

## ICMJE DISCLOSURE FORM

Date: June 29, 2021

Your Name: Wu Zeng

Manuscript Title: Cost-effectiveness analysis of the decentralized facility financing and performance-based financing program in Nigeria

Manuscript number (if known)

In the interest of transparency, we ask you to disclose all relationships/activities/interests listed below that are related to the content of your manuscript. "Related" means any relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the manuscript. Disclosure represents a commitment to transparency and does not necessarily indicate a bias. If you are in doubt about whether to list a relationship/activity/interest, it is preferable that you do so.

The following questions apply to the author's relationships/activities/interests as they relate to the current manuscript only.

The author's relationships/activities/interests should be defined broadly. For example, if your manuscript pertains to the epidemiology of hypertension, you should declare all relationships with manufacturers of antihypertensive medication, even if that medication is not mentioned in the manuscript.

In item #1 below, report all support for the work reported in this manuscript without time limit. For all other items, the time frame for disclosure is the past 36 months.

		Name all entities with whom you have this relationship or indicate none (add rows as needed)	Specifications/Comments (e.g., if payments were made to you or to your institution)
<b>Time frame: Since the initial planning of the work</b>			
1	All support for the present manuscript (e.g., funding, provision of study materials, medical writing, article processing charges, etc.) <b>No time limit for this item.</b>	<input checked="" type="checkbox"/> This study was funded by the World Bank	The payments were made to my institution.
<b>Time frame: past 36 months</b>			
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3	Royalties or licenses	<input checked="" type="checkbox"/> None	

4	Consulting fees	<input checked="" type="checkbox"/> None	
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9	Participation on a Data Safety Monitoring Board or Advisory Board	<input checked="" type="checkbox"/> None	
10	Leadership or fiduciary role in other board, society, committee or advocacy group, paid or unpaid	<input checked="" type="checkbox"/> None	
11	Stock or stock options	<input checked="" type="checkbox"/> None	
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## ICMJE DISCLOSURE FORM

Date: June 29, 2021

Your Name: Elina Pradhan

Manuscript Title: Cost-effectiveness analysis of the decentralized facility financing and performance-based financing program in Nigeria

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Date: June 29, 2021

Your Name: Madhulika Khanna

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Date: June 29, 2021

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## ICMJE DISCLOSURE FORM

Date: July 27, 2021

Your Name: György Béla Fritsche

Manuscript Title: Cost-effectiveness analysis of the decentralized facility financing and performance-based financing program in Nigeria

Manuscript number (if known)

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Your Name: Oluwole Odutolu

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