Reviewers report

Title: A checklist for designing health insurance programs - A proposed guideline for Nigerian states

Version: 0 Date: 14 Jan 2019

Reviewer: Enyi Etiaba

Reviewers report:

This is a very timely article and of importance to the Nigerian context and other low and Middle income countries aspiring towards Universal Health Coverage. It contains generic information which can form a baseline and adapted to varying contexts. However, I will like to share the following comments which I hope can be fully addressed before publication.

General Comments

Overall, the article straddles a Review and an Empirical Study and it needs to be clarified. There is a detailed Framework from Literature but the sources of the Empirical findings are not well referenced nor acknowledged. It says the data used to inform the checklist include "draft health insurance bills and consultations with SHIS Planners". The insurance bills have not been referenced so that readers can consult for more information if required. What level and nature of Consultations did the authors hold with SHIS planners? Was any primary data obtained? Was it in form of interviews, Meetings etc? Who are the SHIS planners and what are their roles. This section is really vague. How were this information used since Ethical Clearance was not obtained for the study? If all obtained from secondary data, these should be clearly stated.

It is also not clear from the Methods Section what informed the Choice of the two states (Kaduna and Niger) out of the 37 states, being a generic tool. Given the wide readership of Health Research Policy and Systems Journal, I think a very brief description of Nigeria (demography and health insurance journey so far) will put the paper in perspective; and hence the importance of this timely article, without departing from the scope of the work. Sources of the Empirical data used need to be adequately referenced/acknowledged.

Following description of the framework in Table 1 and moving on to apply it to two states in Table 2, it would be to give a brief description of the Political Economy and context of these states (for which there is ample Open Access literature) as they are likely to have influenced the outcome of their readiness Score, especially as you have recognised these as limitations to the
checklist. I also wondered at the end of the Assessment with the checklist, is there a guide on how to predict or determine different levels of readiness (either quantitatively or qualitatively).

Finally, A lot of empirical work has been done in the Nigerian Context on UHC and Social Insurance but there are very few references to them.

Specific Comments

Page 4-Line 40-I believe there should be a reference

Page 12-Line 34- insert 'from'---Lessons learnt from countries....

Page 13- For a better reading flow, I would place the 'Pooling' function after revenue generation (Sources of finance) before the Purchasing function

Page 16- Line 55- Write IT in full the first time

Page 16 - Line 58-check the grammar

Page 17- Line 36-41--please provide the Reference

Page 19-Line 24-26. Give a sense of the SHIS planners and clear references on the information applied in the checklist ( It was reported.....Line 38 following)

Page 20- Line 15 ' At the time of study'----The Study period and duration is not explicitly stated in the Methods Section

Page 20- line 23-A brief description of the states' demography (population, proportion of formal and informal) would have made this section ( Contributing Population-----) easier to understand

Page 20-Line 46 & 47- All two states??

Line 54- ? Boards of directors..

Page 21- Line 48- ...evidence suggests that.... (insert' that')

Page 22-line--...given the fiscal realities in these states... Not all readers may be aware of the fiscal realities in these states (Any references?)

Page 22- Line 42- change to two states

Page 22-Lines 40-57- Providers are already being payed in the NHIS in these states, so there is a precedence which can be referred to and lessons learnt carried forward and applied to the State SHIS, especially it may still be the same set of Providers, giving institutional memory.
Page 23- Line 4, delete 'the' (...the both states)

Page 23- It may be appropriate to summarise the ? Study limitations after the Conclusion

Page 26- Line 7 should read Table 1 and not Table 2

Page 26- Line 51- Column 3---but this depends ( insert ' depends')

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