



USAID
FROM THE AMERICAN PEOPLE



FIXED AMOUNT REIMBURSEMENT AGREEMENT 2.0

January 2016-December 2020 | Implementer: Government of Liberia

The Ministry of Health (MOH) Fixed Amount Reimbursement Agreement (FARA) provides support to the MOH for the implementation of its 10 year National Health Policy and Plan. Under this agreement, USAID reimburses the Government of Liberia (GOL) for the cost of implementing components of the Essential Package of Health Services that support family planning, maternal and child health and malaria prevention and treatment in the six USAID focus counties of Bong, Lofa, Nimba, Grand Gedeh, River Gee and Grand Cape Mount, covering a population of roughly 1.8 million Liberians. The overarching goal of the FARA is to help ensure effective government-led development programming.

The FARA is a prime example of the direct government to government (G2G) assistance model, which transfers greater responsibility for ensuring access to quality health services to the MOH. Activities supported by the FARA include performance-based contracting and strengthening of county health teams to improve the delivery of quality health services as well as health system strengthening activities, such as monitoring and evaluation (M&E).

Current Activities

- Public financial management
- A Performance-based Financing (PBF) system implemented
- MOH performance management at central and subnational levels:
- Essential Package of Health Services that support family planning, maternal and child health and malaria prevention and treatment
- Use of quality facility and community-based health services

Accomplishments to Date

- Achieved full contracting with county health teams in Bong, Nimba and Lofa beginning July 1, 2018
- Expanded its activities from 3 to 6 counties on July 1, 2019

Planned Outcomes

- Competency of the Liberian Health Workforce improved
- Quality of delivery of health services improved
- Access to facility-based Essential Package of Health Services strengthened
- County health team's capacity for oversight and support of health facilities improved
- Social mobilization and community-based services strengthened
- Health Information Systems (HIS), results measurement, and reporting strengthened