

REPUBLIC OF KENYA



THE PRESIDENCY
MINISTRY OF PUBLIC SERVICE, YOUTH AND GENDER
STATE DEPARTMENT FOR PUBLIC SERVICE
Office of the Principal Administrative Secretary

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3rd July, 2019

All Principal Secretaries/Accounting Officer
The Solicitor General

**UPDATING OF EMPLOYEE'S NEXT OF KIN AND ELIGIBLE DEPENDANTS UNDER
THE CIVIL SERVANTS COMPREHENSIVE MEDICAL INSURANCE COVER FOR FY
2019/2020**

This Ministry in conjunction with the National Hospital Insurance Fund (NHIF) manages the above scheme for Civil Servants. In order to access medical benefits, Principal Members are required to update with NHIF system their next of kin details and eligible dependants. It has however, been noted that this method needs to be reviewed so that records of Civil Servants next of kin and eligible dependants are maintained by this Ministry in soft copy and hard copies by the line Ministry/Department.

Consequently, all the Principal Members under the Medical Scheme are required to upload the information on their eligible dependants on the Government Human Resource Information System (GHRIS) by 26th August, 2019. This Ministry will extract the information from GHRIS for onward transmission to NHIF. To ensure that the information is safely guarded in personal files, Civil Servants are also required to complete the attached form and present the same to the head of Human Resource Unit in Ministries/Department by 26th August, 2016 for safe custody.

The purpose of this Circular is to request all Civil Servants under your purview to upload the details of their next of kin and eligible dependants on GHRIS.

Kindly note that all dependants whose details will not have been uploaded within the given timelines will not access services under the Medical Scheme as from 1st September, 2019.

Please bring the contents of this Circular to the attention of all staff under your purview.



Mary W. Kimonye (Mrs.), MBS
PRINCIPAL ADMINISTRATIVE SECRETARY /
ACCOUNTING OFFICER

Encls.

Copy to: The Cabinet Secretary
Ministry of Public Service, Youth and Gender
NAIROBI

Head of the Public Service
State House
NAIROBI

**UPDATING OF RECORDS UNDER THE CIVIL SERVANTS COMPREHENSIVE
MEDICAL INSURANCE COVER**

PART I: Member Details

Surname:.....Other Names.....
National I.D/Passport No.....Date of Birth(DD/MM/YYYY).....
Gender:.....Mobile No:.....
NHIF No:.....Email Address:.....
Ministry/State Department:.....

PART II: Spouse Details

Surname:.....Other Names.....
National I.D/Passport No.....Date of Birth(DD/MM/YYYY).....
Gender:.....Mobile No:.....

PART III: Children Details (Attach copy of Birth Certificate)

S/No.	Name of Child	Date of Birth			
		Date	Month	Year	Gender M/F
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

PART IV: NEXT OF KIN

1. Surname:.....Other Names.....
National I.D/Passport No.....Date of Birth(DD/MM/YYYY).....
Gender:.....Mobile No:.....

2. Surname:.....Other Names.....

National I.D/Passport No.....Date of Birth(DD/MM/YYYY).....

Gender:.....Mobile No:.....

Note: Attach copies of identification Cards for both contributor and spouse.

PART IV: Declaration

I hereby declare that the above information is correct to the best of my knowledge.

Name of Contributor:.....Signature:.....Date:.....

PART V: Declaration by Human Resource Department

I hereby declare that the above information is verified and correct to the best of my knowledge.

Name:.....

Designation:.....

Date:.....

Ministry/State Department:.....

Official Rubber Stamp:.....