

## PRIVATE SECTOR IN PUBLIC HEALTH SERIES | Cycle 1

Session 1 | *Our Common Ground: Towards a shared understanding of the Universal Health Care Law and its opportunities and challenges for the private sector in the Philippines*

27 February 2020 | GLDC Caseroom, Asian Institute of Management

BREAKING NEW GROUND

**Recognizing the critical yet untapped potential of the private sector in ensuring the health of Filipinos, the Asian Institute of Management-Stephen Zuellig Graduate School of Development Management partners with ThinkWell Philippines to harness, organize, synergize, and transform the efforts of the private health sector.** Held every last Thursday of the month, the Private Sector in Public Health (PSPH) Series aims to bring together stakeholders from the private sector within and beyond the world of health to converse about current pressing health system issues, explore innovative solutions, and influence the policy conversation. The series starts with its first cycle from February to November 2020—The Universal Health Care (UHC) Law: Shared Opportunities and Challenges for the Private Sector.

**On 27 February 2020, the first session of the PSPH Series Cycle 1 was held at AIM, Makati City with the theme “Our Common Ground: Towards a shared understanding of the UHC Law and its opportunities and challenges for the private sector in the Philippines”.** This first session aimed to manifest the opportunities that the UHC Law provides for the private sector. The roundtable discussion was attended by 25 stakeholders representing 14 private sector organizations (Annex A). Representatives from the Department of Health (DOH) and PhilHealth served as reactors to the discussion that was facilitated by Dr. Marife Yap and Dr. Gelo Apostol of ThinkWell Philippines.

**The discussion was initiated with the question: *Does the Philippine private sector have a strategic role in implementing the UHC Law?*** Everyone was in agreement that the private sector does have a role, but the more important question is—what is that role? Participants shared that confusion arises from the fact that there is little to no guidance on this from DOH and PhilHealth, as well as with the schedule of the rollout of the law and issuances related to it. Ultimately, the private sector recognizes the importance of the UHC Law in democratizing health care and strengthening public health. They are willing to participate and be able to assist in addressing health system gaps, but they need to have a clear understanding of what the government expects from them, especially when it comes to interfacing with local governments who will be handling the management and financing of province- or city-wide health systems and health care provider networks (HCPNs). The main points of the discussion are as follows:

- **The roles of and expectations from the private sector are not laid out in the Implementing Rules and Regulations (IRR) of the UHC Law.** A question was raised on whether the UHC Law and its IRR were written with the private sector taken into consideration. It was pointed out that there is no guidance on the schedule of release and implementation of guidelines and issuances, so they do not know how or when to move. To address this, a comprehensive strategy paper from the DOH that will detail how the private sector can participate in the different aspects of implementation of the law was suggested.
- **There is confusion as to how private facilities can be part of a network.** It was discussed that the priority of the government initially is to organize public facilities into networks, but it does not prevent private facilities from participating as well. The private sector can opt to participate in a mixed public-private network that is public-led or create a purely private-only and private-led network. The ultimate goal, however, is for public and private facilities to be indistinguishable when it comes to the quality of services that they provide.

- **The important role of local government units (LGUs) as managers of HCPNs was recognized, but issues on financing and extent of coordination with LGUs were raised.** Under the law, all PhilHealth funds will be pooled into a Special Health Fund (SHF) that will be managed by the Provincial Health Board. However, PhilHealth can also directly pay private-led HCPNs. Given this, to what extent would private facilities have to coordinate with provincial governments? It was recognized that LGUs have a better sense of ground realities and thus, can provide insight on which services are needed and how it can be delivered, especially for the poor. Ultimately, the private sector cannot ignore LGUs, but this raises the concern that given the devolution of the health system, there will be 81 different interpretations of the UHC Law for the 81 provinces—will they have to adjust depending on which province they operate in?
- **Private institutions can offer the latest primary care benefit package, Konsulta, as long as they reach the indicated requirements.** However, there was a concern that the private sector has not yet been fully engaged in the development of the new primary care benefit package, despite the scheduled release of the guidelines by May. There was also confusion as to whether Filipinos will have the freedom to choose a primary care provider (as per Section 6.6 of the IRR) or will they be assigned (as per Section 6.7).
- **Considering that the private education sector contributes significantly to the production of the human resources for health in the country, the government needs to engage with them more.** Currently, internship and clerkship programs do not include training in primary care. It was discussed that under the law, curricula of health professionals will be revised to be more primary care focused. In the interim, professionals who want to practice in primary care will have to acquire a primary care certification.
- **How can providers work with government on initiatives on development of software applications?**

**The DOH and PhilHealth recognize the important contributions of the private sector to the implementation of the UHC Law, especially when it comes to service provision.** The government aims to give certainty and address the element of mistrust coming from the private sector, proposing to come up with a comprehensive strategy on how they can be more actively included. It was also noted that all sectors and stakeholders should be actively involved in consultations to ensure that all voices are heard and included. Ultimately, the government wants to be able to ensure that the public and private sectors will have equal footing, especially when it comes to delivery of quality services.

**The PSPH Series has to be aligned with internal timelines of issuances and guidelines of DOH and PhilHealth so that outputs can be properly forwarded as feedback to their development.** It was suggested that future sessions have a systemic point-of-view, with a purposive and detailed summary at the end, presenting how the discussion is evolving and the next steps. Additional topics raised for consideration are health care professionals and access to medicines. It was also suggested that patient representatives be involved in future sessions. With this, the structure of the discussion will also be revised such that possibilities or scenarios on how private sector can be involved in various aspects of the UHC Law will be presented, followed by a discussion. The next sessions will focus on the following:

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|-----------------------|------------------------------------------------------------------------------------------------------|
| <b>March 26, 2020</b> | Network provision of primary care services: Opportunities and challenges for the private sector      |
| <b>April 30, 2020</b> | Windows of opportunities: Private sector participation in province-led health care provider networks |

## ANNEX A. LIST OF ATTENDEES

Name	Affiliation	Position
Banzon, Eduardo	Asian Development Bank	Principal Health Specialist
Herrera, Maya	Asian Institute of Management	Professor
Gammad, Joseph Joven	Asian Institute of Management	EMBA 2020
Panganiban, Janelle Micaela	Ayala Healthcare Holdings, Inc.	Strategy and External Affairs Specialist
Bautista, Nicole	Ayala Healthcare Holdings, Inc.	Associate
Alcantara, Gerry	Boehringer Ingelheim Philippines, Inc.	Market Access Lead
Alzona, Michael	Merck Sharp & Dome, Inc.	Asia Pacific Patient Engagement Director
Basa, John	Mount Grace Hospitals, Inc.	Operations Director
Gomez, Francis	New Marketlink Pharmaceuticals Corp	President & CEO
Clavera, Angelica	Pfizer	Medical Director
Lalas, Miriam	Pfizer	Medical Manager
Payawal, Evan	Pfizer	Medical Manager
Prasad, Veronica	Pfizer	Medical Manager
Soriano, Odette	Pfizer, Inc.	CHV Lead
Nua, Winniefer	Pfizer, Inc.	Pricing & HEOR
Binos, Richard	Pharmaceutical and Healthcare Association of the Philippines	Health System Officer
Sembrano, Daisy	Pharmaceutical and Healthcare Association of the Philippines	Healthcare Policy Director
Sanciangco, Janine Marie	Sanofi	Public Affairs Manager
Del Castillo, Noel	SeeYouDoc	Co-founder and CEO
Santos, Malaya	St. Luke's Medical College	
Naranjo, Liza	St. Luke's Medical College	Faculty

Ochave, Jose Maria	Unilab, Inc.	SVP – Business Development Group
Jalotjot, Lorenzo David	Unilab, Inc.	Consumer Insights Manager
Pagcatipunan, Rodolfo	Unilab, Inc.	Medical Director
Bernal, Nancy	Unilab, Inc.	Medical Director

## REACTORS

Sayson, Lorra Angelia	Department of Health	Executive Assistant & UHC Coordinator
Galvez, Marvin	PhilHealth	Benefits Development and Research Department

## ORGANIZERS

Hartigan-Go, Kenneth	Asian Institute of Management	Head, Stephen Zuellig Gradaute School of Development Management
Yap, Maria Eufemia	ThinkWell Philippines	Senior Policy Adviser and Country Lead
Apostol, Geminn Louis	ThinkWell Philippines	Private Sector Specialist
Wee Co, Pura Angela	ThinkWell Philippines	Health Policy Expert
Nuevo, Christian Edward	ThinkWell Philippines	Health Financing Expert
Sigua, Jemar Anne	ThinkWell Philippines	Junior Analyst