

Priority setting in health

- An introduction

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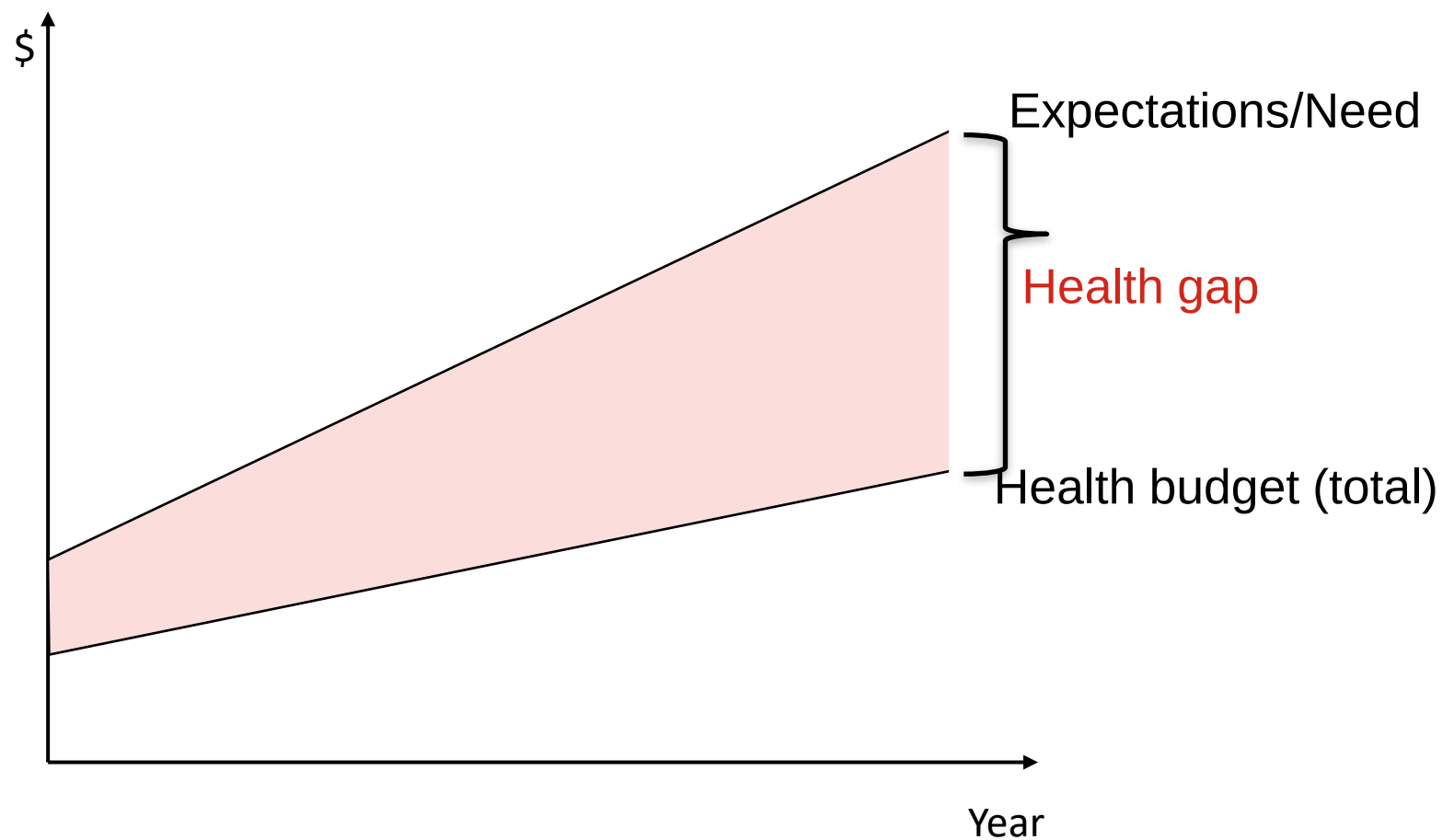
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The health gap



Rationing health care

Withholding beneficial medical or public health services from individuals who could benefit from such services, whether or not that is an intended consequence of an explicit decision or not

Ham C, Roberts G. *Reasonable rationing. International experience of priority setting in health care.* 2003.

What is priority setting in health?

Ranking patients or health services in order of importance

(Norheim OF. BMC Medicine, 2016)

Is this fair?

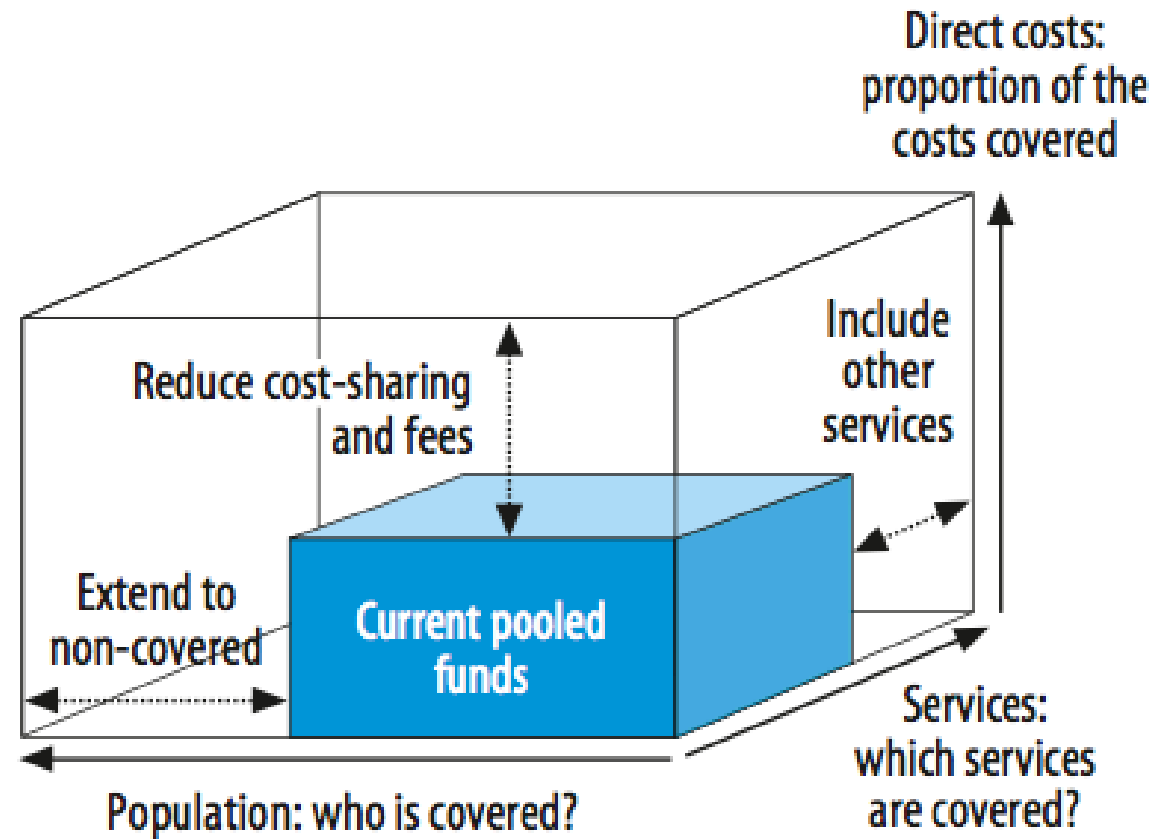


Condition	Intervention	Priority
Ischemic heart disease, stroke and peripheral artery diseases	Treatment for those with high absolute risk of CVD (>35%) with a combination of drugs	High
Childhood cancers	Diagnosis and treatment of childhood ALL leukemia	Medium *
Prostate cancer	Treatment of prostate cancer: surgery, chemotherapy, radiotherapy, stereotactic body radiation therapy	Low

* High co-payment required

UNIVERSAL HEALTH COVERAGE (UHC)

The Cube

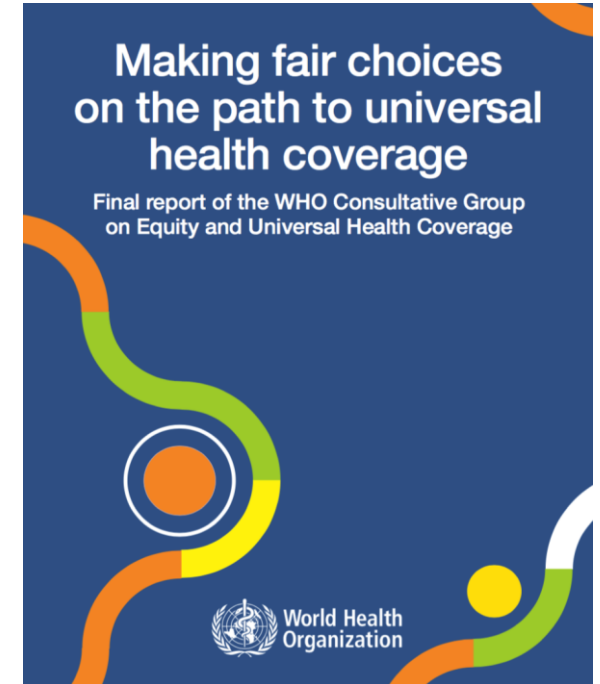


World Health Report 2010: Health systems financing: the path to universal coverage.

1-2-3 on the path to UHC:

1. Categorize and prioritize services
2. First, high-priority services to everyone without financial risk
3. Ensure disadvantaged groups are not left behind

It would be unacceptable to expand coverage for coronary bypass surgery before securing universal coverage for skilled birth attendance and services for easily preventable or easily treatable, fatal childhood diseases.



Ethical considerations on the path to UHC

Choose key services fairly

- Cost-effectiveness?
- Priority to worse off?
- Financial risk protection?

High priority groups first

- The sickest, poor, most marginalised, those hard to reach?
- Civil servants, military, farmers?

Financial risk protection

- Reduced fees for the poorest?
- Everyone?

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