



Egypt Laying the foundations: making UHC a reality

On Easter Monday in 1859, the foundation was laid for the new city of Port Said, on Egypt's northern coast. It was the beginning one of Egypt's most ambitious projects of modern times – the construction of the Suez Canal. One hundred sixty years later, Port Said is laying the foundation for another ambitious project: universal health coverage for all Egyptians.

The right to health is explicitly enshrined in Egypt's new constitution, which also defined the principle of social health insurance. Since the law was passed in 2014, the Egyptian government has been working hard, with the support of the WHO Country

Office in Egypt, to operationalize this principle and make UHC a reality. Port Said will be the first to implement Egypt's new universal health insurance programme as part of making coverage available to all.





Building a foundation

There are three aspects to UHC: accessibility, availability, and affordability. While Egypt's health sector reforms address all three aspects of the health care system, for many people the biggest barrier to accessing health care is affordability.

So one of the top priorities of the reforms is to ensure that everyone can afford care by creating and implementing a new universal health insurance programme.

Putting a new national health insurance programme in place required overhauling Egypt's health sector, which included changing governance structures and revamping health organizations. WHO worked closely with the Egyptian government on the development of the new law and is collaborating closely with various ministerial and UHI committees on the transformation process.

The new law, which was voted in December 2017, mandates the separation of financing from the provision of health services. It also establishes three new health structures: a Universal Health Insurance Organization to manage the insurance programme; the Health Care Organization, which oversees the provision of services; and the Accreditation and Oversight Organization, which is responsible for setting quality standards, monitoring quality, and granting accreditation.

Using as a basis the six building blocks of health systems as developed by WHO, the work included carrying out costing and actuarial studies to inform UHI financing as well as technical discussions and professional dialogues.

WHO also provided capacity-building workshops for government officials to enable them to regularly update the national health accounts and financial risk protection indicators.

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The result of all this work is a law which makes universal health insurance compulsory for all, while also securing credible funding, introducing new, diversified funding mechanisms, reforming pooling and purchasing arrangements, and redefining cost-sharing structures.

The process of developing the law engaged a number of different stakeholders, including civil society.

From law to reality

Work on improving access to health services, meanwhile, is moving ahead steadily in Port Said. With the assistance of the government, health facilities are being renovated, equipment is being secured for hospitals and other facilities, and registration of programme participants has begun.

To assist with this last workstream, WHO is supporting the development of the health information system, which includes indicator lists, civil registration and vital statistics, and electronic medical records.

WHO is also contributing at the local level by conducting capacity-building workshops for general practitioners, dentists and nurses in Port Said. It has also introduced Patient Safety Friendly Hospital initiatives in a number of hospitals and primary health care facilities in the governorate. Community engagement is also a key element in the implementation of the new insurance law.

WHO is working with the governorate to design a public awareness campaign along with avenues for community participation. In particular, the government is seeking to address the needs of the most vulnerable segments of Port Said's population.





Primary health care model

Egypt is addressing the other two aspects of UHC, accessibility and availability, by building their health system around a primary care model, with a goal of addressing the majority of people's health needs through community-based care.

Much of the work to build a primary care-based model has already taken place over the last two decades. Historically, Egypt had placed a disproportionate emphasis on specialized care, but beginning in 1997, a series of reforms led to the creation of the family health model, with the family classified as the basic unit of care.

This was characterized by a responsive and comprehensive package of services that included maternal and child health services, family planning, immunization and management of childhood illnesses.

This improved the quality of PHC service delivery, and resulted in sharp declines in both maternal and under-5 mortality rates. However, even with these reforms, a substantial proportion of the population remained unable to afford health care. The previous health care system provided insurance for only approximately 58% of the population; hence, the need for a new law which provides insurance for everyone.

The new universal health insurance law reinforces the primary health care model. It stipulates that primary health care facilities are to serve as the first level of contact, and that primary care physicians should receive specialized training in family medicine.

Conclusion

By making health insurance available to everyone, and reinforcing a community-based approach, Egypt will be poised to meet the changing needs of its growing population. Port Said was once known around the world for having a vibrant and diverse population; perhaps now it will be known for having a population that is as healthy as it is vibrant.





EGYPT

FACT

The right to health is explicitly enshrined in Egypt's new constitution. Port Said will be the first to implement Egypt's new universal health insurance programme to make health services available to all.

WHY IT MATTERS

The previous health system only provided insurance for about 58% of the population, and many people could not afford to access health services.

EXPECTED IMPACT

Health insurance for everyone means that the whole population can access the health services they need, with an emphasis on primary care.

IN PRACTICE

The Egyptian government worked closely with WHO on the development of the new law on health insurance. Now WHO is collaborating with ministries and universal health insurance committees on the transformation process.