

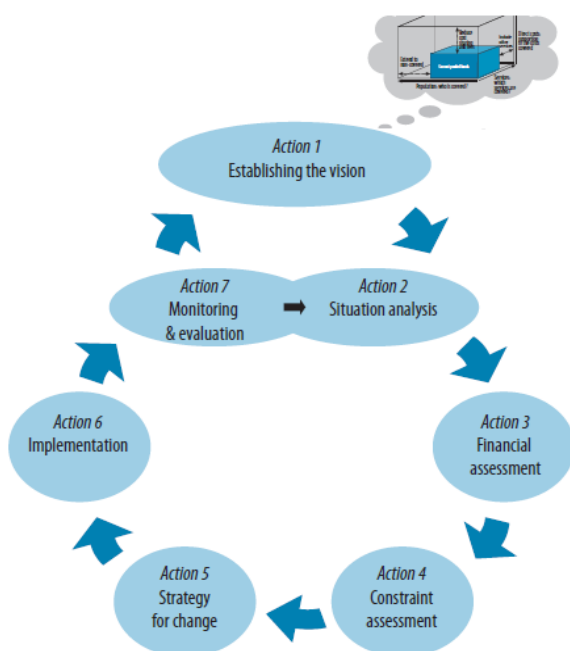


Technical Brief Series - Brief No 9

DEVELOPING POLICY OPTIONS FOR UNIVERSAL COVERAGE: MANAGING THE CHANGE PROCESS

All health financing systems need to adapt because there is always room for improvement and because country contexts change. This is true for all countries across the income spectrum. High-income countries may also want to engage in continuous self-assessment to ensure that the financing system in place continues to achieve its objectives in the face of changing health technology, increasing demands and evolving fiscal constraints.

In order to support the process of change, a health-financing decision cycle is here presented and is intended as a guide rather than a blueprint. In reality, the proposed action steps overlap, take place in parallel and may often be repeated. Practical guidance on some of the action steps can be found in the OASIS approach (Institutional and **O**rganizational **A**ssessment for **I**mproving and **S**trengthening Health Financing), developed by WHO. OASIS can help in systematically undertaking a health financing system review on the basis of which solutions can be identified and decisions to improve the performance of a health financing system in order to move and accelerate progress towards universal coverage (reference).



ACTION 1: ESTABLISHING THE VISION

Establishing a vision for the future based on an understanding of the present is crucial because the paths countries choose towards universal coverage will necessarily differ. A commitment to universal coverage is a commitment to reducing financial barriers to access and increasing and maintaining financial risk protection.

Allowing society's and government's values to inform the overall vision for the system is a key part of establishing a basis for the technical decisions that will need to be taken. The values can also guide decision-makers in managing the coverage trade-offs, i.e. the proportion of the population, services and costs that can be covered with the available resources.

ACTION 2: SITUATION ANALYSIS – UNDERSTANDING THE STARTING POINT

Based on the vision, the situation analysis is the first step to in the development of health financing policy and strategies. The focus here should be on financial accessibility and financial risk protection in order to make clear the gap between what is currently being achieved and what the country would like to achieve.

The situation analysis needs to consider factors inside and outside the health (financing) system that may affect progress on the path to universal coverage.

ACTION 3: FINANCIAL ASSESSMENT

The current and likely future availability of funds for health from government, households, the private sector, nongovernmental organizations and external partners needs to be assessed to create a comprehensive funding framework for the health system. Assessment should include the analysis of the share of public resources allocated to the sector over time. In some countries, this stage will involve dialogue with international financial institutions and external partners to assess the resources likely to be available and how they will be channeled to government and nongovernment actors.

Policy-makers will also want to establish whether government spending will be restricted and how spending limits might be increased. Finally, complementary roles for different sources of funds to the health system should be considered. Proposed strategies and changes (see below) equally need to be assessed with respect to their financial implications.

ACTION 4: CONSTRAINT ASSESSMENT

An assessment of potential constraints allows decision-makers to identify policy areas that require widespread consultation, and who should be consulted and in what way. Decision-makers should also identify what is technically and politically feasible and determine how government can build on and support social demand for a well-functioning health system. This assessment ideally culminates in the political decision to move forward. Advocacy, communication and evidence-based arguments can go a long way in eliciting the political and financial support needed to seek universality.

ACTION 5: DEVELOP AND FORMALIZE STRATEGIES AND TARGETS FOR CHANGE

The situation analysis, the identified constraints / feasibility assessment as well as the review of financial opportunities provide the basis for identifying and developing appropriate strategies and targets. These should focus on the three key health financing functions: raising funds; pooling them; and using them to ensure that services are available. Likewise, proposed strategies and changes need to be assessed with respect to their financial implications as well as political and technical feasibility (see Actions 3 and 4).

ACTION 6: IMPLEMENTATION, INCLUDING ASSESSING ORGANIZATIONAL STRUCTURES AND RULES

Some countries will need to make only small changes in order to maintain achievements and existing institutions. For example legal and regulatory provisions or rules may simply need to adapt. Other countries will have to instigate reform, and establish new institutions and organizations. Sometimes, existing regulations might need to be reinforced or repealed, or new laws and regulations might be required.

The above mentioned OASIS approach pays ample attention to the institutional design and organizational set-up of a health financing system on which health financing performance is contingent. It assists in identifying whether and how the institutional design needs to be adapted or changed, and/or whether organizational capacity needs to be strengthened.

ACTION 7: MONITOR AND EVALUATE

Whether planning reforms that will lead to a system of universal coverage, engaged in the transition or already meeting their stated goals, decision-makers must be able to assess both their status and momentum. In order to do this they need a constant stream of accurate intelligence. Monitoring should focus on whether people have access to needed health services and/or risk financial hardship in paying for them - even though some of the information required for an accurate assessment may be difficult to obtain.

FURTHER READING:

1. Mathauer Inke & Guy Carrin (2010): The role of institutional design and organizational practice for health financing performance and universal coverage. Health Policy, doi:10.1016/j.healthpol.2010.09.013.
2. Mathauer, Inke & Guy Carrin (2010): OASIS User Manual. A tool for Health financing - Performance assessment - Options for improvement, Geneva: WHO, Department of Health Systems Financing.