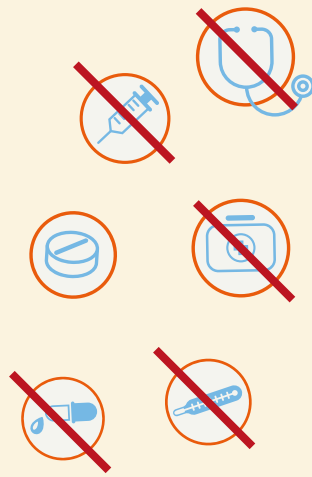




WHAT TO FINANCE  
IN HEALTH AND  
AT WHAT PRICE?

# MODULE 2

Summary of the main ideas in this module

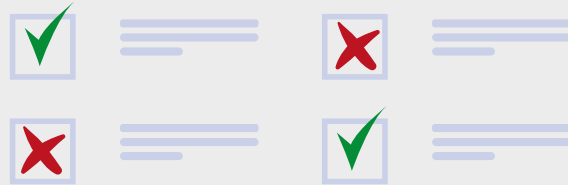


➤ The gap between resources and needs leads to **rationing** of the health services. This can be **implicit** or **explicit**.



➤ Some signs of implicit rationing are: waiting lists, lack of timely medical care, poor quality and high out-of-pocket expenses.

➤ Explicit rationing or explicit priority setting, on the other hand, allows us to **define which services will be financed** for the population with the available resources and which ones will not be.

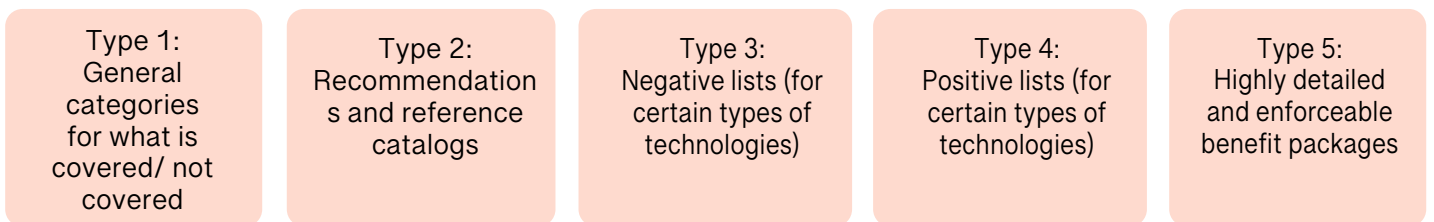


➤ Explicit priority setting can be implemented in **different ways** and with **varying levels of detail**.



➤ Some ways to implement explicit priority-setting decisions are:

Level of “*explicitness*” of the benefits that are financed →



Combinations

+ → Transparency, accountability, empowerment for what is essential, use of evidence, more health with the resources

- → Technical complexity, political exposure, restriction on physician's autonomy.