



HTA in Ghana

Value for money towards UHC

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NHIS in Ghana



NHIS Statistics

NHIS Population Coverage



11%
2006



31%
2010



40%
2014 - 2016



165
District Offices



c.3,000
Branch Staff



11.2m
Active Members



c.4,000
Healthcare Providers

NHIS Comprehensive Healthcare Benefits



In-patient



Out-Patient



Medicines

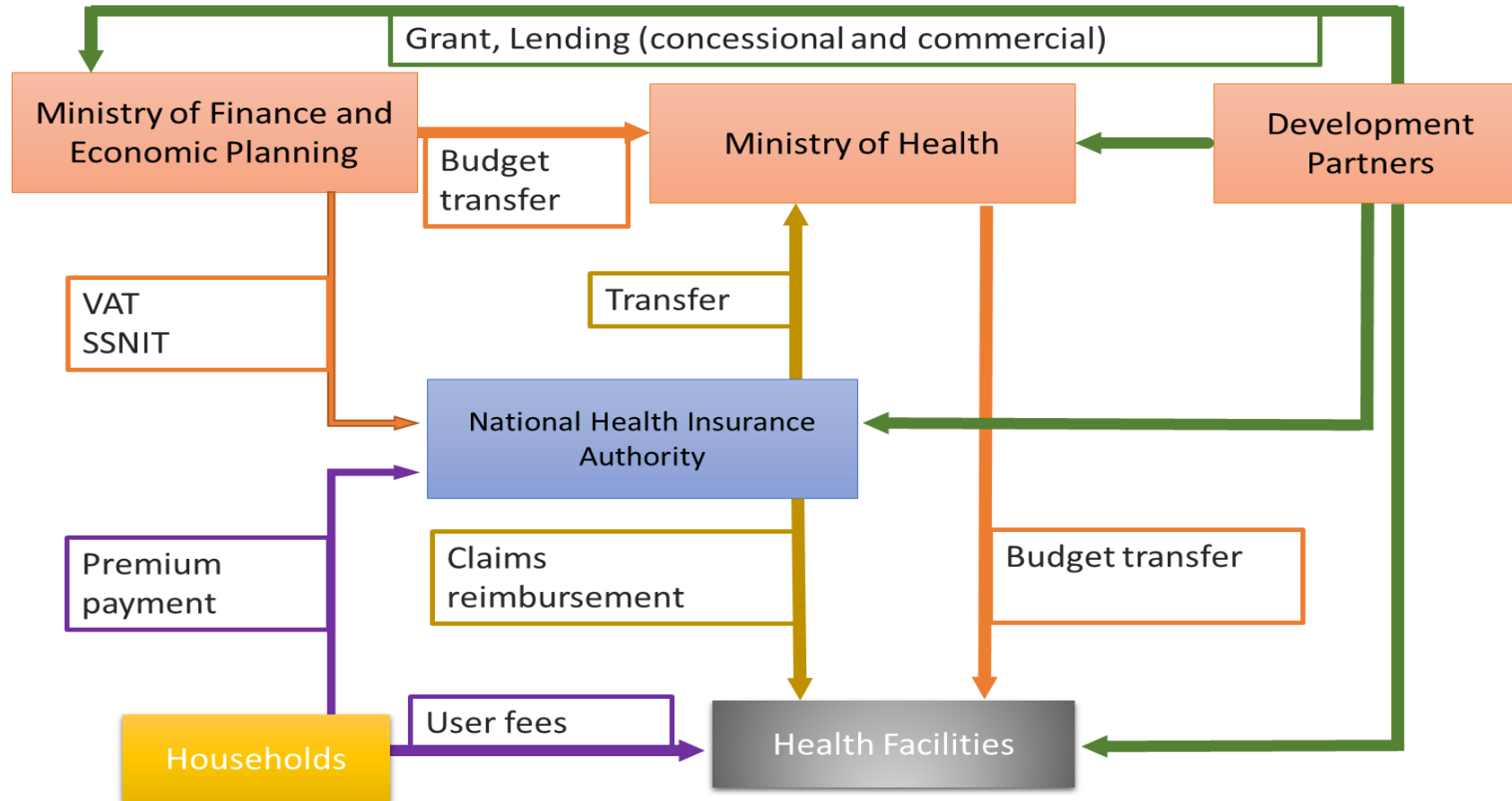


Diagnostics

- NHIS was established in 2003, and has a goal of universal healthcare in Ghana
- NHIS offers comprehensive healthcare package to all citizens of Ghana and is heavily subsidized by tax (National Health Insurance Levy)
- The scheme penetration attained 40% in 2014 and has stayed relatively flat since
- Claims = 80% of expenditure
- NHIS running into deficit if financial structure and benefit package are not re-aligned



Ghana Health Financing Landscape



World Bank report on NHIS

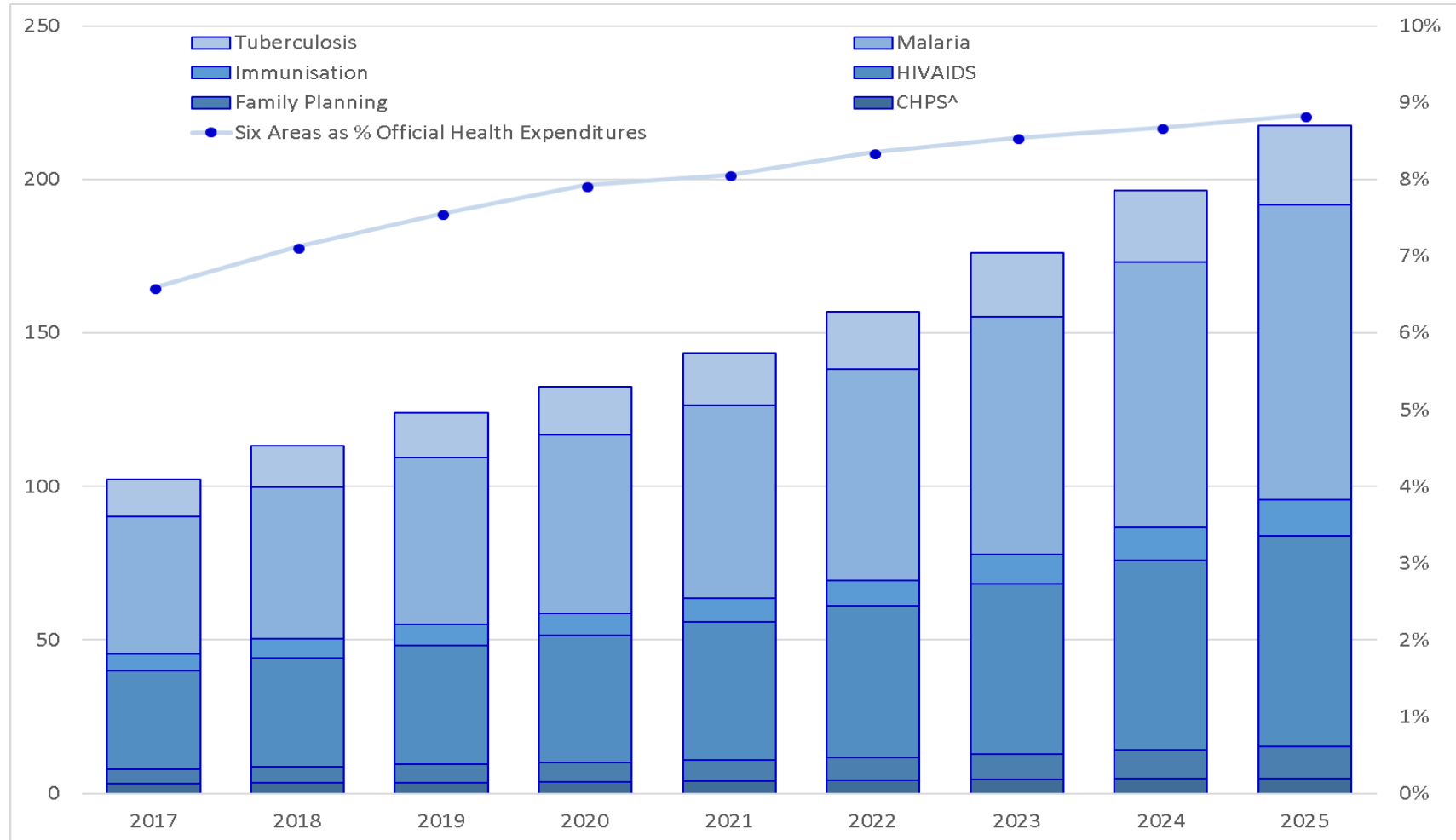


On-Budget Financing



Rise from 100 to 200 M USD, and % rise as a share of total health expenditures over the medium term.

Given limitations in isolating government-only expenditures these projections relate to on-budget government and external financing (incl. NHIS).

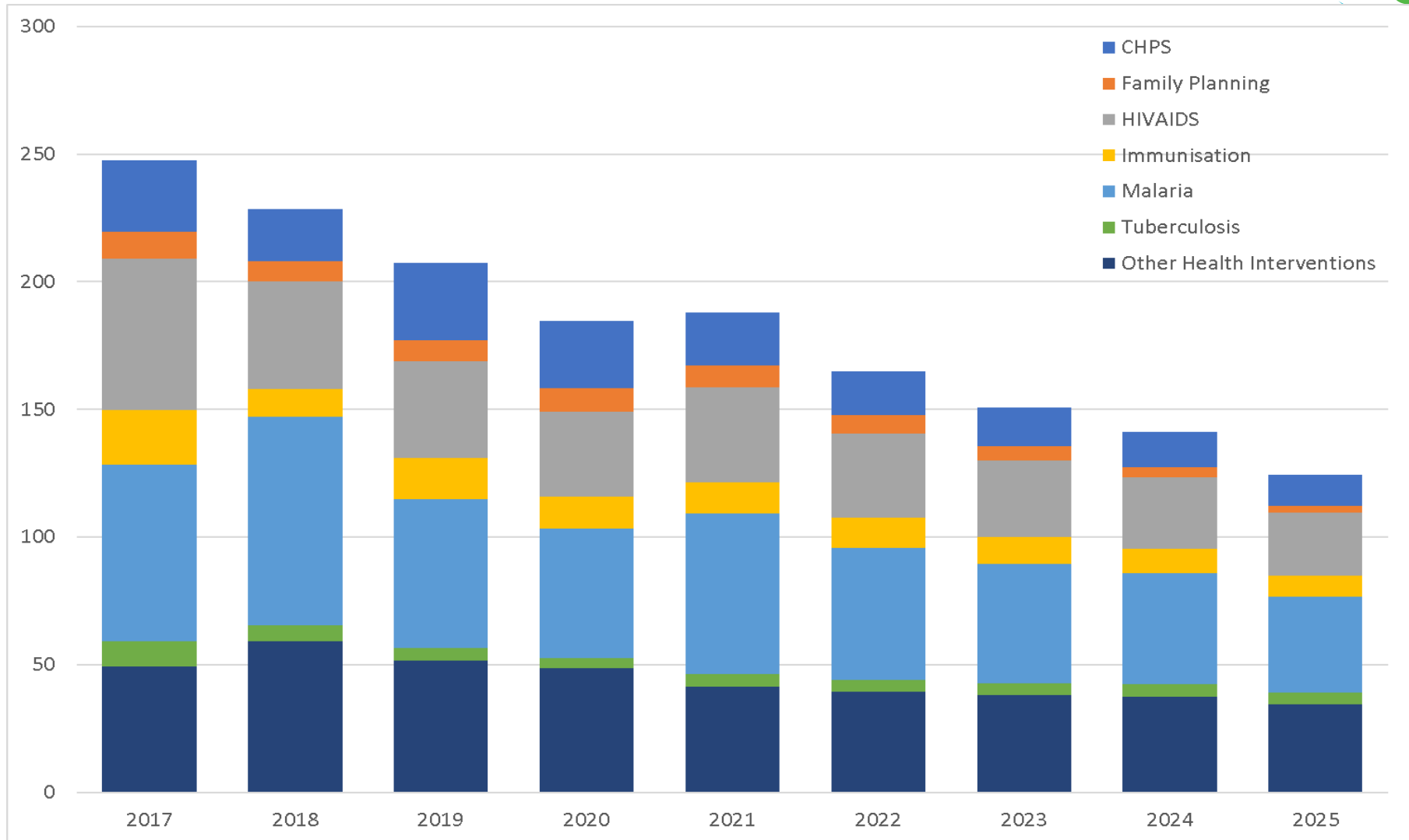




Development Partner Funding

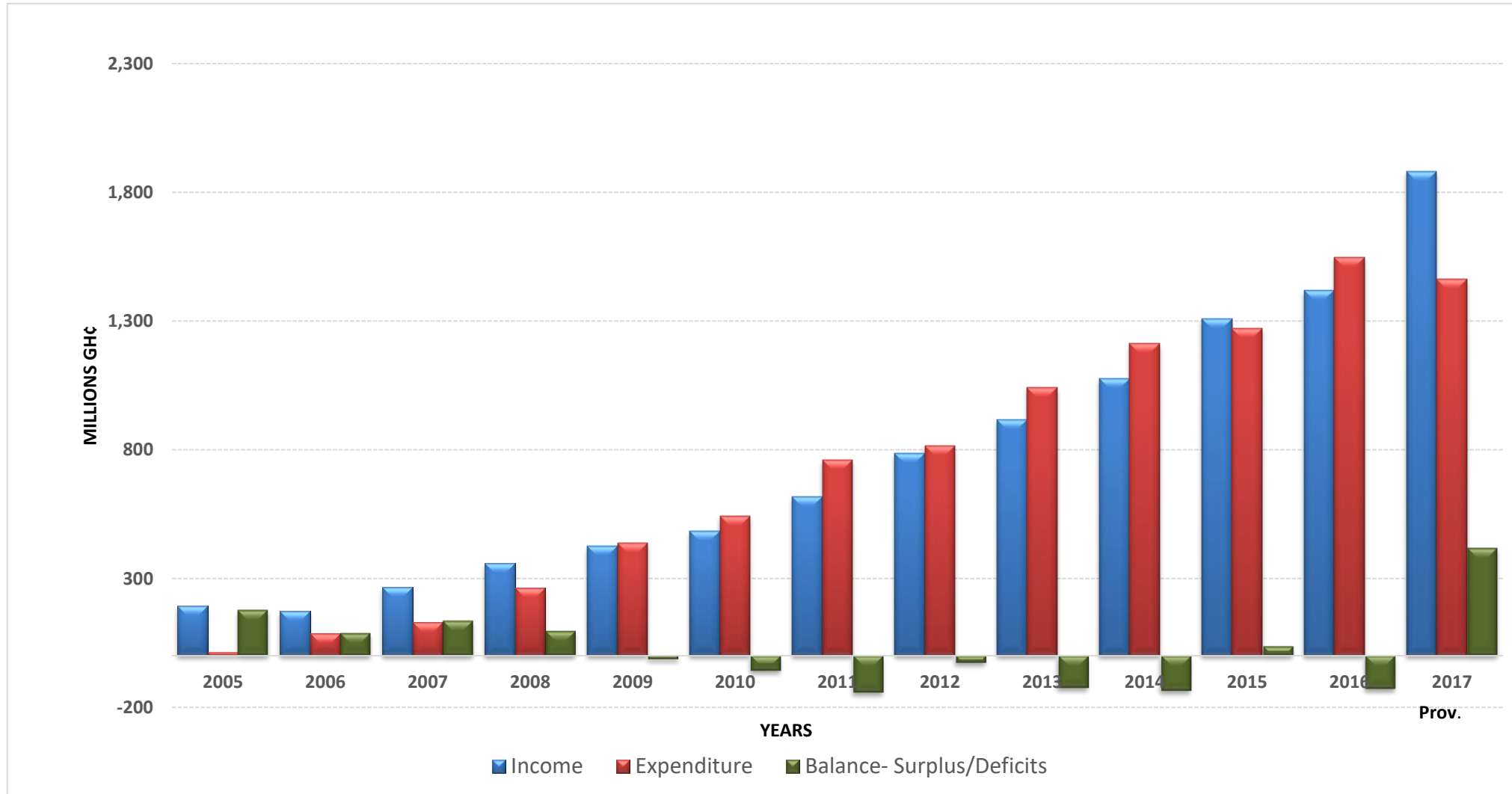


Downward trend in external financing to the six sectors: 198 M USD in 2017 to 90 M in 2025. FP and HIV/AIDS projected to decline most rapidly.





NHIA Inflows & Expenditures





Problem Statement



- The NHIF currently the source of most of the counterpart funding
- Co-Financing - rising from 144 M USD in 2017 to 350 M USD in 2025
- External financing - ↓ 108 M USD
- Government needs to find an additional 314 M USD over the medium term

Major areas of financing needs are

- ✓ Family Planning
- ✓ Malaria
- ✓ HIV/AIDS
- ✓ Immunisation



Suggested Solution



How to find money when the external funding declines?

Incorporate these areas into the NHIS

How to do this and keep the NHIS financially sustainable?

Health Technology Assessment



Process: HTA Development steps



- In February 2016 iDSI team & Ghana stakeholders agreed an action plan for HTA
- Focus was on antihypertensive drugs – NHIS cost driver
- 1st practical step for priority setting
- Formulation of the questions
- Data requirements and data availability
- Webinar: train and build capacity core team



Methods



Objective: To estimate the cost-effectiveness and budget impact of drugs to reduce blood pressure to prevent cardiovascular disease (CVD)

Approach: Developed based on the recommendations of the standard treatment guidelines as well as clinical practice

Population: Patients with hypertension, excluding those with pre-existing CVD or diabetes, and pregnant women

Interventions: First line drugs (main classes):

- A. ACE inhibitors or ARB
- B. Beta-blockers
- C. Calcium Channel Blockers
- D. Thiazide-like Diuretics

Comparator: No intervention (NI)

Outcomes: Coronary heart disease (heart attack), stroke, heart failure, diabetes, disability adjusted life years (DALY), and costs



Impact



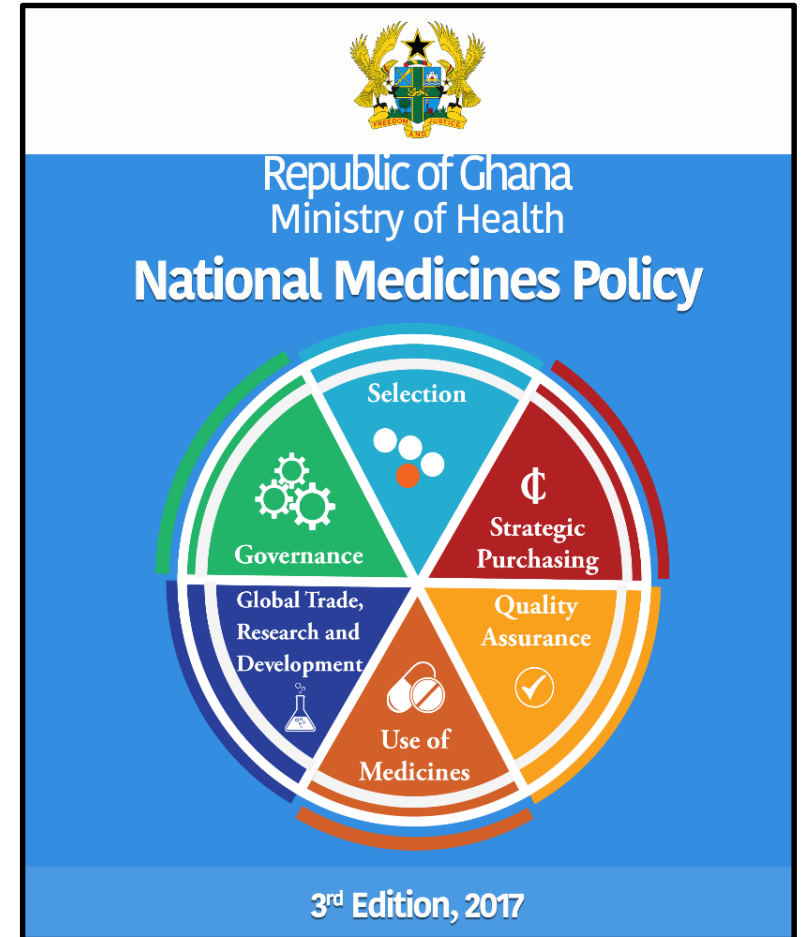
- Reinforcement of utility and value of HTA in Ghana
- Needs assessment – capacity, expertise, existing resources
- Data gaps – to support effective HTA processes
- Importance of institutional collaboration
- Reinforced importance of institutionalization of HTA
- Pricing issues – reinforced the need for pricing policies



Impact



- National Medicines Policy (2017) HTA recognised as a priority setting mechanisms
- National Pricing Committee (to be established)
- Removal of Value Added Tax on medicines (Legislated Instrument 2255 enacted)
- Standard Treatment Guidelines (2017)
- iDSI/HTAi conference September 2018 !





Way Forward



Recommendations

- ✓ Set up a HTA body in Ghana
- ✓ Standing body with representation from existing organisations
- ✓ Start gradually using existing data
- ✓ Refine & improve as capacity is built
- ✓ Collaborate with global partners



Conclusion



Health Technology Assessment is not about devices or medicines only

It is a scientific method for **Strategic Purchasing**

The NHIS **must** purchase strategically in order to survive

As we begin our 15th anniversary, we take our first steps in HTA



THANK YOU

