

Harmonizing Local Referral Systems: Lessons and Insights from the Philippines

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INTRODUCTION

Republic Act 11223, also known as the “Universal Health Care Act of 2019” (UHC Act), aims to achieve universal health care for all Filipinos by ensuring fair access to quality and affordable healthcare services and protecting them from financial risks.

Under the UHC Act, the Department of Health (DOH), Local Government Units (LGUs), and the Philippine Health Insurance Corporation (PhilHealth) are to establish Health Care Provider Networks (HCPNs) to provide continuous, coordinated, and integrated care. HCPNs set up a functional bi-directional referral system and offer support services such as patient transport, diagnostic and laboratory services, and specialty consultations.

AIM

In collaboration with the Department of Health (DOH) and the LGUs of Paranaque and Valenzuela, we set out to develop a referral guideline to harmonize referral systems under the UHC framework and provide lessons for future implementation in other LGUs.

This paper also describes the complexities of creating a functional referral network and identifies opportunities for continued improvement.

METHOD

- In both Paranaque and Valenzuela cities, with the City Health Officer leading the activity, the team:
- Held a series of advocacy and coordination multi-stakeholder meetings
 - Created a directory of participating facilities,
 - Conducted an inventory and mapping of essential health services
 - Designed referral protocols, including standardized forms
 - Established a monitoring and evaluation framework
 - Created network governance mechanisms for the HCPN.
 - Wrote and finalized the referral guidelines
 - Conducted a dissemination workshop to ensure key players are aware of the referral network

CONCLUSIONS

- Developing local referral guidelines is a complex, iterative process requiring committed leadership and robust stakeholder collaboration.
- Automating the referral process can facilitate implementation and wide-scale adoption.
- Under the UHC framework, implementing harmonized referral mechanisms can improve overall health governance and service delivery efficiency and serves as a guide for other similar initiatives.

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RESULTS

	Paranaque	Valenzuela
Population	730,009	680,233
Barangays	16	33
Barangay Health Centers	16	54
Public Hospitals (level 1-3)	4	4

Figure 1: Referral network for laboratory and diagnostics in Paranaque city

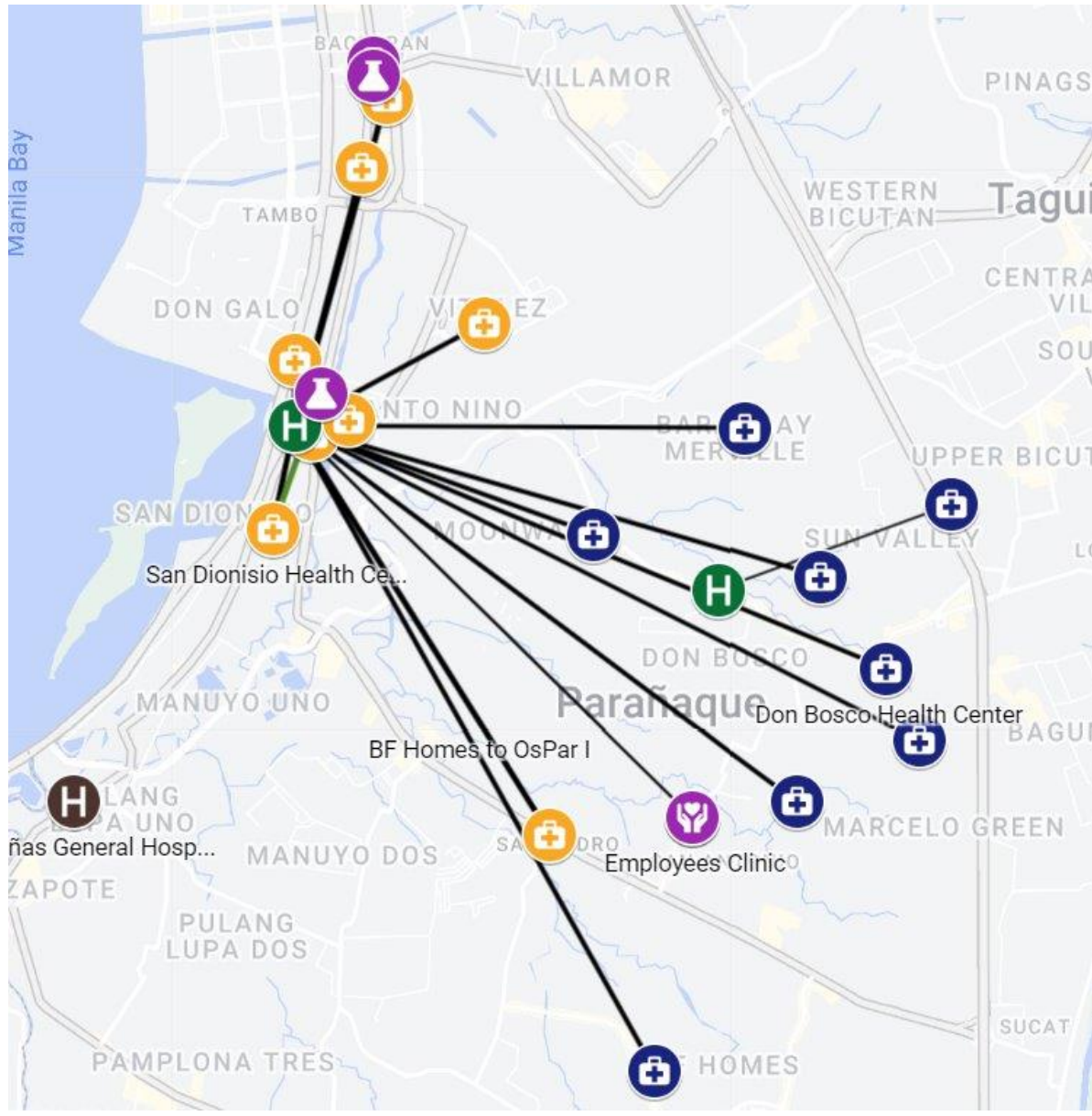


Figure 2: Referral network among emergency and specialist care providers in Paranaque city

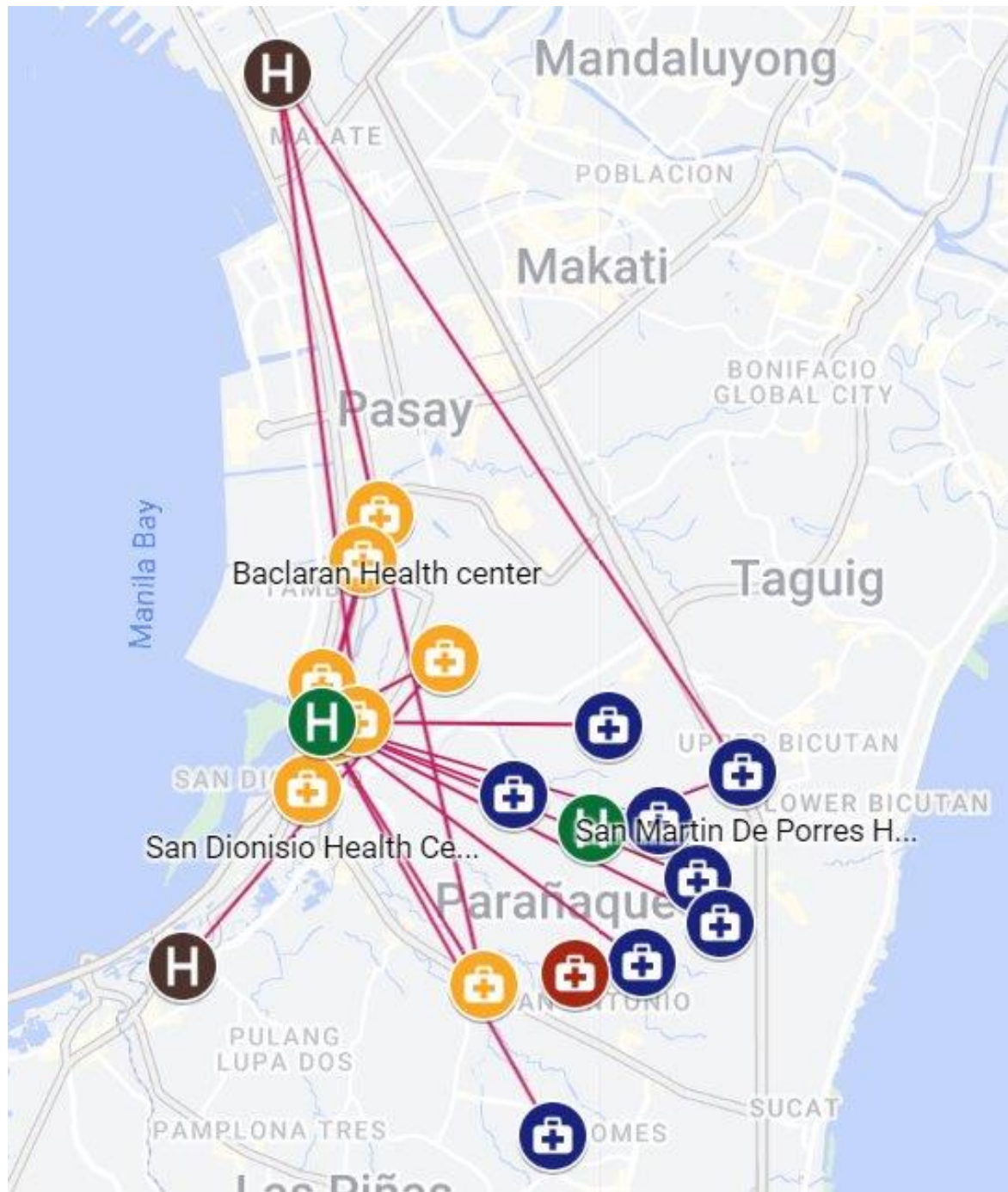
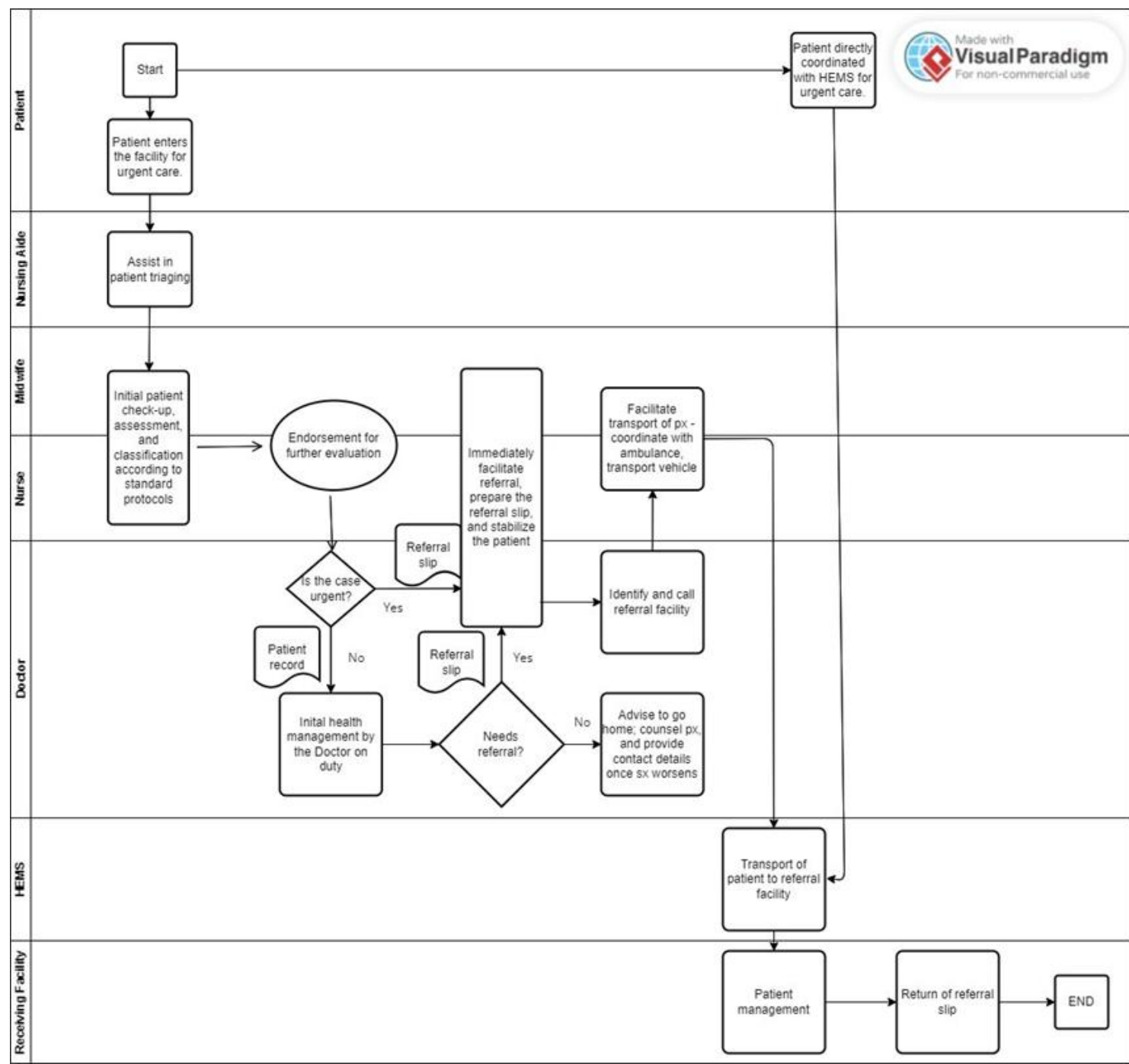


Figure 3: Referral process among providers in Paranaque city



- Insights:**
- Most facilities were not ready to be Primary Care Facilities with inadequate support systems, including gatekeeping mechanisms, laboratory and diagnostic services and governance systems
- Lessons Learned:**
- Strengthening multi-stakeholder collaboration and participation created a feasible referral network with clear roles and responsibilities
 - Utilizing innovative tools and platforms enabled consistency and clarity in designing the referral networks
 - Instituting organizational mechanisms to improve health system governance, such as a monitoring and evaluation framework and technical coordination committee, ensured all parties had representation and responsibility.
 - Paths for improvement