

Information utilization in the implementation of universal health care

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The Governance and Accountability chapter of the newly passed Republic Act (RA) 11223, or the Universal Health Care (UHC) law,¹ contains provisions pertaining to the use of information systems in furthering universal health care in the country. The implementing rules and regulations of the law² elaborates on how the provisions should be operationalized and specifies the government agencies that should spearhead the implementation of the law.

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The Health Promotion section of RA 11223 talks about the establishment of a Health Promotion Bureau that ensures the advancement of health literacy and healthy lifestyle among Filipinos. The section on Evidence-Informed Sectoral Policy and Planning for UHC describes the centralization of health and health-related data that can be used to guide research and policy-making processes in health care. The section on Monitoring and Evaluation elaborates on the conduct of modules of annual household surveys in support of UHC and the regular publication of burden of disease estimates that will help determine the progress of health outcomes. Finally, the section on Health Information System emphasizes the requirement for health service providers to maintain a health information system that eventually links with the system of other providers to a larger, interoperable system. The systems shall share information on enterprise resources, human resources, health records and prescription logs.¹

Implementing these provisions in the law requires several types of health and health-related information, including individual patient data, aggregate morbidity and mortality data, data related to health care provider activities, and even existing and newly generated knowledge from health research and similar literatures.

Information fuels the operations of the health care system. In striving to achieve universal health care, it is vital for the government to invest on information systems that meet the dynamic demands of health care itself.

Within the last few years, there have been several efforts by the Philippine government and private institutions to systematize and consolidate health data.³

Most government and private tertiary hospitals in the Philippines have their own health information systems. Development of information systems incurs

high costs, however, so not all health facilities were adept in systematizing the health and health-related information that they regularly handle.³

Many of the efforts were primarily intended to be small-scale and for use only within the institution that developed the systems. Of those intended to have a nation-wide scope however, several setbacks have prevented the full-scale implementation of these systems.

Issues on technical interoperability prevent several independent information systems to communicate and benefit from each other's data. Non-flexible data reports have limited applicability among potential users.⁴

In the past, issues on effective and large-scale governance over health information that are developed and maintained by individual institutions hindered the efficient use of available health information to facilitate health care operations.⁴

The collaborating agencies that will help DOH in the implementation of UHC are specified in the IRR.² The establishment of a Health Promotion Bureau and eventual allocation of at least 1% of the DOH budget to the bureau, health promotion and health literacy programs can systematically take off to support efforts towards achieving universal health care. In coordination with DOH, the Department of Education will undertake the important tasks of promoting healthy lifestyles, participating in preventive programs, and mobilizing community action to promote health.

A National Health Data Repository will be established and maintained after an appropriate set of guidelines is developed by DOH and PhilHealth in consultation with the Department of Information and Communications Technology and the National Privacy Commission. All health and health-related data on individual and population health will be submitted to PhilHealth through the repository. This systematization of health and health-related data will facilitate the proper utilization of health information in health care operations and health policy development.

The Philippine Statistics Authority



will coordinate with DOH in coming up with annual household surveys to monitor and evaluate the implementation of universal health care in the country. The DOH and PhilHealth will regularly publish burden of disease estimates. These information will provide feedback and help generate directions for the adjustment of strategies in the implementation of universal health care.

Health providers are required to

maintain local health information systems and upload data to a nation-wide health information system in a manner consistent with the standards of the Department of Health, PhilHealth, Department of Information and Communications Technology, and National Privacy Commission. The DOH and PhilHealth will also fund and engage providers to upgrade existing health information systems. These will ensure inter-provider use of

information and encourage individual providers to actively contribute towards making health care operations more efficient.

Information-driven health care makes services dynamic and continually responsive. The generation, management and utilization of health and health-related information are essential processes that support the successful implementation of universal health care.

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