



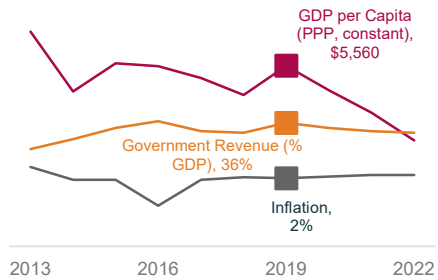
Timor-Leste

LNCT Network-Wide Meeting

Tangerang, Indonesia, July 2019



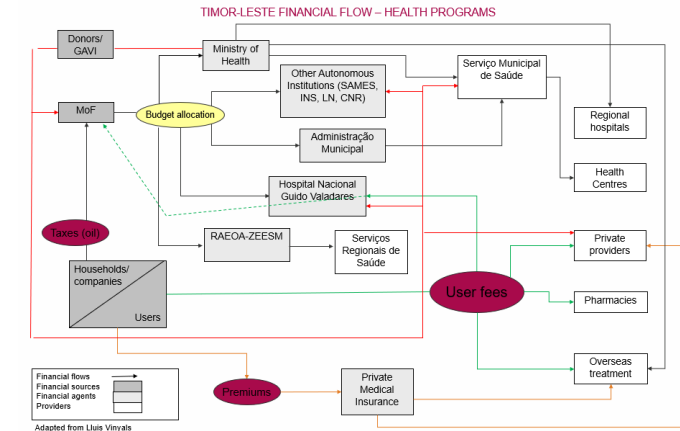
I. Economic Context



II. MOH Budget Execution

	MOH Budget	Subnat'l Gov't Health Budgets
Total budget (2018)	44,709,000	16,762,104
Total released	44,709,000	16,762,104
Total spent	41,132,280	16,500,000
Execution as percent of budget	92%	98%

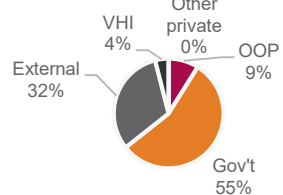
V. Funding Flows for Immunization



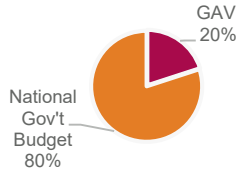
III. Sources of Health Expenditure

Year of data: 2016
 CHE per capita: US\$80
 Domestic General Government Health Expenditure as % of General Government Expenditure: 5% (incl. autonomous agencies)
 % of Domestic General Government Health Expenditure spent on immunization: 39%

Sources of CHE



Sources of RI Expenditure



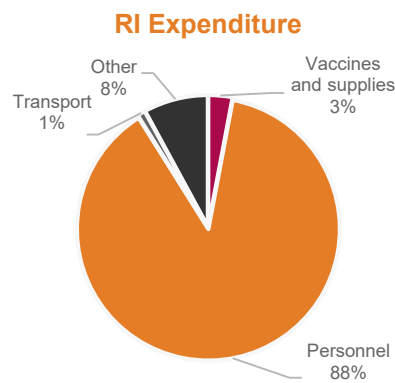
IV. Routine Immunization Budget

Line Item	Budget Source(s)
Vaccine supply & logistics	<ul style="list-style-type: none"> Nat'l health budget Gavi grant Subnational government budgets to collect vaccines from central/regional cold store
Service Delivery	<ul style="list-style-type: none"> Subnat'l health budget
Training/ workshop or refreshing training on vaccine	<ul style="list-style-type: none"> Central government budget Donor basket funding to districts District government budgets
Monitoring & Disease Surveillance, incl. supportive supervision	<ul style="list-style-type: none"> Central government budget MHS budget Subnat'l donor basket
Operational Expenses including program management	<ul style="list-style-type: none"> Central government budget Subnat'l health budget
Shared Health Systems Costs, incl. professional services and technical assistance	<ul style="list-style-type: none"> Central government budget Donors budget to national and MHS Subnat'l health budgets for contract staff Results based financing for staff incentives

Total Expenditure (from all sources) on routine immunization: **\$1,931,436**

RI Budget per Surviving Infant: **\$42.88**

% of RI costs financed by gov't: **23%**



Ask me how:
 SAMES (the National Medical Stores) became an Autonomous Agency with a specific sub-national account that permits the direct transfer of funds from the MOF, allowing SAMES to prepare its own budget, submit it to MOF to get a fiscal envelope, and submit to parliament for fiscal debate and approval.

I want to know:
 How other countries implement earmarking on vaccines and other operational costs.

VIII. Challenges

1. Delay in budget approval and budget release
2. Delay in reporting both financial and programs from health facilities
3. Bureaucracy of budget acquisition / too many layers of management in government systems
4. Lack of managerial capacities on resource management and administration

VI. Budget Allocation Process

Fund	Responsible Authority/ies	Allocation Guidance and Process	Key Bottlenecks
MOH budget	National MOH (Central Services)	MoF Allocated to Line Ministries based on Parliamentary priorities and ceilings. MOH allocates budgets to Municipality Health Services based on MHS plan and number of health staff	Delay on budget approval by parliament and promulgation by president caused to the delay in budget disbursement to Line Ministries
Donor support to national level	External donors	Allocated for specific activities based on donor priorities and government input	Delays in expenditure reporting sometimes delays funding release
Municipality health budgets	MOH	MOH allocates budgets to Municipality Health Services based on MHS plan and number of health staff.	Delays in expenditure reporting sometimes delays funding release
Municipality government budget	Ministry of State and Administration & Municipality Administrative Authority (Local Government)	Municipality Health Service receive certain amount of budget from Local Government (Municipality Administrative Authority) based on MHS operational cost plan and salary for administration and finance personnel (general regime salary)	Except for staff salaries, budget disbursements usually begin in April or May, affecting implementation of activities scheduled in the first quarter.

VII. Identification of Gaps

Line item	Budget 2020	Funding Gap	Potential Budget Sources
Vaccines & injection supplies	\$970,978	\$229,022	GSB (Contingency Fund from MoF), Donors???
Personnel	\$18,300,000	\$1000,000	GSB - MoH
Transport	\$0	\$360,000	GSB, Donors?
Activities & other recurrent costs	\$7,527,000	0	-
Logistics	\$3,380,000	0	-
Total	\$30,177,978	\$1,589,022	Gov + Donors