Unpacking the mysteries of Universal Health Coverage

from Mexico to Seattle ...

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Formal health coverage 95-100% (dark) & 70-95% (light)
Implementing (dark) or interested in (light) UHC reforms
No data

* WHO, 2005
SOURCE OF DATA:
Results for Development
Rockefeller Foundation
UHC Country Approaches

Common Core Principles

- Pre-Payment
  - Domestic-plus financing
  - Limited out-of-pocket fees

- Risk Pooling
  - Rich and poor
  - Healthy and sick

- Basic Health Needs
  - Prevention
  - Early detection
  - Care and treatment

Country Variations

- Financing
  - Tax-based
  - Social health insurance
  - Community insurance
  - Employer-based

- Delivery
  - Public sector
  - Private sector
  - Local/NGO services
  - Hybrid

- Creation
  - Progressive
  - “Big Bang”
“the development agenda must address universal health-care coverage, access and affordability, (...) ensure the availability of essential medicines (...) and realize women’s reproductive health and rights (...).

• Formed a UHC Workstream
• Disseminated information about UHC and RH/FP supplies; a fact sheet, blogs
• Conducted a Systematic Review
UHC Workstream

GOAL  ... Help advance the RHSC members knowledge about the implications and considerations of UHC for access to RH supplies and the role that supply chains have in achieving UHC in order to position the Coalition as a leader ensuring that UHC efforts address access to RH/FP in the post-2015 era.
Universal Health Coverage
An overview for the reproductive health (RH) supplies community

What is Universal Health Coverage?
Universal health coverage (UHC) means that all people can access the high-quality health services and medicines they need without financial hardship when paying for them.

What are the Key Components of UHC?
UHC has three primary components:

Population: UHC ensures access for everyone including the poor, vulnerable, and marginalized populations.

Service coverage: UHC ensures that a range of high-quality essential health services and medicines are widely accessible to meet basic health needs.

Financial protection: UHC ensures that services and medicines are affordable, and based on need. It ensures there are financial systems to protect people from financial hardship or impoverishment arising from health care cost.

Links between UHC and Reproductive Health Supplies

- UHC is widely recognized as critical to achieving the Sustainable Development Goals (SDGs) and in particular, the goal to “Ensure healthy lives and promote wellbeing for all at all ages.” Specifically, an important SDG target for UHC is “Achieve UHC, including financial risk protection, access to quality essential health care services and access to safe, effective, quality and affordable essential medicines and vaccines for all.”
- “Four hundred million people lack access to one or more of seven lifesaving health services” including RH.
- The realization of UHC is predicated on the availability of high-quality, affordable essential health medicines, including RH commodities.
- UHC and reproductive health commodity security (RHCS) share complementary goals.
The Effects of Universal Health Coverage on Access to Reproductive Health and Family Planning Supplies

A Systematic Review of the Evidence

- What elements of UHC strategies were most essential to ensure access to supplies?
- What have countries done to increase access to RH/FP supplies?
- What are the effects of UHC strategies on supply chains?
- What recommendations or best practices can be shared?
Systematic review

**Grey Literature & Snowballing**
- 87 records identified

**Published Literature**
(Pubmed, LILACS, Popline, JSTOR)
- 676 records identified through databases
- 97 duplicates removed
- 117 titles/abstracts excluded
- 393 full texts excluded
- 579 records screened

**Selected for Full-text Screening**
- 462 selected for full-text screening
- 393 full texts excluded
- 69 selected for in-depth analysis
- 3 excluded

**Final Report**
Findings

• No rigorous studies on impact of UHC strategies on access to RH supplies

• Few publications describing how supply chain systems were adapted to account for UHC

• When UHC expansion studied, really only looking at coverage or financial protection. Not usually looking at quality, and ensuring drug and essential supplies is part of quality angle.

• Lack of availability of drugs is seen as a health system weakness, not as something that the UHC scheme should address.
FP2020 GOALS BY 2020

realizing the right of 120 million more women & girls to use modern contraception

Achievement of Sustainable Development Goals

UNIVERSAL ACCESS BY 2030
to modern contraception

GLOBAL FINANCING FACILITY

US AID FROM THE AMERICAN PEOPLE

Management Sciences for Health
UHC-RH supplies related activities

- ICFP events
- FP-UHC consultation
- UHC campaign and UHC Day
- USAID projects engaged: SHOPS, HFG, LMG, HPI Plus, SIAPS
Universal Access to Family Planning & Reproductive Health

Who’s Accountable in the Post-2015 Era?

Universal health coverage and access represent a platform to advance family planning and the FP2020 goals. However, stewardship from the public sector is critical. Speakers will explore the intersection of financing, policy and accountability as countries move into universal access for Family Planning in this new post-2015 era.

Moderator
Jonathan D. Quick, President and CEO, Management Sciences for Health (MSH)

Panelists
- Chris Barry, Director-General, Ministry of Health, Uganda
- Beth Schlicher, Executive Director, FP2020
- John Sibiak, Director, Reproductive Health Supplies Coalition (RHSCP)
- Melissa Wamba, Advocacy Office, Management Sciences for Health (MSH), Kenya
- Kieno Afolabi, Director, Reproductive Health, Federal Ministry of Health, Nigeria (invited)
-logfile for the Ministry of Health, Kenya (invited)
- NIFPA Indonesia (invited)
## Purpose
Discuss family planning in the context of universal health coverage (UHC) and sustainable health financing. Examine how to coordinate and align related efforts of stakeholders represented at the consultation.

## Date and place
5 and 6 April, UNFPA New York

## Participants
- Abt Associates
- Avenir Health
- Family Planning 2020 (FP2020)
- Gadjah Mada University, Indonesia
- Johns Hopkins University
- John Snow Inc. (JSI)
- Management Science for Health (MSH)
- Marie Stopes International (MSI)
- Palladium
- Pathfinder
- PAI
- Population Council
- Population Services International (PSI)
- Reproductive Health Supplies Coalition (RHSC)
- Results for Development Institute (R4D)
- United Nations Population Fund (UNFPA)
- United States Agency for International Development (USAID)
- William Davidson Institute
- World Bank Group
- World Health Organization (WHO)
FP-UHC Consultation

- Reflected on experiences in Indonesia, Ghana and Tanzania;
- Reviewed a typology suggesting a sequencing of advocacy messages to support countries;
- Identified challenges for family planning on the road to UHC.

However, there was very limited discussion about implications of UHC on SCM and RH supplies.

- Agreed to form a new FP-UHC Reference Team to develop guidance for use by family planning partners as they engage with countries.
UHC levers for RH supplies

- Determine minimum medicines benefit packages
- Define/implement policies that improve cost-effective use of supplies
- Negotiate product prices & reimbursement lists
- Dictate standards of product quality
- Strengthen supply chains and managing capacity
Moving forward ... ideas for discussion

- Reactivate the UHC workstream and/or form a community of practice on UHC/RH supplies to ensure knowledge sharing and
- Identify opportunities for documentation - case studies - and research on the effects of implementation of UHC strategies on RH supplies and supply chain systems
- Continue to advocate for attention to and investment in supply chain systems strengthening to ensure access to commodities. Push this discussion with the FP-UHC Reference Team, donors, governments and stakeholders