Abstract Information

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Strategies to develop an essential healthcare package: Evidence from international experience

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Abstract:
Objectives: To describe the criteria and procedure for defining an essential healthcare package in the developed and developing countries, background and driver, and how these countries achieve universal coverage by develop an essential healthcare package. Methods: A systematic review was used. The resources we searched included electronic databases, websites of health institutions, grey literature databases and search engine Google. Any report of implemented strategy to develop an essential healthcare package was included. Pre-designed data extraction form was used for collecting strategies and study method of included studies. Then the extracted information was analyzed and described. Result: 166 studies covering 72 countries were included, most of which were studies in the middle and low countries. In terms of study objectives, many studies aim to describe strategies, while few studies are to evaluate effectiveness of strategies. Many countries defined the essential healthcare package as a package of basic healthcare provided to everyone by public financing. In terms of health priorities, public health and very limited clinical services were included in the package in many low income countries, very comprehensive services with or without clear definition in the high income countries, while both guaranteed package(for everyone)and benefit package (for insurants) exist in some middle income countries. In terms of the criteria, need, social value and equity are considered most important in those high income countries, while cost-effectiveness, burden of diseases are considered firstly in determining a basic package in the middle or low income countries. Some countries failed to define a package because of two many criteria or paying more attention to cost-effectiveness. In terms of financing options, tax funding or mandatory social health insurance both have some advantages and disadvantages. In terms of allocation options, purchasing service is preferred. In terms of payment options, fee for service, salary and capitation are better than others for purchasing public health, while mix of two payment methods is very popular for purchasing clinical service. Public, private sector or NGO could provide the essential healthcare. The government regulates them by legislation, government financing, improving incentives for providers. Conclusions: An appropriate package should be defined according to both technique criteria and social welfare criteria, considering each country's healthcare system and market structure, characteristics of the demander and provider, capacity of government’s regulation. Strategies to develop a package in terms of financing, delivery and regulation options depends on economic level, history and social culture, most important of all, the governing party's will and public demands.