The Regional Committee,

Recalling World Health Assembly resolutions WHA58.14, WHA58.33, and WHA62.12, and its own resolutions SEA/RC48/R6, SEA/RC50/R3, SEA/RC53/R3 and SEA/RC56/R5, on sustainable health financing, alternative financing of health, universal coverage and social health insurance, and equity in health and access to health care,

Noting that the World Health Report 2010 will cover the issue of financing for universal coverage, and aware of the Health Financing Strategy for the Asia-Pacific Region (2010-2015),

Reaffirming the need to build sustainable national health systems, strengthen national capacities, and fully honour financing commitments made by governments and their development partners, in order to fill the resource gaps in the health sector and protect people’s health with sustainable health financing,

Concerned that the high level of out-of-pocket payment for health by households in Member States of the Region is one of the major sources of catastrophic health expenditure contributing to impoverishment,

Recognizing that irrespective of the sources of health-care finance, the basic principles in financial-risk protection are prepayment and pooling of resources and risks,

Acknowledging that a number of Member States in the Region are pursuing various health-financing reforms that involve a mix of approaches, including introduction and extension of social health insurance for formal and informal sector employees, extension of financial protection to the poor and vulnerable and community-based health financing schemes, and
Recognizing the important role of legislative and administrative measures in reforming health-financing systems with a view to achieving universal coverage,

1. URGES Member States:

(1) to further enhance investment in national health systems through the extension of health-care delivery systems, with the focus on primary health care, and minimize the geographical and financial barriers in access to care by the population;

(2) to take steps to analyse health-care financing and service provision in order to identify gaps in achieving better financial-risk protection for the poor and the vulnerable, and extension of coverage to persons in the formal and informal sectors;

(3) to seek national consensus and mobilize social and political support as well as financial commitment towards achieving universal health coverage with sustainable health financing for the whole population;

(4) to strengthen national capacity to facilitate evidence-based policy formulation and system design for universal health coverage that is affordable and leads to equitable and efficient health systems; and

(5) to actively participate in the development of the South-East Asia Regional Strategy on Universal Health Coverage; and

2. REQUESTS the Regional Director:

(1) to continue to support the work of the Health Economics and Financing Observatory on national health financing and expenditure reviews for identifying strengths and gaps in achieving universal health coverage and compiling them into a regional report;

(2) to prepare a draft regional strategy on universal health coverage based on technical evidence and the context of Member States in the Region, and to convene regional consultations in order to finalize the regional strategy; and

(3) to submit the Regional Strategy on Universal Health Coverage to the Sixty-fourth Session of the Regional Committee in 2011 for its consideration.

Fifth meeting, 10 September 2010