Improving Access to Medicines Project in the Philippines – the Palawan Pilot: A Public-Private Partnership in Addressing Accessibility, Availability & Affordability

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Context: Healthcare Landscape in the Philippines

• Philippine health status indicators lags behind most of South-East and North Asia in terms of health outcomes.
• Rapid improvements were seen during the last three decades but these have slowed in recent years.
• Infant and child mortality is almost double of Vietnam.
• Incidence of communicable diseases is declining, non-communicable diseases (NCDs) are growing.
• Devolution highly fragmented the health system brought about by poor coordination between policy makers and implementation.
Background of the Project: Global Initiative

• CEO Roundtable of multinational pharmaceutical companies wants to improve access to medicines by engaging in several work streams, one of them being the Access and Affordability Working Group (AAWG)

• Several of these companies (MSD, Novartis, Pfizer, and Sanofi) with Bill and Melinda Gates Foundation, carried out researches and series of consultations

• Develop a pilot project to “test the feasibility of creating the public policy conditions that would facilitate the broader use of differential pricing intra-country to make innovative medicines more affordable to low- and middle-income patients.”

• This is to be piloted in three countries - Ghana, Peru, and Philippines
Background of the Project: Philippines Pilot

- Candidate country assessment – done in 2011
- Findings showed Priority issues confronting the Philippines are:
  1. Under spending for health and low financial risk protection contributing to inequity in health care access,
  2. Insufficient access to quality health care and health information,
  3. Insufficient access to low cost, safe, and quality essential medicines, and
  4. Attainment of health-related MDGs and other health outcomes.
Background of the Project: Philippines Pilot

- The Philippine country offices of the four MNCs and BMGF established close relationship with key stakeholders including DOH, PhilHealth, City of Puerto Princesa and Provincial Government of Palawan, and several NGOs to roll-out the pilot project to Improve Access to Medicines in the Philippines.

- Palawan was selected because it represents a microcosm of the Philippines in terms of geography and demographics.

- A Raid Appraisal of the Health Situation in Palawan was commissioned in 2011 (Access to Medicines and Perspectives 2011 by Acuin CS, et. al.)
Findings

Limited access to medicines key driver of poor health outcomes

**Palawan faces significant health challenges**

- **Health outcomes are below national average**
  - Performance with regard to mortality and morbidity: Ranks 73rd out of 80 provinces in life expectancy
  - Maternal mortality and infant death rate are particularly high

- **Non-communicable diseases continue to rise**
  - Diabetes, cerebrovascular diseases, heart disease, and hypertension

- **Most common causes of mortality and morbidity are treatable with medicines**
  - Acute respiratory infections, influenza, malaria, pneumonia, and heart diseases
  - However, many prevalent causes of maternal and child ill-health are not treatable with medicines

**Limited access to health services and medicines key driver of poor health outcome**

- Major gaps in stock keeping in public outlets: essential medicines only available 33% of the time; only 20%-30% of all prescriptions filled though the public sector

- PhilHealth-covered medicines often not available in authorized outlets

**Result:**
Many low-income patients have no access to health services (incl. insurance) and go untreated or face high out-of-pocket expenses for medicines

**Improving access to medicines for wide range of diseases alone can help address health challenges in Palawan**
What are the Problems in Palawan?

Access to medicines limited by inter-linked factors

- Forecasting and planning
- Weak supply chain infrastructure
- Challenges of geographic access
- Human resource limitations

Lack of availability in public health facilities drives patients to higher cost alternatives

- Forecasting and planning
- Weak supply chain infrastructure
- Challenges of geographic access
- Fragmented procurement
- Limits to Phil-Health coverage
- Limited budgets

Higher costs along the supply chain limit purchases and reduce availability
Strategic Framework

Defining and creating the environment where differential pricing makes an impact

Project Outcome

Availability
- Distribution Model
- Procurement Process (DOH/DBM)
- Supply chain / forecasting

Access
- Health human resources/ nurses & facilities
- Capabilities
- Services/ Delivery

Quality & Affordability
- Create IT infrastructure & reports (monitoring)
- Ensure transparent, controlled and manageable access channels for discounted medicines
- Propose relevant medicines at discounted prices (MDGs / others)

What are the gaps? Who are responsible to bridge gaps? Which gaps can be addressed to make strongest impact?

Plus Component

Differential Pricing
Project Principles

• Impact on key health issues
• Acceptability
• Practicality
• Replicability
• Range of medicines
• Coverage of target patients
• Reach
• Control of potential risk factors
• Respect of company independence
Operating details (Proposed)

• Pilot project will work with partners to create a system to segment and identify target patients.

• Allow these patients to take advantage of a public policy environment that facilitates the provision of differentially priced medicines at participating access points.

• Access points will be provincial hospital pharmacies.

• Target patients will be provided with cards and/or specialized prescription.

• When patient is ill and prescribed medicine not covered by PhilHealth, they may visit access points and present card and/or prescription to the pharmacist.

• The pharmacist will check if the prescribed medicine is included as part of the program, the agreed differential price will be charged to the patient.

• The manufacturers will then work directly with the pharmacies to reconcile based on voluntary and independently negotiated agreements.
Supporting initiatives

• Bringing on board channel partners
• Identifying target population and providing them with proof of eligibility
• Establishing IT systems to monitor transactions
• Developing system strengthening initiatives to address other healthcare impediments which could derail success of the pilot
Project success requires additional initiatives to improve accessibility beyond differential pricing

Additional initiatives will ensure core pilot program success

- Improve *medicines availability* in public hospitals
- Improve *forecasting* through capacity building and simple IT tracking systems
- Increase *investments in healthworkers* through DOH

Key interventions will focus on improving supply chain

- Improve *supply chain processes* by working with DOH, Provincial Health Office and hospital administrators to streamline ordering and decrease stock-outs
- Identify and address *transportation/distribution* bottlenecks and inefficiencies

Education and awareness also important

- *Educate* social services officers, hospital administrators, prescribers and patients on pilot program
At the end of the project...

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<thead>
<tr>
<th>General Objective</th>
<th>Measure the effects of health systems strengthening activities and differential pricing of medicines for identified priority diseases in Palawan on health outcomes for the target population during a two year pilot project.</th>
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<tbody>
<tr>
<td>Specific Objectives</td>
<td>Key Activities</td>
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<tr>
<td>Identify and enroll pilot study target populations</td>
<td>Define geographic coverage areas for pilot study target population</td>
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<td>Identify the poorest population segment to be enrolled in the pilot project.</td>
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<tr>
<td></td>
<td>Identify the other population segments to be enrolled in the pilot project.</td>
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<td>Develop a system to identify and track target populations</td>
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<td>Target population enrolled</td>
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<td>Ensure continuous availability of medicines for the identified priority diseases in project access points</td>
<td>Conduct a comprehensive supply chain evaluation and identify target areas for improvement.</td>
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<td>Build human capacity for supply chain management.</td>
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<td>Improve system capacity for stock management, forecasting and supply chain management.</td>
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<td>Strengthen patient management for the identified priority diseases in pilot facilities</td>
<td>Update clinical practice guidelines for the identified priority diseases management.</td>
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<td>Increase the capacity to provide high quality care for the identified priority diseases in pilot health facilities.</td>
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<td>Support existing and/or establish routine monitoring of patients with the identified priority diseases at pilot facilities.</td>
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<td>Establish facility level registries for the identified priority diseases.</td>
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<td>Improve health outcomes among patients with identified priority diseases</td>
<td>Increase awareness in the target population on the identified priority diseases</td>
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<td>Increase availability of medicines for the identified priority diseases to target populations</td>
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<td>Increase affordability of medications selected for differential pricing</td>
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<td>Improve treatment regimen adherence among patients with the identified priority diseases.</td>
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Maraming Salamat Po!
# Project Profile

## Improving Access to Medicine in Palawan

<table>
<thead>
<tr>
<th>Title:</th>
<th>Improving Access to Medicines in Palawan Project (Pilot Project)</th>
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<tbody>
<tr>
<td>Timeframe:</td>
<td>3 years (2012 – 2014)</td>
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<td>Site:</td>
<td>5 Municipalities in Palawan (PP, Brook’s Point, Narra, Roxas and Coron)</td>
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| Beneficiaries:              | • Palawan Population Class C-/D/E  
• Health Facilities (4 Public Hospitals, 6 Private Hospitals and 25 Private Pharmacies)  
• Palawan PHO |
| Disease Coverage:           | 1. NCDs: Hypertension & Diabetes  
2. MDG 4 & 5 related: Preeclampsia & infant pneumonia |
| Fund Source:                | Novartis, MSD, Sanofi, Pfizer & Gates Foundation  
Leverage resources with DOH, PhilHealth, Palawan Province and Puerto Princesa City |
| Partners:                   | DOH, PhilHealth and LGUs of Palawan, PBSP, HFI, UP-NIH        |