



Ministry of Foreign Affairs

# Health Care in The Philippines

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# Health Care in The Philippines

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Orange  
Health  
Consultants

## Acknowledgements

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This report has been prepared by **Orange Health Consultants (OHC)** an advisory firm based in Rotterdam, The Netherlands, with extensive exposure to the health sector worldwide including in The Philippines, and Professor dr. Herbosa, Executive Vice President, University of The Philippines. The report was prepared in the period January to March 2021 and included interviews with stakeholders, companies and policymakers both in The Philippines and in The Netherlands.

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**Department of Health**

**ADB**

**University of The Philippines**



### Disclaimer

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## Executive Summary

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The health sector in The Philippines continues to change after a decade of increased public spending on health care. The sector, is characterized by a **well developed private health care sector next to the public sector**. The sprawling country of over 7,000 islands has a very **decentralized** system of government which is reflected in the governance and structure of the health care system. The Manila Capital Region (MNC) and Luzon are the economic heart of the country and also contain the largest share of both public and private health care infrastructure.

The relatively **young population of 110 million** is still growing and pays almost as much as the government directly to public and private providers as **out-of-pocket payments** primarily for consultations, diagnostics and lab-tests.

The distribution of health infrastructure as well as human resources is heavily skewed towards MNC and Luzon. This physical imbalance is compounded by unequal financial access to health services.

The **Burden of Disease** tilts increasingly towards Non-Communicable Diseases, such as cardiovascular diseases, Diabetes and Cancers. Respiratory diseases, injuries, accidents and some infectious diseases (Measles, Dengue) are also on the rise.

Early 2019 the **Universal Health Care Bill** was adopted which is considered an important step to address inequalities in health care. For the first time all people will be insured through the national health insurer PhilHealth. However, increasing the depth of the coverage will remain an ambitious target for years to come.

**Reforms** also emphasize strengthening Service Delivery Networks through a.o. gatekeeping through general practitioners and family physicians, increasing compliance with clinical practice guidelines and providing health services closer to people through use of mobile clinics, subsidies to patient transport costs and the use of telemedicine.

## Executive Summary

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The population of the Philippines is relatively **well educated**. This, in combination with a good command of **English**, is both a boon and a curse, as migration brings in huge contributions in remittances but deprives the health sector of much needed health workers and doctors who often work abroad.

The Philippines do have experience with **Public Private Partnerships (PPP)** in health care since 2012. PPPs are coordinated by NEDA (National Economic Development Authority). Health care PPPs are mainly used for investments in dialysis, laboratories and imaging facilities. The use of PPPs is expected to grow in the short to medium term because the **COVID-19 pandemic** puts a strain on public finances.

**E-health** received a boost during the pandemic. However, the reliance on paper-based administration in the public sector will continue to provide a disincentive.

The health sector in The Philippines provides **new business opportunities** for Dutch health care organizations and companies.

**Expertise and experts** will be in demand in The Philippines in the immediate and medium term. Priority topics include:

- **Health financing**: hospital financing and costing (DRG)
- Primary care: organization of GPs and referral networks
- **Planning and design** of renovation of existing infrastructure and new infrastructure are requested.
- Management support for consolidation networks of providers
- Public models for dental health care
- **Mobility and road safety**: e.g. cycling paths (Ongoing project)

### **Medical goods and consumables**

- High value products such as for high-end diagnostics, imaging from the EU and the USA.
- Short-term opportunities are mostly in the **private sector** for diagnostics and imaging.
- National Disaster Risk Reduction and Management Council. There is a need to modernize **Emergency Medical services**

## Executive Summary

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**e-Health** is picking up fast. This creates opportunities in:

- Patient registration and maintenance for patient records
- **Telemedicine**
- Calculation of illness and other risks. Also for complementary health insurance markets
- Stocking, distribution and prescription of medicines
- **E-billing**
- Software systems for hospital, laboratory and pharmacy
- Clinical decision support services

**Medical education** Collaboration and partnerships are identified in particular in:

- Introduction of standards and protocols
- **Partnerships** with established international universities: exchange programs of students and staff and possibly accreditation for specialized care

**Implementation of health reforms** as well as macro-economic progress will be crucial for further market opportunities to arise for Dutch companies active in The Philippines. Indicative fields that are expected to remain or become interesting in the medium to longer term future include:

- Construction and equipping of **new health infrastructure in remote areas.**
- Capacity in emergency and disaster medicine services
- **Population screening programs** (e.g. cancer)
- PPP-construction of full hospitals may become feasible
- **Prevention and treatment** of alcohol and drug abuse will gain further prominence and Dutch health sector is well-known for its expertise in these areas
- Start in Manila but **explore regional focus** with emphasis on:
  - Visayas Region like Cebu City and its Suburbs, Iloilo City and suburbs, Bacoloid City and Suburbs.
  - In Mindanao, Davao City, Cagayan de Oro City, General Santos City and Zamboanga City.

## The Philippines is not only a holiday paradise....some basics

- Current **population** of The Philippines is 110 million people (ranked 13 worldwide)
- **GDP per capita** is USD 3,484 or 8,573 (PPP). Size of GDP (nominal) is USD 367 billion (~40% of economy of the Netherlands). Regionally:
  - Philippines' total GDP comparable to Malaysia's but population is 3.5 x as high
  - GDP is 50 % bigger than Vietnam's with comparable population size; and
  - 30% of GDP of Indonesia but at 40% of its population
- Philippines is considered by World Bank to have medium income inequality (Gini-index 42.3)
- GDP **growth** rate prior Covid-19 was healthy 6% per annum
- The world's largest center for **Business Process Outsourcing** with strong manufacturing electronics base & other high-tech components
- The Philippines is rich in natural resources, such as chromite, nickel, copper, coal & oil
- The Philippines' economy is recipient of one of the largest inflows of **remittances** worldwide valued at ~ 8% of GDP

The Philippines is easily reached by air with ample connections to world's main cities and a multitude of connections via the Middle East.

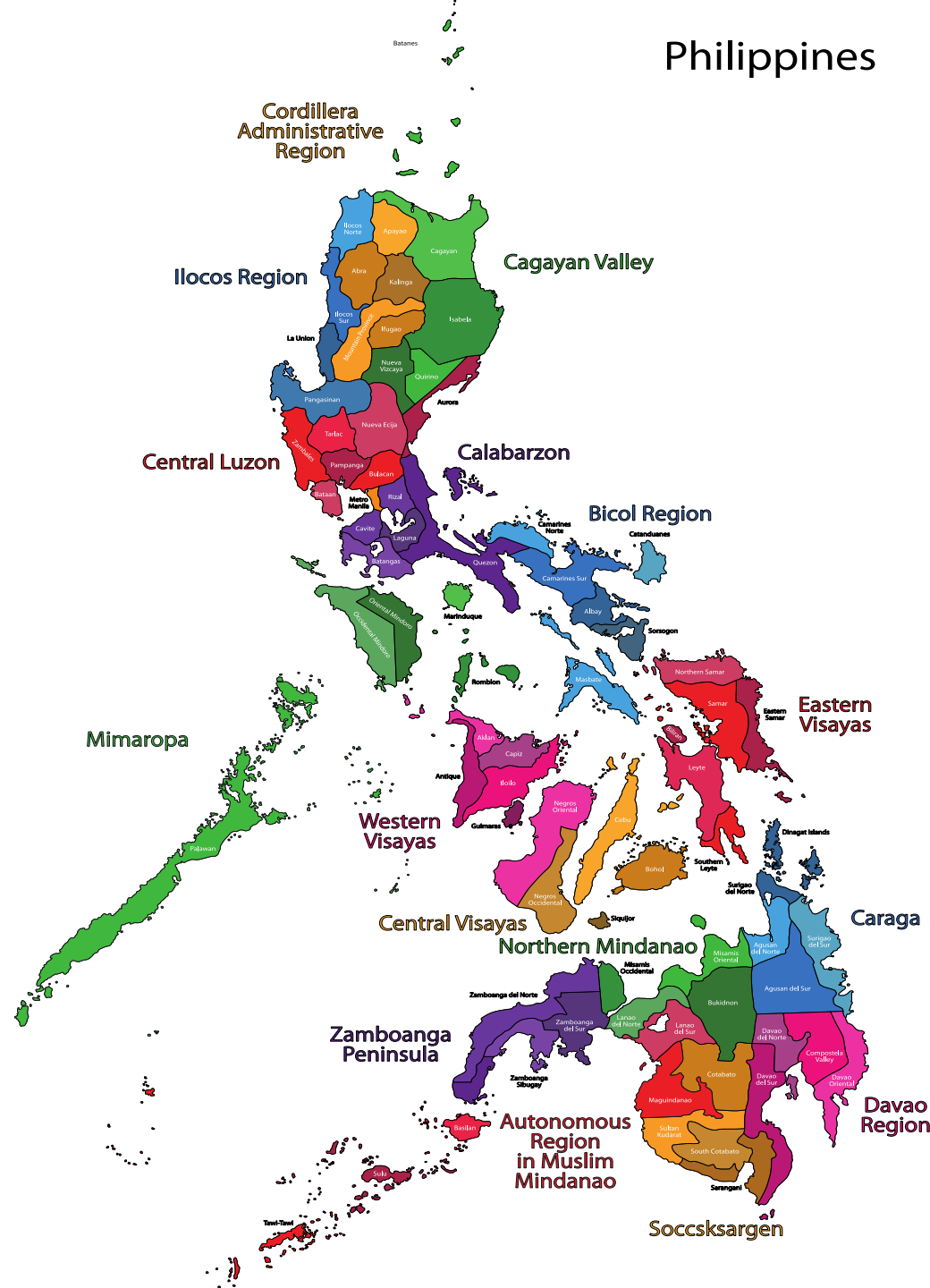
The Philippines is also **easily accessible** through formal use and **widespread command of the English language**



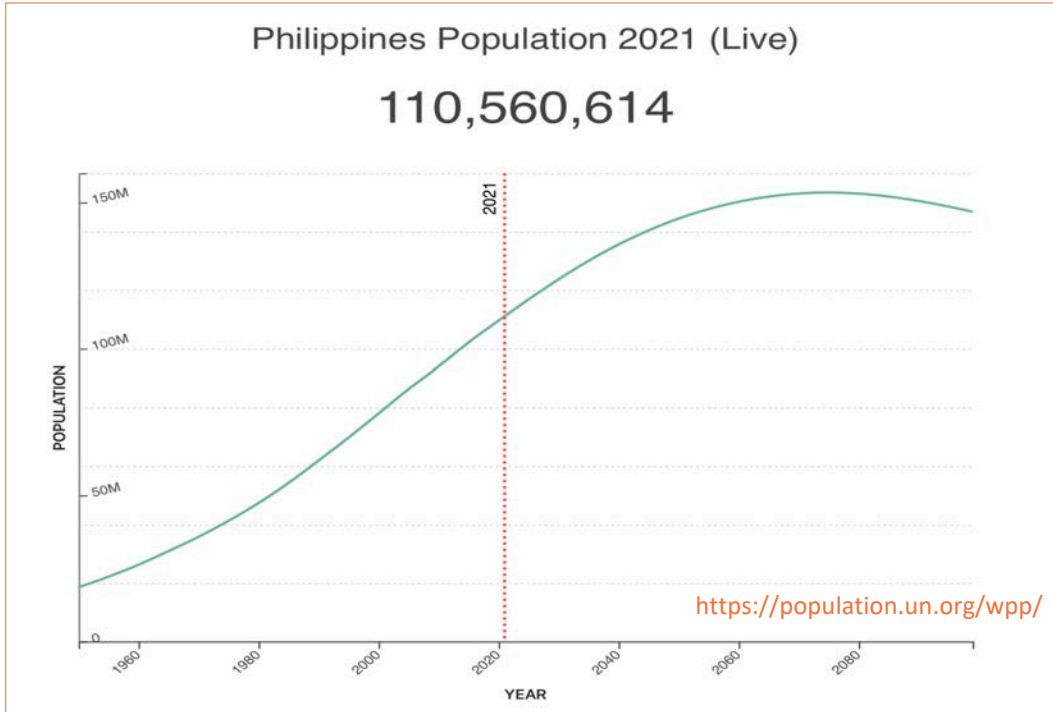


## The Philippines's geography

- The total land area is 300,000 km<sup>2</sup> (~7 times Netherlands) scattered over 7,641 islands
- 47% of the population is urban and rising again in last decennium
- The Philippines closest neighbors are Indonesia, Malaysia, Brunei, Taiwan, China, Cambodia, Laos and Vietnam
- Territory of The Philippines is washed by the South China Sea & the Pacific Ocean
- Territory is divided into 80 provinces managed through 17 administrative regions
- The capital of The Philippines is Manila. Three largest cities are: Manila, Cebu City and Davao City
- Very mountaineous terrain
- Philippines are very disaster prone, both as a result of typhoons and due to seismic and volcanic activity. Philippines is part of 'The Ring of Fire'. Emergency & rescue services and emergency care play an important role in mitigation



# The population of The Philippines is growing but slowing down



Current population is estimated at around 110 million people and expected to peak in 2070 at 150 million.

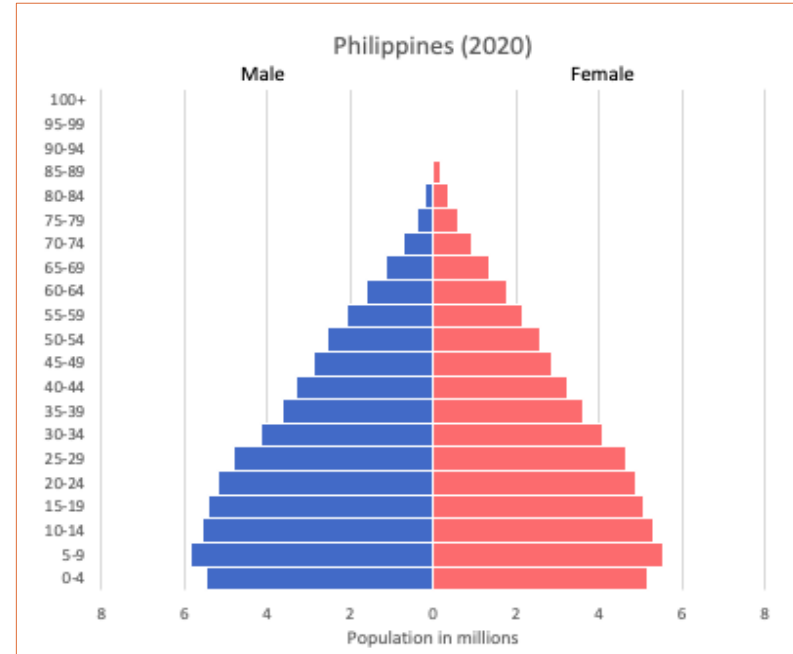
Considerable difference in male and female in terms of **life expectancy**:

Male: 66.2 years

Female: 72.6 years

**Average: 69.3 years**

## Age structure



Still very young population but slowly starting to age

Increasingly important risk factors, typically having **more impact on men**, include:

- dietary risks
- tobacco smoke
- high systolic blood pressure
- alcohol consumption

# Burden of Disease

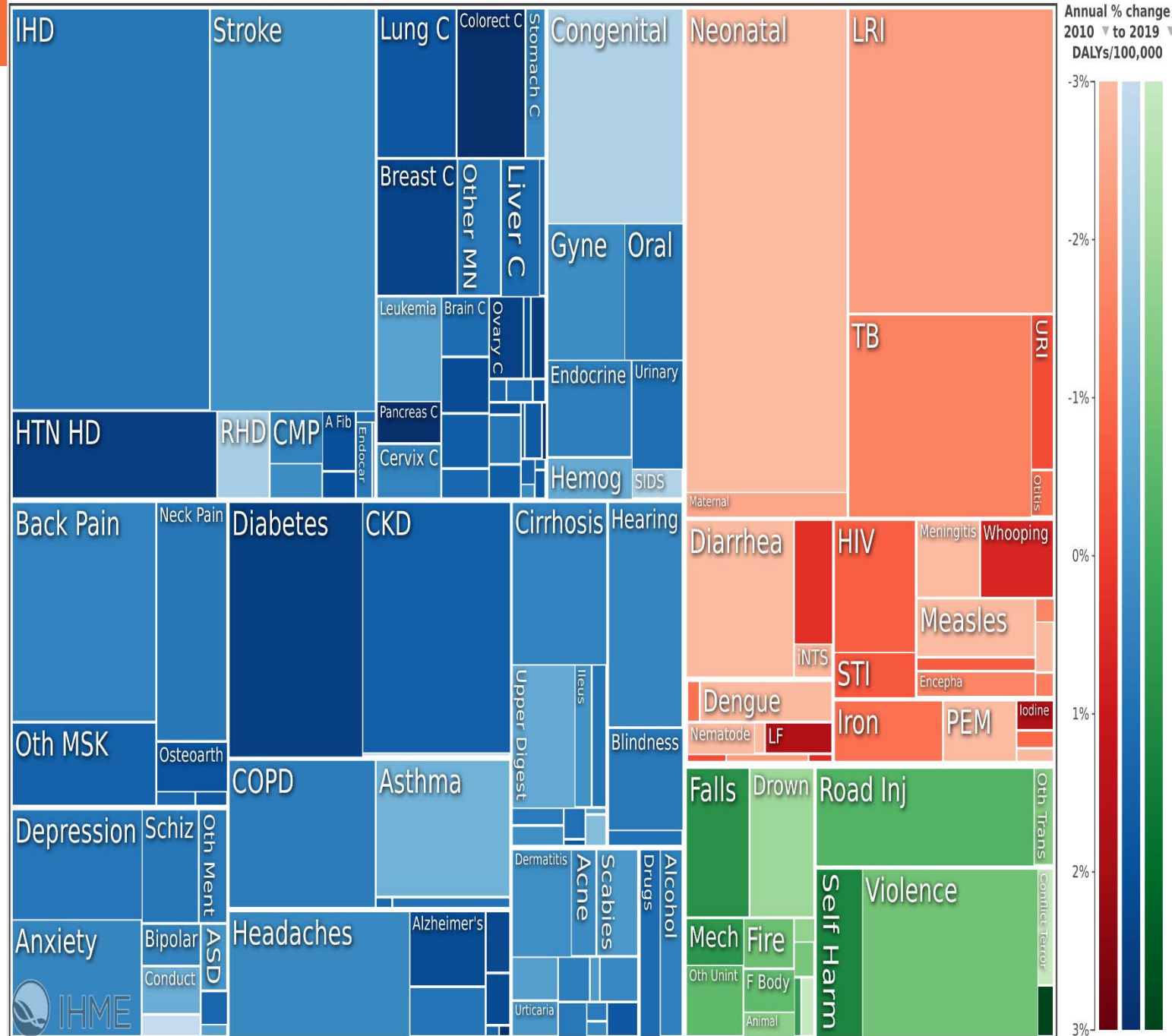
## Impact of main disease categories

- Growing importance of **Non-Communicable Diseases (NCD) (Blue)**
- Within NCDs growing impact of cardiovascular diseases (e.g. **IHD & Stroke**), **Diabetes**, **Cancers**
- **Injuries (Green)** is a growing category
- Within **Communicable Disease Category (Red)** is Neonatal and Maternal health improving while some infectious diseases are growing (pre-Covid-19)

### Explanation:

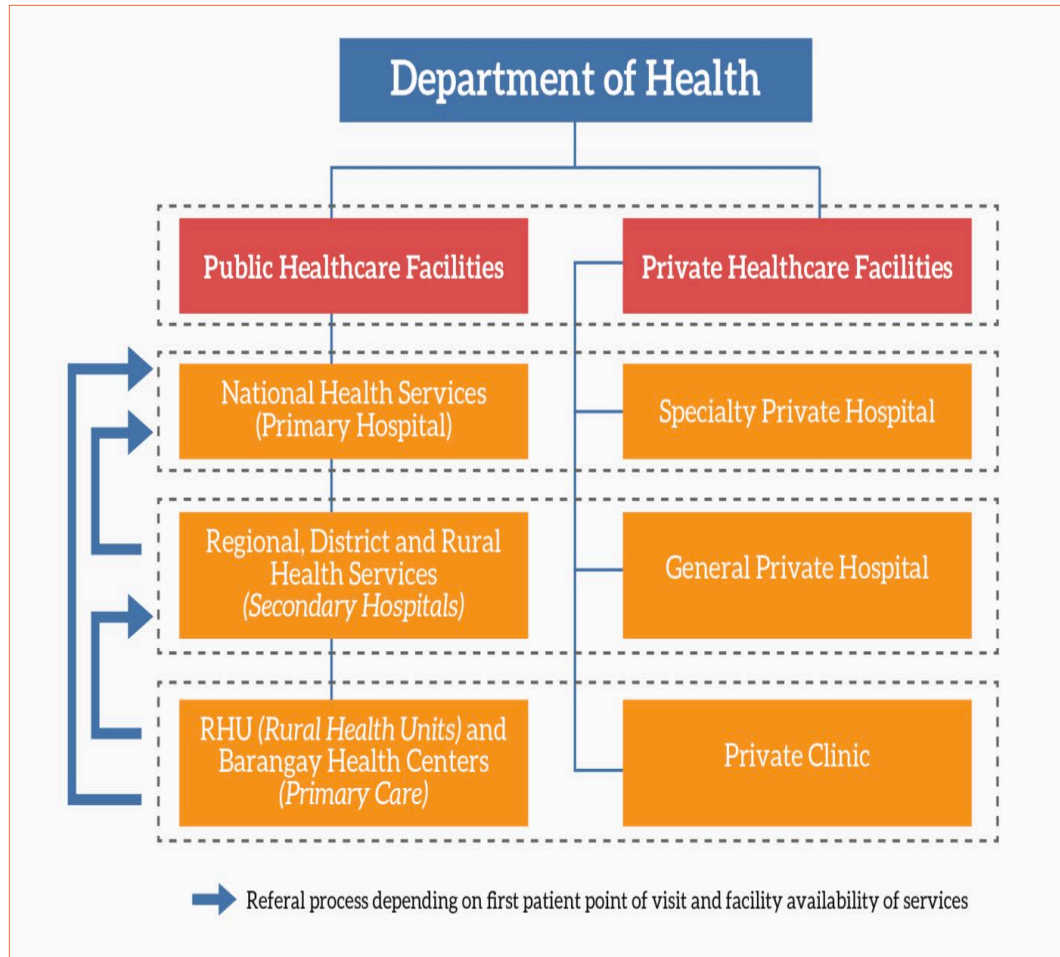
Darker colours show strong increased impact while lighter colours indicate decreased impact between 2010 and 2019

Philippines  
Both sexes, All ages, 2019, DALYs



# Organization of the health care system

The health care system is divided into two systems: public and private health care



Number of health facilities by type

Facility Type	Total	Public	Private	% Private
Barangay Health Station	23,281	23,281	-	0%
Rural Health Unit	2,592	2,592	-	0%
Birthing Home	2,411	1,110	1,301	54%
Hospital	1,387	454	933	67%
Infirmery	659	345	314	48%
City Health Office	12	12	-	0%

- Private sector mainly active in hospital care and maternities
- Government caters for primary care and first-line facilities
- Health facilities are regulated by DOH - Health Facilities & Services Regulatory Bureau (HFSRB)

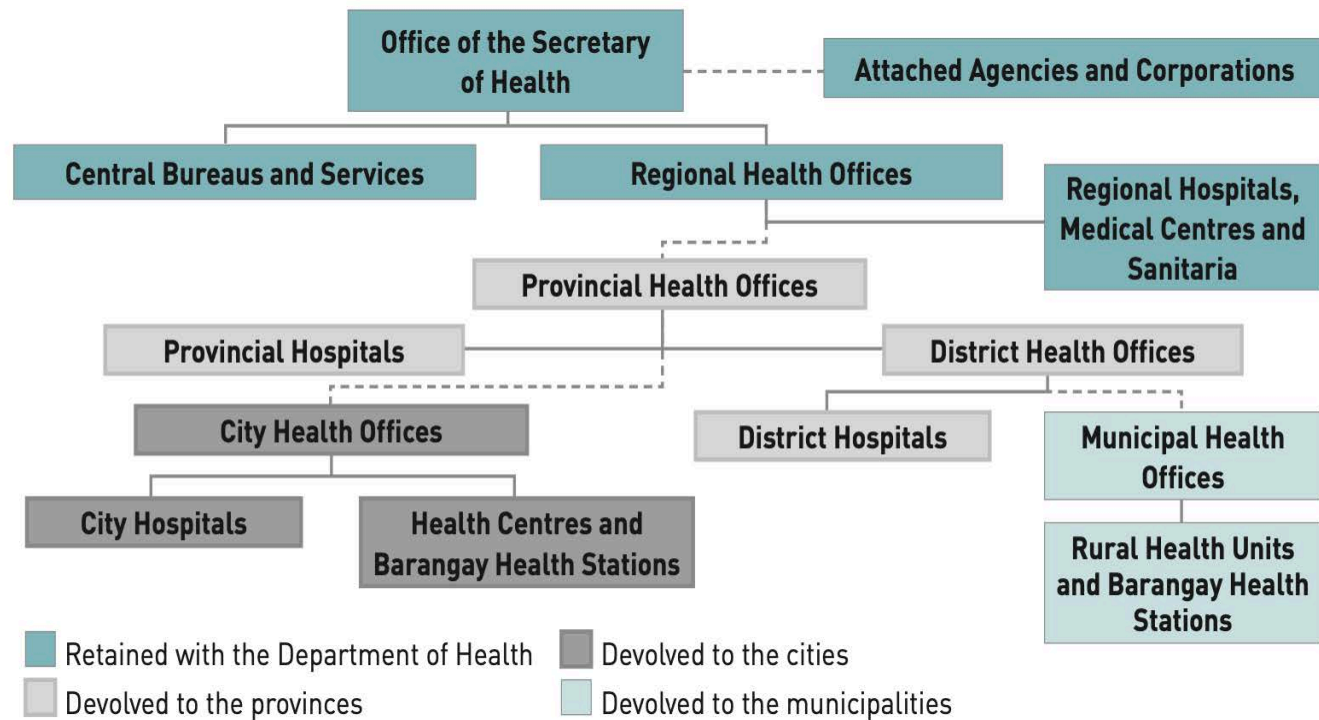
## Public health systems are to a large extent fragmented and decentralized

In The Philippines, the health system is a complex, multi-layered system in which responsibilities in the health care sector are fragmented

Responsibility is shared between the central government (the Ministry of Health), and Local Government Units that have full autonomy to organize and finance their 'own' regional systems.

The **Department of Health** develops and approves state quality standards and clinical protocols, and is responsible for the organization and implementation of the mandatory accreditation of health care facilities and the issuing of licenses

**Local Government Units** such as provincial governments are tasked with providing primary and secondary hospital care, while city and municipal governments are tasked with providing primary health care, promotive and preventive health programs and basic ambulatory clinical care.



# Private health care system

## Overall

The private sector consists of thousands of for-profit and non-profit health providers, which are largely market-oriented and where health care is **generally paid for through user fees at the point of service.**

The private health sector is regulated by the Government through a system of standards and guidelines implemented through the licensure procedures of the DOH and the **accreditation procedures of PhilHealth**

Private sector provides also **medical tourism**, mostly for low cost aesthetic and dental procedures.

## Formal

The **formal** private sector consists of clinics, infirmaries, laboratories, hospitals, drug manufacturers and distributors, drugstores, medical supply companies and distributors, health insurance companies, health research institutions and academic institutions offering medical, nursing, midwifery, and other allied professional health education.

Five hospitals – Asian Hospital and Medical Centre, Chong Hua Hospital, The Medical City, St. Luke’s Medical Centre and Makati Medical Centre – hold accreditation from the **Joint Commission International.**

## Non-formal

**Non-formal** health service providers include **traditional healers (herbolarios)** and **traditional birth attendants (hilots)**, which are not covered by any licensing or accreditation system by the Government.

Other relevant private organizations and NGOs in the health system including Professional groups such as:

- The Philippine Medical Association
  - The Philippine Nurses Association
  - Philippine Dental Association
  - The Integrated Midwives Association of the Philippines,
- are involved in the **promotion of standards of practice and competence** in the health professions.

“a fragmented health system composed of thousands of for-profit and non-profit providers involved in the delivery of various health products and services”

## Services that the national and local governments provide and pay for

**Municipal facilities** mainly provide primary care services in health centres. **Provinces** provide primary-level care in infirmaries and secondary-level care in district hospitals (Level 1) and provincial hospitals (Level 2). **Cities** provide primary and secondary services; however, a few large cities may operate tertiary-level hospitals (Level 3). The **DOH** operates tertiary-level hospitals in the NCR as well as in the various regions of the country. There are other National Government agencies that run tertiary hospitals, including the **military** and the **University of the Philippines**.

Role	Public health	Personal care		
	Population-based care	Level of care		
		Primary	Secondary	Tertiary
<b>Provider</b>	Department of Health Local governments	Municipal & city governments	Provincial & city governments	National Government
<b>Payer</b>	Department of Health Local governments	Municipal & city governments	Provincial & city governments	National Government
<b>Source of funds</b>	General Appropriations Act, which includes internal revenue allotment for local governments (tax-based)	<ul style="list-style-type: none"> <li>• General Appropriations Act, which includes internal revenue allotment for local governments – 30%</li> <li>• PhilHealth – 14%</li> <li>• Out-of-pocket – 56%</li> </ul>		

## Secondary care - hospital bed capacity is unevenly distributed

Group of islands	Population <sup>a</sup>	Government <sup>b</sup>		Private <sup>b</sup>		Total hospitals	Total beds	Average beds / island group	Beds / 10 000 population
		Hospitals	Beds	Hospitals	Beds				
NCR	12 877 253	48	17 221	115	12 502	163	29 723	182.3	23.1
The rest of Luzon	44 592 844	217	15 573	410	21 103	627	36 676	58.5	8.2
Visayas	19 373 300	80	6 757	87	8 439	167	15 196	91.0	7.8
Mindanao	24 135 775	89	7 820	178	12 273	267	20 093	75.3	8.3
<b>Philippines</b>	<b>100 979 172</b>	<b>434</b>	<b>47 371</b>	<b>790</b>	<b>54 317</b>	<b>1 224</b>	<b>101 688</b>	<b>83.1</b>	<b>10.1</b>
<b>Average beds/hospital</b>		<b>109.1</b>		<b>68.8</b>		<b>83.1</b>			

Sources: <sup>a</sup>Philippine Statistics Authority, 2016a; <sup>b</sup>Department of Health-HFSRB, 2016

Hospital beds and any expansion in infrastructure are occurring in the more economically developed island of Luzon, particularly in the National Capital Region. **Of the total beds, almost two thirds are in the NCR and the rest of Luzon (65% of total beds).** Only 20% of hospital beds are in Mindanao and 15% in the Visayas.

Government hospitals tend to have larger bed numbers than private hospital but **are typically still rather small** in terms of minimum levels for efficiencies of scale



# F inancing

## Health Care

Current Health Expenditure (CHE) reached EUR 14 billion in 2019, 10.9 percent higher compared to 2018

Total Health Expenditure (THE), which comprises of CHE (87.5%) and Health Capital Formation Expenditure (investment, 12.5%), recorded EUR 16 billion in 2019, up by 7.9 percent from 2018. As a result, the share of THE to the Gross Domestic Product (GDP) at current prices was 4.6 percent

Household-out-of-pocket payment (OOP) remains the largest among sources of health financing in the country, amounting to 47.9 percent of CHE in 2019.

Figure 1 Total Health Expenditure Growth Rates (in percent)

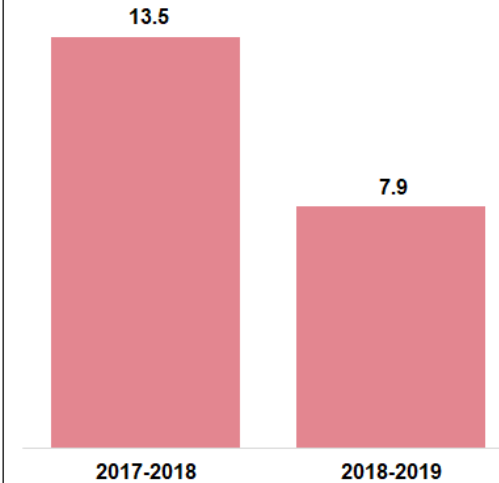
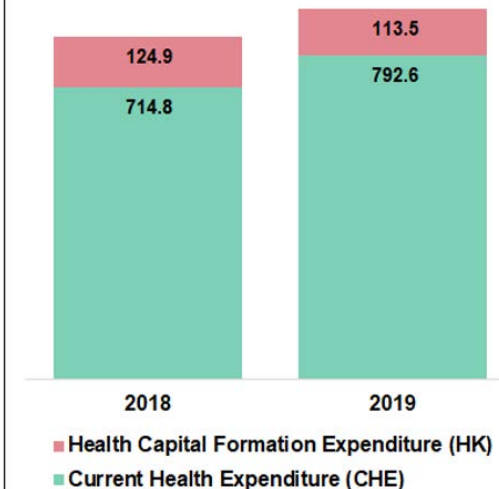


Figure 2 Total Health Expenditure by Type Levels (in billion PhP)



Source: Philippine Statistics Authority

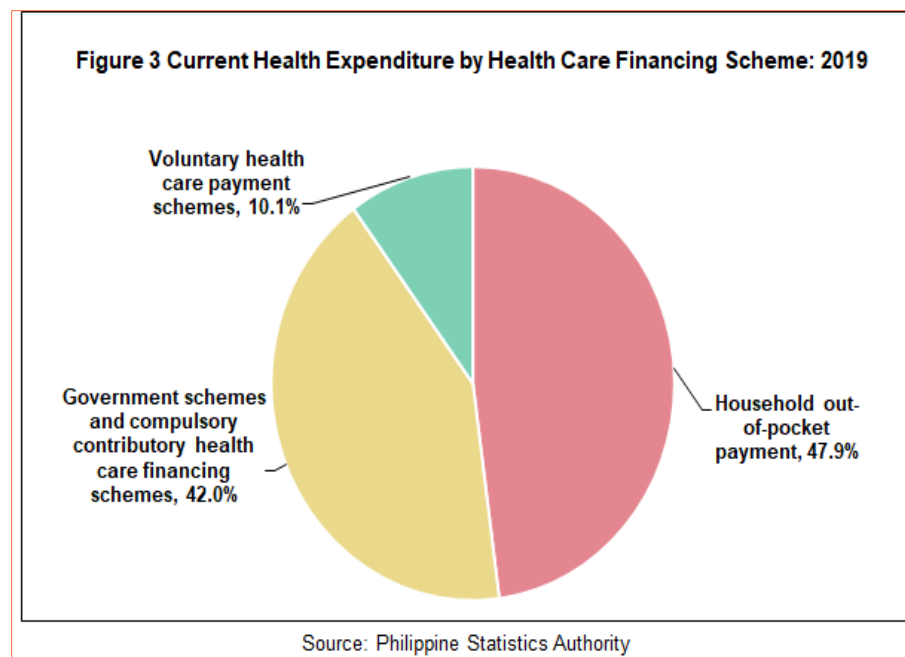
## Health Financing – who is paying for what?

Health spending financed through government schemes and compulsory contributory health care financing schemes came second at a 42.0 percent share. Meanwhile, voluntary health care payment schemes contributed 10.1 percent share.

**Out of Pocket Payments (OOP)** remain very high at 47.9%, which severely limits financial access to health care and/or may push people into poverty in case of catastrophic health expenditures.

Among the health providers, the bulk of CHE were spent **on hospitals (43.6%)**, amounting to EUR 6 billion. It was followed by pharmacies (30.3%) while the providers of health care system administration and financing (7.4%) accounted for EUR 1 billion.

**On a per capita basis, health spending was at EUR 117** in 2019, up by 7.4 percent compared to 2018.



31 December 2019: 1 EUR = 56.93 PhPesos

## Health Financing – who is paying for health insurance?

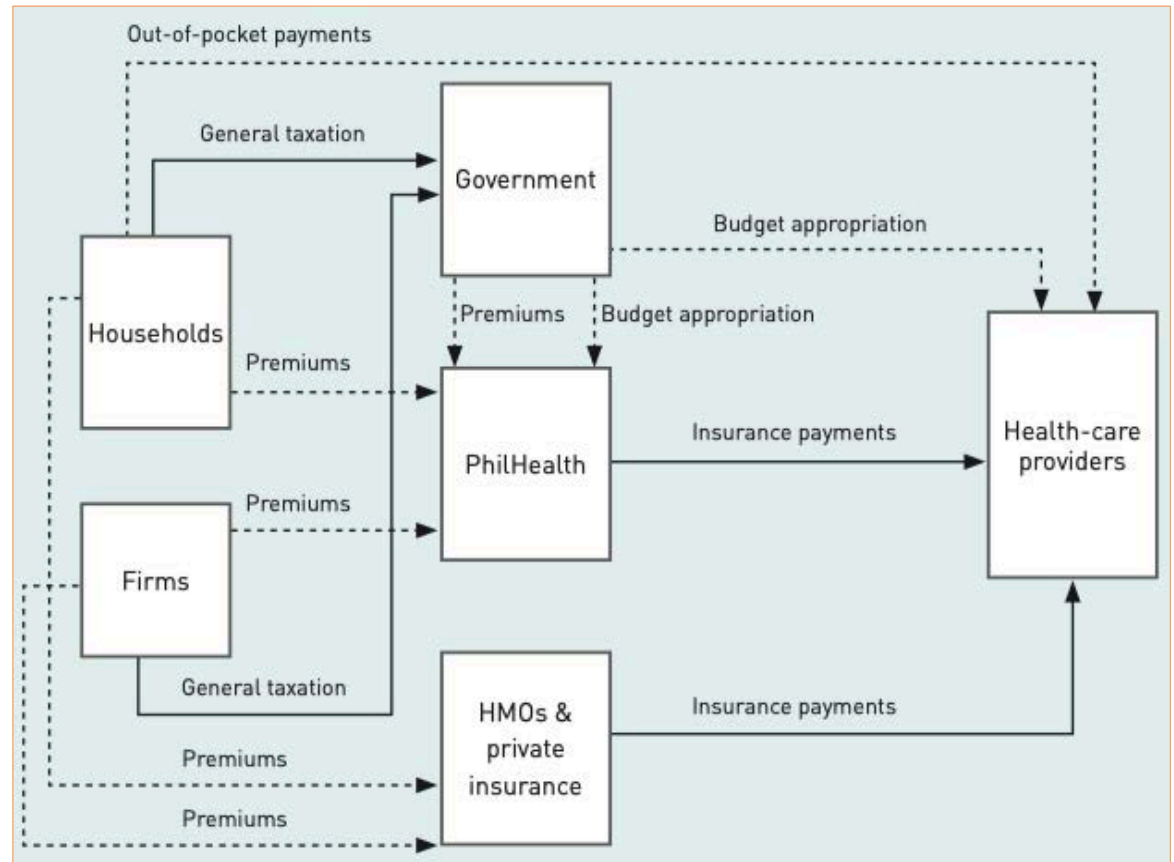
The National Health Insurance Program (NHIP) is carried out by PhilHealth, which receives premiums from households, firms and government.

PhilHealth reimburses health care costs at both public and private facilities.

However, it matches only part of the total health care costs, ranging between 30-70% maximum.

Although central in organised health care financing, > 90 percent of Philippines were directly or indirectly covered before 2019, the role of PhilHealth is limited due to the skewed distribution of health facilities, limitations in type of care covered and limited 'depth' of financing services, or the share of the health care costs reimbursed

### Flow of financing in Philippine health care



## Distribution of health professionals is skewed across the country

Top 4 categories of health professionals working in health institutions are **nurses** (90,308), **doctors** (40,775), **midwives** (43,044) and **medical technologists** (13,413)

Other categories of health workers are pharmacists, dentists, nutritionists, radiology technicians, physical therapists, occupational therapists, X-ray technicians, sanitary inspectors, and **barangay or community health workers**.

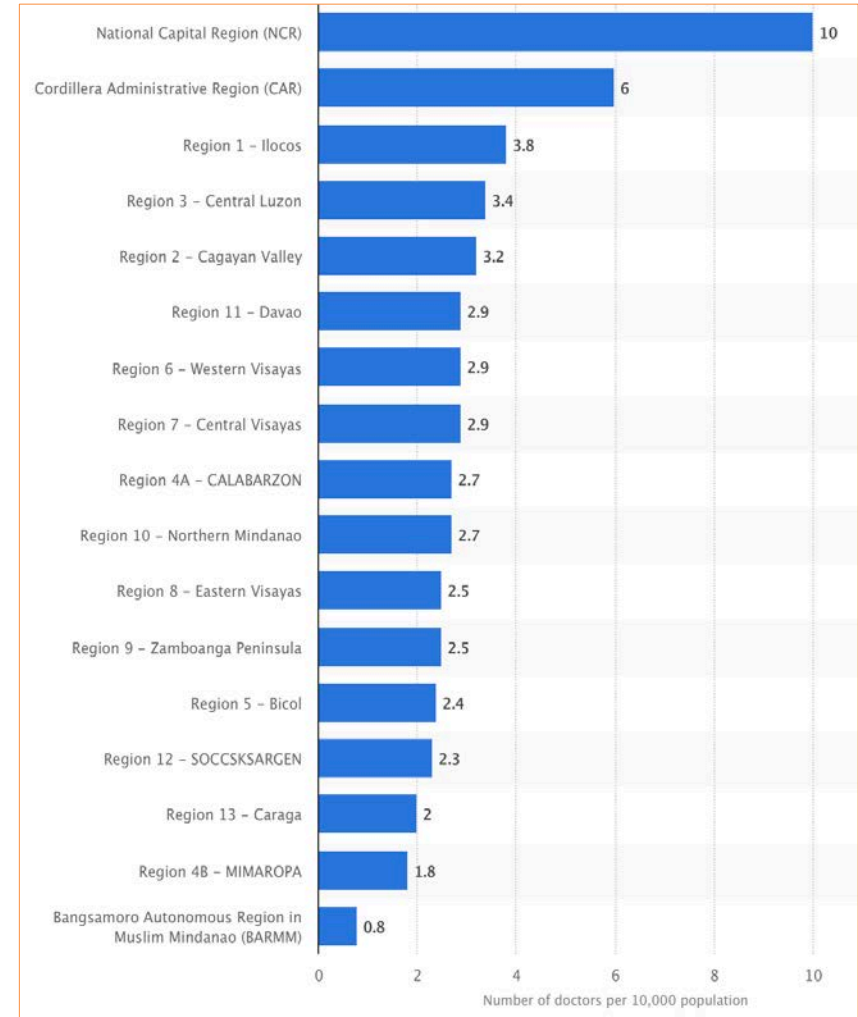
Institution-based doctors are equally affiliated in public and private institutions, but nurses (61%), midwives (91%), and medical technologists (53%) tend to work more often in public institutions. **Compensation is considered better in public facilities.**

The distribution in terms of place of work of institutional health workers is **hospital-centric**, thus curative in nature. Only 9 percent of doctors work outside the hospital in primary care settings.

Average **density of doctors** is 6 per 10,000 population, much lower than in Thailand and Vietnam or China, but higher than Indonesia

A comparison of the **density of nursing and midwifery** personnel with ASEAN countries shows that the Philippines has the same density of 12–13 nursing and midwifery personnel per 10 000 population, which is on a par with Indonesia and Viet Nam but lower than Thailand and Malaysia

### Only NCR manages minimum of 10 per 10,000 (WHO)



# Medical Education

Two government entities are responsible for training, qualifying and continued professional development of health workers.

The *Commission on Higher Education* (CHED) is mandated to prescribe standards for quality health science education and the health science curriculum, and to regulate public and private higher education institutions in the country.

The *Professional Regulation Commission* (PRC) is tasked to promote honest and credible licensure examinations of health professionals, provide continuing education and development, and ensure effective regulation of professional practice.

Medical education in the Philippines is conducted by government-recognized medical schools in the country. It takes a minimum of 8 years of schooling to become a licensed doctor. Medical schools are accredited by the Association of Philippine Medical Colleges.

## Migration of health professionals

Philippines is a well-known supplier of doctors and nurses worldwide, based on qualifications and command of the English language

However, health worker's migration is also jeopardising the development of Philippines own health system

Despite many different policy efforts to reduce the flow, in recent years still an average of **13,000 nurses** migrate very year

Many stay for substantial periods overseas before returning or try to naturalise (in particular in the USA)

### Observations:

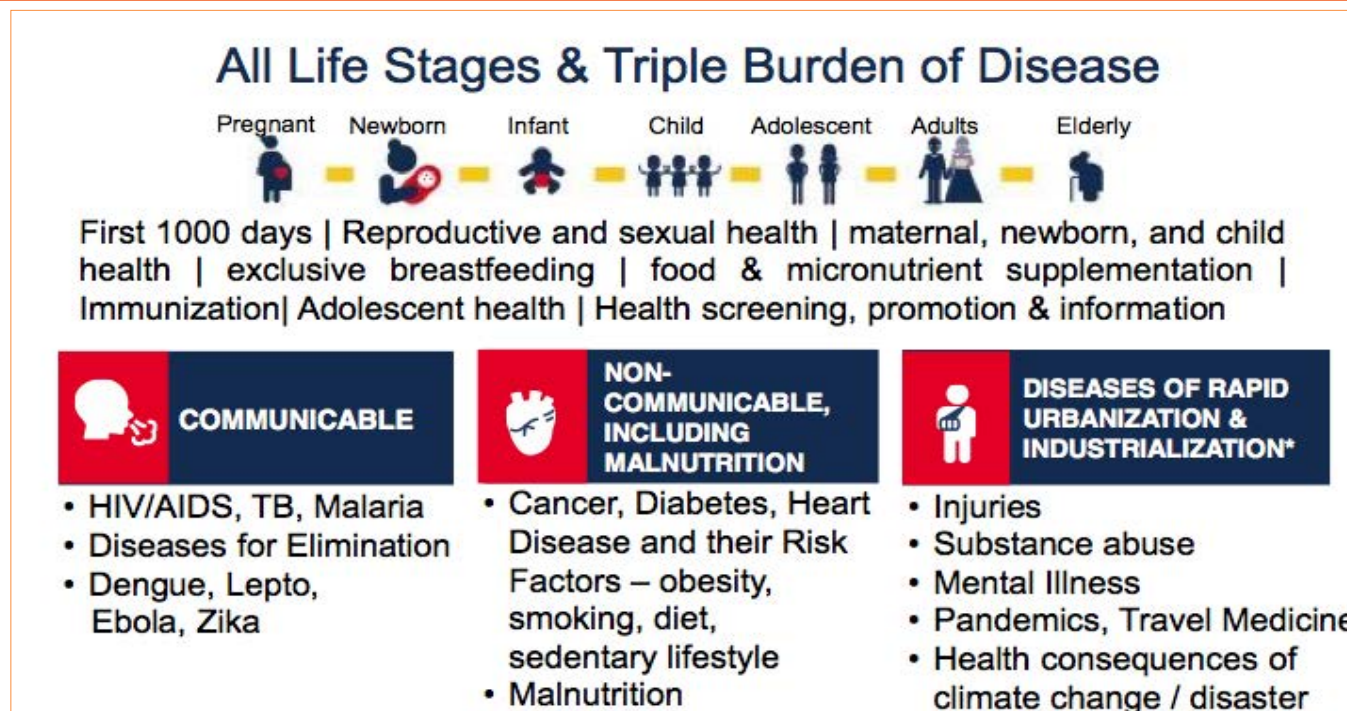
- Compensation is considered better in public facilities, whereas the private sector is considered a place to gain experience
- Bilateral agreements between The Philippines and destination countries have proven difficult to implement and are not considered effective in reducing outflow of health professionals
- Both push (e.g. wages, job positions) and pull-factors (wages and overseas experience) contribute to ongoing migration
- In 2020 migration was put on hold due to pandemic situation. In 2021 policies expected to limit outflow to 5,000 nurses

## Health sector reforms – main legislative milestones in the past 30 years

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- Based on strategy of 'Primary Health Care for All' in the 1970's The Philippines developed a largely **centralised**, government funded and operated health care system
- In the late 1970s the government started to own **corporate hospitals**
- Prevention and nutrition became visible in push to promote breastfeeding through the **Milk Code** mandating breast feeding in 1986
- The Philippines was at the forefront of pharmaceutical regulation when it passed the **Generics Law** in the **early 1990's** in an attempt to lower expenditure on drugs by promoting and purchasing non-branded medicines
- The Local Government Code passed in 1991 **decentralised** also the governance and financing of the health system (devolution)
- In line with the decentralisation efforts **hospitals** under the DOH were granted **fiscal autonomy** in 1992
- Reducing the pressure on government finances, while harnessing out-of-pocket payments through the introduction of the **National Health Insurance Act** in 1995. This is considered a major milestone for social health protection.
- To counter low levels of government financing for health care and a dilapidated health care infrastructure the DOH introduced the **Health Facilities Enhancement Funds** to support local governments in 2007
- Improving quality and management in health care was the goal of the **Good Governance Act** in 2008 and the mandatory **ISO certifications** for hospitals in 2011
- Trying to catch two flies with one stone was the aim of the introduction in 2013 of '**Sin Taxes for Health**' discouraging harmful consumption of alcohol and tobacco while generating extra revenue (triple!) for the DOH. It is considered the start of Universal Health Care financing.
- In 2019 the Duterte Administration signed the **Universal Health Care law**

## Health sector reforms – 2016 to present



New reforms take a distinct view on the direction of reforms through:

- **Life cycle** approach focusing on main life events and accompanying health issues
- Using concept of **triple burden of disease** through:
  - Communicable diseases
  - Non-communicable diseases (incl. malnutrition)
  - Urbanization and industrialization

Reforms emphasize strengthening **Service Delivery Network** by:

- Practicing **gatekeeping** through wide network of general practitioners and family physicians
- Compliance with established **clinical practice guidelines** of all medical specialties
- Providing health services **closer to people** through use of mobile clinics, subsidies to patient transport costs and the use of telemedicine
- **Emergency medical services** to be available 24/7 even during disasters
- Health services enhanced by increased use of **telemedicine and digital health**

## Health sector reforms – Universal Health Care Law 2019

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- In March 2019 President Duterte signed the **Universal Health Care (UHC) Bill** into law (Republic Act No. 11223)
- Major step by enrolling **all** Filipino citizens automatically in the **National Health Insurance Program** administered by PhilHealth
- Effectiveness of health insurance enhanced by **major inflow of extra resources** to health insurance from restructured Sin-taxes
- Extra resources to health insurance earmarked to **Special Fund exclusive for LGUs** for improvement of local health systems **and health infrastructure**
- Stricter **delineation in mandates between DOH and PhilHealth**.
  - DOH to focus on **population based** health services: e.g. health promotion, disease surveillance and vector control
  - PhilHealth to focus on **Individual based** Health Services: e.g. services that can be accessed within health facility (or remotely) and can be traced to one recipient



- The detailed policy program is contained in the policy document '**National Objectives for Health Philippines, 2017-2022**' of the Department of Health



## Issues in health reform – dental care has been neglected for long

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**Oral diseases** is a serious public health problem, creating an epidemic and a heavy burden on schoolchildren (Department of Health, 2012a)

Dental care was temporarily rendered by public health facilities between 2004-2008 which provided an insight in the scale and scope of the decline in curative dental treatment among children;

Due to lack of public dentists to perform treatment not all health centres have dentists. Confusion regarding whether Department of Education or Health had responsibility for dental health of school children.

It was estimated that **87.4% of school children suffer from tooth decay**, which is far worse than other countries in the Western Pacific Region

Not only children have oral health problems. National Monitoring and Evaluation Dental Survey (NMEDS) indicated **close to half of Filipinos have periodontal disease**.

In **urban areas of the Philippines 9 million denture wearers** have been estimated, the highest number in Asia

The majority of those denture wearers is between 35 and 69 years of age

One of the reasons is that **dentists are mainly working in curative mode**, which is their main business model.

Dentists and patients only meet during emergencies

Dentist play very limited role in **education and prevention of oral disease** and generally see no role for themselves in this area. Private sector dentists help through dental missions in poor communities but focus mostly on extraction of teeth due to dental caries

## Issues in health reform – inequity in health and care

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Push for higher Sin-taxes for health financing and the **push for Universal Health Coverage are meant to correct existing health inequities**

Improvements in health status as a national average mask **inequality in health outcomes, socioeconomic status, educational attainment & regions.**

Despite substantial achievements in reducing neonatal, infant & under-5 mortality rates in the 1990s, still large variations observed across regional, urban– rural & socioeconomic status.

Disparities across socioeconomic status are associated with maternal education, regional location & access to health services

Pregnant mothers in rural areas (25%), poorest quintile (30%), younger age groups, those in 1st trimester (26.6%) & in regions where poverty incidence is high likely to be **nutritionally at risk** (Food and Nutrition Research Institute-DoST, 2014)

National Demographic and Health Survey (NDHS) found that proportion of women who receive **antenatal care** from a provider is associated with mother's level of education & economic status

The highest prevalence of **underweight, stunting & wasting** among poorest quintile (29.8%, 44.8% & 9.5%, respectively) & among those in rural areas (22.6%, 35.0% & 8.1%, respectively) (FNRI, 2014)

**Immunization is deteriorating;** measles immunization varies between 85% in 1990 to 79% in 2014 & 80% in 2016. Full immunization is reached only for 62% of children aged 12–23 months, i.e. received BCG, measles, & 3 doses of diphtheria, pertussis, tetanus (DPT), polio & hepatitis B (Hep-B) before age of 1 year

Variation in **immunization** by residence (73% in urban areas versus 65% in rural). Larger variations observed by region, such as only 29% in the Autonomous Region of Muslim Mindanao (ARMM) to up to 84% in Cordillera Autonomous Region (CAR)

# Issues in health reform – Public Private Partnerships

Health reforms of the Aquino Administration between 2010 and 2016 included the expansion of curative care facilities through the use of **Public Private Partnerships (PPP)**

The Philippines is considered to have a **credible legal framework** for PPP based on BOT (Build Operate and Transfer) Law as used for toll ways and energy.

The PPPs are coordinated by **NEDA (National Economic Development Authority)** that created a **PPP Centre** in 2012. The previous year the DOH had already established its own centre for PPPs in Health.

In health care PPPs are mainly used for investments in dialysis, laboratories and imaging facilities.

Health Facilities Enhancement Funds allowed infrastructure and capital investment in healthcare in the local health units and medical centres of the government. Financing included local banks such as: Bank of the Philippine Islands, Banco de Oro, Security bank, Union Bank and Development Bank of the Philippines

### NKTI PET-CT and Cyclotron Project

### Regional Cancer Centers

### Modernization of Cagayan Valley Medical Center

### Modernization of Bicol Medical Center

- PhP305 Million (£4.55 Million)
- 600-bed capacity hospital
- Design and Build Scheme

- PhP855 Million (£12.7Million)- funded by the government through DOH
- 800-bed capacity hospital
- Design and Build Scheme - ongoing construction

[www.doh.gov.ph](http://www.doh.gov.ph)

## Issues in health reform – e-Health

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Philippines have reportedly one of the **slowest internet speeds among Asian countries**. Still, it scores relatively well when it comes to the actual use (67 users out of 100 people).

In the health sector **digitalisation** is taking hold in different areas such a e-prescriptions, hospital management information systems, Integrated Clinic Information System (iClinicSys) for primary care facilities, electronic patients records.

The Philippines has an eHealth Strategic Framework since 2014. Crucial effort is the **Philippine Health Information Exchange (PHIE)** which is a platform for secure electronic access and efficient exchange of health data and/or information among health facilities, health-care providers, health information organizations and government agencies in accordance with set national standards. PHIE **integrates and harmonizes health data** coming from different electronic medical record systems and hospital information systems.

DOH and PhilHealth are currently collaborating on an integrated decision-support and reporting system to foster and support the evolution and optimization of the **DOH nationwide disease registry and PhilHealth benefit programmes**. This involves the development of standards for the continued harmonization of data collection and reporting of PhilHealth, DOH and partners.



## Issues in health reform – Telemedicine 1

**National Telehealth Service Program (NTSP)** is managed by the DOH & University of the Philippines (UP) in the National Telehealth Centre. The program aims at expanding telemedicine in 4th to 6th class municipalities nationwide.

**NTSP** facilitates consults between primary care physicians and clinical specialists at the University of the Philippines using mobile & internet-based interface & triaging system

Development of Realtime Regular Reporting 4Health (**R4Health**) is = a mobile system to collect routine health data of selected maternal & child deaths to monitor health service delivery

The private sector is increasingly active in telemedicine through **KonsultaMD** - a subscription-based telehealth service which is available available 24/7 which allows access to skilled & licensed Filipino doctors who can provide safe medical assessment & advice on basic healthcare & proper medication

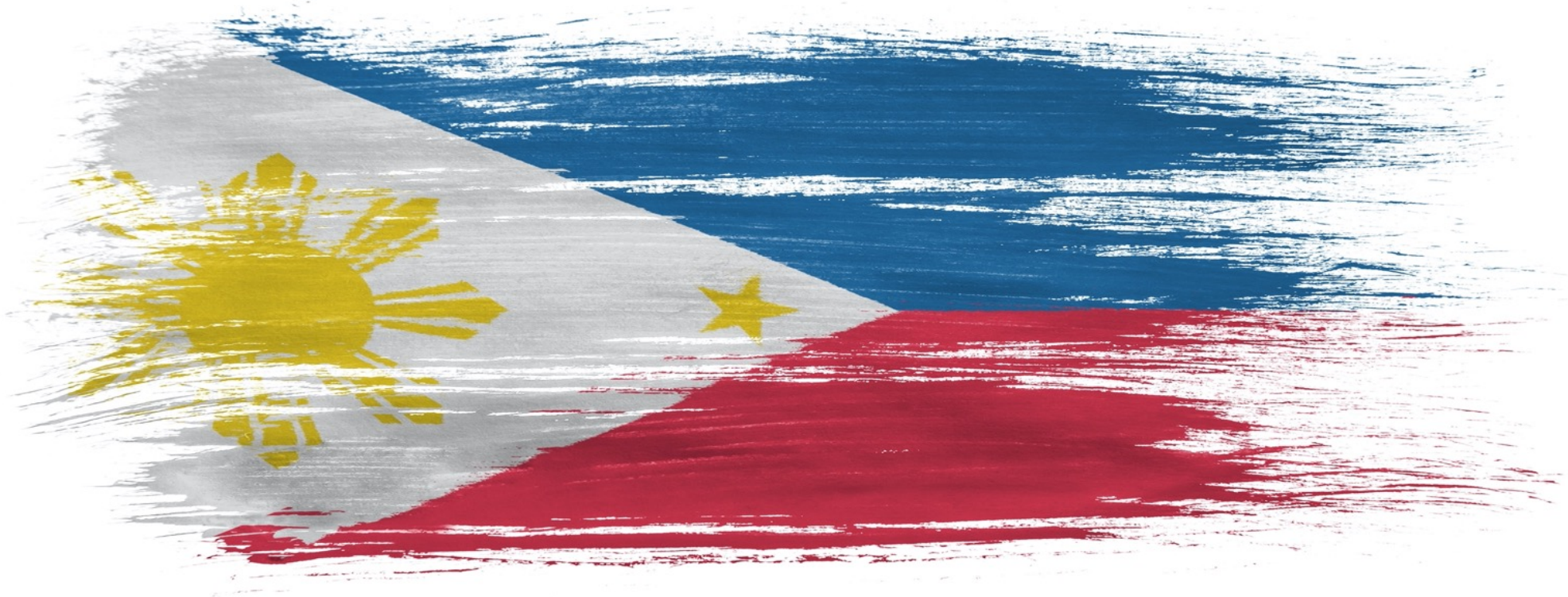


Covid-19 is speeding up application of Telemedicine, such as:

- Bayanihan Operations Centre in University of The Philippines planning COVID bed capacity across the country
- e-Prescription services have come into use

**New issues** (unintended consequences) arising from increasing spread of telemedicine):

- Billing & reimbursement issues remain
- Telemedicine makes health care delivery “impersonal”
- Resistance from doctors to protect physical practices



## Opportunities in the health sector in The Philippines

The health care sector in The Philippines is preparing as new reforms start to kick in. How far will it go and how attractive is the sector to do business in? A SWOT analysis distinguishes between strengths and weaknesses inherent to the sector as well as the opportunities and risks that confront the sector. The analyses reflect inputs from discussions with sector specialists, policymakers and other stakeholders

# SWOT of The Philippines Health Sector Market

## Strengths

- The government of The Philippines has adopted **far reaching reforms with the Universal Health Care Law which is being implemented since 2019**
- Government reforms will **increase coverage of public health insurance** and increase opportunities for contracting services
- Health expenditure has grown dramatically in the past decade
- The Philippines's economy was a good and steady performer pre-covid and is **projected to bounce back to growth levels of about 4-6 percent** in the coming years
- The Philippines is a large country with a **sizeable and young population and a workforce** with sound educational standards
- **IFI's continue to support** the health sector financially as well through technical support
- Ease of **doing business** in The Philippines is slowly improving (ranked 95)
- Huge private sector active in all sectors of health care
- Laws and regulations are written in **English**. English is one of two official languages

## Weaknesses

- The health sector is **fragmented** due to the decentralization of the system in particular at the Local Government levels.
- There is a large **diversity of health systems** ranging from very advanced in urban centers to very basic with limited **physical access** in rural and Geographically Distanced and Isolated Areas (GIDA)
- The Philippines Governmental **bureaucracy** is substantial and can be very slow
- **Quality of care** is an issue at public health sector facilities across the country and is often considered below standards of peers in the region (WHO)
- **Corruption** can be a problem leading to higher business costs and uncertainty. (Transparency International Perception Index: 115 out of 180 countries).
- Condition of **health infrastructure is often very poor** in particular in rural areas and will require concerted government efforts to fix.
- **Migration of health workers** leaves the Philippines chronically understaffed
- **Inequality in the health sector is substantial** as people have to pay substantial amounts for accessing health services including in the public sector.

# SWOT of The Philippines Health Sector Market

## Opportunities

- The new UHC reforms started in 2019 will strengthen primary care and are expected to **to increase funding substantially**
- The Ministry of Health is actively pushing **Public Private Partnership models to improve service delivery** and stimulate investment in the sector. A credible legislative framework for PPP exists.
- Implementation of **E-health** is likely to get further traction spurred by the Covid-19 pandemic.
- Large **need for renovation, upgrading and expansion of health care infrastructure** and introduction of new medical technologies, in particular outside the main urban centres:
  - *Health facility enhancement fund (> USD 21 million)*
  - *Build, build build program of current Government*
- Private health sector is consolidating and transforming into larger **health conglomerates**, increasing scale and providing potentially bigger and more diverse Clients
- Abundance **of local health companies** to partner with
- Also in the public sector consolidation will increase as a result of government strategy to pursue **UHC networks** of service delivery
- Transparent **government procurement** system with electronic procurement processes is in place

## Threats

- **Impact of Covid-19 pandemic** on health sector and economy still uncertain but likely to suppress pace of development in the short term
- UHC policy still a **blackbox** for commercial health care industry
- Islands have difficult **economies of scale**
- **Intense business competition** for the health sector market from countries like China and India which offer value for money products versus quality products from the EU or North America and Japan
- **Migration of health professionals** will continue to contribute to labor market shortages and will put a lid on investments in health infrastructure
- In **2022 Presidential elections** are being held which could change the political landscape and influence speed and direction of health sector reforms
- Long **process of approval for PPP** projects requiring bigger capital outlays
- **Capital costs of digitalization** tend to increase healthcare costs while functionality is low due to slow internet.
- In the public hospitals, the government accounting system prefers pen and paper trails of expenditure that make **digitalization a double burden**



## Business Opportunities

The development of the health sector in The Philippines opens up new business opportunities for Dutch and Philippine health care organizations

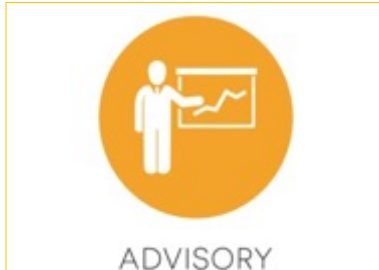
Opportunities are divided in:

- Short-term                      2021-2023
- Medium term                    2023-2026



# Business Opportunities in The Philippines Health Sector - Short Term

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## Advisory Services

Expertise and experts will continue to be in demand in The Philippines in the immediate and medium term. International expertise may be (partly) funded by international development partners and IFIs.

Priority topics include:

- Health financing in particular **hospital financing and costing (DRG)**
- Primary care in particular towards **organization of general practitioners and referral**
- **Planning and design of renovation of existing infrastructure** and new infrastructure are requested.
- **Management support** for consolidation of networks of providers
- Public models of **dental health** care
- **Mobility and road safety:** e.g. Cycling paths (Ongoing project)

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## Medical goods and equipment



- Markets for medical goods and consumables are largely served through imports with a relative large reliance on non-EU markets for **cheap imports of consumables, medical furniture** etc.
- High value products such as for diagnostic imaging still use imports from the EU and the USA.
- **Short-term opportunities mostly in private sector for diagnostics and imaging.**
- Disaster Services are Provided by the National Disaster Risk Reduction and Management Council. There is a **need to modernize Emergency Medical services**
- **Beware:** Public sector does not normally purchase multi-year **maintenance** contracts

## Business Opportunities in The Philippines Health Sector - Medium Term

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### E-Health



The e-health is picking up fast. This creates opportunities in :

- Systems and software solutions for **patient registration and maintenance for patient records**
- Telemedicine
- Software solutions on **scoring data to calculate the likelihood** of illness and other risks. Also in relation to small but growing complementary health insurance markets
- **Pharmaceutical solutions** for stocking, distribution and prescribing medicines
- **Health data analysis services** for the use in public health policy, prescriptions services, HTA
- E-billing
- Software systems for **hospital, laboratory and pharmacy**
- Clinical decision support services



### Medical Education

**Collaboration and partnerships could be interesting in particular in:**

- Standardization and introduction of standards and **protocols** both in primary care and for hospital care
- The Philippines medical universities are open to seek partnerships with established international universities in search for **exchange programs** of students and staff and possibly **accreditation** for specialized care
- Important **teaching hospitals** include the Philippine Heart Centre, the National Kidney and Transplant Institute – one of Asia's leading kidney and liver transplant hospitals – and the Lung Centre

# Business Opportunities in The Philippines Health Sector – Future Directions

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## Strategic areas

The speed and quality of implementation of health reforms as well as macro-economic progress will be crucial for further market opportunities to arise for Dutch companies active in The Philippines. Indicative fields that are expected to become interesting in the medium to longer term future include:

- Construction and equipping of **new health infrastructure in remote areas**.
- Capacity in **emergency and disaster medicine** services
- Population screening programs (e.g. cancer)
- **PPP-construction** of hospitals may become feasible in longer term once experience has been gained with contracting out of services and legal framework is considered robust
- **Prevention and treatment of alcohol and drug abuse** will gain further prominence and Dutch health sector is well-known for its expertise in these areas
- **Regional focus** with emphasis on:
  - Visayas Region like Cebu City and its Suburbs, Iloilo City and suburbs, Bacoloid City and Suburbs.
  - In Mindanao, Davao City, Cagayan de Oro City, General Santos City and Zamboanga City.
  - **But start in Manila!!!**

## International support to The Philippines Health Sector

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The Philippines have been elevated to the status of a Middle Income Country and as such is no longer qualified for donors from OECD countries. Most assistance is provided as soft loans rather than grants or donations.

The top granting agencies include: JICA, (Japan) KOICA, (Korea), USAID, EU, Singapore, China and AUSAID (Australia).

Most of the soft loans incorporate a 30% grant element and a 70% soft loan.

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# Procurement

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## Public Procurement

The government procurement process is mandated by “**Government Procurement Reform Act**,” <https://www.officialgazette.gov.ph/2016/08/29/implementing-rules-and-regulations-of-republic-act-no-9184/>

Several **types of procurement** are distinguished:

- Competitive bidding procedures, in line with international practices, managed by different levels of government according to size and type of procurement
- Public Private Partnerships, governed by BOT-law and managed by the PPP-Centre
- Swiss Challenge, unsolicited proposals, is still legal but increasingly discouraged

## Observations on public procurement

- You can only apply for public sector contracts when a firm has **majority local ownership**. Hence a need to partner with a good local firm
- **Refurbished goods and equipment are not allowed** in the public sector, but common in private sector
- **PPP Centre** is considered good but generally understaffed

## Private sector procurement

- Big chains in private sector are starting **to centralise procurement** increasing scale and scope of procurement but accompanied by increased leverage
- Compared to public sector private sector takes a more **integrated approach to procurement** with less emphasis on detailed requirements for individual items

## Access to Public Procurement - PhilGEPS

notices.philgeps.gov.ph' and 'To view all project requirements and awarded contracts that have been posted in the temporary facility, please click [notices.ps-philgeps.gov.ph](\"http://notices.ps-philgeps.gov.ph\")'. At the top, there is a navigation menu with links: HOME, ABOUT, ANNOUNCEMENT, SERVICES, BULLETIN BOARD, OPEN DATA, LOGIN, SIGN UP, CONTACT US. The bottom of the page has a red and yellow wavy border."/>

**PS-PhilGEPS**   HOME   ABOUT   ANNOUNCEMENT   SERVICES   BULLETIN BOARD   OPEN DATA   LOGIN   SIGN UP   CONTACT US

### Welcome to PhilGEPS

The PhilGEPS is the single, centralized electronic portal that serves as the primary and definitive source of information on government procurement.

To post, search and browse the procurement opportunities, please click  
[notices.philgeps.gov.ph](http://notices.philgeps.gov.ph)

To view all project requirements and awarded contracts that have been posted in the temporary facility,  
please click  
[notices.ps-philgeps.gov.ph](http://notices.ps-philgeps.gov.ph)

◆ SERVICES ◆

## Contact Details – Important government organizations

Organization	Activity	Website	Contact Details
Department of Health	The main body in healthcare in the government	<a href="http://www.doh.gov.ph">www.doh.gov.ph</a>	San Lazaro Compound, Tayuman, Sta. Cruz, Manila, Ph 1003 Telephone No. (632) 8651-7800 DOH Call Center: Telephone No: (632) 8651-7800 local 5003-5004 Email Address: <a href="mailto:callcenter@doh.gov.ph">callcenter@doh.gov.ph</a>
PPP Center NEDA (Public Private Partnership Center National Economic and Development Authority)	The PPP Center is mandated to facilitate the implementation of the country's PPP Program and Projects.	<a href="http://ppp.gov.ph">ppp.gov.ph</a>	8th Floor, One Cyberpod Centris, EDSA cor. Quezon Avenue, Brgy. Pinyahan, Quezon City 1100, Ph Trunk Line: (632) 8709-4146 Email Address: <a href="mailto:info@ppp.gov.ph">info@ppp.gov.ph</a>
Food & Drug Administration	Main Regulatory agency for registration of drugs, medical equipment, supplies & cosmetics	<a href="http://fda.gov.ph">fda.gov.ph</a>	1781 Civic Dr, Alabang, Muntinlupa, 1781 Metro Manila Phone: (02) 8857 1900
PhilHealth (Philippine Health Insurance Corporation)	Single government health insurance agency	<a href="http://philhealth.gov.ph">philhealth.gov.ph</a>	Citystate Centre, 709 Shaw Blvd., 1603 Pasig City, Philippines Callback Channel: 0921-630-0009
KMITS Knowledge Management & Information Technology Service	DOH unit in charge of digital health applications	<a href="https://doh.gov.ph/node/1107">https://doh.gov.ph/node/1107</a>	San Lazaro Compound, Tayuman, Sta. Cruz, Manila, Ph 1003 Telephone No. (632) 8651-7800 DOH Call Center Telephone No: (632) 8651-7800 local 5003-5004 Email Address: <a href="mailto:callcenter@doh.gov.ph">callcenter@doh.gov.ph</a>
NAST National Academy of Science and Technology	Advises the President and the Cabinet on matters related to Science and Technology	<a href="https://www.nast.ph/">https://www.nast.ph/</a>	3rd Level, Philippine Science Heritage Building, DOST Compound, Bicutan, Taguig City, 1631 Contact Numbers: Trunkline: 8-837-2071; 2173 - Office of the Director Official Email: <a href="mailto:secretariat@nast.dost.gov.ph">secretariat@nast.dost.gov.ph</a>
UP NIH University of the Philippines National Institutes of Health	The NIH was created on Jan 26, 1996 by the UP Board of Regents to strengthen the research facility of UP Manila, and serve as an institutional home of a network of researchers and research institutions	<a href="http://nih.upm.edu.ph">nih.upm.edu.ph</a>	National Institutes of Health, University of the Philippines Manila, 623 Pedro Gil Street, Ermita 1000 Manila, Philippines Email Address: <a href="mailto:upm-nih@up.edu.ph">upm-nih@up.edu.ph</a> Telephone Number: +63 2 526 4349 and +63 2 526 4266 +63 2 525
University of the Philippines	The UP is the country's national university. This premier institution of higher learning was established in 1908 & is now a university system composed of 8 constituent universities spread throughout its campuses in the	<a href="https://up.edu.ph/">https://up.edu.ph/</a>	University of the Philippines Quezon Hall, UP Diliman Quezon City 1101 Telephone number: (632)8981-85-00
Philippine General Hospital	The country's leader in transforming the lives of the people through excellent health care, education and research, accessible to all.	<a href="https://www.pgh.gov.ph/">https://www.pgh.gov.ph/</a>	Located in: University of the Philippines Manila Address: Taft Ave, Ermita, Manila, 1000 Phone: (632) 8554 8400



## Contact Details – International and Financial organizations

Organization	Activity	Website	Contact Details
<b>Development Bank of the Philippines</b>	The country's pre-eminent development financial institution, has the strategic task of influencing & accelerating sustainable economic growth, through the provision of resources.	<a href="https://www.dbp.ph/">https://www.dbp.ph/</a>	OFFICE OF THE PRESIDENT & CEO (632)88189511 Office of the Corporate Secretary (632)88938960
<b>Land Bank of the Philippines</b>	Stylized as LANDBANK is a universal bank in the Philippines owned by the Philippine government with a special focus on serving the needs of farmers and fishermen.	<a href="https://www.landbank.com/">https://www.landbank.com/</a>	(+632) 8-405-7000 PLDT Domestic Toll Free 1-800-10-405-7000 Email Address: <a href="mailto:customercare@mail.landbank.com">customercare@mail.landbank.com</a>
<b>ECCP - European Chamber of Commerce of the Philippines</b>	ECCP is a service-oriented organization whose main goal is to foster close economic ties and business relations between the Philippines and Europe.	<a href="http://www.eccp.com">www.eccp.com</a>	Telephone(632)288451324 Email <a href="mailto:info@eccp.com">info@eccp.com</a>
<b>World Health Organization Western Pacific Regional Office</b>	UN Organisation for Health	<a href="https://www.who.int/westernpacific">https://www.who.int/westernpacific</a>	P.O. Box 2932 1000 Manila Tel: +63 2 8528 8001
<b>USAID</b>	USAID partners with the Philippines to drive inclusive economic growth and promote peace and stability.	<a href="https://www.usaid.gov/philippines">https://www.usaid.gov/philippines</a>	Lawrence Hardy II, Mission Director · USAID/Philippines · Annex 2 Building, U.S. Embassy, 1201 Roxas Boulevard, Ermita · Manila · Philippines. Phone +63 (2) 301-6000 Email <a href="mailto:infoph@usaid.gov">infoph@usaid.gov</a>
<b>UNDP</b>	UNDP has been working in the Philippines for over 40 years.	<a href="https://www.ph.undp.org">https://www.ph.undp.org</a>	15th Floor North Tower, Rockwell Business Center Sheridan Street corner United Street Highway Hills, 1554 Mandaluyong City Email: <a href="mailto:communications.ph@undp.org">communications.ph@undp.org</a>
<b>Asian Development Bank</b>	ADB is committed to achieving a prosperous, inclusive, resilient, and sustainable Asia and the Pacific.	<a href="https://www.adb.org">https://www.adb.org</a>	6 ADB Avenue, Mandaluyong City 1550, Metro Manila, Philippines Tel +63 2 86324444 Fax +63 2 86362444
<b>World Bank</b>	Multilateral development bank	<a href="https://www.worldbank.org/en/country/philippines">https://www.worldbank.org/en/country/philippines</a>	David Llorito. Manila. Tel : +63 2 4652512. <a href="mailto:dllorito@worldbank.org">dllorito@worldbank.org</a> ...
<b>Asian Infrastructure Investment Bank</b>	Multilateral development bank focused on developing Asia. Investments in infrastructure and other productive sectors to foster sustainable economic development, create	<a href="https://www.aiib.org/en/about-aiib/index.html">https://www.aiib.org/en/about-aiib/index.html</a>	Asian Infrastructure Investment Bank (AIIB), Tower A, Asia Financial Center, No.1 Tianchen East Road, Chaoyang District, Beijing 100101

## Opportunities & Ongoing Programs of International Development Partners as per 23 April 2021 – Selection -1

2 days ago	<b>Consultancy Services on Universal Health Coverage (UHC)</b>	<a href="#">United Nations (UN)</a>	<a href="#">Philippines</a>	<a href="#">3 May 2021</a>	<a href="#">Tender</a>   <a href="#">Open</a>
2 days ago	<b>Consultancy Services for Behavioral Insights</b>	<a href="#">United Nations (UN)</a>	<a href="#">Philippines</a>	<a href="#">7 May 2021</a>	<a href="#">Tender</a>   <a href="#">Open</a>
6 days ago	<b>Consultancy Services for Universal Health Coverage (UHC) (Local Vendors Only)</b>	<a href="#">United Nations (UN)</a>	<a href="#">Philippines</a>	<a href="#">26 Apr 2021</a>	<a href="#">Tender</a>   <a href="#">Open</a>
9 days ago	<b>Consultancy on Universal Health Coverage (Fifth Tag)</b>	<a href="#">United Nations (UN)</a>	<a href="#">Philippines</a>	<a href="#">26 Apr 2021</a>	<a href="#">Tender</a>   <a href="#">Open</a>
9 days ago	<b>Consultancy on Universal Health Coverage (Knowledge Management)</b>	<a href="#">United Nations (UN)</a>	<a href="#">Philippines</a>	<a href="#">26 Apr 2021</a>	<a href="#">Tender</a>   <a href="#">Open</a>
9 days ago	<b>Consultancy on Universal Health Coverage (UHC)</b>	<a href="#">United Nations (UN)</a>	<a href="#">Philippines</a>	<a href="#">26 Apr 2021</a>	<a href="#">Tender</a>   <a href="#">Open</a>
11 days ago	<b>Consultancy for Service Delivery</b>	<a href="#">United Nations (UN)</a>	<a href="#">Philippines</a>	<a href="#">26 Apr 2021</a>	<a href="#">Tender</a>   <a href="#">Open</a>
19 days ago	<b>COVID-19 Vaccine Perceptions Study in East Asia and the Pacific</b>	<a href="#">United Nations (UN)</a>	<a href="#">Cambodia, China, Fiji, Indonesia, Kor...</a>	<a href="#">4 May 2021</a>	<a href="#">Tender</a>   <a href="#">Open</a>

## Opportunities & Ongoing Programs of International Development Partners as per 23 April 2021 – Selection - 2

10 months ago	<b>Provision of Services, Goods, and Works for COVID-19 Emergency Response (GPN)</b>	<a href="#">Tender</a>   <a href="#">Forecast</a>
<input type="radio"/> World Bank Group	<input type="radio"/> Philippines	<input type="radio"/> Deadline not specified
10 months ago	<b>Provision of Group Health Insurance Services for Government Employees (GPN)</b>	<a href="#">Tender</a>   <a href="#">Forecast</a>
<input type="radio"/> United States Department of State (DOS)	<input type="radio"/> Philippines	<input type="radio"/> Deadline not specified
a year ago	<b>COVID-19 Active Response and Expenditure Support Program in the Philippines</b>	<a href="#">Program</a>   <a href="#">Open</a>
<input type="radio"/> Asian Infrastructure Investment Bank (AIIB) , Asian De...	<input type="radio"/> Philippines	
a year ago	<b>Emergency COVID-19 Response Development Project in the Philippines</b>	<a href="#">Program</a>   <a href="#">Open</a>
<input type="radio"/> World Bank Group	<input type="radio"/> Philippines	
a year ago	<b>Strengthening Active Response and Expenditure Support Against COVID-19 in the Philippines</b>	<a href="#">Program</a>   <a href="#">Open</a>
<input type="radio"/> Asian Development Bank (ADB)	<input type="radio"/> Philippines	
a year ago	<b>Strengthening National Public Health Systems Against COVID-19 in the Philippines</b>	<a href="#">Program</a>   <a href="#">Open</a>
<input type="radio"/> World Bank Group	<input type="radio"/> Philippines	
a year ago	<b>Enhancing Mother, Newborn and Child Health in Remote Areas</b>	<a href="#">Program</a>   <a href="#">Open</a>
<input type="radio"/> Global Affairs Canada (GAC)	<input type="radio"/> Cambodia, Canada, Myanmar, Philippines, Rwanda	
a year ago	<b>Regional: Policy Advice for COVID-19 Economic Recovery in Southeast Asia</b>	<a href="#">Program</a>   <a href="#">Open</a>
<input type="radio"/> Asian Development Bank (ADB)	<input type="radio"/> Viet Nam, Timor-Leste, Thailand, Philippines, Myanmar, Laos, Indonesia, Cambodia	

## Opportunities & Ongoing Programs of International Development Partners as per 23 April 2021 – Selection - 3

a year ago	<a href="#">Program</a>   <a href="#">Open</a>
<b>Supporting Socio-Economic Relief for COVID-19 Impacted Areas in the Philippines</b>	
<input type="radio"/> Asian Development Bank (ADB)	<input type="radio"/> Philippines
a year ago	<a href="#">Program</a>   <a href="#">Open</a>
<b>Health Financing Strengthening Project in the Philippines</b>	
<input type="radio"/> World Bank Group	<input type="radio"/> Philippines
a year ago	<a href="#">Program</a>   <a href="#">Open</a>
<b>Using Digital Technology to Improve National Health Insurance in Asia and the Pacific</b>	
<input type="radio"/> Asian Development Bank (ADB)	<input type="radio"/> Central Asia, East Asia and Pacific, South Asia, Armenia, Bangladesh, Mongolia, Phili...
a year ago	<a href="#">Program</a>   <a href="#">Open</a>
<b>Improving Sexual and Reproductive Health Rights</b>	
<input type="radio"/> Global Affairs Canada (GAC)	<input type="radio"/> Sudan, Philippines, El Salvador, Canada, Bangladesh
2 years ago	<a href="#">Program</a>   <a href="#">Open</a>
<b>Reproductive Health and Empowerment in the Philippines</b>	
<input type="radio"/> Global Affairs Canada (GAC)	<input type="radio"/> Philippines
2 years ago	<a href="#">Program</a>   <a href="#">Open</a>
<b>Sanitation, Water and Hygiene for the Rural Poor in Sub-Saharan Africa, South Asia, and South East Asia</b>	
<input type="radio"/> Foreign, Commonwealth and Development Office (FCD...)	<input type="radio"/> Central Africa, Eastern Africa, South Asia, Southern Africa, West Africa, Brunei Darus...
4 years ago	<a href="#">Program</a>   <a href="#">Open</a>
<b>The Protection and Sustainable Reintegration of Girl Victims of Violence and Sexual Abuse</b>	
<input type="radio"/> Agence Française de Développement (AFD)	<input type="radio"/> Philippines
5 years ago	<a href="#">Program</a>   <a href="#">Open</a>
<b>Social Protection Support Project in the Philippines (Additional Financing)</b>	
<input type="radio"/> Asian Development Bank (ADB)	<input type="radio"/> Philippines

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Netherlands Enterprise Agency is part of the ministry of Economic Affairs and Climate Policy.