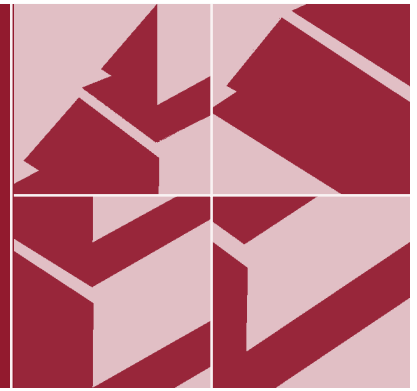




Partners for Health Reform *plus*

PHR *plus*

in brief en bref en breve



A Collaboration with Mexico's National Institute of Public Health

Costing Public Sector HIV/AIDS Treatment in Mexico

With declining prices for antiretroviral drugs (ARVs), there is growing demand to make ARV treatment available in developing countries. Policymakers and donors, under pressure to act quickly to provide drugs, need better information about the total costs of ARV treatment in order to structure effective, affordable, comprehensive treatment programs.

providing ARV treatment. Mexico's aim is to implement comprehensive, effective treatment programs that include essential non-drug elements such as training of medical personnel, strengthening of testing centers, lab capacity, drug logistics management, patient monitoring, and collaboration with civil society groups.

Since 1992 Mexico has been providing ARVs free of charge to a significant minority of its population, insured workers and their dependents covered by one of the country's social security institutes. However, for the uninsured, who seek care at Ministry of Health facilities, receiving ARV treatment has been much more difficult. In order to address this gap, the Minister of Health has committed to providing ARV treatment to all who need it by 2006.

Gathering information on resource utilization from medical records of a convenience sample of patients with an HIV/AIDS diagnosis and on costs from administrative sources in 10 health facilities in three Mexican states, the study will estimate the total annual cost of care for different types of patients.

The purpose of this study, supported by USAID and the Mexican Ministry of Health, is to examine the national HIV/AIDS treatment program in three health institutions in Mexico (the Mexican Social Security Institute, Ministry of Health facilities, and the National Institutes of Health) and estimate total costs (including non-drug costs) of

The methodology developed allows for cost comparison of the treatment program provided by the major institutions that treat HIV/AIDS patients and will provide the information necessary to guide future planning and scaling up of treatment programs. Initial findings of the study will be presented at the XIV International AIDS Conference 2002. Primary analysis will include the differential costs by institution (subsystem, inpatient or outpatient, level of care, geographical location) and subdivided by patient characteristics such



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as severity of immunosuppression, socio-economic background, type of care received (ARV therapy, or no), etc.

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