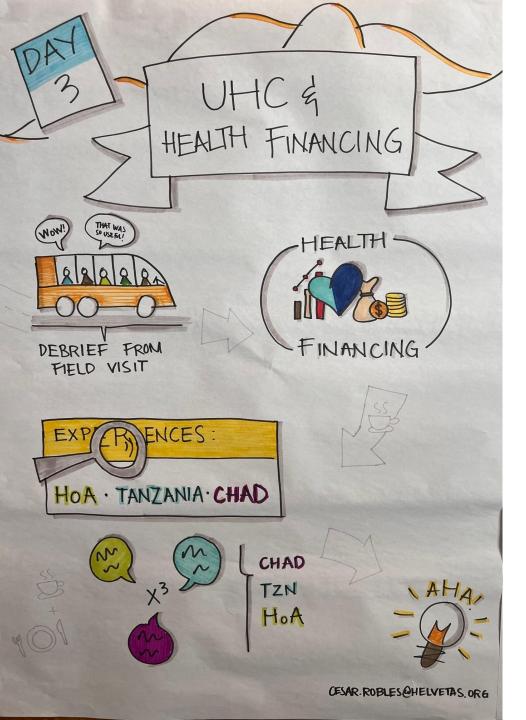


Health beyond 2024:

Fostering a SDC-wide approach on cross-sectorial interventions

## WELCOME

Day 3 / 30 August 2023





## Agenda overview

## DAY 3

**Cesar Robles** 



## WRAP UP OBJECTIVES OF DAY 3

Topic

Peer-exchange & mutual learning: UHC & health financing

Rationale

All SDC offices in the ESA region support programs on health financing. Health financing is a core function of health systems that can enable progress towards UHC by improving effective service coverage and financial protection. Labels such as "social health insurance," "community insurance," or "tax-funded systems" have little meaning by themselves and hide the complex choices and options available to countries as they raise, pool, and use funds to ensure the availability and use of quality services.

Objectives

- Clarify concepts, definitions, approaches, global and regional trends;
- Get the overview of SDC health financing and SRHR projects and working modalities;
- Learn from each other experiences; Peer-reviews of ongoing project.





Field visit debrief

### Selena Lopreno



## The Match (game)

**Cesar Robles** 





What do we understand by Health Financing?

Carla Koch



## Health Financing Strategy

#### Key <u>questions</u>:

- What services should be made available to whom and under what conditions?
- Which services should be made accessible to the different population segments? Which services are priorities? Disease-specific or integrated services, primary health care or specialized secondary/tertiary services?
- Which services should be provided free of charge and to whom? For which services and populations should out-of-pocket payments (user fees, cost sharing) be reduced or even removed?
- Which groups (children under 5, pregnant women, elderly people, handicapped people, rural populations) are priorities if only a step-wise coverage is financially feasible? Through which financing/payment mechanism?

#### > PRIORITY SETTING!!!

## The Health Benefits Package

Set of services that can be feasibly financed and provided under the actual circumstances a given country finds itself in.

4 attributes of HBFs:

- 1. A HBF includes a **portfolio of multiple services** and not just a list of isolated diseasespecific products
- The costing relies on actuarially informed estimates of supply and demand, based on realistic projections of current and future utilization
- The HBF constrains the products and services made available through publicy funded mechanisms
- 4. A sustainble HBF should be an **evolving policy instrument that should adapt as new evidence and capabilities emerge**.



It's coffee time



#### Closer look at experiences:

### Chad Tanzania HoA

Moderator: Carla Koch

Host / Chad: Djo Narmbaye & Samuel Roches

Host Tanzania: Jacqueline Matoro

Host HoA: Corinne Corradi

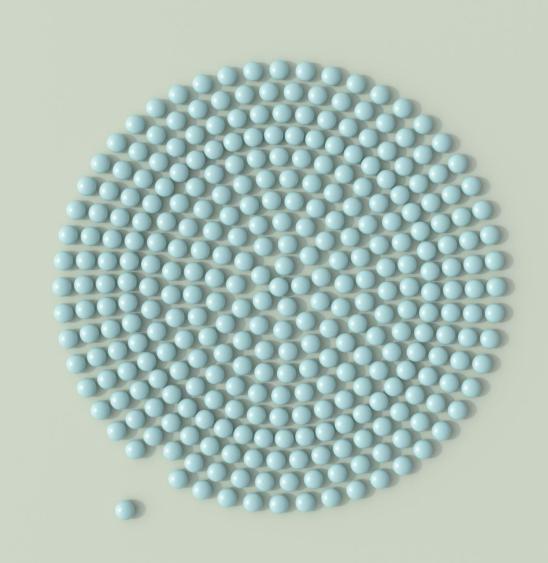






# Hot potato (game)

Cesar Robles





Djo Samuel Jacqueline	Round 1 Chad Chad Tanzania	Round 2 Chad Chad Tanzania	Round 3 Chad Chad Tanzania
Corinne	HoA	HoA	HoA
Aimee	HoA	Chad	Tzn
Naima	HoA	Chad	Tzn
Carla	HoA	Tzn	Chad
Esther	HoA	Tzn	Chad
Eustache	HoA	Tzn	Chad
Lensse	Chad	Tzn	HoA
Milton	Chad	Tzn	HoA
Wangechi	Chad	HoA	Tzn
Samuel	Chad	HoA	Tzn
Selena	Tzn	Chad	HoA
Seleus	Tzn	Chad	HoA
Stuart	Tzn	HoA	Chad
Younous	Tzn	Hoa	Chad



### **WRAP UP:**

AHA card & GAP card



Lara Sponagel Cesar Robles