State Of the Nation's Health



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Flow

- Background
- 2. Shocking Lessons about PH health data
- 3. Millennium Development Goals: Status
- 4. Universal Health Care: Definition, challenges, issues and next steps
- 5. The Sin tax law passage: Journey and its Role in UHC
- 6. Philhealth Scam Updates
- 7. Choosing the Next President
- 8. Summary



Disclosure:

- Internist -Cardiologist, Manila Doctors Hospital
- Vice President Medical Affairs, Warner Lambert (1993-2000)
- Preventive Health Advocate (Author of EO 595);
 Lead Proponent Sin Tax Law
- Medical Director of Pfizer Philippines (2000-2011)
- President, Philippine College of Physicians, 2014-2015
- Director of Information, Publications, and Public Affairs, University of the Philippines, Manila (June 2012- 2014)
- USTMAA President- 2015-2016



MY HEROES

Dr. Jose Rizal June 19, 1861 – Dec. 30, 1896 National Hero

Pílar Cueto Leachon (Jan. 25, 1935 - Sept. 22, 2003)



Marita Leachon Ramirez (June 7, 1962 - June 11, 2011)



Silver Lining





of DOH on
Noncommunicable
Diseases Oct 2011 October 2013

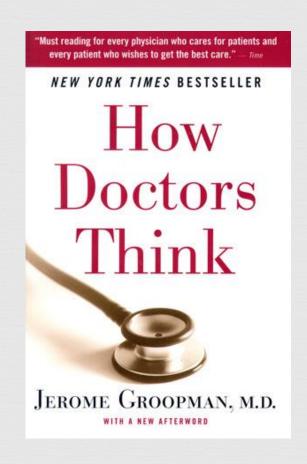
Strategic Questions How Doctors Think

now? Diagnosis?

Phil in the ICU

want to go?
Towards UHC

ca3. How do you get there? Eg Plan of Action



Top 10 Causes of Mortality, Philippines 2010

Cause of Death	Number affected	Rate per 100,000
1. Diseases of the Heart	102,936	109.5
2. Diseases of the Vascular Sy stem	68,553	72.9
3. Malignant Neoplasms	49,817	53.0
4. Pneumonia	45,591	48.5
5. Accidents	36,329	38.6
6. Tuberculosis, all forms	24,714	26.3
7. Chronic Lung Disease	22,877	24.3
8. Diabetes Mellitus	21,512	22.9
9. Nephritis/nephrotic syndrome/nephrosis	14,048	14.9
10. Perinatal disease	12,086	12.9

Philippine Health Statistics, 2010



NCD deaths under age 6

Chronic respiratory dis

Cardiovascular diseases and diabetes

(percent of all NCD deaths)

All NCDs

Cancers

Philippines 93 Million Population (2010,WHO)

NCD mortality		
2008 estimates	males	females
Total NCD deaths (000s)	175.7	133.9

Metabolic risk factors			
2008 estimated prevalence (%)	males	females	total
Raised blood pressure	35.4	30.0	32.7
Raised blood glucose	5.7	5.9	5.8
		28.4	26.5
EDIDENIC		8.0	6.3

44.5

41.8

total

Lesson # 1 Silent EPIDEMIC Age-standardized death 300,000 deaths in PH 800 deaths/day or 30 deaths /hour

295.3

394.8

Current daily tobacco smoking	34.7	7.7	21.2
Physical inactivity	20.0	25.7	22.9

2.HIGHER NCD RISK

3.NO ACCESS TO TREATMENT

Globalization Urbanization Urbanization Unhealthy Diet Poverty Low Education Stress

Blood Sugar Blood Pressure Cholesterol BMI

Heart Disease Stroke Cancer Chronic Lung Ds

1.NO ACCESS TO PREVENTION

4.HIGHER MORTALITY

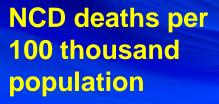
Predisposing Behavioral EnvironmentRisk Factors

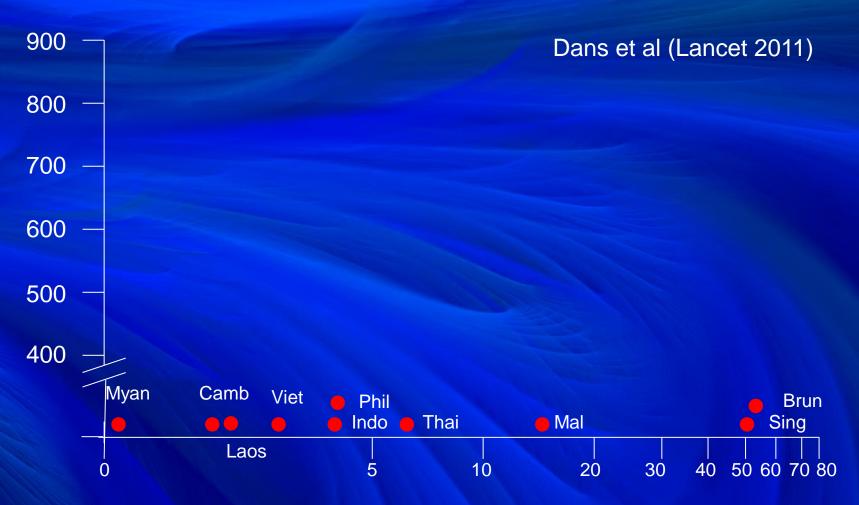
Biologic Risk factors Chronic NCD Morbidity/Mortality

MORE Expenses & IMPOVERISHMENT



Lesson #2
NCDs: Diseases of the POOR





Gross National Income (International Dollars x 10³)





ESTIMATED NO. OF DEATHS FROM CAD AND STROKE (ALL RISK FACTORS)

RISK FACTOR	CAD	CVD	TOTAL
DIAR	Lesson # 4		
CHOL	Smoking is PH's		
OBESITI 14,040 ZU,ZU/ 33,04/			
HPN	15,559	25,401	40,960
SMOKING	19,315	29,184	48,499

#3 Smoking does NOT just cause cancer and lung diseases, it is also the number 1 cause of stroke and heart attack (~50,000 deaths per year). In fact it causes more stroke and heart attack than diabetes, hypertension, obesity and high cholesterol - National Nutrition and Health Survey, 2008













Obesity in Young Filipinos rising

Sept 23, 2010 Manila Bulletin

26.6 per cent of Filipino adults were overweight in 2008 (6.3 % obese), a marked increase from 16.6 per cent in 1993.







Unhealthy Diet

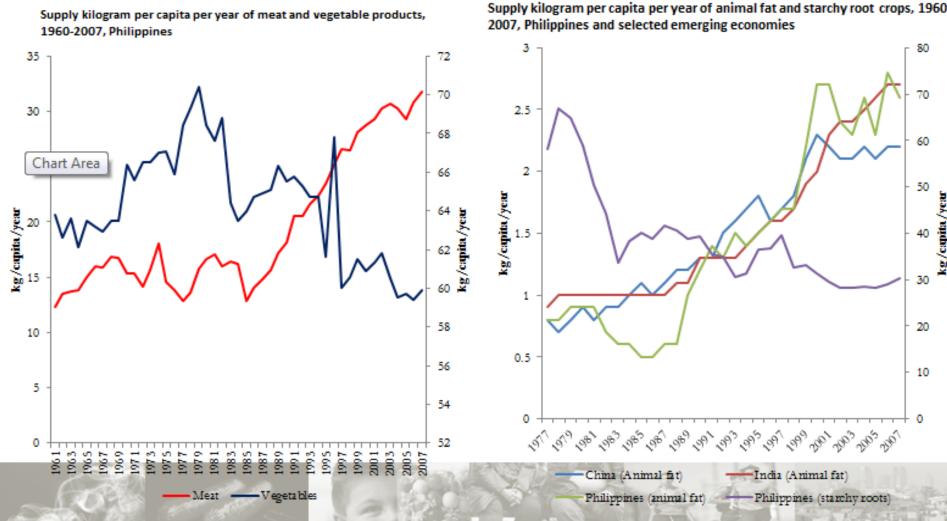


- Increase supply of unhealthy food items
 - FDI on processed food manufacturing, importation outputs and retailing
- Urbanization in the Philippines is one of the highest in Asia (higher than the world average)
- Increasing middle-class leads higher purchasing power
- Increase consumer spending
- Increasing urban poor





Unhealthy Diet: Macro level



V. Ulep, 2012 Phil Institute for Development Studies

Counseling or Education for Risk Factor Modification

Ebrahim et al, Cochrane 2011

- > 55 Clinical Trials
- > 163, 471 patients studied
- > Did not affect longevity
- > Did not prevent heart disease

Lesson # 5
Education for general
population is not effective.

> Did not lower smoking rates

Universal Health Care(UHC)

Republic Act 10606

- A government mandate aiming to ensure that every Filipino shall receive affordable and quality health benefits and services such as:
 - Human resources
 - Health facilities
 - Health financing









Health Human Resource, Philippines.

	Doctors	Nurses	Midwives
Active in Professional Regulation Comm. ¹	66,000	500,000	74,000
Employed in Government Facility ²	2,838	4,576	17,000
Ratio per 10,000 population ³	0.2	0.4	1.7

¹ PRC database, 2014

² Philippine Statistical Yearbook, 2010.

³ Total 2.3 HCW's/10,000 pop; WHO recommends 24/10,000.

Supply of Health Care Workers' is Decreasing

- 1. We are #1 exporter of nurses
- 2. We are #2 exporter of doctors
- 3. ASEAN integration will open doors.







2003

2013

Income	PhilHealth Utilization
Poorest	18%
Poor	23%
Middle	24%
Rich	28%
Richest	33%

Income	PhilHealth Utilization
Poorest	33%
Poor	71%
High Middle	48%
Low Middle	54%
Rich	70%
Richest	88%

Faraon et al, 2013

NDHS 2003

Good News and Bad News about the Philippine Health Situation

- PhilHealth coverage has increased from 51% in 2010 to 88% in 2015 (PhilHealth) ¹
- 2. But PhilHealth utilization remains low, especially amongst the poorest (only 33%) ²
- 3. The health budget increased from PhP28.7B in 2010 to PhP205B in 2015 ³
- 4. But the number of Filipinos who die without seeing a HCW increased from 45% to 66% ⁴
- 5. We are the number 1 exporter of nurses in the world ⁵, and the number 2 exporter of doctors ⁶
- 6. In the public sector,
 - There are only 5 HCW's per 10,000 population (ideal = 25)
 - There is only 1 doctor per 20,000 (ideal = 20) 7

¹ Philhealth, ² Faraon et al, 2013, ³ Department of Health, ⁴ Philippine Health Statistics, ⁵ Matsuno et al, ⁶ World Health Organization, ⁷ Dans et al

Why healthcare workers leave ¹

- 1. Unemployment (unfilled positions for HCW's)
- Underemployment (underpaid for workload)
- 3. Misemployment (job orders and casuals)
- Unjust working conditions (eg politicalization of appointments, non-issuance of magna carta benefits)

Why healthcare workers stay ²

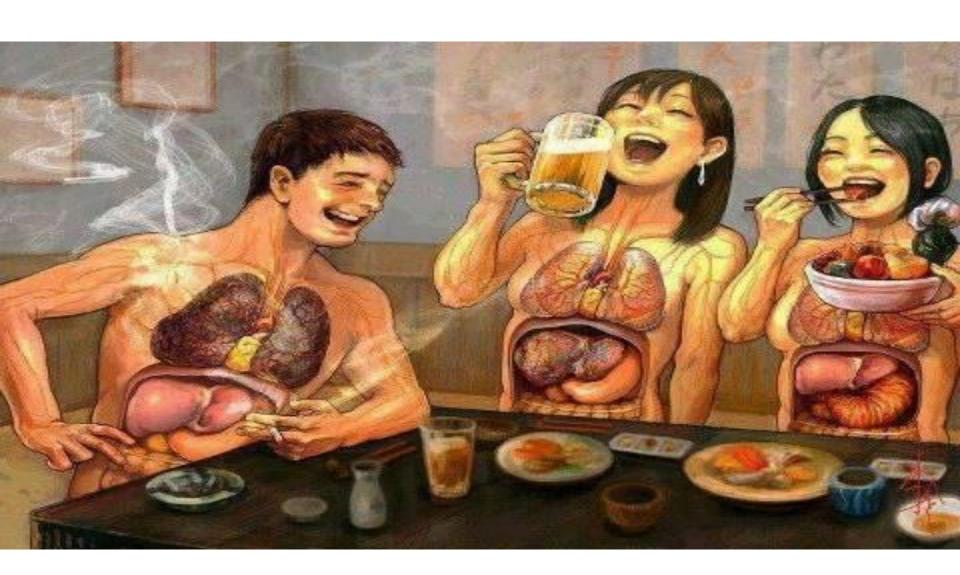
- 1. To serve the country
- 2. To be with their family

Summary

- Despite the rising budget and increasing Philhealth coverage, healthcare is deteriorating.
- The deterioration is mainly due to a shortage of healthcare workers caused by massive migration
- Healthcare workers who stay (especially those in rural areas) are patriots who want to serve the country.
- The government need to take better care of those who care for our health.

Walang kalusugang pangkalahatan, kung walang magaalaga sa taong bayan! – Coalition for Primary Care

Why tax sin products? Health and Revenue Goals



Multi Sectoral Approach: A must!



Media Power in Advocacy

To Inform, To Influence, & To Inspire







Congress Committee Hearing White Coat Army - Feb 2012





Congress Committee on Ways & Means Chair: Cong Emilio Abaya





Lower House Plenary Debates: We won after 16 years vs Tobacco Industry!

October 2012



Recto's Resignation: Turning Point

15 October 2012



facebook.

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Advocacy and Power of Media

- Facebook
- Twitter
- Prints
- TV
- Radio













Recto's Resignation: Turning Point

15 October 2012



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Turning Point: Senate Oct 2012

Recto Morris



of the Senate ways and means committee, delivers a privilege speech on a e pending in Congress.

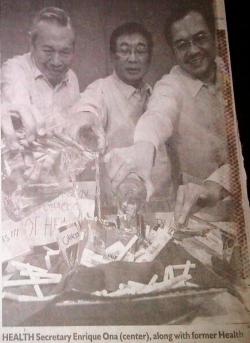
P150 creased every two years.

Cigarettes and tobacco

than March 1, 2013, the tax on a ki-high-priced cigarettes, a 17lo of tobacco prepared but not for chewing would be in-

cent increase from P2.72 to P6 per pack of 20s; mid priced cigarettes, a 32-percent rise Recto said that beginning from P7.56 to a P10 tax, and percent increase from P12 to P14 tax per pack.

Recto said that starting



Secretary Alberto Romualdez (left) and Dr. Tony Leachon, pours water on sticks of cigarettes to dramatize their support for a "sin

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Working with Sen Franklin Drilon

Nov 2012





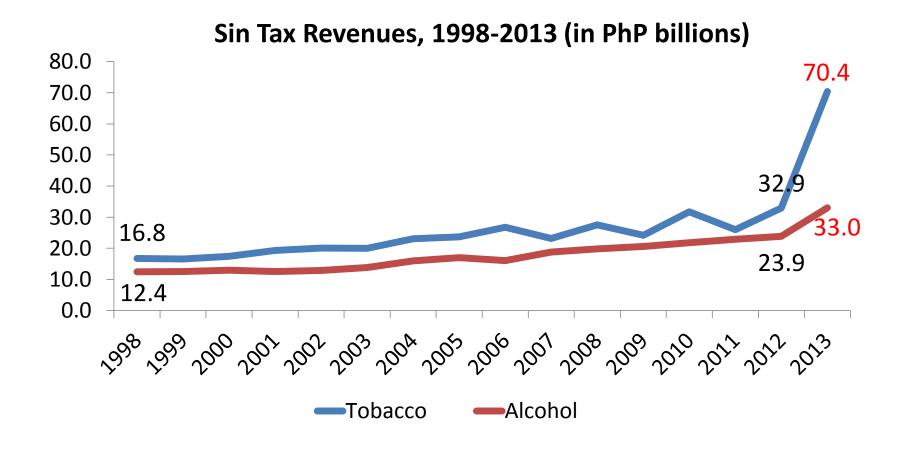




Sin Tax on tobacco & alcohol Approval at Malacañan Dec 20, 2012

What the Sin Tax Law has already achieved

Revenue generation



Sin Tax Law Benefits (2013)

CONCLUSIONS (Metrics of Success)

- 1. Prevalence of smoking among adult Filipinos went down from 31.0% in 2008 to 25.4% in 2013.
- 2. There are 3.2 million less smokers in the country because of the Sin Tax Law.
- 3. The drop is partly from people who stopped smoking. It is mostly from people who avoid starting to smoke.
- 4. Approximately 32,000 deaths were averted.
- 5. Health benefits were greatest in price sensitive populations the poor, rural folk, the very old, and the very young.





Sin Tax Funds to PhilHealth

- Republic Act No. 10351 (or the Tobacco and Alcohol Tax), signed by President Aquino on Dec. 29, 2012
 - gives the government the financial capacity to cover the full subsidy of the premium coverage of 14.7 million poor Filipino families (or more than 45 million Filipinos), amounting to P37 billion for 2015 and an increase of the Department of Health budget to P103 billion (an increase never received before).

Philhealth loses P2b in false claims — TG

Macon Ramos-Araneta Jul. 09, 2015 at 12:01am

SUBJECTING a blind person to a laser operation he did not need was among the 'modus operandi' employed by unscrupulous doctors a to defraud the state-run Philippine Health Insurance of billions of pesos paid by its members.

Senate Blue Ribbon committee chairman Senator Teofisto Guingona said a blind man testified Wednesday at the resumption of the hearing on the P2-billion dubious claims of hospitals and clinics with Philhealth, for eye operations, that he was lured into undergoing an eye surgery.

The blind man, who was among those 'gathered' by the so-called seekers of eye clinics, said he was given false hopes by the doctor who conducted a laser operation on him.

"So we see here that some persons and institutions systematically got Philhealth funds like what I said, one of them-- through hakot' patients," said Guingona.

On the second day of the hearing, Guingona admitted they saw signs of attempts to use Philhealth for the advantage of certain individuals and companies.

"They get the money of Philhealth which are public funds. This is very important for the public because the funds are used to help the poor. And yet, we see what happened. People are being used here as tools to get Philhealth funds. Others were operated although not needed. There were also ghost doctors. This means that the doctor who conducted the operation was different from the doctor who filed the claims for payment from Philhealth "he said."



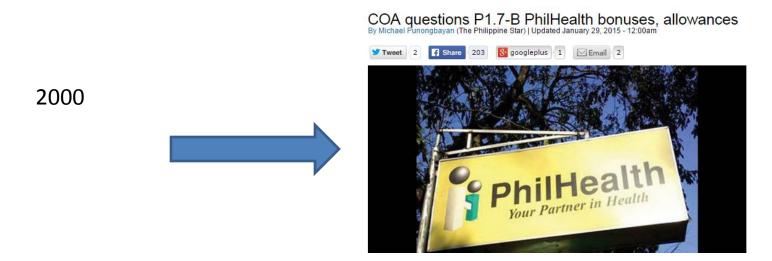




DOH/PhilHealth Leaders at Senate Hearing



FRAUD IS A GROUP CRIME



COA hits PhilHealth for P1.71B in unauthorized bonuses

February 4, 2015 8:45pm

Tags: Commission on Audit, Philhealth

The Commission on Audit has questioned some P1.761 billion in bonuses that the Philippine Health Insurance Corporation (PhilHealth) gave its officers and employees, saying such bonuses have not been authorized.





REBUILD



- Vision and strategic plan for the next 5 to
 years
- 2. Strong governance system with great external audit and internal control system





Leading our Leaders





Pres BS Aquino

DOH Sec Janette Garin

Choosing the Next President

Core Values

- Integrity, compassion, respect for people, agility, empathy, excellence in execution
- puts premium on health and education
- Skills Set
 - Academic background, track record
- Passion
 - Fire in the belly

Choosing the Next President



- Walk with The Punisher
- August 28,2015
 Mayor Rodrigo
 Duterte
- He's not running

Choosing the next President









