

# EVALUATION OF BUSINESS MODELS NEEDED FOR AN INNOVATIVE EBOLA VACCINE FINANCING SYSTEM

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13 January 2015

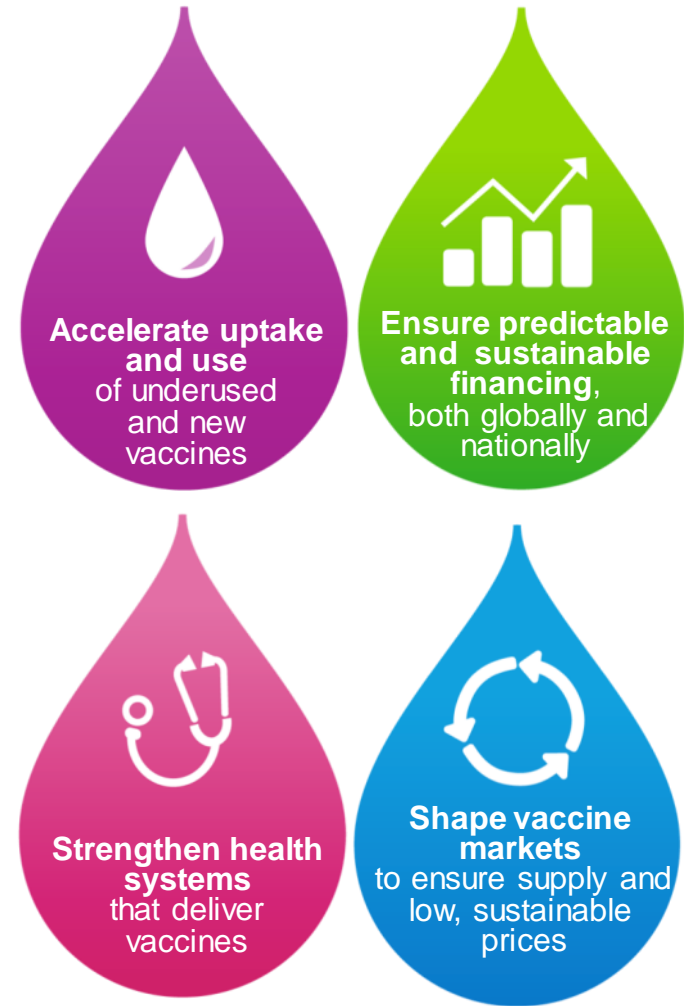
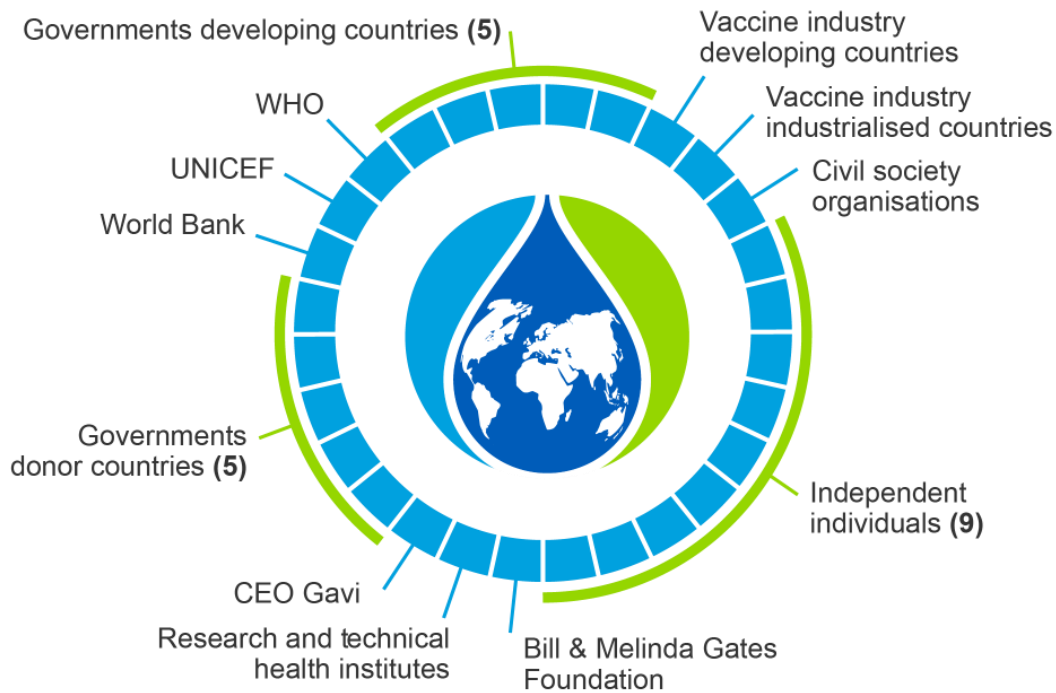


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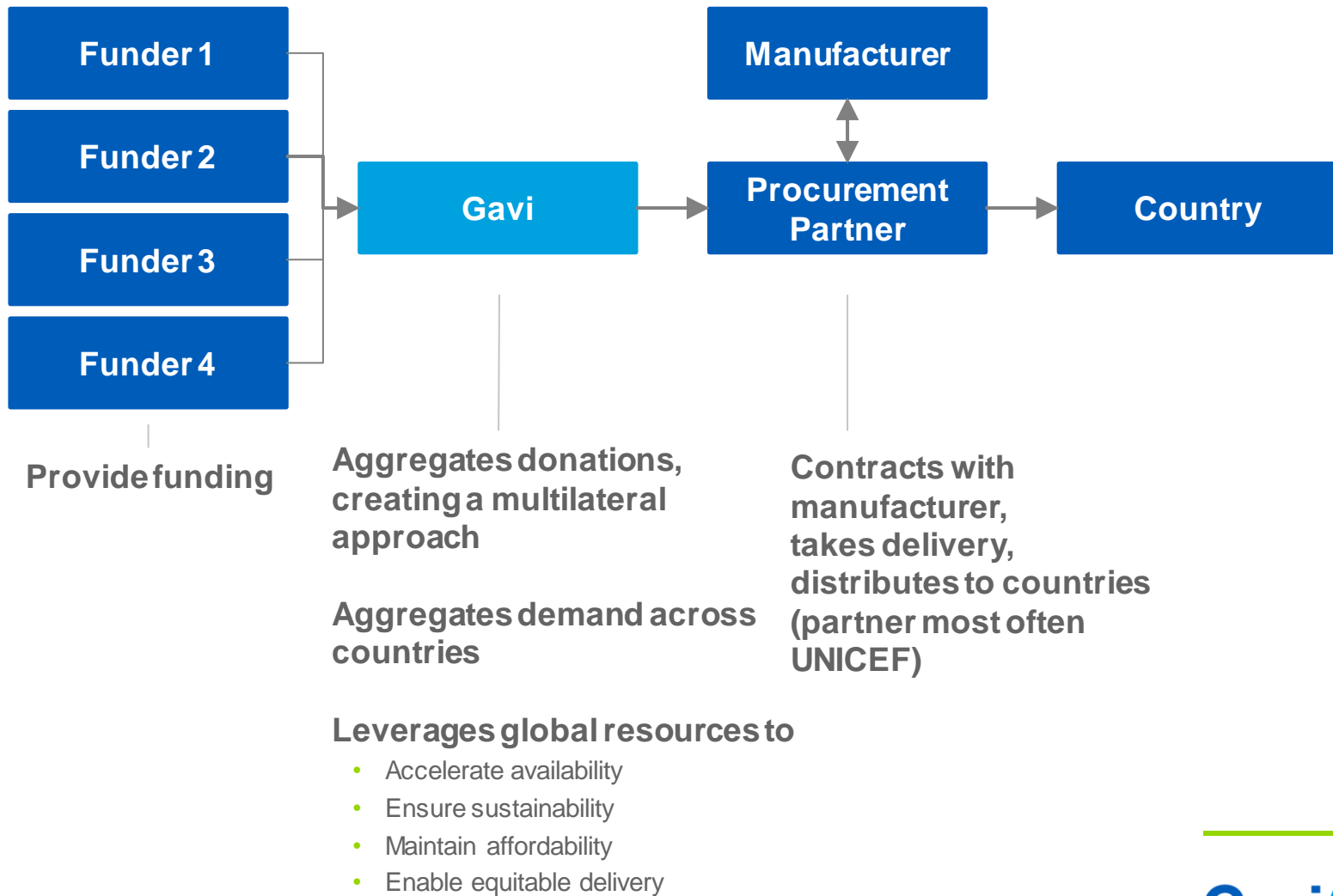
## GAVI AS A MULTILATERAL APPROACH TO VACCINE AVAILABILITY

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# GAVI IS AN ALLIANCE OF PUBLIC AND PRIVATE PARTNERS, WITH FOUR STRATEGIC GOALS



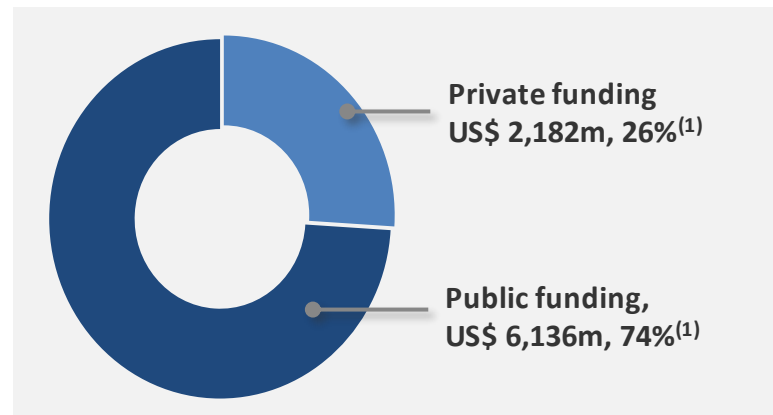
# GAVI ENABLES A MULTILATERAL APPROACH FOR INCREASING ACCESS TO NEW VACCINES



# GAVI'S FUNDING MODEL

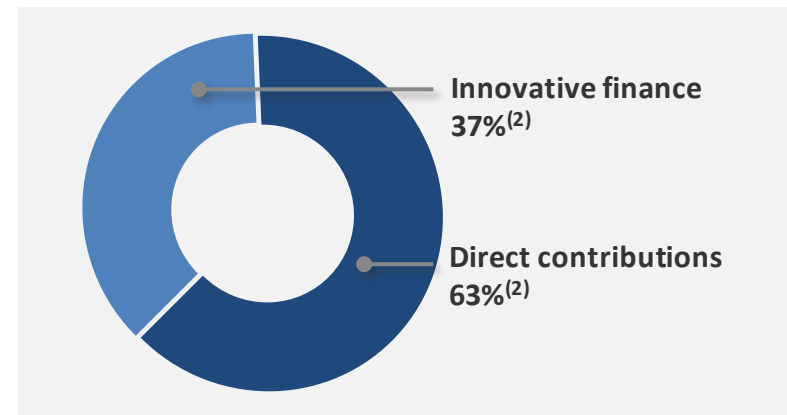
## Mix of funders supports Gavi efforts...

- 1 Government donors
- 2 Private sector donors, foundations (e.g., Bill and Melinda Gates Foundation)



## ... via a range of financing mechanisms

- 1 Direct contributions from donor governments and philanthropic organizations
- 2 Innovative funding mechanisms, including:
  - International Finance Facility for Immunisation (IFFIm)
  - Pneumococcal Advance Market Commitment (AMC)
  - Gavi Matching Fund



1. Gavi's funding for 2000-2013; 2. Gavi's funding for 2000-2010

# INNOVATIVE FINANCE IS CORE TO GAVI

## Goal of innovative finance

To secure “more money for health” and “more health for the money” by:

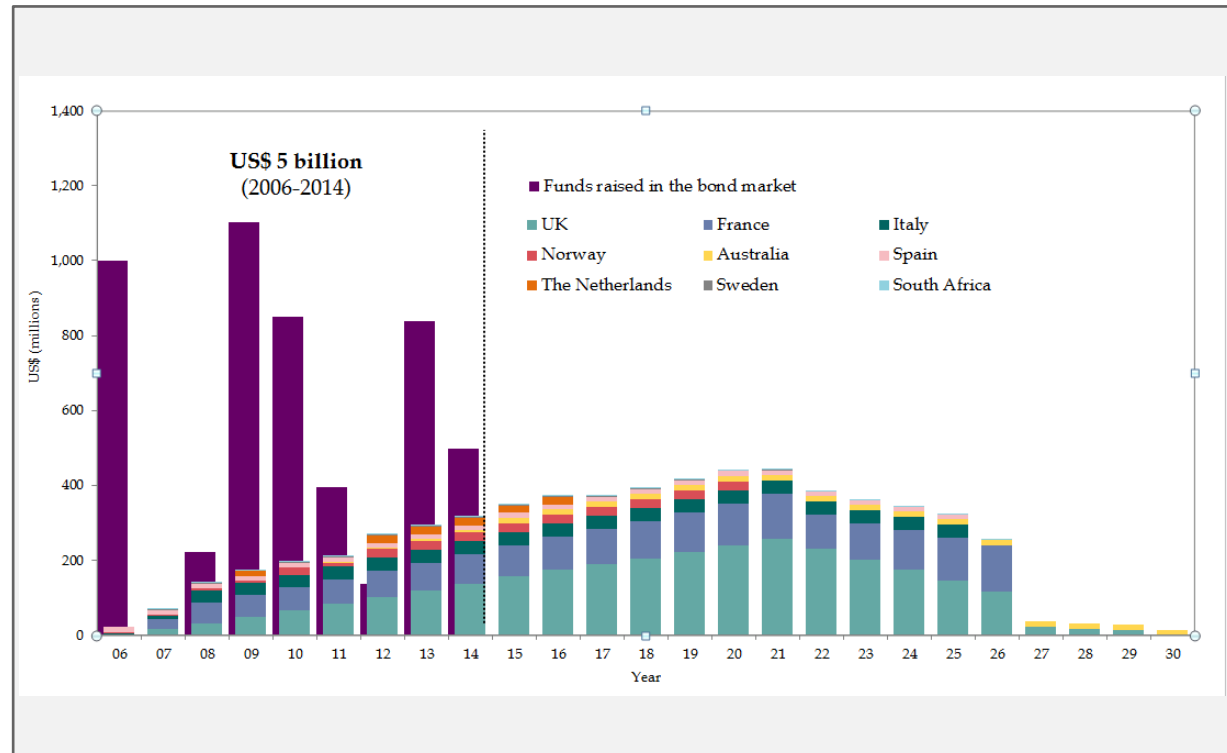
- Increasing **predictability** of funds
- Increasing **flexibility** of funds
- Increasing Gavi’s **impact per dollar spent**
- Increasing the **diversification** of Gavi’s funding sources

# EXAMPLES OF INNOVATIVE FINANCE:

## A) International Finance Facility For Immunisation (IFFIm)

### Goals

- Assure **long term predictability** of financing
- **Leverage capital markets** to frontload funds (or shift them through time) to meet country demand as needed
- Since inception in 2006, **over US\$ 5 billion has been raised** in the capital markets, backed by sovereign donor pledges



# EXAMPLES OF INNOVATIVE FINANCE:

## B) Pneumococcal Advance Market Commitment (AMC)

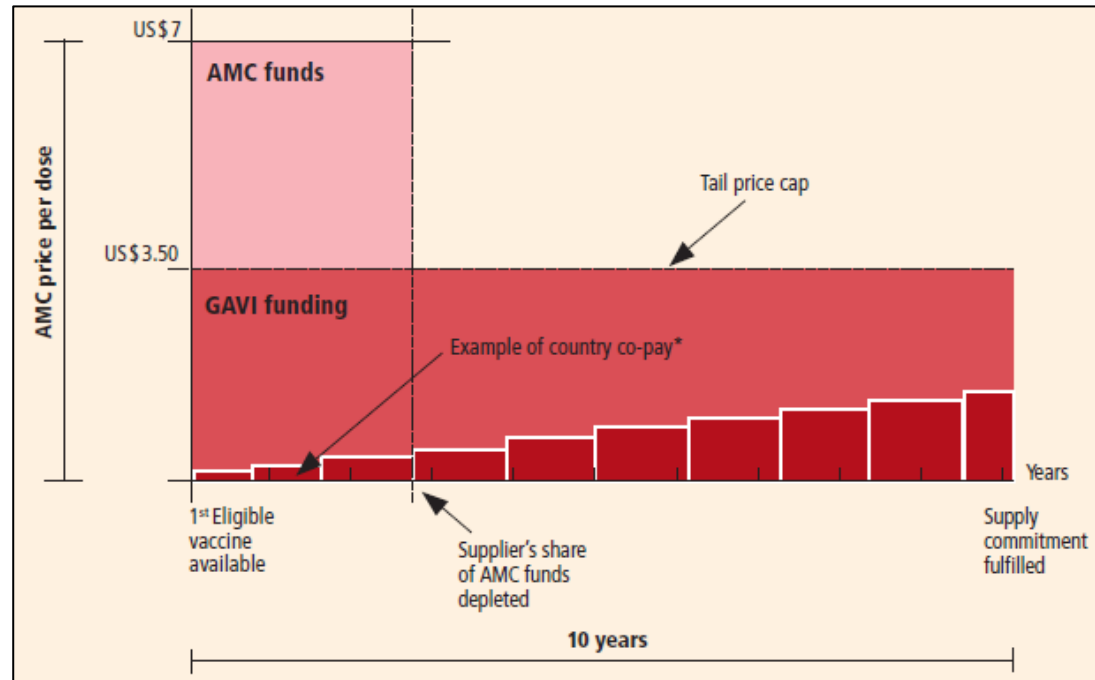
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### Objectives

Reduce burden of pneumococcal diseases by:

- Accelerating vaccine availability
- Stimulating vaccine uptake

**Goal:** Prevent > 1.5 M childhood deaths by 2020



2

### How it works

**Donors commit funds** to guarantee the price of vaccines

Manufacturers assured of **broad support for market**

Manufacturers agree to **provide the vaccines at a low price** to developing countries in the long term

**Increased uptake** in target countries



# FUNDING CONSIDERATIONS FOR POTENTIAL EBOLA VACCINE EFFORTS

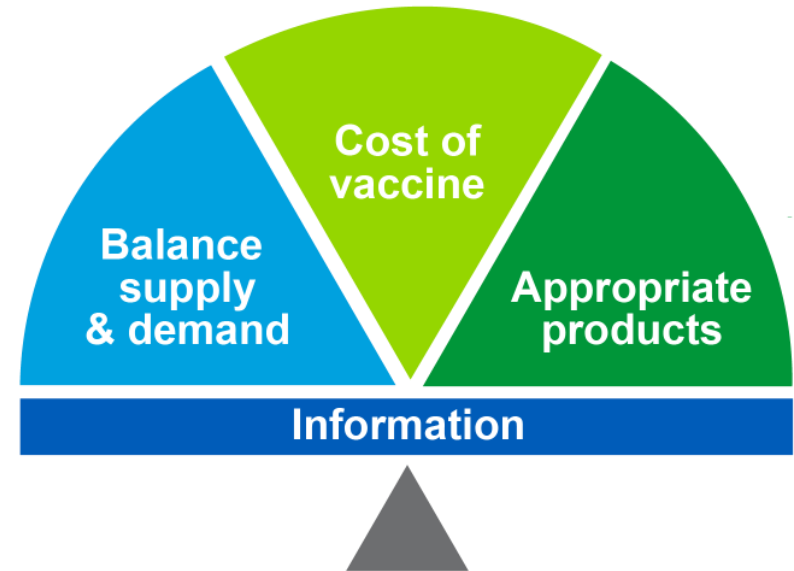
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- **Gavi could quickly access funds through IFFIm, in advance of Ebola contributions**
  - Subject to donor action, schedule of funds available through IFFIm could be brought forward
- **Gavi's strong financial standing enables long-term funding or purchase commitments**
  - IFFIm can efficiently convert long-term capital (pledges) into liquid assets that can be used for investments
- **Note that Ebola vaccine funding is not within the current Gavi replenishment target**
  - Additional donor commitments needed, despite Gavi flexibility around timing of funds

# GAVI SHAPES VACCINE MARKETS VIA SUPPLY AND PROCUREMENT STRATEGIES

## **Goal of market shaping:**

Ensure sufficient supply of appropriate, quality vaccines at low and sustainable prices



## **Gavi's Market Shaping includes:**

- Forecasting country demand and vaccine prices
- Industry engagement and negotiations
- Procurement through UNICEF Supply Division and PAHO Revolving Fund
- Designing innovative vaccine procurement contracting
- Managing financial risks of innovative contracting
- Ensuring transparency of information

# EXAMPLES OF MARKET SHAPING MECHANISMS BEYOND AMC

	Objectives	Financial mechanism	Result
<b>Pentavalent</b>	<ul style="list-style-type: none"> <li>Prevent supply disruptions</li> <li>Continued downward price trend</li> </ul>	<ul style="list-style-type: none"> <li>Time-limited volume guarantee (30% of demand)</li> <li>Fixed price per dose</li> <li>Prepayment option</li> </ul>	<ul style="list-style-type: none"> <li>Several prequalified vaccines, potential supply &gt;400M doses / year</li> <li>Prices range from USD 1.19-2.95</li> </ul>
<b>Rotavirus</b>	<ul style="list-style-type: none"> <li>Develop supply base</li> <li>Prices compatible with Gavi needs</li> <li>Long-term, sustainable market</li> </ul>	<ul style="list-style-type: none"> <li>Time-limited volume guarantee (70% of demand)</li> <li>Fixed price per dose</li> <li>Prepayment of 55% of volume</li> </ul>	<ul style="list-style-type: none"> <li>\$2.50/dose price achieved</li> <li>High country demand for programmatically preferred product</li> </ul>
<b>Meningitis A</b>	<ul style="list-style-type: none"> <li>Prevent supply disruptions</li> <li>Cover other serotypes</li> </ul>	<ul style="list-style-type: none"> <li>Firm contract for &gt;90% of offered doses for a single season for a stockpile</li> </ul>	<ul style="list-style-type: none"> <li>Several stockpile suppliers.</li> <li>Several serotypes covered</li> </ul>

# TYPES OF GAVI SUPPORT FOR CONTROL OF DISEASES WITH EPIDEMIC POTENTIAL

## Global vaccine stockpiles

### Global stockpiles enable faster access to vaccines during outbreaks and emergencies

- Gavi currently funds MenA and Yellow Fever stockpiles<sup>1</sup>
- Gavi covers cost of vaccines and shipment without co-financing
- Operational costs (US\$ 0.25) per individual in target group (via ICG)

## Mass Preventive Campaigns

### Mass preventive campaigns rapidly increase population immunity in high-risk areas and protect susceptible populations

- Gavi covers **vaccine procurement and shipments** without co-financing
- **Operational costs** (US\$ 0.65) per individual in the target group - expected to cover approximately 80% of the total estimated cost, countries to cover the rest
- Funding for case-based surveillance, risk assessment, vaccine impact study and other capacity-building activities (via business plan)

1. Gavi support approach for the global cholera vaccine stockpile is currently under development – it is not yet clear whether shipments and operational costs will be funded by Gavi. 2. International Coordinating Group

# WORKING TOGETHER TO CREATE EMERGENCY STOCKPILES

## Gavi

- **Funds** emergency stockpile through International Coordinating Group (ICG)<sup>1</sup>

## ICG members

### WHO

(serves as ICG Secretariat)

- **Coordinates and manages** stockpile
- Provides **technical support** to countries (e.g. surveillance, preparedness, and response to outbreaks)

### UNICEF

- Performs vaccine **procurement and shipment**

### IFRC<sup>2</sup>

- Strong **country presence**
- E.g. Community health promotion, local social and resource mobilization, support to states during disasters and epidemics)

### MSF<sup>3</sup>

- **Providing health care** to populations in emergency situations
  - Epidemiology, case management, vaccination, training, evaluation

ICG mechanism is tailored to ensure **rapid response** to outbreaks:  
Takes **max 10 days** from submission of country request to vaccine arrival in country

1. ICG members include, among others, WHO and vaccine manufacturers. 2. International Federation of the Red Cross and Red Crescent Societies. 3. Médecins sans Frontières

# SUMMARY: GAVI'S CORE CAPABILITIES

**Gavi works to increase access to vaccines by leveraging the expertise and financial resources of Alliance members**

**Core capabilities of the Alliance relevant to Ebola include:**

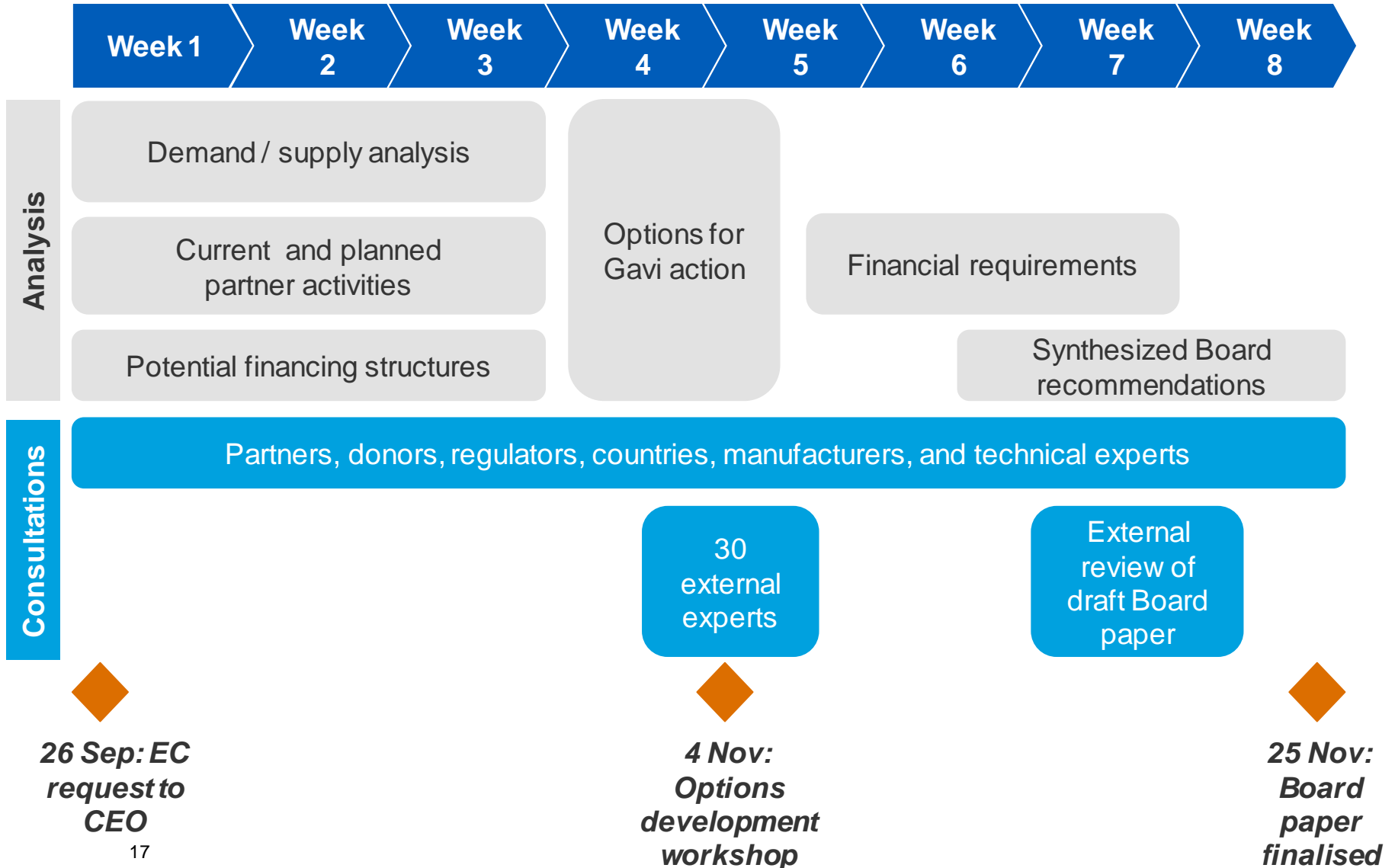
- Flexible financing
- Vaccine procurement
- Market shaping to secure vaccine supply in the short and long term
- Funding support to emergency stockpiles
- Support to vaccine campaigns

# 2

## EBOLA VACCINE ACCELERATION

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# 8-WEEK PROCESS TO GENERATE A BOARD RECOMMENDATION ON EBOLA RESPONSE





# GATHERING INPUT TO INFORM OPTIONS



BILL & MELINDA  
GATES foundation



World Health  
Organization



LONDON  
SCHOOL of  
HYGIENE  
& TROPICAL  
MEDICINE



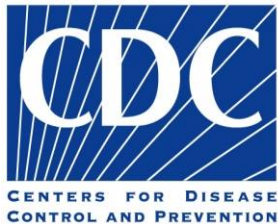
GLOBAL  
EBOLA  
RESPONSE

Outbreak projections & modeling  
Vaccine R&D status  
Manufacturing support  
Deployment considerations  
Policy and regulatory  
environment



Manufacturers

wellcome trust



THE WORLD BANK  
IBRD • IDA | WORLD BANK GROUP



USAID  
FROM THE AMERICAN PEOPLE



Affected &  
neighboring  
countries



Department  
for International  
Development

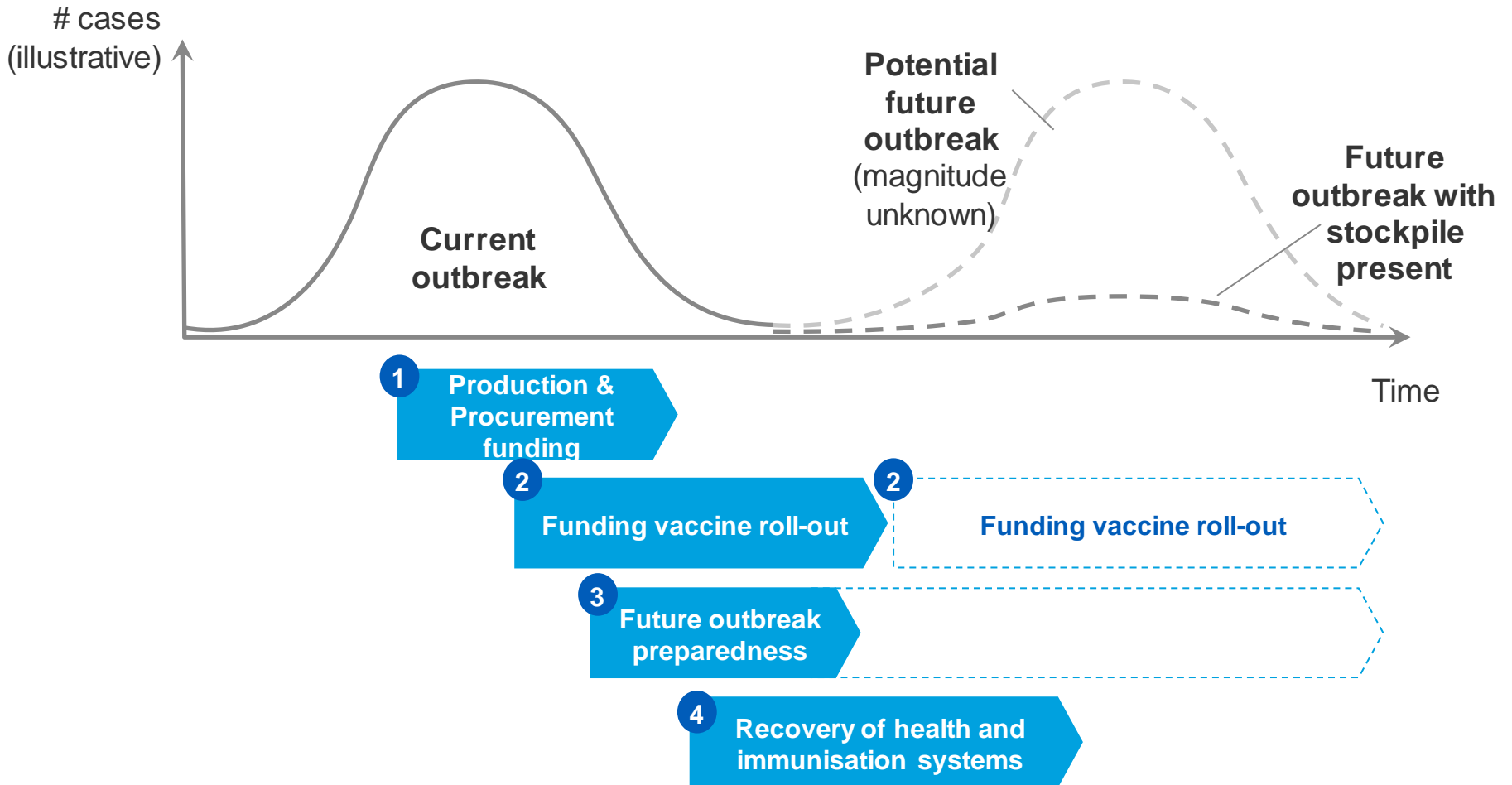


# WHERE CAN GAVI CONTRIBUTE?

## PARTNER LANDSCAPING AND GAVI CAPABILITY ASSESSMENT

Cost category		Critical funding area	Est. funding coverage	Fit with Gavi capabilities? (based on past experience, partner inp
Clinical trials		Phase I	High	X
		Phase II	High	X
		Phase III	High	X
Production & procurement	Production scale up	Production at clinical trial scale	High	X
		Scale up /scale optimisation	Medium	✓
	Commercial scale mfg	Low	✓	
	Procurement	Vaccine procurement	Medium	✓
	Risk mitigation	Indemnification	Medium	X
	Diverted manufacturer resources	Diverted manufacturer resources	Low	✓
Vaccineroll-out		Planning & coordination, social mobilisation IEC, training, HR, transport /logistics/cold chain, waste management, surveillance and monitoring of AEFI, etc.	Medium	✓
Future outbreak preparedness		Clinical trials	Low	X
		Production scale up	Low	✓
		Procurement	Low	✓
		Vaccineroll-out	Low	✓

# 4 RECOMMENDED AREAS FOR GAVI ACTION



# PLANNING ASSUMPTION: HIGH DEMAND SCENARIO IN 3 AFFECTED COUNTRIES

High end of target populations is ~12-20M<sup>1</sup>

– includes adults (~12M) or both adults and children (~20M)

Potential beneficiary populations		Estimated size of potential target population (in thousands)			
		Guinea	Liberia	Sierra Leone	Total
1	Health workers in clinical settings (e.g. doctors, nurses, cleaners)	1.7	11.7	6.2	19.8
2	Community Ebola responders (e.g. burial teams, contact tracers etc)	25.3	40.3	32.2	97.8
3	Contacts providing home care of cases and ring vaccination of contacts	2.7	66.9	6.6	16.0
4a	Age-based strategy: Vaccinating children in affected areas	4717.4	1740.6	2351.0	8809.0
4b	Age-based strategy: Vaccinating adults in affected area	6458.6	2249.1	3261.7	11969.4
5	Geographical strategy: affected districts & counties vs unaffected				
6	Pregnant women	251.8	105.1	125.9	482.8
7	People with HIV	88.8	16.6	40.3	145.7

1. High demand based on trajectory of current outbreak limited to Liberia, Sierra Leone and Guinea. In the case of EVD spread to neighboring countries demand can be as high as 300M based on total population of those countries (which include Nigeria, Senegal, DRC, and Mali).

Source: WHO's background information for Gavi's workshop – Nov 2014

# 1 VACCINE PRODUCTION AND PROCUREMENT

ENVELOPE DRIVEN BY LEVEL OF UNCERTAINTY AND EVOLVING LANDSCAPE

## Procurement-related principles

- 1 Plan for high vaccine demand
- 2 Focus on alleviating bottlenecks to vaccine availability
- 3 Prioritise solutions that are candidate-agnostic
- 4 Avoid prematurely locking into a market that is not fully understood

## Recommendation:

Envelope signaling Gavi potential spend

- ✓ Utilises Gavi's multilateral mechanism to aggregate and coordinate funding
- ✓ Signals a market for Ebola vaccine and related supplies
- ✓ Allows addressing of different demand scenarios in an evolving environment
- ✓ Enables tailored agreements with individual manufacturers
- ✓ Enables support of multiple manufacturers

# 1 VACCINE PRODUCTION AND PROCUREMENT

## DETERMINATION OF FUNDING ENVELOPE SIZE

### Key drivers of size of US \$300 million envelope

Volume of vaccine required to combat current outbreak

Up to 12M courses

Number of manufacturers

2-3 manufacturers (with different economics)

Manufacturer costs

Marginal costs of production and unsubsidized scale up costs

### Key drivers of uncertainty around spend within envelope

Actual demand versus "high demand" scenario

Actual demand anywhere from <100K to >12M courses

Manufacturer from which vaccines are ultimately procured

Different cost structures, vaccine technologies

Level of subsidy for each manufacturer

Funding discussions still evolving

Funding structures within this envelope will be subject to EC approval

2

# FUNDING VACCINE ROLL-OUT

BASED ON CURRENT DATA – DETAILED COUNTRY-LEVEL COSTING UNDERWAY

## A Standard campaign categories with Ebola-specific cost multiplier assigned

- Social mobilisation, IEC<sup>1</sup>, advocacy
- HR and training
- Vehicles and transportation
- Waste management
- Surveillance, including for AEFI<sup>2</sup>
- Evaluation

US\$ 38 M <sup>3</sup>

## B Additional cost categories for Ebola vaccine roll-out

- Emergency Operations Centres
- Cold chain and logistics
- Security and crowd control
- Increased infection control measures

## C Stockpile cost categories

- Management of stockpile
- Operational costs for use of stockpiled courses in future outbreaks

US\$ 7 M

US\$ 45 M

1. IEC: Information, education, and communication 2. Adverse Events Following Immunisation 3. Assuming target population of 12M individuals

# 3 FUTURE OUTBREAK PREPAREDNESS

## Recommendation 1: Stockpile of first- generation vaccines

- Relatively small stockpile required
- To be maintained until 2nd generation vaccine becomes available

## Gaps remaining

- Profile of first generation vaccine(s) expected to be suboptimal for longer-term application:
- Monovalent vaccine
  - Thermostability concerns

## Recommendation 2: In-principle commitment to 2nd-generation stockpile

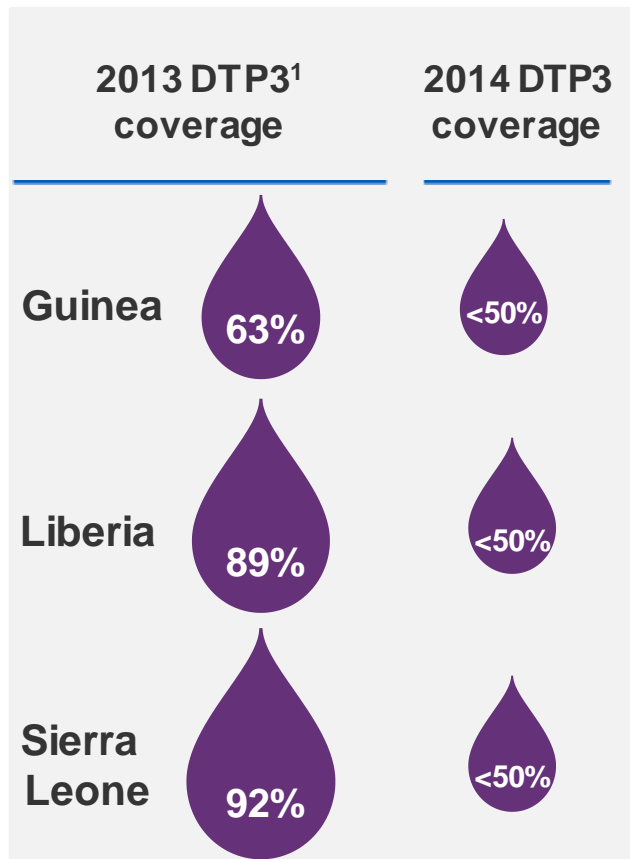
- Assure availability of effective vaccines for future outbreaks
- Vaccine availability dependent on timing of vaccine development and optimisation

**Lack of longer-term availability of an effective Ebola vaccine could result in a repeat of the current situation**



# 4 RECOVERY OF HEALTH AND IMMUNISATION SYSTEMS

## Ebola has crippled health and immunisation systems



## Recommendations to support recovery *(Upon country request)*

Vaccines and related injection safety devices and programmatic support	up to US\$ 12.5 M
Reprogramming of currently approved HSS grants	No additional costs
Increase of HSS funding	up to US\$ 30.5 M
Waiving of 2014-15 co-financing requirements	up to US\$ 2 M
<b>Total</b>	<b>up to US\$ 45 M</b>

1. Coverage with 3rd dose of a DTP-containing vaccine

# GAVI BOARD - APPROVED FINANCIAL IMPLICATIONS

Recommendation per Board Paper	US\$ million
<b><u>Ebola Programme Funding Envelope (2015-2020)</u></b>	
Ebola vaccine production and procurement	300
Ebola vaccine roll-out	45
Recovery of health and immunisation systems	45
<b>Sub-total: Ebola Programme Funding Envelope</b>	<b>up to 390</b>
<b><u>Addition to Business Plan budget (2015-2016)</u></b>	
Secretariat costs	3.5
Support to WHO & UNICEF	7.0
Support to Civil Society Organisations	0.5
<b>Sub-total: Addition to Business Plan Budget</b>	<b>up to 11.0</b>
<b>Total cost of funding the recommendations</b>	<b>up to 401</b>
Less: <b><u>Already provided</u></b> in Gavi expenditure forecast for 2014-2015	(100)
<b>Additional resources required</b>	<b>up to 301</b>
Deduct: <b>Resources from other funding agencies / donors</b>	TBD
<b>Balance to be funded through Gavi</b>	<b>TBD</b>

**THANK YOU**

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[www.gavi.org](http://www.gavi.org)