

2018/SOM3/HLM-HE/018

Innovative Finance to Expand Access to Health Care

Purpose: Information Submitted by: Merck



Eighth High Level Meeting on Health and the Economy Port Moresby, Papua New Guinea 16-17 August 2018



FOR MORE THAN A CENTURY, MSD HAS BEEN INVENTING TO SOLVE SOME OF THE GREATEST CHALLENGES TO PEOPLE'S HEALTH AND WELL-BEING AROUND THE WORLD.





BUSINESSES

Innovative medicines and animal health



2017 R&D EXPENSE

\$7.3 billion (non-GAAP); more than 10 disease areas



HEADQUARTERS Kenilworth, NJ, U.S.A. operating in more than

140 countries

MRK

Merck & Co., Inc.

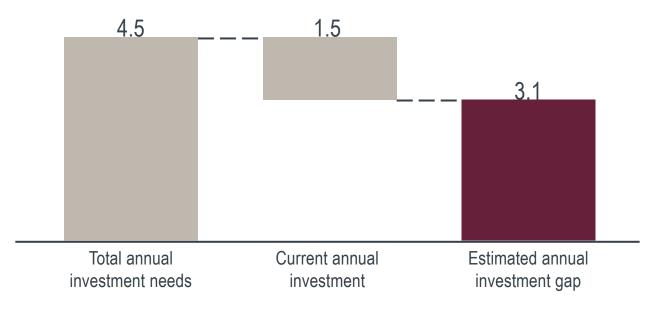
\$150 billion

EMPLOYEES



Closing the SDG funding gap will require greater private sector investment

There is a projected ~3.1 trillion annual shortfall in funding for the post-2015 global development goals across health, education, food security, climate change and infrastructure



Estimated investment needs in key SDG sectors¹ \$US (trillions)

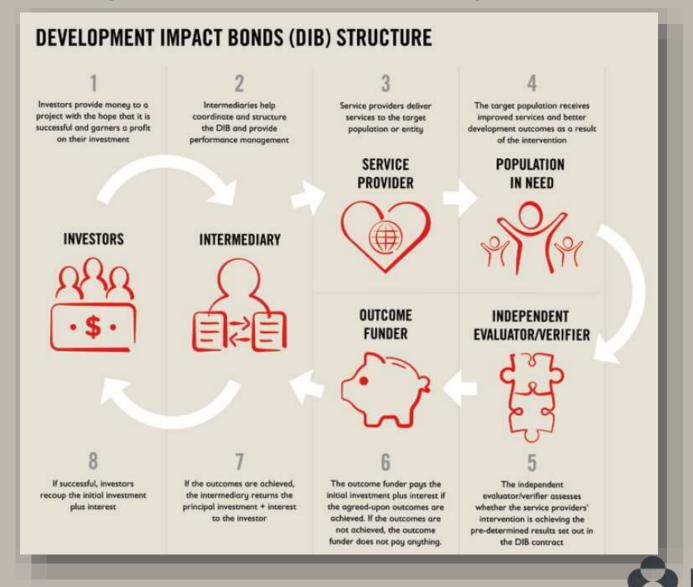
The issue funding gap is **not due to insufficient resources**.

It is due to a **failure to attract new investment** in health and development.

Closing the funding gap requires innovation in novel financing mechanisms that have the power to mobilize private sector capital.



Development impact bonds can help attract private investment in health and help donors/governments spend effectively - on what works



INVENTING FOR LIFE

MSD for Mothers in India





Utkrisht | How it works

Improving the quality of private maternal health care in Rajasthan in order to advance efforts in India to achieve
Universal Health Coverage and meet SDG targets for maternal and newborn health



- Investors provide the implementation manager and service providers with working capital to improve the quality of maternity care in a high need state (Rajasthan)
- The independent verifier assesses service providers' achievements to trigger outcome payments
- Outcome funders USAID and MSD for Mothers – pay back the investor the original amount invested, plus returns, if service providers are successful



Combining Quality With Access To Care

Delivering better quality care

Testing innovations for quality improvement

Building sustainable quality assurance





Generating demand for quality care



National health insurance schemes **JSY**

State health insurance schemes







MSD for Mothers in Asia Pacific





INDONESIA

Project HOPE works to increase access to family planning, promote safe birth practices and reduce anemia among female factory workers.

INDONESIA

Jhpiego is examining the barriers and facilitators private health facilities face in offering the full range of family planning methods to women immediately after childbirth.

MYANMAR

Jhpiego improves health outcomes for women and newborns by strengthening midwifery education and training.

PHILIPPINES

The Zuellig Family Foundation reduces maternal mortality in Samar province by promoting health seeking behaviors and strengthening local health systems.

PHILIPPINES

The UN Foundation focuses on recruiting companies to integrate family planning into workplace education programs.

VIETNAM

PSI broadens contraceptive options for women and their partners by registering underutilized methods and distributing them to underserved women.

AUSTRALIA

Australian College of Midwives
helps healthcare organizations
work more effectively with
Indigenous communities by
developing holistic approaches to
high-quality maternity care.

INDIA

Reducing maternal mortality across 6 states by supporting a quality certification, and mobile-based solutions that provide evidence-based guidelines and feedback from other mothers.

Back Up



India | Our Challenge

Maternal Health



Every 10 minutes, a woman dies due to complications of pregnancy and childbirth in India



15% of all maternal deaths occur in India – 45,000 annually



Institutional delivery rates are rising, but have not reduced maternal mortality as much as anticipated



Almost a quarter of women who do not want to become pregnant are **not using modern contraception**

The Role of Private Healthcare



India has a mixed health system; when women deliver in facilities, a quarter of rural women and half of urban women choose private care



India's private providers are diverse, fragmented, and poorly regulated



Clinical maternity care in the local private sector is **inconsistent**, and there is **no standardization** in managing obstetric care



Implications for MSD

