Interview: Eduardo Gonzalez Pier – Partner, Innovasalud; Former Vice-Minister for Integration and Development of the Health Sector, Mexico

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Eduardo Gonzalez Pier, former Vice-Minister for Integration and Development of the Health Sector, shares his perspective on current dynamics in Mexico's public health sector and highlights how collaboration between private and public stakeholders would benefit the Mexican system as a whole.

You were Vice-Minister for Integration and Development of the Health Sector from March 2014 to March 2016. What would you highlight as your main achievements during your tenure?

My main achievement has been the strengthening of the actual vice-ministry; this includes many of the building blocks of our country's health policy, such as information systems, performance evaluation, public policies for human resources, quality assurance, technology assessments and the planning for health system resources, including its infrastructure. Secondly, we put together several legal and operational components of the health integration and universality of Mexican healthcare. Finally, we developed communication systems with the main health institutions both public and private.

What is the role of Human Resources within your main policies? What are the most immediate areas that could be improved in the Mexican healthcare sector?

Human Resources is absolutely crucial. Without a new and improved human resources policy with the entire sector we will never achieve the right conditions and workforce towards universal healthcare coverage in our country. This includes the most important members whose roles in the medical practice couldn’t be more important: Physicians, nurses and health specialists.

In terms of areas that could be improved in Mexican healthcare I envision a three-dimensional policy approach that reflects the key imbalances and gaps in supply and demand of human resources: i) more and better trained health personnel which is in short supply, ii) concentrated training in specialties that address the growing care needs related to chronic conditions and iii) better incentives and technology to allow for highly trained personnel to reach underserved populations. Without a comprehensive well-targeted human resource policy there is a very small chance of succeeding towards a deeper, wider and more equitable coverage.

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We see that the government is committed to both, improving the quality of services in the public sector and steadily moving forward to a more integrated Mexican health system. What is your perspective on the current dynamics occurring in the public sector, and what are some specific challenges that should draw the attention of the key stakeholders engaged in this endeavor?

Collaboration between different institutions is the single key factor that could uplift the whole sector. Integrated care and collaboration efforts to standardize access across institutions is essential. For example, if we talk about procurement and purchasing access to drugs, we should make sure that every public institution is getting them at the same rates with the same opportunities and conditions. If we talk about quality standards, we certainly find ourselves in a grey area because each institution has a different performance and response capacity, facilities and equipment. Efforts need to converge from different angles at different speeds according to the requirements of each specific subdivision of the health sector in order to set realistic and tangible goals that can benefit our population.

What do you identify as the main rooms for improvement to foster greater efficiencies within the public system and generate better health performance, while Mexico continues to display administrative cost representing 8.9 percent of the total health spending, the highest rate in the OECD?

The goal should be to significantly reduce administrative costs by both revising the cost accounting and revisiting the inefficient processes. More attention needs to be placed on tracking the flow of

funds to understand where and how the money is being spent. Why is it going there? What can we do to optimize the budget? After that assessment we should look for associated coordination to defragment the system in order to avoid duplicities and allocate the funds in a more efficient way.

When we met with Mikel Arriola, he explained that if the institutions are not able to implement game-changing prevention and control measures in the immediate future, health investments to cure chronic diseases in Mexico will skyrocket from 80 billion Mexican pesos in 2016 to 350 billion pesos in 2050. As Vice-minister, you were notably in charge of the coordination between the health and education sectors for human resources training. What do you identify as the most promising options that could improve prevention and early detection of chronic diseases in Mexico?

There are two important factors that come into play: the aging of our population which goes hand in hand with a higher life expectancy and results in the incremental presence of chronic diseases. Patients need to be diagnosed and treated as timely and efficiently as possible and health institutions should concentrate on providing high quality cost effective health within their budgetary boundaries even when increasing life expectancy could also increase lifetime cost of care. Prevention has been highly overrated and over-used as a method to guarantee savings. Lowering the risk factors of our population and implementing preventive programs and better controls for chronic patients will deliver better health but will not necessarily result in savings in overall lifetime costs of care . The longevity inherent in this scheme will automatically elevate the lifetime costs of patients and thus the budget involved with the healthcare sector. The total cost for intervention to increase the life span of millions of citizens most definitely will cost a lot of money and resources. The total savings related to preventing or controlling a disease will irremediably be spent in curing another ailment that will eventually occur in the patient or treating a better managed chronic condition for a longer time. Regardless of the extra costs or savings of extending healthy life expectancy the right thing for health systems to do is to deliver the best care possible for patients in a cost conscious manner. It is important to note that the economic evaluation of better health care and living longer healthier lives goes beyond the health sector, and needs to be framed in a much wider point of view.

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Where do you think the most important changes could be made to improve the health of the Mexican population? What are some of the key areas that the government along with the policy makers should focus on?

Many solutions lie beyond the healthcare sector and more importance should be payed to social determinants and risk factors that greatly influence health outcomes. For instance, many Mexicans die unnecessarily in road traffic accidents. By improving the quality of roads, many lives could be saved. Education and nutrition also has an enormous role to play and we need to take solutions to a grassroots level if we are interested in creating a positive, accident-free environment before we take things to the more costly option of medical care.

What have been some of your most recent activities, personal objectives and responsibilities within the Wellness Foundation, and the impact the Foundation strives to have on the Mexican health ecosystem?

For the near future the Mexican health sector will experience some budgetary constraints. More social spending in general will depend on the government's ability to increase their revenues. Beyond that, there will be many competing forces that are striving to get those funds: not only the health care branches but every major player in the public arena, such as pension, education, and security institutions, which are also an important part of our country's well-being while at the same time they represent important expenses.

In recent times I have been increasingly engaged in research activities with Funsalud (Mexican Health Foundation) and the Center for Global Development in Washington DC. Part of these activities relate to increasing the importance of the private sector, which can have an increasingly important role under a budget constrained public sector, to address the health care needs of our society and be a paramount actor to bring efficient solutions to the table. The benefits for the entire nation's health agenda of an efficient public- private collaboration would be enormous. Health technologies are moving very fast and the private sector is well positioned to take advantage of these new care trends. Discoveries and organizational models are constantly changing the way the health system operates, especially in medical care. At this point in time I believe that the private sector could take advantage of these new trends much faster than the public sector could. The new information systems that are being developed could represent a huge leap forward towards a world-class health care service by providing a much more intelligent profiling and information about each patient, both for prevention, diagnostics and care.

What is the fundamental objective that you want to achieve with Innovasalud?

My main objective is to improve health by mobilizing private capital and incorporating new models and technologies into the health system. This can be achieved by creating a healthy mix of both the public and private sectors in the market. This is not an easy task but we will definitely do our best. A lot of creativity and problem solving skills will be needed but I believe it will be and

enjoyable and worthwhile project.

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