

**“Enhancing Interprofessional  
Collaboration and Learning for  
Strengthening Primary Health Care”**

July 21-23, 2021

Faculty of Medicine, Public Health and Nursing  
Universitas Gadjah Mada  
Yogyakarta, Indonesia

**TUFH** THE NETWORK:  
**2021** TOWARD UNITY  
FOR HEALTH

Supported by:



## TUFH 2021 ABSTRACTS

Title	<b>EXPANDING HEALTH FINANCE MODALITIES TO SAFEGUARD ACCESS TO PRIMARY HEALTHCARE</b>
Type	<b>Oral Presentation</b> <i>Innovative Ways for Community Mobilization and Engagement of Stakeholders</i>
1st Author	<b>TONI-ANN MUNDLE</b>
Co-Authors	<b>Omarr Edwards, Cianna Lunan, Nikolai Nunes, Maria Jackson, Tomlin Paul</b>
Country	<b>JAMAICA</b>
Abstract N <sup>o</sup>	<b>TUFH712</b>
Content	<p>Background By establishing the National Health Fund (NHF) chronic disease medications subsidy in 2003 and abolishing user fees in public health facilities in 2008, Jamaica has made progress towards Universal Health Coverage. Financing these services is predominantly tax based (Chao, 2013), with significant challenges in service provision. To preserve affordable and accessible primary healthcare, inter-sectoral collaboration must occur across the healthcare, finance and insurance sectors. We look at the implications for primary care in four health financing programs and initiatives of the Ministry of Health and Wellness (MOHW), Jamaica. Method A review was conducted of the MOHW's programs namely the NHF and Jamaica Drugs for the Elderly Programme (JADEP), the proposed National Health Insurance Plan (NHIP) Green Paper and the MOHW 5-Year Capital Expenditure Plan for Health (2019) to identify potential threats to primary health care. Results 1. Out of Pocket Payments (OOPP) represent 28% of Jamaica's health expenditure; this threatens one's social wellbeing as values above 20% are linked to catastrophic health spending and impoverishment (MOHW, 2019). 2. The NHIP aims to provide equitable health coverage, increasing healthcare access while preventing excessive OOPP. 3. There is a need for private health insurance programs targeting vulnerable populations. The unemployed, informally employed, and minimum wage earners may benefit from microinsurance policies based on their earnings. Conclusion Implementing public health insurance and private microinsurance will safeguard affordable primary healthcare by addressing the social determinants of health and protecting against catastrophic OOPP.</p>