

# SINCE 1960, LIFE EXPECTANCY AT BIRTH HAS INCREASED BY 20 YEARS WORLDWIDE

Providing high quality, efficient health services that are affordable to the public and governments is central for sustainable development. IFC has helped many countries improve health facilities and deliver expanded services for over two decades, meeting the world's growing need for better health care.



PPP projects helped expand key health care services, and improve quality and efficiency of service delivery.



Countries supported to improve access to health care, encourage private investment in the health sector, and build expertise among health professionals.



People have access to improved health care services through our projects.



In private sector investment in emerging markets has been through IFC's PPP projects.

In partnership with Catalonia, Hungary, Netherlands, Sweden, Switzerland, South Africa, the Brazilian Development Bank (BNDES), the Global Partnership on Output-Based Aid (GPOBA), the Inter-American Development Bank (IDB), Switzerland's State Secretariat for Economic Affairs (SECO), United Kingdom, Germany, Canada, Norway, and the South Asia Infrastructure Facility.



### IMAGING & DIAGNOSTICS DIALYSIS

Challenge: Improving lab and imaging services, reducing patient out-of-pocket expenses, and addressing severe shortfall of specialists was a priority for the governments of Albania and India to overcome a number of systemic challenges in the health system.

**Solution**: IFC helped attract private investors and mobilize about \$26 million to build and operate 18 public labs in Albania and 25 pathology and ragio-imaging labs in India on a hub-and-spoke model. It allowed to increase operational efficiency, spread fixed capital investment costs, and avoid duplication of services.

Results: The entire population in Albania received access to improved lab services with doubled range of tests, helping 600,000 uninsured patients receive free testing. In India, 3.5 million people received accessed to better imaging and diagnostics services—key for primary and preventive healthcare.

Challenge: In Bangladesh and the Kyrgyz Republic, only 30% of people in need of dialysis had access to the lifesaving treatment. Both countries suffered from a nationwide shortage of dialysis equipment, insufficient expertise, outdated facilities, and lack of education and expertise.

**Solution**: IFC helped attract private investors through a competitive tender to finance, upgrade, staff, and operate two hospitals in Bangladesh and four dialysis clinics in the Kyrgyz Republic.

Results: Thanks to a dual pricing model that obliges governments to pay a fixed tarriff to the operator, dialysis capacity increased 8 times at the two hospitals in Bangladesh and by 13% nationwide. KPMG selected the PPP as one of 100 most innovative projects worldwide. In the Kyrgyz Republic, improved patient referral system ensures transparent prioritization, decision-making efficiency, and better treatment demand planning.

### **HEALTH FINANCING**

Challenge: In India's State of Meghalaya, 85% of households did not have any health coverage. With limited infrastructure and facilities, the few residents with health insurance could only receive partial coverage, with coverage capping at \$550 per family per year.

**Solution**: To help the state expand health coverage to all residents, reduce financial impact of healthcare on low-income households, and cover a broader range of diseases, IFC worked with the state government to design and implement the Megha Health Insurance Program (MHIS) that provides Universal Health Coverage (UHC) to the poor.

**Results**: The IFC-designed MHIS brought together public and private health providers in delivering UHC and equitable health services to the poor, providing 1.8 million people with \$3,300 annual protection for hispitalization, diagnostic, preventive, and primary care services.

## **FACILITIES**

**Challenge:** Outdated hospital facilities in Turkey and Mexico were no longer meeting healthcare needs. High energy costs, dated hospital layouts that didn't support modern technologies, lack of hospital beds, long lines, and substandard care were the main problems.

**Solution**: IFC helped attract private investors through PPPs to finance, build, operate, and manage modernized hospital facilities; increase or replace bed capacity; cut energy costs and reduce emissions; and provide greater access to new, high-quality healthcare facilities. Expanded, modernized healthcare system and realigned business model helped improve infrastructure and service delivery and outcomes.

Results: Improved facilities in Turkey and Mexico ensured better patient access to relevant, high-quality public health services thanks to system and resource efficiency, and realignment of hospital bed capacity to match national health needs. Infrastructure improvements helped cut hospital operating costs by 30%, provide access to quality health services to millions of patients in underserved areas, mobilize over €542 million in private investment in Turkey and \$120 million in Mexico, and create long-term value by transfering risk from the public to private sector.

#### **CLINICAL SERVICES**

**Challenge**: Due to significant shortfall in public health services, parts of Brazil and India suffered from inequitable access to quality emergency, secondary, and tertiary care services. Shortage of qualified medical staff, lack of investment in facilities and equipment, and inefficient procurement of drugs and consumables made primary, secondary, and tertiary care services inaccessbile to low-income and vulnerable populations.

**Solution**: To strengthen the healthcare system and provide better clinical services to residents, IFC helped the governments leverage private sector finance through PPPs to address staff shortages, improve infrastructure and operational expertise, and introduce or expand a spectrum of accessible and affordable clinical services.

**Results**: In Brazil, the first health PPP improved access to 1.8 million medical and 680,000 emergency procedures in the first three years of operation, minimized healthcare bottlenecks, created 1,200 new jobs, and KPMG selected the PPP as one of 100 most innovative projects worldwide. In India, the first greenfield hospital PPP increased access to 30,000 in-patients and 200,000 out-patients, mobilized \$45 million in private investment, and generated \$1 million in annual payment to the government of Bihar to reimburse low-income patients.

