



A Collaborative on Contracting Organizations for Health-Related Services Call for Expressions of Interest

March 26, 2024

Summary: Contracting is an essential governance tool in mixed (public plus private) health systems. This collaborative is for countries interested in learning about how to contract organizations – specifically, organizations that deliver selected TB and other health-related services – using domestic financing and systems. Though this offering would be conducted with TB used as an example, the knowledge and tools it produces would be generally applicable and invaluable to any health system leader interested in sustainable health financing options within mixed health systems. The goal of this initiative is to equip participants with the knowledge and skills to take steps towards establishing, improving, or expanding contracting for TB and other health-related services, including those that support the achievement of TB goals. Countries where health services contracting is an emerging or existing policy priority are especially encouraged to apply. The Collaborative will run for one year and is open to all USAID priority countries with high TB burdens and all JLN member countries.

USAID’s Health Systems for TB (HS4TB) Project is collaborating with the Joint Learning Network for Universal Health Coverage (JLN) to offer a **Collaborative on Contracting Organizations for Health-Related Services**. The JLN brings countries together for productive and high-impact practitioner-to-practitioner exchanges on a variety of health systems topics, often related to health finance or primary health care service delivery. We invite countries to submit an Expression of Interest to participate in this opportunity.

Description of topic

This Collaborative is for countries and participants interested in learning more about, initiating, advancing or refining their programs and policies on contracting. It will equip participants with the knowledge and skills to effectively take steps towards establishing, improving, or expanding TB- and health service-related contracting. The collaborative will last around one year.

In this document and Collaborative, by “contracting” we mean contracting with NGOs/CSOs and the for-profit private sector for specific, selected TB and other health-related services, using a country’s own procurement system and domestic funds, to increase health system efficiency and effectiveness. What will *not* be covered in this collaborative are approaches to empanelment of individual private sector service providers into broad-based health insurance schemes.

Contracting of organizations is an essential governance tool in mixed (public plus private) health systems. By contracting, the public sector can leverage the skill sets and reach of diverse health system actors, and support comprehensive responses with public sector financing. It offers a pathway to sustainability for countries that currently rely on donor-supported NGOs for parts of their health response.

There is a particularly important role for non-government organizations in delivering TB-related public health interventions in high TB burden countries. TB will therefore be the lens through which we approach contracting. We expect, however, to also bring in relevant contracting examples and lessons from across the health system. The benefit to participants will be insight into how to launch or improve their contracting policies and practices with a spotlight on TB-related services but with relevance to all health areas.

With facilitation by Management Sciences for Health (MSH), the collaborative will bring together a group of frontline practitioners and country representatives to both exchange and improve their national strategies through cross-country virtual engagements and an in-person workshop.

Learning agenda

Over the course of the year, the collaborative will enable participants to share country experiences on what is needed to initiate the country conversation on health contracting, and why challenges and constraints to contracting exist and how to overcome them. This will provide examples that other countries can learn from as they tackle their own unique contracting challenges.

The year-long program will consist of seven workshops: one virtual launch meeting; five virtual workshops to progress the work; and a mid-point in-person workshop. We envision specific topics or topic groupings on: 1) political will, governance and making the case for contracting; and 2) legal and regulatory environment for contracting; development partner support will likely be a sub-theme of both topics. While the learning exchange will be informed by our previous work in this space, the final learning agenda (i.e., the topics and questions to be explored) will be shaped in consultation with country participants during the scoping phase.

Countries will work on summary action plans that relate to the current status of contracting in their respective countries, with indicators to track future progress. Topics for the virtual facilitated workshops will be shaped by the goals of the action plans and the interactions of participants.

Level of effort and duration

There is no financial cost to joining, but participants will be expected to contribute their time, perspective, and expertise, join and actively participate in at least 75 percent of the workshops, and complete some short individual and group work assignments during the course of the collaborative (such as surveys, drafting stakeholder lists and a brief action plan, or pre-reading).

Anticipated outputs and outcomes

The overall goal of this collaborative is to equip participants with the knowledge and skills to effectively advance contracting for health services, including TB, in their country. Countries will develop action plans and it is anticipated that several participating countries may take concrete steps towards establishing, improving, or expanding contracting for TB and other health-related services.

The anticipated collective outputs for this collaborative include a comprehensive synthesis report and a shorter technical brief capturing all learning and outcomes of the collaborative.

Participant profile

We invite countries (for JLN member countries, their Country Core Groups) to nominate a team of three individuals, ideally from different parts of the health system, who are currently involved or expect to be

involved in policy making or implementation on contracting of health services. Countries are encouraged to apply whether contracting for TB or other health-related services is an emerging or existing health policy priority. We aim to bring together countries at different stages of progress in contracting – from information gathering to advanced planning - for a mix of experiences and rich cross-learning.

To maximize the anticipated benefit from participation in this collaborative, country teams would ideally include both:

- Two national-level officials from health ministries or other relevant agencies responsible for either private sector reforms and engagement and/or with procurement, health financing reform or contracting; and
- One national TB Program stakeholder involved in policy, planning, and/or financing.

How to submit an Expression of Interest

Country teams should respond with their Expression of Interest through [this link](#) (one form per country). You will be asked to:

- Summarize how the topic is of relevance to your country's current UHC agenda.
- Briefly describe specific interest in or experiences with contracting organizations for selected TB and other health-related services that your country can share with other countries, including policy consideration, successes, or challenges.
- Identify 2 representatives from the MoH units or another agency's policy and planning and/or health financing unit and 1 representative from the NTP who fit the participant profile description.

The technical facilitation team will review all Expressions of Interest and make every effort to accommodate all interested countries. Any knowledge products developed by the collaborative will be shared publicly as they become available.

Please respond with your Expression of Interest by **April 15 (now extended to April 22)**.