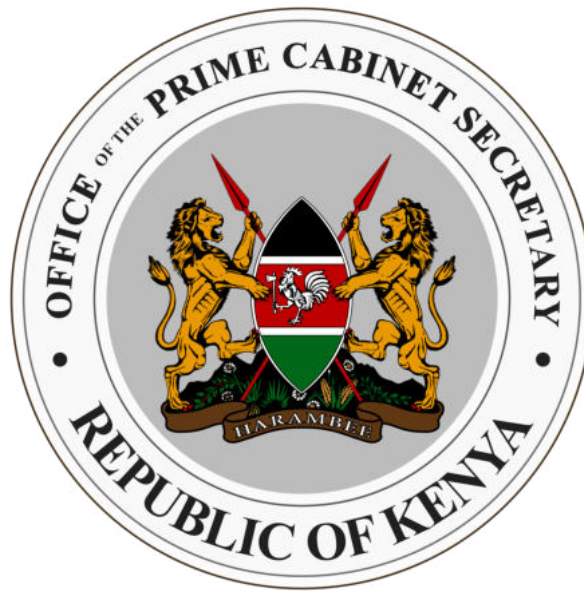




**EXECUTIVE OFFICE OF
THE PRESIDENT**

OFFICE OF THE PRIME CABINET SECRETARY

SPEECH BY THE H.E HON DR MUSALIA MUDAVADI, EGH, PRIME CABINET SECRETARY OF THE REPUBLIC OF KENYA DURING THE OPENING OF PAEDIATRIC OPHTHALMOLOGY CENTRE SATURDAY JUNE 10, 2023, SABATIA EYE HOSPITAL, VIHIGA COUNTY



**SPEECH BY THE H.E HON DR. MUSALIA MUDAVADI, EGH,
PRIME CABINET SECRETARY OF THE REPUBLIC OF
KENYA DURING THE OPENING OF PAEDIATRIC
OPHTHALMOLOGY CENTRE**

SATURDAY JUNE 10, 2023.

SABATIA EYE HOSPITAL, VIHIGA COUNTY





Dr Susan Nakhumicha, Cabinet Secretary for Health;

Chairman, Board Members and Partners of Sabatia Eye Hospital;

Friends Church Representatives;

Community Members;

Invited Guests;

Ladies And Gentlemen:

1. Since 1996 when it opened its doors to the first patient on December 14, 1996; I remain proud to be associated with the initiation of Sabatia Eye Hospital. I am satisfied that we have at least one more affordable hospital in Kenya other than PCEA Kikuyu Hospital, that restores sight to hundreds of thousands.

2. For instance, I am told that between 2015 and 2022, Sabatia Eye Hospital screened about 3,000 children under 15 years, and more than 5,000 paediatric surgeries were performed.





Not only that: Sabatia Eye Hospital is a Centre of Training Excellence.

4. I am proud that Sabatia Eye Hospital is the only tertiary eye hospital located in rural Kenya serving an estimated population of 15 million people. I am overjoyed that its clientele covers 17 counties in the North Rift, Western and the Lake Basin Region of Kenya; and neighbouring Uganda. I am elated that Sabatia Eye Hospital, through partnership and collaborative arrangements, is a university training partner focusing on Ophthalmological courses.

Ladies and Gentlemen;

5. In many parts of the world, the lack of eye health workers is a key factor contributing to blindness. In Africa, the issue has reached crisis levels. Maldistribution of personnel (in rural or remote areas), under-productivity, lack of quality assurance, and inefficient referral systems are among the problems contributing to the high levels of avoidable vision impairment.





5. I am happy that the most celebrated courses at Sabatia Eye Hospital are the Bachelor of Science in Comprehensive Ophthalmology and Cataract Surgery. This is in collaboration with Jomo Kenyatta University of Agriculture and Technology (JKUAT).

6. Sabatia Eye Hospital's reputation as a regional centre of training excellence has attracted another partnership with the University of Nairobi resulting in the training of more than 30 ophthalmologists for Kenya; and others for Rwanda, Burundi, Zambia, Ivory Coast and Botswana. Today, we open the **paediatric ophthalmology centre** to enhance this training capacity.

7. In another collaboration with the Ministry of Health, **the Ophthalmic Skills Upgrading Course (OSUC) has trained more than 500 Kenyans who are providing eye care in remote areas of our Country.**





SPEECH BY THE H.E HON DR MUSALIA MUDAVADI, EGH, PRIME CABINET SECRETARY OF THE REPUBLIC OF KENYA DURING THE OPENING OF PAEDIATRIC OPHTHALMOLOGY CENTRE SATURDAY JUNE 10, 2023, SABATIA EYE HOSPITAL, VIHIGA COUNTY

NHIF RATES FOR EMPLOYEES

- Ksh. 0 to Ksh. 5,999 – Ksh. 150
- Ksh. 6,000 to Ksh. 7,999 – Ksh. 300
- Ksh. 8,000 to Ksh. 11,999 – Ksh. 400
- Ksh. 12,000 to Ksh. 14,999 – Ksh. 500
- Ksh. 15,000 to Ksh. 19,999 – Ksh. 600
- Ksh. 20,000 to Ksh. 24,999 – Ksh. 750
- Ksh. 25,000 to Ksh. 29,999 – Ksh. 850
- Ksh. 30,000 to Ksh. 34,999 – Ksh. 900
- Ksh. 35,000 to Ksh. 39,000 – Ksh. 950
- Ksh. 40,000 to Ksh. 44,999 – Ksh. 1,000
- Ksh. 45,000 to Ksh. 49,000 – Ksh. 1,100
- Ksh. 50,000 to Ksh. 59,999 – Ksh. 1,200
- Ksh. 60,000 to Ksh. 69,999 – Ksh. 1,300
- Ksh. 70,000 to Ksh. 79,999 – Ksh. 1,400
- Ksh. 80,000 to Ksh. 89,999 – Ksh. 1,500
- Ksh. 90,000 to Ksh. 99,999 – Ksh. 1,600
- Ksh. 100,000 and above – Ksh. 1,700

9. To cap it all; this hospital has exported its expertise to South Sudan. Between 2001 and 2006, the **Southern Sudan Eye Care program** was launched in this conflict-troubled region.





It included eye care services and capacity building for eye care workers from Southern Sudan.

What is more? Sabatia is among the prestigious 11 eye hospitals/clinics in Kenya, because of having Ophthalmologists (eye specialists) and state-of-the-art technology.

10. The cost of health for most families in Kenya is prohibitive. **At Sabatia Eye Hospital, the cost is subsidised! 50% of the eye surgeries are covered by two of the hospital's main partners on a need basis. The rest of the patients pay a minimal fee or are covered by the hospital's Poor Patients Fund (PPF).**

Ladies and Gentlemen;

11. What am I saying? Those with eye problems need not suffer in silence and stay away for lack of fees. Help is at your doorstep at Sabatia Eye Hospital. I am also saying that universal health coverage that the government is pursuing is possible if the same is working at this hospital.

All we need for universal healthcare to succeed is prudence to ensure there is accountability, working





diagnostics treatment equipment, drugs medication, and honest staff are available at our health facilities.

12. However, restructuring the NHIF to cover a broad spectrum of Kenyans has attracted the most dishonest opposition. We know that contributing to NHIF is the surest way that you can have medical attention cheaply. As leaders, we must be honest to Kenyans.

13. Those trying to incite Kenyans to avoid contributions to NHIF are not being truthful. The truth is that NHIF contributions have become cheaper.

They are graduated from the lowest earners of up to Ksh5,000, who pay a monthly Ksh150 (Ksh1,800 a year); to the highest contributors earning Ksh100,000 and above who pay only Ksh1,700 per month (or Ksh20,400 per year).

14. Kenyans in the informal sector, retirees, self-employed and voluntary persons pay only Ksh.500 monthly or Ksh.6000





per year.^[1] For the small amount you contribute, NHIF covers you and all your listed dependents.

15. Other truths are that with NHIF, and contrary to some wayward saboteurs, it is obvious NHIF rates have been lowered to Ksh150 per month or Ksh1,800 per year for those earning below Ksh5,000. For that sum, you and your dependants get treated at any hospital in Kenya, and upon recommendation, treatment abroad too for;

- 1) Outpatient and Inpatient Comprehensive cover.
- 2) Maternity and pregnancy-related health services.
- 3) Renal Dialysis.
- 4) Treatment of Cancer.
- 5) Radiology including diagnostic imaging services for CT scans and MRIs, ultrasounds and x-rays.
- 6) Emergency evacuation and ambulance services.
- 7) Mental health.
- 8) Surgery and transplants.^[2]





16. Instead of praising these milestones in the provision of healthcare, the saboteurs against universal healthcare are inciting private hospitals not to take in patients with NHIF insurance. **The government is aware that these agitators are a cartel in the medical insurance business who fear NHIF affordable cover is taking clients away from them. They operate under the cover of paid politicians.**

17. **Let me caution to them that Kenya is a free market country and the best they can do is compete fairly by bringing down their exaggerated charges. But you should not engage in disrupting the government's commitment to provide Universal Healthcare to its people.**

18. **Equally, it is not only unethical but criminal for hospitals to inflate charges on NHIF bills for substandard treatment. They stand warned that the government will not be lenient.**





19. If this illegality is being carried with the connivance of NHIF workers, the Minister for Health in conjunction with criminal investigative agencies are hereby directed to take the necessary severe action to crack down and stop the draining of NHIF funds by such criminal enterprises in the health sector.

20. Kenyans must know that it is the sum total of their contributions that enables NHIF to pay for their treatment. If we become selfish and don't contribute to NHIF, we are not only condemning ourselves to a life of penury but also prescribing the death sentence to our fellow citizens.

Ladies and Gentlemen;

21. Government-managed health facilities are where most Kenyans seek medical treatment. These facilities act as back-stoppers for those who cannot easily access or are denied private facilities.





22. However, it has become almost a tradition in government health facilities that, on any given day, there is either no personnel on duty to attend to patients; or if present, staff offer substandard services to poor patients. Often, government health facilities are bereft of drugs other than painkillers, and patients are directed to private pharmacies with links to government health facility staff.

23. It is common knowledge that medicines destined for government health facilities find their way, by way of diversion, to these private chemists. We need to sort out this duel, and most times, conflict of interest co-existence in the health sector.

24. Madam CS of Health Dr. Susan Nakhumicha, you have a job well cut for you. In conjunction with County Governments, crack down on this thriving criminal enterprise that is condemning our people to an early death by stealing their drugs.





25. In addition, whenever County Governments run out of funds to procure drugs from KEMSA, let us be magnanimous to provide the drugs on credit. Let County Governments owe KEMSA rather than the other way around. To avoid defaulting by County Governments, there should be agreements to deduct the money owed at source by the exchequer.

26. I urge Kenyans to change their approach from condemning or undermining beneficial policies like universal healthcare to asking relevant questions regarding implementation and operation. For instance, I will be more than willing to engage, as I have done above, on how a contributor to NHIF can get the best treatment. Alternatively, we should offer solutions to teething problems at government health facilities, KEMSA, and NHIF for effective and efficient management. Let's avoid drowning in the habit of throwing away the baby with the bathwater, for every doubt we have on a given government policy.





27. I believe if we work as one to implement these measures, we shall begin to serve the health needs of our people without the irritating delays, deceptions, theft, and sabotage.

Thank you and God Bless You.

[1] Read more: <https://www.tuko.co.ke/335591-nhif-rates-employees-benefits-penalties-calculated.html>

[2] Read more: <https://www.tuko.co.ke/335591-nhif-rates-employees-benefits-penalties-calculated.html>

