




## REQUEST FOR PROPOSAL

1. The Philippine Institute for Development Studies (PIDS) invites all eligible individual consultants to submit proposals for the **Costing and Health Financing Consultant for DOH-PHIC-PIDS Technical Assistance on the UHC Provider Payment Reforms for 2024: Diagnosis-Related Groups, Comprehensive Outpatient Benefit Package, and the Center for Healthcare Finance and Economics.**
2. The Approved Budget for the Contract (ABC) is **PhP616,000.00.**
3. Interested consultants must submit the following documents using PIDS the prescribed forms:
  - a) Curriculum Vitae of the proposed Consultant(s)<sup>1</sup>
  - b) Technical Proposal Form<sup>1</sup>
  - c) Financial Proposal Form<sup>1</sup>
  - d) Filled out Data Privacy Notice and Personal Data Protection Form<sup>1</sup>
  - e) Statement of Completed contracts<sup>2</sup>
  - f) Statement of All Ongoing and Awarded But Not Yet Started Contracts<sup>2</sup>
  - g) Notarized Omnibus Sworn Statement (for ABC above PhP50,000.00)<sup>1</sup>
  - h) Income/Business Tax Returns (for ABC above PhP500,000.00)<sup>1</sup>
  - i) PhilGEPS Registration Number (certificate or screenshot)<sup>1</sup>
  - j) Valid Mayor's/Business Permit (Firm) or BIR Certificate of Registration<sup>3</sup> (Individual).
4. Interested consultants may obtain further information from the Procurement Management Division at telephone via email at [procurement@pids.gov.ph](mailto: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 **28 January 2025 (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](mailto: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. AUBREY D. TABUGA**  
Chairperson  
PIDS-BAC for Consultancy Services

Reference No.:2025-020

<sup>1</sup>Applicable for individual consultants and firms

<sup>2</sup>Applicable for firms only

<sup>3</sup> Individual consultants must issue Official Receipt (OR) during payment.

**Philippine Institute for Development Studies**  
**TERMS OF REFERENCE**

**Costing and Health Financing Consultant<sup>1</sup>**

for

**DOH-PHIC-PIDS Technical Assistance on the UHC Provider Payment Reforms for 2024: Diagnosis-Related Groups, Comprehensive Outpatient Benefit Package, and the Center for Healthcare Finance and Economics<sup>2</sup>**

**1. 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's 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 for the DRGs and PPMs.

**2. Objectives of the Study**

1. Monitoring and Evaluation (M&E) for (a) trends in health care utilizations across the life course and (b) assessment baseline trends for quality, and equity of DRGs and other PhilHealth benefits and reforms
2. Policy Support and recommendations for DRGs and related PPM reforms in (a) health financing policy and gaps, (b) policy decisions to use DRG for actual reimbursement, (c) health data policy standards and gaps
3. Charge Analysis and Costing Methodology: (a) Analysis of charge data and development of charge libraries, (b) Review and revision of PhilHealth costing methodologies, policies, and forms
4. DRG Rate-setting calculation and documentation of the development process

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<sup>1</sup> The Consultant may be an individual or a firm.

<sup>2</sup> This engagement will be charged against the study DOH-PHIC-PIDS Technical Assistance on the UHC Provider Payment Reforms for 2024: Diagnosis-Related Groups, Comprehensive Outpatient Benefit Package, and the Center for Healthcare Finance and Economics.

5. Capacity building for PIDS, PhilHealth, DOH, providers, and other stakeholders: (a) Technical capacity building for DRG implementers, (b) Communication of DRG and PPM reforms to providers and the public
6. Comprehensive Outpatient Benefit Package (COBP): Classification of services according to PhilHealth COBP design and National Practice Guidelines (NPG)

### 3. Objectives of the Consultancy

The recent developments of the project necessitate the engagement of a technical consultant experienced in costing PhilHealth benefits to guide the revision in PhilHealth costing methodology. A more senior technical consultant is also necessary to assist in conducting and writing policy research to review the multiple health financing streams within the Philippines' multi-payer context. The specific technical outputs expected from PIDS can be satisfactorily and promptly met through the inputs coming from field experts.

### 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 technical Consultant is expected to work with the Project Team and undertake the following tasks/activities:<sup>3</sup>

1. Lead the conceptualization and writing of a **discussion paper and policy brief** on reviewing health financing streams in the Philippines' multi-payer context (e.g., DOH, PhilHealth, specific funds [e.g., medical assistance for indigents program, cancer assistance program], private health insurance organizations)
  - a. Conduct reviews of literature, documents, and international best practices
  - b. Process and analyze relevant data for the paper
  - c. Develop meeting/interview guides and conduct consultation meetings/interviews with PhilHealth, DOH, and health financing experts, as necessary to situate policy recommendations within the context of the Philippine health financing system
2. As a technical consultant, **guide, train, and validate outputs of PIDS costing stream staff** in revising and piloting PhilHealth's costing methodology and forms:
  - a. Literature, documents, policies and manual reviews from PhilHealth/DOH and other countries
  - b. Concept and plans for the pilot of revised costing methods and tools in 30-50 hospitals nationwide
  - c. Results from available and newly collected PhilHealth costing data
  - d. Revised PhilHealth costing manual and forms
3. Consultations with PhilHealth, World Bank, Thai Case Mix center, and other local stakeholder and international experts, as necessary

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<sup>3</sup> 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.

4. Prepare for, attend, and present at internal workshops/meetings or client meetings with PhilHealth, DOH, and other stakeholders.
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 technical consultant will prepare the following outputs based on the schedule below:

<b>Activities and Deliverables</b>	<b>Due Dates</b>	<b>Payment Tranches</b>
<b>Inception Report</b> following PIDS template including: - Proposed work plan and topics for items #1 and #2	2 weeks after signing	10%
<b>Progress Report</b> <sup>4</sup> , including: <ul style="list-style-type: none"> <li>• Updates on scope of work (SoW) items #1 and #2</li> <li>• Draft of discussion paper and policy brief (SoW item #1)<sup>5</sup> on health financing review in multi-payer context</li> </ul>	February 28, 2025	15%
<b>Progress Report</b> , including: <ul style="list-style-type: none"> <li>• Updates on SoW items #1 and #2</li> <li>• Revision of SoW item #1 discussion paper and policy brief on health financing review in multi-payer context</li> <li>• Comments and inputs to revised costing methodology and forms under with pre-test (SoW #2)</li> </ul>	April 30, 2025	15%
<b>Progress Report</b> , including: <ul style="list-style-type: none"> <li>• Updates on SoW items #1 and #2</li> <li>• Revision of SoW item #1 discussion paper and policy brief on health financing review in multi-payer context, accounting for comments from clients (e.g. DOH, PhilHealth)</li> </ul>	June 30, 2025	15%

<sup>4</sup> The transcription document must not reveal the respondent/resource person's identity, nor allow the identification of the respondent/resource person when put together with other information. As such, the names of specific people (and places, if mentioning it will allow the identification of the respondent/resource person) must be replaced with generic terms (e.g. Respondent 1; Source 1; City 1). A separate masterlist containing the identification key/code shall be submitted as an annex to the transcription.)

<sup>5</sup> 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.



<ul style="list-style-type: none"> <li>Comments and inputs to revised costing methodology and forms piloted in 30-50 hospitals (SoW #2)</li> </ul>		
<p><b>Progress Report</b>, including:</p> <ul style="list-style-type: none"> <li>Updates on SoW items #1 and #2</li> <li>Comments and inputs to processing data from PhilHealth BDRD and costing pre-test and pilot (SoW #2)</li> </ul>	August 31, 2025	15%
<p><b>Progress Report</b>, including:</p> <ul style="list-style-type: none"> <li>Updates on SoW items #1 and #2</li> <li>Comments and inputs to draft of the revised PhilHealth costing manual and forms (SoW #2)</li> </ul>	October 31, 2025	15%
<p><b>Terminal Report</b>, including: Final versions of</p> <ul style="list-style-type: none"> <li>SoW item #1 Discussion paper and policy brief on health financing review in multi-payer context</li> <li>SoW item #2 Comments and inputs to revised PhilHealth costing manual and forms<sup>6</sup></li> </ul> <p><b>Turnover of draft and materials</b> 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>	November 30, 2025	15%

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

## 5. Qualifications of the Technical Consultant

Education	<b>At least a Master's Degree</b> in Public Health, Health Economics, Development Economics, Health Policy, or related fields
Experience	At least 5 years of professional experience as a research/policy analyst in public health, health systems, or health financing
Competencies	<ul style="list-style-type: none"> <li>Advanced level core competencies: deliverability/ results-oriented, professionalism, adaptability, and communication skills</li> <li>Advanced level functional competencies: data gathering, problem solving and analysis; dissemination; and technical writing</li> <li>Intermediate level functional competencies: project/research implementation and management; and research conceptualization</li> </ul>

<sup>6</sup> 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.

	– Superior skills in quantitative and qualitative analyses and communication
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## 6. Project Duration

The engagement will commence upon the signing of the contract until **December 31, 2025**, on a part-time basis. The technical 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 ₱616,000.00**, 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 technical consultant as no employer-employee relationship exists between the PIDS and the technical consultant.

## 8. Evaluation Criteria

### a. Evaluation Criteria

Applicant technical consultants will be reevaluated based on the following criteria:

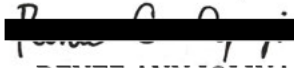
<p>Technical Consultant Qualifications</p> <p>Education</p> <ul style="list-style-type: none"> <li>At least a <b>Master’s Degree</b> in public health, health economics, development economics, health policy, or related fields</li> </ul> <p>Training and experience</p> <ul style="list-style-type: none"> <li>At least 5 years of professional experience as a research/policy analyst in public health, health systems, or health financing</li> </ul> <p>Competencies</p> <ul style="list-style-type: none"> <li>Advanced level core competencies: deliverability/ results-oriented, professionalism, adaptability, and communication skills</li> <li>Advanced level functional competencies: data gathering, problem solving and analysis; dissemination; and technical writing</li> </ul>	<p>50%</p>
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<ul style="list-style-type: none"><li>• Intermediate level functional competencies: project/research implementation and management; and research conceptualization</li><li>• Superior skills in quantitative and qualitative analyses and communication</li></ul>	
Plan of approach and methodology; <ul style="list-style-type: none"><li>• Clarity, feasibility, innovativeness, and comprehensiveness of the approach</li><li>• Incisive interpretation of problems and reflection on suggested solutions</li></ul>	50%
Total	100%

b. Detailed rating sheet (see attached file)

Prepared by:   
**VALERIE GILBERT T. ULEP**  
Project Director

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Division Chief II, RPMD

Approved by:   
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Digitally signed by Ajayi  
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