



2021

ANNUAL REPORT

MESSAGE FROM OUR FOUNDERS

2021 continued the challenge of living with and managing COVID-19. Some combination of the availability of vaccines and growing immunity helped to loosen economic restrictions, open up travel and allow a modicum of personal interaction in much of the world. But the tragedy of deaths across the globe is a reminder of both the vulnerability of humanity and a call to

action to both prevent and better manage future pandemics. The resilience of economies and healthcare systems were tested, and their unique weaknesses and strengths exposed. These experiences and lessons will prove essential going forward, as the global community grapples with porous borders, and the need to prevent and manage the continuing challenge of COVID-19 and its variants and find better ways to blunt pandemics and their effects on communities, countries and the world.

Our agenda targeted health systems, to understand the patterns of response and the adaptability of healthcare systems in both high and lower-income countries. These offered opportunities to contribute to global, regional and national efforts to understand the current crisis, and prepare for both overall health system strengthening and facing the inevitable next pandemic. And we continue our focus on healthcare financing as the hook that drives change and improvements in quality and efficiency.

Aceso Global's 2021 agenda reflected the outgrowth of the COVID-19 response particularly with our work with Wellcome Trust advising on the health financing components of High Level Independent Panel (HLIP) on Pandemic Preparedness and Response. A major endeavor entailed comparing the

preparedness, response and resilience across five major Emerging Market (EM) economies that highlighted stark differences in national responses to the pandemic. A third undertaking was an assessment of effective COVID-19 responses across countries at all income levels. We also saw continuation of important work that ultimately will help build resilient healthcare systems – alignment of public and private healthcare in EMs, Health Financing training for the Malaysia Ministry of Health, pursuing quality training in Honduras, and building capacity on key social insurance and private sector engagement topics through joint work and partnerships with a group of engaged Emerging Markets and Developing Countries (EMDCs).

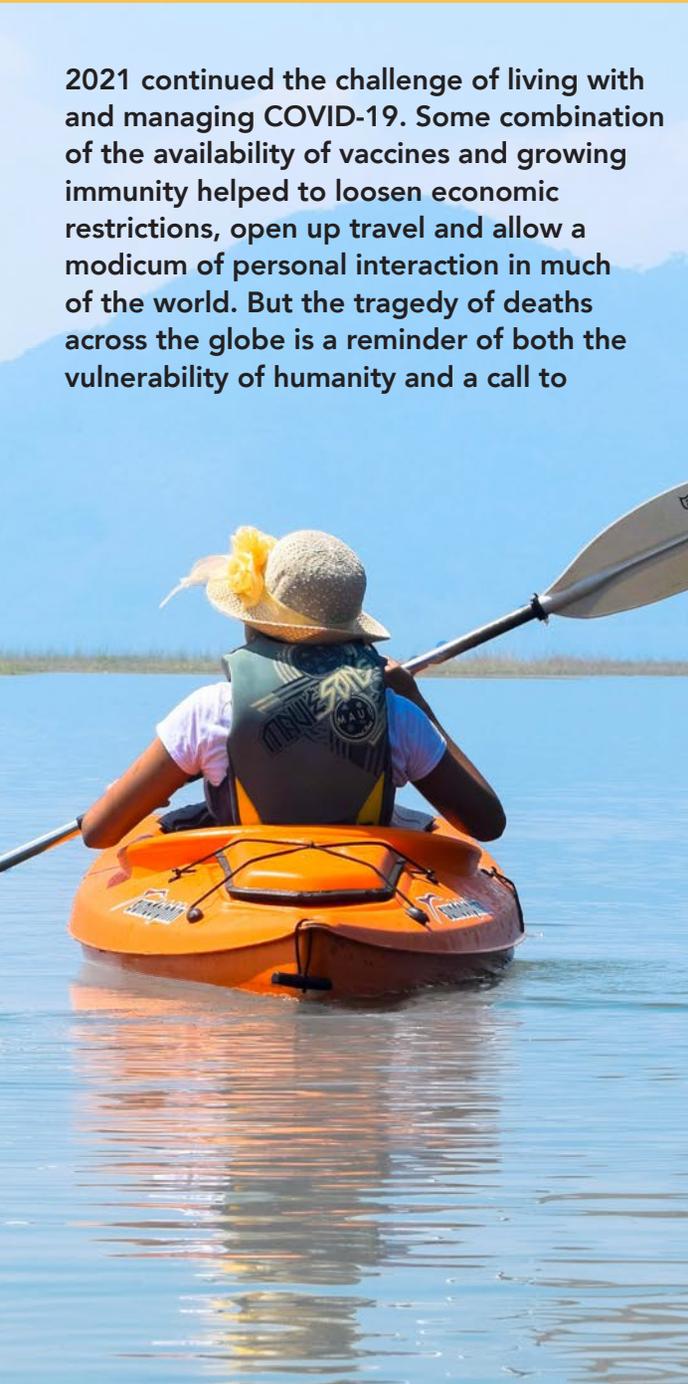
The concern for resilience defines this moment in global health, and the key drivers – financing and the design and implementation of healthcare systems – will continue to be our focus. We continued to virtually participate in policy and academic forums, hoping that future endeavors will be face-to-face. Hopefully 2022 will usher in more attention to these key issues!



MAUREEN A. LEWIS

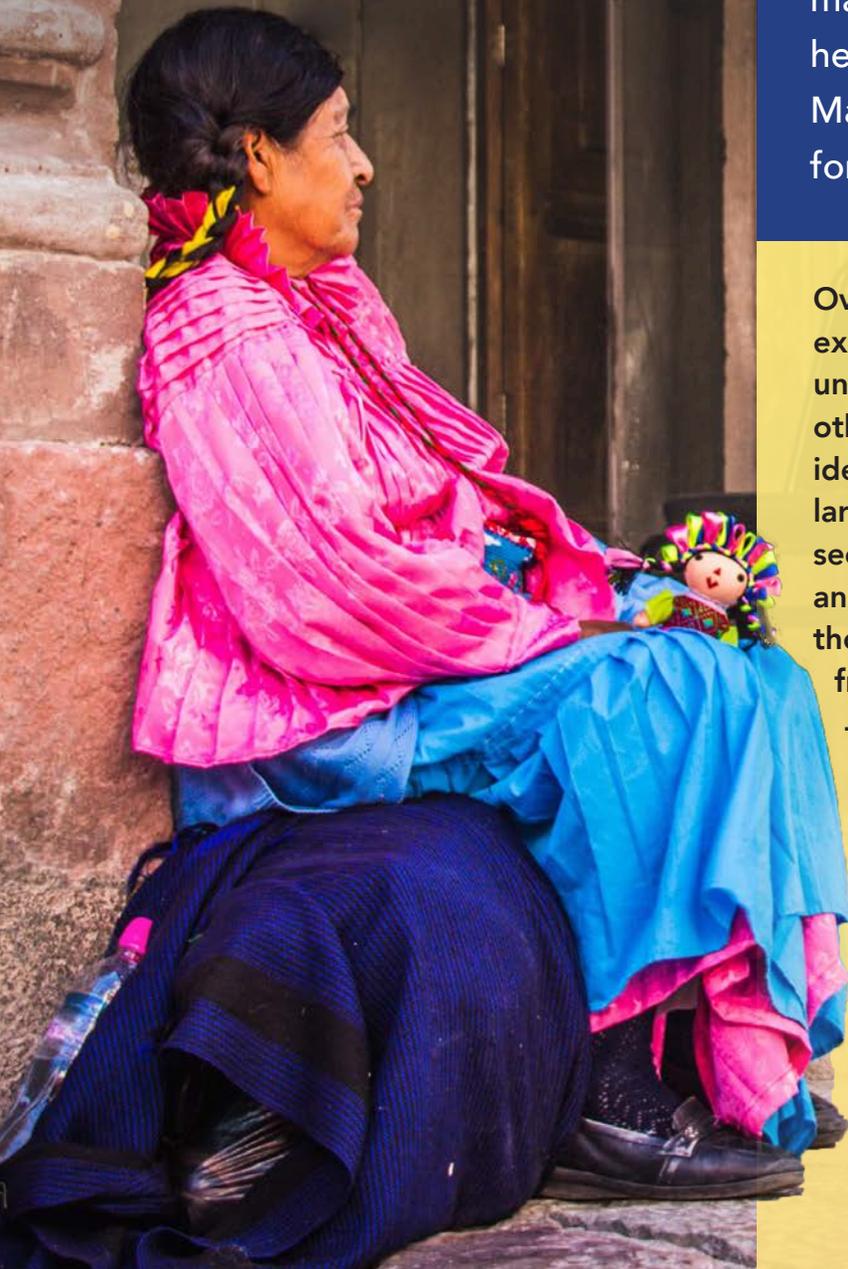


JERRY M. LA FORGIA



HEALTH CARE

financing



Financing issues integrated much of Aceso Global's agenda. Strategic purchasing and how to pay for services, and the incorporation of all eligible citizens in Social Health Insurance Systems were major initiatives but were complemented by the examination of healthcare spending under COVID-19 in a number of Emerging Markets, and consideration of the long term financing potential for a Global Pandemic Preparedness and Response initiative.

Over the past decade, many low- and middle-income countries have made expanding health coverage a national priority. However, progress to date on universal coverage has been uneven, and often excludes poor, vulnerable, and otherwise marginalized individuals. This is partly due to challenges in effectively identifying and reaching these groups, especially in countries characterized by large, heterogeneous populations with a high proportion of workers in the informal sector. All manner of targeting solutions have been trialed to address this problem and introducing these is a key priority for many emerging markets – especially those with social health insurance systems where the poorest households receive free coverage.

Throughout 2021, Aceso Global brought together officials from 12 countries to run a one-year implementation learning collaborative on how to better identify the poor and vulnerable through data linkage and inter-agency coordination across government. Through the Joint Learning Network's (JLN) Learning Collaborative on Population Targeting (LCPT), Aceso Global established a platform for JLN members to increase their understanding of effective targeting mechanisms for health, and then follow and support several of these countries as they implemented changes in real time. The LCPT focused on actionable components of effective targeting systems, culminating in a co-produced practical [toolbox for identifying poor and vulnerable populations](#) and associated best practice report to help countries understand where they can improve.

HEALTHCARE financing

The 'implementation learning' model designed by Aceso for this collaborative resulted in a number of practical outcomes for the participating countries too. For Ghana, an implementation plan was created for a three-way link between the national health insurance scheme (NHIS), social registry (GNHR), and national ID scheme (Ghanacard). Initial stages of this have already

been completed, including partial completion of the NHI-Ghanacard link which means that 150,000 health beneficiaries are now able to access care without their NHIS card, with more being added at the time of writing. For Liberia, the building blocks were put in place for the creation of a technical coordination unit that will ensure alignment between the ongoing reforms to create a national health insurance scheme, social registry, and national identity program.

Aceso Global provided in-depth support for the Malaysia Ministry of Health in designing and delivering training to strengthen the Ministry's strategic purchasing strategy in reaching Universal Health Coverage. Building on their initial pilot efforts, Aceso Global led a series of 16 training sessions designed to build capacity of the Healthcare Financing team in the Ministry to allow an expansion and strengthening in strategic purchasing. With a particular focus on chronic conditions driven by aging, the approach drew heavily on global evidence from both research and experience. As a critical component in health system management, the training outlined the appropriate incentives for maximizing health system performance.

The approach encompassed governance frameworks for strategic purchasing; benefit design, pricing, provider payment mechanisms (PPMs); price negotiation and contract management for healthcare services, and quality assurance and accreditation of providers. Our approach included ways to assess and engage potential and existing private sector providers.



Instituto Internacional de Futuros de la Salud: Futuro del financiamiento del Sistema de salud: *Dr. La Forgia presented at a high-level event of health opinion leaders and academics, mainly from Mexico, on the future of health financing in March 2021.*



FiS Week: *Dr. Lewis presented on Accountable Care Organizations at the Fórum Inovação Saúde during Brazil's*

FIS Week 2021 on November 12. The webinar touched on health care financing initiatives to address issues in the public and private sectors.

INNOVATIVE SERVICE DELIVERY

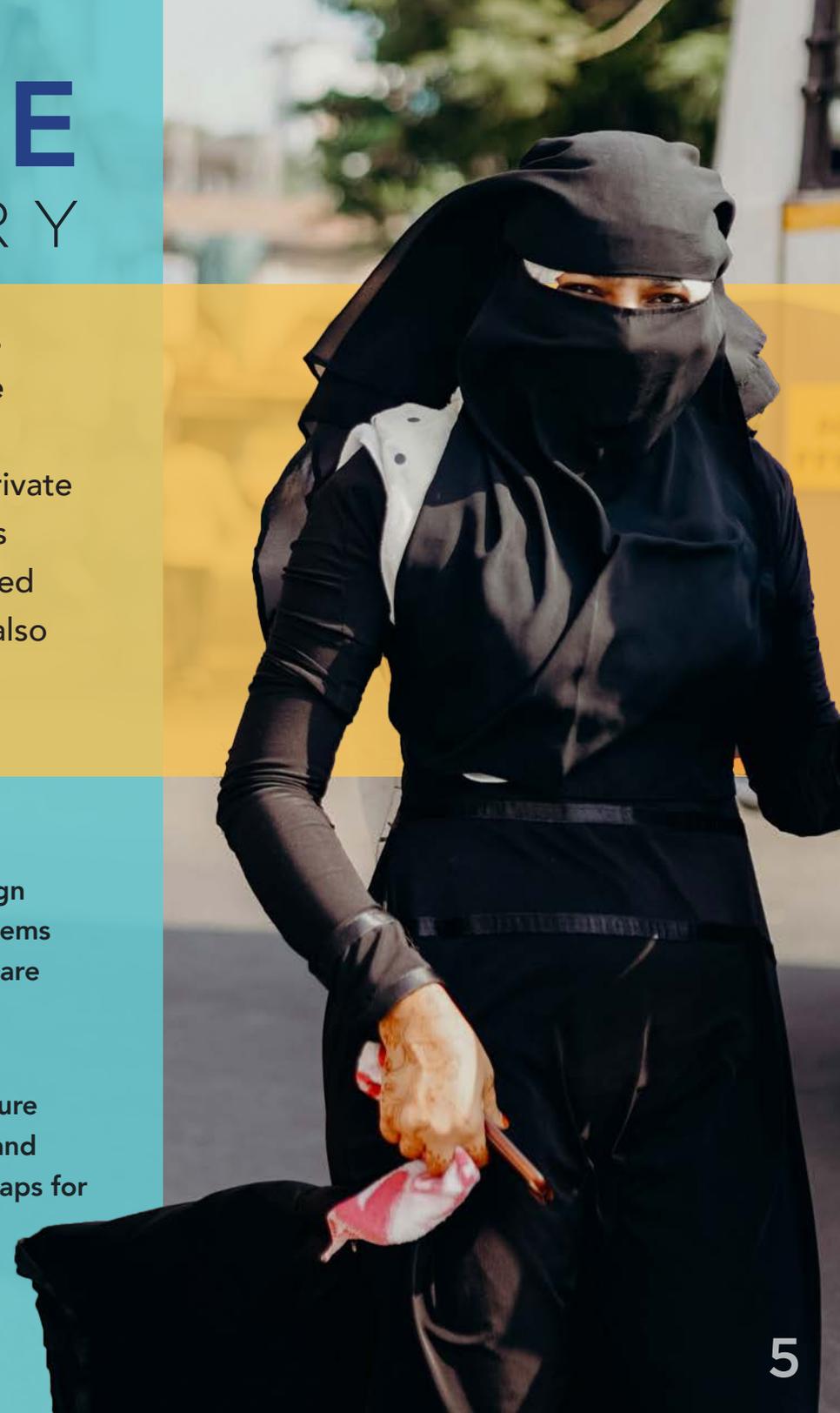
The continued search for effective ways to deliver services that incentivize providers and attract those in need of care is a mainstay of efforts to improve quality and efficiency in healthcare. 2021 saw efforts to expand our work on the private sector in health care, and the search for alternative models that can control costs and move provision toward integrated care, and evaluation of alternative delivery. Aceso Global also participated in a number of panels in academia and other important conveners assessing service delivery options.

PRIVATE SECTOR

JLN Member states are increasingly active in seeking to harness private sector capacity and capital to enhance their move toward UHC. Reforms range from contracting private providers to provide subsidized health services, creating level regulatory playing fields between public and private providers, stimulating new private investment into areas of low

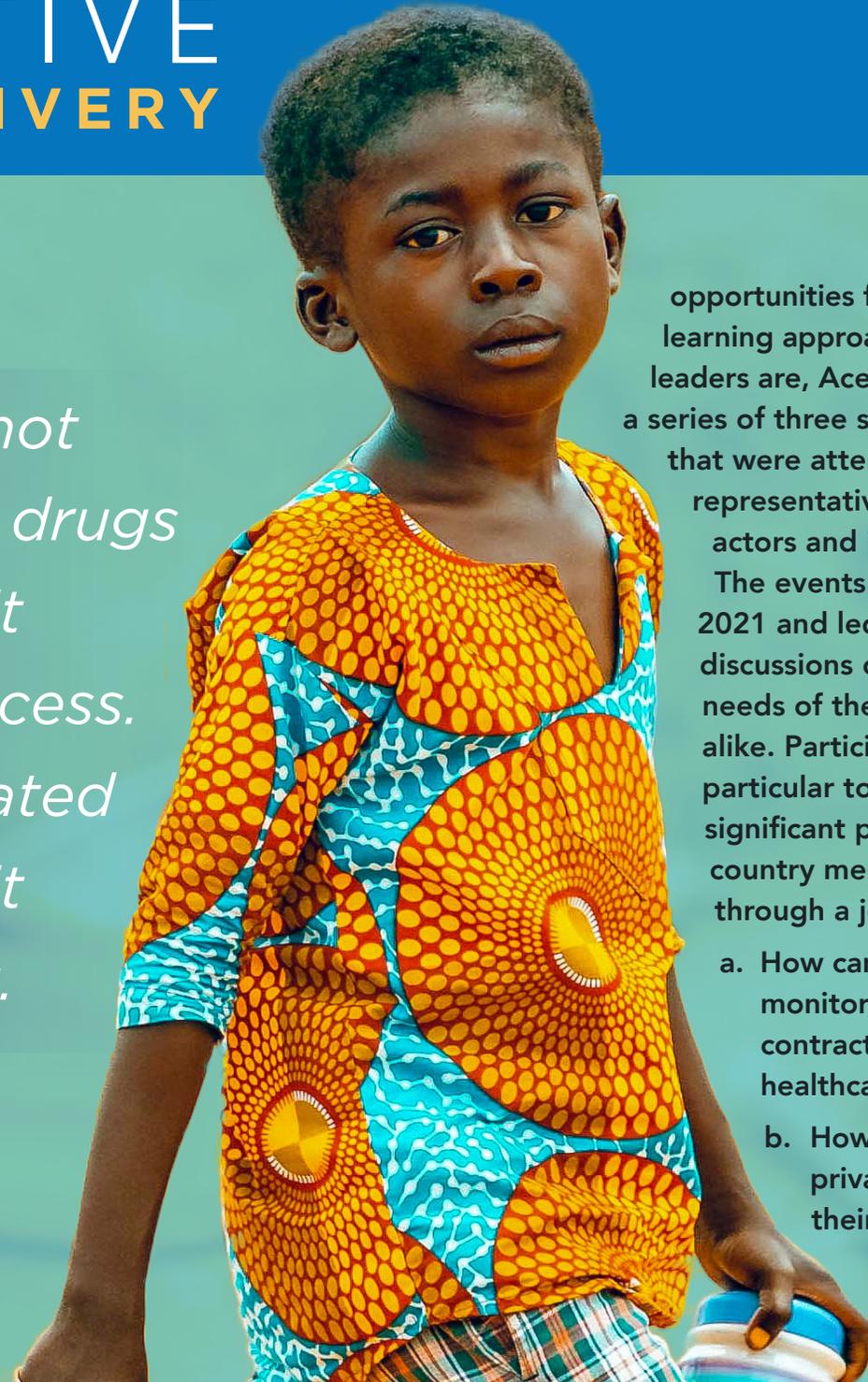
provision, and seeking to align increasingly fragmented systems of public and private healthcare towards a unified provider landscape.

While plenty of policy literature exists on the private sector and health, there are still many gaps for practitioners attempting to implement real change. To understand where the best



INNOVATIVE SERVICE DELIVERY

Innovation does not have to be about drugs and technology, it can be about process. Improving integrated care is hard, but it doesn't cost a lot.



opportunities for the JLN's 'joint learning approach' to upskill health leaders are, Aceso were asked to lead a series of three scoping roundtables that were attended by JLN member representatives, private healthcare actors and international partners. The events were held in September 2021 and led to lively and productive discussions of the different learning needs of the public and private sector alike. Participants identified two particular topics in which there was significant potential to support JLN country member reforms in 2022 through a joint learning approach:

- How can public payers better monitor, manage, and enforce contracts for subsidized healthcare services?
- How can governments unlock private capital to catalyze their UHC reform agenda?

INNOVATIVE SERVICE DELIVERY

These two questions will now form the basis of an initial online learning program (or Virtual Learning Exchange) where 32 participants from 13 countries across Asia and Africa will build up a foundational understanding on the two topics over a period of three months in 2022. The aim will be to give access to subject matter experts and share with each other the potential areas of opportunity and improvement for their countries. The hope is that this will eventually build up to a full 18-month long collaborative on one or both topics, following a similar model of practical, real-time support and implementation learning to Aceso's previous JLN collaborative on population targeting.



Cedars-Sinai: Innovations in Brazil's Private Sector: Dr. Lewis presented at a Cedars-Sinai Hospital webinar as part of their 2021 Global Healthcare Grand Rounds in September 2021.

QUALITY

In 2021, Aceso Global continued its engagement with the Inter-American Development Bank's Salud Mesoamérica Initiative (SMI) in supporting sustainable, equitable, and efficient Quality Improvement (QI) in Honduras. We conducted a mixed methods evaluation of QI practices of primary health care teams to understand enablers and barriers in

the implementation of QI practices that influence clinical quality of care. This product provided key insights to explain the variation in implementation and more importantly inform any needed adaptations to the intervention.

Aceso Global collaborated with the SMI team along two workstreams. The first consisted of quantitative analysis of 105 responses to a telephone/online survey sponsored by SMI. The survey aimed to identify the characteristics of QI teams at both the managerial (ECOR) and facility levels, and assess how QI teams are formed, how they function, the types of QI practices and activities they implemented,

and how they perform. The results served as the basis for the second workstream, consisting of a qualitative analysis to evaluate the key drivers of differential performance observed in the first workstream across ECORs and facilities.

Continuing to work with the Inter-American Development Bank's SMI, Aceso Global aims to commence QI training across Honduras in the summer of 2022.



Mitigating the austerity effects of the pandemic by improving the efficiency in health spending. Workshop organized by Red Criteria – Social Protection and Health Division
Thursday December 2nd, 2021 | 09:30 – 12:30 (EST)

10:50-11:00
Improving hospitals efficiency
Jerry La Forgia, Chief Technical Officer, Aceso Global
Hospitals are known for being important sources of inefficiency in health sectors, due to many factors, such as inappropriate hospital admissions and length of stay, inappropriate hospital sizes, inadequate bed distribution, and medical errors, among others. This session will review some of these aspects as well as some of the strategies that can be adopted to achieve better value for money.

IDB: Improving Hospital Efficiency: *Dr. La Forgia presented at a conference for the Social Protection and Health Division at the Inter-American Development Bank in December 2021. The workshop, organized by Red Criteria, was on mitigating the austerity effects of the pandemic by improving the efficiency of health spending.*



Doing more with less
Defining value in Latin American health systems



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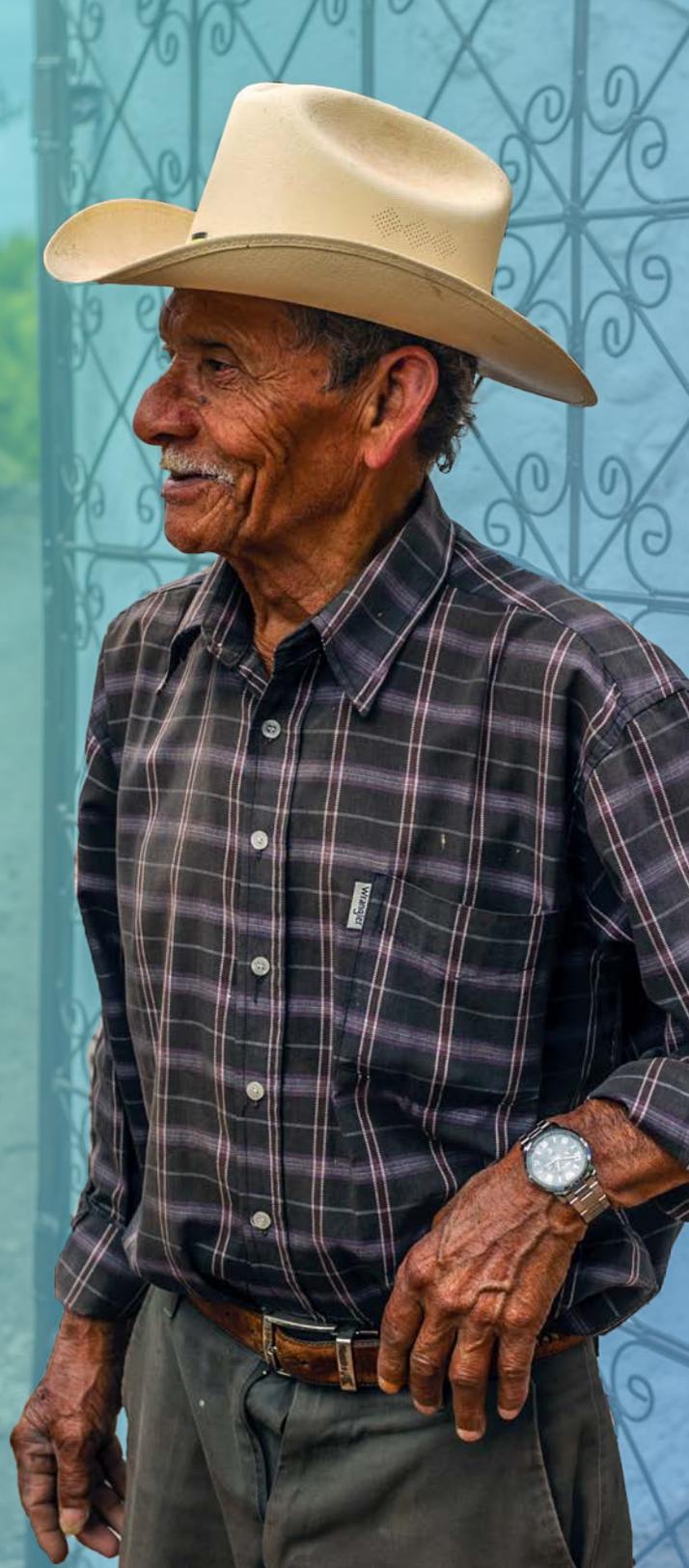
Economist Intelligence Unit: Defining value in Latin American health systems: *Dr. Lewis and Eduardo Gonzalez-Pier were members of an Economist Intelligence Unit expert panel on defining value in Latin American Health Systems. The report was published in 2021*

Implications of COVID-19

FOR HEALTH SYSTEMS AND LONG-TERM RESILIENCE

The global community is trying to confront the pandemic together, and efforts from global institutions like the World Bank and the World Health Organization, along with broader initiatives such as the G20 High Level Independent Panel on Pandemic Prevention and Resilience (HLIP) have offered road maps to preventing and managing pandemic threats. Aceso Global engaged with Wellcome Trust on the financing issues of the HLIP, but also produced a report on the impact of the pandemic on health system resilience in five Emerging Markets, and evaluated global experiences in managing COVID-19. We also have participated in various fora to highlight major issues around the experiences with COVID-19 and the adequacy of global responses.





IMPLICATIONS OF COVID-19

for health systems and long-term resilience

The pandemic spawned multiple efforts at assessing what went wrong with the COVID-19 outbreak, and how the global community could address pandemic preparedness and response (PPR) to better prepare and respond more effectively to the inevitable reemergence of another global pathogen. Wellcome Trust collaborated with other stakeholders in sponsoring the G20 High Level Independent Panel on Pandemic Preparedness and Response (HLIP) chaired by Larry Summers, Ngozi Okonko-Iweala and Tharman Shanmugaratnam. Aceso Global provided expert advisory services to Wellcome Trust on the directions and content of the HLIP discussions and strategy, focusing on viability and financial feasibility of proposals. Via oral briefings and written policy briefs Aceso Global supported the process

and complemented Wellcome Trust's scientific expertise with healthcare delivery and healthcare financing insights, and perspectives on global entities with experience and capacity to carry the recommendations forward.

In 2021, Aceso Global continued its partnership with the Joint Learning Network and the Bill & Melinda Gates Foundation through supporting a Learning Exchange followed by two Community of Practice (COP) groups in Malaysia and Ghana. Through these engagements, Aceso Global contributed to strengthening the health system response to COVID-19 by convening countries to explore and learn from each other's models, practices and innovations in providing comprehensive and continuous case management for COVID-19 and non-COVID-19 conditions. More specifically, the engagements aimed to improve service delivery through standardizing and coordinating patient flow across multiple provider



IMPLICATIONS OF COVID-19

for health systems and long-term resilience

settings and expanding ambulatory telemedicine.

During the Learning Exchange (2020), Aceso Global technically facilitated a 6-month virtual engagement for countries to share relevant experiences to generate actionable outputs that can be adapted and implemented across country contexts. We convened over 40 participants

from over 20 countries. Participants discussed case examples from several countries on patient pathways for COVID-19 care as well as the maintenance/restoration of non-COVID-19 essential services.

Aceso Global and country participants created a Community of Practice (COP), virtually accompanying two “adapter countries” Malaysia and Ghana to implement innovations through technologically supported platforms. Malaysia worked to improve, monitor, and expand ambulatory telemedicine services at the primary care level through (i) piloting a program to standardize virtual consultations for the management of patients with chronic conditions; (ii) developing and testing a monitoring instrument to ensure quality on service delivery for ambulatory telemedicine; and (iii) supporting the Malaysia MOH strengthen their mobile app ‘MySejahtera’ by developing videos

Innovation is not solely about new diagnostics and new services; it's about how we are doing things. How can we get to patients more effectively, how can we better integrate care and what kind of re-organisation can be achieved?



IMPLICATIONS OF COVID-19

for health systems and long-term resilience

and infographics on COVID-19-related topics. Outputs included an e-Library of external resources and other documents including survey instruments, frameworks, indicators, videos and infographics. Aceso Global will continue to support the Malaysia MOH team as they expand ambulatory telemedicine services (2022 and beyond) by providing guidance and external resources through the technical facilitators.

As part of the Ghana's COP, Aceso Global and country participants worked to support PharmAccess Ghana with their pilot across two sub-themes: (i) development of health coaching and other soft skills for clinicians using the app, in preparation for Phase II of the implementation and (ii) planning for future engagement with payers, in preparation for Phase III of the implementation. In doing so, the COP would also support the learning of the whole group as to the implementation of digital health

tools for NCDs. The COP outputs consisted of a vignette authored by the implementation case country participants themselves detailing the learning journey and key lessons learned throughout the COP process. Secondly, a three-part blog series co-authored by the participants and technical facilitators on the global lessons, examples and content developed over the course of the COP.

Aceso Global is currently supporting one of the world's three largest life science corporations in a meta-analysis on the effect of the COVID-19 pandemic on health system resilience of five major countries. The meta-analysis is examining several components and processes related to health system resilience, and drawing on emerging frameworks on the absorptive, adaptive, and transformative qualities of health systems in response to the pandemic. Using these three primary components, Aceso Global



IMPLICATIONS OF COVID-19

for health systems and long-term resilience

is examining feasible and actionable pathways to facilitate health system resilience in the case countries and for further global application.

The beginning phase of the project incorporated workshops with the individual country teams. Aceso Global utilized these workshops with the country teams to assess findings, including commonalities and

differences across the country cases, and identify information gaps to refine and reach consensus on the results and recommendations of the meta-analysis.

The meta-analysis white paper and final presentation to be completed in 2022 will integrate the results and deepen the analysis of the case studies along four technical areas: policy reform context, health financing, digital transformation, and human resources. It will also flesh out cross-cutting issues and the commonalities of policies, investments, and changes across the technical areas.



CONAHP:
Healthcare Models and their capacity to adapt to adverse events :Dr. Lewis was a panel member for a webinar hosted by the National Congress of Private Hospitals in Brazil (CONAHP) in October 2021. The panel discussed the capacity of health systems to adapt to and ensure the continuity of healthcare services in the face of adverse events.

Letter: Latin America deserves US help in Covid fight

From Maureen A Lewis, Chief Executive, Aceso Global, Washington, DC, US



Letter to FT:
Latin America deserves US help in the COVID-19 fight: Dr. Lewis's submission to the Financial Times was the lead letter: "Latin America Deserves US Help in the Covid Fight." It was published in April 2021.

HIGHLIGHTS:

EVENTS AND PUBLICATIONS

In 2021, Aceso Global aided a consulting and research organization that assists in gathering evidence for digital health technology adoption. Aceso Global used its graphic design capabilities and expertise to help with the organization's presentation deliverables including but not limited to original figures, graphics, and slide layouts. The work also included literature review research and scribing for various client meetings.

EVENTS

- **Lewis** was a member of an Economist Intelligence Unit Expert Panel on “Defining Value in Latin American Health Systems”– along with Eduardo Gonzalez-Pier, Aceso Global Board Member. The report was published in May 2021.
- **La Forgia** presented at a high-level conference of health opinion leaders and academics, mainly from Mexico, on the future of health financing, March 8.
- **La Forgia** presented at the ICIC21 Virtual Conference: Realizing the true value of Integrated Care on Service Delivery Networks in the Philippines, May 5.
- **La Forgia and Lewis** presented during Health Economics Group Seminar on Governance and Regulation at the Universidad de Antioquía (Medellín), May 20.
 - ▶ **La Forgia** presented on Social Organization Model in São Paulo, Brazil
 - ▶ **Lewis** presented on Governance for Performance
- **Lewis** presented at a Cedars-Sinai Hospital webinar as a part of their 2021 Global Healthcare Educational Series on Innovation in Brazil's Private Sector, September 17
- **Lewis** was a panelist for a CONAHP webinar event on Care Models and Their Capacity to Adapt to Adverse Situations, October 18
- **Lewis** was a panelist at the Wilson Center briefing to Brazilian Congressional Staffers on a webinar on the Structure of the Private Health System November 4
- **Lewis** commented on Out-of-Pocket Payments in Healthcare in Chile at a World Bank-Roche seminar, November 4
- **Lewis** presented on ACOs at the Fórum Inovação Saúde during Brazil's FIS Week 2021, November 12
- **La Forgia** presented at a conference for the Social Protection and Health Division at the Inter-American Development Bank on Improving Hospital Efficiency and Mitigating the Austerity Effects of the Pandemic by Improving Efficiency in Health Spending December 2

PUBLICATIONS

- **Lewis** submitted lead letter “Latin America Deserves US Help in Covid Fight” to the Financial Times, April 29

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