

Brexit!!!!!!!!!!!!!!



Linking Health, fiscal, macro-economic and market policy

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Purpose

- Positioning health at the core of national fiscal and economic institutions and policy
- Models and approaches
- UK considerations
- Reflections on the strategic positioning of “public health”

Context

- Health, social care and public services – sustainability -“miscalculation of sublime proportions”
- Public health – peripheral or not considered
- ST reactive perspectives dominate
- PH – Health and Social care and health in all policies
- Utilisation of current know how/forecasting capabilities
- Impact on public services and the economy

Context

- Piecemeal considerations
- Growth of Independent national fiscal institutions (OECD 2014)
- Upstream policy interventions- NCDs - “inverse public health law”

OECD review 2014 – independent fiscal institutions

***“Considered among the most important
innovations in the emerging public financial
management”***

Independent fiscal organisations

- OECD review –principles - fiscal discipline, budget transparency, accountability, raise quality of debate on fiscal policy
- Characteristics – independence, non partisan, mandate, resources, relationship with legislature, access to information, transparency, communications, external evaluation
- IMF – not identified any national fiscal institute solely for health

Models

- Statutory, academic, parliamentary, autonomous and linked to national bank models
- Office of Budgetary Responsibility/Scottish Fiscal Commission (Statutory)
- Australia, Canada, Italy, Korea, Mexico, USA (Parliamentary – mainly costing)
- Finland and France (Autonomous units)
- Ireland, Sweden and Institute of Fiscal Studies (Academic)
- Austria and Slovakia (National Bank linked)

OBR (Office of Budget Responsibility) functions

OBR

- Economic and fiscal forecasting
- Evaluating performance against targets
- Undertaking sustainability and balance sheet analysis
- Evaluation of fiscal risks
- Analysing and reporting on the sustainability of public functions

Public health perspective

- Health, disease and risk factor forecasting and the fiscal and economic impact on public services and the economy
- Analysis of the impact of interventions
- Analysis of the contribution of health capital
- Analysis of the impact of health in public policy and other sectors

Key questions

- How does healthy life expectancy and morbidity compression impact on the use of public services and productivity?
- What are the long term economic benefits of reducing the gap in healthy life expectancy across the social gradient
- How is human health capital linked to a healthy workforce and economic productivity
- What are the implications of increasing healthy life expectancy for pensions policy

Key questions

- What are the current trends for NCD risk factors and the disease , public service and economic consequences
- What interventions will substantially reduce the epidemics of NCD's and over what timescales?
What is the Rol in interventions on NCDs?
- What are the full costs to the state and society of tobacco , alcohol, and ultra-processed foods and what cost are recovered by the state ?

Key questions

- What interventions will reduce the consumption of unhealthy commodities and what are the economic and fiscal consequences?
- What economic incentives could be used for prevention?
- What are the implications of increasing healthy life expectancy for disability and other related benefits?

Key questions

- What are the key mechanisms for raising funds from profitable but health damaging industries?
- What are the optimal fiscal and pricing policies to achieve policy objectives and raise the necessary funding?
- Etc. – adverse and perverse outcomes

The challenges

- Strategic analytical tools
- “Higher standard of proof” required
- Lack of demand side modelling capabilities
- No link up of epidemiological and health economic models
- Lack of information on commercial and market determinants
- Trend analysis – demographics, disease and protective factors
- Accurate cost data and information
- Utilisation of very expensive data lakes
- Expert input into treasury and OBR reviews

Concluding remarks

- National Fiscal organisations- opportunity for inclusion and/or deployment of functions in National PH Agencies or fiscal think tanks
- Form follows function new remits and/or organisations
- Key characteristics –OECD principles -impartial – free of vested and ideological interests
- Means of incorporating health in all policies- driven by fiscal and economic and market policies

Concluding remarks

- Mapping and gapping
- Advocacy- securing political leverage for such change in the UK
- Increasing literacy in fiscal institutions and the wider health community