WHO BIREGIONAL WORKSHOP ON HEALTH FINANCING POLICY FOR UNIVERSAL HEALTH COVERAGE IN ASIA

11–15 July 2016
Manila, Philippines
MEETING REPORT

BIREGIONAL WORKSHOP ON HEALTH FINANCING POLICY FOR UNIVERSAL HEALTH COVERAGE IN ASIA

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The views expressed in this report are those of the participants of the Biregional Workshop on Health Financing Policy for Universal Health Coverage in Asia and do not necessarily reflect the policies of the conveners.

This report has been prepared by the World Health Organization Regional Office for the Western Pacific for Member States in the Region and for those who participated in the Biregional Workshop on Health Financing Policy for Universal Health Coverage in Asia, in Manila, Philippines from 11 to 15 July 2016.
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Keywords:

Health system plans / Regional health planning / Universal coverage / Asia
Universal health coverage (UHC) envisages that all people and communities can access the quality health services they need without suffering financial hardship by paying for health services. As one of the key targets of the health Sustainable Development Goal (SDG), UHC serves as the foundation for the health SDG and contributes to other SDGs. Health financing is the critical element of developing an equitable, efficient, accountable, sustainable and resilient health system that ensures access to quality health services and financial protection, which are essential for UHC. In many countries, health financing functions as the trigger for broader health system reforms and a key contributing factor to the success of the policy change.

The World Health Organization (WHO) Biregional Workshop on Health Financing Policy for Universal Health Coverage in Asia was designed for key policy-makers from ministries of health and finance as well as senior managers of health insurance or social protection organizations from 13 selected Asian countries in the Western Pacific and South-East Asia regions. The multi-stakeholder participation within country teams facilitated greater mutual understanding across sectors and further intersectoral collaboration and coordination on health financing reforms in the country. Taking an applied and problem-solving approach, the workshop addressed the most pressing health financing system challenges and the linkages with service delivery systems across the two regions.
1. INTRODUCTION

1.1 Meeting organization
The first World Health Organization (WHO) Biregional Workshop on Health Financing Policy for Universal Health Coverage in Asia, was held in Manila, Philippines from 11 to 15 July 2016. The workshop was organized by the WHO regional offices for the Western Pacific and South-East Asia and co-sponsored by the Asian Development Bank and the World Bank. The workshop brought together key policy-makers from ministries of health and finance as well as from health insurance or social protection agencies (if applicable) from 13 countries in the Western Pacific and South-East Asia regions, partner organizations, and members of the WHO Secretariat.

1.2 Meeting objectives
The objectives of the workshop were to enable participants:

1) to analyse the root causes of their countries’ health financing challenges;

2) to share experiences across countries and improve intersectoral collaboration among key health financing stakeholders within countries; and

3) to identify and assess potential policy options for their country contexts and the way forward to reach universal health coverage (UHC).

2. PROCEEDINGS

2.1 Opening session
The opening session outlined the importance of the workshop in promoting the policy dialogue between ministries of health, ministries of finance, and health insurance or social protection agencies. As countries are undergoing major health sector reform, health financing is oftentimes a trigger and entry point. Also highlighted was the applied problem-solving approach, which aimed at feasible options and entry points for countries to take action.

2.2 Plenary: Overview of global and regional health financing
The plenary session provided an overview of the global and regional contexts in health financing, including comparisons across Asian countries. The global update stressed the need to consider tailored approaches to supporting countries to advance towards UHC. The overview of health financing in Asia showed similar challenges, such as high out-of-pocket financing, inequities in access to health services and financial protection, and variations in wealth and health spending with many countries having low domestic spending on health.

2.3 Group work: Root cause analysis
The group work focused on identification of challenges in health financing and health system development as well as their root causes, which are used to reflect on the potential ways in which countries can address their challenges. Countries reflected on their health system development to place health financing in the broader scope and emphasize the importance of health systems governance and service delivery, and the whole-of-system approach. The group work reaffirmed common issues across countries, such as need to increase domestic resources, expand coverage to the informal population and the poor, reduce high out-of-pocket payments, improve service availability and quality, address shortage of human resources, regulate the private sector, and improve health
worker performance. It was also recognized that countries in the regions are at various stages of health system development and have different challenges.

2.4 Plenary: Health financing topics

Several plenary sessions focused on specific health financing topics, which were introduced by facilitators and featured sharing of country experiences through panel or open discussions. Health financing themes included: revenue collection and fiscal space for health, pooling, resource allocation, decentralization and governance of service delivery, benefits package, paying to providers, and linkages between health financing and integrated, people-centred health services. While all of the topics were relevant to countries, some of the key discussions centred around the financial and non-financial incentives for providers, managerial, technical and health systems capacities needed to implement and monitor interventions, and potential areas in which countries needed support and how development partners can collaborate to support countries.

2.5 Group work: Addressing challenges in health financing

The group work was designed to stimulate more thinking around the health financing themes and focused on three group work sessions on: pooling, resource allocation and public financial management, and the private sector. During the group work on pooling, several issues were raised, including covering the informal sector, coordination of public funds, coordination of vertical funding streams, and pooling across central and local levels. Regarding resource allocation and public financial management, countries highlighted the importance of transparency and dialogue with ministries of finance in the budget formulation process, and challenges, such as line-item budget rigidity, under-spending, procurement rules in budget execution process, and weak budget monitoring capacity. During the group work on the private sector, countries acknowledged the growing private sector, which accounted for over a majority of the health providers in some countries. Countries discussed how to harness and align private sector potential to maximize service delivery goals and minimize the potential adverse effects.

2.6 Plenary: Identification of entry points

All countries linked their group work sessions and presented their country plans reflecting on their health system and financing challenges, root causes, short-term and long-term options, and knowledge and capacity gaps. During this session, participants had the opportunity to view each other’s country plan in more detail, exchange questions, and share their experiences with one another and other experts.

2.7 Plenary: The way forward

During the way forward session, conclusions and recommendations for next steps were presented. Health financing was emphasized as a key entry point for advancing UHC. While the paths that countries take depend on their country contexts, several major areas can be pursued, including: resource generation, active dialogue between ministries of health and finance, equitable and efficient pooling, resource allocation aligned with public financial management, strategic purchasing, and linking health financing with service delivery. WHO and other development partners will continue to work together to support countries in their advancement of UHC.
3. CONCLUSIONS AND RECOMMENDATIONS

3.1 Conclusions
Countries in Asia are facing several key common health financing challenges that remain as barriers to the improvement of access to health services, expanding coverage, delivery of quality health services and financial protection. Some of the challenges identified include: inadequate domestic financing for health, inefficient flow of funds, high out-of-pocket payments, coverage of the non-poor informal sector, engagement with the private sector, lack of strategic purchasing, and issues of decentralization, among others.

The workshop focused on countries identifying root causes of these health financing challenges, discussing their countries' contexts within the three health financing functions – revenue collection, pooling and purchasing – and linking health financing with service delivery and specific issues related to governance, such as decentralization, public financial management and the private sector. Through the discussions and sharing of country experiences, options on how to address country-specific problems were identified. Countries proposed their respective plans, including short- and long-term interventions in health financing. Overall, the workshop highlighted the complexity of the health sector compared to other sectors and the importance of health financing in ensuring equitable access to quality health services.

3.1.1 Health financing functions

Revenue collection

- Assessing fiscal space for health – implications from the macroeconomic context, reprioritization within the government budget, efficiency improvements, pros and cons of sector-specific means to raise additional revenues, and use of external funding – are useful to identify possible sources of and constraints to revenue collection. Efficiency in how revenues are both raised and spent is one of the most important factors for helping realize fiscal space.

Pooling

- Coordination of different funding streams – for population- and individual-based services and vertical programmes – improves system efficiency and equity in financing. Policy dialogue should not focus on whether there are multiple or single pools, but rather try address the underlined policy objectives of solidarity and risk sharing across different population groups. Pooling enables cross-subsidization between the poor and rich as well as between the healthy and sick, and supports the redistributive capacity of health financing systems to deliver equitable services.

Resource allocation and strategic purchasing

- Resource allocation should consider both demand- and supply-side measures.

- The nature of strategic purchasing – the concept of moving from being a passive price and quality taker to a price and quality maker in the health system – is dependent on a myriad of factors such as policy priorities, purchasing power of governments and provider payment mechanisms, among others. If leveraged properly through the designing of payments systems to incentivize provider behaviour, this can benefit the public and improve quality of services.

- The appropriate mix of provider payment mechanisms is context specific and its effectiveness dependent on the development of the health system, for example with the maturity of the health information system and the regulation and enforcement capabilities of the government.
• In priority setting and designing the benefits package, the decision-making process should transparent and based both on evidence and value judgement of citizens.

3.1.2 Linkages across financing functions, governance and service delivery

• Public financial management rules and fiscal decentralization affect how well health spending can be aligned to equity objectives through effective pooling and to service delivery objectives through effective purchasing. Rigid budget implementation can be a challenge and more flexibility for the health sector to form, execute and account for government funds will require new forms of accountability.

• Many countries in Asia are dealing with issues of decentralization, the impact of which can be positive or negative on health system development. Decentralization can cause gaps in funding, capacity, decision space and accountability. Decentralization in the health sector needs to be aligned with achieving health policy objectives such as improving access to priority services across regions, strengthening quality of care, and improving equity, financial protection and accountability.

• The increasing role of the private sector, particularly in service delivery, is apparent in many countries in Asia. Along with it come increasing challenges such as the need for better regulation and enforcement within existing legal frameworks, and ultimately how to harness the private sector's potential through health financing mechanisms, such as contracting and payment methods to achieve public policy objectives.

• Health financing is closely linked with service delivery and can facilitate the provision of quality health services through various means, such as incentives to institutions, providers and patients; flexibility in the management of funds; and improvements in the coordination of health services across the different levels of care.

3.2 Recommendations

3.2.1 Recommendations for Member States

1) Member States are encouraged to further identify challenges and root causes in developing and implementing country plans for short- and long-term health financing policy interventions that were proposed in the workshop.

2) Member States may use entry points identified in the workshop and develop and improve health financing policy to implement their country-specific UHC road maps.

3) Member States are recommended to continue building enabling policy and institutional environments and engaging with the ministry of finance and other sectors, civil society, and development partners to improve their health financing systems.

3.2.2 Recommendations for WHO

1) To support Member States in the implementation of their country plans, WHO aims to continue and strengthen its support to countries. Specific areas include the following:

• Based on country needs, WHO will facilitate further discussions of specific health financing areas through focus group discussions, national workshops, and/or policy dialogues with in-country stakeholders.

• WHO intends to continue to provide technical support in developing health financing strategies based on social, economic and political contexts of a country.
WHO aims to facilitate sharing of experiences and best practices among Member States through various channels including regional workshops, publications and other products.

2) WHO is requested to facilitate and promote mutual understanding between the ministries of health and finance to ensure effective dialogue and alignment between financing policy and public financial management.

3) The WHO Regional Office for the Western Pacific will build on the workshop and continue the collaboration with the Regional Office for South-East Asia, the Asian Development Bank and the World Bank to strengthen the linkage between health and finance to support Member States to advance UHC and the SDGs.
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### ANNEX 2. Meeting programme

<table>
<thead>
<tr>
<th>Time</th>
<th>11 July (Monday)</th>
<th>Time</th>
<th>12 July (Tuesday)</th>
<th>Time</th>
<th>13 July (Wednesday)</th>
<th>Time</th>
<th>14 July (Thursday)</th>
<th>Time</th>
<th>15 July (Friday)</th>
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<tbody>
<tr>
<td>08:30 – 09:00</td>
<td>Registration</td>
<td>09:30 – 09:00</td>
<td>Summary of previous day</td>
<td>09:30 – 09:00</td>
<td>Summary of previous day</td>
<td>09:30 – 09:00</td>
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<td>09:30 – 09:00</td>
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<tr>
<td>09:00 – 10:00</td>
<td><strong>1.1 Opening session</strong></td>
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<td>• Opening remarks (WPRO RD)</td>
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<td></td>
<td>• Introduction of participants and facilitators</td>
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<td>• Overview of workshop objectives (Xu Ke)</td>
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<td>• Administrative matters</td>
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<td>10:00 – 10:30</td>
<td><strong>Group photo and coffee break</strong></td>
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<td>10:30 – 11:00</td>
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<td>11:00 – 12:30</td>
<td><strong>2.1 Plenary/panel discussion</strong></td>
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<td>• Revenue collection (Ajoy Tandon &amp; Luis Vinhas)</td>
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<td>• Fiscal space for health</td>
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<td>• Rules and institutions</td>
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<td>• Flat taxes and sustainability</td>
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<td>12:30 – 13:30</td>
<td><strong>Brown Bag, Role of private sector in health financing</strong></td>
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<td>13:45 – 15:30</td>
<td><strong>1.3 Group work</strong></td>
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<td></td>
<td>• Root cause analysis and identification of challenges in health financing and health system development (Viroy Tangcharoensathien &amp; Luis Vinhas)</td>
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<td>15:30 – 16:00</td>
<td><strong>Coffee break</strong></td>
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<td>16:00 – 17:00</td>
<td><strong>1.4 Plenary/group work feedback and discussions</strong> (Viroy Tangcharoensathien &amp; Luis Vinhas)</td>
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<td>17:30</td>
<td><strong>Dinner Reception</strong></td>
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**Notes:**

- *Hotel Sofitel Philippine Plaza Manila*
- *Lunch: Sofitel Hotel*
- *Coffee breaks: Sofitel Hotel*
- *Dinner Receptions: Sofitel Hotel*