



ANNUAL REPORT

2011

**DEPARTMENT OF HEALTH
PHILIPPINES**

DEPARTMENT OF HEALTH ANNUAL REPORT 2011

Published by the Department of Health-Policy Development and Planning Bureau
(DOH-HPDPB) San Lazaro Compound, Rizal Avenue, Sta. Cruz, Manila
1003 Philippines.

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**KALUSUGAN
PANGKALAHATAN**

Annual Report 2011



Republic of the Philippines
Department of Health

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For health reform to be truly successful, no one should be left behind in its implementation. This is the fundamental feature of Universal Health Care or Kalusugan Pangkalahatan (KP). It is designed so that all Filipinos, especially the poor, enjoy the benefits of health reform by 2016.

The three strategic thrusts of KP to meet this goal are:

Financial Risk Protection by expanding National Health Insurance Program enrolment and utilization, and enhancing benefit delivery,

Improved Access to Quality Hospitals and Health Care Facilities by upgrading the capacity of DOH-retained hospitals, provincial hospitals, district hospitals and rural health units to provide quality and more comprehensive services, and


Attaining Health-Related Millennium Development Goals by fielding community health teams to help Filipino families know and gain benefits from PhilHealth and public health programs on reducing maternal and child mortality, morbidity and mortality from tuberculosis and malaria, and the prevalence of HIV/AIDS, in addition to being prepared for emerging disease trends and prevention of non-communicable diseases.

The DOH 2011 Annual Report presents evidence that KP is off to a good start. For the first strategic thrust, it highlights achievements in universal coverage and new provider payment mechanisms. For the second

strategic thrust, it documents increased capacity of public health facilities as well as increased access to and availability of medicines and other health commodities. And for the last strategic thrust, it describes intensified health programs and the deployment of community health teams to deliver twelve key health messages on family health, PhilHealth, and the Pantawid Pamilyang Pilipino Program to families, households, and communities.

The Department's other accomplishments and utilization of resources for initiatives that are supportive of the KP thrusts are likewise presented in this report. These are in the areas of health human resource, mechanisms for good governance, health information, policy and standards, and health research. The DOH 2011 Annual Report also features gainful innovations executed in convergence with other government agencies and in partnership with the private sector.

The following record of achievements is presented not just to serve as an annual documentation for the DOH. More importantly, it also attests to the fact that given these initial achievements, KP, no matter how daunting, is a viable, wide-reaching approach that can deliver health care to all.


DR. ENRIQUE T. ONA
Secretary
Department of Health

KALUSUGAN PANGKALAHATAN: THE THREE MAJOR THRUSTS



FINANCIAL RISK PROTECTION

78,365,092 Filipinos are now covered.

PHILHEALTH ENROLLMENT

By year end of 2011, almost 79 million Filipinos or 82 percent of the population were covered by PhilHealth. Majority of the enrolled beneficiaries (49 percent) were covered through PhilHealth Sponsored Program. As of December 2011, around 4.3 million of the poorest Filipino families (42 percent of target families identified by the National Household Targeting System for Poverty Reduction) were registered as PhilHealth members. Of this number, 584,150 were from North

Luzon; 1,151,821 from South Luzon and NCR; 867,549 from Visayas; and 1,638,917 from Mindanao.

In addition, a total of 18,900,729 NHTS beneficiaries were enrolled the same year, broken down as follows: 2,490,974 from North Luzon; 5,232,713 from South Luzon and NCR; 3,976,096 from Visayas; and 7,200,946 from Mindanao.

ENROLLED BENEFICIARIES AS OF 2011, BY TYPE OF MEMBERSHIP

Type	Number	Percentage
Government	5,903,829	7.5
Private	18,097,108	23.1
Overseas Workers	5,085,502	6.5
Individually Paying	9,905,047	12.6
Sponsored	38,428,177	49.0
Lifetime	945,429	1.2
Total	78,365,092	100.00

Source: MMG, PhilHealth

INCREASING ENROLLMENT THROUGH PUBLIC-PRIVATE PARTNERSHIPS (PPP)

PhilHealth partnered with several private companies to promote membership. Information technology (IT)-based companies have been supporting PhilHealth by making registration easier and more convenient through augmentation of registration centers and utilization of IT tools to enhance enrollment and payment. Industry giants such as Shoemart and the Corporate Information Solutions-Bayad Centers provided more than 1,300 registration sites for PhilHealth enrollees,

while Smart and Globe Telecoms committed to provide promotional PhilHealth membership messages to millions of their subscribers.

To promote individually paying PhilHealth membership, companies such as Watson's Pharmacy, Rose Pharmacy, South Star Drug, Unilab, Fresenius, and GlaxoSmithKline committed to offer discounts on generic drugs, flu vaccines, hemodialysis services, and free eye examination for PhilHealth members.

PHILHEALTH DESKS IN DOH HOSPITALS

Department Memorandum 2011-0184 was issued in July 2011 to mandate the establishment of PhilHealth Desks in all DOH-retained hospitals. These desks are expected to facilitate and assist enrollment; provide information on the members' benefits, entitlements and obligations; and clarify PhilHealth processes in hospitals.

PHILHEALTH SABADO II

To further enhance coverage, the National PhilHealth Registration Day, nicknamed PhilHealth Sabado (as it is held on Saturdays), was conducted for the second time on 25 June 2011. During PhilHealth Sabado II, a total of 719,930 PhilHealth membership cards were distributed to poor families identified in the NHTS-PR listing. In addition, 7,238 individuals from the informal sector registered for PhilHealth membership. The event likewise provided an orientation on entitlements and responsibilities to 40,536 PhilHealth members.





More benefits are provided through new provider payment mechanisms.

INTRODUCTION OF PHILHEALTH CASE RATES SCHEME

Introduced in September of 2011, the PhilHealth Case Rates Scheme aims to improve turn-around time for claims processing and payment to providers in order to achieve better cost-efficiency. This objective is embodied in PhilHealth Circular Nos. 011- 2011 and 011–Board Order 2011. The Case Rates Scheme provides an all-in package payment for 23 medical and surgical conditions.

Case	Rate (PhP)	Case	Rate (PhP)
Dengue I	8,000	Hemodialysis (per session)	4,000
Dengue II	16,000	Maternity Care Package	8,000
Pneumonia I	15,000	NSD Package in Level 1 Hospitals	8,000
Pneumonia II	32,000	NSD Package in Levels 2 to 4 hospitals	6,500
Radiotherapy (per session)	3,000	Hysterectomy	30,000
Essential Hypertension	9,000	Caesarean Section	19,000
Cerebral Infarction (CVA I)	28,000	Appendectomy	24,000
Cataract Surgery	16,000	Cholecystectomy	31,000
Mastectomy	22,000	Dilatation and Curetage	11,000
Acute Gastroenteritis	6,000	Thyroidectomy	31,000
Asthma	9,000	Hemiorrhaphy	21,000
Typhoid Fever	14,000	Newborn Care Package in Hospitals and Lying-in Clinics	1,750
Cerebro-vascular accident (hemorrhage, CVA II)	38,000		

NO BALANCE BILLING

Complementing the Case Rates Scheme is the No Balance Billing (NBB) system for NHTS-PR members and dependents covered by the PhilHealth Sponsored Program. NBB, which mandates that no other fees or expenses shall be charged or paid for by patient-members above and beyond the packaged rates of 23 cases outlined in the Case Rates Scheme, is part of PhilHealth Board Resolution No. 1441, and further defined in Section III of PhilHealth Circular No. 011-2011.

DEVELOPMENT OF CATASTROPHIC CARE PACKAGE

The DOH, together with PhilHealth, the Presidential Management Staff, the Philippine Amusement and Gaming Corporation, and the Philippine Charity Sweepstakes Office, are developing a Catastrophic Care Package that intends to provide substantial assistance to any member who contracts illnesses such as cancer and end-stage renal disease.

IMPROVED ACCESS TO QUALITY HOSPITALS AND HEALTH CARE FACILITIES

2011 was a gainful year for strengthening and improving the capacity of public health facilities.

PROGRESS MADE IN HEALTH FACILITY ENHANCEMENT PROGRAM (HFEP)

In partnership with local government units (LGUs), the DOH fast-tracked the implementation of HFEP which seeks to improve the country’s health centers, rural health units (RHUs), and district and provincial hospitals.

From a total of 1,559 projects in 2011, 682 underwent pre-procurement while 877 underwent bidding. As of 28 November the same year, 98.8 percent of projects with funding from the Continuing Appropriation of 2010 were either completed or on-going. Facility upgrading was completed in 17 percent of RHUs, 24 percent of district hospitals, 29 percent of provincial hospitals, 38 percent of city hospitals, and seven percent of DOH-retained hospitals.

7.1 Billion Pesos were spent in 2011 for HFEP:

PhP1.4B

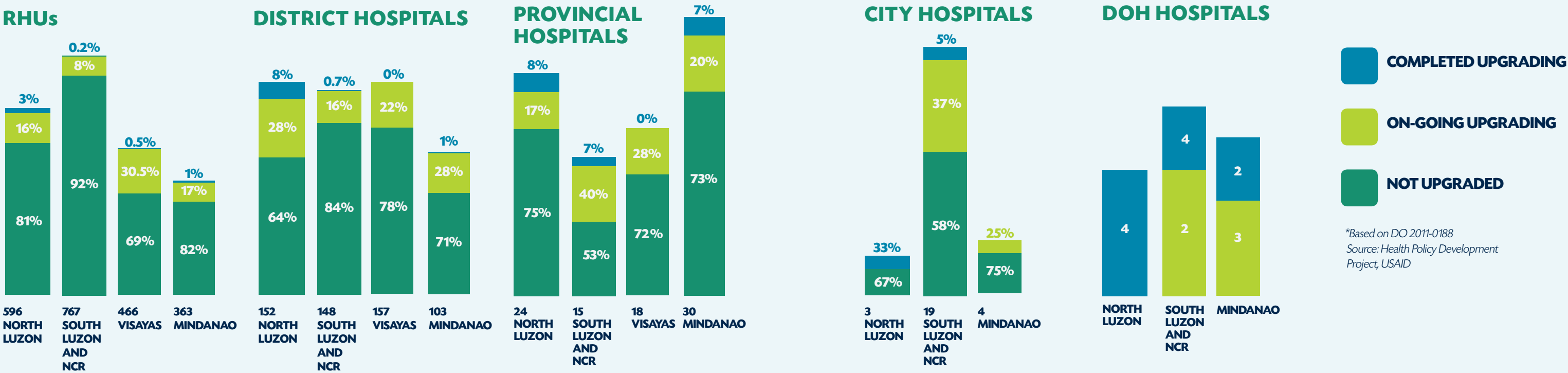
to enhance DOH-retained hospitals

PhP5.7B

to enhance LGU facilities

HFEP FACILITIES CURRENTLY BEING UPGRADED OR COMPLETED

UPGRADING UNDER HFEP 2010 AND 2011





ATTAINING THE HEALTH-RELATED MILLENNIUM DEVELOPMENT GOALS

12 KEY MESSAGES

- 1 Keep your promise to stay healthy.
- 2 Have at least 4 pre-natal care visits.
- 3 Give birth at a health center, lying-in, or hospital.
- 4 Breastfeed your child right after birth.
- 5 Complete your child's immunization.
- 6 Space your children 3 to 5 years apart.
- 7 Practice proper hygiene.
- 8 Live a healthy lifestyle.
- 9 Use your PhilHealth card.
- 10 Use your PhilHealth benefits.
- 11 Know where to go for health services
- 12 Go to a health center if you have been coughing for two weeks or more.

Community Health Teams were deployed to facilitate the provision of necessary health services among communities and families.

Launched by the DOH with the collaboration of DILG, the Department of Social Welfare and Development (DSWD), and the Department of Education (DepED) on 11 October 2011, community health teams (CHTs) are community volunteer-groups that are tasked to assist families with their health needs, provide families with necessary health information, and, if needed, facilitate their linkage with appropriate health providers.

Each CHT is composed of five trained members led by a midwife or nurse. CHT members may include barangay health workers, traditional birth attendants, social welfare development

officers, parent leaders, barangay nutrition scholars, and barangay service population officers.

The CHTs are also expected to deliver 12 key health messages on family health, PhilHealth benefits and utilization, and the Pantawid Pamilyang Pilipino Program (4Ps) to families, households, and communities.

Training of trainers sessions led by the Centers for Health Development (CHDs) were conducted in October 2011. This led to the successful training of 35,152 CHTs, of which 19,200 have been deployed and have already provided necessary services to 253,434 poor families.

Programs were intensified to address present health needs and advance efforts to attain health-related MDGs.

ANTI-DENGUE CAMPAIGNS

During the ASEAN Dengue Day on 15 June 2011, public schools, churches, public markets, and communities were mobilized to conduct search-and-destroy activities in their areas. During the event, the DOH, the Department of Interior and Local Government (DILG), and the Liga ng mga Barangay entered into a Memorandum of Agreement which generated commitment from member-barangays to implement dengue prevention and control programs using their own funds.

On 25 August 2011, the Department together with its partners, DILG, DOST, the Department of Education (DepEd), the Department of Environment and Natural Resources, the Metro Manila Development Authority, and LGUs, launched an anti-dengue campaign called ABKD or "Aksyon Barangay Kontra Dengue." Reinforcing the country's drive against dengue by going back to the basics of comprehensive vector control supported by environmental manipulation and modification, the campaign urged communities to conduct regular weekly clean-up drives. The activities were backed up by a tri-media campaign to generate public support.

MEASLES-RUBELLA SUPPLEMENTAL IMMUNIZATION ACTIVITY (MR-SIA)

While vaccines for measles are available in all health centers nationwide and provided for free, Filipino children continue to die from the disease. The MR-SIA, a nationwide door-to-door immunization activity conducted from April to May 2011, aimed to reduce the number of children susceptible to measles and prevent outbreaks. Out of the target population of 18,651,791, a total of 15,649,907 children (84%) benefited from the program.

LAUNCH OF BREASTFEEDING TAMA, SAPAT AT EKSLUSIBO (TSEK)

Launched on 23 February 2011, TSEK aimed to educate mothers about proper breastfeeding and its numerous health benefits, and to encourage them to exclusively breastfeed their babies from birth up to six months. TSEK likewise served as an advocacy campaign to generate the needed support from families, employers, and communities.

PROMOTION OF EXERCISE AND HEALTHY LIFESTYLE

On 15 May 2011, the DOH launched "Ehersisyong Pangkalusugan para sa Lahat," an advocacy campaign on exercise and healthy lifestyle, with no less than President Benigno Aquino III leading the nation in exercise. Over 4,000 participants attended the event held at the Quezon City Memorial Circle. The event sought to encourage everyone to exercise in order to lessen the risk of contracting non-communicable diseases brought about by physical inactivity.

In September, the DOH partnered with the Philippine Medical Association to combat non-communicable diseases through an intensive and continuous media campaign promoting healthy lifestyle.



AKSYON PAPUTOK INJURY REDUCTION (APIR)

To reduce fireworks-related injuries that mostly occur during the celebration of the New Year, the DOH launched APIR on 21 November 2011. APIR encouraged communities to pool resources for community fireworks displays and to designate areas for safe and responsible firework use. As part of this initiative, Secretary Ona inspected several firework factories and outlets in Bocaue, Bulacan on 19 December 2011. Community fireworks displays were promoted in cooperation with the local governments of Malolos, Bulacan, and the City of Manila.

DISTRIBUTION OF FIREWORKS INJURIES, 2010 AND 2011 (N=1,021)	Type of Injury	2011	2010	% change
	Fireworks-related	987	972	2% higher
	Stray bullet	29	39	26% lower
	Firecracker ingestion	5	11	55% lower
	Total	1,021*	1,022**	0.1% lower
Source: National Epidemiology Center, DOH				
* 4 deaths reported (CFR=0.4%) **1 death reported (CFR=0.1%)				

VACCINES FOR SENIOR CITIZENS

Pneumococcal and influenza vaccines were provided to the first batch of senior citizens who have increased susceptibility to pneumonia. This is the first round of support to the implementation of the Senior Citizens' Law which provides for free vaccines to poor senior citizens among NHTS families and those in institutionalized care.

PROVISION OF COMMODITIES TO LGUS

PhP6 billion worth of vaccines, various medicines, TB drugs, insecticide-treated nets, laboratory supplies, and technical support were provided to local governments to support the implementation of local public health programs.

LAUNCH OF DOH COMPACKS

Based on the P100 Program, the Complete Treatment Packages (ComPack) Program was introduced by the DOH in 2011 as a free drug access program for poor families covered by conditional cash transfers (CCTs) in 1,020 municipalities. The Program spent PhP237.1 million in medicines for health conditions such as hypertension, diabetes, respiratory infections, diarrhea, and common infections.

OTHER ACCOMPLISHMENTS SUPPORTING
KALUSUGAN
PANGKAHALATAN

Human Resources for Health

REGISTERED NURSES FOR HEALTH ENHANCEMENT
AND LOCAL SERVICE (RNHEALS)

In coordination with the Department of Labor and Employment and DSWD, the DOH started the recruitment and deployment of 15,688 registered nurses to augment the country's human resource requirements. The first batch of 9,141 nurses were deployed to serve in different rural communities, while the second batch of 6,547 nurses were assigned to DOH hospitals.

The DOH RNheals program provides nurses with a monthly allowance. LGUs, on the other hand, are tasked to ensure the nurses' safety and to provide them with modest board and lodging. LGUs are likewise encouraged to allot an additional monthly allowance for each nurse.

RURAL HEALTH MIDWIVES PLACEMENT PROGRAM
(RHMPP)

To support the augmentation of human resources needed at the local level, 900 midwives out of the 1,000 targeted for deployment under the RHMPP were assigned to different communities across the country.

DOCTORS TO THE BARRIOS

In 2011, the DTTB program deployed a total of 115 physicians to various regions in the country. DTTB recruitment and deployment will be scaled up in 2012.



RED ORCHID AWARDS

During the World No Tobacco Day on 31 May 2011, 34 out of the 89 nominated government offices, hospitals, and LGUs received the Red Orchid Award for implementing 100percent tobacco-free environments. The Red Orchid awardees included eight hospitals, seven Centers for Health Development, one province, five cities, and 13 municipalities. The event likewise served as a venue for recognizing local best practices that support the World Health Organization (WHO) Framework Convention on Tobacco Control.



DOH RED ORCHID AWARDEES 2011

PROVINCE

Nueva Vizcaya Province Health Office
Hon. Luisa Lloren Cuaresma

CITIES

Maasin City Hon. Manoley Samaco
Davao City Hon. Sara Z. Duterte-Carpio
Roxas City Hon. Angel Alan Celino
Balanga City Hon. Jose Enrique S. Garcia
Legaspi City Hon. Carmen Geraldine Rosa

MUNICIPALITIES

Amlan, Negros Oriental Hon. Bentham dela Cruz
Calatrava, Romblon Hon. Robert M. Fabella
Pintuyan, Southern Leyte Hon. Celsa Estrella
Alamada, North Cotabato Hon. Bartolome Lataza, Jr.
Talisayan, Misamis Oriental Hon. Catherine Ifurung
Tantangan, South Cotabato Hon. Arnold Garingo
Naval, Biliran Hon. Susan V. Parilla
Dupax Del Norte Hon. Clarita E. Epi
Dupax Del Sur Hon. Romeo P. Magaway, Sr.
Buenavista, Guimaras Hon. Samuel Gumarin
Veruela, Agusan del Sur Hon. Salimar T. Modejar
Solano, Nueva Viscaya Hon. Philip Decayo
Calauag, Quezon Hon. Luisito S. Visorde

CENTERS FOR HEALTH DEVELOPMENT

CHD- SOCCSKSARGEN Dr. Abdullah Dumama, Jr

CHD-Cagayan Valley Dr. Tita Callueng
CHD-Eastern Visayas Dr. Edgardo M. Gonzaga
CHD-MIMAROPA Dr. Gloria Balboa
CHD-CAR Dr. Myrna Cabotaje
CHD-Bicol Dr. Nestor Santiago, Jr.
CHD-Metro Manila Dr. Irma Asuncion

HOSPITALS

Cotabato Regional and Medical Center Dr. Helen Yambao
Ospital ng Palawan Dr. Glorifino M. Juan, Jr.
Luis Hora Memorial Regional Hospital Dr. Edgardo Bolompo
Tagaytay Treatment and Rehabilitation Center
Dr. Carmelita Belgica
Quirino Memorial Medical Center Dr. Angeles De Leon
Western Visayas Sanitarium Dr. Annabel De Guzman
Mariano Marcos Memorial Medical Center
Dr. Ma. Lourdes Otaysa
Corazon Locsin Montelibano Regional Hospital
Dr. Rafael Salvador

SPECIAL CITATION ON IMPLEMENTATION OF 100%
TOBACCO-FREE ENVIRONMENT IN GOVERNMENT OFFICES

Metro Manila Development Authority
Department of Education - Region 1
Land Transportation Office - Region 10
Civil Service Commission - Region 1
Commission on Population - CAR
Department of Trade and Industry - CAR



Mechanisms for Efficiency, Transparency, and Accountability



DOH ISO CERTIFICATION

On 14 March 2011, Secretary Ona led a simple ceremony and parade inside the DOH compound to launch the DOH journey towards International Organization for Standardization (ISO) certification for quality management system (QMS) or ISO 9001 - 2008. On that day, the management and staff of bureaus, centers, and offices of the DOH Central Office started the institutional process towards ISO Certification. Undersecretary Gerardo Bayugo serves as the Quality Management Representative to oversee its implementation, while Director Kenneth Ronquillo heads the *ad hoc* committee of ISO Certification. The Development Academy of the Philippines has been tapped to provide technical assistance to the agency. To date, the DOH has conducted activities from orientation to conduct of International Quality Auditing (IQA).



EXPENDITURE TRACKING SYSTEM (ETS)

The Health Policy Development and Planning Bureau (HPDPB) was given the task of overseeing the development and implementation of the ETS. Five supporting memoranda were issued to guide the Central Office and CHDs on encoding and backtracking of the 2011 Work and Financial Plans as well as the 2012 Operational Plans. Department Personnel 2011-2162 dated 28 April 2011 created the System Development Team for the ETS software enhancement. Management of the ETS development and implementation was officially transferred to the Finance Service through a memorandum dated 22 July 2011.



PERFORMANCE GOVERNANCE SYSTEM (PGS)

In its capacity as the Office for Strategic Management, the HPDPB institutionalized the PGS. The PGS is a tool to enhance institutional performance in achieving health goals in the context of UHC and social development. This tool contributed significantly to the development of the DOH Central Office Scorecard.



LGU SCORECARD

One of the major accomplishments of the Bureau of Local Health Development was the integration of the LGU Scorecard on Health designed by the DOH with the Local Governance Performance Management System of DILG. Collection of data for the 2010 LGU Scorecard was done in 2011.



SECRETARY ONA, VICE PRESIDENT OF THE WORLD HEALTH ASSEMBLY

The 64th World Health Assembly (WHA) held in Geneva, Switzerland from 16-24 May 2011 gave due recognition to the Philippines when it elected the Philippine Health Secretary as its Vice President (VP). As VP of the Assembly, Secretary Ona was tasked with leading the discussions among member states on clinical and scientific aspects of the global efforts against non-communicable diseases. The WHA concluded with the commitment of all member states to scale up interventions and strengthen cooperation in fighting non-communicable diseases.



SUPPORT FOR COA AS EXTERNAL AUDITOR OF WHO

During the 64th World Health Assembly, the Philippine Commission on Audit (COA) was selected to serve as external auditor of WHO for a period of three years. The DOH and the Department of Foreign Affairs liaised with other member states to support the country's bid, besting those of other auditing institutions from Spain, Germany, France, and Malaysia. The feat not only won the Philippines international prestige, but also serves as a testament to the government's continuing drive for transparency and good governance.



SENIOR POLICY SEMINAR ON UHC

The DOH in cooperation with the World Bank, WHO, USAID, the European Union, and other development partners gathered all major stakeholders in the health sector, such as DepEd and DSWD through the Senior Policy Seminar on Health Care Financing and Universal Health Care to discuss the administration's health agenda and to solicit the commitment of stakeholders to seeing its fruition. At the Seminar, senior officials from the Ministry of Health in Mexico shared their experience in the implementation of Seguro Popular, which is Mexico's national health insurance program similar to PhilHealth.

PPP Initiatives

THE DOH CENTER FOR EXCELLENCE ON PPP FOR HEALTH

The United Nations Economic Council for Europe has designated the Philippines as the site of its International Specialist Center for Public-Private Partnerships in Health in recognition of the Department's experience in exploring partnerships with the private sector to upgrade and modernize the DOH hospitals. In 2011, the DOH established the Center for Excellence on PPPs for Health to oversee 30 PPPs that are scheduled for the coming years. Most of these projects aim to modernize the infrastructure and improve the services of DOH hospitals. The modernization of the Philippine Orthopedic Center and the Vaccine Self-Sufficiency Project¹ are two of the PPP projects in advanced planning stages.

¹ A project of the Research Institute for Tropical Medicine to reduce the cost of vaccines and ensure an adequate supply of locally manufactured quality vaccines.



PARTNERSHIP WITH SM FOUNDATION, INC.

In partnership with the Department, the SM Foundation, Inc. renovated specific wards in the following DOH retained-hospitals:

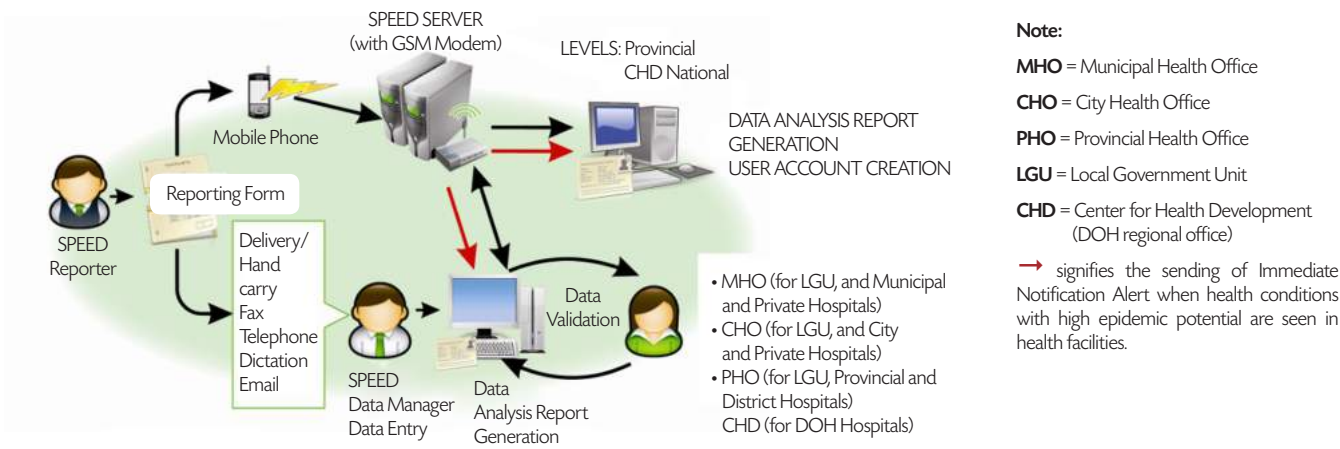
1. Amang Rodriguez Memorial Medical Center, Neonatal Intensive Care Unit (ICU), Pediatric Outpatient Department
2. Dr. Jose Fabella Memorial Hospital, Pediatric Ward
3. San Lazaro Hospital, Pediatric Ward
4. Philippine Orthopedic Hospital, Physical Rehabilitation Center
5. Quirino Memorial Medical Center, Outpatient Department
6. Rizal Medical Center, Outpatient Department
7. East Avenue Medical Center, Neonatal ICU, Pediatric Outpatient Department
8. Philippine Children's Medical Center, ICU Complex
9. Baguio General Hospital, Pediatric Outpatient Department
10. Bicol Medical Center, Outpatient Department/Under 5 Clinic
11. Dr. Jose B. Lingad Medical Center, Outpatient Department
12. Western Visayas Medical Center, Pediatric Ward

SURVEILLANCE IN POST EXTREME EMERGENCIES AND DISASTERS (SPEED)

SPEED finds legal basis in Republic Act (RA) 10121: The Philippine Disaster Risk Reduction and Management Act and Administrative Order 2004-168: The National Policy on Health Emergency in Disasters. SPEED is an early warning surveillance system that monitors health conditions (both communicable and

non-communicable), injuries, and health trends using web-based software. It is a powerful tool for health managers to get vital information for appropriate and timely response during emergencies and disasters. It likewise enriches the DOH's Health Emergency Management Preparedness, Management, and Response.

HOW SPEED WORKS



TELEHEALTH

The National TeleHealth Service Program (TeleHealth) has the full support of Secretary Ona who approved its expansion on 7 February 2011. It has two components: Telemedicine and Regular Routine Reporting (RRR).

Telemedicine addresses the problems of inaccessibility to health care in many geographically isolated and disadvantaged communities in the Philippines, compounded by the absence of health care professionals and infrastructure. The Program builds on the experience of the University of the Philippines National Telehealth Center which operates a teleconsultation system for over a hundred primary care physicians posted in rural remote communities from as far north as Batanes, to Tawi-Tawi province in the south of the Philippines.



RRR is a reporting system – using mobile phones – of selected routinely delivered health services provided by RHU midwives or nurses, as well as other sentinel indicators for monitoring KP. Data is transformed into reports for use by various stakeholders at the different levels of the health care system, from RHUs to the Central Office.

UHC SLOGAN AND LOGO CAMPAIGN

Lorna Ballesteros, a retired human resources practitioner of a private company who now works as a volunteer court mediator in Paranaque City, received a cash award as the winner of the DOH UHC slogan and logo contest. Like an umbrella, UHC or Kalusugan Pangkalahatan provides complete and caring protection. Stylized figures are rendered in the colors



of the Philippine flag to denote that all Filipinos have access to this coverage.

UPGRADING PHILHEALTH IT CAPABILITIES

A total of PhP350M was allotted to upgrade PhilHealth IT tools to enable efficient operations and faster performance and shorter waiting times for PhilHealth transactions such as enrollment, claims processing, and reimbursement.

UPDATED HEALTH RESEARCH AGENDA FOR 2012 – 2016

The HPDPB conducted a series of consultations with the program managers, health partners, and other stakeholders to develop the DOH Updated Health Research Agenda for 2012-2016. The identified research priorities were aligned with the three UHC strategic thrusts. The list of priorities was presented

during the 12th National Health Research Forum on 14-15 November 2011 at Pan Pacific Hotel, Manila to further discuss and analyze research topics requiring urgent attention and to identify funding agencies that could support and implement research studies.

APPROVED RESEARCH PRIORITIES, 2012-2014

Research Priorities	2012 #Topics	EBR	2013 #Topics	EBR	2014 #Topics	EBR
Financial Risk Protection	7	12m	4	8m	1	2m
Attaining Health-Related MDGs	8	20.5m	7	14m	3	7m
Health Facilities Enhancement	3	5m	2	2.5m	-	-
Total estimated cost	18	37m	13	24.5m	4	9m

Estimated budgetary requirement (EBR) is the total estimated cost for research priorities in million pesos.

EVALUATION OF PROFESSIONAL FEES

A study on physicians' professional fees is currently being done to assist PhilHealth as it develops guidelines for doctors' fees in connection with the Case Rates Scheme. The DOH believes in providing a reference value for reasonable professional fees which will both protect against exorbitant fees and give value to the expertise and skill of physicians.

HEALTH POLICIES

Approved DOH Policies

DEPARTMENT ORDERS ON KALUSUGAN PANGKALAHATAN

In 2011, two DOH DOs were issued pertinent to KP. DO 2011-0188 presented the KP execution plan and implementation arrangements in order to accelerate the accomplishment of specific performance targets. It also streamlined the tasks and functions of central office units to provide critical support and assistance to field units. DO 2011-3606 designated the undersecretaries and assistant secretaries to the area and technical clusters of KP.

STREAMLINING DOH LICENSING AND PHILHEALTH ACCREDITATION PROCESSES

DOH AO No. 2011 – 0020 dated 23 December 2011 was issued to streamline licensure and accreditation processes of the DOH and PhilHealth for all government and private hospitals. The AO is expected to improve access to quality health facilities with both organizations making more efficient use of their respective resources towards better quality of care.

National Health Legislation

RA 10152 ON MANDATORY BASIC IMMUNIZATION SERVICES

The HPDPB facilitated the enactment into law of RA 10152: An Act Providing for Mandatory Basic Immunization Services for Infants and Children, Repealing for the Purpose Presidential Decree No. 996, as Amended. The law provides for free and mandatory immunization to all infants and children for vaccine preventable diseases such as tuberculosis, diphtheria, tetanus and pertussis, poliomyelitis, measles, mumps, rubella or German measles, Hepatitis B, and H. Influenza type B.

PHILHEALTH LAW AMENDMENT

Bills were filed in Congress seeking to amend the NHIP Law to make it more responsive to UHC policy directions. In particular, these bills seek to ensure that the National Government shall provide premiums for the identified poor while the Local Government shall ensure counterpart enrollment of the informal sector in NHIP.

ADVOCACY FOR RESPONSIBLE PARENTHOOD AND RH BILL

The Reproductive Health (RH) Bill has been one of the most divisive issues facing the country. President Benigno Aquino III has made it the administration’s priority legislation but the Church has been vigilant in opposing its passage. The Department has persistently lobbied and raised public awareness through advocacies and information campaigns, most of these done during the plenary debates at both houses of Congress in 2011.

Local Health Legislation

ADOPTION OF ANTI-SMOKING ORDINANCES

The HPDPB - Bloomberg Project empowered 97 LGUs in 12 provinces to pass and implement smoke-free ordinances and assisted 56 LGUs in the legislative deliberation of smoke-free ordinances in their localities. The project trained enforcers on the effective implementation of these ordinances in 161 LGUs. Five research studies were also conducted on tobacco control which included two national surveys, two provincial surveys in Nueva Vizcaya, and an economic benefit study on smoke-free policies. In terms of communicating the health risks of smoking, the project was able to adopt the international campaign “Cigarettes Are Eating You Alive” and translate it into six local dialects which were aired on television and radio stations in nine provinces.

List of Approved DOH Administrative Orders in 2011

No.	Subject	Date
2011-0001	Guidelines for the Implementation of the Project RNheals	2/1/2011
2011-0002	Guidelines for Managing Rabies Exposures Secondary to Bites by Vaccinated Dogs and Cats	2/2/2011
2006-0034-B	Further Amendment to Administrative Order 2006-0034 “Delegation of Authority for Certain Transactions in the Offices under the Department of Health” dated October 10, 2006	2/4/2011
2010-0022-B	Suspension of Administrative Order 2010-0022, otherwise known as the Policies in the Conduct of Psychological Examinations for Overseas Work Applicants and Bureau of Health Facilities and Services Circular 1.s. 2010	2/15/2011
2011-0007	Implementing Rules and Regulations of RA 9421 Otherwise Known as “An Act Upgrading the Valenzuela General Hospital in the City of Valenzuela, Metro Manila into a 200-Bed Capacity Tertiary Level Hospital to be Known as the Valenzuela Medical Center”	3/10/2011
2010-0017-A	Amendment to Administrative Order 2010-0017 dated June 18, 2010 regarding Guidelines in Surveillance and Response to Adverse Events Following Immunization	3/17/2011
2006-0034-C	Amendment to Administrative Orders 2006-0034 and 2006-0034-A, “Delegation of Authorities for Certain Transactions in the Offices under the Department of Health” dated October 10, 2006 and December 7, 2009 Respectively	4/4/2011
2011-0003	National Policy on Strengthening the Prevention and Control of Chronic Lifestyle Related Non-Communicable Diseases	4/14/2011
2011-0004	Guidelines for the Distribution and Monitoring of Morphine Sulfate Procured by the Department of Health	4/25/2011
2011-0005	Guidelines on Ensuring Quality Standards in the Delivery of Family Planning Program and Services through Compliance to Informed Choice and Voluntarism	6/23/2011
2011-0006	Framework on Health Sector Response to Terrorism	7/6/2011
2011-0008	Guidelines on Urban Health Systems Development	7/12/2011
2011-0009	National Policy and Program on Pharmacovigilance	7/12/2011
2011-0010	Implementing Procedures and Guidelines in Reporting Field Health Services Data to the DOH Central Office	7/20/2011
2011-0011	Establishment of Basic Emergency Obstetric and Newborn Care (BEmONC) Training Centers in Regional Hospitals and Medical Centers	7/25/2011
2008-0008-A	Amendment to Administrative Order 2008-0008 on the Rules and Regulations Governing the Regulation of Blood Service Facilities dated May 2, 2008	8/22/2011
2011-0012	Implementing Guidelines on Electronic Drug Price Monitoring System version 2.0	9/6/2011
2011-0013	Implementing Guidelines on the DOH Complete Treatment Packs to Ensure Sustainable Access to Essential Drugs and Medicines for the Marginalized Sectors	9/12/2011
2011-0014	Guidelines on the Certification of Health Facilities with BEmONC Capacity	9/15/2011
2011-0015	Guidelines on the Prohibition of Referral /Decking Practice of Overseas Filipino Workers (OFW) Clinics and Respecting the Right of OFWs to Choose Their Own OFW Clinic for Medical Examination, Pursuant to RA 10022	10/4/2011
2011-0016	Guidelines on the National Preparedness and Response to Wild Poliovirus	10/4/2011
2011 – 0020	Streamlining DOH Licensing and Phil-Health Accreditation Processes	12/23/2011

List of 2011 HEAL/Priority Bills

1. UNIVERSAL HEALTH CARE

Senate Bill 2849
An Act Amending Republic Act No. 7875, Otherwise Known as the National Health Insurance Act Of 1995, as Amended, and for Other Purposes under Committee Report No. 40 Recommended for Approval by the Committee on Health and Demography, Finance, Local Government; Labor and Employment and Human Resources Development; Youth and Family Relations; and Banks, Financial Institution and Currencies

House Bill 6048
An Act Amending Republic Act No. 7875, Otherwise Known as the National Health Insurance Act Of 1995, as Amended, and for Other Purposes under Committee Report No. 40 Recommended for Approval by the Committee on Health and Demography, Finance, Local Government; Labor and Employment and Human Resources Development; Youth and Family Relations; and Banks, Financial Institution and Currencies

2. REPRODUCTIVE HEALTH CARE

Senate Bill 2865
An Act Providing for a National Policy on Reproductive Health and Population and Development under Committee Report No. 49, Consolidated bills of Senate Bill 2378 and 2768, Taking into Consideration PSR 238 approved by the Committee on Health and Demography

House Bill 4244
(Substituting House Bill Nos. 96, 101, 513, 1160, 1520, and 3387) - An Act Providing for a Comprehensive Policy on Responsible Parenthood, Reproductive Health, and Population and Development, and for Other Purposes

3. SIN TAX BILL

House Bill 5727
An Act Restructuring the Excise tax on Alcohol and Tobacco Products

4. IMPROVED MANAGEMENT SYSTEMS IN HUMAN RESOURCES FOR HEALTH

5. AMENDMENT OF THE MEDICAL ACT OF 1959

Senate Bill 2669
An Act Regulating The Education and Licensure of Physicians and the Practice of Medicine in the Philippines, Repealing for the Purpose Republic Act No. 2382, as Amended, and for Other Purposes

House Bill 100
An Act Regulating the Education and Licensure of Physicians and the Practice of Medicine in the Philippines, Repealing for the Purpose RA 2382, as Amended, and for Other Purposes

6. REGULATION ON THE DONATION AND TRANSPLANTATION OF HUMAN ORGANS AND TISSUES FROM LIVING AND DECEASED DONORS

7. MIDWIFERY ACT

8. STRENGTHENING OF THE PHILIPPINE COMPREHENSIVE POLICY ON THE PREVENTION AND CONTROL OF AIDS

House Bill 4129
Strengthening Further the Philippine Comprehensive Policy on the Prevention and Control of AIDS, Amending for the Purpose RA 8504, Otherwise Known as the Philippine AIDS Prevention and Control Act of 1998

9. ESTABLISHMENT OF A PHILIPPINE CENTER FOR SPECIALIZED HEALTH CARE

10. INCOME RETENTION OF NATIONAL GOVERNMENT HOSPITALS

House Bill 3002
An Act Authorizing Government Hospitals under the Department of Health to Retain and Utilize All Their Income and Interest Derived from Deposits, for Maintenance and Other Operating Expenses, Capital Outlays, and for Other Purposes

BUDGET

2011 BUDGET OF DOH, SPECIALTY HOSPITALS, AND ATTACHED CORPORATIONS

DOH, the Population Commission and the National Nutrition Council received 97.6 percent of the total budget for health that amounted to PhP33,224,804,000 in 2011.

The Specialty Hospitals received 2.3 percent, while the Philippine Institute for Traditional and Alternative Health Care, an attached corporation, received 0.1 percent of the budget.

KP 2011 BUDGET BY PRIORITY PROGRAM, PROJECTS, AND ACTIVITIES

Of the total budget of PhP16,781,203,000 allocated for KP implementation, majority or 43.2 percent of the budget accounted for improving access to quality health services; 36 percent went to priority health programs including achieving health-related MDGs 4,5, and 6; while 20.8 percent was spent to support financial risk protection.

DOH Budget, 2011

Particulars	Amount (in '000 Pesos)
Department of Health	
DOH-Proper	31,828,616
Commission on Population	290,660
National Nutrition Council	308,168
Sub-Total	32,427,444
Specialty Hospitals	
Lung Center of the Philippines	157,560
National Kidney and Transplant Institute	162,800
Philippine Children's and Medical Center	318,000
Philippine Heart Center	122,000
Sub-Total	760,360
Attached Corporations	
Philippine Health Insurance Corporation	-
Philippine Institute for Traditional and Alternative Health Care	37,000
Local Water Utilities Administration	-
Sub-Total	37,000
Grand Total	33,224,804

FINANCIAL RISK PROTECTION

PhP 3.5 B

Subsidy of health insurance premium of indigents

PRIORITY HEALTH PROGRAMS INCLUDING THOSE SUPPORTING HEALTH-RELATED MDGs

PhP 6 B

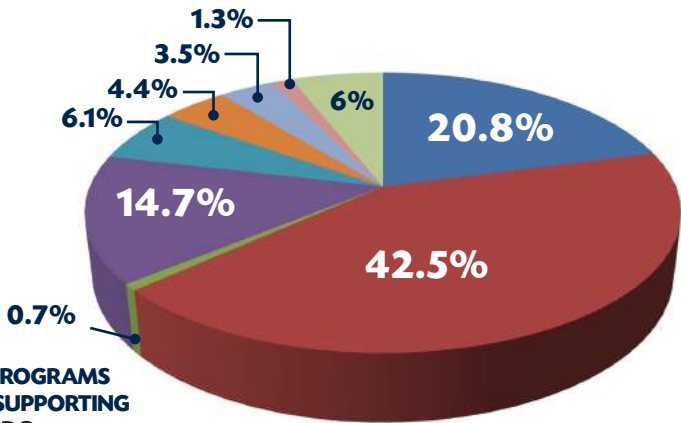
EPI
TB Control
Other infectious diseases and emerging and re-emerging diseases

National pharmaceutical policy development including provision of drugs
Family Health and Responsible Parenting
Elimination of diseases as public health threat

IMPROVING ACCESS TO QUALITY HEALTH SERVICES

PhP 7.2 B

HfEP
DTTB and RHPP





Republic of the Philippines
Department of Health