



REQUEST FOR PROPOSAL

1. The Philippine Institute for Development Studies (PIDS) invites all eligible individual consultants to submit proposals for the **Organization Development Consultant/Firm for Universal Healthcare (UHC) Provider Payment Reforms in the 2023 Comprehensive Outpatient Benefit Package and Coordinated Approach to Community Health Towards UHC Project: Baseline Assessment of the Implementation of Provider Payment and Outpatient Benefit Reforms in the Philippines.**
2. The Approved Budget for the Contract (ABC) is **PhP596,400.00.**
3. Interested consultants must submit the following documents using PIDS the prescribed forms:
 - a) Curriculum Vitae of the proposed Consultant(s)¹
 - b) Technical Proposal Form¹
 - c) Financial Proposal Form¹
 - d) Filled out Data Privacy Notice and Personal Data Protection Form¹
 - e) Statement of Completed contracts²
 - f) Statement of All Ongoing and Awarded But Not Yet Started Contracts²
 - g) Notarized Omnibus Sworn Statement (for ABC above PhP50,000.00)¹
 - h) Income/Business Tax Returns (for ABC above PhP500,000.00)¹
 - i) PhilGEPS Registration Number (certificate or screenshot)¹
 - j) Valid Mayor's/Business Permit (Firm) or BIR Certificate of Registration³ (Individual).
4. Interested consultants may obtain further information from the Procurement Management Division at telephone via email at procurement@pids.gov.ph.
5. The Institute shall adopt the Quality-Based Evaluation procedure in selecting consultants based on the attached Terms of Reference.
6. The deadline for submission of proposals is on **14 October 2024 (5:00 PM)** addressed to:

The BAC Chairperson for Consultancy
Services c/o The BAC Secretariat
Procurement Management Division
18/F Three Cyberpod Centris – North Tower, EDSA cor. Quezon Ave., Quezon City

Proposals may also be submitted through email at procurement@pids.gov.ph.
7. PIDS reserves the right to reject any or all of the proposals, declare a failure of bidding, or not award the contract if there is evidence of collusion, including any act that restricts, suppresses, or nullifies competition, or if there is a failure to follow the prescribed bidding procedures. PIDS also reserves the right to waive any required formality in the proposals received and select the proposal it determines most advantageous to PIDS.


DR. VALERIE GILBERT T. ULEP
Chairperson
PIDS-BAC for Consultancy Services

Reference No.:2024-315 (Re-post)

¹Applicable for individual consultants and firms

²Applicable for firms only

³ Individual consultants must issue Official Receipt (OR) during payment.

Philippine Institute for Development Studies
TERMS OF REFERENCE

Organization Development Consultant/Firm for
Universal Healthcare (UHC) Provider Payment Reforms in the 2023 Comprehensive
Outpatient Benefit Package (COBP) and Coordinated Approach to Community Health
Towards UHC (CATCH) Project: Baseline Assessment of the Implementation of
Provider Payment and Outpatient Benefit Reforms in the Philippines¹

1. Background and Rationale

Universal Health Coverage (UHC) is a global goal that ensures that everyone can access essential health services without financial hardship. To achieve this, the Universal Health Care Act of 2019 was passed in the Philippines. This Act mandates the Philippine government to take significant steps towards achieving UHC by expanding access to quality healthcare services, especially for the poorest and most vulnerable communities. This includes PhilHealth adopting Disease-Related Group (DRG) and capitation in paying for inpatient and outpatient care services, respectively. The DRG-based system classifies inpatient hospital cases based on similar clinical characteristics and resource utilization. DRG-based payment systems can incentivize hospitals to focus on patients with less complex diagnoses, who are more likely to be assigned to higher-paying DRGs. Currently, this payment reform is one of the most commonly used systems to reimburse hospitals for their services based on these classifications.

This study operationalizes the evaluation of provider payment reforms and the expansion of outpatient health insurance (i.e., KONSULTA) under the UHC Act (2019). The Department of Health (DOH) and PhilHealth plan to pilot DRGs implementation and outpatient benefit package (which uses a capitation payment system) in select provinces in the country under the CATCH Program by the third to the fourth quarter of 2023. Hence, assessing whether these provider payment reforms will impact health sector goals (i.e., improve efficiency, quality, and equity of healthcare services), at least in pilot sites, is critical.

2. Objectives

Generally, the objective of the study is to conduct a baseline assessment of the local health system in the eight (8) CATCH pilot sites (control and intervention provinces).

Specifically, the study aims to:

- a. Develop a comprehensive framework as the lamppost for evaluating province-wide health sector reform under the UHC Act. This will inform the development of tools for the baseline assessment survey of population, healthcare providers, and facilities.
- b. Conduct baseline assessment in the four (4) pilot sites and four (4) control sites of the CATCH program capturing the following broad health indicators on the following domains:
 - a. Population-level
 1. Health outcomes (e.g., self-rated health or HRQL)
 2. Perception of need, including health literacy
 3. Healthcare access, coordination, and integration dynamics
 4. Health expenditures and financial protection,

¹ The consultant may be an individual or a **firm**.

5. Quality of care
 - b. Healthcare facilities, including leaders
 1. Supply-side readiness
 2. Staffing patterns
 3. Facility financing (e.g., revenue sources and expenditure)
 4. Management and leadership dynamics (e.g., talent and performance management),
 5. Multi-sectoral programs
 6. Quality of care (including patient safety)
 7. Patient load
 - c. Provider behaviors
 1. Compensation, benefits, and welfare
 2. Referral and coordination practices
 3. Quality of care

3. Objectives of the Engagement

As part of the financing reform efforts by PhilHealth and the DOH, there is a need to establish a case-mix unit outside of PhilHealth to guide the development of DRG rates and the COBP benefit package. **Under the 2023-2024 DOH-PIDS Project**, PIDS served this role by developing initial base weights, analyzing PhilHealth data, and preparing a manual for DRG implementation. Health researchers at PIDS have recommended developing the needed governance and organizational structure for the sustainability of such a function, which includes defining the necessary health human resources and technical skills to ensure the successful implementation of DRG and COBP by PhilHealth and DOH. To achieve this, engaging an **Organizational Development** consultant/firm is proposed. The consultant/firm will assist the health team in designing the organizational structure, including the required human resource complement and technical skills.

4. 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/firm is expected to work with the Project Team and undertake the following tasks/activities:²

1. Propose an organizational development plan anchored on strengths-based frameworks. This plan will serve as input into the proposed organizational structure of the technical unit that guides PhilHealth and DOH in implementing DRG and COBP.
2. Conduct strengths workshops and coaching sessions for PIDS health researchers and PhilHealth members to assess their strengths and challenges in carrying out their activities/functions and develop customized plans for potential improvement.
3. Conduct strategy workshops with selected PIDS health researchers to align on the overall goal of providing technical guidance to PhilHealth and DOH in the implementation of DRG and COBP.
4. Provide and prepare the necessary assessment and workshop materials required.

² If the Consultant/Firm needs to undertake physical/face-to-face interviews and data collection and related activities, the Consultant/Firm 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.

5. 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); and
6. Perform such other professional, highly technical, and confidential duties and responsibilities as the Research fellow may assign from time to time.

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

Activities and Deliverables	Due Dates	Payment Tranches
Inception Report - including the Work Plan on all the activities in the Scope of Work	October 30, 2024 (Month 1)	15%
Progress Report – including <ul style="list-style-type: none"> - Organizational Development Plan - Workshop and coaching session design - Progress status on all the activities in the Scope of Work including workshop and coaching session plans - Assessment report status 	November 30, 2024 (Month 3)	50%
Final Assessment Report ³ Terminal Report – including all accomplishments on all the activities in the Scope of Work Turnover of data and materials used, including workshop and coaching session documentation, together with Certification indicating the turnover of data as well as the deletion of such data and that it will allow PIDS to verify if the data is complete	December 15, 2024 (Month 4)	35%

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

5. Qualifications of the Consultant/Firm

Applicable experience of the Consultant/Firm	<ul style="list-style-type: none"> • At least 7-10 years of professional experience in organization development workshops, assessments and other relevant fields
Qualifications of the Consultant/Firm	<ul style="list-style-type: none"> • With at least two (2) resource persons with: <ul style="list-style-type: none"> ○ Education: At least Master’s Degree in education, communication, business administration, public health, or related fields ○ Experience: At least 2-3 years of professional experience

³ This covers the assessment results from the workshops and coaching sessions with participants, highlighting their strengths, technical skills in performing tasks, and areas for potential improvement.

6. Project Duration

The engagement will commence upon the signing of the contract until **December 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.

7. Approved Budget for the Contract

The approved budget for this consulting service is up to **PHP 596,400.00**, 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 Firm as no employer-employee relationship exists between the PIDS and the Firm.

8. Evaluation Criteria

a. Evaluation Criteria


Prospective consultants will be evaluated based on the following criteria:

<p>Qualifications</p> <p>Applicable experience of the Consultant/Firm</p> <ul style="list-style-type: none"> • At least 7-10 years of professional experience in organization development workshops, assessments and other relevant fields <p>Qualifications</p> <ul style="list-style-type: none"> • With at least two (2) resource persons with: <ul style="list-style-type: none"> ○ Education: At least Master's Degree in education, communication, business administration, public health, or related fields ○ Experience: At least 2-3 years of professional experience 	50%
<p>Plan of approach and methodology;</p> <ul style="list-style-type: none"> • Clarity, feasibility, innovativeness, and comprehensiveness of the approach • Incisive interpretation of problems and reflection on suggested solutions 	50%
<p>Total</p>	100%

b. Detailed rating sheet (see attached file)


SIGNATURE REDACTED
Prepared by: **VALERIE GILBERT T. ULEP**
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SIGNATURE REDACTED
Reviewed by: **CHRISTINE P. SALAZAR**
Division Chief II, RPMD


SIGNATURE REDACTED
Approved by: **RENEE ANN JOLINA C. AJAYI**
Department Manager III, Research Services

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Ann Jolina Catibog
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