

THE SUSTAINABLE FINANCING INITIATIVE IN VIETNAM

Funded by the United States President's Emergency Plan for AIDS Relief (PEPFAR), the Sustainable Financing Initiative for HIV/AIDS (SFI) aims to increase sustainability of the HIV response by promoting shared financial responsibility with host country governments. Since 2014, the U.S. Agency for International Development (USAID) has implemented SFI in 16 countries and two regional programs, with a budget of nearly \$48 million.

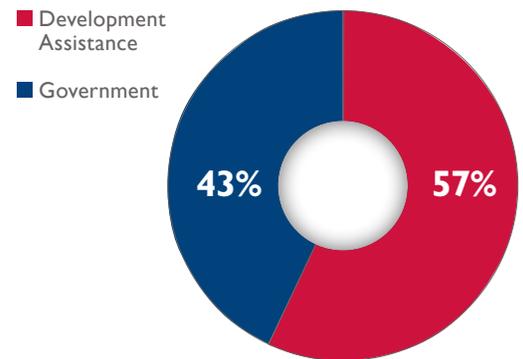
Vietnam has made significant progress in responding to the HIV/AIDS epidemic over the past 25 years. In 2019, about 230,000 people were living with HIV (PLHIV) and the prevalence of HIV in the general population was 0.24 percent.¹ The Government of Vietnam (GVN) is committed to using domestic resources to expand care to PLHIV by supporting enrollment in social health insurance (SHI), expanding HIV prevention and testing, and increasing access to antiretroviral treatment (ART).

SFI supported the GVN by providing technical assistance to the Ministry of Health and Vietnam Social Security to integrate HIV services into SHI and the public health system. SFI also helped the government plan and finance centralized antiretroviral (ARV) procurement, payment, and reimbursement through SHI. It also supported evidence-based research and advocacy for increasing GVN funding for the HIV response. Since 2016, Vietnam has secured \$4.9 million in additional PEPFAR funding to build on the work begun under SFI. These efforts represent important milestones on the road to a sustainable HIV response. This document presents achievements as of September 2019.

AT A GLANCE

HIV/AIDS Response Funding Sources in 2018²

Vietnam total: \$90 million



How SFI Contributes to a Sustainable HIV Response



SFI leveraged **\$2.4 million** from local governments for SHI premiums and copayments for ARVs.



SFI **increased budget** execution and SHI commitments for ARVs by **\$15.4 million** and saved **\$2 million** through improved procurement processes.



SFI helped **integrate 99.7% of HIV facilities into the SHI** reimbursement system.



PHOTO: LINH PHAM FOR COMMUNICATION FOR DEVELOPMENT LTD.

Spotlight: Expanding Access to Health Care

SFI's work in Vietnam has been critical in increasing access to HIV services and strengthening financial protection for vulnerable populations. SFI facilitated PLHIV enrollment in SHI and promoted SHI's integration to include reimbursement for ARVs. Already 90 percent of PLHIV are enrolled in SHI. Beneficiaries say that the insurance has made a significant difference in their lives.

"I must say that without the SHI card, I might have died already... I sometimes got serious illnesses and needed to go to a hospital for a long stay. Thanks to the SHI card, my life has been saved until this moment. As I am from a poor household, SHI has covered almost 100 percent of my treatment." – An ART patient from Ninh Binh province

< This woman weaves rattan baskets to earn an income to support her HIV-positive family of three.

¹ PEPFAR (2020). Vietnam Country Operational Plan (COP/ROP) 2020. Strategic Direction Summary. April 14, 2020.

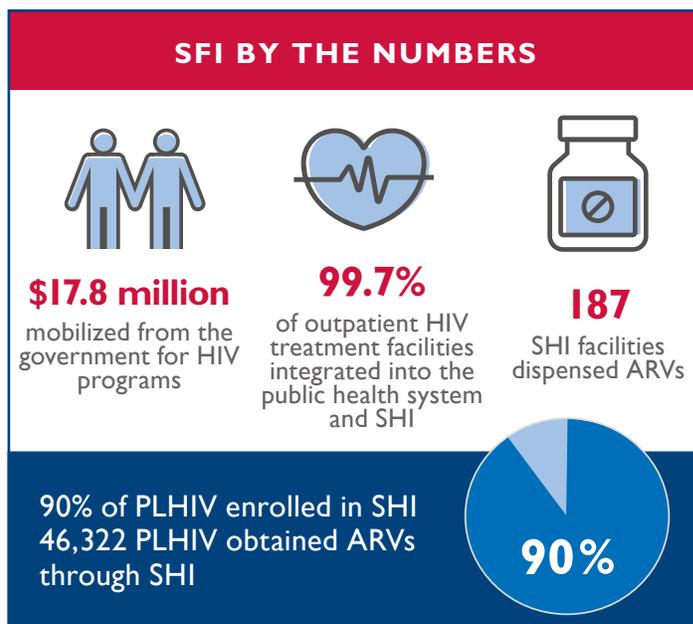
² HIV Resource Alignment (2018).

BETWEEN 2016 AND 2019, SFI FOCUSED ON TWO KEY AREAS IN VIETNAM: PUBLIC FINANCIAL MANAGEMENT AND FINANCIAL PROTECTION. SFI PROVIDED TECHNICAL ASSISTANCE TO THE GOVERNMENT OF VIETNAM TO IMPROVE ARV PROCUREMENT AND INTEGRATION OF HIV CARE AND TREATMENT SERVICES INTO THE COUNTRY'S SOCIAL HEALTH INSURANCE SCHEME. IN THIS WAY, SFI HAS SUPPORTED COUNTRY-LED EFFORTS FOR ADDRESSING THE NEEDS OF PLHIV.

Public Financial Management

To support the mobilization of domestic resources, SFI provided training and technical assistance to strengthen the Government of Vietnam's HIV budget and expenditure analysis, with a focus on ARV procurement and management. The strengthened capacity and knowledge sharing among key stakeholders increased their use of evidence for advocacy and HIV policymaking. As a result, **budget execution and SHI commitments for ARVs increased by \$15.4 million and \$2 million was saved through improved procurement processes.**

Through targeted activities in four focus provinces, SFI helped local governments customize their copayment subsidy models and update their cost estimates for copayment subsidy needs. At the national level, **52 percent of the provinces receiving technical assistance committed to mobilize funds for SHI premiums and ARV copayments.** Furthermore, local governments committed \$2.4 million to subsidize SHI premiums and copayments for PLHIV. Altogether this represented a **2:1 return on investment.**



Patients with HIV show their health insurance and ID card in order to pick up medicines.

Financial Protection

SFI supported strengthening policy and legal frameworks to increase the number of PLHIV enrolled in SHI, ensure financial protection for PLHIV through provincial government subsidies for premiums and copayments, and integrate stand-alone HIV facilities into the country's public health system to meet SHI reimbursement eligibility requirements. As a result, at a national level, **90 percent of PLHIV enrolled in SHI and 46,322 clients obtained free ARVs through SHI in 187 health facilities in 2019.**

SFI helped add ARV drugs to the SHI Basic Health Services Package to be delivered at grassroots levels and then supported feasibility studies for SHI liability for HIV services. These and other efforts helped the Government of Vietnam to speed up the transition process for SHI integration and reimbursement, thereby protecting PLHIV from financial burden when accessing ART through SHI.

SUMMARY

SFI activities in Vietnam demonstrate how the transition from a donor-driven system to a system almost fully integrated into the country's public system can create a more sustainable domestic HIV response. As Vietnam continues on its journey to self-reliance, continued effort is needed to include pre-exposure prophylaxis (PrEP) and other HIV prevention services into SHI and to sustain focus on high quality implementation of SHI.