched in August 2024 a report on the financial burden of caring for people living with NCDs in Ghana. The study detailed the NHIS coverage of NCDs and highlighted several gaps in the funding framework like the limited availability of NCD services and medications, and the high out-of-pocket costs for patients. The alliance formulated recommendations including removing the limit on the NHIL, adopting sustainable financing mechanisms like increased taxes on health-harming products for improved NCD healthcare, and the meaningful involvement of people living with NCDs in decision-making spaces.

With support from NCD Alliance, GhNCDA leveraged the 2024 national general elections by putting forward a civil society manifesto on NCDs for political parties. They called upon political parties to prioritise NCDs, specifically to exempt the National Health Insurance Fund from the list of capped statutory funds and to make commitments to establish a dedicated fund to cover NCD care costs. This will address the catastrophic healthcare expenditures incurred by people living with NCDs.

Through a mass media campaign, GhNCDA disseminated key findings and recommendations across social media platforms, amplifying the voices of people living with NCDs and calling upon government and policymakers to act on NCDs. Some of the recommendations they proposed include the promotion of public health education, the establishment of an NCD fund to cover NCD activities and the implementation of the NHIL limit removal.

“When a former President, now President of Ghana openly shares his personal journey with chronic illness, it turns statistics into stories-reminding us that NCDs are not distant threats, but a present reality.”

— **Ms. Martha Coffie**, a person living with multiple NCDs

This tax limit removal is a critical trigger unlocking the potential of NCD financing solutions to implement at national level. As such, President John Mahama launched in April 2025 the Ghana Medical Trust Fund, “Mahama Cares” to finance NCD treatment, especially those not covered by the National Health Insurance Scheme. The government is currently calling for and encouraging donor contributions, and a draft bill for the establishment of the Mahama Cares Fund will be submitted to Parliament. **GhNCDA will closely monitor the adoption of bills, and the roll-out and management of the Fund, ensuring it addresses the needs and challenges of people living with NCDs.**

Moving forward, GhNCDA is developing a multi-phase advocacy and accountability plan to sustain momentum and ensure tangible outcomes from this win with the following objectives:

1. Ensure that the Parliament amends the Earmarked Funds Capping and Realignment Act, 2017 to uncap the NHIL to ensure it is operational.
2. Support and monitor to ensure that the funds are properly allocated and, by extension, NCDs adequately prioritised.
3. Ensure that the NHIL is transferred to the National Health Insurance by the MoF without delay to ensure timely disbursement and avoid delayed payment.
4. Ensure that health promotion and education on NCD risk factors are prioritised with dedicated funds.
5. Develop an accountability tracker to monitor NHIL fund flows considering NCD treatment and care.
6. Facilitate the formation of an NCD Caucus in Parliament to provide an oversight on NCDs and NCD related matters.

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