




## REQUEST FOR PROPOSAL

1. The Philippine Institute for Development Studies (PIDS) invites all eligible individual consultants to submit proposals for the **Senior Technical Advisor and Policy Advocacy Consultant for PIDS-PBSP HCPN Demonstration Sites - Quantitative Technical Support (Institution) - C19RM.**
2. The Approved Budget for the Contract (ABC) is **PhP336,000.00.**
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 **09 June 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.:2025-161

<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**

**Senior Technical Advisor and Policy Advocacy Consultant<sup>1</sup>**  
**for**  
**PIDS-PBSP HCPN Demonstration Sites - Quantitative Technical Support**  
**(Institution) - C19RM<sup>2</sup>**

**1. Background and Rationale**

With the enactment of the Universal Health Care (UHC) 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 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, efficiency, and equitable care, and improve health at lower costs for the health sector and patients.

Moreover, such a 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 utilization across the life course, and (b) assessment of 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;
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;

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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 project PIDS-PBSP HCPN Demonstration Sites - Quantitative Technical Support (Institution) - C19RM.

6. Comprehensive Outpatient Benefit Package (COBP): classification of services according to PhilHealth COBP design and National Practice Guidelines (NPG).

### 3. Objectives of the Consultancy

This project requires the engagement of a **Senior Technical Advisor and Policy Advocacy Consultant** to provide strategic advice and support in all project activities. This includes, but is not limited to, strategy development for communications and policy advocacy plans, participation in stakeholder engagement activities, and governance protocol development for the Health Economics and Finance Program.

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

1. Provide insights and guide the execution of the overall communications strategy and stakeholder mapping and engagement plans.
  - a. Refine the overall communication, advocacy strategy and provide advice on the positioning, key messaging, branding, and communication channels, tailored for different audiences
  - b. Design and participate on multi-stakeholder dialogues, consultations, workshops
2. Provide high-level advice and guide the development of the DRG Governance protocol and Health Economics and Finance Program (HEFP)'s Strategic Plan 2025-2035
  - a. Refine and provide advice on the organizational design of the HEFP and provide insights into the concept proposal for the institutionalization of the Center for Healthcare Finance and Economics
  - b. Recommend capacity building and learning development initiatives for the improvement of the HEFP's organizational dynamics
  - c. Facilitate and represent HEFP in select consultations for the proposed governance framework for Health Economics and Finance Program
  - d. Provide advice and recommendations on the criteria for the proposed technical working groups and pool of experts for DRGs
3. Assist the HEFP Communications Team in translating highly technical products (i.e., reports, slide presentations, press releases, and other communication materials) to a language that can be easily understood by the target audience (i.e., the public)
4. Sign a Non-Disclosure Undertaking with PIDS. Any information gathered and generated in the implementation of the project shall be processed subject to the

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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.

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

5. 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
<b>Inception Report</b> following PIDS template including overall work plan	1 month after signing (Indicative: July 31, 2025)	10%
<b>Progress Report 1</b> , including: <ul style="list-style-type: none"> <li>Accomplishments for all the items in the scope of work above (including documentation of all activities conducted during the period, any document or PowerPoint presentation used in engagements and other activities)</li> </ul>	August 28, 2025	30%
<b>Progress Report 2</b> , including: <ul style="list-style-type: none"> <li>Accomplishments for all the items in the scope of work above (including documentation of all activities conducted during the period, any document or PowerPoint presentation used in engagements and other activities)</li> </ul>	October 16, 2025	30%
<b>Technical Inputs to the following Reports<sup>4</sup>:</b> <ul style="list-style-type: none"> <li>PIDS HEFP Strategic Plan 2025-2035</li> <li>Concept Proposal for the Establishment/Institutionalization of the Center for Healthcare Economics and Finance</li> <li>Strategic Communications Plan, Stakeholder Engagement Plan, and Communication Materials</li> </ul>	December 15, 2025	30%

<sup>4</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, the General Guidelines in Preparing and Formatting a PIDS Discussion Paper, and the Guidelines in the Preparation of Policy Notes.)

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.

<p><b>Terminal Report</b></p> <p><b>Turnover of draft and materials used</b> 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>		
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NOTE: Payments will be based on the acceptance and approval by PIDS of the corresponding outputs.

## 5. Qualifications of the Consultant

Education	At least a <b>Medical Doctor</b> or with <b>Master's Degree</b> in Public/Community Health, or related fields
Experience	At least 20 years of professional experience in health systems strengthening, health financing development, strategic communications, public health, or other related fields
Competencies	<ul style="list-style-type: none"> <li>– Advanced level core competencies: deliverability/ results-oriented, professionalism, adaptability, and communication skills</li> <li>– Advanced level leadership competencies: building collaborative working relationships, leading change, and thinking strategically and creatively</li> <li>– Advanced level functional competencies: network, technical consulting, and conceptualization</li> </ul>

## 6. Project Duration

The engagement will commence upon the signing of the contract until **December 31, 2025**, 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 336,000.00**, 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 consultant as no employer-employee relationship exists between the PIDS and the consultant.

## 8. Evaluation Criteria

### a. Evaluation Criteria

Applicants for the consultant position will be evaluated based on the following criteria:

<b>Consultant Qualifications</b> Education <ul style="list-style-type: none"> <li>• <b>At least a Medical Doctor or with Master's Degree in Public/Community Health, or related fields</b></li> </ul> Training and experience <ul style="list-style-type: none"> <li>• At least 20 years of professional experience in health systems strengthening, health financing development, strategic communications, public health, or other related fields</li> </ul> Competencies <ul style="list-style-type: none"> <li>• Advanced level core competencies: deliverability/ results-oriented, professionalism, adaptability, and communication skills</li> <li>• Advanced level leadership competencies: building collaborative working relationships, leading change, and thinking strategically and creatively</li> <li>• Advanced level functional competencies: network, technical consulting, and conceptualization</li> </ul>	50%
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

Reviewed and Approved by:

**CHRISTINE RUTH P. SALAZAR**  
Officer-In-Charge, Research Services Department