



# Expert Panel on Effective Ways of Investing in Health (EXPH)

**Session 2 Panel Experience:**

**Universal health coverage and access  
to healthcare**

**Challenges and Solutions**

Professor Martin McKee on behalf of the EXPH

Brussels, November 8th, 2019

# What are we trying to achieve?

- **SDG 3.8**
- **Achieve universal health coverage (UHC), including financial risk protection, access to quality essential health care services, and access to safe, effective, quality, and affordable essential medicines and vaccines for all**



# Our philosophy

- We take a European approach, without endorsing any particular model of health system
- We address challenges common to all, but it is up to countries to adapt our recommendations to their own context

# The problems

- Even though all Member States have, in theory, universal health coverage, in reality there is persisting unmet need
- Especially among certain vulnerable populations
- And vaccine coverage is often low, especially among disadvantaged groups
- While all health systems struggle to afford some innovative medicines



European  
Commission

Access to health services in the European Union (2016)

Benchmarking access to healthcare in the EU (2017)

Innovative payment models for high-cost innovative medicines  
(2017)

Vaccination programmes and health systems in Europe  
(2018)

Options to foster health promoting health  
systems (2019)

Opinions



Expert Panel on effective ways of investing in health  
(EXPH)

Access to health services



The title appeared in the original version of the report.



**BENCHMARKING  
HEALTHCARE**  
Report of the  
Expert Panel on  
investing in H

**INNOVATIVE PAYMENT MODELS FOR  
HIGH-COST INNOVATIVE MEDICINES**  
Report of the  
Expert Panel on effective ways  
investing in Health (EXPH)



**VACCINATION PROGRAMMES AND HEALTH  
SYSTEMS IN THE EUROPEAN UNION**  
Report of the  
Expert Panel on effective ways of  
investing in Health (EXPH)



**OPTIONS TO FOSTER HEALTH PROMOTING  
HEALTH SYSTEMS**

Report of the  
Expert Panel on effective ways of  
investing in Health (EXPH)





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### VACCINATION PROGRAMMES & HEALTH SYSTEMS IN THE EUROPEAN UNION Opinion by the Expert Panel on Effective Ways of Investing in Health (EXPH)



Vaccination is recognised as one of the most cost-effective public health interventions. However, the EU is facing increasing outbreaks of vaccine preventable diseases.

#### WHY ARE VACCINATION RATES DECREASING?

There are several psychological, social, and contextual factors that affect the decision by a parent not to vaccinate their child.

#### KEY OBSTACLES TO VACCINATION COVERAGE INCLUDE:

1. concerns or fears about vaccine safety and side effects,
2. lack of trust,
3. social norms,
4. exposure to rumours and myths undermining confidence in vaccines,
5. access barriers,
6. failure to understand the underlying mechanisms that decrease vaccination confidence.



#### WHAT ARE THE PANEL'S RECOMMENDATIONS TO IMPROVE VACCINATION COVERAGE?

There is a range of policy options that countries can implement to increase vaccination coverage.

Communication strategies about the benefits of vaccination remain important but need to be combined with opportunities for participatory approaches enabling dialogue with vaccine hesitant and hard to reach groups. These strategies need to be targeted not only at the uninformed (i.e. the lack of information) but also at the misinformed (when the information is incorrect) or disinformation (when information is spread with the intention to deceive).

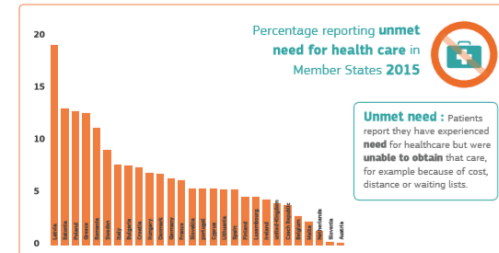


### MONITORING ACCESS TO HEALTHCARE TO IMPROVE POLICY MAKING Opinion by the Expert Panel on Effective Ways of Investing in Health (EXPH)

#### Why benchmark access to healthcare?

Access to timely, high-quality and affordable healthcare is one of the 'building blocks' of the social model we stand and strive for. It is one of the 20 principles at the heart of the European Pillar of Social Rights, proclaimed jointly by EU Institutions and Member States on 17 November 2017 and recognised by the EU Charter of Fundamental Rights (art.35).

Limited access to healthcare is still a reality for many across the EU and has serious repercussions, reducing socio-economic growth potential and producing effects going beyond generations. For various reasons, such as austerity measures, access to healthcare risks to be thrown off track, while full and effective access to healthcare should come to the forefront of the policy debate.



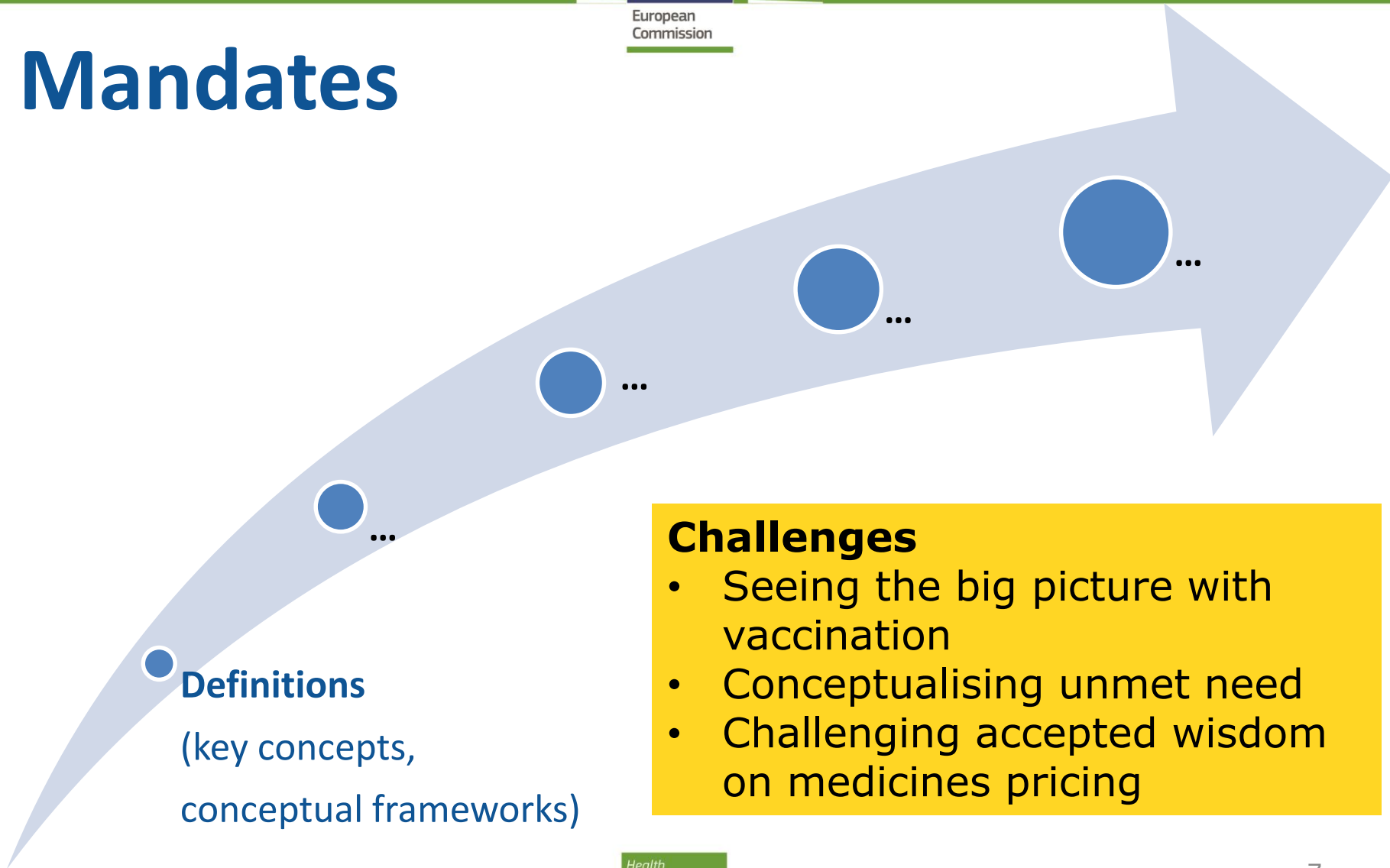
#### System of benchmarking:

- Quantitative benchmark: median value achieved by the best performing Member States
- Second level indicators: additional sources for a better overview of gaps in access to healthcare across the EU
- Qualitative benchmark: identification and analysis of the barriers in access to healthcare, including for groups at particular disadvantage

Healthier  
Productivity

# Factsheets

# Mandates



## Challenges

- Seeing the big picture with vaccination
- Conceptualising unmet need
- Challenging accepted wisdom on medicines pricing

# Vaccination: a whole system approach

## Ensuring vaccine safety

System for approval of new vaccines

## Monitoring outcomes

Monitoring of adverse effects

## Supplying materials

Procurement and distribution of vaccines

## Registering the population

Creation and maintenance of a register of those eligible for immunisation

## Generating and applying evidence

Decisions on vaccines to include, target groups, and schedules

## Evaluating progress

Monitoring of uptake, including identification of problems, including for disadvantaged groups

## Enacting legislation

Legal basis for immunisation, including whether it is compulsory, what sanctions exist for non compliance, and any exemptions

## Monitoring public attitudes

Who monitors public attitudes/ concerns and who responds to them?

## Funding

Payment for vaccines and for those administering vaccines

## Governing the system

Overall responsibility for achieving uptake, other actors involved, and mechanisms to hold them accountable



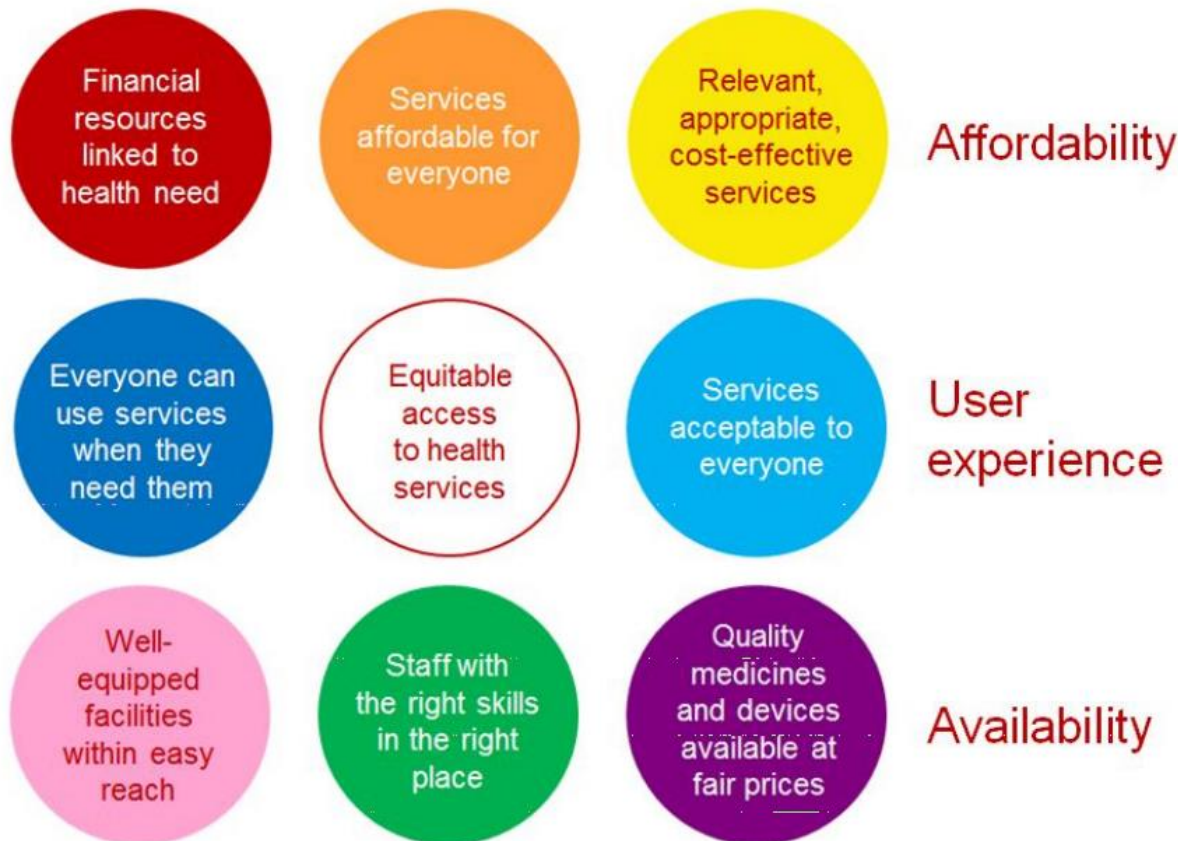
# What is access to care?

- *“Access is a multi-dimensional issue. Barriers to access can be found at the level of individuals, health service providers and the health system. Access is also affected by public policy beyond the health system – especially fiscal policy, but also social protection, education, employment, transport and regional development policy.”*



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# Factors influencing access



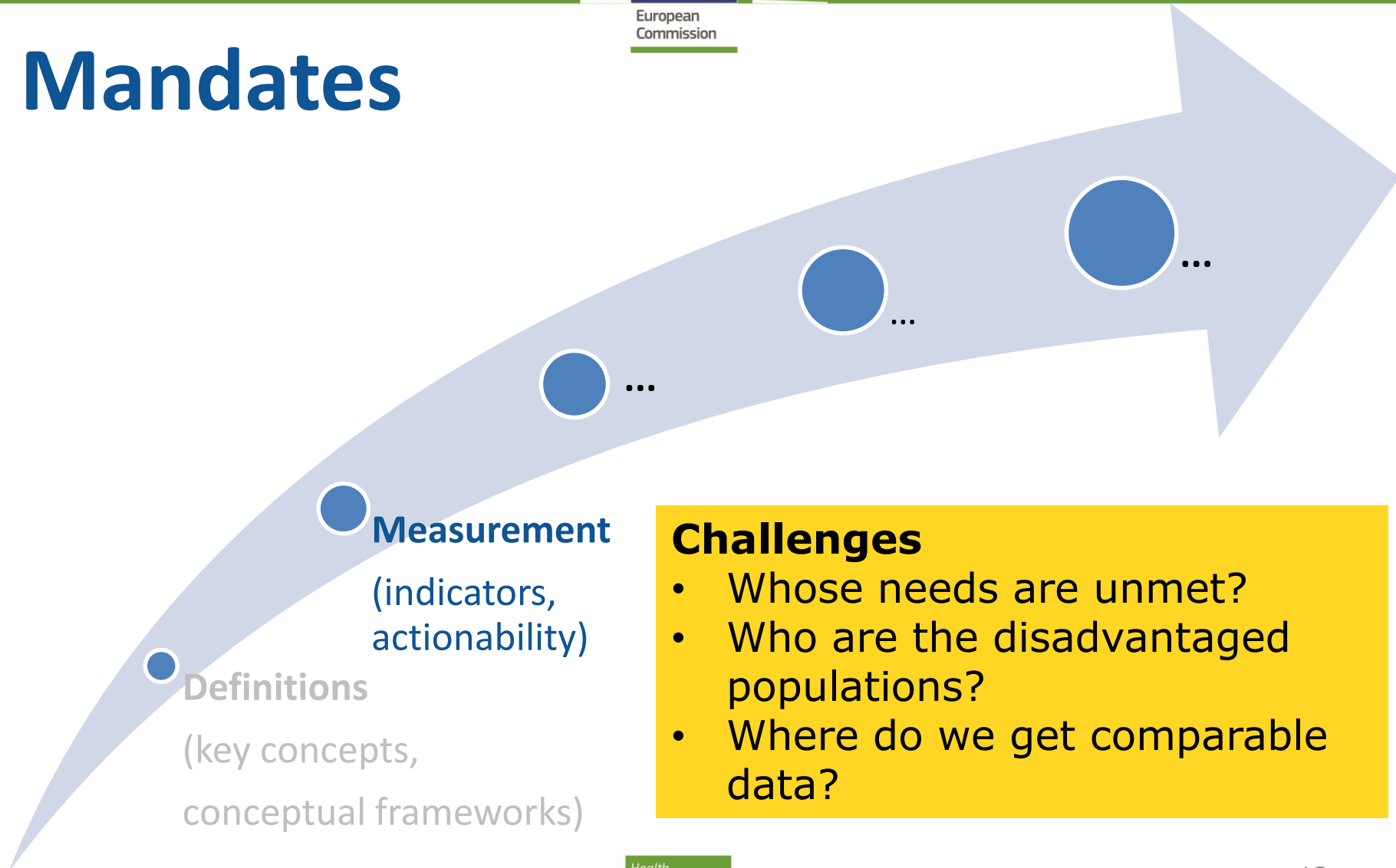
Source: Authors



# Paying for innovative medicines

- Widespread acceptance that the existing model does not work well enough
- But no agreement how to replace it – finding new ways to induce innovation “that matters”?
- Two separate questions:
  - How do we deal with uncertainty about the value of innovative medicines?
  - How do we create optimal payment schemes that reward innovation but ensure access?

# Mandates



**Definitions**  
(key concepts,  
conceptual frameworks)

**Measurement**  
(indicators,  
actionability)

## Challenges

- Whose needs are unmet?
- Who are the disadvantaged populations?
- Where do we get comparable data?



# Health services research

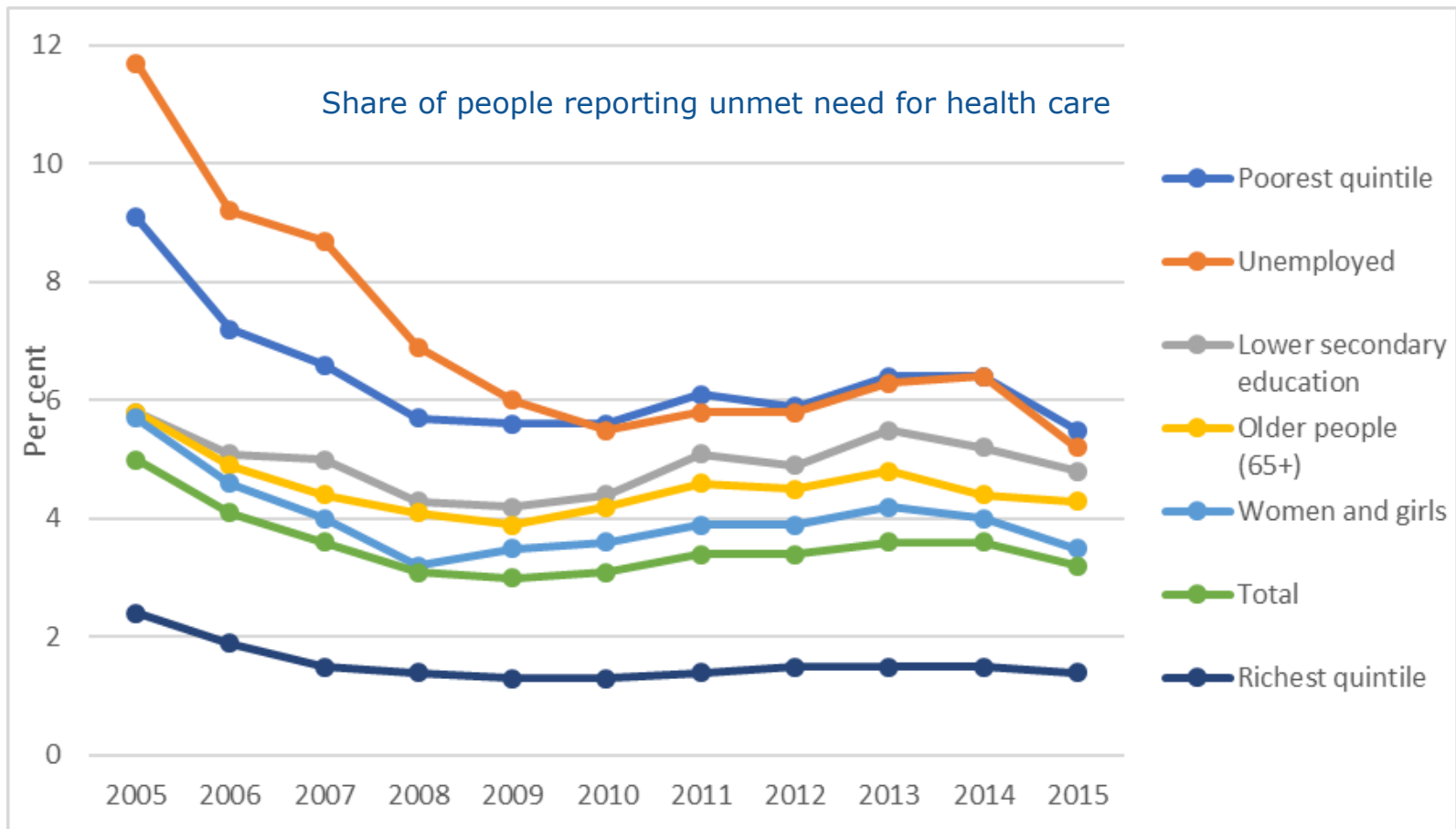
- European literature dominated by a small number of countries
  - UK, Netherlands, Denmark, Sweden, Italy
- Many important initiatives elsewhere likely to be overlooked



# A European health database?

- Unlike the USA, there are few sources of comparable EU wide data
- EU-SILC is a key source
- Annual rounds, with rotating panel structure
- But very little on health
- Samples small and limited power to undertake analyses within countries

# Whose needs are unmet?



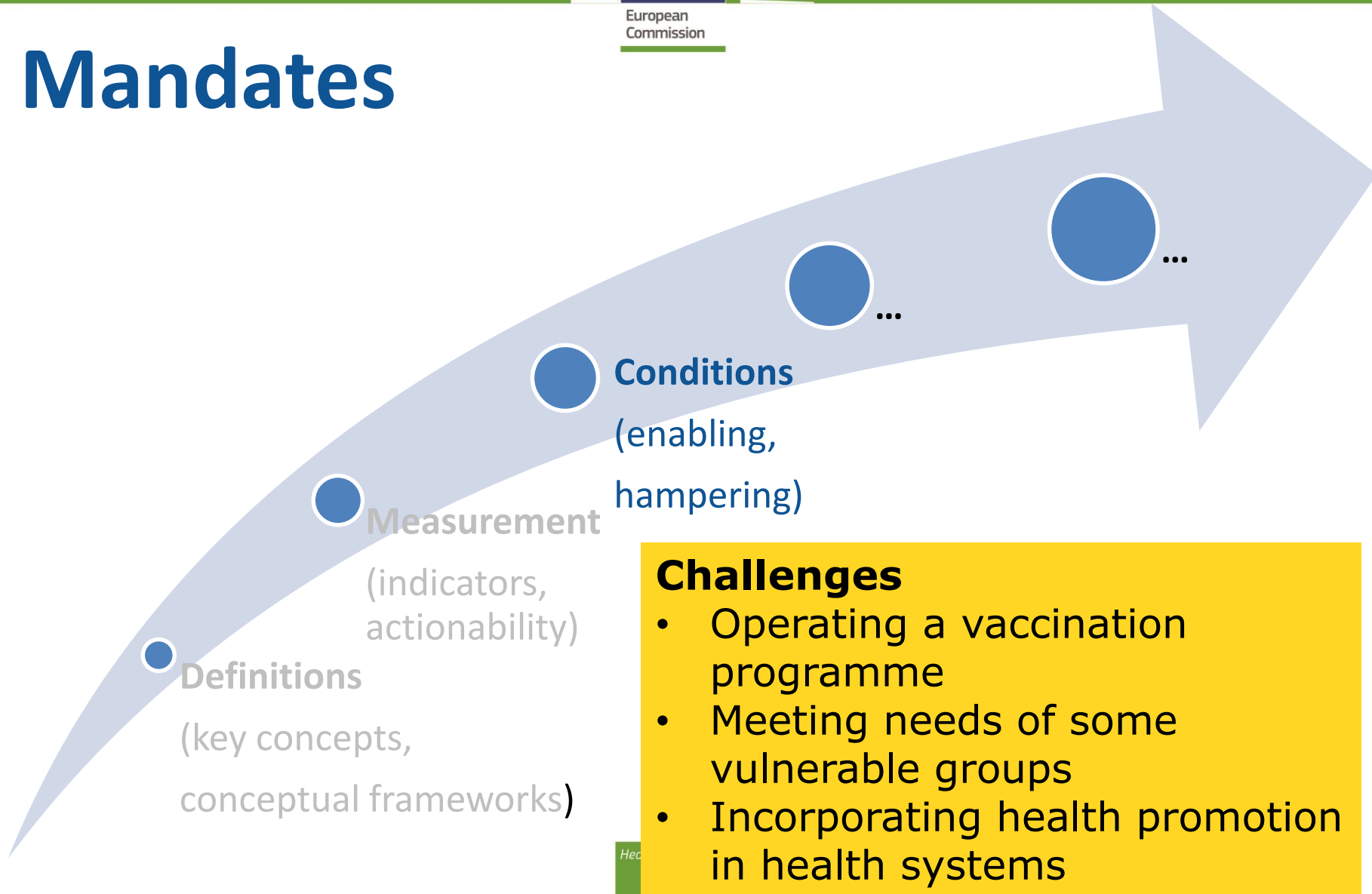
# Who are the disadvantaged populations?

- It varies among countries
  - Homeless
  - Migrants
  - Roma
  - ...
- And many in these groups are undocumented and invisible





# Mandates



# Vaccination

- Who can administer a vaccine?
  - Must it be a doctor? (No)
  - But some countries still insist that it is (see also Opinion on task shifting)
- Is there an accurate population register and do those administering vaccines have access to it?



# Tackling unmet need

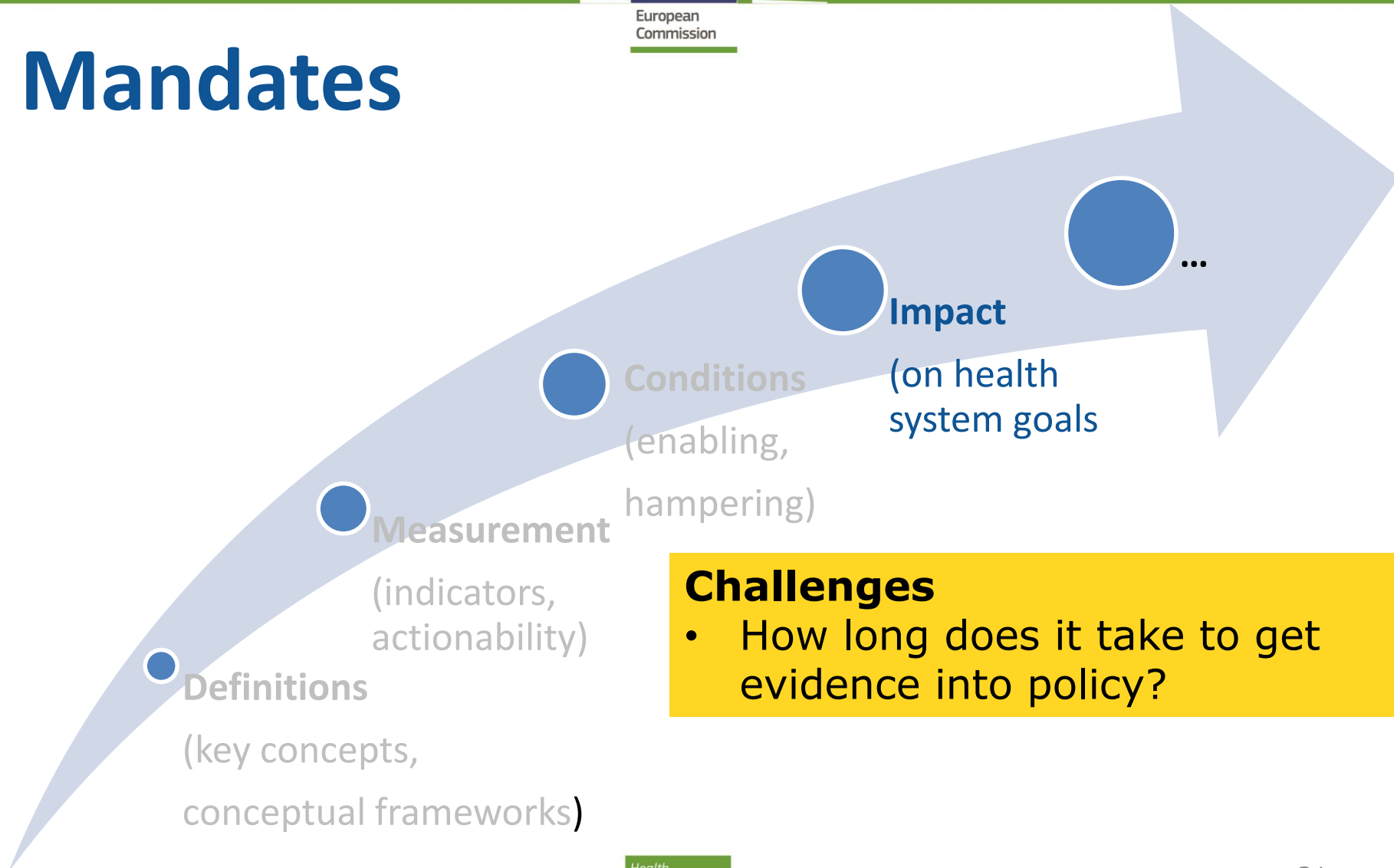
- Some governments restrict access to health care as a means to deter illegal migration
- Creation of a “hostile environment”
- This makes it very difficult to find ways to meet the needs of these people



## Incorporating health promotion in health systems

- How do you strengthen health promotion in systems where financial incentives are misaligned?
- How do you develop capacity to implement and evaluate health promotion in health systems?
- How do you make the case for investing in health promotion?

# Mandates



## Challenges

- How long does it take to get evidence into policy?

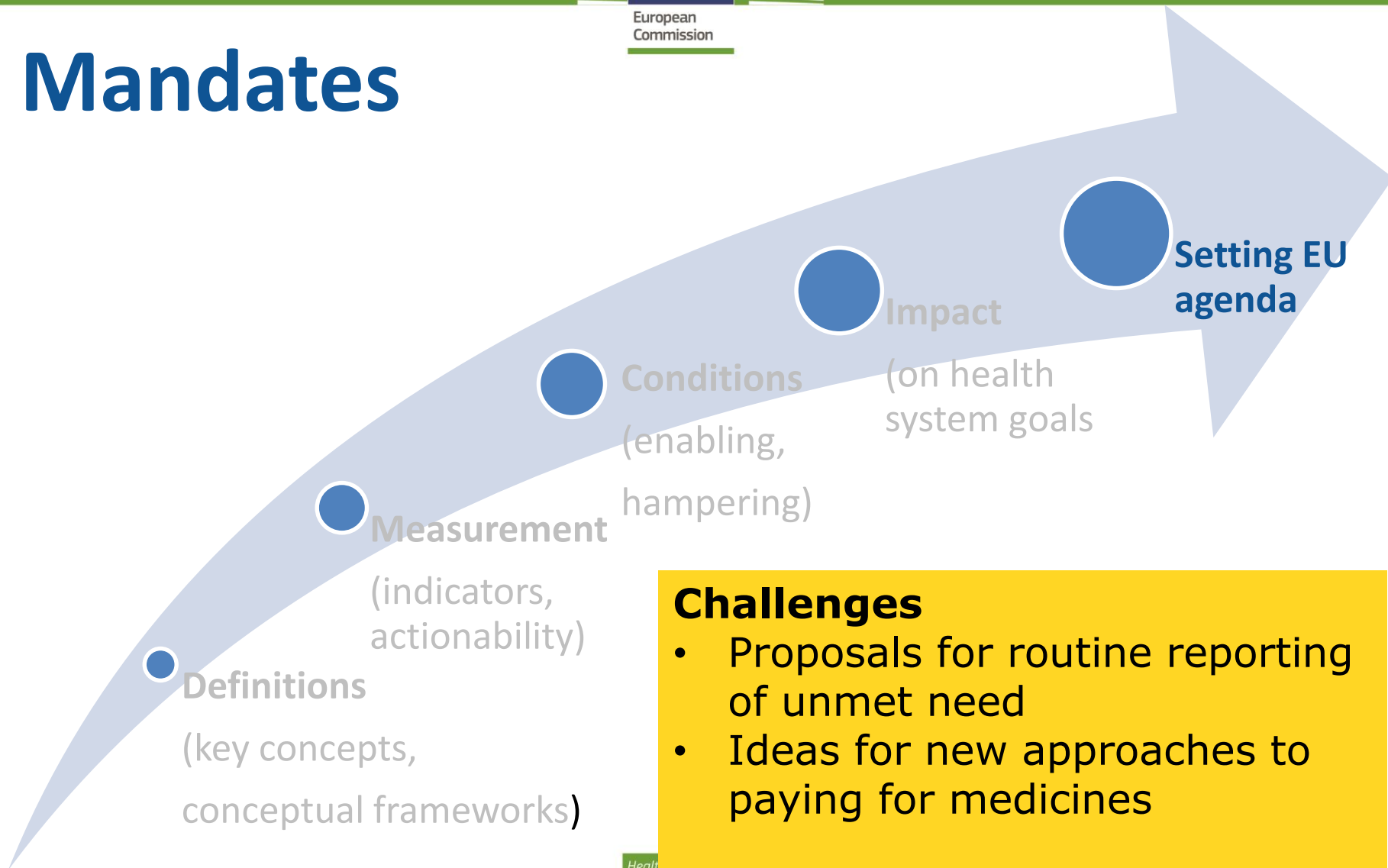


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- Public hearings ensure that Opinions are grounded in reality



# Mandates



## Challenges

- Proposals for routine reporting of unmet need
- Ideas for new approaches to paying for medicines



# Achievements

- Developing frameworks and concepts applicable to the EU to address pressing policy issues
- Shared understanding of the policy question
- Clarify concepts and terminology (use of the same words that have different meaning) across health systems





# Challenges

- Working with limited evidence
  - Most research is from a small number of countries in Europe (or from North America)
- Writing recommendations
  - What are the policy levers to turn evidence into action?
  - Who is the audience (and who can make things happen)?
  - Develop recommendations that apply to very different health systems