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PHARMACEUTICAL & HEALTHCARE ASSOCIATION OF THE PHILIPPINES

Pathways to Inclusive Access: Realizing the Full Potential of Universal Health Coverage in the Philippines

The Philippines Context and Current Challenges

The landmark Universal Health Care law in the Philippines represents a significant stride towards enhancing healthcare equity, access to medicines, and the overall infrastructure of the nation's healthcare system. Passed in 2019, this legislation ensures that every Filipino can access a comprehensive range of quality health services whenever and wherever needed, without the financial burden often associated with medical care. The law's foundational principles emphasize a broad commitment to individual health while also supporting a robust healthcare infrastructure. It aims to streamline both the quality of patient care and the delivery of services, allowing for continuous review and improvement.[1]

Despite significant progress, the COVID-19 pandemic exposed critical vulnerabilities in the Philippine healthcare system, underscoring the urgent need for a more resilient and inclusive health infrastructure. Recognizing that this challenge was shared by many countries, the UN General Assembly convened in 2023, resulting in a political declaration that reaffirmed the global commitment to advancing the Universal Health Coverage (UHC) agenda. This declaration is a renewed commitment to the UHC agenda that lays out the importance of accessible, affordable, and high-quality healthcare for all, with a particular focus on financial sustainability and addressing unmet health needs.[2]

In concert with these goals, the Marcos Administration has indicated a clear commitment to UHC and set forth initiatives that expand PhilHealth coverage, increase healthcare financing and boost healthcare infrastructure, as outlined in the DOH's most recent healthcare financing strategy, which underscores four strategic objectives[3]:

1. Increase public funding for health
2. Strengthen financing of primary care
3. Ensure equitable financing for health services and affordable medicines
4. Promote transparency, accountability, and good governance in health

These strategic objectives set forth by the DOH indicate a promising future for achieving UHC goals. However, despite these advancements, key challenges remain—particularly in prioritizing the harmonization of health information systems, digitization, and their impact on access to essential medicines and innovations.

At present, delays in the HTA process slow the inclusion of medicines in the PNF, while limited epidemiological data further restricts access. These have noticeably begun to impact the timeline and recommendations for PNF inclusion,[4] demonstrating an opportunity for alternative mechanisms for the government to procure innovative, lifesaving medicines outside the PNF in a timely manner.

This situation has become increasingly complex with the introduction of Administrative Order No. 2020-0041, which aligns HTA process with the PNF inclusion procedure.[5] Additionally, cessation of exemption requests under Department Circular No. 2020-0011 has hindered patients' ability to access necessary therapies that fall outside the PNF.[6] For many Filipino patients, this means they may be unable to access the latest, most appropriate medical treatments.

UHC has already made significant developments in the Philippines with increasing health service coverage rates and expanding access to health care for more Filipinos. While progress on UHC goals is evident, there remains potential to advance other critical components of the law.

As DOH continues to make progress on its national strategic objectives, this insight brief outlines key recommendations from the research-based pharmaceutical and healthcare industry on how PPPs can play a pivotal role in fully realizing the tremendous potential of the country's UHC law. This is echoed in the DOH's ACCESS Medicines Framework, which underscores a need to empower non-government actors to engage with government in policy and decision-making processes, ensuring that all systems, whether public or private, contribute to improving medicines access in a way that is responsive to local needs.[7]

Insights and Recommendations

Enhancing Centralized Data Systems

Creating comprehensive data registries and expanding the use of Electronic Health Records (EHR) in the Philippine healthcare system is a crucial step to further advancing the goals of UHC. The use of health information systems can improve service delivery and is mandated by the UHC Act .[8] Yet the current lack of a centralized, standard data repository remains a significant barrier to effective healthcare management because accurate, real-time data on patient health outcomes, disease prevalence, and healthcare service utilization is essential for making informed, evidence-based decisions.[9] Without it, the DOH and other policymakers are hampered in their ability to prioritize interventions and allocate resources efficiently.

Establishing more robust data registries would enable the DOH to make informed decisions about healthcare needs and priorities. The introduction of a unified health information system, as mandated under Section 36 of the UHC Act, is a critical step toward this goal.[10] This system would allow for consistent collection and sharing of patient data across healthcare providers and insurers in real-time, providing a clearer picture of the population's health status.

Leveraging digital health technologies and standardizing data collection can significantly enhance the tracking of health outcomes, disease trends, and healthcare service performance in the Philippines. This system would enable the DOH to monitor healthcare coverage more accurately, identify health disparities, and direct resources to those with unmet needs, ensuring tailored interventions for vulnerable populations.

Improved data collection also optimizes health financing strategies by addressing inefficiencies in fund distribution and ensuring critical health programs reach those in greatest need. This approach is essential for eliminating delays in healthcare delivery and enhancing patient outcomes.

Robust Transparency and Governance in the Use of Data

A collaborative approach involving key stakeholders such as the DOH, PhilHealth, CDHs and LGUs, among other partners, is critical in the development of a transparent national health information system. This system should establish clear standards for data collection, storage, sharing, and usage, in line with the mandates of the UHC Act.[10] The success of these efforts hinges on the establishment of a governance framework that prioritizes accountability and transparency at all levels of data use.

Effective governance mechanisms are also vital to ensure that health resources are allocated fairly, efficiently, and equitably. By tracking service utilization and program outcomes through health data, inefficiencies and mismanagement in healthcare delivery can be identified, prompting corrective measures to optimize resources and improve quality. These measures will help reduce health inequities, improve health outcomes, and foster better decision-making regarding healthcare financing and resource allocation.[11]

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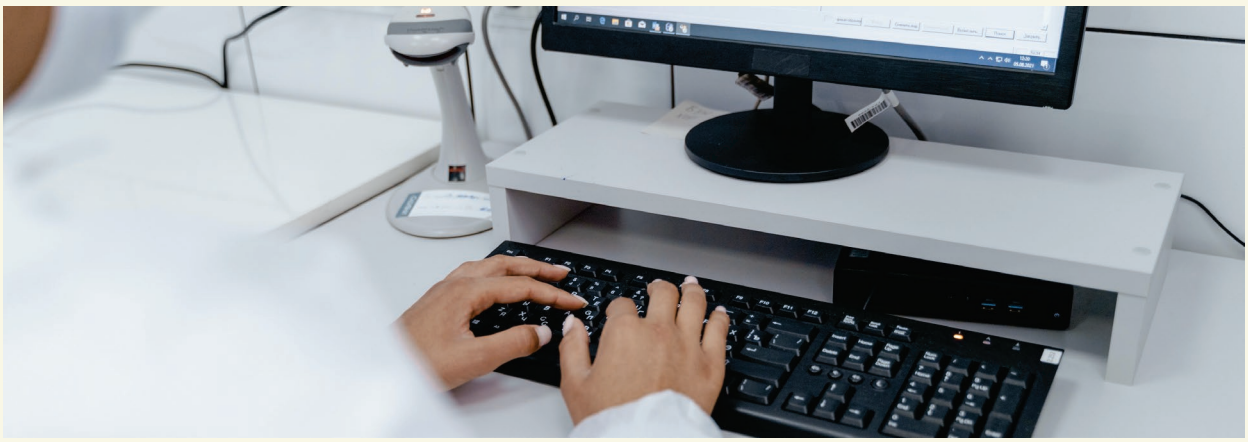

Enhancing Regulatory Decision-Making

Building on the importance of robust data collection and governance, the integration of data and Real-World Evidence (RWE) into healthcare decision-making is increasingly recognized as a powerful tool for accelerating regulatory processes, improving healthcare outcomes, and optimizing resource allocation.[12] Many countries in the ASEAN region have already begun to incorporate RWE and patient perspectives into HTA processes, ensuring that healthcare access aligns with actual population needs and demand.[12]

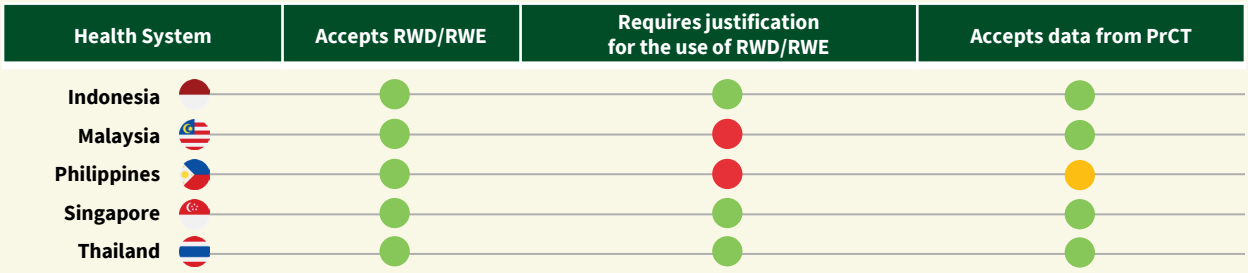

Figure 1: (Lou et al. 477)

Leveraging real-world population-level health data enables the reform of reimbursement models, wherein providers face stronger incentives to deliver better health outcomes at lower costs.

This approach allows providers to focus on health outcomes by[9,19]:

Identifying underserved and unmet needs

Leveraging real-world data to better inform and align resource allocation with national health plans to control costs and optimize limited resources

Creating pathways for sustainable domestic that mirrors actual tangible needs (World Bank).

Case Study:

Importance of Integrated Database to Advance Health Decision-Making: Lessons from Indonesia's RWD and RWE Integration in HTA Process

In 2022, Indonesia's Health Technology Assessment Committee (InaHTAC), revised its Health Technology Assessment (HTA) process to incorporate Real-World Data (RWD) to generate Real-World Evidence (RWE). Typically, HTA processor (InaHTAC) uses various kinds of datasets, including patients' health insurance records and Electronic Medical Records (ERMs). This is conducted to ensure processors receive on-the-ground data on citizen's health, and determine what kind of health treatments they should get, entailing pharmaceutical and medical devices product service.[13]

However, scattered and siloed islands of databases became a constraint. Realizing this, the government, through the Health Omnibus Law introduced in 2023, mandatorized all health data and health information to be stored locally, signifying the importance of centralized and integrated databases to support decision-making process, including that with HTA's RWD and RWE approach. Furthermore, private sectors like the US Agency for International Development's Medicines, Technologies, and Pharmaceutical Services (MTaPS) program also supported the progress, citing the importance of localized data to support healthcare interventions.[14]

Evidence has shown that having reliable data for RWD and RWE not only could make HTA process more cost-efficient by ensuring health technologies are effectively targeted, but also reducing required period of assessment.[13] Hence, a localized and integrated health data that can be leveraged to improve health decision-making finds its importance.

Source: (Hidayat 3, 7) and (USAID MTaPS).

The Philippines Department of Science and Technology (DOST), in collaboration with the University of the Philippines National Institutes of Health – Institute of Clinical Epidemiology, co-developed an HTA guidance document for the use of RWE. Released in December 2024 and finalized in January 2025, this document marks a pivotal step towards a people-centric approach to health system strengthening and reform for resiliency and inclusivity. It explores frameworks and guidelines to synthesize and analyze the long-term usage and outcomes of current healthcare delivery models, providing insights to better inform regulatory decisions. Leveraging real-world population-level health data enables the reform of reimbursement models, wherein providers face stronger incentives to deliver better health outcomes at lower costs.[15]

A unified system would streamline data collection, improve standardization, and enable secure access to real-time epidemiological data, patient outcomes, and medicine utilization patterns. In turn, this can enhance the efficiency and accuracy of HTA processes, allowing for more timely and efficient decision-making. Over time, a robust data repository would not only strengthen RWE integration, but would also improve procurement strategies and long-term health planning.

Improving procurement and supply chain management

The segmentation of patient data often leads to a mismatch between consumption and supply of basic medicines. Essential medicines may frequently run out at local health centers, while underutilized medicines remain in stock and ultimately go to waste. This inefficiency stems from the lack of reliable data that can track real-time health trends, medicine utilization, and patient outcomes.[16]

Currently, the Philippines has limited disease-specific registries, which capture fragmented and inconsistent health data, often focusing on procedural indicators rather than actual treatment effectiveness or demand patterns.[9] Additionally, most data are aggregated only at the provincial level, preventing precise forecasting for procurement and distribution. By establishing a centralized health data repository and further building capacity for the implementation of the Electronic Logistics Management Information System (eLMIS), supply chain management can be optimized.[17] This ensures medicine availability is driven by real-time patient needs and epidemiological insights rather than outdated or incomplete data, thereby improving procurement efficiency, reducing waste, and guaranteeing that essential medicines are available where and when they are needed most.

Enhanced data collection and analysis enable more precise identification of care gaps and resource misallocation. By adopting a transparent, outcome-driven approach to health data, it becomes possible to prioritize urgent health needs, optimize funding allocation, and expand coverage to underserved areas and populations. Ultimately, a robust data infrastructure strengthens the foundation for UHC, ensuring that health interventions are more targeted, efficient, and impactful.

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Working Together: How PHAP Can Help

Amid limited resources and increasing healthcare demands, fostering strategic partnerships between the public and private sectors presents a valuable opportunity to drive innovative solutions and enhance healthcare access for all Filipinos. This call for collaboration has been a strong position of the Marcos Administration.[18] The Pharmaceutical and Healthcare Association of the Philippines (PHAP) and its members are committed and ready to respond to the call of government, dedicated to accelerating the goals of UHC by proposing several key areas of collaboration to advance transparency, accountability, and good governance in health implementation and monitoring.

Key areas for collaboration:

Interoperability in Health Data Systems: PHAP proposes partnering with the DOH and the Department of Information and Communications Technology (DICT) to strengthen the National Health Data Repository Framework by helping to refine and standardize the types of data captured within EMRs, ensuring alignment with global best practices and HTA needs.

Promote Health-Seeking Behavior: PHAP advocates for building community-based strategies to promote health-seeking behavior and utilization of services already in place, ensuring that as more Filipinos access healthcare, their data is captured and NHDR implementation is strengthened.

Digital drug inventories and patient portals: PHAP supports further strengthening the eLMIS to enhance digital drug inventory tracking, thereby ensuring efficient supply chain management. By partnering with DOH, PHAP can contribute pharmaceutical supply chain experience to help improve tracking mechanisms or reporting tools.

Building platforms for PPPs: PHAP advocates for creating avenues for public-private partnerships that facilitate knowledge exchange, foster innovation in health data systems, and support non-traditional collaborations in healthcare. These partnerships can support health data initiatives, enhance medicine access, and improve supply chain efficiencies through co-developed pilot programs and scalable solutions that go beyond traditional PPP service delivery models.

By pooling resources, expertise, and data from both sectors, we can create a more robust and responsive healthcare infrastructure. The public sector brings regulatory frameworks, equity-driven policies, and extensive reach, while the private sector contributes innovation, technology, and efficiency. Together, these sectors can enhance real-time data collection, analysis, and decision-making.

As public and private sectors collaborate to integrate data and insights, they can better minimize shocks to the system and facilitate quicker recovery across entire communities. Real-time, actionable data helps healthcare providers anticipate demand surges, manage resources effectively, and deploy interventions where they are most needed.

PHAP and its members remain committed to the principles of the ACCESS Medicines Framework and are actively supporting initiatives that align with the country's UHC agenda. As the healthcare landscape continues to evolve, PHAP is determined to work alongside stakeholders in advancing a health system that is responsive, inclusive, and sustainable, leaving no one behind in the pursuit of equitable healthcare for all. Through collaborative partnerships and collective action, we can build a healthier, more resilient Philippines for future generations.

Works Cited

1. Co, Pura Angela, et al. "Staying the Course: Reflections on the Progress and Challenges of the UHC Law in the Philippines." *Health Systems & Reform*, vol. 10, no. 3, Nov. 2024, doi:10.1080/23288604.2024.2397829.

2. UN. General Assembly (78th sess.: 2023-2024) and UN. General Assembly (78th sess.: 2023-2024). High-Level Meeting on Universal Health Coverage. "Political Declaration of the High-Level Meeting on Universal Health Coverage:: Resolution /: Adopted by the General Assembly." *United Nations Digital Library System*, 16 Oct. 2023, digitallibrary.un.org/record/4025279?v=pdf&ln=en.

3. Department of Health. "*Health Care Financing Strategy of the Philippines 2023-2028 Towards Universal Health Care.*" Department of Health, 2023.

4. Wong, John, et al. "The Philippine Health Technology Assessment Program: Insights from the Outcome Evaluation." 12 Sept. 2023, doi:10.62986/pn2023.19.

5. Republic of the Philippines Department of Health, and Maria Rivera. "Administrative Order No. 2020-004." *Republic of the Philippines Department of Health*, Administrative Order, 8 Sept. 2020, pp. 1–4, law.upd.edu.ph/wp-content/uploads/2020/09/DOH-Administrative-Order-No-2020-0041.pdf.

6. Republic of the Philippines Department of Health. "*Department Circular No. 2020-0011: Non-Acceptance of Requests for Exemption from the Philippine National Formulary.*" Department of Health, 2020, hta.dost.gov.ph/department-circular-no-2020-0011-non-acceptance-of-requests-for-exemption-from-the-philippine-national-formulary/.

7. Republic of the Philippines Department of Health. "Philippine Medicines Policy 2022-2030." *Philippine Medicines Policy 2022-2030*, 2022, pcrp.org.ph/wp-content/uploads/2023/02/Dr.-Fides-PMP-Presentation_v2.pdf.

8. Philippine Council for Health Research and Development. "Inclusive Innovations for Localized eHealth Platforms: The Smarter and Integrated Local Health Information Systems (SMILHIS) - Philippine Council for Health Research and Development." *Philippine Council for Health Research and Development*, 19 Jan. 2024, www.pchrd.dost.gov.ph/heartnovation/inclusive-innovations-for-localized-ehealth-platforms-the-smarter-and-integrated-local-health-information-systems-smilhis.

9. Hartnett, Jake, et al. "Philippines GVC Reconfiguration Policy Dialogue: A Strategy for Healthcare and Life Sciences in the Philippines." Interview by St. Luke's Medical Center et al., The World Bank, June 2022.

10. Republic of the Philippines. "*Republic Act No. 11223: Universal Health Care Act.*" 20 Feb. 2019, lawphil.net/statutes/repacts/ra2019/ra_11223_2019.html.

11. Javaid, Mohd, et al. "Health Informatics to Enhance the Healthcare Industry's Culture: An Extensive Analysis of Its Features, Contributions, Applications and Limitations." *Informatics and Health*, vol. 1, no. 2, June 2024, pp. 123–48, doi:10.1016/j.infoh.2024.05.001.

12. Lou, Jing, et al. "Real-world Data for Health Technology Assessment for Reimbursement Decisions in Asia: Current Landscape and a Way Forward." *International Journal of Technology Assessment in Health Care*, vol. 36, no. 5, Sept. 2020, pp. 474–80, doi:10.1017/s0266462320000628.

13. Hidayat, Budi. "Evolution of Health Technology Assessment in Indonesia: Supply Landscape, Implementation, and Future Directions." *Health Systems & Reform*, vol. 9, no. 3, Dec. 2023, doi:10.1080/23288604.2024.2371470.

14. MTaPS Program. "Improving Public Health Decision-Making Using Real-World Evidence in Indonesia." MTaPS Program, 11 Apr. 2023, www.mtapsprogram.org/news-blog/improving-public-health-decision-making-using-real-world-evidence-in-indonesia/.

15. Tan-Lim, Carol Stephanie C., et al. "Philippine Guidance Document on the Use of Real-World Evidence for Clinical Assessment of Health Technologies." 2024, hta.dost.gov.ph/wp-content/uploads/2024/12/For-Public-Consultation-HTA-Methods-Guide-for-the-use-of-Real-World-Evidence-PDF-1-1.pdf.

16. Martin, Elia, et al. "The Effect of Health Supply Chain System Data Quality on Supply of Malaria Commodities in Lower-level Health Facilities in Kinondoni Municipal, Tanzania. A Longitudinal Study." *Research Square (Research Square)*, Apr. 2023, doi:10.21203/rs.3.rs-2600478/v1.

17. Milulu, Anwar, et al. "Electronic Logistic Management Information System in Public Health Facilities and Its Implications for the Medicine Supply Chain in Singida District Council, Tanzania." *Pharmacy*, vol. 12, no. 4, July 2024, p. 112, doi:10.3390/pharmacy12040112.

18. Galvez, Daphne. "Bongbong Marcos Wants PPP for Healthcare, Improved Digitalization | Inquirer News." *INQUIRER.net*, 26 Nov. 2022, newsinfo.inquirer.net/1697957/bongbong-marcos-wants-ppp-for-healthcare-improved-digitalization.

19. Roberts, Melissa H., and Gary T. Ferguson. "Real-World Evidence: Bridging Gaps in Evidence to Guide Payer Decisions." *PharmacoEconomics - Open*, vol. 5, no. 1, June 2020, pp. 3–11, doi:10.1007/s41669-020-00221-y.