



# THE UNIVERSITY OF THE WEST INDIES

ST. AUGUSTINE, TRINIDAD AND TOBAGO, WEST INDIES

## FACULTY OF SOCIAL SCIENCES HEU, CENTRE FOR HEALTH ECONOMICS

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October 16, 2023

### **Re: Debriefing Note on Presentations and Discussions at the 15<sup>th</sup> Caribbean Conference on National Health Financing Initiatives held at the Hospital Internacional de Colombia, Bucaramanga, Colombia, October 4-6, 2023**

#### **1. Background**

In response to requests from policymakers to ‘do more for improving health systems’, Heads of Caribbean Social Security Organizations, at a meeting in Belize City in 2006, decided to establish a Forum—starting with a Regional Conference—for activities to build and enhance capacity in designing, implementing and effectively managing national health financing initiatives.

The first Conference was held in the Turks and Caicos Islands in 2006. Discussions and activities continued in Aruba (2007); Trinidad and Tobago (2008); St. Maarten (2009); Belize (2010); Bermuda (2011); Curacao (2012); Jamaica (2013); Trinidad and Tobago (2014); Turks and Caicos Islands (2015); Bonaire (2016); Suriname (2018); Anguilla (2019); Antigua and Barbuda (2022).

#### **2. Objectives**

The overall objectives of these Conferences are to share knowledge, increase understanding, test ideas, enhance national expertise and deepen regional collaboration in designing and managing national health financing initiatives.

As in previous Conferences that selected specific issues for analysis, the 15<sup>th</sup> Conference focused attention on ‘Health Financing in the Caribbean: Optimizing Efficiency in Governance and Public-Private Partnerships’.

#### **3. Host**

In collaboration with The University of the West Indies, HEU, Centre for Health Economics (UWI-HEU), the 15<sup>th</sup> Conference was co-hosted by the Hospital Internacional de Colombia-

Fundación Cardiovascular de Colombia (HIC-FCV) and was held in Bucaramanga, Colombia over the period October 4-6, 2023.

Additional support was provided by a mix of local, regional and extra-regional sponsors.

#### **4. Planning Team**

The Conference Planning Committee included teams from The UWI-HEU headed by Dr. Stanley Lalta and Ms Charmaine Metivier and from the HIC-FCV headed by its President, Dr. Victor Castillo and Manager of International Services, Ms. Maria Paula Cornejo.

#### **5. Participation**

The Conference attracted approximately 80 full-time participants from 19 countries, as well as 14 public and private sector organizations. Participants included:-

- senior officers in Caribbean Social Security Organizations;
- senior managers and health practitioners from Ministries of Health, including the Honorable Minister of Health of the Turks and Caicos Islands;
- senior officers from national/social health financing programs;
- representatives of local and international organizations in financing, health insurance, actuarial science and health services management; and
- representatives of universities, hospitals, health and IT consulting firms.

#### **6. Program Content**

##### **a) Formal Opening**

Chaired by Ms Pilar Salcedo of the FCV, the Formal Opening was attended by more than 100 persons, including participants and invited guests from the Government of Colombia and the HIC-FCV.

In his address, the Mayor of Bucaramanga, Mr. Juan Carlos Sardenas, emphasized the crucial role of universal health coverage and the need to keep expanding knowledge, skills and inter-sectoral linkages for enhanced functioning of health financing systems.

Other speakers bringing greetings from their organizations included the Honorable Shaun Malcolm, Minister of Health of the Turks and Caicos Islands; Dr. Victor Castillo, President of HIC-FCV; Ms. Maria Paula Cornejo, Manager of FCV's International Services; and Professor Karl Theodore on behalf of Dr. Althea La Foucade, Director of The UWI-HEU.

Dr. Stanley Lalta, Conference Program Coordinator, drew attention to the theme of the Conference—'Health Financing in the Caribbean: Optimizing Efficiency in Governance and Public-Private Partnerships'—and provided an overview of the structure and content of the presentations in the Conference's Program.

##### **b) Presentations and Discussions—Conference Feature Papers included:-**

- 'Legislation and Governance in the Bermuda Health Financing System' by Dr. Ricky Braithwaite of the Bermuda Health Council;

- ‘Reflections on and Experiences with Procurement and Contracting with Health Providers’ by Dr. Anco Ringeling, Consultant from Aruba;
- ‘Thirty Years of Health Financing Reforms and the Mandatory Health Insurance Plan in Colombia: Lessons of Experience’ by Dr. Ramon Abel Castaño, Consultant;
- ‘Public-Private Partnerships in Health—Lessons from the Bahamas’ by Dr. Robin Roberts, UWI, The Bahamas;
- ‘HIC-FCV’s Experience and Best Practices with Payers (Government and Insurers) for Overseas Patients’ by Dr. Victor Castillo, President of HIC-FCV;
- ‘Contracting Health Services in the NHIP in Belize-Comparing Public and Private Health Providers’ by Dr. Ramon Figueroa, NHIP, Belize;
- ‘Public-Private Partnering to Achieve Sustainability in Health Care’ by Dr. Kester Nedd, JIPA;
- ‘Innovations in Partner Financing—Evidence for Public Health Practice’ by Dr. Dexter James, Millennium Heights Medical Complex, St Lucia.

**c) Presentations and Discussions—Other Sessional Thematic and Panel Papers covered:-**

- Case Studies in Governance of Health Financing Plans in the NHI in The Bahamas (Ms. Christy Butler); Basic Health Insurance in Aruba (Ms. Eliana Florez) and Medical Benefits Scheme in Antigua and Barbuda (Ms. Wendy Jackson on behalf of Mr. Kevin Silston);
- Case Studies in Public-Private/Community Partnerships for Health in the NHI in British Virgin Islands (Mr. Roy Barry); Ministry of Health, Barbados (Ms. Shakira Mascoll); Ministry of Health, Jamaica (Ms. Peeta Gay Thompson and Mr. Chad-Rick White); and Local Communities in The Bahamas (Ms. Charlene Bain);
- Progress in Designing and Implementation of Universal Health Financing Plans in Ministry of Health in St. Lucia (Ms. Lauren Blanchard); St Kitts and Nevis (Mr. Clifford Griffin); and the NHI Program in Turks and Caicos Islands (Ms. Lillian Misick);
- Health Financing Action Plans by PAHO/WHO (Dr. Guillermo Sandoval); and Results of Health Financing Evaluations in Four Countries Using WHO’s Tool (Mrs. Patricia Edwards-Wescott and Ms. Charmaine Metivier of UWI-HEU);
- Ongoing Research on Private Health Insurance (Ms. Leselle Pierre-Romain and Ms. Renee Thomas-Venugopal of St. George’s University, Grenada); Managing Risk in Health Financing Plans (Mr. Brian Hogan of Mitantech Inc.); and Management Capacity-building (Mrs. Mary Miller Sallah of Brooks Health Group).

**d) A Special Panel Discussion on ‘Health Financing Systems: Anticipating Challenges, Building Resilience’** was moderated by UWI’s Dr. Heather Harewood and Dr. Stanley Lalta with panelists comprising Dr. Ricky Braithwaite of Bermuda; Dr. Victor Castillo of HIC-FCV Colombia; Ms. Charlene Bain of The Bahamas; Mrs. Jeanine Constansia-Kook of Curacao; and Dr. Lex de Jong of Aruba.

**e) Conferences Progress Report**

Dr. Stanley Lalta, Program Coordinator, presented a review of activities and progress over the 15 Conferences (Turks and Caicos Islands, 2006; Aruba, 2007; Trinidad and Tobago, 2008; St. Maarten, 2009; Belize, 2010; Bermuda, 2011; Curacao, 2012; Jamaica, 2013; Trinidad and Tobago, 2014; Turks and Caicos Islands, 2015; Bonaire, 2016; Suriname, 2018; Anguilla, 2019; Antigua and Barbuda, 2022; and Colombia, 2023).

He referred to the Conference’s overall mission to enhance capacity in health financing matters and highlighted key aspects pertaining to the level of participation, major topics covered in all Conferences, as well as issues identified by participants for further consideration.

**7. Key Take-away Messages from the 15<sup>th</sup> Conference**

**a) Governance in Health Financing Systems**

- Governance includes roles and responsibilities for institutions at all levels—Parliament and Cabinet (policies and regulations); oversight agencies such as Ministries of Health; operational agencies in financing and delivery of health services, professional associations and civil society groups.
- Key provisions in financing plans include revenue generation, pooling and spending on priority services with performance standards, transparency, accountability and sustainability—these should be grounded in defined legislation and procedures.
- Evidence-driven financing policy should be robust, but responsive to changing context, priorities and standards.

**b) Public-Private Partnerships in Health Financing**

- Public-Private Partnerships include governance, financing, management, delivery of services and community engagements with civil society groups.
- Public-Private Partnerships should be defined contractually with clear provisions for information sharing, performance (incentives and penalties) in relation to targets, quality of care, monitoring and accountability. In these, continuous communication and transparency are critical to build trust and effectiveness i.e. ‘win-win’ relationships.
- Working examples of Public-Private Partnerships include ‘Selective Privatization and Partnered Care’ in The Bahamas; contracting private providers in NHI programs in Aruba, Curacao, British Virgin Islands and Belize and by Ministries of Health as in Barbados and Jamaica; community partnerships in financing health services in The Bahamas.

- c) **Efficient Health Financing in Small Countries** is imperative and needs strengthening by way of:-
- More coordinated care and integrated networks in delivery of health services.
  - Less silos and fragmentation in health financing arrangements (re: 'single payer' system) in small countries as compared to more 'managed competition' ('competing multiple payers' and health providers) approaches in other countries.
  - More strategic procurement policies to guide short-term purchasing arrangements.
  - Systematic technological assessments to determine appropriateness and cost/benefit.
  - More attention to regional collaboration in financing (re: 'regional health insurance') and procurement/delivery of public health and curative services (re: 'centres of excellence') given the limitations of 'economies of scale' in small countries.
- d) **In NHI Systems**, public health services delivery agencies such as hospitals and clinics can compete effectively with similar private agencies if given the right management culture, fee structures and legal ability to contract, including their own bank accounts.
- e) **'Human/Health Rights' Approach** to health care is essential for access and equity, but needs to fully recognize limitations due to resource availability and the need for setting priorities (re: essential benefit package).
- f) **Government Financial Support** is essential for equity in access and payment for health care by vulnerable groups (re: financial protection). This must be backed by defined beneficiary systems, citizen empowerment to become more 'health-conscious' and cross-subsidies in NHI operations to avoid perceptions of government as 'giverment' only.
- g) **Alternative Health Financing Options** may consider some private approaches such as factoring (discounted funding of receivables by providers of supplies to public health facilities), health impact bonds and philanthropy (individual, corporate, community).
- h) **Building Resilience in Health Financing Systems** depends on robust research and defined measures to anticipate, prepare for, respond to and adapt in the face of single and multiple challenges (e.g. changing patterns of disease burden, as well as political, economic, technological, demographic conditions).
- i) **Measures to Improve Resilience** should be linked to good governance, efficiency in strategic planning, health in all policies, integrated care arrangements built on primary care, global and regional alliances and partnerships with private and community groups.
- j) **Advancing Digitization** is necessary for a modern, responsive and quality-oriented health care system. However, systematic analysis of costs, benefits and best practices are required to ensure efficiency and effectiveness especially in small countries where the 'margin of error' is heavily constrained.

## **7. Suggested Actions for the 16<sup>th</sup> Conference**

The Conference recommended that actions be taken:-

- i) To give ongoing attention to ‘Financial Toxicity and Protection’; ‘Costs and Benefits of Digitization and AI in Health’; ‘Revenue Generation Options such as Sin Taxes and Health Impact Bonds’; ‘Efficiency through Regional Collaboration’; and ‘Community Partnerships in Health Financing’.
- ii) To reach out and target participation in future Conferences by some Health Ministers and representatives of national Ministries of Finance.
- iii) To prepare briefs on ‘best practices’ discussed in the Conferences on key areas such as contracting health providers, design and phasing of benefit packages, performance-based payment systems, financing overseas care and financial protection.
- iv) To introduce changes in the format of presentations and discussions with some dedicated ‘interactive policy planning and problem solving’ sessions.
- v) To accept the offer of the Millennium Heights Medical Complex of St. Lucia to co-host the 16<sup>th</sup> Conference.

## **8. Acknowledgements**

Participants thanked the collaborating organizations—The UWI-HEU and the HIC-FCV—for their collective efforts in convening the Conference. Special thanks were extended to the local and international sponsors who provided financial, in-kind and other resources to support the Conference.

## **9. Access to Documents**

Presentations delivered at the Conference may be accessed from the Conference’s Website (<http://conferences.sta.uwi.edu/healthfinancing/>) or from the Office of The University of the West Indies, HEU, Centre for Health Economics, Trinidad and Tobago.

## **10. Information Requests and Recommendations for Future Action**

Requests for information on previous Conferences may be directed to Ms. Charmaine Metivier, Assistant Coordinator (Charmaine.Metivier@sta.uwi.edu) and copy the Program Coordinator, Dr. Stanley Lalta (stanleylalta@gmail.com), as well as the Office of the HEU, Centre for Health Economics (Centre.HealthEconomics@sta.uwi.edu). You can also contact us at 1-868-662-9459 or 1-868-645-7351.

Yours sincerely,



Dr. Althea La Foucade  
Director