Distinguished participants, Colleagues, Ladies and Gentlemen,

It gives me great pleasure to welcome you to this consultative meeting that aims to identify which options to purchase or provide for universal health coverage, focusing on the design, financing and delivery of health service packages that respond to the health needs of populations in our region.

Target 3.8 of the Sustainable Development Goals (SDGs) which is to “achieve universal health coverage, 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” commits Member States to the goal of achieving universal health coverage. Achieving universal health coverage by ensuring that all people, including refugees, displaced populations and other vulnerable groups, in the Region have equitable access to quality health care without undergoing financial hardship, is accordingly identified as a strategic direction in the ‘Roadmap of WHO’s work for the Eastern Mediterranean Region for 2017–2021.’ ‘The Framework for action on advancing universal health coverage in the Eastern Mediterranean Region’ also calls on Member States to “design and implement a service package of highest priority evidence-informed person- and population-based interventions”, as part of their actions to pursue the goals of universal health coverage.

Expanding coverage to the entire population necessitates prioritizing what to include or not include in a package of health benefits, which would be financed using a national prepayment arrangement and provided through appropriate delivery channels to vulnerable populations as a priority. Identifying what to purchase or provide in terms of programmes, services and interventions remain a big challenge for many countries worldwide and for countries of the Region in particular. This is true regardless of the level of socioeconomic development. Defining the ‘right’ package does not only ensure equity in service provision but equally facilitates efficient use of scarce health resources in a manner to enhance sustainability.
The WHO Regional Office has been working to develop regional capacities in strategic purchasing, focusing on developing and implementing innovative provider payment methods. In addition, the Regional Office has also been working with the Disease Control Priorities Network on the DCP3 project to build regional and national capacities in economic evaluation techniques to identify the most cost-effective utilization of scarce health resources. Evidence from the DCP3 project has been used to inform the development of not only the global ‘Universal Health Coverage Package’ and a ‘Fiscal and Intersectoral Package’ for interventions beyond the health sector, but the regional ‘Universal Health Coverage Priority Benefit Package’.

This consultative meeting aims to assess the work undertaken so far globally and in the Region to share experiences, good practices and the lessons learnt. It brings together renowned global experts, policy-makers, health financing and service provision practitioners, civil society organizations and development partners to share and discuss global evidence and local experiences related to defining a benefit package for universal health coverage. The lessons learnt from these experiences need to be adapted to the specific contexts of countries in our Region.

Finally, health sector reform is a complex terrain that requires sustained political commitment. At a time when several countries in the Region are going through political and socioeconomic transition, placing universal health coverage high on the development agenda and defining what to cover as part of any priority benefit package is timely.

I look forward to your input during the discussions on how best to take this important issue forward in our Region.

I wish you a successful meeting.