

# UNIVERSAL HEALTH COVERAGE: MALAYSIA'S PROGRESS

22<sup>nd</sup> ASEAN and Japan High-Level Officials Meeting On Caring Society

25-27th November 2024

#### **OUTLINE OF PRESENTATION**

01	Introduction
02	UHC Achievements
03	Health Care Access
04	Challenges
05	Addressing challenges
06	Future Directions
07	Summary





# INTRODUCTION

# Universal health coverage (UHC) protects against financial consequences of paying for health services

#### Goals of a health system

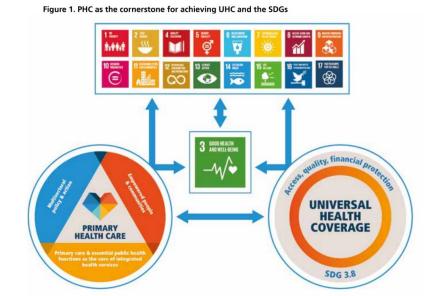
- Health gain
  Both in levels of health and distribution of health
- 2 Social and financial risk protection
  Distribution of burden of financing
- Responsiveness
  Ability to meet people's expectations

"UHC means that all individuals and communities receive the health services they need without suffering financial hardship. It includes the full spectrum of essential, quality health services, from health promotion to prevention, treatment, rehabilitation, and palliative care across the life course."

-World Health Organization

# Primary Health Care

- the main vehicle for achieving universal health coverage and the SDGs
- A vision for primary health care in the 21st century towards UHP and the SDG:
- a whole-of-government and whole-of-society approach to health that combines three core components:
- i. multisectoral policy and action
- ii. empowered people and communities; and
- iii. primary care and essential public health functions as the core of integrated health services

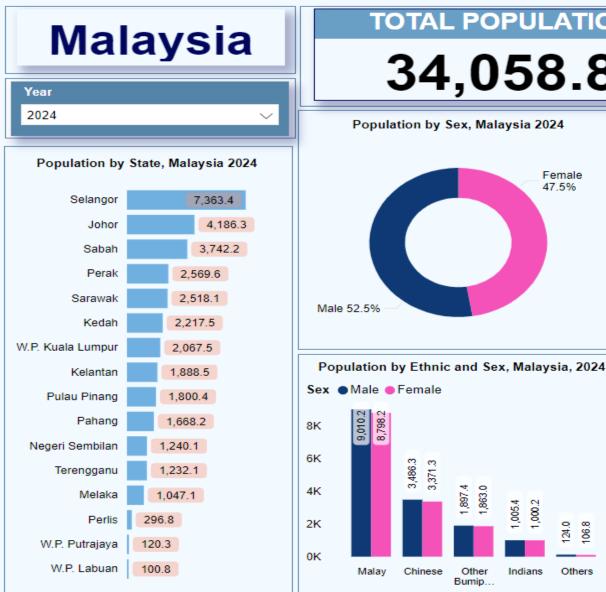


Source: WHO and UNICEF (2)

1.1 Operational framework for primary health care levers

# POPULATION AT A GLANCE, MALAYSIA, 2024

\*\* Numbers are expressed in thousands ('000)



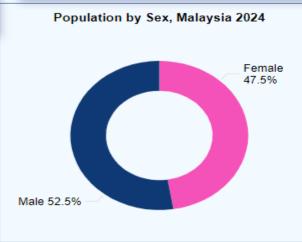


34,058.8

### **MALE** 17,882.7

**FEMALE** 16,176.1

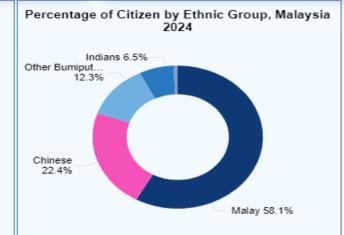
Population by Age and Sex Distribution, Malaysia,



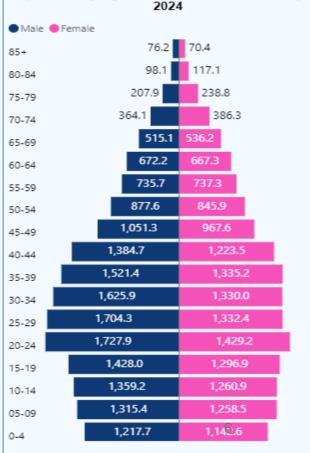
Chinese

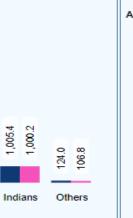
Other

Bumip...









# HEALTH SYSTEM CHARACTERISTIC

- Dichotomous service delivery by the public and private sectors (a hybrid healthcare system)

#### **PUBLIC HEALTH CARE**

- largely funded by federal government revenues
- provide widespread, coverage of universal healthcare for the population,
- heavily subsidised secondary and tertiary care services

#### PRIVATE HEALTH CARE

- provide healthcare services to the public on a fee-for-service basis
- predominantly funded by individual out-of-pocket payments, private health insurances, employee benefit

### FLOW OF HEALTH FUNDS

#### SOURCE



**Ministry Of Health** 



Ministry of Higher Education



**Ministry of Defense** 



**Out-Of-Pocket** 



**Insurance Agencies** 



**Employers** 

#### **PROVIDER**

Ministry of Health Facilities

Private Facilities

Other Public Facilities

**Pharmacies** 

#### **FUNCTION**

Curative Care (e.g IP/OP/DC)



Medical Goods



Preventive Care



Note: Diagram is for illustration purpose only and does not represent actual interconnections which is much more complex



### **ACHIEVEMENT**

- Malaysia achieved effective UHC in the 1980's, through tax funded public provision of health care services
- Malaysia has made considerable progress in achieving Universal Health Coverage (UHC) overall.
- UHC index score for coverage of essential health of

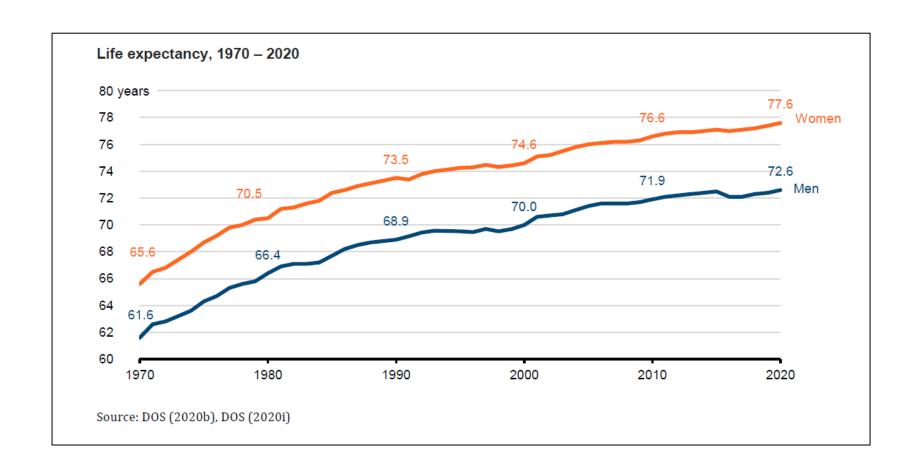
 $70 (2018) \rightarrow 73 (2020)$ 

Lo, YRJ. and Allotey, P. World Health Day 2018.

Lesson from Malaysia on Universal Health Coverage, World Health Organization.

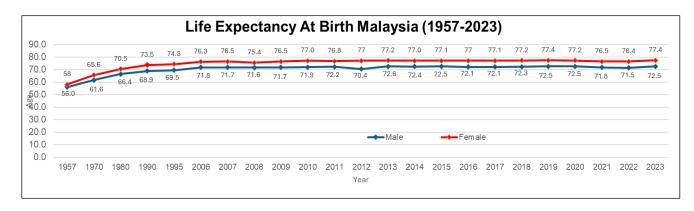
World Health Organization, Western Pacific Region 2018. UHC and SDG country profile 2018 Malaysia.

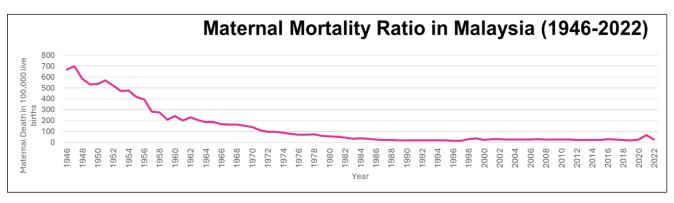
# IMPROVEMENT IN LIFE STATUS

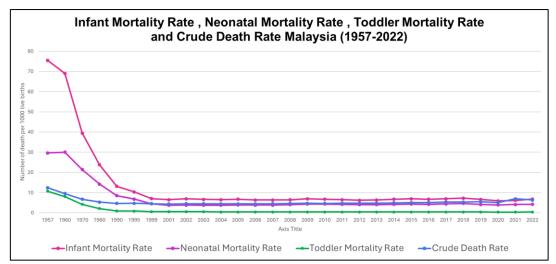


Malaysian are living longer

# IMPROVEMENT IN LIFE STATUS

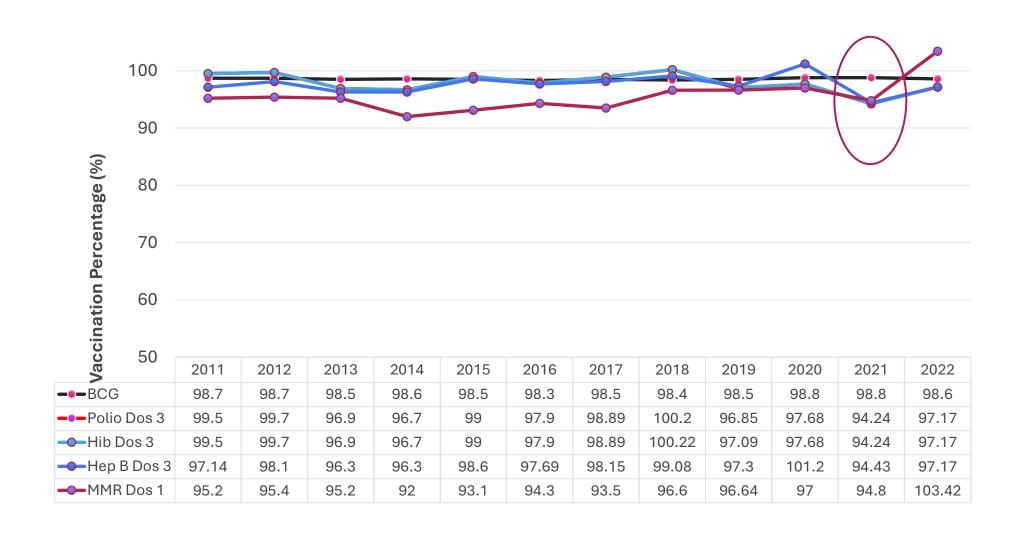






Decrease in mortality observed in the past decades, including child and maternal mortality

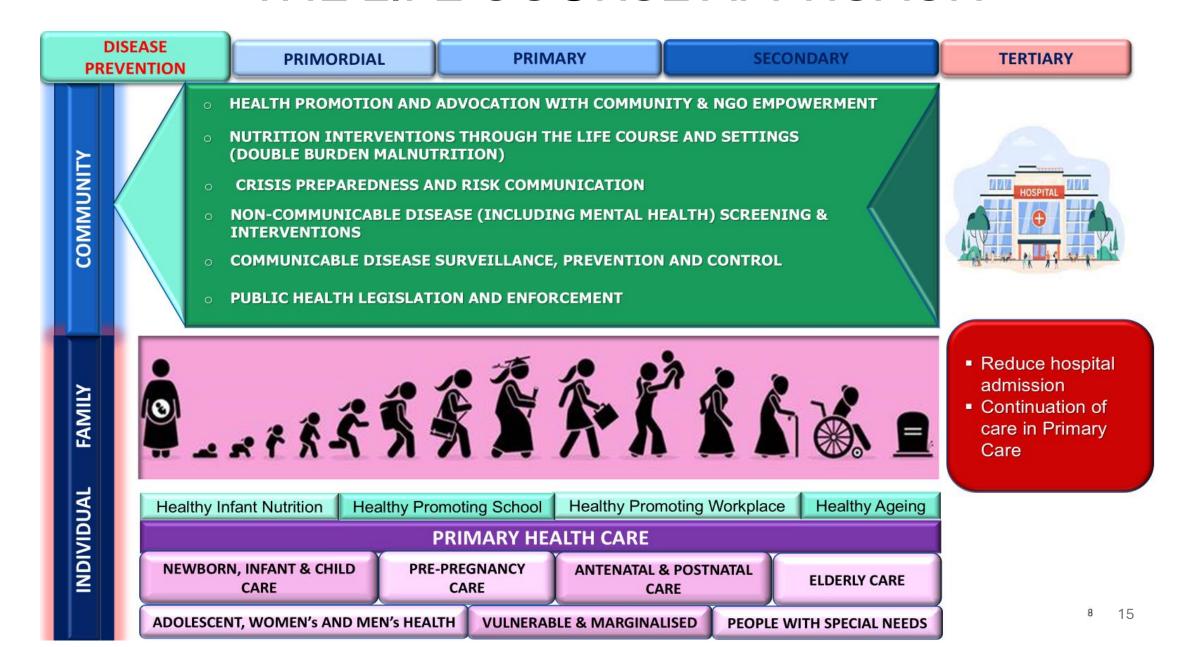
# Selected Childhood Vaccination Coverage between 2011 to 2022



High immunization coverage



# THE LIFE COURSE APPROACH

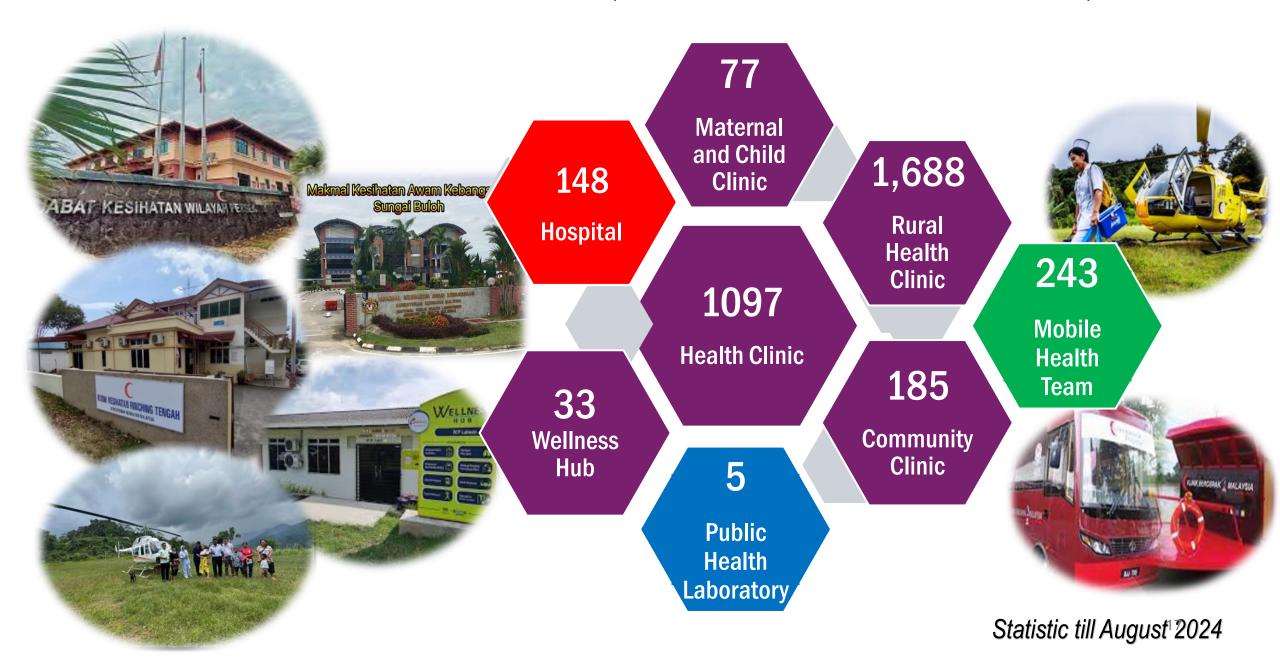


# PRIMARY HEALTH CARE

Primary health care (PHC) is recognized as the thrust of the Malaysian health care system, supported by the secondary and tertiary care.

The PHC delivery system provides population-based services using a life-course approach from womb to tomb.

# HEALTH FACILITIES (MINISTRY OF HEALTH)



#### **EVOLUTION OF PRIMARY CARE SERVICES**



Mother & Child Family Planning Outpatient Services Environmental Health School Health



Mother & child
Family planning
Outpatient Services
Environmental Health
School Health
Dental Care
Pharmacy Services
Laboratory Services



#### 2000

Mother & Child

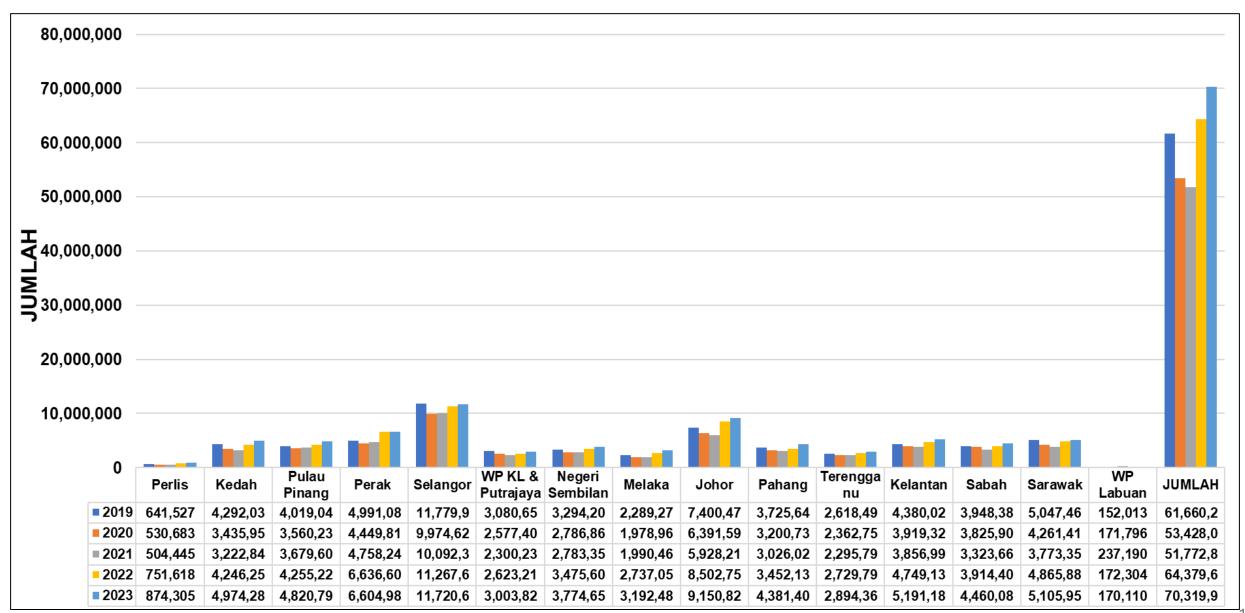
**Family Planning Outpatient Services Environmental Health** School Health **Dental Care Pharmacy Services Laboratory Services Child with Special Need Adult Health Elderly Health Cardiovascular Disease Mental Health Adolescent Programme Sexually Transmitted Infection Tuberculosis/Leprosy Occupational Health Emergency Services Health Informatics** 

#### Current

- Mother & Child
- Family Planning
- Outpatient Services
- Environmental Health
- School Health
- Dental Care
- Pharmacy Services
- Laboratory Services
- Child with Special Need
- Adult Health
- Elderly Health
- Cardiovascular Disease
- Mental Health
- Adolescent Programme
- Sexually Transmitted Infection
- Tuberculosis/ Leprosy
- Occupational Health
- Emergency Services
- Health Informatics
- Rehabilitation Services
- Dietary

- Human Papilloma Virus Vaccination
- Needle Stick Exchange Programme
- Methadone Maintenance
  Therapy
- HIV screening & treatment
- Men's Health
- Quit Smoking
- Domiciliary
- Dialysis
- Fever Centre
- Hepatitis C Screening & treatment
- HPV DNA Cervical Screening
- Wound care
- Pain management
- Optometry services
- Custodial Medicine Services (Orang Dalam Tahanan)
- Value Added Pharmacy Services
- Traditional & Complimentary Medicine

#### TOTAL ATTENDANCES TO HEALTH CLINIC BY STATES 2019 - 2023



# HEALTH SYSTEM CHALLENGES



#### **KEY CHALLENGES IN PUBLIC HEALTH**



Growing Non-Communicable Diseases



Increasing
Mental Health
Burden &
Suicidal
Behaviour



Reemerging
And Persistent
Infectious
Disease



Constraints In Resources For Health



Overcrowding
Clinic and
Hospital



Evolution and
Expansion of Primary
Health Care Scope
and Activities



Expansion of Health Promotion Scope With New Programs



Double
Burden of
Malnutrition



Pandemic & Public Health Emergencies



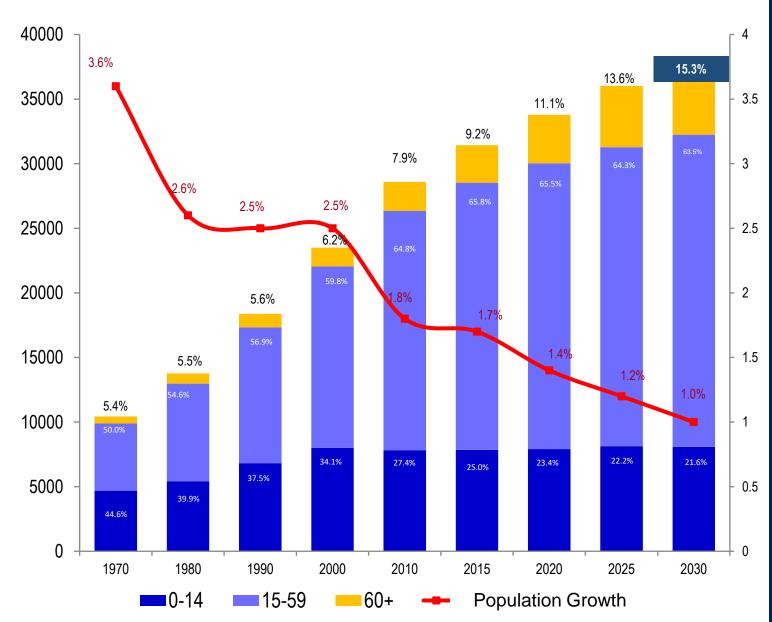
High Burden of Oral Disease



**Ageing** 

**Population** 

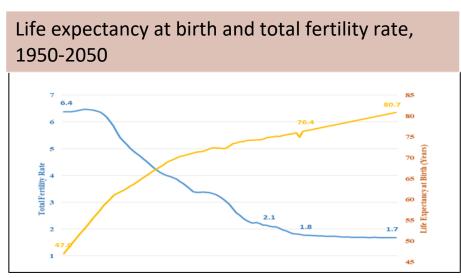
### Malaysia Population Growth, (1970 - 2030)



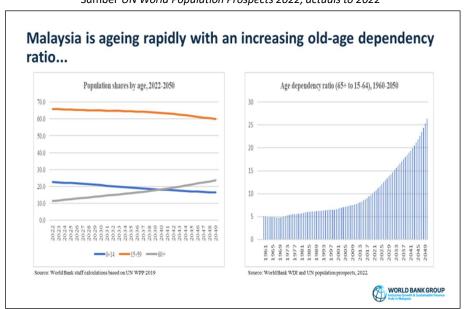
Malaysia will reach the status aged nation (15% of the population aged 60 and over) in 2030 due to the rapid decline in fertility rates and the increasing life expectancy of the population.

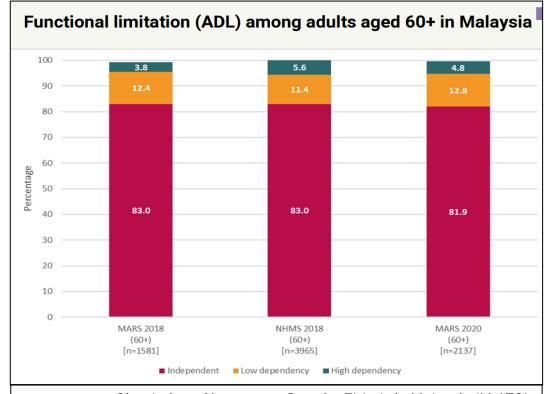
The working age population (15-59 years old) is shrinking during the transition towards an aged nation.

### AGEING POPULATION



Sumber UN World Population Prospects 2022, actuals to 2022

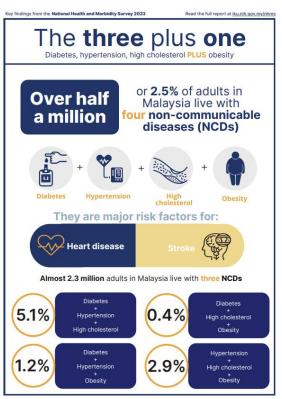


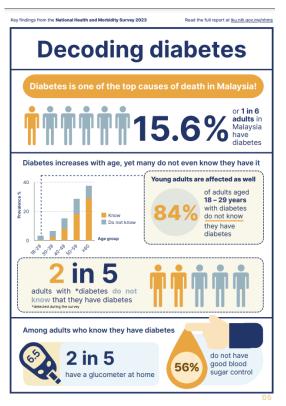


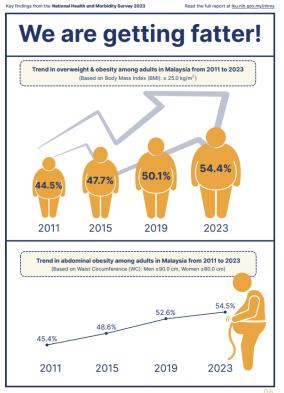
Simulation of Long-term Care for Elderly in Malaysia (MyLTC): Mesyuarat Jawatankuasa Teknikal Kesihatan Warga Emas. IHSR April 2024

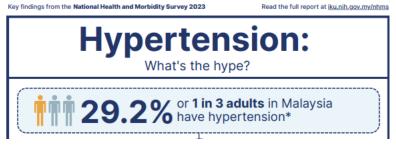
- Malaysia is currently an ageing population and will be an aged population by 2030
- Medical expenditure for population ≥ 60 years is 2-3X more than the average adult population
- High cost for chronic and long-term care

# RISING BURDEN OF NON-COMMUNICABLE DISEASES





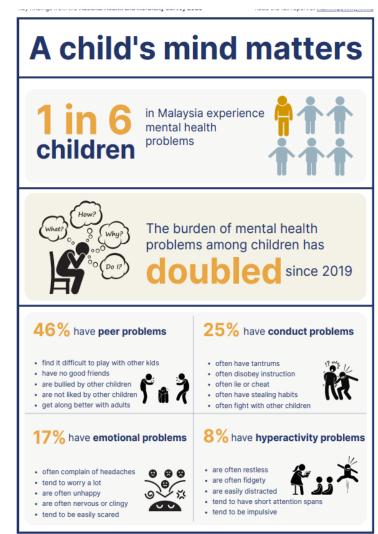






## INCREASING MENTAL HEALTH ISSUES

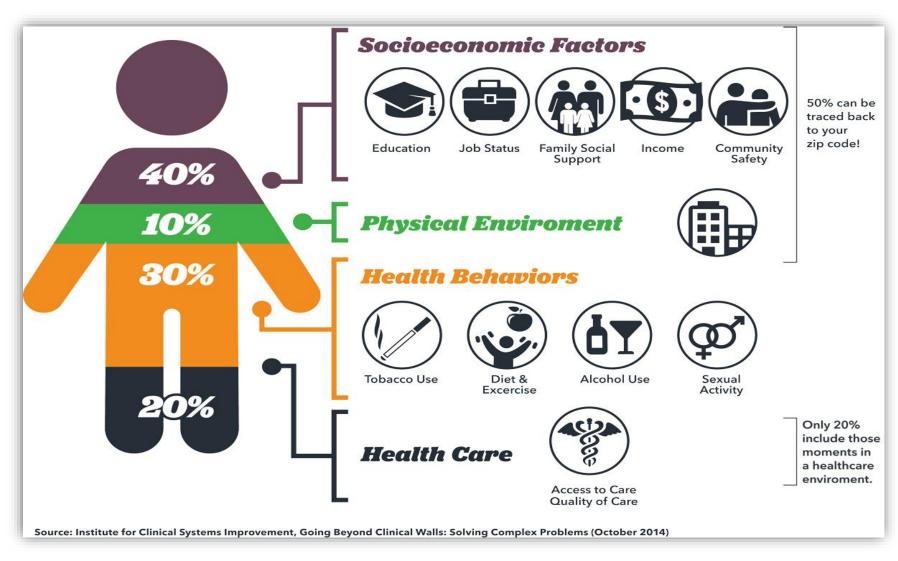






# SOCIAL DETERMINANTS OF HEALTH

- 80% of what makes up someone's health is determined by what happens outside of the hospital and health clinic.
- Require intersectoral collaboration
- "Health in All Policies"



# HEALTH SYSTEM CHALLENGES



#### **PLANETARY HEALTH**













#### FINANCIAL STRAIN



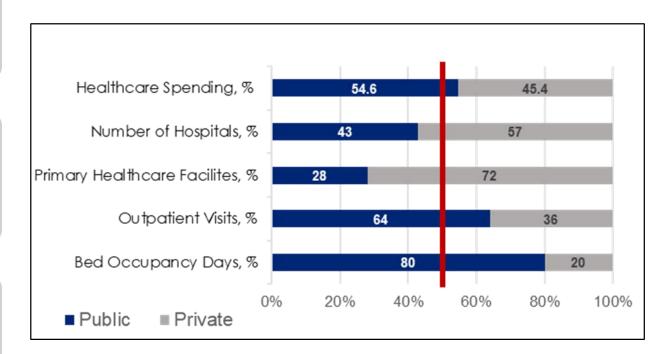
Healthcare costs in public healthcare facilities are funded by the government through government revenue, with minimal user fees for Malaysians.

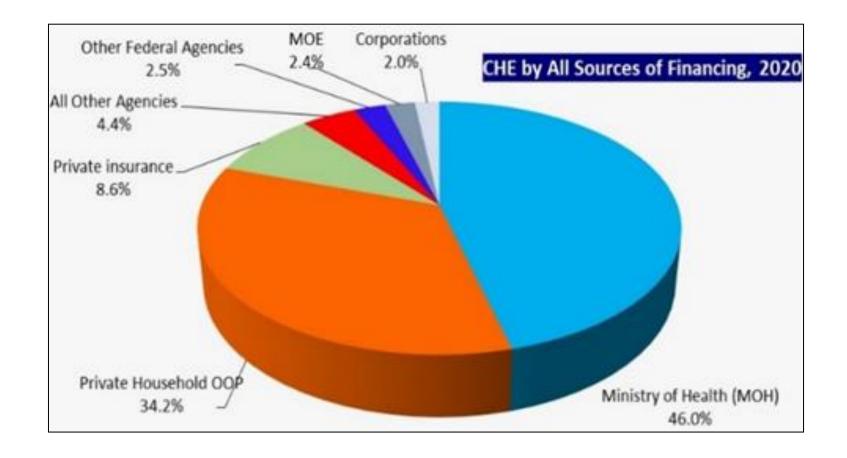


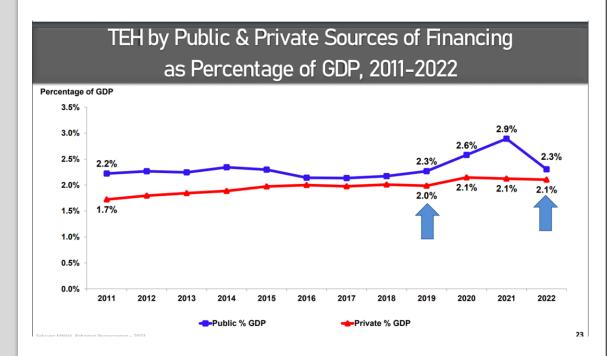
Public healthcare sector has more hospital beds, doctors and nurses, but have much higher volumes of patients compared to the private healthcare sector.



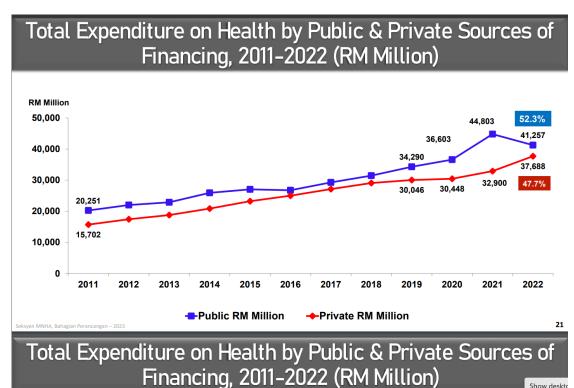
Chronic underinvestment in the public healthcare, delivery sector overcrowding, understaffed





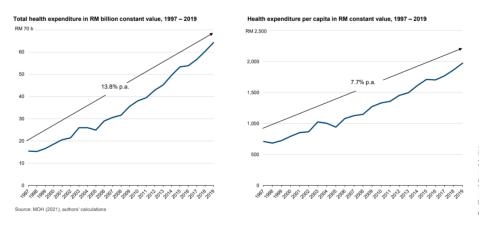


Despite the public sector serving a larger population, expenditures for both sectors are similar

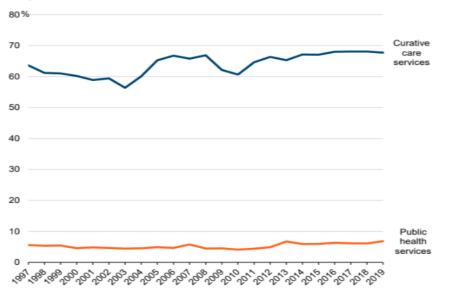


Source: MNHA Database 1997-2021, \*\* WHO, Global Health Expenditure Database, 2022

### Total health expenditure (public + private) has continued to rise

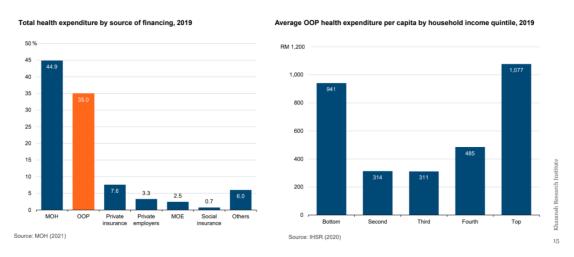


#### Comparison of share of total health expenditure on curative care services vs. public health services, 1997 – 2019



Source: MOH (2020)

# Households in Malaysia are paying a significant amount on out of pocket (OOP) health expenditure



Most of our health expenditure is spent on curative care and not enough on prevention

# ADDRESSING CHALLENGES



# ACHIEVING UNIVERSAL ACCESS TO QUALITY OF CARE

#### 12TH MALAYSIAN PLAN

- health and healthcare was a priority area under the theme Strengthening Security, Wellbeing, and Inclusivity.

Some of the key targets emphasized on

- 1. redesigning service delivery and improving access,
- 2. strengthening health financing to be on a sustainable footing,
- 3. improving health literacy
- 4. enhancing public-private partnerships
- 5. leveraging on digital technologies

#### **HEALTH WHITE PAPER**

- Prioritising primary health care and giving greater emphasis on preventive and promotive care
- Strengthening public health functions, including crises preparedness
- 3. Establishing a new social contract for shared responsibility, including public, private and civil society in improving health outcomes and solidarity in health financing
- 4. Increasing investment in health and decreasing out-of-pocket spending

# INCREASE HEALTH FUNDING

#### Current scenario:

Rising Healthcare costs – growing demand for healthcare services due to aging population and NCDs

To Increased funding for healthcare is crucial for several reasons:

- 1. Improving Access to Services: More funding allows for the expansion of healthcare services, making them accessible to a larger population, especially in underserved and rural areas
- 2. Addressing Workforce Shortages. Funding can be used to recruit and retain healthcare professionals, ensuring that there are enough skilled workers to meet the needs of the population.
- 3. Preventing and Controlling Diseases: More resources can be allocated to preventive measures, such as vaccination programs and public health campaigns, reducing the incidence of diseases
- In essence, increased funding for healthcare is essential for building a robust, equitable, and sustainable healthcare system that can meet the needs of all citizens.

# PUBLIC PRIVATE PARTNERSHIP INITIATIVE

Managed by a strategic purchaser.

Helping the government to see the health needs of the B40 group

#### **PEKA B40**

- Strategic purchaser (PH Corp), a not-for-profit company, manage initiatives related to financing healthcare services mandated by MOH
- Screening, Health aid, Cancer treatment, Transport initiative

#### SKIM PERUBATAN MADANI

 accommodate the health needs of the B40 group for Acute Primary Care Services.





# SPECIAL HEALTH INSURANCE SCHEME

- MySalam is a government-backed health insurance scheme, a FREE protection scheme designed for low-income Malaysians (B40 group)
- coverage for critical illnesses and hospitalization.
- It is managed by a collaboration between the Malaysian government and selected takaful providers.

TARGET GROUP: B40



Payment of RM 8,000 once in a lifetime when diagnosed with any of the 45 critical illness.

#### Hospitalization Benefit



Payment of RM 50 per day for admission to ward limited to 14 days or RM 700 per year.

# HARNESSING DIGITAL TECHNOLOGIES

- Electronic Medical Record
- On Line appointment system
- Virtual Clinic Consultation
  - Increase accessibility to health care
  - Reduce Congestion at the health facility
  - At patient's own comfort, less cost



#### LIPUTAN KLINIK KESIHATAN KONSULTASI MAYA



# WHOLE OF NATION APPROACH

- is a collaborative framework
- involvement of multiple sectors and community stakeholders to address national challenges.
- mobilizes resources and efforts from the public, private sectors, non-governmental organizations (NGOs), and local communities
- It has been applied to tackle issues such as public health, security, economic resilience, and social cohesion.







# SHOW CASE: AGED CARE SERVICES IN MALAYSIA



### **National Policies**

# NATIONAL POLICY FOR ELDERLY, 1995 & Plan of Action (1998)

NATIONAL POLICY FOR OLDER PERSON (NPOPs), 2011 Strategies



Lead by
Ministry of
Woman,
Family &
Community
Developme

Promotion & Advocacy

try of

an, Lifelong Learning

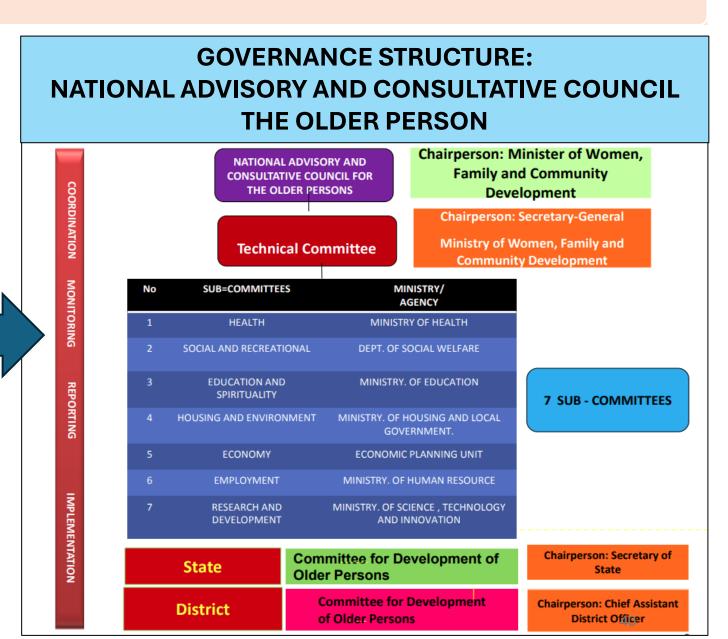
Security & Protection

Management & Shared Responsibilities

Participation & Unity across Generations

Research & Development

Policy focuses on empowering individuals, families and communities through provision of elderly friendly services and enabling environments to improve the well-being in old age.





### **National Policies**

# NATIONAL HEALTH POLICY FOR OLDER PERSON(2008)

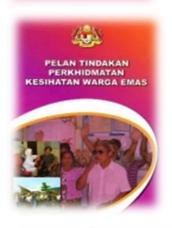




To ensure healthy, active and productive ageing by empowering the older persons, family and community with knowledge, skills, an enabling environment; and the provision of optimal health care services at all levels and by all sectors.



#### National Plan Of Action For Health Services Of Older Person (1997)



#### Plan Of Action For Health Care Services Of Older Person (2008)

To promote healthy, active and productive ageing by empowering older person, family and community with knowledge, skills and environment accordingly; as well as the provision of optimal health care services in all levels and by various sectors



# Ministry of Health, Health Care Of Older Person Action Plan (2023-2030)

To improve the level of health and reduce the health risks of the elderly by increasing access and equity in health services in  $an_{41}$  integrated manner.



# **National Policies**

# Legislations:

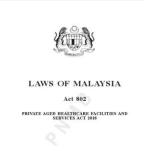
1993

- CARE CENTER ACT [ACT 506]
  - Regulates private care centres



2008

- PRIVATE HEALTHCARE FACILITIES AND SERVICES ACT [ACT 586]
  - Regulates private nursing care centres



2018

- PRIVATE AGED HEALTHCARE FACILITIES AND SERVICES ACT [ACT 802]
  - Regulates private care centres for aged person residentials and day care
  - Ensuring minimum quality of care for aged person in an accessible, affordable and sustainable manner
  - To ensure the aged dignity and integrity



#### Ageing Population Ecosystem in Malaysia There are well defined verticals that contribute to supporting Malaysia's ageing population















#### Funding / Retirement Income

- Pension funds, NGOs and religious organisations
- Funding from children and family relatives







#### Professional Training

- Provide professional training to equip caregivers to effectively care for the elder.
- · Provided by education institutions as well as aged care centres themselves via short classroom sessions and on the job training.





#### Infrastructure Development

- Develop independent living homes and facilities for sale/lease
- Complementary care and nurse on call plugged into the development.



#### Healthcare Providers

· Public, semi-private and private hospitals providing general health, rehabilitative and geriatric care







#### Care Centres/Service Providers

 Pravision of Independent Living and Assisted Living, Low to High Level of Care facilities.









#### Tech-Enabled Ageing Care Services



. On-demand caregiving solutions to the elderly

#### managedcare

 Aggregator/platforn to coordinate healthcare and long-term care services

#### Click2Health

 On Demand Home Healthcare Private Nursing & Caregivers

#### Fundamental Research

. Enrich understanding of ageing process and necessary support needed by elderly





#### SOCIAL WELLBEING RESEARCH CENTRE (SWRC)

- UKM: Center For Healthy Ageing And Wellness (H-care)
- · UPM: Malaysian Research Institute On Ageing
- UM: Social Wellbeing Research Centre
- Monash University Malaysia: Gerontology Laboratory



# **FUTURE DIRECTIONS**



From sick care to health care and wellness



Digital health
Initiatives –
electronic
health record
across the life
span



Leveraging big data, AI, and the latest technology

-implement precision public health for datadriven decisionmaking,



Efficient provider payment mechanism - eg:

Capitation, fee for service

or
pay for
performance



Enhancing the "Whole-of-Society" strategy: a holistic approach in which all sectors of society—governments, private businesses, non-profit organizations, communities, families, and individuals—collaborate to address complex societal is sues

# **SUMMARY**

- Primary care services are provided by both public and private sectors which are separated in their organization, financing and governance.
- Malaysia has made significant progress towards achieving UHC, with a comprehensive healthcare system that covers both public and private healthcare sectors.
- Its extensive reach and integrated services have ensured better health outcomes for the entire population, showcasing the strength and success of the system.
- However, there are still challenges and areas for improvement in achieving full UHC

# THANK YOU