UHC and health system strengthening; opportunities for rehabilitation

Packages of Care and Financing for UHC

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Second Global Rehabilitation 2030 Meeting
Universal Health Coverage (UHC)

The goal of universal health coverage is to ensure that all people obtain the health services they need without suffering financial hardship when paying for them.

Resources are scarce in all settings and the setting of priorities is indispensable.

Three dimensions to consider when moving towards universal coverage.
The package of services provided under UHC will expand over time as resources become available.

This relies on: a strong, efficient, well-run health system that meets priority health needs, including:

- **Access to** essential medicines and other health technologies
- **Sufficient capacity** for well-trained, motivated health workers to provide the services needed
- A financing system that considers **affordability** and has mechanisms to avoid financial hardship
System challenges to reach 2030 goals

What will meeting the Health SDGs cost?

$3.9 trillion
- that's an extra $58 per person, per year by 2030

Countries are facing a financing gap of up to $686 billion
to achieve the SDG health targets

Rehabilitation: was not considered in the WHO SDG price tag for lack of data.
System investments required to advance towards the 2030 goals

Ensuring that Rehabilitation is considered in a broader UHC context, and for UHC planning to fully consider Rehabilitation interventions.

WHO Recommended Interventions on Rehabilitation:

will be included in the forthcoming **UHC Intervention Repository** = an interactive website where countries and partners can learn about WHO-recommended interventions by delivery platform, life course stage, target population, etc.
In reality... priorities are set
Priority setting process for Health Packages: considerations & criteria

**Technical**
- Evidence on burden of disease
- Clinical effectiveness
- Cost & cost-effectiveness
- Budget impact

**Political**
- Electoral, populism
- Fiscal concerns / short term affordability
- Long-term sustainability
- Provider concerns
- Societal values
- Citizens voice & concerns
- Fairness and equity
- Life-saving obligation

**Ethical**
- Functioning?

**Dialogue**
Table 35. Criteria taken into account in the definition of the benefit basket (Q73)

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Criteria commonly used in OECD countries:

- Clinical effectiveness
- Cost-effectiveness
- Affordability or budget impact
Making the «Investment Case»

Quantifying the inputs and outputs

Giving an economic value to:
- costs
- benefits

- Need for assessing functioning gains, health gains and societal gains when introducing packages of care for return on investment analyses.
Example: NCD investment case
Framing the country dialogue for UHC

The UHC package will guarantee access to High Priority interventions.

Everything else

Essential

High priority
- Build the evidence base: efficacy, safety, health impact, resource requirements, costs, cost-effectiveness, financial protection, *functioning*

- Facilitate contextualisation of data to country settings: using country data on burden and prices

- Bring stakeholders together (interest groups and citizens)
- Discuss evidence in a deliberative manner
- Drive transparency and accountability

- Political function across institutions
- Within a clearly defined legal framework
- National Health Assembly as the main political structure
Thank You