

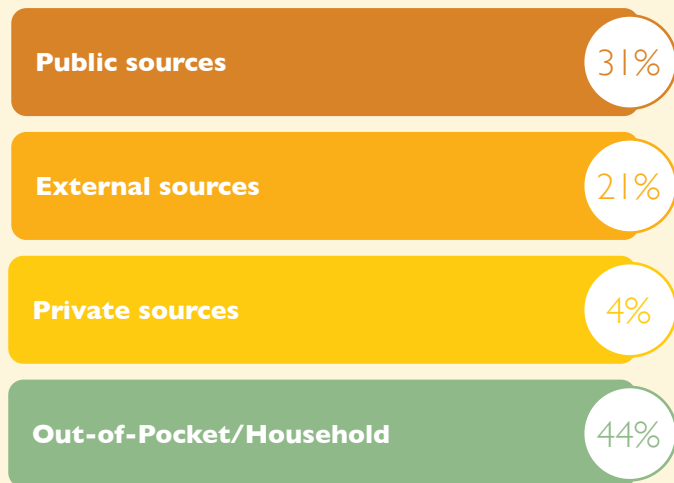


Burkina Faso

Stronger, more effective Primary Health Care (PHC) provides a critical backbone for universal health coverage (UHC). There is consensus that public funding should be the predominant source of health funding including funding of PHC services. In this series of country profiles, we describe how public funding is allocated to the health sector (resource allocation), how those resources are transferred to health providers (provider payment) and the decision space primary care providers have to use PHC funds.

Source of PHC funds (2023)

Public sources are the largest source of pooled funds (31%).
Out-of-pocket spending made up 44% of health spending in 2023.



Source: CS 2023

Providers of PHC services (2024)

Source: Statistical Yearbook 2024_MS



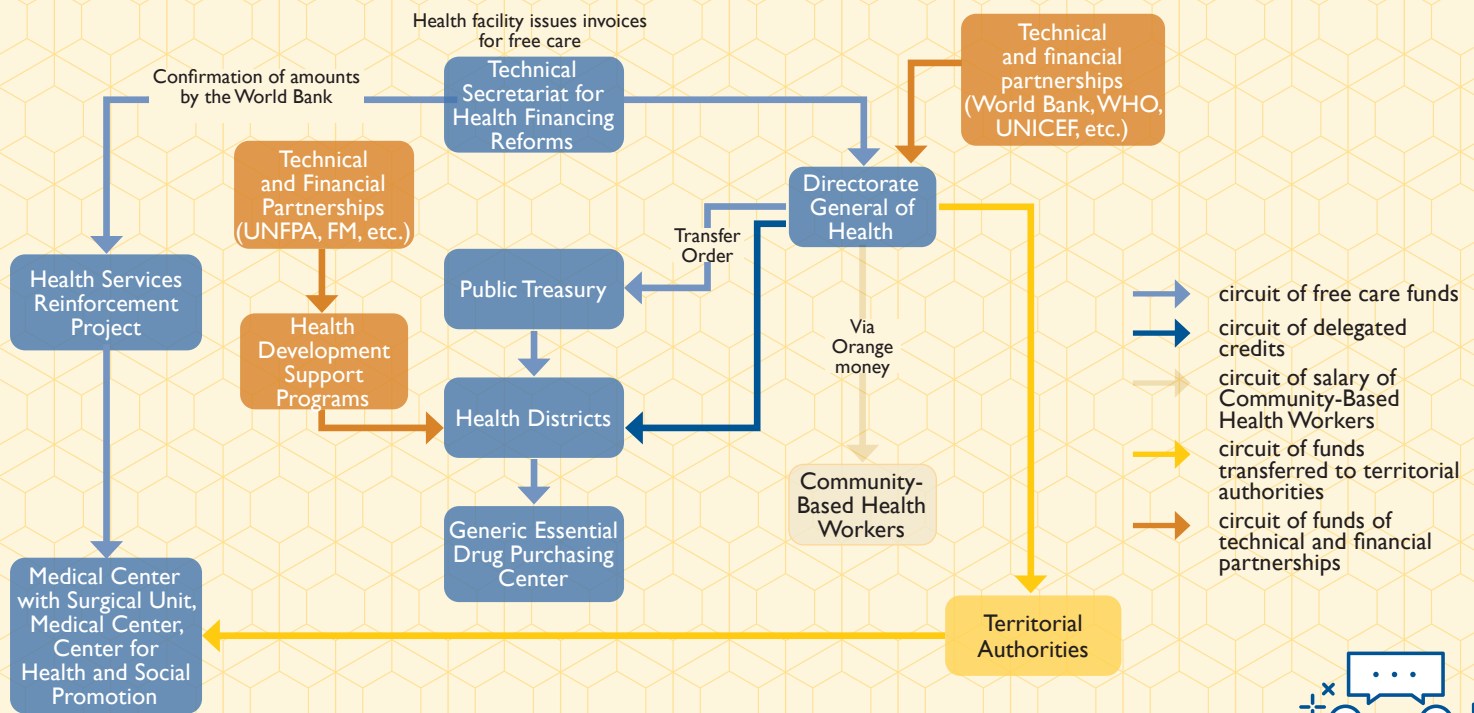
How are public funds allocated to PHC?

Resource Allocation describes the rules and criteria to distribute public funds to various sectors including health.

- » The Ministry of Finance allocates funds through the Ministry of Health as *crédits délégués* (delegated credits) and *crédits transférés* (transferred credits) to the 70 health districts that oversee the primary care health facilities.
- » *Crédits délégués* are funds allocated by the central government to local authorities for specific purposes, particularly health and education.
- » *Crédits transférés* are transferred to local authorities to procure goods and services for primary care facilities in their jurisdiction.
- » The Ministry of Health allocates resources based on the budget availability, health needs and vulnerability for health services and social protection.
- » The Ministry of Health also transfers resources for the free health services program – *Gratuité* based on utilization of services



How do PHC funds flow to the primary care providers?



Main provider payment mechanisms used for primary care services

| | | | |
|----------------------------|-----------------|---------------------------|------------------|
| <i>Gratuité</i> | Fee-for-service | <i>Crédits délégués</i> | Line-item budget |
| Community Based Insurance | Fee-for-service | <i>Crédits transférés</i> | Line-item budget |
| Employment Based Insurance | Fee-for-service | | |

Primary care facilities autonomy for financial management

- » PHC services are delivered at Health and Social Promotion Centers (*Centres de Santé et de Promotion Sociale – CSPS*) and Medical Centers (*Centres Médicaux*).
- » The health district receives public funds through the *crédits délégués* (delegated credits) and *crédits transférés* (transferred credits) for inputs and capital expenditure for primary care facilities.
- » Primary care facility managers receive public funds directly through the *Gratuité* program for maternal and child health services.
- » 60% of the *Gratuité* funds are transferred directly to the national medical stores – *Caisse d’Approvisionnement et de Gestion des Médicaments Essentiels Génériques* for facilities to access essential medicines.
- » Primary care facilities also collect user fees for other services.
- » Unused PHC funds are returned at the end of the year or reconsidered for the following year’s budget.

Accountability mechanisms for public primary care providers

- » Financial reporting rules are defined by the Ministry of Finance.
- » The government has an internal and external audit function for all public agencies including the health districts and public health facilities.
- » The Ministry of Health and Directorate of Health conducts annual audits to ensure compliance to finance laws and regulations.
- » For the *Gratuité* program, civil society organizations review the claims from the facilities to verify and audit claims and payments adjusted based on their audit.