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Options to Resolve Unpaid Dues in Health Associations in Jordan

Local Health System Sustainability Project

Task Order 1, USAID Integrated Health Systems IDIQ

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Local Health System Sustainability Project

The Local Health System Sustainability Project (LHSS) under the USAID Integrated Health Systems IDIQ helps low- and middle-income countries transition to sustainable, self-financed health systems as a means to support universal health coverage. The project works with partner countries and local stakeholders to reduce financial barriers to care and treatment, ensure equitable access to essential health services for all people, and improve the quality of health services. Led by Abt Associates, the five-year, \$209 million project will build local capacity to sustain strong health system performance, supporting countries on their journey to self-reliance and prosperity.

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1. CONTEXT

Acting on the recommendation of the National HRH Strategy, the Government of Jordan (GOJ) is undertaking relicensing of health care professionals linked to mandatory continuous professional development (CPD) requirements. Key legal texts have been enacted and approved for this re-licensure: the 2018 License Renewal Bylaw, and the 2019 CPD Instructions and its proposed amendments. USAID's Human Resources for Health in 2030 (HRH 2030) Activity also produced several studies on CPD in Jordan which examined provider attitudes and other issues, such as limited capacity of institutions involved in the CPD process, lack of health care professional (HCP) awareness of CPD requirements, and weak incentives for compliance—all of which present hurdles to effective CPD implementation.

Among these hurdles is the issue of arrears in membership dues to health associations. An active membership to a relevant health association is mandatory for a health practitioner to be licensed and to renew their license every five years. Consequently, if a health practitioner does not have an active association membership as of 2018, they are not able to renew their license. To renew their license, these inactive members must pay the membership fees and fines for violations of late membership fees. To date, the Jordan Medical Association reported that approximately 10,000 physicians have had their health professional association membership revoked because of unpaid dues, thus leaving these physicians at risk of not being able to renew their license. Anecdotal evidence points to other professions having many members (e.g., HCPs), who saw little previous benefit to membership of a syndicate and allowed their membership to lapse. Regaining membership could entail payment of unpaid fees, which would be unrealistic for most.

Health association members are mandated to pay an annual membership fee and a monthly pension contribution. Fines are applied to late payments and membership is cancelled if dues go unpaid for six months. To regain membership to an association, full payment of past dues and associated fines is required. Currently, some member dues exceed their monthly income, with many unable to pay such fines.

Therefore, an active membership to a relevant health association is mandatory for a health practitioner to be licensed and to renew their license every five years. Consequently, if a health practitioner does not have an active association membership as of 2018, he or she is not able to renew their license until April 2023. This leaves a great number of health professionals unable to practice.

To address the issue of arrears, LHSS built upon the findings of the USAID's HRH 2030 activity, carrying out a literature review of previously developed documents and national guidelines, in addition to conducting a series of face-to-face interviews with the health professional associations to discuss the status of arrears and potential solutions. The suggested options are based on meetings and discussions LHSS conducted with the Jordan Medical Association (JMA), Jordan Nursing and Midwifery Council (JNMC), the Jordan Dental Association (JDA), and the Jordan Pharmacist Association (JPA).

2. KEY FINDINGS

1. Based on a critical review of the literature and the face-to-face interview with chairmen of the JMA, JNMC, JPA, and JDA, the bulk of unpaid dues are for JMA members, and the other associations have members who have defaulted on their dues; however, these numbers are relatively minor when compared to JMA.
2. HCPs from JDA and JPA are highly committed to pay their dues in a timely manner as most of the members are working in the private sector or have their private pharmacy or dentistry clinic. In some cases, there were special resolutions offered by these syndicates to HCPs that included loans and instalments.
3. Laws and bylaws of the JPA, JDA, and JNMC state separate fees for registration and annual dues from retirement contributions; this is not the case in the JMA, where physicians are obliged to pay a relatively high fee annually, which includes annual membership and retirement compared with their colleagues (e.g., dentists, registered nurses, and pharmacists) where it is optional to pay retirement dues.
4. Over the past few years, associations have been working with their membership to come up with solutions for resolving the unpaid dues issue, including creating payment plans (instalments) and facilitating bank loans.

Table 1 is an analysis for the status and options to resolve the issue of unpaid dues for each of the main health associations visited by LHSS.

Table 1. Analysis for Status and Options to Resolve Unpaid Dues

Association	Membership Total	Total # Memberships Revoked	% Memberships Revoked	Options Currently Used to Resolve Unpaid Dues	Suggestions to Be Considered
<p>JMA (data source directly from JMA)</p>	<p>39,504</p>	<p>8,371</p>	<p>21.19%</p>	<ol style="list-style-type: none"> 1. JMA communicated with the Minister of Health to resolve unpaid dues, especially to those members from MOH. New actions taken for new registered physicians is for the MOH to deduct the JMA dues from their salaries and send them to JMA. 2. JMA offered exempted fines on dues unpaid from June 2020 to June 2021 to encourage members to pay their dues, taking into consideration the economic hardship during the COVID-19 pandemic. 3. JMA has an agreement with the Jordanian commercial banks to provide members soft loans of minimum amount of 1500 JOD to support members to pay unpaid dues. 4. JMA postponed the retirement dues for 4 years for members who have 5-10 years minimum membership. 5. JMA linked any documentation needed for signing up to services with the municipalities and tax department to having an active membership such as registration for 	<ol style="list-style-type: none"> 1. Exemption of fines associated with overdue membership and pension fees and offering installments to cover missed payments. 2. Considering having agreements with more than one Jordanian bank to facilitate loans and installments. 3. Reviewing association bylaws to split pension from annual dues which will reduce the amounts due by members to maintain their active status. 4. Encouraging advanced payment of membership dues by offering incentives such as a point-reward system to earn priority access to other association benefits if dues are paid in advance. 5. Activating scientific committees to provide an annual CPD package that correlates to the CPD requirements of member to encourage the physicians by demonstrating and providing direct value of association membership.

Association	Membership Total	Total # Memberships Revoked	% Memberships Revoked	Options Currently Used to Resolve Unpaid Dues	Suggestions to Be Considered
				<p>private clinics, emergency 24hr clinics, and family medicine clinics.</p> <p>6. Scientific committees reformulated and activated to support members by offering an accredited educational package.</p>	
<p>JPA (data source directly from JPA)</p>	<p>27,900</p>	<p>2,043</p>	<p>7.32%</p>	<p>1. JPA has agreements with Jordanian Banks to give members soft loans to support paying unpaid dues.</p> <p>2. JPA postponed the retirement dues for members particularly through the pandemic.</p> <p>3. JPA linked any documentation needed for signing up to services with the municipalities and tax department to having an active membership. This includes the registration for private pharmacies.</p> <p>4. Most pharmacists work in the private sector or have their own pharmacies. JPA membership is essential to registering their business.</p> <p>5. JPA facilitates access to courses and education to all members through in person and virtual means.</p>	<p>1. Exempting fines associated with overdue membership and pension fees and offer installments to cover missed payments.</p> <p>2. Providing an annual CPD package that correlates to the CPD requirements of member to encourage pharmacist by demonstrating and providing direct value of association membership.</p>

Association	Membership Total	Total # Memberships Revoked	% Memberships Revoked	Options Currently Used to Resolve Unpaid Dues	Suggestions to Be Considered
<p>JDA (data source is estimates from HHC 2018)</p>	<p>7,500</p>	<p>1,125 - 1,500</p>	<p>15-20%</p>	<ol style="list-style-type: none"> 1. JDA contacted the Minister of Health to resolve unpaid dues especially to those members from MOH. JDA asked the Minister to regulate deduction the annual dues by MOH from dentists working at the MOH and send them to JDA. 2. JDA reviewed their membership fee structure and encouraged members to pay their dues based on a facilitated new system of fees. 3. JDA has agreements with Jordanian Banks to give members soft loans to support paying dues. 4. JDA have their own dynamic professional networks of Jordanian and non-Jordanian institutions and provide active member with access to these networks for business and professional development as an incentive. 5. The JDA scientific committees were reformulated and activated to support members by offering accredited educational packages. 	<ol style="list-style-type: none"> 1. JDA scientific committees to provide an annual CPD package that correlates to the CPD requirements of members.

Association	Membership Total	Total # Memberships Revoked	% Memberships Revoked	Options Currently Used to Resolve Unpaid Dues	Suggestions to Be Considered
<p>JNMC (data source directly from JNMC)</p>	<p>36,000</p>	<p>0</p>	<p>0.0%</p>	<ol style="list-style-type: none"> 1. JNMC has agreements with Jordanian Banks to give members soft loans to support members to pay unpaid dues. 2. JNMC provides soft loans directly to member up to 1000 JD to alleviate living costs. 3. JNMC postponed the retirement payments for members particularly through the pandemic. 4. Retirement fees are split from membership fees paid to JNMC, thus making it less of a financial burden to maintain membership. 5. JNMC provides access to education for nurses including face-to-face and virtual courses from public and private sources. 6. Provided employment opportunities for nurses to enable them to cover their unpaid dues, such as working with the tele counseling center supported by the JNMC. 	<ol style="list-style-type: none"> 1. JNMC scientific committees to provide an annual CPD package that correlates to the CPD requirements for nurses and midwives.

3. SUMMARY OF OPTIONS AVAILABLE FOR ASSOCIATIONS TO CONSIDER

- **Option 1:** Exempt fines associated with overdue membership and pension fees and offer installments to cover missed payments.
- **Option 2:** Sign agreements with Jordanian banks to provide soft loans for health association members to pay their dues or to facilitate installment of payments.
- **Option 3:** Exclude unpaid contributions to the pension fund when calculating pension/retirement salary if the member meets the minimum required number of contributions in total.
- **Option 4:** Encourage advance payment of membership dues by offering incentives such as a point-reward system to earn priority access to other association benefits.
- **Option 5:** Offer different categories for pension-fund contributions to allow members to contribute to the category of their choice, based on their current financial capabilities and future pension salary aspirations. For this, the health association will need to carry out an actuarial study to develop a sustainable and practical model to implement.
- **Option 6:** Redefine association membership conditions so that only annual membership fees are required and participation in the pension fund is optional (as it is with the social solidarity fund and health insurance fund). For this, the health association will need to revise their laws and bylaws.
- **Option 7:** Address the issue of unpaid dues to the Minister of Health to emphasize the need for settling arrears and activating association registration in order to relicense; especially that more than 50% of non-compliant members work in the MOH and the RMS.
- **Option 8:** Offer an exemption of members from paying dues during the COVID-19 pandemic year 2020-2021 due to the economic hardships resulting from the several lockdowns and the socio-economic status of Jordanian population.
- **Option 9:** Associations can provide an annual CPD package that correlates to the CPD requirements of members to encourage the HCPs by demonstrating and providing direct value of association membership.

4. CONCLUSION

In conclusion, this report indicates that all four health associations are working with their members to settle unpaid dues using multiple options to facilitate and provide incentives for payment. LHSS can support these associations in their efforts by advocating for this issue with the National Continuous Professional Development Committee (NCPDC). LHSS can share this document and analysis since having an active association membership is essential to the process of relicensing. Relicensing is a compelling reason and incentive for HCPs to pay their dues and for associations to facilitate that process by activating memberships to practice with valid licenses.