

QUARTERLY PHYSICAL REPORT OF OPERATION
For the Fourth Quarter Ending December 31, 2021
 (Revised Consolidated Data)

Department: Department of Health
 Agency: Central Office
 Operating Unit: Office of the Secretary
 Organization Code (UACS): 130010300013

Program Expenditure Classification (PrExC)	UACS Code	PHYSICAL TARGETS					PHYSICAL ACCOMPLISHMENT					TOTAL	Variance	REMARKS
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL			
1	2	3	4	5	6	7	8	9	10	11	12 = 8+9+10+11	13 = 12 - 7	14	
PART A														
OO1: Access to Promotive and Preventive Health Care Services Improved														
HEALTH POLICY AND STANDARDS DEVELOPMENT PROGRAM														
<i>Outcome Indicators</i>														
1. Performance Governance Strategic Readiness Score					3	3				4	4	1	Result released on March 8, 2022 Basic Governance Document - 4 Cascading Framework - 4 PGS Core Team - 4 Office of Strategy Management - 5 Strategic Performance Assessment - 5 Multi-sector Governance Council - 3 Governance Culture - 4 Governance Sharing - 3 Breakthrough Results - 4	
<i>Output Indicators</i>														
2. Percent of policies issued based on the policy agenda list		20%	50%	75%	100%	100%	17%	33%	33%	100%	100%	0%		
3. Percent of research/ policy briefs rated as useful or adoptable		85%	85%	85%	85%	85%	78%	83%	94%	100%	89%	4%	Average of Q1 - Q4 accomplishments	
4. Number of briefs based on researches (including but not limited to DOH funded researches) developed and disseminated (e.g. research, policy, etc)		1	1	1	1	4	1	1	1	1	4	0	As of Q2 2021, GAA target of 16 was updated to 4 following the latest approved BED2 (January 2021); decrease in target was based on the revised work plan of the Health Research Division	
HEALTH SYSTEMS STRENGTHENING PROGRAM														
<i>Outcome Indicators</i>														
5. HRH to Population Ratio					17 HRH : 10,000	17 HRH : 10,000				17 HRH : 10,000	17 HRH : 10,000	0		
<i>Output Indicators</i>														
6. Percent of partners provided with technical assistance on local health systems development		100%	100%	100%	100%	100%	98%	100%	100.00%	100%	99.4%	-0.6%	CHD Mimaropa has achieved only 92.6% (289/312).	

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		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter				
1	2	3	4	5	6	7	8	9	10	11	12 = 8+9+10+11	13 = 12 - 7	14	
7. Percent of priority areas supplemented with HRH from DOH Deployment Program		100%	100%	100%	100%	100%		100%		100%	100%	0%		
PUBLIC HEALTH PROGRAM														
<i>Outcome Indicators</i>														
8. Percent of public health facilities with no stock-outs					≥70%	≥70%				41%	41%	-29%		
9. Percent of external clients who rate the technical assistance provided as satisfactory or better					100%	100%				100%	100%	0%		
10. Percent of fully immunized children					95%	95%				46.2%	46%	-49%	Ongoing collection and consolidation of Q4 report. Reported accomplishment from January to December 2021 partial data as of 28Feb2022 Reason: Unequal prioritization between COVID19 vaccination and NIP, sharing of logistics and HRH both for vaccination programs.	
11. Modern contraceptive prevalence rate					29%	29%				26.6%	27%	-2%	Ongoing finalization of report, Family Planning Estimation Tool requires a whole-year report from FHSIS in order to establish projections based on the latest release (June 2021)	
12. Number of malaria-free provinces					72	72				62	62	-10	Target from the National Strategic Plan was not met due to the pandemic. LGUs/Provinces were not able to prepare the supporting documents due to COVID pandemic.	
13. Number of filariasis-free provinces					46	46				44	44	-2	Unavailability of Filariasis Test Strips in 2021 which is the schedule for Zamboanga del Norte Transmission Assessment Survey 1.	
14. Number of rabies-free zones (provinces)					10	10				8	8	-2	Latest accomplishment: Total 81 zones and areas. Due to mobility restrictions in 2021 brought about by the pandemic, no province has been evaluated for rabies free status. As reported by Western Visayas and CARAGA CHDs, the following were jointly declared by Regional DA & DOH as rabies free areas in 2021: Bislig City, Surigao del Sur; Mararison Island in the Municipality of Culasi, Antique DOH MC 2020-0007 date January 20, 2020 amended the definitions as follows: (1) rabies-free zone - province, (2) rabies-free area - cities, municipalities, and islands. Declaration of rabies free zone shall be through the national agencies (DOH and DA) while declaration of rabies-free area shall be through the Regional Offices	

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		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter				
1	2	3	4	5	6	7	8	9	10	11	12 = 8+9+10+11	13 = 12 - 7	14	
15. Percentage of ART eligible PLHIV on ART					90%	90%				42.0%	42%	-48%	Among those diagnosed PLHIV, only 69,810 were enrolled on ART due to the following reasons: - delay in the release of confirmatory result thus delaying treatment initiation; - PLHIV preparedness to start a lifelong treatment; - delay in complying with laboratory services prescribed prior to treatment initiation; - PLHIV's decision not to start treatment; - opportunistic infections need to be managed and treated first before ART initiation; - fear of stigma and discrimination, among others. There were also 13,425 that were previously on ART but were lost to follow up.	
16. Treatment success rate for all forms of TB					≥90%	≥90%				91.0%	91%	1%		
Output Indicators														
17. Percent of LGUs and other health partners provided with technical assistance on public health programs		100%	100%	100%	100%	100%	75%	93%	99%	100%	100%	0%		
18. Percent of received health commodities from the Central Office distributed to health facilities based on the allocation list		80%	80%	80%	80%	80%	83%	72%	93%	97%	89%	9%		
19. Percent of Centers for Health Development (CHDs) with no stock-outs of centrally procured major health commodities for Integrated Comprehensive Essential Service Delivery Package (ICESDP) as identified by the Programs					85%	85%	100%	100%	100%	94%	99%	14%		
EPIDEMIOLOGY AND SURVEILLANCE PROGRAM														
Outcome Indicators														
20. Percent of epidemiological and public health surveillance strategic report disseminated					90%	90%				100%	100%	10%		
Output Indicators														
21. Percent of outbreak/epidemiologic investigations conducted		75%	75%	75%	75%	75%	100%	100%	100%	100%	100%	25%		
HEALTH EMERGENCY MANAGEMENT PROGRAM														
Outcome Indicators														

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		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter				
1	2	3	4	5	6	7	8	9	10	11	12 = 8+9+10+11	13 = 12 - 7	14	
22. Percent of LGUs with institutionalized Disaster Risk Reduction Management for Health (DRRM-H) Systems					40%	40%				45%	45%	5%		
Output Indicators														
23. Percent of LGUs provided with technical assistance on the development or updating of Disaster Risk Reduction Management-Health (DRRM-H)		10%	30%	90%	100%	100%	31%	58%	84%	116.78%	117%	17%		
OO2: Access to Curative and Rehabilitative Health Care Services Improved														
HEALTH FACILITIES OPERATION PROGRAM														
Outcome Indicators														
24. Hospital infection rate					<1 %	<1 %				0.82%	0.82%	0.18%		
25. Percent of drug dependents who completed the treatment program					86%	86%				89%	89%	3%		
Output Indicators														
26. Number of policies, manuals and plans developed on health facility development						10	9	4	11	15	39	29		
27. Percent of National External Quality Assurance Scheme (NEQAS) provided to Health Facilities by the National Reference Laboratories (NRLs)						20%	-	-	-	100%	100%	80%	For the fiscal year 2021 ending in December 31, 2021, the 80% variance in the accomplishment of the PREXC indicator reflects mainly to the following: 1) Diagnostic capacity of molecular laboratories to test SARS-CoV-2 virus in the country; 2) Consideration of the declining surge of COVID-19 positive cases; 3) Increase in number of vaccinated individuals; and 4) Gradual revert to the normal operations of the National Reference Laboratories	
28. Number of blood units collected by Blood Service Facilities		16,983	25,474	25,474	16,983	83,546	12,160	25,474	28,474	18,983	85,091	1,545		

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		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter				
1	2	3	4	5	6	7	8	9	10	11	12 = 8+9+10+11	13 = 12 - 7	14	
29. Number of inpatient and outpatient drug abuse cases managed		6,130	6,000	6,000	6,127	24,257	14,412	47,650	14,445	37,778	114,285	90,028	The increase in the 2021 accomplishments of DATRCs reflect the following: a. Increase demand for outpatient services for Persons Who Use Drugs (PWUDs) b. Conduct of community-based outpatient treatments services c. Provision of virtual treatment sessions	
OO3: Access to Safe and Quality Health Commodities, Devices, and Facilities Ensured														
HEALTH REGULATORY PROGRAM														
<i>Outcome Indicators</i>														
30. Percent of health establishments and products compliant to regulatory policies					75%	75%				84%	84%	9%		
31. % of PHEIC and/or PHR rapidly responded at point of entry					100%	100%				100%	100%	0%		
<i>Output Indicators</i>														
32. Percent of applications for permits, licenses, or accreditation processed within the citizen charter timeline		85% (FDA)	85% (FDA)	85% (FDA)	85% (FDA)	85% (FDA)	91% (FDA)	91.30% (FDA)	95.09% (FDA)	91.44% (FDA)	92.64% (FDA)	7.5 (FDA)		
		90% (DOH-OSEC)	90% (DOH-OSEC)	90% (DOH-OSEC)	90% (DOH-OSEC)	90% (DOH-OSEC)	100% (DOH-OSEC)	99.7% (DOH-OSEC)	99.3% (DOH-OSEC)	99.9% (DOH-OSEC)	99.6% (DOH-OSEC)	9.6% (DOH-OSEC)		
33. Percent of licensed health facilities and services monitored and evaluated for continuous compliance to regulatory policies						96%	34%	65%	101%	118%	118%	22%		
34. Percent of establishments and health products monitored and evaluated for continuous compliance to regulatory policies		15%	30%	50%	65%	65%	14%	26%	52%	68%	68%	3%		
OO4: Access to Social Health Protection Assured														

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		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	TOTAL	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter			
1	2	3	4	5	6	7	8	9	10	11	12 = 8+9+10+11	13 = 12 - 7	14
SOCIAL HEALTH PROTECTION PROGRAM													
Outcome Indicators													
35. Percent of excess net bill covered by MAP incurred by poor in-patients admitted in basic accommodation or service ward					100%	100%				73%	73%	-27%	4 DOH Hospitals and 2 CHDs have yet to submit their complete 2021 PREXC Reports.
Output Indicators													
36. Number of patients provided with medical assistance		375,000	750,000	1,125,000	1,800,000	1,800,000	329,957	382,949	417,455	587,469	1,717,830	-82,170	Number of patients served from first to fourth quarter is low due to the late submission of reports as some offices are affected by the COVID19 pandemic. For the 4th Quarter, 3 DOH Hospitals and 3 CHDs have yet to submit their complete FUR. The 5% (82,170) variance from target is attributed to the increasing bill per patient. Hence, the Program catered less patients but utilized more funds.

Prepared By:



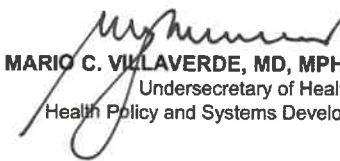
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**QUARTERLY PHYSICAL REPORT OF OPERATION
As of December 31, 2021**

Agency : Department of Health (DOH)
Central Office

Organization Code (UACS) : 1300100100000

Particulars	UACS CODE	Physical Target (Budget Year)					Physical Accomplishment (Budget Year)					Variance	Remarks
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14
HEALTH POLICY AND STANDARDS DEVELOPMENT PROGRAM	310100000000000												
OO : Access to promotive and preventive health care services improved													
Outcome Indicator													
1. Performance Governance Strategic Readiness Score		N/A	N/A	N/A	3	3				4	4	1	Result released on March 8, 2022
Output Indicators													
1. Percent (& Number) of policy agenda items with issued policies that underwent the consultative participatory process		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
2. Percent of policies issued based on the policy agenda list		20%	50%	75%	100%	100%	17%	33%	33%	100%	100%	0%	
3. Percent (& Number) of research/policy briefs rated as useful or adoptable		85%	85%	85%	85%	85%	78%	83%	94%	100%	89%	4%	Average of Q1 - Q4 accomplishments
4. Number of research/policy briefs completed and disseminated		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
5. Number of briefs based on researches (including but not limited to DOH funded researches) developed and disseminated (e.g. research, policy, etc.)		1	1	1	1	4	1	1	1	1	4	0	As of Q2 2021, GAA target of 16 was updated to 4 following the latest approved BED2 (January 2021); decrease in target was based on the revised work plan of the Health Research Division
HEALTH SYSTEMS STRENGTHENING PROGRAM	310200000000000												
OO : Access to promotive and preventive health care services improved													
Outcome Indicator													

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		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. Human Resource for Health (HRH) to Population Ratio		N/A	N/A	N/A	17 HRH: 10,000 population	17 HRH: 10,000 population				17 HRH : 10,000 population	17 HRH : 10,000 population	0	To be reported in the 4th quarter submission
Output Indicators													
1. Percent of LGUs provided with technical assistance on local health systems development		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
2. Percent of partners provided with technical assistance on local health systems development		100%	100%	100%	100%	100%	98%	100%	100%	100%	99.4%	0.6%	CHD Mimaropa has achieved only 92.6% (289/312)
3. Percent (& Number) of priority areas supplemented with HRH from DOH Deployment Program		100%	100%	100%	100%	100%		100%			100%	0%	
PUBLIC HEALTH PROGRAM	3103000000000000												
OO : Access to promotive and preventive health care services improved													
Outcome Indicators													
1. Percent (& Number) of public health facilities with no stock-outs		N/A	N/A	N/A	More than or equal to 70%	More than or equal to 70%				41%	41%	-29%	Justification to follow
2. Percent (& Number) of external clients who rate the technical assistance provided as satisfactory or better		N/A	N/A	N/A	100%	100%				100%	100%	0%	
3. Percent of fully immunized children		N/A	N/A	N/A	95%	95%				46.2%	46%	-49%	Unequal prioritization between COVID19 vaccination and NIP, sharing of logistics and HRH both for vaccination programs
4. Modern contraceptive prevalence rate		N/A	N/A	N/A	29%	29%				26.6%	27%	-2%	Ongoing finalization of report. Family Planning Estimation Tool requires a whole-year report from FHSIS in order to establish projections based on the latest release (June 2021)

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1	2	3	4	5	6	7	8	9	10	11	12	13	14
5. Number of malaria-free provinces		N/A	N/A	N/A	72	72				62	62	-10	Target from the National Strategic Plan was not met due to the pandemic. LGUs/Provinces were not able to prepare the supporting documents due to COVID pandemic.
6. Number of filariasis-free provinces		N/A	N/A	N/A	46	46				44	44	-2	Unavailability of Filariasis Test Strips in 2021 which is the schedule for Zamboanga del Norte Transmission Assessment Survey 1.
7. Number of rabies-free areas		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
8. Number of rabies-free zones (provinces)		N/A	N/A	N/A	10	10				8	8	2	Latest accomplishment: Total 81 zones and areas. Due to mobility restrictions in 2021 brought about by the pandemic, no province has been evaluated for rabies free status. As reported by Western Visayas and CARAGA CHDs, the following were jointly declared by Regional DA & DOH as rabies free areas in 2021: Bislig City, Surigao del Sur; Mararison Island in the Municipality of Culasi, Antique
9. Percent of Anti-Retroviral Treatment (ART) eligible people living with HIV on ART		N/A	N/A	N/A	90%	90%				42%	42%	-48%	Among those diagnosed PLHIV, only 69,810 were enrolled on ART due to the following reasons: - delay in the release of confirmatory result thus delaying treatment initiation; - PLHIV preparedness to start a lifelong treatment; - delay in complying with laboratory services prescribed prior to treatment initiation; - PLHIV's decision not to start treatment; - opportunistic infections need to be managed and treated first before ART initiation; - fear of stigma and discrimination, among others. There were also 13,425 that were previously on ART but were lost to follow up.

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1	2	3	4	5	6	7	8	9	10	11	12	13	14
10. Treatment success rate for all forms of Tuberculosis		N/A	N/A	N/A	More than or equal to 90%	More than or equal to 90%				91%	91%	1%	
11. Premature mortality rate attributed to cardiovascular disease, cancer, diabetes, and chronic respiratory diseases		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
Output Indicators													
1. Percent (& Number) of LGUs and other health partners provided with technical assistance on public health programs		100%	100%	100%	100%	100%	75%	93%	99%	100%	100%	0%	
2. Average percentage of LGUs provided with at least 80% of commodities		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
3. Percent of received health commodities from the Central Office distributed to health facilities based on the allocation list		80%	80%	80%	80%	80%	83%	72%	93%	97%	89%	9%	
4. Percent of Centers for Health Development (CHDs) with no stock-outs of centrally procured major health commodities for Integrated Comprehensive Essential Service Delivery Package (ICESDP) as identified by the Programs					85%	85%	100%	100%	100%	94%	99%	14%	
EPIDEMIOLOGY AND SURVEILLANCE PROGRAM	3104000000000000												
OO : Access to promotive and preventive health care services improved													
Outcome Indicators													
1. Percent (& Number) of epidemiological and public health surveillance strategic report utilized		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
2. Percent (& Number) of epidemiological and public health surveillance strategic report disseminated		N/A	N/A	N/A	90%	90%				100%	100%	10%	

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1	2	3	4	5	6	7	8	9	10	11	12	13	14
Output Indicator													
1. Percent (& Number) of outbreak/epidemiologic investigations conducted		75%	75%	75%	75%	75%	100%	100%	100%	100%	100%	25%	
HEALTH EMERGENCY MANAGEMENT PROGRAM	3105000000000000												
OO : Access to promotive and preventive health care services improved													
Outcome Indicator													
1. Percent (& Number) of LGUs with institutionalized Disaster Risk Reduction Management for Health (DRRM-H) Systems		N/A	N/A	N/A	40%	40%				45%	45%	5%	
Output Indicators													
1. Percent (& Number) of LGUs provided with technical assistance on the development or updating of DRRM-H Plans		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
2. Percent (& Number) of LGUs provided with technical assistance on the development or updating of DRRM-H		10%	30%	90%	100%	100%	31%	58%	84%	116.78%	117%	17%	
HEALTH FACILITIES OPERATION PROGRAM	3201000000000000												
OO : Access to curative and rehabilitative health care services improved													
Outcome Indicators													
1. Hospital infection rate		N/A	N/A	N/A	< 1%	< 1%				0.82%	0.82%	0.18%	
2. Percent (& Number) of drug dependents who completed the treatment program		N/A	N/A	N/A	86%	86%				89%	89%	3%	
Output Indicators													

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1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. Number of policies, manuals, and plans developed on health facility development					10	10	9	4	11	15	39	29	Majority of the policies, plans, and standards issued in Q3 are based on the need to respond for the surge in the cases of COVID-19 and delivered/accomplished the targets intended for Q4.
2. Percent (& Number) of samples tested at National Reference Laboratories (NRLs)		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
3. Percent of National External Quality Assurance Scheme (NEQAS) provided to Health Facility by the NRLs					20%	20%				100%	100%	80%	For the fiscal year 2021 ending in December 31, 2021, the 80% variance in the accomplishment of the PREXC indicator reflects mainly to the following: 1) Diagnostic capacity of molecular laboratories to test SARS-CoV-2 virus in the country; 2) Consideration of the declining surge of COVID-19 positive cases; 3) Increase in number of vaccinated individuals; and 4) Gradual revert to the normal operations of the National Reference Laboratories
4. Number of blood units collected by Blood Service Facilities		16,983	25,474	25,474	16,983	84,914	12,160	25,474	28,474	18,983	85,091	1,545	
5. Number of in-patient and out-patient drug abuse cases managed		6,130	6,000	6,000	6,127	24,257	14,412	47,650	14,445	37,778	114,285	90,028	The increase in the 2021 accomplishments of DATRCs reflect the following: a. Increase demand for outpatient services for Persons Who Use Drugs (PWUDs) b. Conduct of community-based outpatient treatments services c. Provision of virtual treatment sessions
HEALTH REGULATORY PROGRAM	3301000000000000												
OO : Access to safe and quality health commodities, devices and facilities													
Outcome Indicators													
1. Percent (& Number) of health facilities and services compliant to regulatory policies		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.

**QUARTERLY PHYSICAL REPORT OF OPERATION
As of December 31, 2021**

Agency : Department of Health (DOH)
Central Office

Organization Code (UACS) : 1300100100000

Particulars	UACS CODE	Physical Target (Budget Year)					Physical Accomplishment (Budget Year)					Variance	Remarks
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14
2. Percent (& Number) of establishments/health products compliant to regulatory policies		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
3. Percent of health establishments and health products compliant to regulatory policies		N/A	N/A	N/A	75%	75%				84%	84%	9%	
4. Percent of Public Health Emergencies of International Concern (PHEIC) and/or Public Health Risks (PHR) rapidly responded at Point of Entry (POE)		N/A	N/A	N/A	100%	100%				100%	100%	0%	
Output Indicators													
1. Percent (& Number) of authorization issued within Citizen's Charter Timeline		N/A	N/A	N/A	N/A	N/A							Indicator not applicable for FY2021.
2. Percent of applications for permits, licenses, or accreditation processed within the Citizen's Charter Timeline		85% (FDA)	85% (FDA)	85% (FDA)	85% (FDA)	85% (FDA)	91% (FDA)	91.30% (FDA)	95.09% (FDA)	91.44% (FDA)	92.64% (FDA)	7.5% (FDA)	
		90% (DOH-OSEC)	90% (DOH-OSEC)	90% (DOH-OSEC)	90% (DOH-OSEC)	90% (DOH-OSEC)	100% (DOH-OSEC)	99.7% (DOH-OSEC)	99.3% (DOH-OSEC)	99.9% (DOH-OSEC)	99.6% (DOH-OSEC)	9.6% (DOH-OSEC)	
3. Percent (& Number) of licensed health facilities and services monitored and evaluated for continuous compliance to regulatory policies					96%	96%	34%	65%	101%	118%	118%	22%	

QUARTERLY PHYSICAL REPORT OF OPERATION
As of December 31, 2021

Agency : Department of Health (DOH)
 Central Office

Organization Code (UACS) : 1300100100000

Particulars	UACS CODE	Physical Target (Budget Year)					Physical Accomplishment (Budget Year)					Variance	Remarks
		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Total		
1	2	3	4	5	6	7	8	9	10	11	12	13	14
4. Percent (& Number) of establishments and health products monitored and evaluated for continuous compliance to regulatory policies		15%	30%	50%	65%	65%	14%	26%	52%	68%	68%	3%	
SOCIAL HEALTH PROTECTION PROGRAM	3401000000000000												
OO : Access to social health protection assured													
Outcome Indicator													
1. Percent of excess net bill covered by Medical Assistance Program (MAP) incurred by poor in-patients admitted in basic accommodation or service ward		N/A	N/A	N/A	100%	100%				73%	73%	-27%	4 DOH Hospitals and 2 CHDs have yet to submit their complete 2021 PREXC Reports.
Output Indicator													
1. Number of patients provided with medical assistance		450,000	900,000	1,350,000	1,800,000	1,800,000	329,957	382,949	417,455	587,469	1,717,830	-82,170	Number of patients served from first to fourth quarter is low due to the late submission of reports as some offices are affected by the COVID19 pandemic. For the 4th Quarter, 3 DOH Hospitals and 3 CHDs have yet to submit their complete FUR. The 5% (82,170) variance from target is attributed to the increasing bill per patient. Hence, the Program catered less patients but utilized more funds.


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