FREE GUIDE · 2026



Ethiopia

Health & social insurance guide

2 chapters · every source listed

Tulinde

tulinde.africa · independent guide, not an insurer

Tulinde — independent guide, not an insurer

Health & social insurance guide 2026

For workers, employers and families in Ethiopia: community-based health insurance, social health insurance and private health cover.

This guide puts together 2 pages of Tulinde Ethiopia (tulinde.africa), word for word. Each chapter states the date it was last reviewed; the 10 sources are listed at the end. Compiled on 28 October 2026. Laws, prices and rules change: check the online version of each chapter (its address is under its title) before you rely on it.

Contents

1. **Health insurance in Ethiopia: CBHI, social health insurance and private cover** — reviewed 28 October 2026
2. **Social health insurance in Ethiopia (SHI): who must join, who pays and where it stands in 2026** — reviewed 28 October 2026
3. **Sources**

> Tulinde is an information and introduction service run by Takat AI. It is not an insurer, a broker or an agent, and it does not sell, price, rank or rate policies. Always read the policy wording before you buy.

Chapter 1

Health insurance in Ethiopia: CBHI, social health insurance and private cover

Reviewed 28 October 2026 · online: https://tulinde.africa/et/health-insurance/

Short answer Checked 28 October 2026

Health insurance in Ethiopia has two public schemes run by the **Ethiopian Health Insurance Service (EHIS)**: **community-based health insurance (CBHI)** for households in the informal sector, which covered **63 million people in 13.67 million households** across **1,195 districts** in 2024/25, and **social health insurance (SHI)** for employees and pensioners, created by Proclamation 690/2010 and started for public health-sector staff in January 2026. Private medical cover is sold by the 18 insurers supervised by the NBE.

The three kinds of health cover

	CBHI	Social health insurance (SHI)	Private medical insurance
For whom	Households in the informal sector (farmers, traders, the self-employed)	Employees and pensioners (formal sector)	Anyone; often group cover through an employer
Run by	EHIS, through woreda schemes	EHIS	Licensed insurers (NBE)
Who sets the price	Regional and city administrations	Regulation under Proclamation 690/2010	Each insurer
Compulsory?	No law we found makes it compulsory	Yes for employees and pensioners (Art. 5)	No
Where it stands	1,195 districts in 2024/25	Started for public health-sector staff in January 2026 (press)	Small: part of general insurance

The EHIS describes the split this way: CBHI is meant to cover about **80%** of Ethiopians and SHI the remaining **20%** (EHIS, August 2025).

The Ethiopian Health Insurance Service (EHIS)

The agency was set up as an autonomous federal body by **Regulation No. 191/2010** (it was first called the Ethiopian Health Insurance Agency). According to the Ministry of Health, it has **24 branch offices** across the country, collects and administers SHI contributions, and studies revisions of the benefit package and of contribution amounts.

Contact details published by the EHIS: Gotera, around the Pepsi factory, Woreda 7, Nifas Silk Lafto sub-city, Addis Ababa; phone (+251) 011 557 6721/23 or 011 557 6758/36; information desk 9060; ehis@ehis.gov.et; Monday to Friday, 8:30 am to 5:00 pm.

Community-based health insurance (CBHI)

CBHI is a prepayment scheme: households pay a yearly contribution into a pool at district (woreda) level, and members are treated at the contracted public health centres and hospitals. According to the Ethiopian Health Insurance Service:

- In the Ethiopian budget year 2017 (2024/25), CBHI covered **1,195 districts, 13.67 million households and 63 million beneficiaries**.
- The Minister of Health reported health service coverage **above 95%**, and the EHIS **more than 530 benefit packages**.
- The goal is health coverage for every citizen by **2030**.

CBHI started in **13 districts in 2011**; by 2025 it ran in 1,195, and contracted health care providers rose from **61 to 4,347** (EHIS).

How much does CBHI cost?

There is no single national price: regional and city administrations set the contribution and pay for the households that cannot. Addis Ababa, for example, replaced its flat fee of **Birr 1,500 a year per household** with an income-based scale in October 2025: most households pay **Birr 2,000**, middle-income families **Birr 6,900** and the highest earners up to **Birr 10,500**; the city pays Birr 1,500 of the fee for the poorest, new members pay a **Birr 200** registration fee, and older children or additional family members pay half the basic amount (Addis Fortune, 18 October 2025, press report). Ask your woreda health office for this year's amount and what it covers.

Social health insurance (SHI) for employees

The Social Health Insurance Proclamation No. 690/2010 makes **employees and pensioners** members of a national scheme (Art. 5), with their spouse and children under 18 as beneficiaries (Arts. 2 and 7). Employer and employee pay **equal percentages of the salary** (Art. 9(2)), and the employer deducts and transfers the contributions every month (Art. 9(3)).

After years of delay, the press reported that the EHIS started SHI on **22 January 2026** for government employees of the health sector, as a pilot (Addis Fortune, press report). Who pays what, who is covered and what comes next: social health insurance in Ethiopia.

Private health insurance

Private medical cover — individual, family or group through an employer — is sold by the licensed insurers as part of general insurance. It is the only option for treatment in private hospitals and, for many employers, a staff benefit on top of the public schemes. Before you sign, compare:

- The **annual limit** per person and per family, and the inpatient and outpatient sub-limits.

- The **hospital network**: where you are treated without paying first.
- **Waiting periods** and how pre-existing and chronic conditions are treated.
- Maternity, dental and optical: included or not.
- Cover abroad, if you may need treatment outside Ethiopia.
- How to claim, the documents needed, and how long reimbursement takes.

If a claim is refused, write to the insurer: it must answer within 10 business days before you can take it to the NBE. Our health insurance checklist lists the questions to ask, and our comparison with Kenya, Uganda, Tanzania and South Africa shows how other countries organise public cover.

Frequently asked questions

How many people have health insurance in Ethiopia?

Community-based health insurance covered 63 million beneficiaries in 13.67 million households in 2024/25, according to the Ethiopian Health Insurance Service.

What is CBHI in Ethiopia?

Community-based health insurance: a prepayment scheme for households in the informal sector, run by the Ethiopian Health Insurance Service through woreda schemes. Members pay a yearly contribution set by their region or city and are treated at contracted public facilities.

What is the Ethiopian Health Insurance Service?

The federal body, set up by Regulation 191/2010 as the Ethiopian Health Insurance Agency, that runs community-based and social health insurance. It has 24 branch offices, according to the Ministry of Health.

Is health insurance compulsory in Ethiopia?

For employees and pensioners, yes in law: Proclamation 690/2010 makes them members of social health insurance. Implementation began with public health-sector staff in January 2026 (press report). We found no law making CBHI compulsory, and private cover is optional.

How much is CBHI per year?

It depends on the region or city, which sets the amount. In Addis Ababa, since October 2025, most households pay Birr 2,000 a year and the highest incomes up to Birr 10,500 (press report). Ask your woreda health office for the current amount.

Chapter 2

Social health insurance in Ethiopia (SHI): who must join, who pays and where it stands in 2026

Reviewed 28 October 2026 · online: https://tulinde.africa/et/social-health-insurance/

Short answer Checked 28 October 2026

Social health insurance (SHI) in Ethiopia is the compulsory health scheme for **employees and pensioners** created by **Proclamation No. 690/2010**: employers and employees pay **equal percentages of the salary** every month, and members, their spouse and children under 18 are treated in contracted health facilities. After more than a decade of delays, the **Ethiopian Health Insurance Service (EHIS)** started it on **22 January 2026** for government employees of the health sector, as a pilot (press report).

What social health insurance is

Ethiopia has two public health insurance schemes, both run by the **Ethiopian Health Insurance Service (EHIS)**. **Community-based health insurance (CBHI)** is for households in the informal economy — farmers, traders, the self-employed. **Social health insurance** is for the formal sector: people on a salary and people on a pension. The EHIS expects CBHI to cover about **80%** of Ethiopia's population of more than 115 million and SHI the remaining **20%** (EHIS, August 2025).

The law is short: the Social Health Insurance Proclamation No. 690/2010 has twelve articles. It was published in the Federal Negarit Gazeta on **19 August 2010** and came into force one year later (Art. 12). Its objective is 'quality and sustainable universal health care coverage' through pooling of risks and reducing financial barriers at the point of service (Art. 4). The details — the contribution rate, the benefit package — are left to regulations of the Council of Ministers (Arts. 8–10), the main one being Regulation No. 271/2012.

SHI is not private medical insurance: it is not sold by the insurers supervised by the NBE, and it is run by a public body. For how it fits with CBHI and private cover, see health insurance in Ethiopia.

Who must join

Under Art. 5, **employees and pensioners shall be members**. The definitions in Art. 2 decide who that is:

Term	What the Proclamation says (Art. 2)
Employer	A public office, a public enterprise, or **any person employing at least ten employees**
Employee	Anyone with **three months or more of service**, including public officials, management staff, judges, prosecutors, police, members of the House of Peoples' Representatives, salaried members of the House of the Federation and salaried trade-union officials — but **not members of the Defence Forces**
Pensioner	Anyone receiving a monthly pension from the Social Security Agency, including a pensioner's survivors
Child	A natural, adopted or stepchild **under 18**, or a child under the member's legal guardianship
Family	The spouse and children, plus children **over 18 who cannot support themselves** because of a mental or physical impairment

Every employer must register **all** its employees with the agency (Art. 5(2)); the Social Security Agency registers pensioners (Art. 5(3)). A pensioner who is re-employed while keeping the pension counts as an employee (Art. 9(5)).

> A private business with fewer than ten employees is not an 'employer' under the Proclamation, so it has no duty to register its staff. For those workers and their families, community-based health insurance or private cover remain the options.

Who pays, and how much

Art. 9 sets the rules; the amounts are left to a regulation:

- **Members and employers** both pay a **monthly** contribution (Art. 9(1)).
- Employee and employer pay an **equal percentage**, calculated on the employee's **salary** — the monthly pay for regular working hours (Arts. 2(6) and 9(2)).
- The **employer deducts** the employee's share from the salary and transfers it to the agency on time, together with its own matching share (Art. 9(3)).

- For pensioners, the **government** adds a contribution, and the Social Security Agency transfers both (Arts. 9(1) and 9(4)).
- The employer must give the agency each employee's salary details on request (Art. 9(6)).

What rate applies in 2026? When the scheme started for public health workers, the press reported that **the government pays 6% and employees 3%** of the premium (Addis Fortune, press report). That split is not equal, while the Proclamation requires equal percentages from employee and employer; we could not open the text of Regulation 271/2012 or the EHIS directive that would settle it. **Check the deduction on your payslip** and ask your HR office or the nearest EHIS branch which rate applies to you.

What it covers

Art. 8 says the package includes 'essential health services and other critical curative services', with the particulars fixed by regulation according to the contributions collected. Beneficiaries are the members and their families (Art. 7(1)), and treatment is given in **health facilities that have signed an agreement with the agency** (Art. 2(4)).

For the 2026 start, the press reported cover at **primary, secondary and tertiary levels in government health institutions**: health-sector employees are treated at their own workplace and referred for services it does not offer; other government employees use registered public facilities near them (Addis Fortune).

The Proclamation keeps any **extra** medical benefits granted by a collective agreement under the labour law, and the extra benefits police health institutions give to members of the police (Art. 11(2)). If your employer already offers group medical insurance, SHI does not cancel it.

Members must give accurate information about their family and use the service properly (Art. 7(2)).

Where it stands in 2026

Date	Step
19 August 2010	Proclamation 690/2010 published; in force one year later
2010	The health insurance agency set up by Regulation 191/2010 (Ministry of Health)
2012	Council of Ministers Regulation 271/2012 on the SHI scheme
9 January 2026	Roll-out began for registered members who received an SMS confirmation (press)
22 January 2026	Coverage took effect for government employees of the health sector, as a pilot (press)

According to the same press report, about **181,000 staff** had registered, with **474,958 digital beneficiaries** including family members, and **65% of public health centres** were contracted to provide services. The EHIS plans to extend cover to non-government sectors, in towns and rural areas, by integrating with the existing community-based schemes.

In practice: if you work in the public health sector, you should already have been registered and see a deduction. If you work for another employer, the law already applies to you, but the roll-out has not reached you yet according to what was published by October 2026. Keep any private medical cover until it does.

The Ethiopian Health Insurance Service

The agency collects and administers the monthly SHI contributions and studies revisions of the benefit package and of contribution amounts. The Ministry of Health lists **24 branch offices** across the country. Contact details published by the EHIS: Gotera, around the Pepsi factory, Woreda 7, Nifas Silk Lafto sub-city, Addis Ababa; phone (+251) 011 557 6721/23 or 011 557 6758/36; information desk 9060; ehis@ehis.gov.et.

For other questions about your cover, read health insurance in Ethiopia and the health insurance checklist. How neighbouring countries do it: Kenya's SHA, Tanzania's NHIF and South Africa's medical schemes are compared on public health insurance across Africa.

Frequently asked questions

What is social health insurance in Ethiopia?

A compulsory health insurance scheme for employees and pensioners created by Proclamation 690/2010 and run by the Ethiopian Health Insurance Service. Employers and employees contribute monthly, and members and their families are treated in contracted health facilities.

Who must join social health insurance in Ethiopia?

Employees with at least three months of service of public offices, public enterprises and any employer with at least ten employees, and pensioners of the Social Security Agency. Members of the Defence Forces are excluded (Proclamation 690/2010, Arts. 2 and 5).

How much is the social health insurance contribution in Ethiopia?

The Proclamation says employee and employer pay equal percentages of the salary, with the amount set by regulation. For the January 2026 start, the press reported that the government pays 6% and employees 3%. Check your payslip and ask your HR office or the EHIS.

When did social health insurance start in Ethiopia?

The law dates from 2010, but implementation was postponed for years. The press reported that cover took effect on 22 January 2026 for government employees of the health sector, as a pilot.

Does SHI cover my family?

Yes. Beneficiaries are the member, the spouse, children under 18 (natural, adopted, step or under guardianship) and older children who cannot support themselves because of an impairment (Arts. 2 and 7).

Is SHI the same as CBHI?

No. CBHI is community-based health insurance for households in the informal sector, with contributions set by each region. SHI is for salaried employees and pensioners, with contributions deducted from salary. Both are run by the EHIS.

Sources

Chapter 1: Health insurance in Ethiopia: CBHI, social health insurance and private cover

1. Ethiopian Health Insurance Service — community-based health insurance results (5 July 2025) — https://www.ehis.gov.et/en/news/29
2. Ethiopian Health Insurance Service — 'Ethiopia and Zimbabwe Connect on Universal Health Coverage' (22 August 2025) — https://ehis.gov.et/en/news/30
3. Ethiopian Health Insurance Service — About us and contact details — https://ehis.gov.et/en/about-us
4. Ministry of Health — Ethiopian Health Insurance (agency profile, Regulation 191/2010, branch offices, contacts) — https://www.moh.gov.et/node/205
5. Social Health Insurance Proclamation No. 690/2010, Federal Negarit Gazeta No. 50, 19 August 2010 (WHO legislation database copy) — https://extranet.who.int/cpcd/sites/default/files/public_file_repository/ETH_Ethiopia_Proclamation-690-2010-Social-Health-Insurance_2010.pdf
6. Addis Fortune, 18 October 2025 — 'Addis Abeba Raises Health Insurance Fees as Fiscal Pressures Mount' (press report) — https://addisfortune.news/addis-abeba-raises-health-insurance-fees-as-fiscal-pressures-mount
7. Addis Fortune, January 2026 — 'Social health insurance takes effect for public health sector employees' (press report) — https://addisfortune.news/social-health-insurance-takes-effect-for-public-health-sector-employees
8. National Bank of Ethiopia — licensed insurers — https://nbe.gov.et/financial-institutions/insurers/
9. National Bank of Ethiopia — Financial Consumer Protection Directive FCP/01/2020 — https://nbe.gov.et/files/financial-consumer-protection-directive-no-fcp-01-2020/

Chapter 2: Social health insurance in Ethiopia (SHI): who must join, who pays and where it stands in 2026

1. Social Health Insurance Proclamation No. 690/2010, Federal Negarit Gazeta No. 50, 19 August 2010 (WHO legislation database copy) — https://extranet.who.int/cpcd/sites/default/files/public_file_repository/ETH_Ethiopia_Proclamation-690-2010-Social-Health-Insurance_2010.pdf
2. Social Health Insurance Scheme Council of Ministers Regulation No. 271/2012 — WHO legislation database record — https://extranet.who.int/cpcd/health-legislation/social-health-insurance-scheme-council-ministers-regulation-no-2712012
3. Ethiopian Health Insurance Service — 'Ethiopia and Zimbabwe Connect on Universal Health Coverage' (22 August 2025) — https://ehis.gov.et/en/news/30
4. Ethiopian Health Insurance Service — community-based health insurance results (5 July 2025) — https://www.ehis.gov.et/en/news/29
5. Ethiopian Health Insurance Service — About us and contact details — https://ehis.gov.et/en/about-us

6. Ministry of Health — Ethiopian Health Insurance (agency profile, Regulation 191/2010, branch offices, contacts) — https://www.moh.gov.et/node/205
7. Addis Fortune, January 2026 — 'Social health insurance takes effect for public health sector employees' (press report) — https://addisfortune.news/social-health-insurance-takes-effect-for-public-health-sector-employees

About this guide

Written and checked by the Tulinde editorial team. How we check facts: https://tulinde.africa/editorial-policy/.Read and share it online: https://tulinde.africa/et/free-guides/health-social-insurance-guide-2026/.

Tulinde — independent guide, not an insurer. © Takat AI. Compiled 28 October 2026.

