[INDEX]

[A]
Abuja Declaration (2001) xii, 25
Access to health services, financial 9–11
barriers to x, 41–42, 45, 51–52
removing barriers xiv–xvi, 44–51, 52, 53, 87–88
situation analysis 92–93
see also Coverage, health care
Accommodation costs 51–52, 88
Accra Agenda for Action (2008) xxi, 7, 35
Africa, sub-Saharan xii–xiii, 26, 46, 66, 68
Ageing, population 23, 27
Aid, international see Development assistance
Air-ticket levy 27, 28
Airport departure tax 29
Alcohol
control 71
xercise taxes xiii, 29, 30–31
Alma Ata Declaration ix, 13
Antibiotics 62, 65
Artesunate 64
Australia 29, 30, 71, 79

[B]
Bamako Initiative (1987) 44
Bangladesh 48, 94
Bank account transaction tax 29
Bankruptcy, personal 9
Birth attendants, skilled x, 10, 61, 62, 78–79
Bonds, financial
diaspora xiii, 29
guaranteed by donor countries 28, 100
Bonus incentive schemes 75
Botswana 27
Branded medicines 62–64
Brazil 29, 67
Burundi 41, 44

[C]
Caesarean section 73, 74
Cambodia xi, 44–45
Capitation xvii, 74
Case-based payments xvii, 74–75
Catastrophic health spending x, 5, 9, 41–42, 43, 46
Cervical cancer 71
Checklists 68
Child health care 44, 75–76
Chile 24, 27
China 7, 101
Ciprofloxacin 62, 64
Co-payments 5, 44, 74
Commission on Macroeconomics and Health 22
Commission on Social Determinants of Health 13, 79

[D]
Deductibles 5
Democratic Republic of the Congo 43
Development assistance (international aid) xiii, xxi, 31–35
donors see Donors, international
fragmented delivery 78, 101
predictability 34–35, 100
see also External assistance
Diagnostic-related groups (DRGs) xvii–xviii, 74–75
Diaspora bonds xiii, 29
Diphtheria–tetanus–pertussis vaccine (DPT3) 10, 78–79
Direct payments (out-of-pocket payments) xi, 4, 5, 52–53
abolishing/reducing xiv, 7–8, 45–47, 53, 87
additional health-care costs 51–52
alternative resources xiv, 46–47
as cost-containment measure 44
exemptions from 44–45
financial hardship due to x, 5, 9, 41–42
over-servicing risk 73–75, 90
percent of health expenditure 42, 43, 53
prevalence 41, 42
problems with 5, 41–44
unofficial (informal) 42, 45, 46
Donors, international 6–7, 25–26
agenda for xxi, 99–101
failure to meet commitments xiii, 31–32, 33, 100
guaranteed bonds 28, 100
inefficiencies created by 66, 101
Drug-abuse programmes 78

[E]
Economic downturn/recession 33, 43–44
Efficiency xi, xvi–xviii, 61–80, 96, 97
[F]
Fee-for-service payments xvii, 73–74, 90
Fees, user see Direct payments
Financial assessment 93–94
Financial hardship x, 5, 9, 41–42
Financial reporting systems 99
Financial risk protection xiv–xvi, 7–8, 11–12, 47–51
establishing 88–91
monitoring 98, 99
situation analysis 92–93
Financial transaction tax 28–30
Foods, taxes on unhealthy 29
Foreign exchange transaction levy xiii, 28, 29
Fragmentation xv, 47, 77–78, 89–90, 101
France 27, 44, 75
Franchised products/services 29
Fraud 63, 69

[H]
Health equity funds 45
Health financing
decision cycle xix–xx, 91–99
three critical areas 3–4
Health for All principle ix, 13
Health information systems 99
Health insurance 6, 7
community 48, 89
compulsory xv, 87, 88–89
pooling with general tax revenues 50–51
provider payment schemes 73–74
risk equalization 47, 49, 89
subsidized premiums xv, 50, 51
see also Pooling schemes
Health workers 45
performance-based incentives 76
productivity and performance 63, 66–67, 72
remuneration 43, 44–45, 73, 75
HIV/AIDS 27, 33, 64–65, 78
Hospital-acquired infections 68
Hospitals
improving efficiency 63, 67–68, 72
payment systems xvii–xviii, 73–75
Hypothesized taxes 30

[I]
Implementation 95–96
Impoverishment x, 5, 9, 41, 42, 43
Incentives xvii–xviii, 72–75, 90
performance-based 75–76
pervasive 73, 76
Income-based exemption schemes 44
Income replacement x, 11–12
India xiii, 28, 29, 48
Indigenous populations xviii, 79
Inefficiency xi, 61
causes of xvii, 62, 63
see also Efficiency
Inequalities
coverage x, xviii, 9–10, 11
generated by direct payments 42
quality of care 10–11
redressing 78–79
Inflation 32
Informal payments 42, 45, 46
Informal sector 26, 48–49
Innovative financing for health xiii, xxi, 27–31, 35, 87–88, 100
International Financing Facility for Immunization 28, 35
International Health Partnership xxi, 6
International Labour Organization (ILO) x, 11–12
Interventions, mix/levels 63, 69–70, 71, 72
Investigations, overuse 63, 65
Kenya 5, 42, 45
Korea, Republic of 8, 30, 47, 49
Kyrgyzstan 45, 77–78

Leakages, health system 61, 63, 69, 72
Lebanon 72, 73
Legislation 95

Magnetic resonance imaging (MRI) scanners 65
Malaria 27, 33, 64–65, 71
MassiveGood solidarity levy xxi, 27
Maternal and child care 44, 75–76, 79
Maternity leave 11
Means-testing 44
Medical errors 63, 68–69
Medical technologies 65–66
Medicare (USA) 66, 68–69, 70, 75

Medicines
appropriate use 63, 65, 73
corrupt distribution practices 69
potential efficiency savings xvii, 72
quality control 63, 64–65
unnecessary spending on 62–64

Medicines Transparency Alliance 69
Mental health care 71
Mexico 8, 49, 52
Microinsurance 48, 89
Migrants xviii, 79
Millennium Development Goals (MDGs) xii, 33
Millennium Foundation on Innovative Financing for Health xxi, 27, 35

Mixed-payment systems 75
Mobile phones 29, 30
Moldova, Republic of 50, 51
Monitoring 97–99

Netherlands xv, 47
Never-events approach 68–69
Nigeria 71
Norway 11, 21

Official development assistance (ODA) xiii, 32, 33–35, 100
Organisation for Economic Co-operation and Development

(OECD) countries
development assistance 31–32, 35, 100
direct payments 47
health-care expenditure 3, 4, 21
medical technologies 65
tax collection 26

Organizational structures and rules 95–96
Out-of-pocket payments see Direct payments
Over-servicing, preventing xvii–xviii, 73–75, 90

Pakistan 30, 45
Paris Declaration on Aid Effectiveness xxi, 7, 34, 53, 78, 100
Performance-incentive schemes 75–76
Pharmaceutical companies 30

Prepayment xiv–xvi, 4, 6, 47–51, 52–53
choices and trade-offs 12
consolidation 47, 88–89
fragmentation xv, 47, 77–78
technical decisions 96

Poor people
access to services xviii, 9–11, 41–42
exemption from user fees 44–45
inclusion in pooling schemes 49–51
quality of care 10–11
subsidizing xv, 50, 51, 88

Poverty, propulsion into x, 5, 9, 41, 42, 43
Prepayment xiv–xvi, 4, 6, 47, 52–53, 77
compulsory xv, 87, 88–89
progress towards 8
see also Pooling schemes
Prescribing, efficient 63, 65
Preventive interventions 70, 71, 90
Primary care 52, 74
Private health sector 51, 52, 68

Providers
payment methods xvii–xviii, 73–75, 90
performance-based incentives 75–76

Public facilities
abolition of user fees 45–46
direct payments to 51, 52
relative efficiency 68

Purchasing 4
passive xviii, 76–77
strategic (active) xviii, 76–77, 90

Quality control, medicines 63, 64–65
Quality of government services 26–27
Quality of health care 10–11, 63
[R]
Renal replacement therapy 22
Resources for health, financial
allocated government spending 23–26
alternatives to direct payments 46–47
efficient collection xii, 26–27, 96
efficient use xi, xvi–xviii, 61–80, 89–91
equitable collection 88, 96
equitable use 89–91, 97
external assistance 31–35
innovative domestic sources xiii, 26–31, 87–88
limitations xi, 21
methods of raising xii–xiii, 21, 23–35
mixed sources 50
raising sufficient xii–xiii, 21–35, 96, 98
required for universal coverage 22–23
Results-based financing 75–76
Revenue collection xii, 4
see also Taxes
Rich people xviii, 10, 11
Risk equalization 47, 49, 89
Rural areas 45–46, 51–52, 70
Rwanda xxi, 6, 21, 101

[S]
Senegal 5, 44
Sick leave, paid 11
Sickness funds 48
Sin taxes xiii, 30
Situation analysis 92–93
Social protection/support x, 11–12
Social solidarity 13–14
Solidarity taxes xiii, 28, 29
Soviet Union, former 30–31, 45
Strategies for change, developing 95, 96–97
Switzerland xv, 21, 47, 68

[T]
Tanzania, United Republic of xii, 67
Targeted approach, universal coverage 13
Targets for change, developing 95, 96–97
Taskforce on Innovative International Financing for Health Systems xiii, 22–23, 28
Taxes 6
collection efficiency xii, 26–27
hypothesized (earmarked) 30
innovative sources xiii, 27–31, 35
pooling with insurance contributions 50–51
Technical cooperation 32
Technologies, medical 65–66
Thailand 3, 4, 22, 48–49, 71, 102

[U]
Ukraine 48
Unhealthy foods, taxes on 29
Unitaid 27
United Kingdom 21, 67, 75
United States (USA) 21
health financing reform 7, 101
inefficiencies 61, 62, 65, 66, 68–69, 70
personal bankruptcies 9
Universal coverage ix–x, 3
agenda for action xix, 87–102
costs 22–23
current progress towards x, xi, 7–8
different paths towards 12–13
preparing to move towards 13–14
sustaining existing gains 8–9
targeted approach 13
three dimensions to consider xv–xvi, 12
two key elements 6, 9–12

[V]
Value added tax (VAT) 27
Viet Nam xxi, 8, 101
Vision for the future, establishing 91–92
Vouchers xvi, 52

[W]
Waiting times 12
Waste xi, xvi–xviii, 61, 63, 69
WHO-CHOICE 70, 74
Women xviii, 42
World Health Organization (WHO)
Framework Convention on Tobacco Control 30
quality control for medicines 64–65
Safe Surgery Saves Lives initiative 68

[Z]
Zambia 45–46, 68, 71