Introduction

The Hepatitis C Partnership for Control and Treatment (Hepatitis C PACT) was launched in 2021 to tackle the disparities in access to diagnostics and treatment for viral hepatitis C in low and middle-income countries.

A Hepatitis Financing Coalition comprising over two dozen institutional members was launched in November 2021. It aims to:

- share experience, evidence, knowledge, and structured advice on the development of investment cases for hepatitis elimination
- support efforts to mobilize resources for hepatitis, including: country gap analyses and investment plans for hepatitis elimination, supporting the design of financing mechanisms, and outreach to interested funders.

Initial focus on Bangladesh and Cambodia.

Methods

Following the outcomes of the inaugural workshop on 3 December 2021, high-level assessments were conducted of countries’ health system financing in relation to hepatitis. National costing of resources required per year until 2030 to support elimination was conducted along with cost-benefit analyses. These form the basis for recommendations and design of appropriate finance mechanisms from a potential blend of domestic resources and donor, development bank, and private funding sources.

Results

- Catalytic funding from external sources may be required to build sustainability. While funding limitations at the country level are real, slow progress toward HCV elimination is linked to a lack of prioritization among donors, investors, and governments.
- New champions are urgently needed to build bridges for new funding and political will.
- New messaging is critical to attract new champions. Country-specific short-term needs must be balanced with long-term aims.
- Fiscal analyses including cost-benefit are critical to make the investment case e.g., in Egypt fiscal analyses persuaded stakeholders by highlighting savings projected from aggressive hepatitis screening and treatment.

A variety of proven financing approaches have high likelihood of success but remain underutilized, including: revolving funds for pooled procurement; advance market commitments; concessional loans; volume guarantees; and targeted national health financing/strategic purchasing approaches.

Conclusions

Proven approaches for sustainable financing of health priorities exist. There is significant interest among partners to design these to address country gaps and to increase political will. The new Hepatitis Financing Coalition of Hepatitis C PACT aims to achieve new financing outcomes.

Framework for sustainable financing for health

- Members and Observers
- World Hepatitis Summit
- 7-10 June, 2022

Example Mechanism 1: Revolving Fund For Commodities

- Fund (held by partner org) pays WAO-prequalified manufacturers on credit terms.
- Distributor pays the fund holder on agreed terms, which may include advance credit.
- Clinical/Health/Pharmacies patients are charged at agreed rates, which may include extended credit.

Example Mechanism 2: HCV Impact Bond

- Governments pay back investors over lifetime of the bond.
- Health budgets make savings through lower incidence of related care.

Example Mechanism 3: Commodities Impact Fund

- WHO might fund:
  - Grants: traditional donors, DFIs and development banks, IDB, USAID, SDC, UNCHR, etc.
  - Risk-sharing: commercial insurers, pool insurance, etc.
- For first loss: DFIs, multilateral development banks, etc.

138 SIDs implemented in 25 countries. A 2022 review identified 11 SIDs for NCDs, implemented in 8 countries with 3 achieving their intended impact (Mulse ESG, Atun R, et al.)