

ALL FOR HEALTH TOWARDS HEALTH FOR ALL

PHILIPPINE HEALTH AGENDA 2016-2022

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The Health System We Aspire For



FINANCIAL PROTECTION

Filipinos, especially the poor are protected from high cost of health care



BETTER HEALTH OUTCOMES

Filipinos attain the best possible health outcomes with no disparity



RESPONSIVENESS

Filipinos feel respected, valued, and empowered in all of their interaction with the health system

The Health System We Aspire For



EQUITABLE & INCLUSIVE
TO ALL



TRANSPARENT &
ACCOUNTABLE



USES RESOURCES
EFFICIENTLY



PROVIDES HIGH
QUALITY SERVICES

During the last 30 years of Health Sector Reform, we have undertaken key structural reforms and continuously built on programs that take us a step closer to our aspiration.

Milestones



Devolution



Use of Generics



Milk Code



PhilHealth (1995)



DOH resources to promote local health system development



Fiscal autonomy for government hospitals



Good Governance Programs (ISO, IMC, PGS)

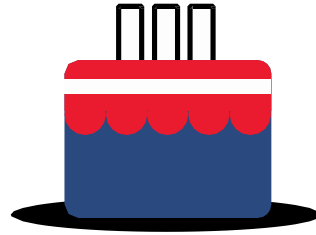


Funding for UHC

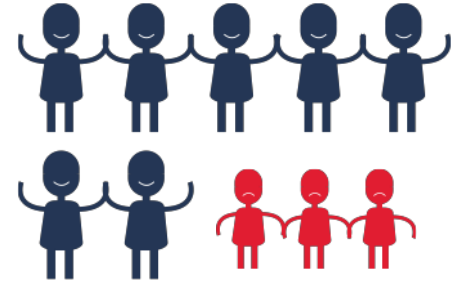
Persistent Inequities in Health Outcomes



Every year, around 2000 mothers die due to pregnancy-related complications.



A Filipino child born to the poorest family is 3 times more likely to not reach his 5th birthday, compared to one born to the richest family.



Three out of 10 children are stunted.

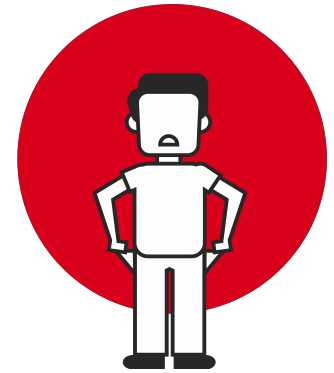
Restrictive and Impoverishing Healthcare Costs



Every year, 1.5 million families are pushed to poverty due to health care expenditures



Filipinos forego or delay care due to prohibitive and unpredictable user fees or co-payments



Php 4,000/month healthcare expenses considered catastrophic for single income families

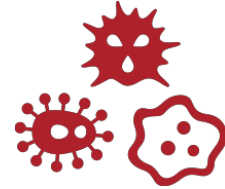
Poor quality and undignified care synonymous with public clinics and hospitals



Long wait times



Limited autonomy to choose provider



Less than hygienic restrooms, lacking amenities



Privacy and confidentiality taken lightly



Poor record-keeping



Overcrowding & under-provision of care

ALL FOR HEALTH

TOWARDS

HEALTH FOR ALL

**Lahat Para sa Kalusugan!
Tungo sa Kalusugan Para sa Lahat**



Investing in People



Protection Against Instability

- **UNIVERSAL HEALTH COVERAGE**
- **STRENGTHEN IMPLEMENTATION OF RPRH LAW**
- **WAR AGAINST DRUGS**
- **ADDITIONAL FUNDS FROM PAGCOR**

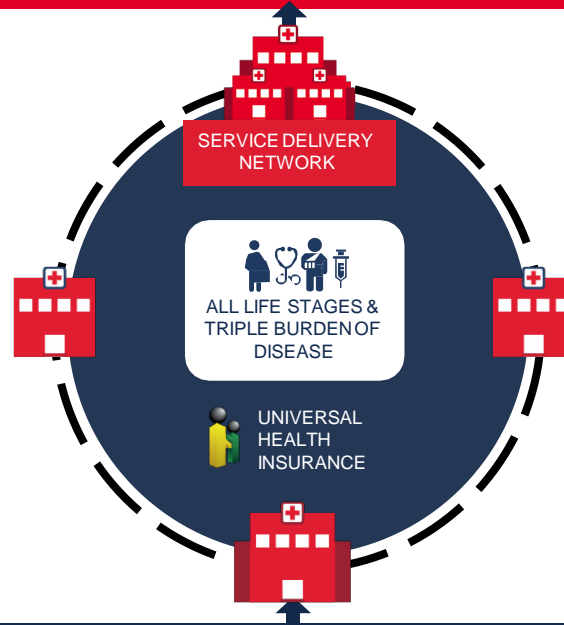


PHILIPPINE HEALTH AGENDA FRAMEWORK

Goals: Attain Health-Related SDG Targets
Financial Risk Protection, Better Health Outcomes, Responsiveness

Values: Equity, Efficiency, Quality, Transparency

3 Guarantees



A

C

H

I

E

V

E

GUARANTEE #1

ALL LIFE STAGES & TRIPLE BURDEN OF DISEASE

Services for Both the Well & the Sick

All Life Stages & Triple Burden of Disease



First 1000 days | Reproductive and sexual health | maternal, newborn, and child health | exclusive breastfeeding | food & micronutrient supplementation | Immunization | Adolescent health | Health screening, promotion & information



COMMUNICABLE

- HIV/AIDS, TB, Malaria
- Diseases for Elimination
- Dengue, Lepto, Ebola, Zika



NON-COMMUNICABLE, INCLUDING MALNUTRITION

- Cancer, Diabetes, Heart Disease and their Risk Factors – obesity, smoking, diet, sedentary lifestyle
- Malnutrition



DISEASES OF RAPID URBANIZATION & INDUSTRIALIZATION*

- Injuries
- Substance abuse
- Mental Illness
- Pandemics, Travel Medicine
- Health consequences of climate change / disaster

GUARANTEE #2

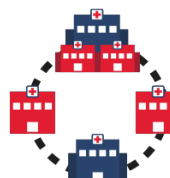
SERVICE DELIVERY NETWORK

Functional Network of Health Facilities

Services are delivered by networks that are



FULLY FUNCTIONAL
(Complete Equipment, Medicines,
Health Professional)



PRACTICING GATEKEEPING



**COMPLIANT WITH CLINICAL
PRACTICE GUIDELINES**



**LOCATED CLOSE
TO THE PEOPLE**
(Mobile Clinic or Subsidize
Transportation Cost)

911

**AVAILABLE 24/7 & EVEN
DURING DISASTERS**



**ENHANCED BY
TELEMEDICINE**

GUARANTEE #3

UNIVERSAL HEALTH INSURANCE

Financial Freedom when Accessing Services

Services are financed predominantly by PhilHealth



SIMPLIFY PHILHEALTH RULES

- **No balance billing** for the poor in basic accommodation
- **Fixed co-payment** for non-basic accommodation



PHILHEALTH AS THE MAIN REVENUE SOURCE FOR ALL HEALTHCARE FACILITIES

- **Expand benefits** to cover **comprehensive** range of services with **high support value**
- Contracting networks of providers within **Service Delivery Networks**



PHILHEALTH AS THE GATEWAY TO FREE OR AFFORDABLE CARE

- **All Filipinos** as members
- **Formal sector** premium paid through **payroll** and **non-formal** sector premium paid through **tax subsidy**

Our Strategy

A

Advance health promotion, primary care and quality

C

Cover all Filipinos against financial health risk

H

Harness the power of strategic HRH

I

Invest in eHealth and data for decision-making

E

Enforce standards, accountability and transparency

V

Value clients and patients

E

Elicit multi-stakeholder support for health

A

Advance health promotion, primary care and quality



- 1. Annual health visits for all poor families**
- 2. PhilHealth to contract with functional networks* of PCB providers and DOH provide additional resources***
- 3. Transform selected DOH hospitals into multi-specialty, end-referral “mega-hospitals”, i.e. teaching/training, reference laboratory**
- 4. Enact/enforce measures to improve access to lifesaving interventions and reduce exposure to risk factors for premature deaths and disability**
- 5. Establishing expert bodies for health promotion (Public Health Philippines) and surveillance and response (Philippine CDC)**

*District hospital paired up with 10+ RHUs or private clinics

*HFEP, deployment vaccines, medicines, trainings



- Facilitate the process of network forming
- Upgrade 3 DOH hospitals into “mega-hospitals”



- Expand primary care benefit to all members
- Limit contracting of PCB providers with functional networks (not stand-alone)

LGU

- Conduct annual health visits for all poor families and special populations (NHTS, IP, PWD, Senior Citizen)
- Collaborate with others to form networks

A

Advance health promotion, primary care and quality

C

Cover all Filipinos against financial health risk



1. Mobilize more funds

Sin Tax | PAGCOR, PCSO | Increase Premium | Collection Efficiency

2. Enroll remaining 8% from non-formal sector into PhilHealth

3. Expand PhilHealth benefits

Outpatient diagnostics, drugs, blood & blood products

4. Recalculate case rates & link payment to quality

5. Improve contracting and enforce terms

Primary care trust fund | Network-based contracting



LGU

- Support revenue generation measures
- Align all health financial assistance programs to support Universal Health Coverage (PAGCOR, PCSO)
- Undertake costing and revise case rates
- Increase premium rates and collection efficiency
- Design additional benefits for outpatient diagnostics, drugs, blood & blood products
- Implement Health Trust Funds
- Provide income retention to health providers while retaining budgetary support

C

Cover all Filipinos against financial health risk

H

Harness the Power of Strategic HRH



- 1. Make health professions curricula responsive to local and global needs**
- 2. Review government HRH compensation package such that ARMM, IP, GIDA will have highest pay**
- 3. Shift to competency versus profession-based frontline complement**
- 4. Provide scholarships, financial incentives**
- 5. Institute return service schemes**

*clinicians and allied health professionals, managers, researchers and policymakers



LGU

- Form Legislative-Executive Health Human Resource Task Force
2016 – 2017
- Streamline compensation scheme for health workers
- Provide the Magna Carta for HCW benefit

H

Harness the Power of Strategic HRH

I Invest in eHealth and data for decision-making



- 1. Require online data* submission as requirement for licensing & contracting of health facilities and drug outlets**
- 2. Mandate the use of Electronic Medical Records (EMR) in all health facilities**
- 3. Invest in nation-wide surveys, administrative data and disease registries**
- 4. Automate major business processes**
- 5. Facilitate open access to anonymized data**

** clinical and administrative*



LGU

- Revise licensing requirements to reflect regular electronic data submission requirement
- Open up data set for researchers
- Revise accreditation/contracting rules to reflect regular electronic submission requirement
- Open up data set for researchers
- Provide incentives
- Implement EMR in all health facilities
- Improve local civil registration and vital statistics data
- Submit data electronically



Invest in eHealth and data for decision-making

E

Enforce accountability and transparency

1. Publish information that can trigger better performance

- Prices of common drugs and services
- Non-compliant / erring providers
- National Objectives for Health to guide strategies and investments by different stakeholders



2. Set up dedicated performance monitoring unit

- Ghost patients and/or surprise visits
- Medical audits or third-party monitoring



- Collect and publish relevant information
- Publish annually accountability report card



- Publish annually accountability report card

LGU

- Ensure transparent procurement process in all health facilities
- Regularly submit data to DOH

E

Enforce accountability and transparency

V

Value clients and patients, especially the poor and vulnerable



- 1. Focus all efforts on the poorest 20 million Filipinos**
- 2. Make all health entitlements simple and explicit**
- 3. Set up participation & redress mechanism**
- 4. Significantly reduce turnaround time and improve transparency of processes**



LGU

- Coordinate with PhilHealth in defining the healthcare entitlements of every Filipino and publish this
- Set up call center
- Streamline procedures for availing services
- Set up complaints & redress mechanisms

V

Value clients and patients, especially the poor and vulnerable

E Elicit multi-sector multi-stakeholder support for health

- 1. Harness and align Private Sector in planning SDN, intervention, and supply side investments**
- 2. Ensure convergence with other government agencies in delivering services (DOH, DENR, DSWD, DepEd, HUDCC)**
 - Advocate for Health in All Policies
 - Multisectoral work with different agencies to build healthy living, working, schooling environments, healthy cities, and Health in All Policies
 - Mandate Health Impact Assessment for large-scale, high-risk development projects, e.g. mining, power plants, oil rigs
- 3. Partake with CSOs in governance**
 - Budget Development
 - Monitoring and Evaluation



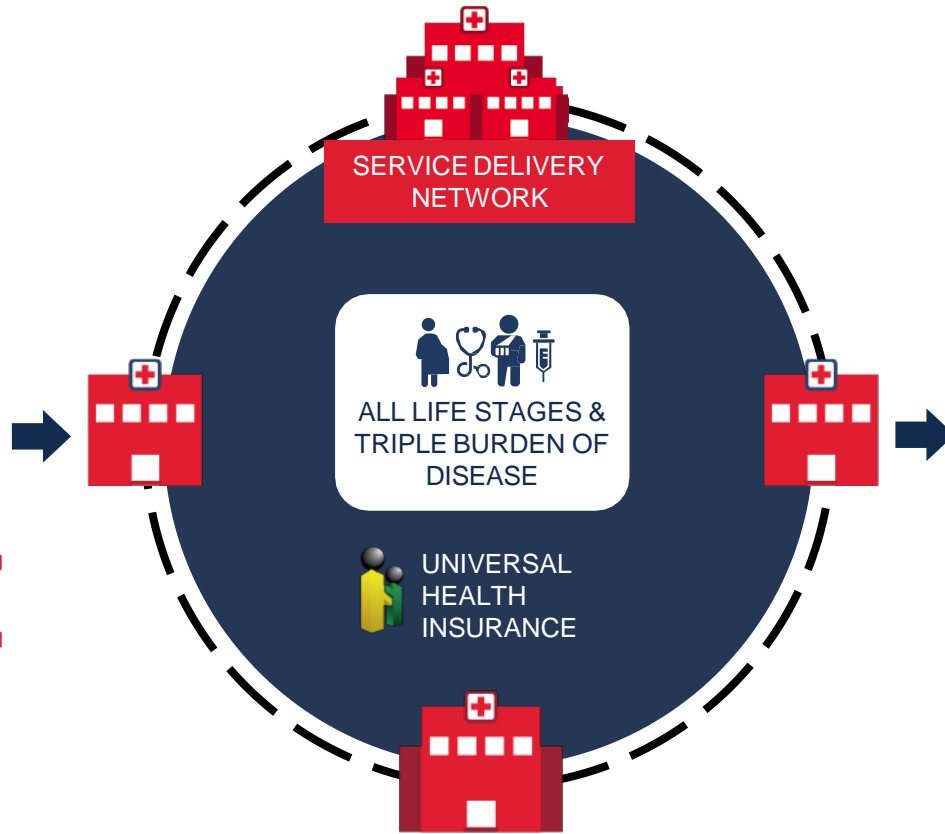


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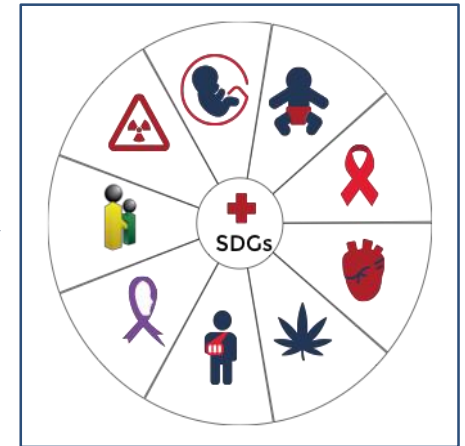
- Develop policy agenda with NGAs, CSOs and private sector on mainstreaming Health in All Policies
- Institutionalize health impact assessment for large scale projects
- Expand contracting mechanisms to include the private sector (Z benefits, PCB)
- Implement healthy communities/cities interventions

E

Elicit multi-sector multi-stakeholder support for health



ATTAIN HEALTH-RELATED SDGs



Financial Risk Protection
Better Health Outcomes
Responsiveness