

Philippine Institute for Development Studies**TERMS OF REFERENCE****Senior Research Specialist¹****for****PIDS-DOH-PHIC TECHNICAL ASSISTANCE ON THE UHC PROVIDER PAYMENT REFORMS IN 2023: Development of Diagnosis-Related Group (DRG) payment rates and Provider Payment Mechanism Monitoring and Evaluation Framework for PhilHealth****I. Background and Rationale**

With the enactment of the Universal Health Care law, the Philippine Health Insurance Corporation (PhilHealth) has been empowered to be the national strategic purchaser of individual-based health services. A critical health provider payment mechanism (PPM) reform that PhilHealth must implement under the Universal Health Care (UHC) Law is the Diagnosis Related Groupings (DRGs). The DRGs are a step forward to move the current all-case rate system from retrospective payments based only on service outputs to value-based payments that incentivize quality, efficient, and equitable care and improve health at lower costs for the health sector and patients.

Moreover, such complex reform requires that PhilHealth maintain the DRGs and other PPM systems over the long-term. This requires improving PhilHealth data quality and monitoring frameworks and plans to evaluate whether these reforms achieve its goals for value-based purchasing. On both these fronts, PIDS will be assisting PhilHealth in the development of DRG payment rates and the monitoring and evaluation framework for the DRGs and future PPMs.

II. Objectives**A. DRG Rate-Setting Analysis**

1. Document the process for and calculate DRG v0 base rates, charge weights, adjustment factors, economic homogeneity metrics, complexity level evaluation, hospital case mix distributions, and financial impact of DRGs to PhilHealth and providers.
2. Identify recommendations to enable PhilHealth to adopt and use the Thai DRG to pay hospitals in the near future (i.e., DRG version 1)

B. Monitoring and Evaluation

3. Craft a monitoring framework and plan for assessing the effects of DRG and other PPM reforms on the quality, efficiency, and equitability of hospital care.
4. Using hospital statement of accounts / itemized billing data:
 - a. Calculate standardized room charges and validate against e-claims charges
 - b. Determine quality of care and price of services for two diseases

¹ The Consultant may be an individual or a firm.

III. Objectives of the Consultancy

The recent developments of the project necessitate the engagement of a technical consultant to draft policy notes and to update the Monitoring and Evaluation Manual of the project. These specific technical outputs expected from PIDS can be satisfactorily and promptly met through the inputs coming from field experts.

IV. Scope of Work, Deliverables, and Schedule of Payment Releases

Under the guidance and technical oversight of a PIDS Research Fellow who serves as the Project Director, the Consultant is expected to work with the Project Team and undertake the following tasks/activities²:

1. Draft, write, conduct necessary literature reviews under the supervision of a health policy and financing consultant, the following documents:
 - a. Inception report/s for the upcoming 2024 grants for further work in DRGs and provider payment mechanism reforms
 - b. Updates to the Monitoring and Evaluation Manual given shadow billing experience
 - c. Four (4) policy research papers or notes for health financing considerations and decisions relating to the implementation of DRGs
 - d. Slide decks corresponding to each policy note
2. Prepare for, attend, and present at internal workshops/meetings or client meetings with PhilHealth, DOH, and other stakeholders, as necessary.
3. Sign a Non-Disclosure Undertaking with PIDS. Any information gathered and generated in the implementation of the project shall be processed subject to the applicable provisions of the Republic Act No. 10173, known as the “Data Privacy Act of 2012” and its Implementing Rules and Regulations and relevant issuances of the National Privacy Commission (NPC).
4. Perform such other professional, highly technical, and confidential duties and responsibilities as the Research Fellow may assign from time to time.

The Consultant will prepare the following outputs based on the schedule below:

Activities and Deliverables	Due Dates	Payment Tranches
Inception Report following PIDS template including <ul style="list-style-type: none"> ● Proposed work plan for items 1a to 1d ● Literature review on PPMs and multi-payer health financing systems 	1 or 2 week/s after contract signing	10%

² If the Consultant needs to undertake physical/face-to-face interviews and data collection and related activities, the Consultant has to ensure compliance with existing and future policies, rules, and resolutions as may be issued by concerned government agencies pertaining to health and safety.

Progress Report, including <ul style="list-style-type: none"> Literature review and assigned sections of Inception Report/s for the upcoming 2024 grants for further work in DRGs and provider payment mechanism reforms 	1 month/s after contract signing	15%
Progress Report, including <ul style="list-style-type: none"> Draft of one (1) policy note 	2 month/s after contract signing	15%
Progress Report, including <ul style="list-style-type: none"> Draft of two (2) policy note 	3 month/s after contract signing	15%
Progress Report, including <ul style="list-style-type: none"> Updates to the Monitoring and Evaluation Manual given shadow billing experience Draft of one (1) policy note Draft of slide decks 	4 month/s after contract signing	15%
Inputs to Draft Report³, including <ul style="list-style-type: none"> Necessary revisions for all outputs listed under scope of work 1a to 1d 	5 month/s after contract signing	15%
Terminal Report Inputs to Final Report⁴ <ul style="list-style-type: none"> Addressing comments to the Draft Report and comments Final versions of all outputs listed under scope of work 1a to 1d <p>Turnover of draft and materials used together with Certification indicating the turnover of as well as the deletion of such data and that it will allow PIDS to verify if the data is complete</p>	6 month/s after contract signing	15%

NOTE: Payments will be based on the acceptance and approval by PIDS of the corresponding outputs

V. Qualifications of the Consultant

Education	Master's Degree in epidemiology, public health, health policy, or related fields
Experience	At least 3 years of experience as a research analyst in public health, health systems, or health policy.
Competencies	<ul style="list-style-type: none"> Intermediate level core competencies: deliverability/ results-oriented, professionalism, adaptability, and communication skills

³ For applicable outputs, the draft and final reports submitted by the consultants should be aligned with the following guidelines: PIDS' Guide in the Preparation of Manuscript for Publication and General Guidelines in Preparing and Formatting a PIDS Discussion Paper, Guidelines in the preparation of Policy Notes.

⁴ For research outputs that will be released as a PIDS Discussion Paper (DP), the consultant shall prioritize the publication outlets of PIDS, particularly the peer-reviewed Philippine Journal of Development (PJD) and Research Paper Series (RPS). If the DP is not selected by PIDS Management for publication either as a PJD article or an RPS issue, the consultant may identify other dissemination outlets outside of PIDS. Guidelines for Authorship in PIDS Research Projects shall apply.

	<ul style="list-style-type: none"> Intermediate level functional competencies: qualitative data gathering; dissemination; and technical writing
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VI. Project Duration

The engagement will commence upon the signing of the contract until **October 31, 2024**, on a part-time basis. The Consultant’s work must be completed within this period, and no man days will be chargeable after this date.

VII. Approved Budget for the Contract

The approved budget for this consulting service is up to **PHP 468,600.00**, depending on the qualifications. This amount does not include travel and accommodation during fieldwork. PIDS will shoulder the cost of fieldwork (if any). PIDS shall not cover hospitalization and other COVID-related health expenses of the consultant as no employer-employee relationship exists between the PIDS and the Consultant.

VIII. Evaluation Criteria

a. Evaluation Criteria:

Applicant consultants will be evaluated based on the following criteria:

<p>Consultant Qualifications</p> <p><i>Education</i></p> <ul style="list-style-type: none"> Master’s Degree in epidemiology, public health, health policy, or related fields <p><i>Training and Experience</i></p> <ul style="list-style-type: none"> At least 3 years of experience as a research analyst in public health, health systems, or health policy. <p><i>Competencies</i></p> <ul style="list-style-type: none"> Intermediate level core competencies: deliverability/ results-oriented, professionalism, adaptability, and communication skills Intermediate level functional competencies: qualitative data gathering; dissemination; and technical writing 	50%
<p>Plan of approach and methodology:</p> <p>a. Clarity, feasibility, innovativeness, and comprehensiveness of the approach</p> <p>b. Incisive interpretation of problems and reflection on suggested solutions</p>	50%
Total	100%

b. Detailed rating sheet (see attached file)

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