How Can Health Accounts Inform Health Sector Investments? Lessons from Country Applications
Experts

Presenters

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Moderator

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Outline

- Overview of Health Accounts
- Using Health Accounts to inform Resource Mobilization
- Using Health Accounts to inform Pooling
- Using Health Accounts to inform Purchasing
What are Health Accounts?

- HA are based on the **System of Health Accounts** framework (SHA 2011)
- Tool that tracks both the **magnitude** and **flow** of resources in the health sector
- Uses a **comprehensive approach**, looking at TOTAL resource flows to the sector
  - public, private, and donor contributions
- Uses a **standard set of tables** to organize flow of resources in an easy-to-understand manner
- Provides room for countries to incorporate their **country-specific categories** for looking at the spending breakdown (sub-classification)
Countries Conducting HA By Region: 38 African countries; 9 American; 11 Middle Eastern; 10 European; 16 Asian
Health Accounts provides snapshots of the three health financing functions:

- **How are resources RAISED?**
  - Revenues of financing schemes (FS)
  - Financing schemes (HF)

- **HOW funds are managed?**
  - Financing agents (FA)
  - Health providers (HP)

- **WHO manages funds?**
  - Financing schemes (HF)

- **Who DELIVERS health goods and services?**
  - Functions (HC)

- **What INPUTS are consumed in the delivery of health services?**
  - Factors of provision (FP)

- **What TYPE of services are delivered?**
  - Beneficiaries

- **What are the population CHARACTERISTICS?**
  - RAISING REVENUE FOR HEALTH
  - MANAGING/POOLING RESOURCES
  - PURCHASING SERVICES
HEALTH FINANCING FUNCTION #1: RESOURCE MOBILIZATION
Resource Mobilization: How sustainable is financing for health?

Share of Government Spending as % of Total Health Spending

Source: National Health Accounts reports
India: Health Accounts and the establishment of National Rural Health Mission

- India’s 2004-05 HA showed low public spending for health compared with high OOP payment
- Led to the establishment of the National Rural Health Mission to increase public financing for health
- Additional $3.3 billion was invested in the health sector

![National Rural Health Mission expenditure chart](chart.png)

Source: Ministry of Health and Family Welfare, Govt of India
Ethiopia: Revenue retention at health-facility level

- HA highlighted low investments in health and led to push to increase resources for health
- Government spending on health (as a proportion of GGE) increased from 5% to 5.6% between 2007/08 and 2010/11.
- Revenue retention policy enabled facilities to keep and reinvest user fees in the facility
Ethiopia: Revenue retention at health-facility level

BEFORE

AFTER
Resource Mobilization: Is health funding sufficient to achieve international benchmarks?

Per capita spending (USD)

Essential Package of Health Services ($60)

Source: National Health Accounts reports
HEALTH FINANCING FUNCTION #2: RISK POOLING
What are the opportunities to increase pooling of health resources?

Financing scheme spending by country

Source: Countries National Health Accounts reports
Are households incurring catastrophic spending?

OOP spending as % of total health spending

Source: National Health Accounts reports
Indonesia: tracking progress towards UHC for 250 million people

- Pro-poor insurance scheme (Jamkesmas) has been expanding population coverage and benefits
- National health insurance (JKN) has combined 5 insurance schemes to become the primary mechanisms for achieving UHC
- Use of Health Accounts to measure progress of JKN

![Graph showing out-of-pocket spending as % of total health expenditure from 2010 to 2013, with values 46.7%, 46.9%, 44.9%, and 43.8%, respectively. Source: National Health Accounts reports.]

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Egypt has been expanding its National Health Insurance scheme to provide financial risk protection to its population. Egypt used HA with coverage data to assess the effectiveness of health insurance schemes.
HEALTH FINANCING FUNCTION #3: PURCHASING
Does spending respond to the disease burden?
  - Use of spending, disease burden data, and costing data

Is spending aligned with national priorities?

Are there opportunities to increase the efficiency of spending on inputs?
  - Spending data can be compared with output and outcome data to
    - Identify areas of concern e.g. potential efficiency challenges
    - Compare spending and health performance with peer countries
Namibia: Using HA to reallocate resources to disease burden

- Reproductive health is stated-priority for Namibia in order to stop increasing trend of maternal mortality
- 2008/09 Health Accounts: 10% of spending on RH vs. 29% for HIV/AIDS
- Using Health Accounts for greater advocacy led to 450% increase in spending on RH (2012/13 Health Accounts)
Caribbean: Using Health Accounts to reallocate resources to national priorities

- Prevention spending = 3% of spending in Barbados (2012-13 HA) and 4% in Dominica (2011-12 HA)
- NCDs account for approx. 80% of deaths
- Treatment of increasing burden of NCDs is unsustainable → prevention is crucial
- In 2015, both countries introduced 10% excise tax for sugary drinks (Barbados, Dominica) and sugary foods (Dominica)
- Revenues raised will be allocated to health sector, including health prevention and promotion
Using health spending and output data to inform efficiency

Maternal health spending per capita vs. % institutional deliveries

FP spending per capita vs. % FP needs met

Source: National Health Accounts reports, DHS, WHO
Q&A

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Resources: www.hfgproject.org

Briefs

- Follow the Money: Making the Most of Limited Health Resources
- Policy Primer: Using Health Accounts to End Preventable Child and Maternal Deaths
- Production and Use of Health Accounts in India: What Can We Learn from the Experience so Far?
- System of Health Accounts 2011: What is SHA 2011 and How Are SHA 2011 Data Produced and Used?
- System of Health Accounts (2011) and Health Satellite Accounts (2005): Comparison of Approaches
- Tracking Urban Health Expenditures – Preliminary Results from Secondary Analysis of Bangladesh National Health Account
- Understanding Health Accounts: A Primer for Policymakers

Health Accounts Reports

- Comptes de la Sante au Burundi: 2012-2013
- Dominica 2010-2011 National Health Accounts and HIV Subaccounts
- Namibia 2012-13 Health Accounts Report
- Saint Kitts and Nevis 2011 National Health Accounts and HIV Subaccounts

Questions? Email us at: hfgproject@abtassoc.com.
Thank You!

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