CREATIVE FINANCING SOLUTIONS TO SCALE UP PREVENTION & TREATMENT OF HBV/HCV
PUBLIC HEALTH TARGET

WHO TARGETS TO CONTROL VIRAL HEPATITIS BY 2030

- A 30% reduction in new infections of hepatitis B and C by 2020, and a 90% reduction by 2030.
- A 10% reduction in deaths due to hepatitis B and C by 2020, and a 65% reduction by 2030.
- Increasing childhood hepatitis B vaccine coverage from 81% to 90% by 2020, and increase coverage of birth-dose hepatitis B vaccine or other interventions to prevent mother to child transmission of hepatitis B from 38% to 50% in 2020 and 90% in 2030.
- Increase the proportion of injections carried out safely worldwide from 5% today to 50% in 2020 and 90% in 2030.
- Treat 5 million people with hepatitis B by 2020 and provide treatment for 80% by 2030.
- Treat 3 million people with hepatitis C by 2020 and provide treatment for 80% by 2030.

KEY NUMBERS

- Reduce from 6-10 million new cases in 2015 to less than 1 million in 2030.
- Reduce from 1.4 million deaths in 2015 to less than 500,000 deaths in 2030.
ATTITUDES OF STAKEHOLDERS TO INNOVATIVE FINANCING MODELS

266 relevant organizations were identified that deal with financing and/or healthcare in Low and Middle Income Countries (LMICs).

4 main categories of stakeholders:

- **Charity/Philanthropy/Foundations**
- **Finance/Banking/Investment**
- **Government**
- **Others**

**KEY FINDINGS**

- **Funders’ insights:**
  The most important financial criteria funders look at are:
  - Ability to provide a business plan
  - Financial viability & sustainability
  Key social impact criterion:
  - Tangible local outcomes

- The stakeholders the most involved in innovative financing are Charity/Foundation/Philanthropy and Financing/Banking/investment.

- Government stakeholders are the least informed on innovative financing.

- All stakeholder categories required more information and data in order to increase understanding and interest in innovative financing.
THE ROLE OF INNOVATIVE FINANCING MECHANISMS

Scaling up prevention and treatment of Viral Hepatitis on a global level provides a new opportunity for private investors, foundations, non-profit organizations and national governments to work together on a project with an important societal gain.

Existing funding bodies are heavily burdened by their current activities and bound by their set priorities and commitments to deliver in their specific fields. It is important that the international community comes up with new funding strategies to address HBV and HCV.

This report explored 25 mechanisms of financing and the feasibility for employment in the area of hepatitis B and C. The report describes each of the following financing approaches and provides an analysis of their application to hepatitis B and C.

- **Creation of funds**
  (Reallocation of existing funds, side funds, creation of new specific funds)

- **Financial protection of individuals**
  (Micro-health insurance, health savings account)

- **Social impact investments**
  (venture philanthropy, social impact bonds, social franchising, health cooperatives)

- **Mechanisms to enhance affordability**
  (Tiered pricing, voluntary licensing, Advance Market Commitments)

- **Performance based mechanisms**
  (results-based credits, buy-downs)

- **Small contributions, multiple donors**
  (Crowd funding, dedicated taxes on specific commodities)
WHAT WOULD BE THE BEST COMBINATION OF INNOVATIVE FINANCING MECHANISMS?

A mixture of funding approaches may have the most effect:

PUBLIC PRIVATE PARTNERSHIPS PROVIDE AN EFFICIENT STRUCTURE

The experience we now have on performance based financing should guide the development of future Public-Private Partnerships (PPPs). A new type of PPPs not necessarily focused on the development of infrastructure, could help bridge the funding gap.

SHARED VALUE APPROACHES

This is an efficient way of connecting funding institutions with local employment implementers. Pharmaceutical companies have shown interest in partnerships with governments especially in countries with a strong Viral Hepatitis policy.

MICRO-FINANCE

The network of contacts developed through the operation of micro finance projects is an efficient way of connecting funding institutions with local implementers able to deliver targeted services to the “hard to reach”.

PATH TOWARDS PREVENTION AND TREATMENT OF HBV/HCV

1. STRENGTHEN POLITICAL WILL
Governments need to develop national control programs. Political will is an important indicator for potential funders.

2. AVAILABILITY OF TREATMENT IS ONLY ONE PART OF THE PICTURE
All stages of the therapy cycle are important (screening/patient identification/therapy compliance/support plans)

3. NO ONE FINANCING MECHANISM IS THE BEST
Only an adequate combination of funding mechanisms adapted to the context of the country, payers and patients can effectively target country specific challenges.

4. PARTNERSHIP IS THE WAY FORWARD
Financing mechanisms will have the most success if embedded in public private partnerships.

5. MORE INFORMATION IS NEEDED ON THE DIFFERENT INNOVATIVE FINANCING MECHANISMS
Innovative funding should be further discussed with viral hepatitis stakeholders. Financial stakeholders should also be encouraged to take part in the viral hepatitis discussion.

For more information, you can visit the IFPMA website: www.ifpma.org and the VHPB website: www.vhpb.org