

REQUEST FOR INFORMATION

Digital Financial Services on Health Outcomes and Health Systems

This is a Request for Information (RFI). This is not a Request for Proposal (RFP) or a Request for Application (RFA), and is not to be construed as a commitment to issue any solicitation or Notice of Funding Opportunity, or ultimately award a contract or assistance agreement on the basis of this RFI, or to pay for any information voluntarily submitted as a result of this request.

This RFI is issued for the purpose to offer the opportunity for interested organizations and individuals to provide information, opinions, and recommendations on approaches for a commissioned landscaping assessment of the role that digital financial services (DFS) can play in advancing financial protection and supporting improved health systems performance in the context of overall health systems strengthening efforts.

Responses must be a maximum of seven pages in length and must focus on addressing the four areas outlined in the 'Information Requested' section. Please do not submit applications, proposals, resumes, or promotional materials, as they will be discarded. The electronic submission must be written in English and typed on standard 8 1/2" x 11" paper (216mm by 297mm paper), single spaced, font size 12 with each page numbered consecutively.

This RFI will be open from release date July 19, 2019 through July 26, 2019 at 5PM Eastern Standard Time. Please send all responses to this RFI via email to Jackie Clark at jclark@path.org with a copy to procurement@path.org. A live Q&A teleconference will take place on July 24, 2019 from 9-10AM Eastern Standard Time to address any questions related to the RFI. All interested parties are welcome to join, and attendance at the Q&A session will not affect submission scoring. For those unable to attend or wanting to reconfirm answers to questions, a recording of the Q&A session will be posted on the Digital Square wiki page found here: <https://wiki.digitalsquare.io/index.php/Solicitations>. Please join us by clicking the following link: <https://path.zoom.us/j/920899915>. If you would prefer joining the session via telephone from the United States, please use (669) 900-6833 or (877) 369-0926 (toll free). If you are planning to join the meeting from outside of the United States, please visit this website to locate your international toll free number: <https://zoom.us/j/920899915>. Telephone entry will require the following meeting ID when prompted: **920 899 915**.

Summary

About 100 million people are still being pushed into "extreme poverty" (living on \$1.90 or less a day) because they have to pay for health care. Financial protection is achieved when direct payments made to obtain health services do not expose people to financial hardship and do not threaten living standards. A key to protecting people is to ensure prepayment (savings) and pooling of resources (insurance) for health, rather than relying on people paying for health services out-of-pocket at the time of use. Advances in digital technology have made it more efficient and affordable to reach people with key services. This RFI asks interested parties to suggest an approach to conduct a landscaping assessment of the role of digital financial solutions

(DFS) in the context of efforts to both advance financial protection and support improved health system performance. The proposed assessment would focus on the impact of digitalization in the context of broader efforts in low-resource settings, on three areas: (1) financial protection, (2) demand for and utilization of health services among clients, and (3) quality and responsiveness of health service providers. A fourth and final section of the assessment would focus on key implementation considerations when incorporating digitization of financial services into health systems strengthening (HSS) efforts.

Description of Digital Square

PATH is the leader in global health innovation. An international nonprofit organization, we save lives and improve health, especially among women and children. We accelerate innovation across five platforms—vaccines, drugs, diagnostics, devices, and system and service innovations—that harness our entrepreneurial insight, scientific and public health expertise, and passion for health equity. By mobilizing partners around the world, we take innovation to scale, working alongside countries primarily in Africa and Asia to tackle their greatest health needs. Together, we deliver measurable results that disrupt the cycle of poor health. Learn more at www.path.org.

Digital Square (<http://digitalsquare.org/>) is a partnership of the world’s leading digital health experts from 40+ organizations working together with countries to strengthen digital health systems, implemented by PATH. Digital Square offers a new way to invest in digital health—providing a space where countries and members of the global community can gather to think big and do good, together. By convening government officials, technological innovators, donor and implementation partners, and others across borders and boundaries in the Digital Square, we can grow possibility into reality by focusing on our common goal: **connecting the world for better health**. Digital Square works in three key ways:

- **Co-investment:** We coordinate investments in digital health to maximize the impact of every dollar spent.
- **Global goods:** We scale tools and technologies that can be adapted to different countries and contexts.
- **Digital market readiness:** We create digital market readiness by building capacity with governments, local technology developers, and health workers.

Scope of Services

Background and Context

About 100 million people are still being pushed into “extreme poverty” (living on \$ 1.90 or less a day) because they have to pay for health care. Over 800 million people¹ (almost 12 percent of the world’s population) spent at least 10 percent of their household income to pay for health

¹ [https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-\(uhc\)](https://www.who.int/news-room/fact-sheets/detail/universal-health-coverage-(uhc))

care. Financial protection is achieved when direct payments made to obtain health services do not expose people to financial hardship and do not threaten living standards. Financial protection is at the core of universal health coverage and is one of the final coverage goals of the Sustainable Development Goals. Out-of-pocket payments for health care can cause households to incur catastrophic expenditures, which in turn can push them into poverty. A key to protecting people is to ensure prepayment (savings) and pooling of resources (insurance) for health, rather than relying on people paying for health services out-of-pocket at the time of use. Advances in digital technology have made it more efficient and affordable to reach people with key services. For example, the ubiquity of mobile telephony and mobile phone penetration provide opportunities for public and private service provision, at new and unprecedented levels, amplifying population reach and coverage. Likewise, data from digital channels and solutions provide key information, feeding analysis for decision making, which can support continuous improvement of health system management and performance.

What are Digital Financial Services?

Digital Financial Services (DFS) are financial products and payment services (e.g., savings, loans, insurance, remittances, and bill payments) that are enabled via electronic channels. Products and services can be accessed using mobile phones, electronic cards (e.g., credit cards, debit, and prepaid cards), computers, and other electronic instruments.

Purpose of the Landscaping Exercise

Building on the March 2019 publication “The role of digital financial services in accelerating USAID’s health goals”², USAID’s Global Health Bureau, via its Office of Health Systems and its Center for Innovation and Impact, is considering commissioning a landscaping assessment on the role of digital financial solutions in the context of efforts to both advance financial protection and support improved health system performance. The purpose of this report would be, if funded, to help audiences understand the factors (beyond digitization) that make these solutions successful and the role that digitization can play in enhancing and leveraging these factors.

Generally, the assessment may seek to understand the following questions (to be finalized with the implementing partner if funding is available):

- **Financial Protection:** To what extent have digital health savings and digital health insurance products in low resource settings increased financial protection among clients, including the poor and vulnerable? How does this differ from the results obtained by non-digital approaches to increasing financial protection?
- **Demand and Utilization:** How have any advancements in financial protection from the use of digital financial products also contributed to increased demand for and utilization of health services among clients, including the poor and most vulnerable populations? Were these effects

²https://www.usaid.gov/sites/default/files/documents/15396/DFS_Accelerating_USAID_HealthGoals.pdf

expected as part of the design of the DFS? To what extent can we conclude that such effects were due to the use of DFS?

- **Health Systems Performance:** Has the presence (and if so how) of DFS at the health facility level (e.g., digital billing and payments) improved the quality and responsiveness of service providers? Were these effects expected as part of the design of the DFS? To what extent can we conclude that such effects were due to the use of DFS? To what extent can we identify the impacts of DFS within implementation of broader digital solutions packages?

- **Implementation Considerations:** What barriers/challenges were faced in the implementation of DFS? How did programs adapt? Where successful, what were the critical components in implementation? How and why have providers and implementations incorporated DFS into broader digital solutions or complemented DFS with broader digital solutions? In regard to digitalization, what are examples of successful change management processes (effective approaches of moving from paper-based to digital management systems) to maximize potential results?

This assessment would likely include insights on the extent to which digital solutions can enhance the impact of HSS activities aiming to improve financial protection and provide insights on what the appropriate HSS design factors are, or enabling operational environment is, for incorporating DFS. The research questions aim to identify, where possible, the potential contributions specifically of DFS to advancing financial protection and strengthening health systems, even when those solutions are embedded within broader digital service packages. Again, these research questions are illustrative and will be finalized with a partner if this activity is undertaken.

Through a literature review and remote consultations at minimum, this exercise will engage leading digital health service providers, associated health facilities, and their clients in key geographies to understand results and gather lessons.

Planned Deliverables

The main deliverable is expected to be a final, detailed landscape which describes the context, methodology, findings, and conclusions of this work. The final report will be made publicly available. A shortened version of the report may also be submitted as a commentary or similar type of paper for an appropriate peer-reviewed journal.

As part of the anticipated collaboration, the partner will be expected to engage regularly with USAID.

Funding Available

For planning purposes, potential partners can consider the initial budget, if available, for this work to be between \$150,000- \$200,000.

Additional funds may be made available from USAID or other donors as required, based on the final budget and agency funding decisions. This RFI is not a funding commitment.

Desired Capabilities

- Strong familiarity with health systems and HSS approaches.
- Strong familiarity with DFS and their use in health systems.
- Strong familiarity with health insurance schemes in low resource settings (e.g., CBHI, Micro Insurance, etc.).
- Familiarity with the requirements of different types of DFS within health systems.
- Strong familiarity with developing country/emerging market environments.
- Understanding of the public health context in developing countries, particularly in Africa.

Information Requested

PATH requests that interested organizations send a brief response (must be a maximum of 7 pages total) with the following information: comments on scope of services (up to 2 pages), including initial suggested modifications, if any; the approach the organization would utilize in performing this work (up to 1 page); the relevant institutional capabilities and relevant previous work (up to 1 page); and a summary budget showcasing a rough estimate of resources required by cost category, including project term, outlined in Figure 1 (up to 1 page). Additionally, a detailed description of the proposed research team showcasing their current or previous expertise in this field is required. This information should include: the size of the proposed team, each member’s relevant skills and experience, and proposed level of effort for each member of the team (up to 2 pages).

Figure 1: Cost Category Outline

Ex. Project Term, 6 months

| Cost Category | Total Cost (USD) | Narrative Description |
|----------------------|------------------|---|
| <i>Ex: Personnel</i> | <i>\$10,000</i> | <i>3 full time equivalent project staff</i> |
| Personnel | | |
| Fringe Benefits | | |
| Travel | | |
| Equipment | | |
| Supplies | | |

| | | |
|----------------------------|--|--|
| Other Direct Costs | | |
| Contractual | | |
| Consultants | | |
| Total Direct Costs | | |
| Indirect Costs | | |
| Total Project Costs | | |