Course title: Health Finance								
Course code: PPM 176	No. of credits: 3	L-T-P dist	<b>ribution:</b> 34-11-00	Learning hours: 45				
Pre-requisite course code and title (if any):								
<b>Department:</b> Department of Business and Sustainability								
Course coordinator (s):	urse coordinator (s): Course instructor (s):		s):					
Contact details:								
Course type	Elective	Course of	fered in: Semester III					

## **Course description**

One of the goals (SDG 3) in the ambitious development agenda of the Sustainable Development Goals (SDGs), adopted by the United Nations on 25<sup>th</sup> September 2015, requires substantial investments for providing financial risk protection and achieve Universal Health Coverage (UHC). To protect the households from financial risk due to health expenditure, different countries (& states) have adopted a variety of health financing strategies. The out-of-pocket (OOP) expenditure or direct payments, one of the major contributor to healthcare payment in most of the developing countries, made by individuals to healthcare providers at the time of service use, is considered as the most regressive form of healthcare payment. It owes to low public healthcare spending coupled with poor regulatory policy and monitoring over private healthcare providers in these countries. This results in absorbing a significant portion of a household budget and pushing them to sacrifice many other basic needs of their well-being, such as food, apart from making them economically poorer. This course has been developed in this background. It is aimed at offering an exhaustive understanding to the students on health financing mechanisms across spatio-temporal locations. In particular, it will help a student to understand themechanisms from the perspective of multiple stakeholders, such as the State, consumer/patient, hospital/healthcare provider, medical insurance companies, interest groups (national/ international), etc.

# Course objectives

The course aims to -

- ·Expose the students to the organization and financing of the health care system to understand the importance of health financing mechanisms;
- · To provide the students an exposure to different health financing mechanisms across time and space to gain an understanding to their applicability, efficiency and appropriateness in different socio-economic-political conditions
- · Make them familiar with the advantages and limitations of different health financing mechanisms and strategies adopted across countries/states at various stages of its life cycle-from conceptualisation to implementation;
- · Enable them to understand the requirements of health financing mechanisms which can be financially sustainable/viable.

Course content						
Module	Торіс	L	T	P		
1.	Introduction: Health related Development Goals, Health Sector Reform & Health Financing Problems of healthcare system Forces of driving health reform Health-reform cycle Goals of Universal Health Coverage (UHC) & health financing Beyond health financing: the wider health system & economy.	5	0			
2.	Sources of Revenue for Health Financing Different sources of raising revenue – compulsory or voluntary, prepayment or out- of-pocket, domestic or foreign; revenue raising and policy objectives; fiscal space & health financing; role of public spending on healthcare; case studies from Thailand, Bangladesh & Sri Lankan health system.	6	1			
3.	Pooling Mechanism in Health Financing Policy objectives and the role of pooling, desirable characteristics of resource- pooling,	7	2			
	fragmentation in pooling and the role of policy makers, insurance mechanism: public & private sector; case studies from Thailand, Bangladesh & Sri Lankan health system.					

4.	Purchasing Healthcare Services Types of healthcare purchasing; Strategic purchasing; challenges of the purchasers, institutional arrangements & purchasing instruments; paying different healthcare services, provider payment mechanism; case studies from Thailand, Bangladesh & Sri Lankan health system.	5	1	
5.	Designing Benefit Package Publicly funded benefit package for health, role of rationing, coverage choice, benefit package & UHC promotion; cost effective interventions; case studies from Thailand, Bangladesh & Sri Lankan health system.	6	2	
6.	Policies for UHC: Indian Experience Comparison of Indian Health system with the developed countries, health financing in Indian States: Cases from Kerala, Tamil Nadu, Punjab, Maharashtra, Odisha, Madhya Pradesh & West Bengal; Evaluation of Health Financing Strategies of the states.	5	5	
	Total	45		

### **Evaluation criteria**

The break-up of the evaluation procedure is as follows –

**Test 1**: Written Examination – (Module 1) 20%

**Test 2**: Case-study preparation – (after completion of Module 2-4) 20%

i. Structure: (1) identification of an important problem related to revenue raising/pooling/purchasing; (2) explain why it is important for the country/state/province from the health financing perspective; (3) how has this problem been addressed in the literature (both empirical and theoretical); (4) where is the scope of improvement - in policy, method etc.; (5) analysis and/or use of data & methodology (if needed); (6) clear explanation of the result with conclusion. ii. Indicators for assessment: (a) Identification of the problem; (b) Identification of specific research question(s); (c) Structure and referencing; (d) Content, language, clarity (Academic Merit); (e) punctuality & timeline adherence. Note: (d) shall carry a weight of 50%; (a) & (b) shall carry 15% each; the rest will carry 10% each 20%

Test 3: Writing of a macro level data analysis report – (Module 6)20%

- i. Structure: (1) identification of an important problem related to health financing; (2) explain why it is important for the country/state/province from the health financing perspective; (3) how has this problem been addressed in the literature (both empirical and theoretical); (4) where is the scope of improvement in policy, method etc.; (5) specify the objective of the work; (6) clearly mention the data source and methodology (7) explain & discuss the results obtained; (8) policy directions/ recommendations & scope of further research.
- ii. Indicators for assessment: (a) Identification of the problem; (b) Identification of specific research question(s); (c) Structure and referencing; (d) Content, language, clarity (Academic Merit); (e) punctuality & timeline adherence. Note: (d) shall carry a weight of 50%; (a) & (b) shall carry 15% each; the rest will carry 10% each

Test 4: Written Examination (Module 2-5) - 40%

**Learning outcomes:** After successful completion of the course, students will be able to –

Develop an exhaustive understanding of the health financing systems (Test 1 and 4)

Ability to identify and analyse the sources of health financing in different economic system (Test 2)

Ability to understand the different methods and extent of pooling in health financing and its impact on equity (Test 2) Develop an understanding in different purchasing mechanism and the best practices in the various contexts (Test 3 and 4)

Ability to evaluate the health financing system and prescribe policies for better health outcome and to achieve SDGs (Test 3 and 4)

### Pedagogical approach

The course will be delivered through lectures and discussion of case studies, research papers and articles.

### **Materials Books**

- · Gottret, Pablo & Schieber (2006). Health Financing Revisited: A Practitioner's Guide. Washington, DC: World Bank.
- · Josep, Ray & Elke (Eds.) (2005). Purchasing to improve health systems performance. Open University Press European Observatory on Health Systems and Policies series.
- · Zweifel & Breyer. (1997). Health Economics. Oxford University Press.

#### Reports & other references:

Antos JR. (2007). Health Care Financing in Thailand: Modeling & Sustainability. Mission Report to the World

Bank. Bangkok.

- · Bose M., Indranil M., Vaidyanathan G. et.al. (2017). Tamil Nadu State Health Accounts 2013-14. PHFI, New Delhi.
- · Mishra A. & Seshdari S.R. (2015): Unpacking the Discourse on Universal Health Coverage in India, Social Medicine, 9(2), 86-92.
- · Muraleedharan VR. Umakant D. & Lucy G. (2011). Tamil Nadu 1980s 2005: A Success Story in India, in ed. Dian B, Martin M & Anne M., Good Health at Low Cost 25 Years on What makes a successful health system?
- $\cdot$  National Health System Resource Centre (2016). National Health Accounts Estimates for India (2013-14). Ministry of Health & Family Welfare, GoI.
- · Planning Commission of India (2011): High Level Expert Group Report on Universal Health Coverage for India. (http://planningcommission.nic.in/reports/genrep/rep\_uhc0812.pdf).
- · Prinja S., Manmeet K. & Rajesh K. (2012): Universal Health Insurance in India: Ensuring Equity, Efficiency, and Quality, Indian Journal of Community Medicine, 37(3), 142-49.
- · Public Health Foundation of India (PHFI) 2016. State Health Accounts Madhya Pradesh.
- · Public Health Foundation of India (PHFI) 2016. State Health Accounts Odisha.
- · Public Health Foundation of India (PHFI) 2016. State Health Accounts Maharashtra.
- · Public Health Foundation of India (PHFI) 2016. State Health Accounts Kerala.
- · Public Health Foundation of India (PHFI) 2016. State Health Accounts Punjab.
- Qadeer I. (2013): Universal health care in India: Panacea for whom? Indian Journal of Public Health, 57(4), 225-30.
- · Roberts MJ., William H., Peter B. & Michael RR. (2008). Getting Health Reform Right. OUP. New York.
- The World Bank (2009). Working in Health: Financing & Managing the Public Sector Health Workforce.

#### Web References:

Global Network for Health Equity, available at: http://gnhe.org/blog/category/south-east-asia/

WHO, Health financing for universal coverage, available at: <a href="http://www.who.int/health\_financing/training/e-learning-course-on-health-financing-policy-for-uhc/en/">http://www.who.int/health\_financing/training/e-learning-course-on-health-financing-policy-for-uhc/en/</a>

WHO, 'Health financing for universal coverage, available online at: <a href="http://www.who.int/health-financing/policy-framework/en/">http://www.who.int/health-financing/policy-framework/en/</a>

WHO, Health Financing, available at: <a href="http://www.who.int/health-financing/en/">http://www.who.int/health-financing/en/</a>WHO, India, available at: <a href="http://www.who.int/countries/ind/en/">http://www.who.int/countries/ind/en/</a>

WHO, Health Financing, available at: <a href="http://www.who.int/health\_financing/topics/sustainable-financing-for-uhc/en/">http://www.who.int/health\_financing/topics/sustainable-financing-for-uhc/en/</a>

## Additional information (if any)

### Student responsibilities

Attendance, timeline adherence for assignments, come prepared with readings when provided.

Prepared by: Montu Bose

## **Course Reviewers:**

Prof. Umakant Dash, IIT Madras

Prof. Arijita Dutta, University of Calcutta