1. Record Nr. UNINA9910782144303321

Titolo Good practices in health financing: lessons from reforms in low and

middle-income countries // Pablo Gottret, George J. Schieber, and

Hugh R. Waters, editors

Pubbl/distr/stampa Washington, DC:,: World Bank,, [2008]

copyright 2008

ISBN 1-281-74465-4

9786611744656 0-8213-7512-1

Descrizione fisica xxiv, 504 pages : ill ; ; 23cm

Altri autori (Persone) GottretPablo E <1959-> (Pablo Enrique)

SchieberGeorge WatersHugh

Disciplina 362.1/04252091724

Soggetti Medical care - Developing countries - Finance

Health care reform - Economic aspects - Developing countries Medical policy - Economic aspects - Developing countries

Medical care, Cost of - Developing countries Health status indicators - Developing countries

Lingua di pubblicazione Inglese

Formato Materiale a stampa

Livello bibliografico Monografia

Note generali Description based upon print version of record.

Nota di bibliografia Includes bibliographical references and index.

Nota di contenuto Contents; Foreword; Acknowledgments; Executive Summary; Acronyms

and Abbreviations; Part 1 Assessing Good Practice in Health Financing Reform; Figure 1.1 Determinants of Health, Nutrition, and Population Outcomes; Box 2A Measures of Financial Protection in Tunisia; Figure 2A.1 Payments as Share of Total and Nonfood Expenditure in Tunisia, 2003; Table 2A.1 Catastrophic Impact of Out-of-Pocket Payments in Threshold Expenditure Shares in Tunisia, 2003; Table 3.1 Income and Health Spending, 2004; Table 3.2 Health Outcome and Delivery

Health Spending, 2004; Table 3.2 Health Outcome and Delivery

Indicators, 2005

Figure 3.1 Population Health Indicators Relative to Income and Spending Figure 3.2 Health Service Delivery Indicators Relative to Income and Spending; Figure 3.3 Total Health Spending Relative to

Income: Figure 3.4 Health Spending as Share of GDP and per Capita vs. Income: Figure 3.5 Revenue to GDP Ratio vs. Income: Figure 3.6 Government Share of Health vs. Income: Figure 3.7 Out-of-Pocket Spending Relative to Income; Figure 3.8 Hospital Bed and Physician Capacity vs. Income; Figure 3.9 Literacy vs. Income Table 3.3 Correlations between Population Health Outcomes and Income, Health Spending, and Literacy Levels Figure 5.1 Real GDP Trends per Capita, 1960-2005; Figure 5.2 Political Freedom Trends in Case Countries. 1900-2004: Part 2 Nine Case Studies of Good Practice in Health Financing Reform; Figure 6.1 Chile: Economic Growth, 1810-2005; Figure 6.2 Chile: Growth of Real GDP, 1997-2005; Figure 6.3 Chile: GDP per Capita, 2004; Figure 6.4 Chile: External Debt, 1996-2005; Table 6.1 Chile: Net Tax Revenue Structure, 1996-2004; Figure 6.5 Chile: Composition of External Debt, 2004 Table 6.2 Chile: Macroeconomic Performance, 2000-05 Figure 6.6 Chile: Population Structure, 1990, 2005, and 2020; Table 6.3 Chile: Disease Burden, 1993 (DALYs lost); Figure 6.7 Chile: Infant Mortality, 1960-2002; Figure 6.8 Chile: Life Expectancy, by Historical Period and Gender, 1950-2025; Figure 6.9 Chile: Poverty Compared with Other Latin American Countries, 1999; Figure 6.10 Chile: Infant Mortality and Life Expectancy Compared with Other Latin American Countries, 2004: Box 6.1 Chile: Key Political Milestones: Figure 6.11 Chile: The Mandatory Health Insurance System, 2006 Table 6.4 Chile: Key Health Spending Indicators, 1998-2004 Figure 6.12 Chile: Structure of Health Spending, by Source, 1998-2004; Table 6.5 Chile: Health Spending as a Percentage of GDP, 2004; Table 6.6 Chile: Composition of Spending on Social Welfare Programs, 2000-05: Table 6.7 Chile: Health Problems Covered under the GES, 2005-07; Table 6.8 Chile: Health Coverage Provided by Social Security System, 2005; Figure 6.13 Chile: Coverage of Social Security System, 1984-2005; Figure 6.14 Chile: Coverage of Open ISAPREs, 2006 Table 6.9 Chile: Services Provided by the FONASA and Average Annual Spending per Beneficiary, 2004

Sommario/riassunto

For humanitarian reasons and the concern for households' economic and health security, the health sector is at the center of global development policy. Developing countries and the international community are scaling up health systems to meet the Millennium Development Goals (MDGs) and are improving financial protection by securing long-term support for these gains. Yet money alone cannot buy health gains or prevent impoverishment due to catastrophic medical bills; well structured, results-based financing reforms are needed. Unfortunately, global evidence of "successful" health financing policy