

Strategic Purchasing for Primary Health Care

THINK WITH IT

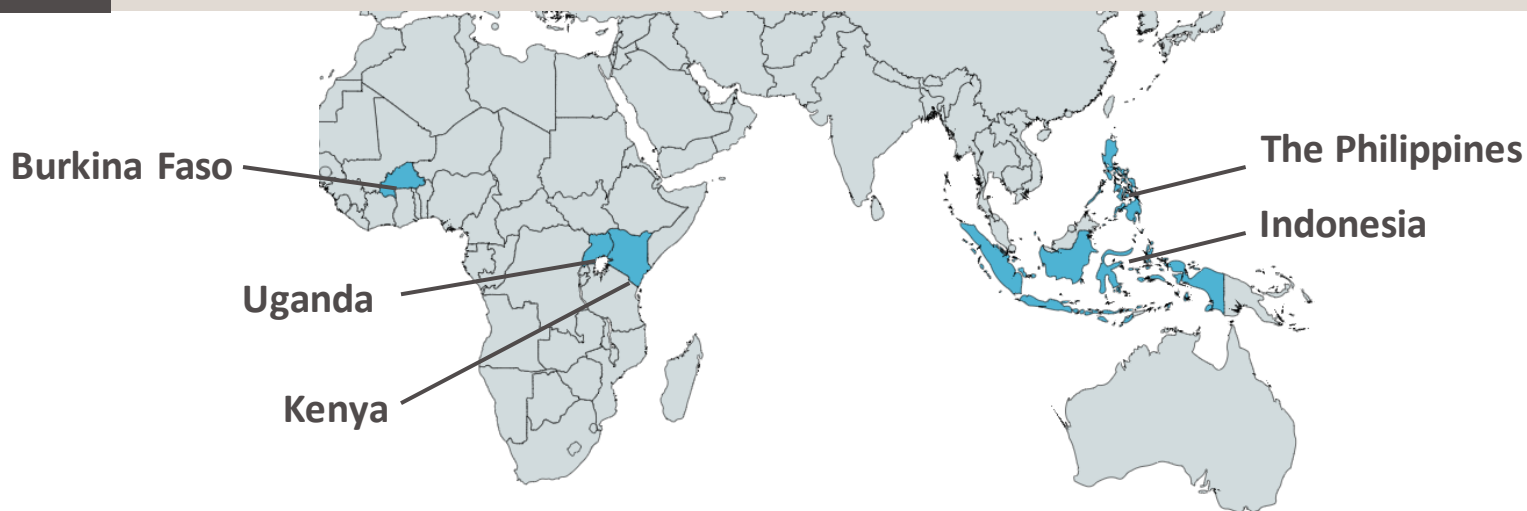
APRIL 2022

SP4PHC
Strategic Purchasing for
Primary Health Care

STRATEGIC PURCHASING FOR PRIMARY HEALTH CARE (SP4PHC)

Project overview

- An investment by the Bill & Melinda Gates Foundation (BMGF) implemented by ThinkWell with country learning partners
- Project duration from 2017 to mid-2022



Our Goal

- Leverage strategic purchasing to improve primary healthcare (PHC) delivery in 5 countries, with a focus on family planning (FP) and maternal, newborn and child health (MNCH)
- Facilitate learning on strategic purchasing for PHC, FP and MNCH – and the application of that learning to policy and practice – at the national and global levels



Key concepts



THINKING

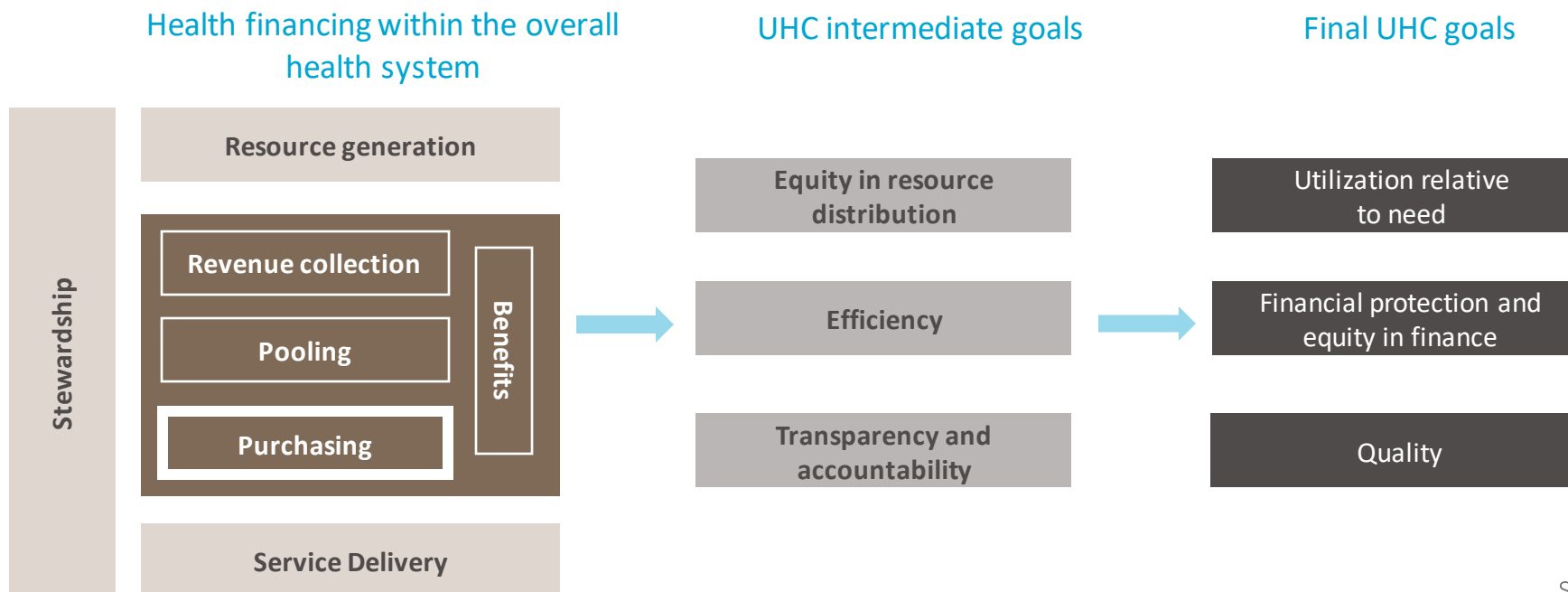
DEFINING PURCHASING

What is purchasing?

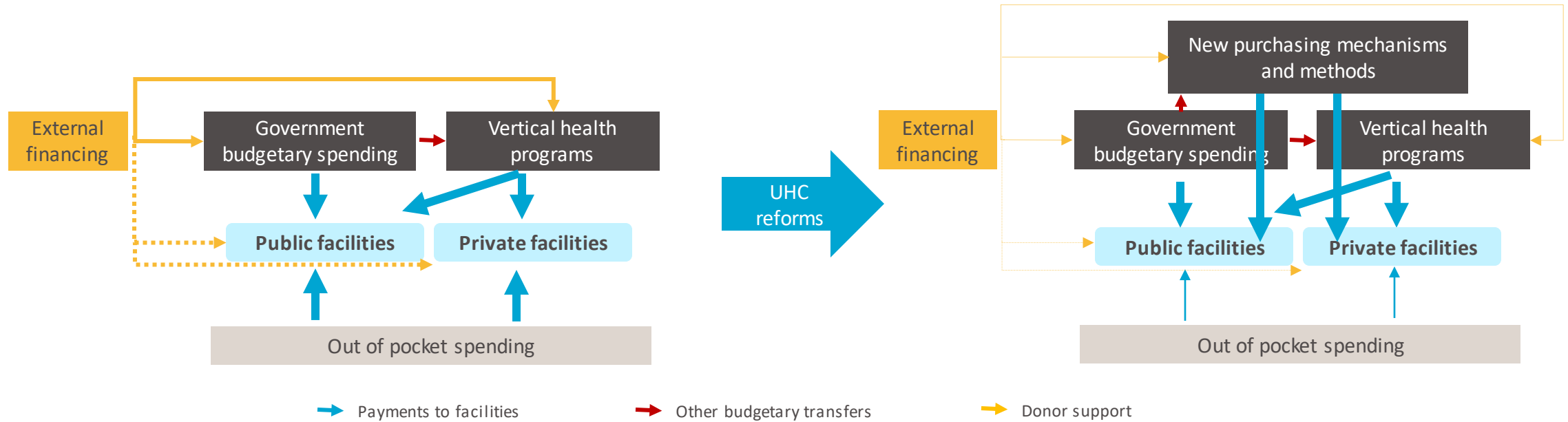
Purchasing refers to the allocation of pooled funds to providers of health services on behalf of a population [1].

What is strategic purchasing?

Purchasing is strategic if decisions about the allocation of funds is based on information about provider behavior and population health needs in order to maximize health system goals [2].



THE LINK TO UHC



Most LMICs in the post-colonial period set up large networks of public facilities and paid for service delivery through government budget allocations for salaries, commodities, etc. Key challenges with this arrangement:

- Weak public sector delivery as a result of staff absenteeism, stock-outs etc.
- Poor quality of care in public and private
- The poor face financial barriers to access

As countries develop and implement strategies to address these challenges and to achieve UHC, they are focusing on 3 inter-related objectives:

1. Mobilizing more resources for health
2. Reducing financial barriers to access and increasing financial protection
3. Using available funds optimally to achieve health system goals

Making purchasing more *strategic* is integral to the third objective of getting “more health for the money.” It can serve as a lever for:

- Improving service delivery in the public sector, then using public funds to purchase services from the private sector
- Increasing the share of spending for PHC/FP/MNCH

TYPES OF PURCHASING SCHEMES

Classifying purchasing schemes

Two models based on the institutional separation between the purchaser and the providers, and how payments are made [1]:

- **Integrated delivery:** where purchaser and provider belong to the same organization, and purchaser makes budgetary allocations to cover input costs of the providers
- **Contract-based:** purchaser is distinct from providers, and pays provider based on a contract

The range of purchasing approaches

Traditional schemes: public integrated delivery, private integrated delivery, government health insurance and private insurance

Other purchasing approaches and financing methods: performance-based financing, user fee reimbursement mechanisms, voucher programs, etc.

Purchasing approaches in SP4PHC countries

Integrated delivery	Contract-based
<ul style="list-style-type: none"> • Public-sector integrated delivery (all 5 project countries) • Private health-care management organizations (Philippines, Indonesia, Kenya) 	<ul style="list-style-type: none"> • Government health insurance (PhilHealth in Philippines, JKN in Indonesia, NHIF in Kenya) • Private health insurance (all 5 project countries) • Vouchers (Uganda) • Performance-based financing for facilities (Uganda and Burkina Faso) • User fee removal (Kenya and Burkina Faso)

SP4PHC focuses on purchasing schemes that are universal or target the poor, and cover PHC services including FP and MNCH.

[1] Preker and Harding 2003; World Health Report 2010

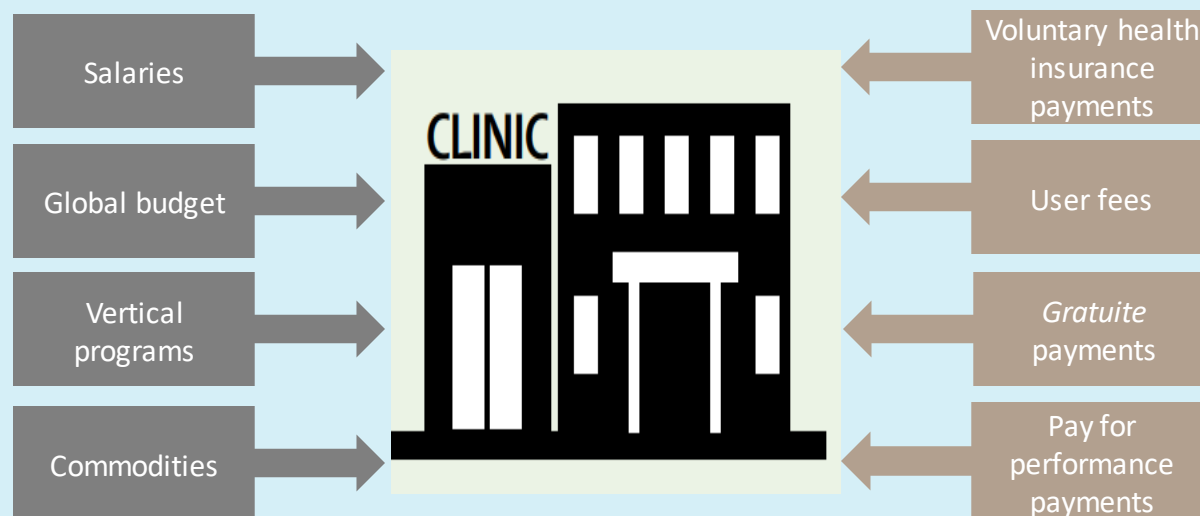
COHERENCE OF PURCHASING

The purchasing ecosystem


Most countries have multiple purchasers and purchasing schemes.

Even if there is one purchaser of choice or a particular scheme that is most relevant for PHC/FP/MNCH, taking a systems perspective to purchasing is important.

Multiple funding flows in Burkina Faso



- Given the mix of schemes, there are multiple resource flows to providers sending different signals for performance.
- Are these signals aligned? Are some signals getting lost in the noise?
- Are there way to make the flow of funds more efficient?



SP4PHC theory of change & theory of action



THINKING

FRAMEWORK FOR DESCRIBING PURCHASING: KEY ACTORS AND FUNCTIONS

Key governance functions:

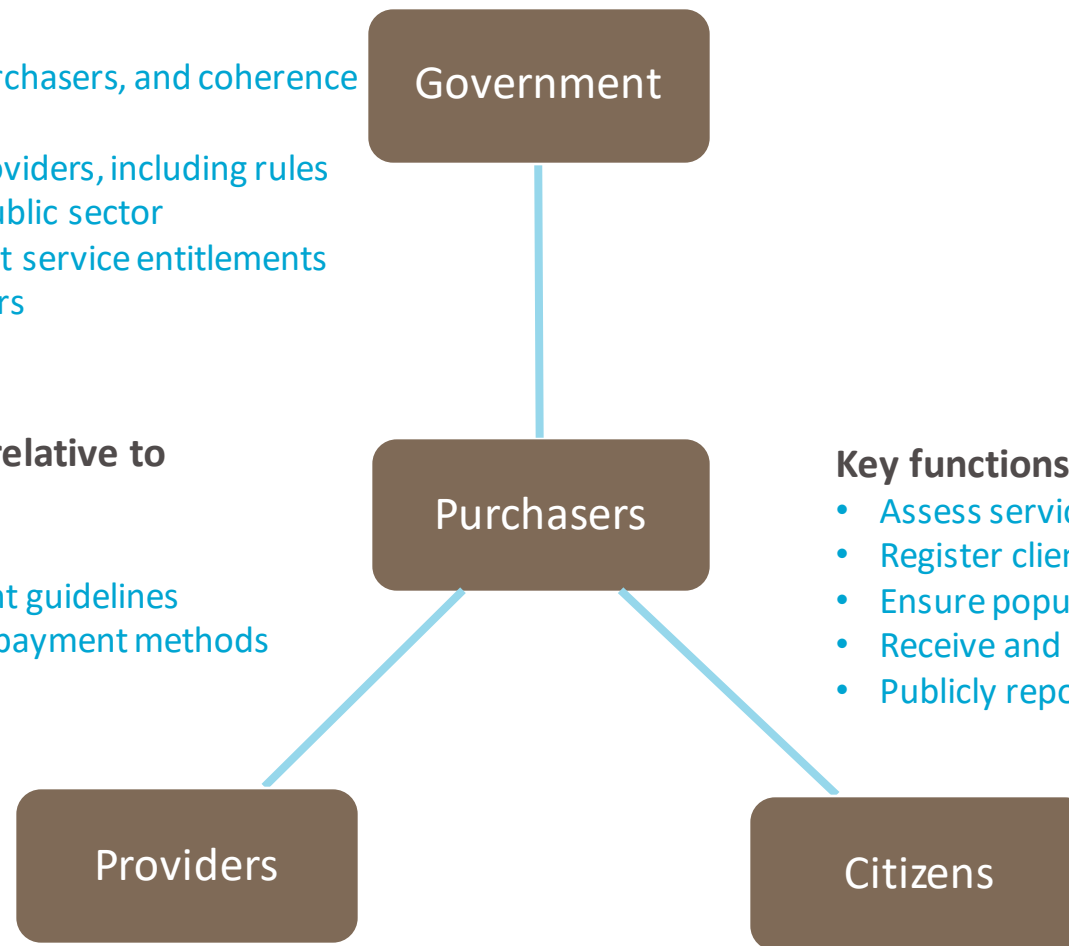
- Establish clear frameworks for purchasers, and coherence across them
- Establish clear frameworks for providers, including rules around facility autonomy in the public sector
- Ensure adequate financing to meet service entitlements
- Ensure accountability of purchasers

Key functions of the purchaser relative to providers:

- Select and contract providers
- Develop formularies and treatment guidelines
- Develop and implement provider payment methods
- Monitor provider performance

Key functions of the purchaser in relation to citizens:

- Assess service needs and preferences
- Register clients and inform them about their entitlement
- Ensure population can access services
- Receive and respond to complaints
- Publicly report on use of funds, performance, etc.



SP4PHC'S THEORY OF ACTION



ThinkWell consulted key stakeholders in each country to design tailored strategies

COUNTY-BASED TECHNICAL ASSISTANCE

Local teams, including technical experts embedded within key government institutions where appropriate, work to catalyze strategic purchasing reforms

POLICY DIALOGUE

Facilitate discussions between key stakeholders to identify current challenges, design potential solutions, and apply learnings to improve health policy and practice

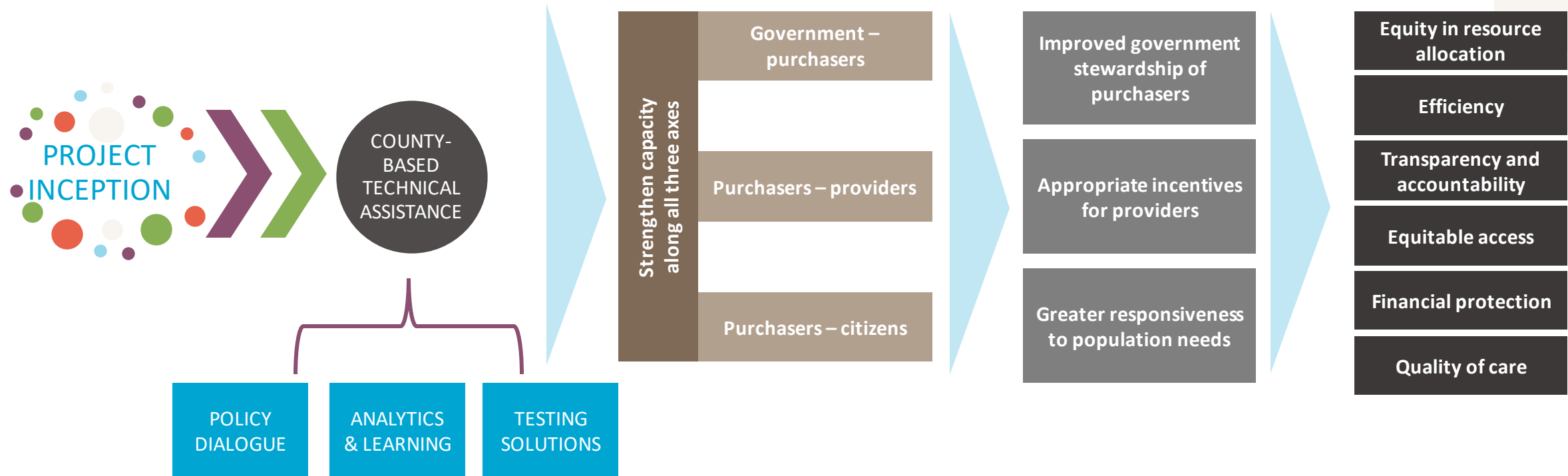
ANALYTICS AND LEARNING

Undertake implementation research in collaboration with local research partners, and co-create knowledge across project countries

TESTING SOLUTIONS

Support government institutions to design, test and implement strategic purchasing reforms

THEORY OF CHANGE



THANK YOU

BURKINA FASO

- Supported MOH improve implementation of gratuité policy for MNCH and scale up free FP
- Worked to build greater coherence between gratuité and other mechanisms (including GFF-funded program)

UGANDA

- Supported MOH develop a plan to integrate the GFF-funded RBF program into government financing arrangements, in keeping with existing PFM processes
- Enabled Kampala city authority develop a model for contracting private providers

KENYA

- Supported county governments enhance facility autonomy
- Improved implementation of the Linda Mama free maternal health program and the SDR pilot
- Supported implementation of GFF-funded RBF program
- Contributed to MOH planning for large-scale health reforms

PHILIPPINES

- Supported PhilHealth roll out a comprehensive benefit package
- Worked to enhance PhilHealth's value proposition for private providers
- Assisted DOH and two provincial governments implement new UHC law

INDONESIA

- Assisted MOH to facilitate discussions on reforms of the JKN benefits package
- Supported pilot testing of a new approach to contract and pay private midwives
- Analyzed the effect of JKN on FP uptake and out-of-pocket payments for FP



OUR COUNTRY LEADS

BURKINA FASO



Marie Jeanne Offosse

UGANDA



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KENYA



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INDONESIA



Pak Trihono





Monitoring, evaluation and learning (MEL) activities

PROJECT MONITORING, EVALUATION AND LEARNING ACTIVITIES



**Monitoring
country indicators**



**Curated learning
agenda**



Partnerships

COUNTRY FACT SHEETS



Monitoring

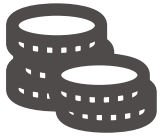


Learning
Agenda



Partnerships

Standard health and financing indicators



Track national indicators related to health spending, FP and MNCH

Purchasing landscape profiles



Provide an overview of the country purchasing landscape

Health purchasing indicators



Track performance of specific purchasers and purchasing schemes

KEY THEMES FOR THE LEARNING AGENDA



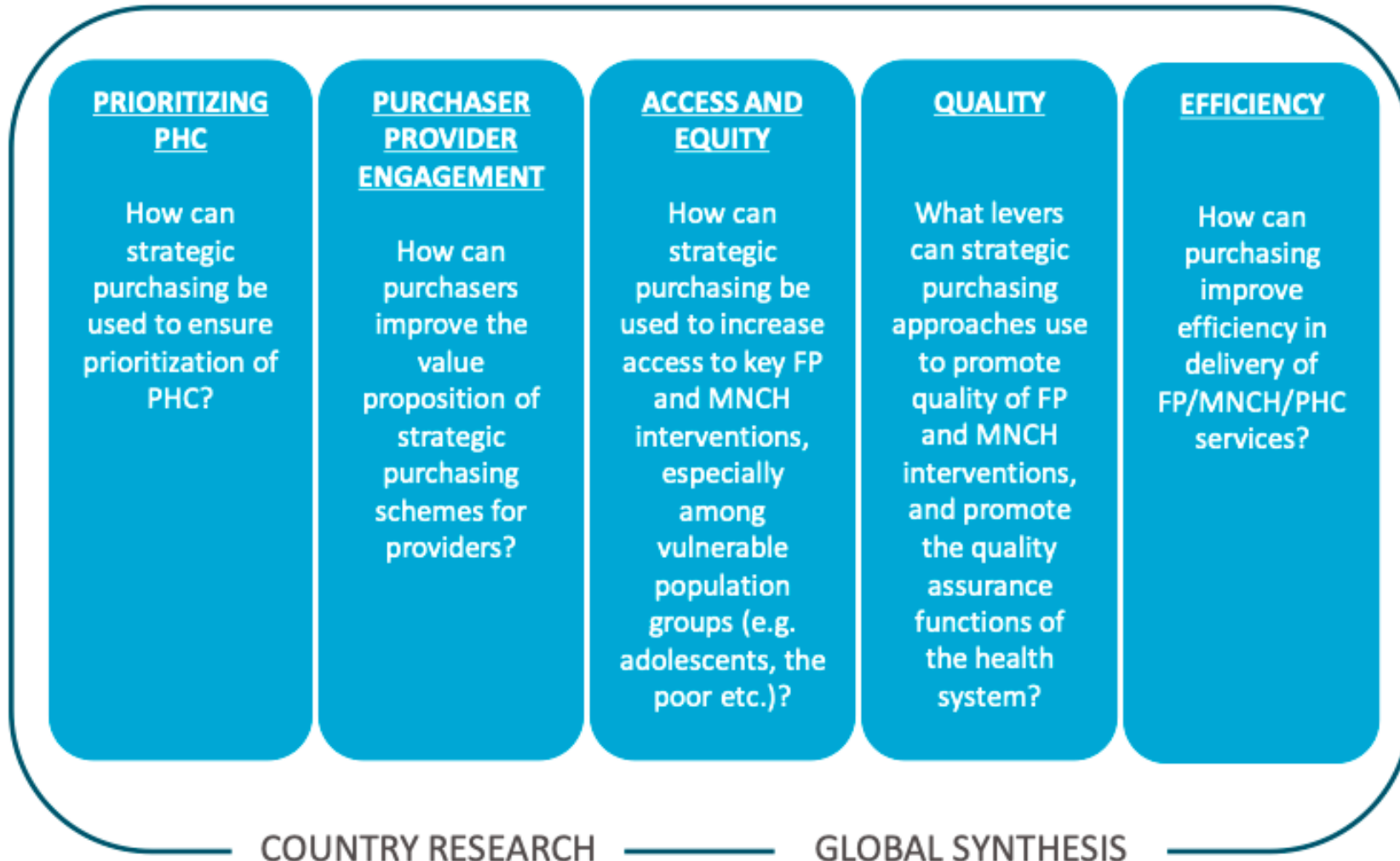
Monitoring



Learning
Agenda



Partnerships



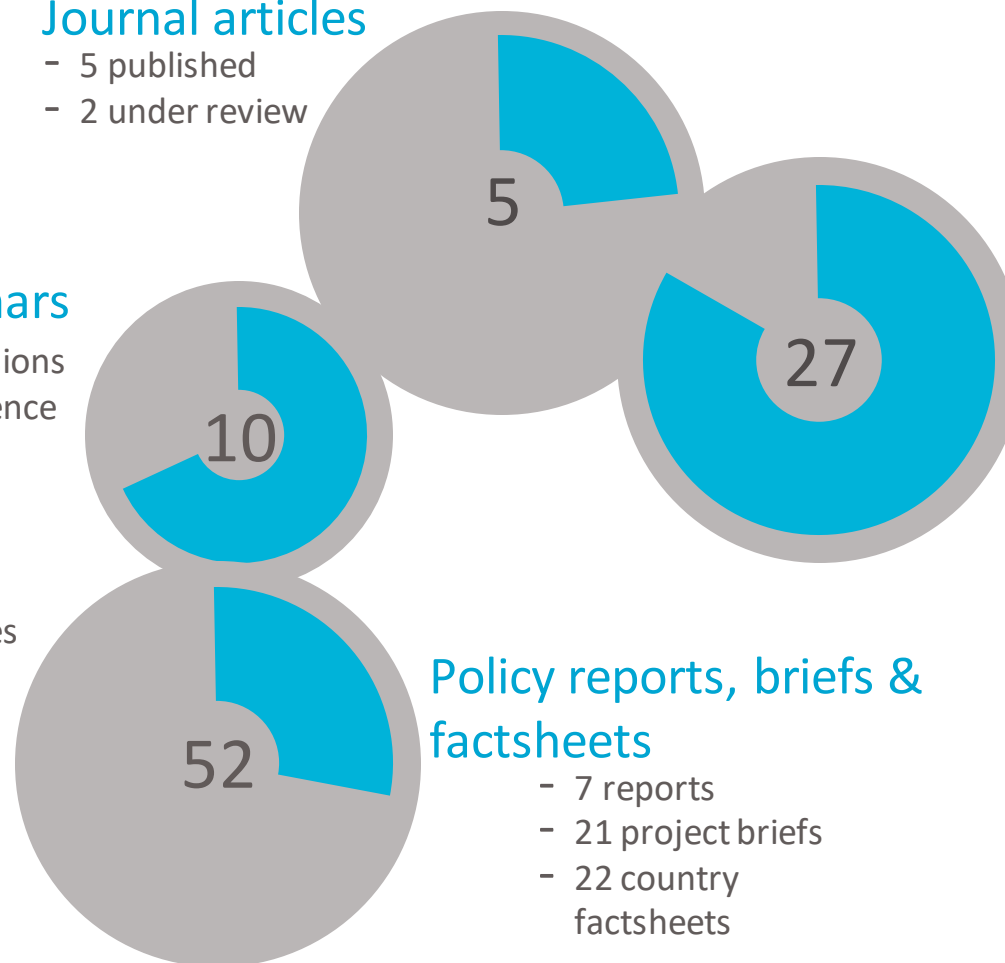
ACHIEVEMENTS TO DATE

Conferences sessions and webinars

- 3 Health Systems Research Symposia sessions
- 3 International Health Economics Conference organized sessions
- 2 organized sessions at the African Health Economics Association conference
- 2 project webinars
- 5 panels planned at upcoming conferences including the International Conference on Family Planning

Journal articles

- 5 published
- 2 under review



Policy reports, briefs & factsheets

- 7 reports
- 21 project briefs
- 22 country factsheets

Blog posts

- P4H
- HSG Collaborative
- SRHM
- BMJ Global

WORKING WITH PARTNERS AND OTHER INITIATIVES

CONTRACT

Sub-contract country-based learning institutions to undertake policy-oriented research and program analytics

COLLABORATE

Collaborate with partners and initiatives at both county and global levels to jointly implement learning activities and disseminate findings

CONVENE

Bring together stakeholders at the global and country levels and lead dialogue on key issues related to strategic purchasing for PHC/FP/MNCH

ENGAGE

Share information with global and country-based partners on an ad-hoc basis



Monitoring



Learning
Agenda



Partnerships



Adapting to COVID 19



OUR TEAMS HAVE BEEN SUPPORTING THE COVID-19 RESPONSE IN ALL 5 COUNTRIES

Burkina

- **Policy support:** help MoH to use the *gratuite* mechanism to channel more funds to dedicated COVID public facilities
- **Learning:** document how COVID response impacts health financing arrangements in the country to inform post-COVID planning for epidemics



Uganda

- **Operations support:** support KCCA with COVID response in Kampala
- **Communications:** roll out training developed by MOH and CDC for private providers
- **Learning:** with local learning partner, document how the response impacts health financing arrangements

Kenya

- **Operations support:** support Council of Governors coordinate the COVID response, as well as county-level activities in Isiolo, Makueni and Kilifi counties
- **Learning:** with local learning partner, explore how financing structures should be enhanced to improve readiness for epidemics

Indonesia

- **Analytics:** conduct costing analyses for rapid expansion of COVID-19 services (with HFA project)
- **Policy Support:** rapidly assess impact of response on routine RMNCH services, budgeting practices, BPJS-K purchasing etc
- **Learning:** document how the response impacts health financing systems to inform how Indonesia responds to epidemics in the future


Philippines

- **Policy support:** assist PhilHealth roll out new benefit packages for COVID; synthesize evidence to inform DOH policies and plans for scaling up testing, estimating and sourcing PPE, scaling up telemedicine, etc.
- **Operations support:** support Region 6 provider network in response activities; support DOH develop and roll out a system for recruiting and allocating health volunteers

COVID LEARNING INITIATIVE IN AFRICA

Learning Questions	Countries	Lead	Partners	Products
<ul style="list-style-type: none"> • How purchasing arrangements have been adapted to purchase COVID-19 services and how this has influenced the pandemic response and broader health system goals • How existing and adapted PFM arrangements for COVID-19 have influenced effectiveness in responding to the pandemic and broader health system resilience • To examine how COVID-19 and the country's response has affected the financing for RMNCAH services • To examine how COVID-19 has impacted health financing system and affected the plans for UHC 	Burkina Faso, Kenya, Uganda	KEMRI Wellcome Trust	Makerere University, RESADE	Country Case Studies & Synthesis Report by July 2022

WE HAVE BEEN WRITING ABOUT WHAT WE ARE LEARNING




WHY? HOW? WHERE? WHO? BLOG NEWS&EVENTS SIGN UP Log in Cont

11 May 2020

Coherent health financing for the COVID-19 response: a perspective from the Philippines

MAKING PURCHASING FIT FOR PURPOSE

In the Philippines, the COVID-19 response has called for rapid adaptation of **purchasing arrangements**. In early 2019, the Philippines passed a Universal Health Care (UHC) Law that revises the national health insurance agency.




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05 May 2020

RT @MoritzPiatti: In Kenya, all funds collected by public facilities are to be remitted to the county government. See how this affects serv...

05 May 2020

New blog from @ThinkWellGlobal and @KEMRI_Wellcome on our P4H digital platform.




WHY? HOW? WHERE? WHO? BLOG NEWS&EVENTS SIGN UP Log in Contact EN FR

03 May 2020

There is a global pandemic – and we still lack fuel and airtime?

Governments around the world are **scrambling** to get their hands on personal protective equipment, test kits, ventilators and oxygen. But on the frontlines of service delivery in Kenya, we are also hearing about local health officials and facility managers needing money for more mundane things like fuel for ambulances and airtime for mobile phone communication to coordinate the response. Even as the Government of



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New blog from @ThinkWellGlobal and @KEMRI_Wellcome on our P4H digital platform.

Learn more here: <https://thinkwell.global/projects/sp4phc/sp4phc-covid-19-response/>

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