# Report Identification of Scaling up Strategies for Health Services leading to Universal Health Care Kathmandu, 2009

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**Background**

At the district hospitals, only some targeted groups can access the free health care services. In the light of this prevailing scenario, it is now absolutely necessary to scale up the current free health care services so as to ensure and expand the accessibility and affordability of these services for the poor and the vulnerable groups. This study is, therefore, aimed at identifying the strategies and on the basis of which to make suitable recommendations with the hope that these would help the planners at the central level to scale up the free health care services at district level hospitals and also at the same time help them undertake the time-suited situation analysis of the possible referral hospitals.

**Methods**

The study was conducted in three designs 1) Study and cost analysis of district-level hospitals 2) study of referral hospitals on free health care and 3) Study of cooperative- based hospitals on health finance policy and its actual implementation. The study period was between July to October 2009. The study was conducted in the District Hospitals-6, Referral hospitals-3 and Cooperative Hospitals-2.

**Results**

The universal free care at District Hospitals is a relatively resource demanding strategy requiring around Rs.14 million per District Hospitals and a total program cost of Rs. 824 million. For this purpose an additional Rs. 189 million at 2010/11 price above without program scenario will be required under medium demand projection if this scaling up strategy is implemented. The other alternative is the free care to children below five years and requires an additional budget of Rs.0.5 million per District Hospital and an additional program cost of Rs. 29 million under medium demand scenario. The third scaling up strategy of providing free care at District Hospitals in the mountain districts requires an additional Rs. 3.4 million per District Hospital and an additional program cost of Rs. 55 million for implementation under medium demand scenario.

**Conclusions**

The scaling up of free health care at district hospitals is necessary as a first step toward providing universal access to health care but it should be preceded by sound planning to develop institutional capacity and infrastructures. If the government really wants to implement and scale up free health care effectively, then the new Division and section of free health care under social security program must be established and operationalize without further delay.

**Keywords:** affordability; availability; district hospitals; free health care; free health care policy; scaling up strategies.