The third APEC High Level Meeting on Health and the Economy (HLM3) was held in Nusa Dua, Bali, Indonesia, on 24-25 September 2013. Participants concluded that the continued prosperity of the region is predicated on an ability to provide citizens with quality health care through systems that are sustainable and responsive to the health problems and health care demands of our people. In terms of economic growth and development, the per capita value of health investment in economies dwarfs the per capita value of all other forms of investment. Improving health is an important contributor to improving workforce productivity and participation. That is why health is a key pillar of the sustainable growth with equity priority of APEC 2013. Participants discussed how a collaborative, multi-stakeholder and whole of government approach to establishing health priorities is desirable to improve health and health innovation outcomes in a sustainable way.

HLM3 observed that the disease profile of economies in the APEC region has many commonalities. In most APEC developing economies, spending for health and the sustainability of health systems are increasingly strained by the rise in the morbidity and mortality of non-communicable diseases and continued unacceptable burdens of communicable disease, including re-emerging infectious diseases, and a rise in antimicrobial resistance. Participants noted that these factors can have an adverse impact on financing health. At the same time, APEC economies are committed to providing their communities with access to quality universal health coverage as an investment in their future socio-economic well-being and as a key contributor to the comprehensive wealth and productivity of the economy. There is benefit in sharing information and best practices in these areas and identifying areas of collaboration and cooperation to reduce the burden of disease and cost of care.

Key factors contributing to the sustainability of a system that provides universal health coverage are:

(1) Financing -- the size of the health budget relative to GDP and other sectors of the economy; the health budget setting process; available funding mechanisms; and, how the budget is allocated horizontally across diseases and vertically in terms of the prioritization of economy-wide, regional, local and community health programs for prevention and wellness, early detection and early intervention, and effective, affordable treatment and care, with a strong focus on equity.

(2) The ability of the health system to respond to technology shifts: in the delivery of services, in diagnostics and therapeutic interventions, and in the practice of safe and effective Traditional and Complementary Alternative Medicines (TCAM) and services;

(3) A focus on health promotion and disease prevention to respond to increasing trends towards non-communicable chronic disease as populations’ age and life styles change.

(4) Health workforce availability and competencies to ensure socio-economic and geographic equity;

(5) Ensuring the integrity of the health system through access to medical products and health services meeting safety, quality and efficacy standards; and ensuring ethical collaborations in the medical innovation development process and ethical business among health care stakeholders;

(6) The capacity of a health system to engage in sustainable public-private partnerships according to guidelines that emphasize transparency and good governance in the development and delivery of quality health care; and,

(7) A strong regulatory framework that is responsive to new technologies, avoids duplication, and ensures that patients have access to therapies when needed;

(8) The cost-effectiveness of primary health care and its associated value in improving population health outcome, higher patient satisfaction, higher patient compliance and reduced health care spending is more relevant now in responding to the current challenges of non-communicable diseases, ageing population and emerging infectious diseases and future health challenges, as well as the need to involve multi-sectors and partnership at all levels in its implementation.
RECOMMENDATIONS

Recognizing the work of other multi-lateral organizations on matters relating to universal health coverage, non-communicable chronic diseases and health financing, HLM3 recommends that APEC Ministers and Leaders:

- Advocate a Whole-of-Government and Whole-of-Society approach to tackle various challenges faced in recent times to ensure the health and well-being of the population and the prosperity of the APEC economies, given the importance of health capital for economic growth and development.
- Request Senior Officials to form a consultative mechanism of relevant APEC groups and stakeholders, including SOM, SFOM, LSIF and HWG, to prepare for a high level discussion between the health and finance community on ways of ensuring sustainability of the health financing system and, importantly, the areas that would have the highest return on investment in the health of our people.
- Call for a study on health care budget setting, allocation processes, and financing mechanisms in the region to ensure equity of health access in recognition of the role of health in economic development and comprehensive wealth,
  - Note that terms of reference for the study should include elaboration of the complementary roles of the public and private sector in ensuring sustainable healthcare financing and the role of multi-stakeholder approaches to addressing healthcare access and affordability
  - Encourage development of best practice principles for health care financing, the allocation of resources, and technology assessments which will be used to identify priority areas.
- Support programs for advanced training in areas including Global Medical Product Quality and Supply Chain Integrity, Good Review Practices, Cellular Therapies, Multi-regional Clinical Trials, Good Clinical Practice Inspection, Combination Products, Pharmacovigilance, and Bio-therapeutic Products, to support achievement of regulatory convergence and the safety and efficacy of medical products.
Support initiatives outlined in the Statement of the 2013 Meeting of the APEC Ministers Responsible for Trade, to accelerate building capacity in regulatory services and secure access to safe medical products to prevent the availability of spurious, substandard, falsified, falsely labeled and counterfeit medical products through harmonized standards for product verification; measures to close illegal internet pharmacies; and the establishment of a single point of contact network as agreed under the APEC Global Medical Products Quality and Supply Chain Integrity Roadmap of the LSIF Regulatory Harmonization Steering Committee.

- Welcome the Medan Principles for Public-Private Partnerships in Infection Control and the APEC Policy Tool Kit for Building the Capacity to Address Healthcare-Associated Infections and ensure access to quality health care services.
- Acknowledge the need to address the significant burden of mental illness; life course concerns, including the changing demands on health systems as populations’ age; and, the continued rise in infectious/chronic disease such as HIV-AIDS, NCDs (cancer, cardiovascular, chronic respiratory diseases, and diabetes), and injury. In that regard:
  - Recognize that governments and communities cannot address these challenges alone and
  - Welcome the emergence of public-private partnerships to help address these concerns, and,
  - Recognize the need for further exploration of the role of safe, effective, and quality Traditional and Complementary Alternative Medicines (TCAM) and services in prevention and care.
- Welcome and endorse initiatives to build capacity in regulatory sciences, notably the planned regulatory sciences Center of Excellence, proposals to build capacity in the commercialization of medical innovations developed by individual economies, and the principles for the development of the innovative life sciences sector to support the growth of innovative medical life sciences in the region.
- Recognizing that Traditional and Complementary Alternative Medicine (TCAM) has the potential to strengthen primary health care and complementary modalities for handling degenerative diseases, the economies call for (i) developing the knowledge and practice of safe and effective traditional medicine through research and development as well as
structured education and training, (ii) integrating safe and effective traditional medicine into national health care systems as appropriate by taking into consideration economies’ capacities, priorities, legislation and circumstances, (iii) involving communities and strengthening public-private partnership in promoting the socio-economic value of safe and effective TCAM.

- Welcome work to ensure that economies’ health workforces are sufficient in size, well trained, adequately distributed, motivated and appropriately skilled to meet needs of the regions’ economies and support traditional health worker readiness to meet national health regulation, which accommodates the integration and synergy of safe and effective traditional medicines and services into a modern health system.

- Encourage the inclusion of universal health coverage in the post 2015 development agenda, including any unfinished Millennium Development Goals (MDGs) agendas.

- Share best practices on health promotion and preventive care, nutrition, education, employment, social and environmental determinants of health, with a focus on reducing health inequalities.

- Strengthening of Primary Health Care involving all stakeholders including health and non-health sectors in all settings to promote improvement in the quality of patient care through a holistic evidence-based, person-centred approach and a multidisciplinary team collaborating with continuous health promotion.