Kenya's Social Health Authority (SHA) shift: WHX in Nairobi helps hospitals make timely procurement decisions

NAIROBI, KENYA, August 10, 2026 /EINPresswire.com/ -- Kenya's transition from the National Hospital Insurance Fund (NHIF) to the new Social Health Authority (SHA) is giving more than 3,000 healthcare facilities a definite timeline and framework to update how they are equipped, digitised and financed in line with evolving reimbursement and service demands. As SHA rolls out its Primary Healthcare Fund, Social Health Insurance Fund and Emergency, Chronic and Critical Illness Fund, the Ministry of Health reports that more than 31 million Kenyans have registered under SHA, 11,034 health facilities have been contracted, and over KES 147 billion has been paid out in claims to support access to health services from October 2024 to date[1]. This scale of enrolment and reimbursement is giving hospitals clearer visibility on their patient volumes and funding flows, and setting defined timelines for upgrading equipment, diagnostics and digital systems to comply with SHA's financing and reporting requirements.

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> *Dr Janki Chauhan, Chairperson, MEDAK*

Payments to primary care facilities are now based on verified patient visits rather than insurance status, with claims processing timelines cut from 90 to 30 days[2], creating explicit deadlines for hospitals to upgrade diagnostics, information systems and revenue cycle management to match SHA's data driven reimbursement model.

World Health Expo (WHX) in Nairobi, taking place at the Kenyatta International Convention Centre (KICC) from 16 - 18 September 2026, is positioned as the point in the calendar when these financing reforms translate into concrete purchasing decisions bringing supplies technology providers and hospital leaders together ahead of the next budget cycle.

Marking its 10th edition, formerly Medic East Africa and now WHX in Nairobi, held under the patronage of the Ministry of Health, Kenya, and supported by the Kenya Healthcare Federation (KHF) and the Medical Technology Industry Association of Kenya (MEDAK). The event will host over 5,500 attendees, around 15% international, and over 200 exhibitors from more than 30 countries, showing a 22% year on year increase in exhibitors and strong regional interest.

The event's exhibition space has expanded to 4,500 sqm net, an 81% year on year increase, with USD 84.19 million in total business estimated to have been generated at WHX in 2025 - a signal that procurement decisions at the show translate into real contracts and investment for East African healthcare providers.

The SHA transition sits within a wider East African financing shift that is directly shaping procurement pipelines. Under SHA's benefit packages, tariffs for services such as inpatient care, maternity, dialysis and oncology are now defined per case and per day; for example, inpatient per diem rates of KES 3,500–5,000 at Levels 4–6, maternity packages of KES 11,200 for normal delivery and KES 32,600 for Caesarean section, and MRI and CT scan reimbursements of KES 11,000 and KES 9,600 respectively[3]. Those structured rates require hospitals to invest in appropriate imaging, laboratory and digital systems so that eligible services are recorded and reimbursed accurately.

In Ethiopia, Community Based Health Insurance now covers more than 64% of the population nationally (54 million), and over 70% of households in implementing woredas, with evidence that enrolment increases facility revenues and incentivises investments in diagnostics, medicines and quality improvements[4]. Tanzania's pharmaceutical import market was valued at around USD 1.08 billion in 2023 and is projected to reach USD 1.55 billion by 2028 (growing at an estimated 7.6% per year), a trajectory that is changing procurement for medicines, cold chain infrastructure and IT enabled inventory systems across the country. Meanwhile, Uganda's health sector performance reports emphasise ongoing hospital infrastructure investment, even as health spending remains near 2% of GDP, driving new procurement for beds, devices and supply chain systems.

World Bank and WHO analysis show that private investment in African health infrastructure must rise considerably to meet demand, with sub-Saharan Africa's health expenditure still below international standards. WHX addresses this gap by showcasing solutions across eight product sectors - from medical devices and imaging to IT, digital health, and laboratory diagnostics - at a time when East African hospitals must turn policy changes into procurement plans before the next financial cycle.

For hospital CEOs, COOs and procurement directors working against SHA and CBHI timelines, priorities include imaging and diagnostics, revenue-cycle systems, efficiency tools like pharmacy automation and EMRs, and capacity-expanding infrastructure. WHX lets buyers compare options and close procurement gaps in a data-led environment.

"Kenya's transition to the SHA marks a decisive turning point for our national healthcare ecosystem. Healthcare facilities are under immediate pressure to adapt to new reimbursement structures, expanded benefit packages, and digitised claims processing," said Dr Janki Chauhan, Chairperson, MEDAK. "Across East Africa - from Ethiopia's CBHI expansion to Tanzania's pharmaceutical momentum and Uganda's infrastructure push - we see a shared imperative for modern medical solutions. As MEDAK, we recognise WHX as the definitive commercial hub to meet this demand by closing the gap where healthcare providers can connect directly with global suppliers as well as helping decision-makers understand the regulatory requirements, planning investments that will support more effective and robust services in the long term."

Across Kenya, Ethiopia, Tanzania and Uganda, hospitals and procurement teams face the same tight financing deadlines. WHX in Nairobi is where they meet the suppliers, technology providers and distributors who can help them meet those deadlines, ahead of the next budget cycle.

"Healthcare financing reforms across East Africa aren't simply theoretical anymore – they are actively reshaping hospital procurement right now," said Tom Coleman, Portfolio Director - Healthcare, InD. "Kenya's SHA rollout, Ethiopia's CBHI expansion, Tanzania's pharmaceutical sector growth, and Uganda's infrastructure investments are all driving urgent, time-sensitive procurement needs. WHX brings hospital leaders and procurement managers together with distributors and technology companies to coordinate their investment plans with these new funding models and secure what they need before the next fiscal year."

"The WHX portfolio includes three key healthcare events in Africa, held in Nairobi, Lagos and Johannesburg. These events form a consolidated platform that connects global brands with regional distributors, giving East African hospitals better visibility and more choice as they plan for the future," Coleman added.

Registration for WHX is free for healthcare professionals, suppliers and procurement leaders. With SHA timelines advancing and regional reforms accelerating, the September dates at KICC offer a defined window for East African hospitals and their partners to review financing changes and lock in procurement decisions for the coming year. To find out more and be part of the future of health services in East Africa, register for WHX Nairobi by visiting:

- Registrations: https://www.worldhealthexpo.com/events/healthcare/nairobi/attend/registration-lp
- Book a stand: https://www.worldhealthexpo.com/events/healthcare/nairobi/exhibit/apply-for-

a-stand
• Event information: https://www.worldhealthexpo.com/events/healthcare/nairobi

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