

Health Sector

Project Selection Criteria

The main report discussed the current situation of the health sector in Lebanon. It allowed highlighting the major gaps and underperformance indicators. Based on this analysis, a list of five intervention spheres was developed, where a number of projects was identified in each sphere.

It should be noted that, in this sector, most of the proposed projects do not implicate additional heavy public direct investments, mainly physical ones, for two reasons:

- a- the government has already started investing
- b- the nature of current inefficiencies requires more institutional reform

Thus, the priority is to address a better distribution and management of the stock of capital, and to the launching of major reforms of the public interventions in this sector. In this respect five different areas of intervention were identified.

1.0 Intervention 1: Ministry of Health

This intervention constitutes the major backbone, as it acts as a base for all the remaining interventions. Redefining the role of MOH to play a substantial function in regulating the whole health care system will undoubtedly limit the distortions present in various sub-sectors. The scope of the ministry's functionality is to be expanded and reinforced beyond being a mere fund for health services, to set standards and ensure that all stakeholders adhere to them. Another dimension under this first intervention comprises developing a large modern building block to become the new MOH premises.

2.0 Intervention 2: Hospital sector

The hospital sector suffers from distortions at different levels, including uneven geographical distribution of hospitals, dominance of inefficient small-size hospitals, limited supply of public beds, and low occupancy rates.

The priority is given to continuing the already established efforts aiming at raising the public bed capacity. In the longer run, staffing and equipping hospitals is to be given special attention.

3.0 Intervention 3: Pharmaceuticals sector

As this sector faces different imbalances, the main being the high drugs bill, it is necessary to address the causes behind this main distortion. This implies that special measures, mainly improving the management of the sector, are to be taken in order to eventually demote the oligopolistic structure of the service providers, promote generic drugs and reduce demand for imported trade names.

4.0 Intervention 4: Primary Health Care (PHC)

PHC has always played a significant role in improving the health conditions of the population, through affecting directly the preventive aspect rather than the curative one.

Although Lebanon enjoys a large number of health care centres, comprising dispensaries, health care and social services centres, this supply is not being translated into effective benefits. Utilisation of these centres is still low and their geographical distribution is not even. In this respect, this intervention aims at expanding and enhancing the role of primary health care centres, in order to reduce the pressure on costly private medical consultations and eventually reduce the health care bill and provide accessible health care service to all individuals. Besides, a well-positioned patient referral system between dispensaries, primary health care centres and hospitals is to be established.

5.0 Intervention 5: Insurance Schemes

The current systems under which the various existing insurance schemes operate are very divergent. This leads to inequitable quality of health services provided, as well as financial coverage. In an attempt to develop a coherent insurance structure, it is deemed necessary to induce coordination among the existing schemes in terms of adopting comparable measures and standards, to be set by the MOH. As for the longer term, this intervention envisages a unified health care scheme that embraces all the currently existing schemes, including M OH, so as to cover all residents.