

Support to countries for transition and integration of the AMFm into the New Funding Model of the Global Fund

The 7th Meeting of the RBM Partnership Case Management Working Group

5th - 7th March, 2013

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World Health
Organization



AMFm transition workstream

- **Workstream of the Harmonization Working Group**
 - Previously called the AMFm workstream (co-chaired by CHAI and WHO)
 - ToR was support for effective implementation of AMFm in Phase I pilot countries.
 - Renamed AMFm transition workstream following the end of the AMFm Phase I, and a renewed mandate to support the transition Phase of the AMFm and the transition into the New Funding Mechanism of the Global Fund
- **This workstream is different from**
 - The AMFm Working Group (MDAG -Global Fund)
 - The AMFm taskforce (Roll Back Malaria)

Updated GMAP Objectives, Targets, Milestones and Priorities Beyond 2011 (Case Management)

Objective 1. Reduce global malaria deaths to near zero² by end 2015

- **Target 1.1** Achieve universal access to case management in the public sector.
 - By end 2013, 100% of suspected cases receive a malaria diagnostic test and 100% of confirmed cases receive treatment with appropriate and effective antimalarial drugs.
 - Milestone: none, as the target is set for 2013.
- **Target 1.2** Achieve universal access to case management, or appropriate referral, in the private sector.
 - By end 2015, 100% of suspected cases receive a malaria diagnostic test and 100% of confirmed cases receive treatment with appropriate and effective antimalarial drugs.
 - Milestone: By end 2013, in endemic countries, 50% of persons seeking treatment for malaria-like symptoms in the private sector report having received a malaria diagnostic test and 100% of confirmed cases having received treatment with appropriate and effective antimalarial drugs.

Overview of the Global Fund Board Decision: What does the Transition Period and the future funding model look like?

Transition Period



- GF approved amount for the Transition Period of 114M – 154M based on two estimates: 1) Historic rates of copayment approvals over the last 12 months and 2) Bottom up demand forecast.
- Funds for the Transition Period still need to be raised, hopeful sources include the initial funders: DFID, UNITAID, CIDA, Gates, others.
- GF to provide each country with a funding allocation at the beginning of the Transition Period to be used for the procurement of co-paid ACTs in the private sector.
- Countries will be able to determine what strategies to deploy to best stretch available funding by selecting what demand- shaping levers to apply to AMFm orders and the relative weight of each.
- Countries will likely have the opportunity to reprogram unspent AMFm funds for supporting interventions or tap into existing GF grants.

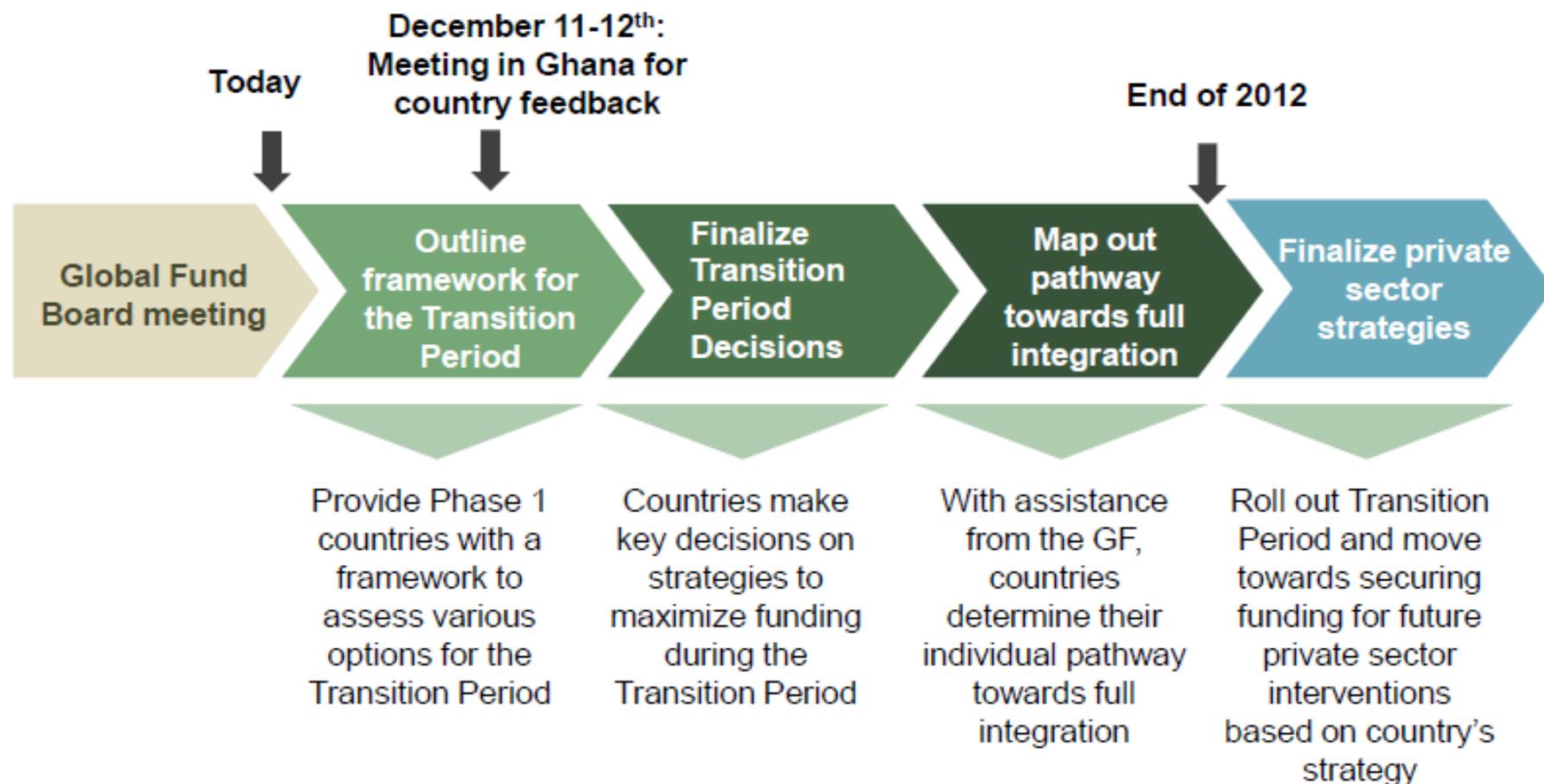
Full Integration Model – 2014 and beyond



- GF will no longer set aside any special funds for subsidizing ACTs for the private sector. Funding for private sector subsidy if requested by countries will be integrated into existing GF grants or future country allocations.
- Countries will decide whether and how to subsidize private sector ACTs and RDTs with GF and/or other donor resources.
- Countries will have the option of continuing current system of copayments made centrally from Geneva, but using the funds they've set aside in their malaria grants or from other sources.

Timeline & Next Steps

Pathway towards full integration



Country consultation on 2013 transition and the 'integrated model' for the Affordable Medicines Facility-malaria (AMFm) Accra, Ghana, 11-12 December 2012

- **Key conclusions: Country representatives,**
 - welcomed the board decision especially the approval of a transition period in 2013, which will allow countries to prepare for the integrated model.
 - noted the important role of the private sector in strategies to scale up access to effective malaria treatment and indicated commitment to explore alternative sources of funding for the integrated model.
- **Next Steps**
 - further consultation with stakeholders at country level in Q1/Q2 of 2013 to finalize transition plans including a clear pathway to the integrated model.
 - submit to the Secretariat by end-January 2013 a set of initial demand shaping levers for allocations for private sector ACT co-payments in 2013.
 - the funding allocation to support private sector ACT co-payments in 2013 communicated to each country by the end of the first quarter in 2013.
 - working with countries to explore funding availability for supporting interventions through reprogramming, Phase 2 renewals and extension of host grants, and participation in the transition to the New Funding Model.

Current status and challenges

- **Current Status**

- Indicative amounts have been shared with countries for 2013 based on anticipated fund raising estimates
- Country consultations taken place in most countries
 - Ghana, Kenya, Tanzania, Nigeria
- Specific demand shaping levers for 2013 co-payments from countries

- **Challenges**

- Mobilizing all the resources for transition phase
- Feasibility of integration into the New funding mechanism with GF resources in 2014
 - Only 2 Phase I countries in the list of interim countries with new funding for 2013/2014
- Malaria diagnostics (RDTs) introduction as part of the integration
 - Co-payment feasibility assessment (re mechanism)
 - Deployment in all sectors (especially in private sector)

Support tools available to countries

- The GF have made available on their website **Strategic Investment Guidance & Information Notes**
 - Strategic investment guidance from technical partners - These materials aim to support countries in using investment approaches to support the development of strong national strategies and are non-Global Fund specific.
 - Information notes from the Global Fund - Information notes aim to ensure that investments made through the Global Fund are directed towards areas where they can have maximum impact and provide value for money.
 - USE OF A PRIVATE SECTOR CO-PAYMENT MECHANISM TO IMPROVE ACCESS TO ACTs IN THE NEW FUNDING MODEL

<http://www.theglobalfund.org/en/accesstofunding/notes/>