



COMMUNICATIONS

JIU REVIEW OF THE QUALITY, EFFECTIVENESS, EFFICIENCY AND SUSTAINABILITY OF HEALTH INSURANCE SCHEMES IN THE UNITED NATIONS SYSTEM ORGANIZATIONS

09/24

Geneva 8 April 2024

To: All FICSA Members

From: FICSA Secretariat

Dear colleagues,

We are pleased to share the JIU Report (<u>JIU/REP/2023/9</u>) on the "Review of the quality, effectiveness, efficiency and sustainability of health insurance schemes in the United Nations system organizations".

As questions related to staff health insurance plans have been raised by many of our members, and most recently during debates in the SOCSEC/OHS standing committee, FICSA would like to encourage all members to use the pertinent recommendations in this Report during related discussions with your administrations. FICSA will also ensure that there is follow-up on the relevant recommendations at the meetings of the High-Level Committee on Management (HLCM) and the Human Resources Network (HRN) and all other relevant fora.

The review found that:

- The governing bodies and legislative organs remain largely inactive in health insurance policymaking, delegating a full authority to the executive heads of the participating organizations to establish relevant health insurance policies as part of their obligation to establish a social security scheme for staff. This has resulted in the existence of 26 different health insurance schemes with different coverage and benefits. The absence of a minimum set of principles, requirements or standards for health insurance schemes poses a challenge to promote coherence among the schemes and determine their adequacy.
- While most plans have a mechanism in place to engage staff and retirees in health insurance policymaking, locally recruited staff and retirees outside headquarters locations are not sufficiently engaged in the process.
- The 26 health insurance schemes apply varying eligibility criteria for staff, retirees and their family members and associated protected persons. The unharmonized eligibility criteria, especially for those who receive subsidized premium rates from their

organizations, create unequal access to health insurance coverage for active and retired staff and their family members, and demonstrate an inequitable use of public funding. The solidarity models underpinning the health insurance schemes to ensure equitable distribution of premiums and risks are also not well aligned.

The review issued seven formal recommendations, of which two are addressed to the legislative or governing bodies and five to the executive heads. The review also issued 33 informal recommendations in many areas of interest such as transparency, coordination of policy changes, coverage, contributions and premiums, administrative matters, including contractual arrangements and cost containment and oversight.

Besides the full report, the review's complementary report provides more details from the comparative study of the 26 health insurance schemes and an overview of the global staff survey results.

To read the review highlights and complementary paper, please click here

To read the full report, please click here

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