Azure SQL Database is always running on the latest stable version of the SQL PaaS capabilities built into Azure SQL Azure SQL Database is a fully managed In addition, SQL Database provides built-in business continuity and global scalability features such as Automatic Use of Azure SQL Server Database - Defender for Cloud secure score Deployment of Microsoft Defender for administration and optimization activities that are critical for your domain-specific Server database engine and patched OS with 99.99% availability. database management functions such as upgrading, patching, backups, and engine that handles most of the platform as a service (PaaS) database Platform as a Service (PaaS) monitoring without user involvement. Database enable you to focus on the posture so you can track new security opportunities and precisely report on continually assesses your security failover groups backups, active geo-replication, autobusiness. the progress of your security efforts. database

security events from developing.	defends your workloads in real-time so	from known security risks, alerts and	secures your workloads with step-by-	Defender for Cloud recommendations
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TRANSMISSIONS: PHILHEALTH KONSULTA

from Konsulta Accredited Health Facility to PHIC for the First Tranche to be able to get a capitation from PHIC. DCI must be able to transmit a minimum of 1,000 Health Assessments/Screenings

TOTAL AMOUNT FOR THE YEAR 2023

SEVENTEEN MILLION SEVEN HUNDRED FORTY-FOUR THOUSAND AND EIGHT HUNDRED FIFTY PESOS

(Php 17,744,850.00)

SUBMITTED BY:

DBP Data Centely-Inc. 9TH Floor DBP Building Sen. Gil Puyat Avenue corner Makati Avenue, Makati City

EVALUATED BY, EMMA RUM & CHEVAS, MD, MPH ASSIST. CAT HEALTH OFFICER

REMARKIS : PASSED

DBP DATA CENTER, INC.

FINANCIAL PROPOSAL: MULTI-YEAR CONTRACT FOR THE ENGAGEMENT OF A SERVICE PROVIDER FOR THE IMPLEMENTATION OF A PRIMARY HEALTHCARE INFORMATION AND CLINICAL SYSTEMS (PHICS) FOR THE CITY HEALTH UNITS AND BARANGAY HEALTH STATIONS

RFQ NO:

100-23-03-616

APPROVED BUDGET OF THE CONTRACT: SEVENTEEN MILLION SEVEN HUNDRED FIFTY-FIVE THOUSAND FIVE HUNDRED PESOS (Php 17,755,500.00) FOR CALENDAR YEAR 2024 (JANUARY 1, 2024 TO DECEMBER 31, 2024)

			 SERVICE DELIVERY NETWORK REFERRAL SYSTEM TO HOSPITALS
(Php 13,545,000.00)	(Php 387,000.00)		 DIAGNOSTIC RESULTS ARCHIVING E-PRESCRIPTIONS, E-PMRF
THIRTEEN MILLION FIVE HUNDRED FORTY-FIVE THOUSAND PESOS	THREE HUNDRED AND EIGHTY-SEVEN THOUSAND PESOS	35 BARANGAY HEALTH STATIONS	 PATIENT REGISTRY & TRIAGE PATIENT QUEUEING PATIENT CONSULTATIONS USING S.O.A.P NOTES PATIENT CONSULTATION HISTORY
FOUR MILLION AND TWO HUNDRED THOUSAND PESOS (Php 4,200,000.00)	FOUR HUNDRED AND TWENTY THOUSAND PESOS (Php 420,000.00)	10 PHIC KONSULTA ACCEDITED HEALTH FACILITIES	E.H.R. SYSTEM SUBSCRIPTION: Electronic Health Record (E.H.R.) System must include the following features and functionalities:
TOTAL AMOUNT	SERVICE FEE PER FACILITY	NUMBER OF HEALTH FACILITIES	DESCRIPTION

 Availability of Service Engineers within 4 Hours Turn Around Time 	8 x 5 Service Call Unit	 Response time for Emergency, Urgent, Routine (E, U, R) Jobs 	ON SITE & ONLINE SUPPORT:	TRAINING OF M.I.S.	 TRAINING OF USERS (DOCTORS, NURSES, BHW, HEALTH FACILITY STAFF) 	E.H.R TRAINING FOR SYSTEM UPDATES:	CUSTOMIZED REPORTS	DOH & PHILHEALTH REPORTS	E.H.R. SYSTEM UPDATES:	Minimum number of users is set with 6 users and unlimited user licenses thereafter:
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			10.3401							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

 Azure SQL Database is a fully managed platform as a service (PaaS) database engine that handles most of the database management functions such as upgrading, patching, backups, and monitoring without user involvement. 	Use of Azure SQL Server Database - Platform as a Service (PaaS)	 4 vCPU (4 processors) 14GB Memory 200GB Temporary Storage 3,000 MBPS Expected Network Bandwidth 128GB SSD Drive for OS 256GB SSD Drive for Data (expandable as needed) 	VIRTUAL MACHINE STORAGE: Virtual Machine Configuration (D3 V2 / DS3 V2)	Customer relationship management (Helpdesk)	 Guaranteed response time for E, U, R jobs 	 Availability of Software Developers for immediate deployment
	01 GJ					
	70					
	44					

 Azure SQL Database is always running on the latest stable version of the SQL PaaS capabilities built into Azure SQL In addition, SQL Database provides built- Defender for Cloud recommendations Deployment of Microsoft Defender for in business continuity and global scalability features such as Automatic Defender for Cloud secure score Server database engine and patched opportunities and precisely report on the progress of your security efforts. continually assesses your security failover groups backups, active geo-replication, autobusiness. activities that are critical for your administration and optimization domain-specific Database enable you to focus on the OS with 99.99% availability. secures your workloads with step-byposture so you can track new security defends your workloads in real-time so from known security risks, alerts and step actions that protect your workloads security events from developing. you can react immediately and prevent database

		TOTAL AMOUNT FOR THE YEAR 2024	PHILHEALTH KONSULTA TRANSMISSIONS: DCI must be able to transmit a minimum of 1,000 Health Assessments/Screenings from Konsulta Accredited Health Facility to PHIC for the First Tranche to be able to get a capitation from PHIC.
SUBMITTED BY: ATTY, KRISTJAN VIGENTE T. GARGANTIEL	(Php 17,745,000.00)	SEVENTEEN MILLION SEVEN HUNDRED FORTY-FIVE THOUSAND PESOS	

DBP Data Center, Inc. 9TH Floor DBP Building Sen. Gil Puyat Avenue corner Makati Avenue, Makati City

DBP DATA CENTER, INC.

BREAKDOWN OF COST FOR TEN (10) KONSULTA ACCREDITED HEALTH FACILITIES:

DESCRIPTION	MONTHLY SERVICE FEE PER HEALTH FACILITY
E.H.R. SYSTEM SUBSCRIPTION:	FIFTEEN THOUSAND PESOS
Electronic Health Record (E.H.R.) System must include the following features and functionalities:	(Bhp 15 000 00)
PATIENT REGISTRY & TRIAGE PATIENT QUEUEING	1b. 10,000.00/
PATIENT CONSULTATIONS USING S.O.A.P NOTES PATIENT CONSULTATION HISTORY	
DIAGNOSTIC RESULTS ARCHIVING E-PRESCRIPTIONS, E-PMRF SYSTEM	
REFERRAL SYSTEM TO HOSPITALS	
Minimum number of users is set with 6 users and unlimited user licenses thereafter:	
E.H.R. SYSTEM UPDATES:	FIVE THOUSAND PESOS
DOH & PHILHEALTH REPORTS CUSTOMIZED REPORTS	(Php 5,000.00)
E.H.R TRAINING FOR SYSTEM UPDATES:	ONE THOUSAND PESOS
 TRAINING OF USERS (DOCTORS, NURSES, BHW, HEALTH FACILITY STAFF) TRAINING OF M.I.S. 	(Php 1,000.00)

ON SITE & ONLINE SUPPORT:

- Response time for Emergency, Urgent, Routine (E, U, R) Jobs
- 8 x 5 Service Call Unit
- Availability of Service Engineers within 4 Hours Turn Around Time
- Availability of Software Developers for immediate deployment
- Guaranteed response time for E, U, R jobs
- Customer relationship management (Helpdesk)

VIRTUAL MACHINE STORAGE:

Virtual Machine Configuration (D3 V2 / DS3 V2)

- 4 vCPU (4 processors)
- 14GB Memory

- 200GB Temporary Storage
 3,000 MBPS Expected Network Bandwidth
 128GB SSD Drive for OS
 256GB SSD Drive for Data (expandable as needed)

Use of Azure SQL Server Database - Platform as a Service (PaaS)

- Azure SQL Database is a fully managed platform as a service (PaaS) database engine that handles most of the database management functions such as upgrading, patching, backups, and monitoring without user involvement.
- Azure SQL Database is always running on the latest stable version of the SQL Server database engine and patched OS with 99.99% availability.

THREE THOUSAND FIVE HUNDRED PESOS

(Php 3,500.00)

FIVE THOUSAND FIVE HUNDRED PESOS

(Php 5,500.00)

 In addition, SQL Database provides built-in business continuity and global scalability features such as Automatic backups, active geo-replication, auto-failover groups

Deployment of Microsoft Defender for Cloud

- Defender for Cloud secure score continually assesses your security posture so you can track new security opportunities and precisely report on the progress of your security efforts.
- Defender for Cloud recommendations secures your workloads with step-by-step actions that
 protect your workloads from known security risks, alerts and defends your workloads in realtime so you can react immediately and prevent security events from developing.

PHILHEALTH KONSULTA TRANSMISSIONS:

DCI must be able to transmit a minimum of 1,000 Health Assessments/Screenings from Konsulta Accredited Health Facility to PHIC for the First Tranche to be able to get a capitation from PHIC.

FIVE THOUSAND PESOS

(Php 5,000.00)

MONTHLY SERVICE FEE

THIRTY-FIVE THOUSAND PESOS

(Php 35,000.00)

DBP DATA CENTER, INC.

BREAKDOWN OF COST FOR THIRTY-FIVE (35) BARANGAY HEALTH STATIONS:

DESCRIPTION	MONTHLY SERVICE FEE PER HEALTH FACILITY
E.H.R. SYSTEM SUBSCRIPTION:	FIFTEEN THOUSAND PESOS
Electronic Health Record (E.H.R.) System must include the following features and functionalities:	(Php 15,000.00)
• PATIENT REGISTRY & TRIAGE	
• PATIENT QUEUEING	
PATIENT CONSULTATIONS USING S.O.A.P NOTES PATIENT CONSULTATION HISTORY	
DIAGNOSTIC RESULTS ARCHIVING	
• E-PRESCRIPTIONS, E-PMRF SYSTEM	
REFERRAL SYSTEM TO HOSPITALS	
Minimum number of users is set with 6 users and unlimited user licenses thereafter:	
E.H.R. SYSTEM UPDATES:	FIVE THOUSAND PESOS
DOH & PHILHEALTH REPORTS	(Php 5,000.00)
CUSTOMIZED REPORTS	
E H R TRAINING FOR SYSTEM UPDATES:	ONE THOUSAND PESOS (Php 1,000.00)
TRAINING OF USERS (DOCTORS, NURSES, BHW, HEALTH FACILITY STAFF) TRAINING OF MISS.	

• Response time for Emergency, Urgent, Routine (E, U, R) Jobs	THREE THOUSAND FIVE HUNDRED PESOS
8 x 5 Service Call Unit	(Pnp 3,500.00)
 Availability of Service Engineers within 4 Hours Turn Around Time 	
Availability of Software Developers for immediate deployment	
Guaranteed response time for E, U, R jobs	
Customer relationship management (Helpdesk)	
VIRTUAL MACHINE STORAGE:	FIVE THOUSAND FIVE HUNDRED
Virtual Machine Configuration (D3 V2 / DS3 V2)	
 4 vCPU (4 processors) 14GB Memory 200GB Temporary Storage 3,000 MBPS Expected Network Bandwidth 128GB SSD Drive for OS 256GB SSD Drive for Data (expandable as needed) 	(Prip s, sou.uu)
Use of Azure SQL Server Database - Platform as a Service (PaaS)	
 Azure SQL Database is a fully managed platform as a service (PaaS) database engine that handles most of the database management functions such as upgrading, patching, backups, and monitoring without user involvement. 	hat os,
 Azure SQL Database is always running on the latest stable version of the SQL Server database engine and patched OS with 99.99% availability. 	se

- PaaS capabilities built into Azure SQL Database enable you to focus on the domain-specific database administration and optimization activities that are critical for your business.
- In addition, SQL Database provides built-in business continuity and global scalability features such as Automatic backups, active geo-replication, auto-failover groups

Deployment of Microsoft Defender for Cloud

- Defender for Cloud secure score continually assesses your security posture so you can track new security opportunities and precisely report on the progress of your security efforts.
- Defender for Cloud recommendations secures your workloads with step-by-step actions that time so you can react immediately and prevent security events from developing. protect your workloads from known security risks, alerts and defends your workloads in real-

PHILHEALTH KONSULTA TRANSMISSIONS:

DCI must be able to transmit a minimum of 1,000 Health Assessments/Screenings from Konsulta Accredited Health Facility to PHIC for the First Tranche to be able to get a capitation from PHIC.

TWO THOUSAND SEVEN HUNDRED **FIFTY PESOS**

(Php 2,750.00)

THIRTY-TWO THOUSAND AND TWO **HUNDRED FIFTY PESOS**

(Php 32,250.00)

MONTHLY SERVICE FEE

BY: BYTHA GUILD B. CHEVES, IND MPS

REMARK 'S ENA LUATED PASSED ACT. CITY FRACE OFFICE

TECHNICAL PROPOSAL

"MULTI-YEAR CONTRACT FOR THE ENGAGEMENT OF A SERVICE PROVIDER FOR THE IMPLEMENTATION OF A PRIMARY HEALTHCARE INFORMATION AND CLINICAL SYSTEMS (PHICS) FOR THE CITY HEALTH UNITS AND BARANGAY HEALTH STATIONS"

TECHNICAL PROPOSAL

I. Background

The Philippines has made significant progress in recent years in its path to achieving Universal Healthcare Coverage (UHC) through investment in health and the introduction of the National Health Insurance Act (2013) and the Universally Accessible Cheaper and Quality Medicines Act (2008). Sin Taxes were also introduced and earmarked for health subsidies for those who are in the lower socio-economic status.

Despite these achievements, the health system in the Philippines still requires more progress to achieve its end goal of UHC. Patients accessing the Philippine health system continue to face unnecessary out of pocket spending, overburdened hospitals dealing with non-critical cases and significant inequity in access to health services across the Philippines. To implement UHC successfully, the health system must focus on improving the integration of health services, increasing the use of primary healthcare as patients' first port of call, and ensuring more strategic purchasing of medicines. Service Delivery Networks (SDNs) have been identified to become the model of health service delivery that would achieve these goals.

In order to execute a successful implementation of the UHC, the City Government of Pasig is currently establishing its own SDN that would cater to all its constituents. However, as a City, Pasig has a number of challenges in providing healthcare. Some of these challenges are not unique to Pasig, as they reflect broader issues across the Philippine Health System. One of these challenges is an Information Technology Infrastructure for the City Health Units and Barangay Health Stations.

The use of Information Technology (IT) and the infrastructure to support the Health Program of Pasig City is only at mid-level. Only a few clinics uses information technology to help its front liners. This inhibits the ability of service providers to effectively coordinate care across facilities, as complete medical records, due to unreasonable delays, may not be available to doctors and clinicians. The impact of this on patient care and patient experience is also significant, with patients required to repeat and remember their history at multiple points along their health care journey. This challenge is compounded by the relative level of health literacy within Pasig's community. Further, as internet connectivity and network connectivity are poor and inadequate in some areas of the city, analytical approaches to system issues, such as patient flow across the city, are almost impossible to implement.

IT infrastructure in City Health Units and Barangay Health Stations are limited in a number of places. This makes communication, networking and referrals challenging. Some facilities cannot access the internet regularly, there are areas where mobile coverage is limited or where mobile phones are not owned, and for a couple of clinics, an internet connectivity does not extend to the facility. These limitations are being compensated usually through manual processes, which are inefficient in nature which causes too much delays but necessary in the current environment. These technology challenges limit both the efficiency and maturity of SDNs, and have the real potential of limiting their growth and effectiveness in the future.

The City Government of Pasig believes that, in order to achieve, measure, and maximize the potentials and benefits of UHC, it is imperative that the City Government invests in its I.T. Infrastructure because it is a key enabler of resilient health systems. If the Hospitals, City Health Units and Barangay Health Stations in the City of Pasig do not harness the benefits of ICT, inefficiencies proliferate and some of the most basic building blocks of UHC become extremely difficult to put in place, at both the individual and population level. An effective eHealth strategy can ensure that the right solutions are deployed to eliminate inefficiencies.

In order to achieve this, City Government of Pasig intends to implement a Community Healthcare Ecosystem Solution, utilizing a robust system which can be used at the grassroots level from the Barangay Health Station/Center (BHS/BHC), to the City Health Units (RHU), to the District Hospitals, to the City Hospitals, and even up to the Regional APEX Hospitals for different levels of vertical escalation of health care for patients. With the full implementation of the UHC Law taking effect, Pasig City Government is spearheading a successful program for the effective implementation of UHC.

The UHC seeks to have a paradigm shift -- from hospital care to primary care, veering away from the common practice in which individuals bypass primary care providers in community-based health centers, and seek treatment from specialists in bigger hospitals. Bypassing lower-level healthcare facilities make Filipinos vulnerable to spending from their own pockets not to mention that early prevention is often said to be better than the actual curative care which at times can be too late and expensive!

Under the UHC system, every Filipino would be assigned to a health worker who shall be their first point of contact. Primary care providers will guide patients through different healthcare facilities.

The City Government of Pasig is confident that, utilizing an Application System for the City Health Units and Barangay Health Stations to capture information of the residents of Pasig City, we will be able to create a responsive and forward-looking healthcare ECO-System for the betterment and improve governance on healthcare of each Filipino's health and well-being.

II. Objectives

The project aims to achieve the following:

- To implement in the shortest period, a "fully-integrated, comprehensive and sustainable Primary Care Health Information System with Electronic Health Record", using a Windows Application System, with its database residing in the cloud, that is responsive to the requirements of the City Health Department and is substantially compliant with existing rules and regulations of the Department of Health and Philhealth;
- To implement an integrated system that is based on best practices and founded in the mostly used and the latest software for sustainability and manageability using the expertise and experience of a service provider for Healthcare Systems that would guide the City Health Department.

III. Purpose

With the requirement of maintaining a Health Information System for the Primary Care Clinics that will contain electronic health records, prescription logs and "human resource information, these clinics may not be ready as they are tasked to take care of the underprivileged, poorest of the poor and the indigent community first rather than to focus on the said requirement. These offices may require assistance so that immediate steps may be taken in achieving efficiency, sustainability and financial growth.

The City Government of Pasig needs to address the following:

- The City Government of Pasig seeks for IT services and solutions for its SDNs that would be fully integrated with the Pasig City Health Office and take full advantage of what information technology can offer to further improve efficiencies and effectiveness in all aspects of its operations;
- ii. The City Government of Pasig seeks for a pool of qualified consultants who are experts in the healthcare operational process reengineering and can help them harness the benefits of Information Technology and leave the clinical functions to the doctors and nurses.
- iii. The City Government of Pasig seeks to implement a web-based Primary Care Health Information System with an Electronic Health Records (EHR) System that is comprehensive and the functionality to offer each City Heath Primary Care unit, a City Health Information System that also has the capacity to integrate neighboring Pharmacist and Diagnostic Centers to serve as a tool to improve operational and informational efficiency of the City Health Units so as to achieve the goal of a UHC Health Unit Ecosystem;
- iv. The City Government of Pasig will implement a Business Process Management for City Health Units and Barangay Health Stations to ensure that the Primacy Care Health Information System installed is utilized fully and effectively;
- v. The City Government of Pasig seeks to acquire Project Management services through virtual off-site monitoring, with a team that will handle the project from its initiation to its completion. The team will also oversee and monitor the project closely by directing the short- and long-term planning, controlling and monitoring of the project components, providing status reports, and ensuring completion of the project;
- vi. The City Government of Pasig seeks to provide consultative and technical Services on Business Process Re-Engineering as needed to ensure that manual and computerized operations are synergized and maximized;
- vii. The City Government of Pasig seeks to conduct virtual trainings for management and staff to provide them with the needed basic knowledge, tools and skills in information technology. The training will give BHS's/CHU's staff information about the system and how to fully utilize its capabilities;

- viii. The City Government of Pasig seeks to provide change management and process re-engineering services that may become a factor in the success of the project;
- ix. The City Government of Pasig seeks to provide on-line support to the City Health Units as soon as the system is in place and utilized.

IV. Service Provider

DBP Data Center, Incorporated (DBP DATA CENTER, INC.) is a Government-Owned and Controlled Corporation (GOCC) duly organized and registered with the Securities and Exchange Commission (SEC) and is a wholly-owned subsidiary of the Development Bank of the Philippines (DBP).

Its primary mandate is to provide information and technology facilities management, systems application development, systems integration, IT solutions, contact center operation, business processes outsourcing, consultancy services and other IT related services to government and non-government institutions.



PASIG CITY HEALTH OFFICE REQUIREMENTS AND SPECIFICATIONS	STATEMENT OF COMPLIANCE (DBP DATA CENTER, INCORPORATED)
SCOPE OF SERVICES:	
1.1. DBP DATA CENTER, INC. shall setup an infrastructure for the City Health Units and Barangay Health Stations. All hardware, software, and third-party licenses under these enumerated infrastructures to be used for the operations are deemed property of DBP DATA CENTER, INC. for the duration of the contract;	COMPLY
1.1.1. Set up an Application Server that shall serve as the host server to be used for the System;	COMPLY
1.1.2. Set up a Database Server shall serve as the host server to be used for the Database of Pasig City.	COMPLY
1.1.3. Install the Primary Healthcare Information and Clinical System that is designed to operate continuously for a long period of time with redundancies.	COMPLY
1.1.4. Install an E-Claims Submission System and Konsulta Transmission System that is designed to operate continuously for a long period of time with redundancies.	COMPLY
1.2. INSTALLATION OF THE PRIMARY HEALTHCARE INFORMATION AND CLINICAL SYSTEM):	
1.2.1. DBP DATA CENTER, INCORPORATED shall provide all the necessary computer software, servers, and network equipment needed to operate the required Primary Healthcare Information and Clinical System.	COMPLY
1.2.2. DBP DATA CENTER, INC. shall provide manpower for the operations and support services composed of the following:	COMPLY
1.2.2.1. Project Operations Personnel in the processing PHIC Reimbursement Claims.	COMPLY

	- 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 - 115 -
1.2.2.2. Technical Support Staff who will install, maintain, and manage the infrastructure setup throughout the duration of this contract	COMPLY
1.2.3. DBP DATA CENTER, INC. shall ensure that connectivity between Servers and users shall meet the minimum requirements.	COMPLY
1.3. PHIC E-CLAIMS SUBMISSION SYSTEM (PESS):	
1.3.1. DBP DATA CENTER, INC. shall provide the necessary system needed to operate the required PHIC E-Claims Submission System.	COMPLY
1.3.2. DBP DATA CENTER, INC. shall provide manpower for the operations and support services composed of the following:	COMPLY
1.3.2.1. Project Operations Personnel in the processing PHIC Reimbursement Claims.	COMPLY
1.3.2.2. Technical Support Staff who will install, maintain, and manage the infrastructure setup throughout the duration of this contract	COMPLY
1.3.3. DBP DATA CENTER, INC. shall ensure that connectivity between Servers and users shall meet the minimum requirements.	COMPLY
II. RESPONSIBILITIES OF DBP DATA CENTER, INC.	
2.1. DBP DATA CENTER, INC. shall provide over-all project management of all above stated project engagements for Pasig City Health Office.	COMPLY
2.1.1. Be responsible as the first (1 st) level support to all project clients, providing technical support, helpdesk, utilities and security for the operation of every project.	COMPLY

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III. <u>WA</u> 3.1.	DBP DATA CENTER, INC. warrants that it shall	COMPLY
3.1.	conform strictly to the terms and conditions of this Terms of Reference.	
3.2.	DBP DATA CENTER, INC. warrants, represents and undertakes reliability of these services and that its manpower complements are hardworking, qualified / reliable and dedicated to do the service required to the satisfaction of PASIG CITY HEALTH OFFICE. It shall employ well-behaved and honest employees with ID displayed conspicuously while working within the premises of PASIG CITY HEALTH OFFICE. It shall not employ PASIG CITY HEALTH OFFICE employees to work in any category whatsoever.	COMPLY
3.3.	DBP DATA CENTER, INC. shall comply with the laws governing employee's compensation, PhilHealth, Social Security and labor standards, and other laws, rules and regulations application to the personnel employed by DBP DATA CENTER, INCORPORATED on account of the contracted services. The DBP DATA CENTER, INCORPORATED shall pay its personnel not less than the minimum wage plus other benefits mandated by law.	COMPLY
3.4.	DBP DATA CENTER, INC. in the performance of its services shall secure, maintain at its own expense all	
	registration, licenses or permit required by National or Local Laws and shall comply with the rules, regulations and directives of Regulatory Authorities and Commission. DBP DATA CENTER, INC. undertakes to pay all fees or charges payable to any instrument of government or to any other duly constituted authority relating to the use or	COMPLY
	operation of the installation.	
3.5,	DBP DATA CENTER, INC. personnel shall take all necessary precautions for the safety of all persons and properties near area of work and shall comply with all the standard and established safety regulations, rules and practices.	COMPLY

	3.6.	DBP DATA CENTER, INC. shall coordinate with the authorized and/or designated Pasig City personnel in the performance of their jobs.	COMPLY
	3.7.	DBP DATA CENTER, INC. shall be liable for loss, damage or injury due directly or indirectly through the fault of negligence of its personnel. It shall assume full responsibility thereof and PASIG CITY HEALTH OFFICE shall be specifically released from any and all liabilities arising there from.	COMPLY
IV	. <u>co</u> l	NFIDENTIALITY OF DATA	
	4.1.	DBP DATA CENTER, INC. shall document detailed procedures/techniques in identifying systems security risks and breaches and how such shall be handled.	COMPLY
	4.2.	The Managed Services Agreement, its components, parts and all products, product samples and specifications, data, ideas, technology and technical and non-technical materials, all or any of which may be derived from any of the foregoing (all of which, individually and collectively, shall hereinafter be referred to as the "Proprietary Information") are confidential and proprietary to DBP DATA CENTER, INC.	COMPLY
	4.3.	All project staff of both parties shall be required to sign a Non-Disclosure Agreement (NDA).	
4.4	4.4.	DBP DATA CENTER, INC. agrees to hold the Proprietary Information in strict confidence. Furthermore, agrees not to reproduce, transcribe, or disclose the Proprietary Information to third parties without prior written approval of both parties.	COMPLY
			COMPLY
	4.5.	DBP DATA CENTER, INC. and its employees shall be liable to the penalties imposed under Section 270, in relation to Section 269 of the Tax Code of 1997, in case of any unlawful divulgence of any information regarding the business, income, or estate of any taxpayer.	COMPLY
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TECHNICAL SPECIFICATIONS

Features of the System

The project that the City Government of Pasig envisions is anchored towards the implementation of a Community Healthcare Eco-System Solution, which can be used at the grassroots level from the Barangay Health Station (BHS), to the City Health Units (RHU), to the District Hospitals, to the City Hospitals, and even up to the Regional APEX Hospitals for different levels of vertical escalation of health care for patients.

The system must have the flexibility of lateral referrals among BHS, RHU, and a common practice between District Hospitals depending on hospital equipment facilities and availability of specialization of doctors to handle the case.

Likewise, patients that were discharged from Regional APEX hospitals or District Hospitals can be referred back to the City Health Units or Barangay Health Stations, for continuing patient care monitoring.

The system comprised of the following features:

(1) Patient Registry & Triage

- Comprehensive "Point of Care/Service" capturing of patient consult demographics
- Biometric capturing
- Facial capturing
- Other future input data such as QR codes etc.

(2) Patient Queueing

- Per health facility Queueing with other vertical healthcare facilities
- Per Clinic type (i.e. Internal Medicine, OB/Gyne, Family Medicine, Pediatrics, etc..)
- Identification of Senior Citizen and People with Disability
- Advanced Queueing (future date appointments and referrals), and even to queueing to other healthcare institutions.

(3) Patient Consultation - three (3) approaches for S.O.A.P. Notes

Collaboration – RHU nurses can perform preliminary examination of the patients, and enter the Subjective and Objective portion of the S.O.A.P. Notes, such as

- Chief Complaints
- History of Present Illness
- Review of Systems
- Vital Signs (blood pressure / heart rate / temperature, etc.)

Then pass on the Assessment and Plan to the City Health Unit / Rural Health Unit doctor on duty for completion of the consultation of the patient

Empowerment – nurses, midwives, and barangay health workers in the Barangay Health Stations (BHS) / City Health Unit (CHU) can perform examination of the patients, and give their proposed assessment and care plan based on their training.

Then seek approval from the CHU / RHU doctor on duty to concur, disallow or modify their proposed care plan before reverting to patient for final execution of care plan.

Direct Entry – Physicians can directly enter their S.O.A.P. Notes as they perform examination of their patients

S.O.A.P Module:

S.O.A.P. module have the functionality to display S.O.A.P. the whole fields in:

- a) Vertical display
- b) Landscape display
- c) Matrix display

This gives the Doctors the freedom to choose S.O.A.P. functionality display so as to achieve greater efficiency and proficiency for maximum consultation output.

The features and functionalities of the system is designed to maximize the utilization of even non-physician workforce employed by the LGUs such as nurses, midwives and health workers, to augment and assist the scarce number of doctors in attending to patients.

This is also empowering the healthcare personnel to encode into the system their encounters with the patients, such as Chief Complaints, History of Present Illness, Vital Signs, and Physical Examinations, then forward said consultation notes to the doctor available to complete examination.

It is also possible for said healthcare personnel to enter their suggested assessment and care plan for a patient, and for the doctor to approve or disapprove before final implementation.

The system is devised with patient data privacy in mind, where only health care practitioners authorized to view a patient's information shall be given access to said patient's data. With the inclusion of a biometric device to capture the patient's fingerprint, and a webcam to capture the patient's profile picture, one can be assured that the patient information being accessed is indeed that of the patient.

The system is envisioned to be adoptive of new technology, such as the use of QR codes, or any other relevant technology to further improve compliance, strengthen data security, and protect the data authenticity.

(4) Patient Consultation History

With a single "click", consultation History of the patient are available for the visit professional for review, achieving the goal of a "One Patient One Record" healthcare system.

(5) Diagnostic Results Archiving / Filing

Diagnostic Results obtained from member Service Delivery Networks (SDN) such as Laboratory Results, Radiology Results and other diagnostic tests, can be filed digitally into the EHR (accepting PDF, JPG, and PNG formats)

(6) Generation of e-Prescriptions

- Prescriptions finalized in a patient consult, whether for diagnostic exams or medications shall reside in the cloud;
- e-prescription can be retrieved by member Service Delivery Networks (SDN) such as pharmacies and diagnostic centers from a SDN portal for verification and fulfillment of said issued prescription;
- option to print copy of said prescription when off-line with security features QR
 Code and security paper if needed.

(7) Printing of Pertinent Patient Encounter Documentation

- Printing of S.O.A.P. Notes that can be filed and be part of the patient's Medical Records;
- Printing of Medical Certificate base on S.O.A.P. Notes for patient's documentary requirements
- Printing of Referral Letters as correspondence for escalation of patient care to other health facilities, including district hospitals and APEX hospitals

(8) Printing of Operational / Management Reports

- Printing of Daily Consumption / Inventory Reports
- Printing of Daily Consultations Summary
- Printing of other Management Reports

UNIVERSAL HEALTHCARE - WEB-BASED FAMILY SURVEY FORM

Without inclusive and mass registration or enrollment of members, UHC will not flourish and will not achieve the spirit because it was created in the first place. It is therefore incumbent for PhilHealth to propagate and simplify the enrollment and updating process of prospective and existing members thru the introduction of the PhilHealth Member Registration Form (PMRF).

Understanding fully the importance of mass enrollment of PHIC membership, to further the principle of UHC, the DBP DATA CENTER, INC system provides a developed system for the UHC Family Survey application that will work in conjunction with the Application System, for that purpose.

The UHC Community Family Survey Form must capture the following information:

(1) Personal Information

- Member's full name
- Mother's full name
- Spouse's full name
- Date and place of birth
- Civil status and citizenship
- TIN number & PhilSys number
- Biometric and Facial capture

(2) Address and Contact Details

- Residence address and permanent address
- Contact numbers and e-mail address

(3) <u>Declaration of Dependents</u>

- Dependents' full name (spouse, children, parents above 60 years old
- · Relationship with member
- Date of birth

(4) Member Type

- Direct or Indirect contributor
- Type of contributor

(5) Printing of PMRF Form

- (6) Printing of Member Identification (QR Code) optional
- (7) Web-Based technology responsive across platforms (MS Windows, Android, IOS)

SERVICE DELIVERY NETWORK PROCESS

- Service Delivery Network member suppliers (SDN users) can access the eprescriptions generated by the respective RHU / BHS network that they belong to;
- The SDN system shall allow the SDN users to access the e-prescriptions thru scanning of QR Code printed in the e-prescriptions or the type in the corresponding text of the QR Code;
- Once SDN users accesses the e-prescription, what will be displayed in their screen are the full content of the e-prescription (all prescribed medicines or all prescribed diagnostic tests or procedures);
- However, only "unserved" line items can be selected for dispensing or rendering by the said SDN;
- Once SDN users "SAVES/POSTS" its transaction, the said information on the newly dispensed medicine or rendered diagnostic tests or procedures will automatically be updated to the database of the RHU or BHS;
- SDN users shall print the "Order of Payment" to be signed by the patient or receiver, as proof of receipt of said medicines or diagnostic tests or procedures;
- 7) The SDN users of Diagnostic Centers shall be able to attach diagnostic test and procedure results thru the said SDN System to complete the service loop.

System Functionalities

The Application System shall have the following functionalities:

Consultation Panel

- This panel shows list of patients queued in the RHU where the user logs in.
- b. It is composed of Regular Sign-In patient, for Appointment or for Referral.
- Allows user to Edit Patient's Profile (basic information), Edit Patient's Queuing details, Update Patient Arrival and Remove patient from Queue.
- d. Shows Consultation Waiting Time (CWT) per patient.

Patient Filtering

- a. Display Today's Consultation Only checkbox which allows user to filter the
 patient that are queued in the current system date.
- Sorting of patient under consultation panel as to Senior Citizen or Person with Disability.
- Queueing Filter which allows the user to filter the patient by Health Facility, Department, Section or up to Specific Doctor.
- d. Smart searching of specific patient in the consultation queue.

3. Approval Panel

- a. Contains Approved and Pending Consultations.
 - > Green checkmarks beside the patient's name indicates that the Physician already approved or disapproved the proposed medication.
 - > Has envelope icon that contains remarks to prompt the user on endorsements or the urgency of consultation.

4. User

a. Users are allowed to change password and change system themes at their convenience.

HEALTH FACILITY CONFIGURATION

- a. This module is used to set up the Health Facility Information such as:

 - Health Facility NameHealth Facility Address
 - Health Facility Code

This information will also reflect in the reports print out as report header.

PATIENT MASTERFILE

a. This module manages the complete medical history and basic information of the patient.

MASTERFILE PAGE

1. Address

- a. Information added in this module will be used in the Registration Form upon adding patient's current address. This module consists of:
 - Region
 - > Province
 - Municipality
 - Barangay

2. Health Facility

- a. Entries in this module are used in Users Masterfile to determine which Health Facility can use a user log in.
- 3. Medicine Masterfile

a. Entries in this module are used in prescribing medication in patient's consultation.

 This is also the module where the user set up the Price Index and available Brand per item.

c. User can also activate and deactivate medicine in this module.

d. Active item in Medicine Masterfile are the only items that can be prescribed in patient consultation.

4. Laboratory & Radiology Masterfile

- a. Entries in this module are used in prescribing diagnostic test in patient's consultation.
- b. This is also the module where the user set up the Price Index per item.

c. User can also activate and deactivate diagnostic test in this module.

d. Active item in these modules are the only items that can be prescribed in patient consultation.

5. ICD10

a. Data in this module are used in adding Diagnosis in patient's consultation.

 Entries in this module are also used in Family History, Personal and Social History and Past Medical and Surgical History under patient's consultation.

6. Users

a. Users Masterfile is the module responsible for setting up access and security rights such as adding, editing, canceling, or simply viewing of each user.

b. The system aside from being able to set up access and security right to each user have the capability to customize the menu listing in relation to access rights of the users set by system administrator.

c. This module is also use to tag Health Facility that a certain user can access.

7. Brand

 Entries in this module are used in Medicine Masterfile as selection on which brand are available to a specific generic medicine.

8. Patient Type

a. Information added in this module will be used in the Registration Form.

9. PE Sketch

 User can add additional template that can be used in adding Sketch as part of patient's Physical Examination.

10. Department & Section

a. Entries in this module are used in Laboratory and Radiology Masterfile for segregation of items in E-Prescription print out.

11. Ancillary Department & Ancillary Section

 Entries in this module are used in Laboratory and Radiology Masterfile for segregation of items in E-Prescription print out.

12. Consultation Type

a. This is the module where the user set up the Consultation Description available in the Health Facility that can be selected in patient's queueing details.

13. Medicine Category

a. Entries in this module are used in the Medicine masterfile to identify which category does the specific medicine belongs and these entries also reflects in the ePresS.

14. PHIC Member Category

 User can add data in this module that can be use in PHIC Member Information in patient registration form.

15. Chief Complaint

- a. Data in this module are based on the library provided by Philhealth.
- b. Entries in this module are used in XML generation to be submitted to Philhealth for Konsulta compliance.

16. Chief Complaint Details

- User can add data in this module that are linked to Chief Complaint masterfile.
- Entries in this module are used in the patient's consultation specifically in Subjective part.

17. Physical Examination Type

 Data in this module are based on the system indicated under Pertinent Findings per system of Philhealth.

18. Physical Examination Detail Type

- a. Data in this module are based on the library provided by Philhealth.
- Entries in this module are used in XML generation to be submitted to Philhealth for Konsulta compliance.

19. Physical Examination Detail

 User can add data in this module that are linked to Physical Examination Detail Type.

 Entries in this module are used in the patient's consultation specifically in Objective part.

20. Immunization

a. Entries in this module are used in the patient's consultation specifically in Immunization module under objective part.

21. Immunization Type

 a. This refers to immunization categories that are used in the patient's consultation specifically in Immunization module under objective part.

REPORTS

 Data that the user can see and generate in Report Module is based in the Health Facility where the user logs in.

 All report has a wide selection of date range wherein the user can generate report from daily, weekly, monthly or any specific date selection.

1. Daily Service Report

Generates data from all ended consultation in the specified date.

b. The user can select specific elapsed time of consultation as 30 minutes, 1 hour, 1 hour and 30 minutes and 2 hours

2. Consumption Report

 Generates data from rendered items in Pharmacy, Laboratory and Radiology based on the specified date.

 This report shows actual consumption of medicine and services of the specific SDN.

Top Morbidity Report

a. Generates data based on top Diagnosis assessed by health workers on the specified date.

b. The system did not contain the report into Top 10 or Top 20 Diagnosis only. System is flexible that user has access to select what top selection he wants to generate.

4. Top Diagnostic Test Prescribed Report

 Generates data based on top Diagnostic Test prescribed by health workers on the specified date. b. The system did not contain the report into Top 10 or Top 20 Diagnostic Test only. System is flexible that user has access to select what top selection he wants to generate.

5. Top Medicine Prescribed Report

 Generates data based on top Medicine prescribed by health workers on the specified date.

b. The system did not contain the report into Top 10 or Top 20 Diagnostic Test only. System is flexible that user has access to select what top selection he wants to generate.

User can filter the report as per Consultation or per Quantity.

6. Doctor's Performance Report

a. Generates performance percentage per Physician in specific Health Facility by dividing the number of consulted patients of a specific doctor compared to total consulted patient of the whole health facility on the specified date.

b. User can filter the report as per specific Physician on the Health Facility or all

Physician on the Health Facility.

7. List of Patient Under Medication Report

 Generates list of patients who has prescribed medication such as Metformin, Aspirin and Losartan.

b. This report can be used to monitor number of patients who are Diabetic, has Cardiac Problems or Hypertensive that consulted on the specific Health Facility.

8. Consultation Census Report

- a. Generates number of patients that are:
 - Direct Consultation
 - Consultation by Nurses with needed approval
 - Number of Consultation with Appointment
 - Number of Consultation with Referral

PATIENT REGISTRATION

Verification

a. Verify thru Fingerprint

> By the use of biometric device, system will verify if the patient is already registered in the database.

b. Verify using Info

➤ This is the traditional way of patient verification wherein user will have to input patient's Last Name and Birthdate for verification.

Registration

a. It contains patient's basic information such as:

- Patient Name
- Birthdate
- Patient Type
- Civil Status &
- > Sex

Being mandatory fields. Together with these required fields are Age, Contact Number, Primary Care Provider and Address that are also best to be filled out for completeness of data.

- b. The system has a capability to take the recent photo of the patient.
- Under this module, the user can also register patient's fingerprint for additional patient's verification.
- d. The user can also update the patient's basic information of existing patients as well as the photo and fingerprint of the patient.
- The system also allows pre-registration by saving only the registration details
 of the patient on the database but will not be added to the consultation queue.
- f. Patient registration will also create unique patient number to each registered patient.

PATIENT CONSULTATION

- User can be able to see patient's basic information, if user has access right.
- This module shows patient's consultation which is a unique code in every patient's consultation.
- User can choose SOAP layout in his most convenient view.
- The system offers two ways of consultation: Direct Consultation which does not need approval for the proposed Diagnosis, Diagnostic Test and Medication. User using this consultation can end transaction without seeking approval. The other process is the consultation that needs approval of proposed Diagnosis, Diagnostic Test and Medication from user that has access to approved proposal. Only approved proposal will be included in printable forms.

1. Consultation History

- Shows past medical record of the patient that is saved in the database.
- This module eliminates manual process of retrieving past medical record of existing patient in a specific health facility.
- c. All past consultations are for viewing purposes only. Any user cannot do alteration to consultation that was already ended.

Diagnostic Result

- User can add result via text by typing manually in the text field provided in the system.
- This module also allow user to upload result in patient consultation in image format.

3. Subjective

- This panel consists of Chief Complaint and History of Present Illness which are mandatory fields before saving patient's consultation.
- b. It also consists of Review of Systems and OB/M if the patient is Female.
- User can add Family History and Personal and Social History based on ICD 10 description, encode free text description or combination of both.

4. Objective

- a. Consists of patient's Vital Signs such as:
 - > Blood Pressure (BP)
 - > Heart Rate (HR)
 - > Respiratory Rate (RR)
 - > Temperature
 - > Height
 - > Weight
 - Physical Examination
- User can add Sketch using the templates uploaded in the system. Users are also allowed to draw or insert text in the chosen template.
- This module also allow user to upload or capture image to be use as Sketch template.

5. Assessment

- This module includes Diagnosis based on ICD 10 code and description. Once consultation is ended, all approved diagnosis will be added in the Problem List.
- It also has Consideration text field which can be encoded by the user for additional information.
- c. This module also features Past Medical & Surgical History of patient which user can add based on ICD 10 description, encode free text description or combination of both. This will also be added to Problem List

6. Plan

- a. This module is used to input prescribed Diagnostic Tests together with Medication with Quantity and Signa.
- b. It also allows user to input text in Non-Pharmacological Advice and Transportation free text field.
- c. Appointment Tab
 - This is use for Scheduling. Once this tab is use, triage will no longer add the patient in the queue manually. On the specified date & time, the system will automatically add the patient in the queue.
 - > Using this tab will also indicate that the patient is queued up in the Consultation Panel via Appointment.
- d. Referral Tab
 - This tab is use to refer patient to other health facility. Once this tab is use, triage will no longer add the patient in the queue manually. On the specified date & time, the system will automatically add the patient in the queue.

> Using this tab will also indicate that the patient is queued up in the Consultation Panel via Referral.

e. Approval Tab

> This tab is used by user who needs to Seek Approval first before ending the consultation.

From Consultation panel the patient name will go to the Pending Consultation panel if this tab is populated. Once green check mark is seen beside the name of the patient, it means that the proposal was already checked by whom the user seek approval to.

7. Forms

a. Printable forms that are available in the system per consultation are:

SOAP Notes

- E-Prescription (Diagnostic Tests)
- > E-Prescription (Medication)
- Medical Certificate
- > Referral Letter
- Problem List

SERVICE DELIVERY NETWORK (SDN) MODULE:

a) RENDERING

- This module allows the user to scan QR code found in the E-Prescription or encode patient's consultation number to retrieve prescribed Diagnostic Test & Medication.
- User can indicate number of items to be rendered, but he cannot input more than
 the requested quantity. The user can also choose brand in Medicine Rendering
 depending if it is offered on their respective SDN.
- Once transaction is Posted, the system will display auto-generated Order of Payment number, total amount of posted transaction, date rendered, user who rendered the request and reference number that will be use as E-Receipt Ticket in Payment Tagging.
- Order of Payment print out is also available after posting the transaction.

b) PRICE UPDATE

- This module allows the user to set up price of specific item that are available on their SDN.
- User cannot input price more than the Price Index set in EHR.
- This module is also use to activate and deactivate items in the specific SDN.
- System is capable of automatic Price Update based on the specified date recorded in the system.

c) TRANSACTION LIST

- Consist of rendered transactions of the specific SDN where the user logs in.
- This module allows the user to Void wrongly dispensed or rendered transactions with corresponding Remarks to identify the reason of voiding. Once transaction is

- voided, items on the said transaction will be available again for rendering across all SDN in the network.
- Only rendered transactions on the specific SDN where the user logs in appear in this module, thus, user cannot void transactions from other SDN where he does not have access.
- This module also allows user to Upload Result of rendered Diagnostic Test. Uploaded result will be also incorporated in patient's medical history so that even if the patient is unable to bring hard copy of his diagnostic result, health workers assigned to the patient can easily see the results in patient's consultation history in EHR.

PHIC E-CLAIMS MODULE:

1. PHIC eClaims Standalone

a. New Claims

- > Has a capability to check real-time PHIC Eligibility Verification and Verify PHIC Member PIN number into PHIC Web Service.
- This module has a capability to create PHIC Application entry for:
 - ✓ Indigent Patient
 - ✓ Hospital Sponsored

 - Employed Private Employed Government
 - ✓ Senior Citizen
 - ✓ ETC...
- This module has the capability to capture all registered Patient Information required in the PHIC reimbursement claims with the 'click' of the mouse.
 - Has a capability to link into Hospital Information System and prevent PHIC processor to double encoding of pertinent information with regards to patient demographics and PHIC member information.
 - Real-time connected to PHIC web service to allow PHIC staff to inquire for the following information:
 - ✓ Eligibility Check
 - ✓ Member verification
 - ✓ Doctor's Accreditation Expiration
 - ✓ Doctor PAN
 - ✓ Find Employer
 - ✓ Find Hospital
 - ✓ Find Case Rate
 - ✓ PHIC Eclaims Status
 - In progress
 - Denied

- RTH
- With Voucher
- With Check
- This module has a capability to record patient Clinical Record for CF4 and Maternity Care for CF3.
- This module has a capability to process Case Rate Claims for Medical and Surgical Case.
- This module has a capability to process secondary case rate claims.
- This module has a capability to tag number of a session done for a procedure like dialysis, chemo and etc.
- This module allows user to print CF 1, CF2, CF3 and CF4.
- Has a capability to do online encoding or offline encoding.

b. Claim List

- > This module has a capability to monitor all Claim list encoded with its corresponding status. PHIC aging of receivables to monitor the transmitted claims to PHIC.
- > This module has a capability to monitor claim series number, Receipt ticket number and eclaims status.
- Has a capability to scan document or upload the saved documents in the local directory.

c. Transmittal

- This module has a capability to tagged PHIC Transmittal Number and tagging of actual date received by PHIC Region Office.
- Has a capability to shift to PHIC eClaims Cloud Storage.
- Has a capability transmit Covid patient eclaims.
- This module has a capability to generate all transmitted claims
- With imbedded data validator to check if encoded data is valid in PHIC webservice requirements or not.

ICT SERVICES

DBP Data Center, Incorporated will outline in detail the processes from the award of contract, the service and maintenance program carefully identifying the Emergency, Urgent and Routine Jobs necessary for the Application System to be in full service. This will include other works required in order to address restoration of Application System to full service if unforeseen events may prevent it from being used.

The necessary information required but not limited to:

- a) Response time for Emergency/Urgent/Routine (E,U,R) Jobs
- b) 8 x 5 Service Call Unit
- c) Availability of Service Engineers
- d) Number of Service Engineers available for the Project
- e) Guaranteed response time for E,U,R jobs
- f) Software upgrades
- g) Company Support (manual instruction book, educational support materials, medical and technical support for company)
- h) Customer relationship management (Helpdesk)

Other information

DBP Data Center Inc.

SUBMITTED BY: Atty. Kristian Vicence T. Gargantiel

DBP DATA CENTER, INCORPORATED

9TH FLOOR DBP BUILDING

PLIVAT AVENUE COR MAKATI AVENUE

GIL PUYAT AVENUE COR MAKATI AVENUE
MAKATI CITY

EVALUATED BY: FAMA DUTH B. CUEVAC, NO MEAN OFFICER

REMARK'S



BIDS AND AWARDS COMMITTEE

Negotiated Procurement (Agency-to-Agency)

RESOLUTION RECOMMENDING THE USE OF AGENCY-TO-AGENCY
AGREEMENT FOR THE MULTI-YEAR CONTRACT FOR THE ENGAGEMENT OF A
SERVICE PROVIDER FOR THE IMPLEMENTATION OF A PRIMARY
HEALTHCARE INFORMATION AND CLINICAL SYSTEM (PHICS) FOR THE
CITY HEALTH UNITS AND BARANGAY HEALTH STATIONS

WHEREAS, a resolution authorizing the City Government of Pasig through the Honorable City Mayor to enter into and sign a multi-year contract on Primary Healthcare Information and Clinical System with the DBP Data Center Inc. ("DCI"), and for other purposes was approved on 20 March 2023;

WHEREAS, on 23 March 2023, the Bids and Awards Committee ("BAC") received from the City Health Department ("END-USER") Purchase Request No. 100-23-03-616 ("SUBJECT PR") for the Multi-year Contract for the Engagement of a Service Provider for the Implementation of a Primary Healthcare Information and Clinical System (PHICS) for the City Health Units and Barangay Health Stations ("PROCUREMENT PROJECT") with an Approved Budget for the Contract ("ABC") of Seventeen Million Seven Hundred Fifty Five Thousand Five Hundred Pesos (Php 17,755,500.00);

WHEREAS, on 24 March 2023, the BAC conducted a Pre-procurement conference for the Procurement Project and assessed the readiness of the Procurement Project;

WHEREAS, Section 53.5 on Negotiated Procurement (Agency-to-Agency) in relation to Annex "H" (V)(D)(5) of the revised Implementing Rules and Regulations of Republic Act ("R.A.") No. 9184 allows the procurement from another agency of the government that has the mandate to deliver goods or services as required by the Procuring Entity;

WHEREAS, in the justification submitted by the End-user, it was stated that entering into an Agency-to-Agency Agreement with DCI is more efficient and economical to the government considering:



"For us in the Pasig City Health Department, the choice of a good PHIC's to use was guided by looking at the following attributes: it contains the 1) patient's demographic data, 2) medical history, 3) INCD risk assessment. 4) immunization history, 5) allergies, 6) diagnosis, 7) medications, 8) treatment plans, 9) radiology and laboratory results, 10) industry experience, 11) good user feedback from current users; and the program (software) demonstrates 12) flexibility and customizability, 13) allows access to evidence-based tools that can be used to make decisions for care, 14) reliable customer support, 15) compliance protection and importantly, 16) interoperability.

With all these attributes in mind, the DBP-DCI EMR fits all of the requirements. It actually fares a lot better than the existing systems that have been reviewed and beta tested by the PhilHealth para sa Pasig team during the pre-implementation phase of Consulta which were: IClinicsys (developed and endorsed by the KMITs of DOH) and the interim software of Philhealth E-Konsulta, which fails in both interoperability abd responsiveness of its customer support, as well as in its ability to be customized for the needs of the city.

In terms of cost, we have no data in the Philippines as to the average cost of HER. However in a review of published white paper on EHR software Pricing Guide, cost of a system can run at USD 1,200 per user per year for single MD practices, and for larger practices who benefit form economies of scale, around USD 685 per user per year. Translated to a typical health center set-up in Pasig City where there are around 6 users, it could run at around USD 4,110 to USD 7,200 (or, in Php 221,840 to 388,800 per facility per year). This only accounts for the system and does not include training costs, data migration and other potential support payments that is not included in the plans. Costs can run up to USD 10,000 each year (Php 540,000).

With this in mind, as well as the potential benefits of decreasing inefficiencies in the delivery of care, improving the quality of service, reducing unnecessary cost for logistics and potential for increased revenue from PhilHealth, I feel that the monthly cost offered by DBP DCI is justifiable considering that the program has been tested in other areas in the Philippines and the users per facility actually exceeds that which was factored in the computation."

WHEREAS, in the Certification of Compliance submitted by DCI pursuant to Annex "H", V, D, par. 5 of the IRR of R.A. No. 9184, it provides that DCI has complied with the implementing guidelines on Agency-to-Agency arrangements with reference to the following conditions: (i) Servicing Agency has the mandate to deliver the goods and services required to be procured or to undertake the infrastructure project or consultancy required by the Procuring Agency; (ii) Servicing Agency has the absorptive capacity to undertake the project; (iii) Servicing Agency owns or has access to the necessary tools and equipment required for the project;

WHEREAS, on 24 May 2023, a negotiation was conducted and DCI submitted its offer with the following details:

Year	Offer (PhP)
2023	17,744,850.00
2024	17,745,000.00

WHEREFORE, considering the foregoing, and provided that the conditions and procedure under Annex "H" of the IRR of R.A. No. 9184 are met, it is hereby resolved by the Bids and Awards Committee that (i) Negotiated Procurement (Agency-to-Agency) shall be adopted as the Mode of Procurement for the PROCUREMENT PROJECT for the END-USER under the SUBJECT P.R.; and (ii) the contract for the PROCUREMENT PROJECT for the total amount of Seventeen Million Seven Hundred Forty Four Thousand Eight Hundred Fifty Pesos (Php 17,744,850.00) be awarded to the DBP Data Center Inc.

DONE in Pasig City, this ______, 2023.

ATTY. JOSEPHINE C. ATI-BAGAOISAN

Chairperson

ATTY. DIEGO LUIS S. SANTIAGO

Vice Chairperson

-Not Present-

ATTY. RAUL G. CORALDE

Member

DR. EMMA M. SANCHEZ

Member

-Not Present-

DR. JEANNA V. PLES

Member



-Not Present-MS. RUTH F. ROMANO Member

Approved:

By the Authority of the City Mayor

ATTY. JERONIMO J. MAN
City Administrator MANZANERO A



NOTICE OF AWARD

26 May 2023

DBP DATA CENTER, INC.

4/F DBP Bldg., Sen. Gil J. Puyat Ave., Urdaneta

Gentlemen/Mesdames:

We are pleased to inform you that your quotation/proposal for the Negotiated Procurement - Agency-to-Agency for Multi-year Contract for the Engagement of a Service Provider for the Implementation of a Primary Healthcare Information and Clinical System (PHICS) for the City Health Units and Barangay Health Stations - City Health Department under Purchase Request No. 100-23-03-616 with a total contract price of Seventeen Million Seven Hundred Forty Four Thousand Eight Hundred Fifty Pesos (Php 17,744,850.00) has been determined to be the single calculated and responsive quotation/proposal. The project is therefore awarded to you.

Very truly yours,

VICTOR MA. REGIS N. SOTTO City Mayor

By authority of the City Mayor:

ATTY. JERONIMO UMANZANEROP

City Administrator

Conforme: ATTY. KRISTJAN VICENTE T GARGANTIEL

Authorized Representative DBP DATA CENTER, INC.

Date: MAY 29, 2023

