

Transitioning to Integrated Financing of Priority Public Health Services in the Western Pacific

WHO Regional Office of the Western Pacific

UHC 2030 Technical Working Group

3 November 2017

Montreux, Switzerland

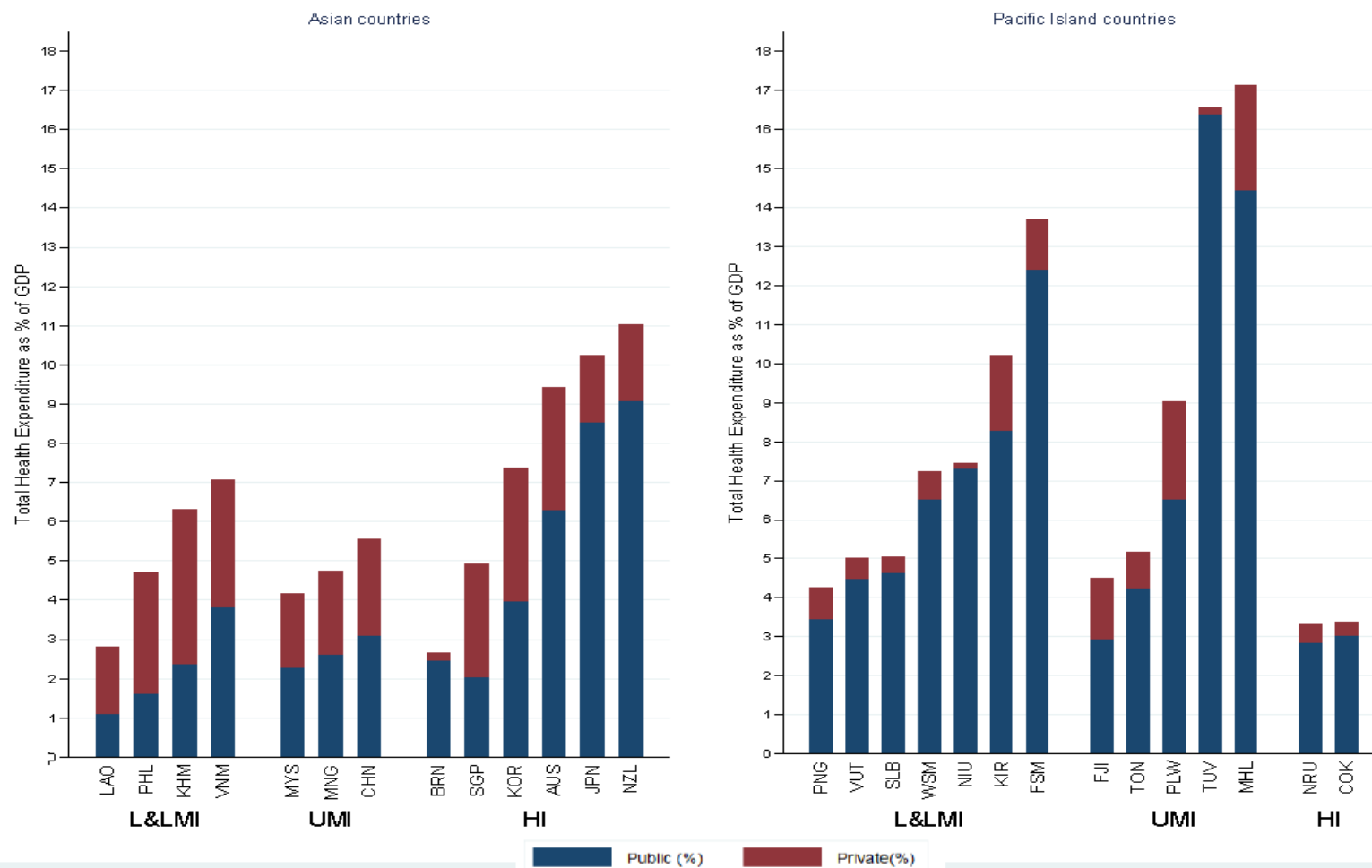
Overview

- Western Pacific regional context
- *Regional Framework for Action on Transitioning to Integrated Financing of Priority Public Health Services*
- Challenges and issues
- Key messages

Western Pacific Regional Context

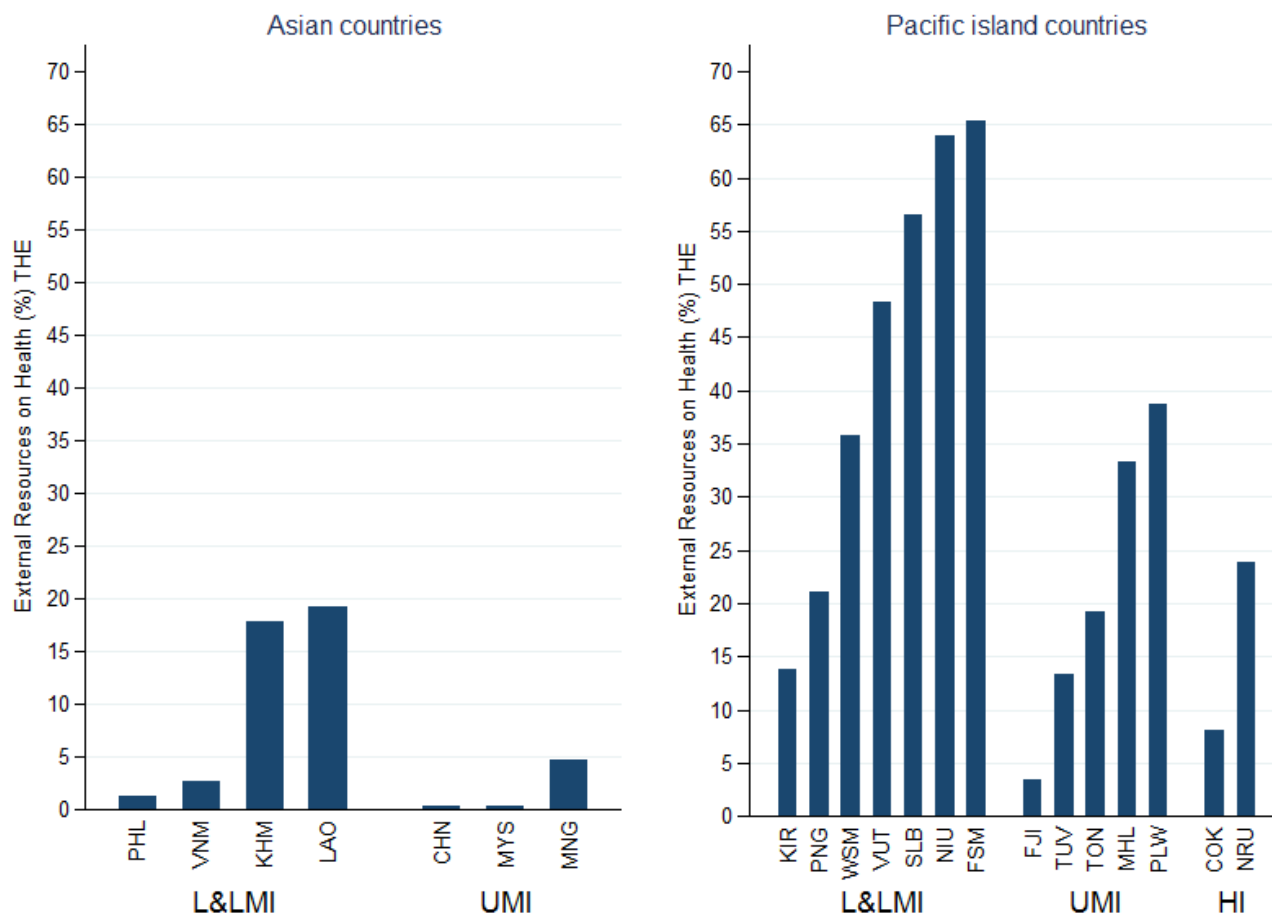
- Changing health needs of the population
 - Progress in communicable and vaccine-preventable diseases
 - Emerging pandemics and natural disasters
 - Rise in non-communicable diseases
 - Accelerated aging process
- Economic growth and increasing expectations for quality health services
- Low government health spending and high out-of-pocket payments
- Reduced external funding for priority health programmes
- Need for flexible financing and more integrated service delivery
- Need for multisector approach, diverse needs for health services, risk factor control, and emergency response

Public and private health expenditure (2014)



Source: WHO GHED and country NHA reports

External health expenditure (2014)



Source: WHO GHED and country NHA reports

68th Session of the Regional Committee – Resolution (WPR/RC68.R5)

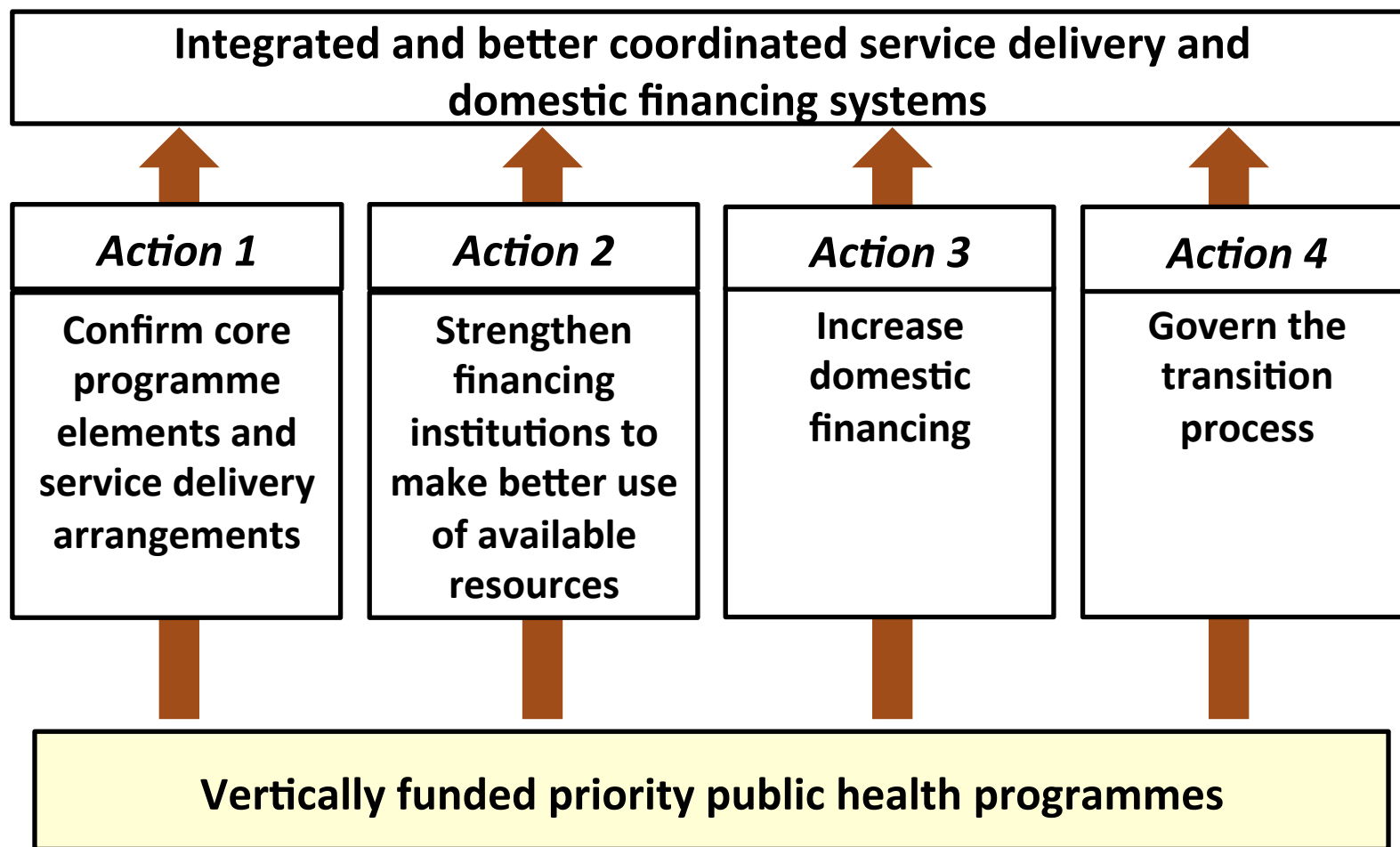
Member States

- Secure essential public health functions and strengthen capacities to detect, respond to and prevent priority diseases
- Develop phased transition plans as part of their national policy and planning processes
- Monitor the impact of the transition

WHO

- Provide technical support to Member States
- Facilitate policy dialogue and disseminate country experiences on transitioning to integrated financing and service delivery
- Report progress on implementation of action framework

Regional Framework for Action



Key challenges and issues

- Working across programmes and sectors
- Human resources – management and absorption of programme staff in the general health system
- Shift towards domestic financing – funding gap, alternative sources of financing, coordination of various health financing schemes
- Public financial management system – budgeting process, channeling of external financing, contracting non-state providers
- Procurement and supply management system

Key messages

- Securing of essential public health functions and core capacities through a whole-of-system approach
- Well-planned, phased implementation to transition
 - Mapping service delivery outlines and funding flows
 - Oversight mechanism
 - Monitoring progress and transition process
- Broader health sector and budgeting reforms

Thank you

Action 1 – Confirm core programme elements and service delivery arrangements

Core programme elements

- Policy guidelines and stewardship
- Programme monitoring and evaluation
- Prevention
- Diagnosis, treatment and care (clinical services)
- Surveillance
- Response
- Laboratory (clinical and reference laboratories)
- Procurement and supply management systems for public health commodities
- Community-based support
- Targeted approaches for vulnerable populations

Options for integration and better coordination of core programme elements

- **e.g. Surveillance**

Current organization	Future directions
<ul style="list-style-type: none">• Parallel reporting procedures created substantial administrative burden especially at the peripheral levels.	<ul style="list-style-type: none">• Integrated systems, including disease notification systems for notifiable diseases; and comprehensive national health management information systems

- **e.g. Prevention**

Current organization	Future directions
<ul style="list-style-type: none">• Largely through primary health care network, often with significant input from specific programmes and funding	<ul style="list-style-type: none">• Mostly under public responsibility• Some can be shifted to health insurance or other funding sources

Please refer to the annex of the technical document for detailed discussion on future directions.

Action 2 - Strengthen financing institutions to make better use of available resources

a. Prioritize and fund core programme elements

- i. Establish a transparent process in priority setting
- ii. Ensure access to quality health services by high-risk and disadvantaged populations
- iii. Address funding gaps and overlaps in transition

b. Align different funding sources and funding flows

- i. Absorb programme staff into the general health system
- ii. Channel external funding through the PFM system
- iii. Create flexibility in PFM systems for contracting NGOs
- iv. Set donor co-financing requirements to encourage more domestic resources

Action 2 - Strengthen financing institutions to make better use of available resources (continued)

- c. Determine the role of health insurance in mixed health financing systems**
 - i. Identify services and functions that can be potentially covered through health insurance
 - ii. Ensure effective coverage of appropriate benefit package for priority populations
 - iii. Subsidize health insurance for programme-related services with government funding

Action 3 – Increase domestic financing

- a. Increase the government's budget share to health**
 - i. Ensure active engagement between the health and finance authorities
 - ii. Ensure effective implementation of the allocated budget
 - iii. Develop comprehensive health sector plan and realistic performance indicators
- b. Earmark additional revenues for health**
- c. Leverage resources from non-state actors for health**
- d. Pursue synergies across government sectors**

Action 4 – Govern the transition process

a. Plan and implement in a phased manner

- Set direction and long-term strategy, plan systematically and implement in a phased manner

b. Build consensus through transparent and participatory process

- Improve transparency of financial information from both donors and national government and donor engagement
- Involve the workforce and ensure participation of affected populations

c. Establish and maintain oversight and monitoring

- Develop oversight mechanisms and monitoring processes

The Way Forward: Member States

1. Clearly define a **set of essential public health functions** for population health gains
2. Ensure adequate **public funding from domestic sources** for essential public health functions
3. Take a **well-planned and phased approach** to transition, including:
 - Ensuring the transition is well incorporated into the national health strategy and annual operational plan with clear budget indication;
 - Employing a whole-of-system approach to improve efficiency through integration and better coordination among programmes;
 - Building consensus and start with mapping core program elements with essential public health functions and assess health system capacity to deliver these functions; and
 - Monitoring progress and adjust policy accordingly

The Way Forward: WHO

1. Engage with global health initiatives and development partners to facilitate the process for countries going through transition:
 - Designing midterm funding plans and co-finance approaches to increase domestic funding and to change the operation mechanism of programmes for greater efficiency;
 - Working towards external funding that is channeled through existing domestic systems; and
 - Facilitating collaborations between programmes and ministries of health and finance, health insurance agencies, where applicable.
2. Facilitate country-level policy dialogue on priority settings and transition steps (road map) based on clear framework and robust evidence
3. Synthesize experiences and provide guidance for smooth transition according to each country's specific context