

# AGENDA

## Health Financing Strategy Workshop 4: 2<sup>nd</sup>-4<sup>th</sup> December 2013, White Sands - Dar es Salaam

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### *Background*

Tanzania is entering a new phase of health financing reforms based on the reforms undertaken since the early 1990's.

In 2007, the Government of Tanzania adopted a *Health Policy* with the policy vision "to improve the health and well being of all Tanzanians with a focus on those most at risk [...]". This vision remains still valid, and the GOT is committed to moving towards *Universal Health Coverage (UHC)* and to ensure that all citizens have access to quality services and are protected from financial risk. As part of *the Health Sector Strategic Plan III*, a decision was taken to develop a Health Financing Strategy to ensure that this vision would become reality.

Oversight for the development of the strategy has been given to an Inter-ministerial Steering Committee (ISC), comprised of key ministries and departments, to ensure that proposed reforms are comprehensive, accepted and supported by all stakeholders, and implemented with the support of all stakeholders. To achieve this aim, the ISC has identified key areas for reforms and requested several reports to inform the development of the strategy. These are:

1. **Insurance Market Structure: options for the Social and Private Health Insurance architecture;**
2. **Minimum Benefit Package(s): options to sustainably structure access to benefits;**
3. **Inclusion of poor & vulnerable: options for identification and financing of services for this group;**
4. **CHF reforms: options for the re-design of the CHF system;**
5. **Performance-based financing: options for linking allocations to performance of service providers;**
6. **Resources Allocation: options for improving the equity targeting of (esp. budget) resources;**
7. **Public Financial Management: options for improving accountability and timely availability of funds;**
8. **PPP: options strengthening equitable funding from the private sector;**
9. **Fiscal Space: options for increasing public financing for health;**

**In addition** to the 9 key areas identified by the ISC, the Ministry of health and Social Welfare (MOHSW) has now identified additional information needs in formulating a coherent health financing strategy. Thus it commissioned two additional studies on **the Institutional and Organisational Assessment of its current Social Health Insurance System and on Provider Autonomy Options.**

The different studies will have largely rendered results by mid-November. These results and recommendations will have to be reviewed and consolidated further by the HCFC in order to provide advise on the HFS development to the ISC. Furthermore as the HFS is being written, the strategic interventions need to be defined based on the option paper recommendations. In order to achieve these tasks **a 3-day HCFC Working Retreat is proposed to take place at White Sands in Dar es Salaam, as 4<sup>th</sup> Workshop in a series of HFS Options Workshops.**

## Scope

The scope of the 3-day retreat is to consolidate available evidence and study results to better inform the ISC on different HF design options and to develop a proposal of strategic interventions for the HF Strategy.

## Objectives and tasks

The overall objective of the Retreat is to:

1. Consolidate the information, recommendation and options provided by the different HF Option Papers and supporting studies in order to help inform the design of the future health financing model for Tanzania and
2. Jointly elaborate relevant strategic interventions for the HFS oriented by/ based on the different study recommendations

Session	Monday 2 <sup>nd</sup> of December 2013
09:00-09:30	<b>Arrival and Registration (plus Tea and Coffee)</b>
09:30-11:00	<p><b>Introduction</b>  <b>Session 1: Opening and Introduction to the workshop</b>            - Mariam Ally, MOHSW</p> <p><b>Session 2: Introduction to achieving UHC through Health Financing</b>            - WHO: Sheila O'Dougherty and Priyanka Saksena</p> <ul style="list-style-type: none"> <li>• International principles and experiences</li> <li>• Innovation potentials in resources generation, purchasing health services and pooling risk/ funds</li> </ul>
11:00-12:30	<p><b>Session 3: Focusing on 3 HIM Options (as per ISC selection) and Introduction to group work</b>            - Nina Siegert, P4H</p> <p>At the end of this session participants</p> <ul style="list-style-type: none"> <li>• recall the main characteristics of the different HIM</li> <li>• form groups for HIM working sessions</li> </ul>
12:30-13:00	<b>LUNCH BREAK</b>
13:30-15:30	<p><b>Session 4: Group work on HIM continues</b></p> <p>The group work will enable the participants to:</p> <ul style="list-style-type: none"> <li>• Review the main characteristics of the allocated options in relation to the 3 pillars of HF (resources allocation, pooling and purchasing) as well</li> </ul>

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	<p>as in consideration of governance/ stewardship aspects</p> <ul style="list-style-type: none"> <li>Assess pros and cons and feasibility aspects of the allocated options</li> </ul> <p><i>This exercise requires taking into account recommendations from the HI Regulatory Study, Institutional Assessment, Provider Autonomy and Allocation Formular recommendations</i></p>
15:30-15:45	<b>Tea Break</b>
15:45-17:00	<p><b>Session 5: Group Work continues</b></p> <p>Adding considerations for MBP to the HIM Options</p> <ul style="list-style-type: none"> <li>Discuss how an MBP can be embedded into the different HIM-CHF structures</li> <li>Discuss preferred modalities for an MBP</li> <li>Public Health Package included or dealt with separately</li> <li>Disease vs service oriented package</li> <li>MBP as legal entitlement, away from provision orientation to needs based/ individual orientation etc.</li> </ul> <p><i>taking reference to the MBP study and the recommendations regarding MBP in the HIM paper and Institutional Assessment</i></p>
17:00-17:30	<b>Wrap-up and remark, observations by WHO experts</b>

Session	Tuesday 3 <sup>rd</sup> of December 2013
08:00-10:00	<p><b>Session 6: Group Presentations : 3 HIM Option Designs (status quo)</b></p> <ul style="list-style-type: none"> <li>Groups are given the opportunity to share their work/ thinking and compare with the other HIM options</li> <li>The plenary, guided by the external experts, discusses the 3 different Models</li> </ul>
10:00-10:15	<b>Coffee Break</b>
10:15-11:45	<p><b>Session 7: CHF and Inclusion of the poor – a general remark, contribution</b> - Gemini Mtei intro of CHF Options 2-5</p> <p><b>Session 8: Group Work continues</b></p> <ul style="list-style-type: none"> <li>Discuss CHF integration into the HIM and inclusion of the poor - in relation to your Option Design (targeting, inclusion/ access through which HF mechanisms, at which layers of the system, in relation to MBP etc.)</li> </ul>
11:45-12:45	<p><b>Session 9: Groups Present their thoughts on Inclusion of the Poor and CHF into HIM</b></p> <ul style="list-style-type: none"> <li>Discussion in plenary guided by the content experts</li> </ul>

Session	Tuesday 3 <sup>rd</sup> of December 2013
12:45-13:45	<b>LUNCH BREAK</b>
13:45-15:30	<p><b>Session 10: Brief presentation: Overview of P4P WS results</b></p> <ul style="list-style-type: none"> <li>- P4P task force member: Susna De</li> </ul> <p><b>Session 11: Group work on HIM Option design continues:</b></p> <p>Interlink purchasing and service delivery functions into your Design:</p> <ul style="list-style-type: none"> <li>• Draw from P4P assessment and WS results on how a re-designed strategy would fit into the HIM system</li> <li>• What would a P4P roll-out mean in terms of required capacity and management structures – how do these link to the proposed HIM and CHF Options and Provider Payment mechanisms in general</li> </ul>
15:30-15:45	<b>Tea Break</b>
15:45-16:45	<p><b>Session 12: Group Work on PFM recommendations</b></p> <p>In your groups discuss PFM requirements for the functioning of your HIM drawing also from the PFM recommendations available</p>
16:45-17:15	<b>Wrap-up and remark, observations by WHO experts</b>

Session	Wednesday 4 <sup>th</sup> of December 2013
08:00-10:00	<p><b>Session 13: Group Presentations : 3 HIM Option Designs with P4P element included – narrowing down the options</b></p> <ul style="list-style-type: none"> <li>• Groups are given the opportunity to share their work/ thinking and compare with the other HIM options</li> <li>• The plenary, guided by the external experts, discusses the 3 different Models and <b>selects the 2 most feasible ones</b></li> </ul>
10:00-10:15	<b>Coffee Break</b>
10:15-10:45	<p><b>Session 14: Introduction to Health Financing Strategy Development</b></p> <ul style="list-style-type: none"> <li>- Sheila O'Dougherty, WHO</li> <li>- Mariam Ally (making link to Health Sector Priorities/ HSSP)</li> </ul> <p>At the end of this session, the participants will be able to:</p> <ul style="list-style-type: none"> <li>• Understand what the different building blocks of a HFS are</li> <li>• What a HFS in the context of a HSSP aims to achieve</li> </ul>
10:45-12:30	<b>Session 15: Group Work on developing Strategic Interventions/ priorities for the HFS</b>
12:30-13:30	<b>LUNCH BREAK</b>

Session	Wednesday 4 <sup>th</sup> of December 2013
13:30-15:00	<b><i>Session 16: Presentation of Group Work Results and Narrowing Down the Strategic Priorities</i></b>
15:00-16:00	<b><i>Session 17: Defining the Roadmap for the HFS</i></b> <ul style="list-style-type: none"><li>- Plenary discussion</li></ul>
16:00-16:45	<b><i>Session 18: Summary and Closing of the WS</i></b> <ul style="list-style-type: none"><li>- Concluding summary and remarks by WHO experts</li><li>- Way forward and closing remarks by Mariam Ally</li></ul>