## XIII. DEPARTMENT OF HEALTH

## A. OFFICE OF THE SECRETARY

## STRATEGIC OBJECTIVES

MANDATE

Executive Order No. 102 mandates the Department of Health (DOH) to redirect its functions and operations in accordance with the devolution of basic health services to the local government units. Likewise, the DOH is expected to provide assistance to the local government units (LGUs), non-government organizations (NGOs) other national government agencies, people's organizations (POs) and the health sector in general in effectively implementing health programs, projects and services to every Filipino.

VISION

: A global leader for attaining better health outcomes, competitive and responsive health care systems, and equitable health care financing

MISSION

: To guarantee equitable, sustainable and quality health care for all Filipinos, especially the poor and to lead the quest for excellence in health

KEY RESULT

AREAS

: Poverty reduction and empowerment of the poor and vulnerable

SECTOR OUTCOME : Human development status improved

ORGANIZATIONAL

OUTCOME

: Access to quality and afforable health products and services assured

# SECTION 1 : EXPENDITURE PROGRAM (in pesos)

		•		
No./ Code	GASS / STO / OPERATIONS / PROJECTS	2012 Actual	2013 Current	2014 Proposed
100000000	General Administration and Support	1,107,420,000	339,177,000	370,969,000
	PS MOOE CO	168,217,000 653,963,000 285,240,000	89,546,000 249,631,000	144,490,000 226,479,000
200000000	Support to Operations	729,926,000	15,914,605,000	1,015,845,000
	PS MOOE CO	230,864,000 387,607,000 111,455,000	254,361,000 15,510,244,000 150,000,000	693,717,000 322,128,000
300000000	Operations	31,927,364,000	33,760,016,000	78,651,660,000
	PS MOOE CO	8,839,167,000 14,906,917,000 8,181,280,000	8,522,541,000 14,442,980,000 10,794,495,000	9,929,839,000 55,248,477,000 13,473,344,000
	Projects	238,303,000	457,921,000	132,826,000
	MOOE CO	108,331,000 129,972,000	316,348,000 141,573,000	42,000,000 90,826,000
TOTAL AGENCY	BUDGET	34,003,013,000	50,471,719,000	80,171,300,000
	PS MOOE CO	9,238,248,000 16,056,818,000 8,707,947,000	8,866,448,000 30,519,203,000 11,086,068,000	10,768,046,000 55,839,084,000 13,564,170,000

NOTE : Net of RLIP

		STAFFING SUMMARY		
	2012	2013	2014	
TOTAL STAFFING Total Number of Authorized Positions Total Number of Filled Positions	29,210 25,105	29,211 24,888	29,211 24,888	
	257.45	21,000	21,000	
OPERATIONS BY MFO		PROPOSED 201	4	
	PS	MOOE	CO	TOTAL
MFO 1: HEALTH SECTOR POLICY SERVICES	87,726,000	1,255,944,000		1,343,670,000
MFO 2: TECHNICAL SUPPORT SERVICES	1,027,077,000	50,196,022,000	9,152,005,000	60,375,104,000
MFO 3: HOSPITAL SERVICES	8,483,236,000	3,426,818,000	4,287,530,000	16,197,584,000
MFO 4: HEALTH SECTOR REGULATION SERVICES	331,800,000	369,693,000	33,809,000	735,302,000
NOTE : Net of RLIP				
PROJECTS  Locally-Funded Project(s)	PS	MOOE 42,000,000	CO 90,826,000	TOTAL 132,826,000
Locally-Funded Project(s)  SECTION 2 : EXPENDITURE PROGRAM		42,000,000	90,826,000	
Locally-Funded Project(s)  SECTION 2 : EXPENDITURE PROGRAM	RAM BY CENTRAL / F	42,000,000	90,826,000	
Locally-Funded Project(s)  SECTION 2 : EXPENDITURE PROG	RAM BY CENTRAL / F (in pesos)	42,000,000	90,826,000 DN, 2014	132,826,000

Region XII - SOCCSKSARGEN 227,069,000 2,606,944,000 523,821,000 3,357,834,000 Region XIII - CARAGA 222,084,000 1,994,469,000 551,711,000 2,768,264,000 TOTAL AGENCY BUDGET 10,768,046,000 55,839,084,000 13,564,170,000 80,171,300,000 

NOTE: Net of RLIP

## SECTION 3 : SPECIAL PROVISION(S)

- 1. Value-Added Tax in lieu of Franchise Tax. In addition to the amounts appropriated herein, Twenty Nine Million Four Hundred Twenty Thousand Pesos (P29,420,000) shall be sourced from Value-Added Tax in lieu of Franchise Tax on gross receipts collected by the following agencies from horse races and shall be used for the indicated purposes:
  - (a) Twenty-four percent (24%) of the collections from Manila Jockey Club, Inc. (MJCI) in accordance with Section 6 of R.A. No. 6631, as amended and twenty-four percent (24%) of the collections from Philippine Racing Commission, Inc. (PHILRACOM) in accordance with Section 8 of R.A. No. 6632, as amended to augment the operating requirements of the Philippine Anti-Tuberculosis Society;
  - (b) Eight percent (8%) of the collections from MJCI in accordance with Section 6 of R.A. No. 6631, as amended and eight percent (8%) of the collections from PHILRACOM in accordance with Section 8 of R.A. No. 6632, as amended to augment the operating requirements of the White Cross, Inc.; and
  - (c)Twenty-eight percent (28%) of the collections from PHILRACOM in accordance with Section 8 of R.A. No. 6632, as amended to augment the operating requirements of the PCSO.

Releases from said amount shall be subject to the submission of a Special Budget pursuant to Section 35, Chapter 5, Book VI of E.O. No. 292, s. 1987.

2. Hospital Income. In addition to the amounts appropriated herein, all income generated from the operation of special hospitals, medical centers, institute for disease prevention and control, including drug abuse treatment and rehabilitation centers and facilities, and other National Government hospitals under the DOH shall be deposited in an authorized government depository bank and shall be used to augment the hospital's MOOE and Capital Outlays: PROVIDED, That no amount therefrom shall be used for the payment of salaries, allowances and other benefits: PROVIDED, FURTHER, That at least twenty-five percent (25%) of the said income shall be used to purchase and upgrade hospital equipment used directly in the delivery of health services.

The DOH shall prepare and submit to the DBM not later than November 15 of the preceding year, the annual operating budget for the current year covering said income and the corresponding expenditures. Likewise, it shall submit to the DBM not later than March 1 of the current year its audited financial statement for the immediately preceding year. The Secretary of Health and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that said reports are likewise posted on the official website of the DOH.

Failure to submit said annual reports and the audited financial statements shall render any disbursement from said income void, and shall subject the erring officials and employees to disciplinary actions in accordance with Section 43, Chapter 5, and Section 80, Chapter 7, Book VI of E.O. No. 292, and to appropriate criminal action under existing penal laws.

3. Fees and Charges of the Bureau of Quarantine and International Health Surveillance. In addition to the amounts appropriated herein, Fifty Eight Million Nine Hundred Thirty Two Thousand Pesos (P58,932,000) sourced from fifty percent (50%) of the fees collected by the Bureau of Quarantine and International Health Surveillance (BQIHS) shall be used for the operational requirements of the BQIHS in accordance with Section 9 of R.A. No. 9271.

Releases from said amount shall be subject to the submission of a Special Budget pursuant to Section 35, Chapter 5, Book VI of E.O. No. 292.

The DOH shall submit, either in printed form or by way of electronic document, to the DBM, copy furnished the House Committee on Appropriations and the Senate Committee on Finance, quarterly reports on the financial and physical accomplishments of the income of BQIHS. The Secretary of Health and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that said quarterly reports are likewise posted on the official website of the DOH.

Fees, Fines, Royalties and Other Charges of the Food and Drugs Administration. appropriated herein, Nine Hundred Sixty Seven Million Two Hundred Sixty Six Thousand Eight Hundred Ninety Pesos (P967,266,890) sourced from fees, fines, royalties and other charges collected by the Food and Drugs Administration (FDA) shall be released to the FDA upon submission of its Five-year Developmental Plan required under R.A. No. 9502 and subject to guidelines to be jointly issued by the DBM, DOH and FDA, and the submission of a Special Budget pursuant to Section 35, Chapter 5, Book VI of E.O. No. 292. Said amount shall be utilized by the FDA in accordance with its approved Five-year Developmental Plan to ensure its self-sufficiency.

The FDA shall submit, either in printed form or by way of electronic document, to the DBM, the House Committee on Appropriations and the Senate Committee on Finance, separate quarterly reports on the physical and financial accomplishments of its income. The Director of FDA and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that said quarterly reports are likewise posted on the official website of the FDA.

Health Facilities Enhancement Program. The amount of Thirteen Billion Three Hundred Twenty Five Million Two Hundred Thirty Five Thousand Four Hundred Ninety One Pesos (P13,325,235,491) appropriated herein for the Health Facilities Enhancement Program shall be used to implement the following in compliance with the Philippines' commitment to health by year 2015 under the Millennium Development Goal: (i) the construction, upgrading, expansion, repair and rehabilitation of DOH retained hospitals, and other health care facilities, such as Rural Health Units (RHUs), district/provincial hospitals, and barangay health stations; and (ii) the purchase of hospital equipment. Said amount is further allocated, as follows:

Health Facilities	Number of Health Facilities Covered	Amount Allocated for construction, upgrading, expansion	Amount Allocated for repair and rehabilitation	Amount allocated for hospital equipment	Subtotal
Barangay Health Station(BHS)	962	156,900,000	899,987,095	316,366,600	1,373,253,695
Rural Health Unit (RHU)	1,265	845,025,000	75,555,802	827,505,554	1,748,086,356
LGU Hospitals DOH Retained Hospital DOH Specialized Hospitals	584 51 9	1,783,645,000	2,220,995,336 1,060,800,000 1,994,000,000	1,926,025,104 882,119,000 336.311.000	5,930,665,440 1,942,919,000 2,330,311,000
TOTAL	<u>2.871</u>	2,785,570,000	6,251,338,233	<u>4,288,327,258</u>	13,325,235,491

PROVIDED, That the amount of Two Billion Seven Hundred Eighty Five Million Five Hundred Seventy Thousand Pesos (P2,785,570,000) appropriated herein for the construction, upgrading, and expansion of DOH retained hospitals and other health care facilities shall be released directly to the DPWH: PROVIDED, FURTHER, That the DPWH shall implement the construction, upgrading, and expansion of DOH retained hospitals and other health care facilities following the architectural and engineering design prescribed by the DOH: PROVIDED, FURTHERMORE, That the DPWH shall construct DOH retained hospitals and other health care facilities only in lots that are already owned by the government: PROVIDED, FURTHERMORE, That the amount of Six Billion Two Hundred Fifty One Million Three Hundred Thirty Eight Thousand Two Hundred Thirty Three Pesos (P6,251,338,233) appropriated herein for the repair and rehabilitation of DOH retained hospitals and other health care facilities shall be implemented by the DOH through public bidding in accordance with R.A. No. 9184 and its Implementing Rules and Regulations (IRR): PROVIDED, FINALLY, That releases from said amounts shall be made upon submission to the DBM of the list of retained hospitals and other health care facilities to be constructed, upgraded, expanded, repaired and rehabilitated.

The amount of Four Billion Two Hundred Eighty Eight Million Three Hundred Twenty Seven Thousand Two Hundred Fifty Eight Pesos (P4,288,327,258) appropriated herein for hospital equipment shall be used by the DOH to procure hospital equipment for DOH retained hospitals and other health care facilities to be constructed, upgraded, or expanded: PROVIDED, That in the identification of hospital equipment to be purchased, the DOH shall give preference to equipment needed by DOH retained hospitals and other health care facilities located in areas: (i) where there are large number of poor families/households under the National Household Targeting System for Poverty Reduction by the DSWD, or where the facilities are situated near said families; and (ii) where there are no other private health care facilities which can provide affordable and quality health care: PROVIDED, FURTHER, That the DOH may procure such hospital equipment in bulk to ensure cost-efficiency.

The Secretary of Health and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that the list and cost of DOH retained hospitals and other health care facilities constructed, upgraded, expanded, repaired and rehabilitated, and the list and cost of hospital equipment purchased, including its distribution are posted on the official website of the DOH.

6. Realignment of Projects under the Health Facilities Enhancement Program. The Secretary of Health is authorized to approve the realignment of allotment released from appropriations for the Health Facilities Enhancement Program in the following instances: (i) change in the location of the DOH retained hospital or other health care facility to be constructed or change of the DOH retained hospital or other health care facility to be upgraded, expanded, repaired or rehabilitated, as the case may be, due to duplication or double funding of project, peace and order issues, and other policy considerations, as may be determined by the Secretary of Health; and (ii) change in the scope of work: PROVIDED, That the realignment may only be undertaken once per project and during the first quarter: PROVIDED, FURTHER, That the allotment released has not yet been obligated for the original project/scope of work.

The DOH shall inform the DBM, in writing, of every realignment within five (5) calendar days from its approval. The Secretary of Health and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that such realignment is likewise posted on the official website of the DOH within the same period.

7. National Health Insurance Program for the Indigents. The amount of Thirty Five Billion Two Hundred Ninety Five Million Six Hundred Fifty Seven Thousand Pesos (P35,295,657,000) appropriated herein under Subsidy for Health Insurance Premium of Indigent Families Enrolled in the National Health Insurance Program shall cover the full premium subsidy for health insurance premium of indigents under the National Household Targeting System for Poverty Reduction of the DSWD: PROVIDED, That the cost of administering the Program shall not exceed seven percent (7%) of the above amount.

Releases from said amount to PHILHEALTH shall be made through the BTr, upon the submission by PHILHEALTH of the number of indigent enrollees and financial statements that may be required by DBM, and a Special Budget pursuant to Section 35, Chapter 5, Book VI of E.O. No. 292.

8. PAyapa at MAsaganang PamayaNAn Program. Of the amount appropriated herein for the PAyapa at MAsaganang PamayaNAn (PAMANA) Program, Fifteen Million Six Hundred Thousand Pesos (P15,600,000) shall be used exclusively for the PAMANA Program to implement projects in conflict-affected areas already identified by the Office of the Presidential Adviser on the Peace Process (OPAPP). In no case shall said amount be used for any other purpose: PROVIDED, That the subsidy for health insurance premiums of former rebels as determined by the OPAPP shall be released to PHILHEALTH, through the BTr, upon submission of the number of indigent enrollees and period of coverage, including financial statements as may be required by the DBM, and a Special Budget pursuant to Section 35, Chapter 5, Book VI of E.O. No. 292.

The DOH shall submit, either in printed form or by way of electronic document, to the OPAPP quarterly reports on the status of implementation of the PAMANA Program. The Secretary of Health and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that said quarterly reports are likewise posted on the official website of the DOH.

9. Sajahatra Bangsamoro Program. Of the amount appropriated herein for the PAMANA Program, Twenty Six Million Four Hundred Thousand Pesos (P26,400,000) shall be used exclusively for the Sajahatra Bangsamoro Program as subsidy for health insurance premiums of targeted beneficiaries already identified by the Moro Islamic Liberation Front. In no case shall said amount be used for any other purpose: PROVIDED, That releases from said amount to PHILHEALTH shall be made through the BTr, upon submission by PHILHEALTH of the number of indigent enrollees and financial statements that may be required by DBM, and a Special Budget pursuant to Section 35, Chapter 5, Book VI of E.O. No. 292.

The DOH shall submit, either in printed form or by way of electronic document, to the Task Force on Bangsamoro Development created under A.O. No. 37, s. 2013, quarterly reports on the status of implementation of the Sajahatra Bangsamoro Program. The Secretary of Health and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that said quarterly reports are likewise posted on the official website of the DOH.

Purchase and Allocation of Drugs, Medicines and Vaccines. The amount of Ten Billion Two Hundred Twenty Two Million Three Hundred Twenty Seven Thousand Pesos (P10,222,327,000) appropriated herein for drugs, medicines, and vaccines shall be used for the procurement of drugs, medicines, and vaccines for distribution to DOH retained hospitals and other health care facilities: PROVIDED, That releases from said amount shall be made upon submission by the DOH of its distribution list of the drugs, medicines and vaccines per health care facility in every province: PROVIDED, FURTHER, That in the preparation of the distribution list, the DOH shall allocate eighty percent (80%) of the drugs, medicines and vaccines to provinces where: (i) there are large number of poor families/households under the National Household Targeting System for Poverty Reduction by the DSWD; and (ii) the absolute number of poor and the incidence of poverty are high as identified in the latest official poverty statistics of the National Statistical Coordination Board (NSCB): PROVIDED, FINALLY, That any savings generated from the procurement of drugs, medicines and vaccines shall be used to purchase additional drugs, medicines and vaccines to be distributed in accordance with the above-stated allocation.

Notwithstanding the allocation of drugs, medicines and vaccines as provided in the above distribution list submitted by the DOH to the DBM, the Secretary of Health may reallocate the provision of drugs, medicines and vaccines when necessitated by the occurrence of disease outbreaks, calamities and other emergencies during the year.

The DOH shall submit, either in printed form or by way of electronic document, to the DBM, copy furnished the House Committee on Appropriations, and the Senate Committee on Finance, quarterly reports on the allocation of drugs, medicines and vaccines by province and the actual distribution to recipient DOH retained hospitals and other health care facilities. The Secretary of Health and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that said quarterly reports are likewise posted on the official website of the DOH.

11. Reimbursement for Drugs and Medicines, and Vaccines. The amount appropriated herein for drugs, medicines and vaccines shall be used for the purchase of drugs, medicines and vaccines for distribution to DOH retained hospitals and other health care facilities: PROVIDED, That the drugs, medicines and vaccines shall be availed of through the use of PHILHEALTH card: PROVIDED, FURTHER, That the amount of reimbursements made by PHILHEALTH shall be used exclusively by the DOH for the construction of additional health care facilities, including the purchase and upgrade of hospital equipment: PROVIDED, FINALLY, That in no case shall said amount be used for the payment of salaries and other allowances.

Implementation of this provision shall be subject to guidelines to be issued by the DOH, DBM and PHILHEALTH.

- 12. Drugs and Medicine Requirements of Botika ng Barangays. The Botika ng Barangays (BnBs) may request the Centers for Health Development (CHDs) to procure in their behalf low-cost drugs and medicines under the Low-Cost Quality Medicine Program: PROVIDED, That funds for the purpose shall be remitted by the BnBs to the CHD: PROVIDED, FURTHER, That the procurement of drugs and medicines shall be made from the Philippine International Trading Corporation, unless other suppliers, drug manufacturers or entities offer the same quality of drugs and medicines at lower prices, subject to the provisions of R.A. No. 9184 and its IRR.
- 13. Procurement of Vaccines for Senior Citizens. The amount appropriated herein for Non-Communicable Disease Prevention and Control includes the procurement of vaccines for senior citizens identified under the National Household Targeting System for Poverty Reduction of the DSWD.

The DOH shall immediately implement its annual procurement plan for said vaccines to ensure the timely procurement and distribution thereof.

- 14. Advance Payment for Drugs and Vaccines Not Locally Available. The DOH is authorized to deposit or pay in advance the amount necessary for the procurement of drugs and vaccines from the World Health Organization, the United Nations International Children's Emergency Fund, and the Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ) GmbH: PROVIDED, That said drugs and vaccines are not locally available.
- 15. Conditions for Emergency Purchases. The DOH shall only resort to emergency purchases in case of force majeure, such as, but not limited to, war, calamities, whether natural or man-made, epidemics, or when a needed product is in short supply or cannot be held in storage for a long period: PROVIDED, That said products or goods shall be delivered and distributed for the duration of the emergency: PROVIDED, FURTHER, That emergency purchases shall be subject to the provisions of R.A. No. 9184 and its IRR, and pertinent accounting and auditing rules and regulations.
- 16. Pinoy MD Scholarship Program. The amount of Fifty Seven Million Five Hundred Forty Seven Thousand Pesos (P57,547,000) appropriated herein for the implementation of the Pinoy MD Scholarship Program shall be limited to scholars who have taken and passed the qualifying examinations administered by any of the DOH-partner schools and complied with the criteria set forth by the DOH: PROVIDED, That priority shall be given to poor and deserving students or those coming from families belonging to the low-income bracket as determined by the NSCB. The DOH shall develop a database that will effectively provide periodic monitoring of the program's scholars.

The DOH shall submit, either in printed form or by way of electronic document, to the DBM, copy furnished the House Committee on Appropriations and the Senate Committee on Finance, quarterly reports on the financial and physical accomplishments of the Program, including the list of scholars. The Secretary of the DOH and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that said quarterly reports are likewise posted on the official website of the DOH.

- 17. Deployment of Medical Workers. In the deployment of doctors, midwives, nurses and other medical workers, the DOH shall give priority to localities where the absolute number of poor and the incidence of poverty are high as identified in the latest official poverty statistics of the NSCB.
- 18. Transfer of Drug Treatment and Rehabilitation Centers. The amounts appropriated herein for Substance Abuse Treatment and Rehabilitation Centers may be realigned to facilitate the transfer and absorption by the DOH of functions

relative to the operation and maintenance of treatment and rehabilitation centers for drug dependents and drug testing centers mandated under R.A. No. 9165 and its IRR.

19. Allocation for Autonomous Region in Muslim Mindanao from Nationally Funded Projects. The DOH shall ensure that the requirements of ARMM are provided in the regional allocation of its nationally funded programs and projects. The Secretary of Health and the Agency's web administrator or his/her equivalent shall be responsible for ensuring that the amounts allocated for ARMM per province are posted on the official website of the DOH.

Likewise, the ARGMM shall submit, either in printed form or by way of electronic document, to the DBM and DOH, separate quarterly reports on the implementation and status of all DOH funded programs and projects per province in the ARMM. The Regional Governor of ARGMM and the Regional Government's web administrator or his/her equivalent shall be responsible for ensuring that said quarterly reports are likewise posted on the official website of the ARGMM.

- 20. Restrictions on Realignment. The amounts appropriated herein under Disease Prevention and Control shall be used exclusively for the following preventive health care programs: (i) Health Emergency Management; (ii) Elimination of Disease as Public Threat; (iii) Rabies Control Program; (iv) Expanded Program on Immunization; (v) TB Control; (vi) Other Infectious Diseases and Emerging and Re-emerging Diseases including HIV/AIDS, Dengue, Food and Water Borne Diseases; (vii) Non-Communicable Disease Prevention and Control; (viii) Family Health and Responsible Parenting; and (ix) Environmental and Occupational Health, as well as the amount appropriated herein for the National Pharmaceutical Policy Development. In no case shall said amounts be used for any other purpose.
- 21. Appropriations for Programs and Specific Activities. The amounts appropriated herein for the programs of the agency shall be used specifically for the activities in the amounts indicated under the Details of the FY 2014 Budget attached as Annex A (Volumes 1 and 2) of this Act.

## SECTION 4 : PERFORMANCE INFORMATION

## KEY STRATEGIES :

MFO / PIs	2014 Targets
MFO 1: HEALTH SECTOR POLICY SERVICES	
Number of policies issued and disseminated	510
Average % of Stakeholders that rate health policies as good or better	70%
% of policies in the last 3 years that are reviewed/ updated	20%
MFO 2: TECHNICAL SUPPORT SERVICES	•
Training Support	
Number of Human Resources for Health of LGUs and other partners trained	40,010
Number of training days delivered	28,500
Average % of course participants that rate training as good or better	70%
% of requests for training support that are acted upon within one week of	
request	70%
Funding Support (HFEP)	•
Number of LGUs and other health partners provided with health facilities	1,783
% of clients that rate the provided health facilities as good or better	70%
% of provided health facilities that are fully operational 3 years after	
acceptance/installation	70%
% of facilities for which funding is provided that are fully operational	
within 6 months from approval of request from the LGUs	70%
Funding Support (NHIP)	
Coverage Rate of Indigents (NHTS-PR Poor)	100%
Admission Rate of Indigents (NHTS-PR Poor)	>80%
Claims Processing Turn-Around Time (TAT)	Not more than 60 days
% of hospitals with PhilHealth engagement	>90%
% of NHTS Poor members assigned to a PCB provider	>85%

Disease Prevention  Number of commodities and services to LGUs: Vaccination, Doctors Hours, Nurses and Midwives  % of stakeholders who rate the commodity supply/service good or better  % of requests for commodities and human resource services met in full within 48 hours  % of requests for commodities, health personnel and services acted/responded to within 48 hours of request	0 70% 70% 0%
MFO 3: HOSPITAL SERVICES Enter PI Set Description Number of out-patients managed Number of in-patients managed No. of elective surgeries No. of emergency surgeries Net death rate among in-patients % of clients that rate the hospital services as good or better % of in-patients with hospital - acquired infection % of out-patients with level 2 or more urgency rating attended to within 30 minutes	1,500,000 615,000 40,000 56,000 2% 70% 2%
MFO 4: HEALTH SECTOR REGULATION SERVICES Licensing/ Registration/ Accreditation No. of permits, licenses and accreditations issued for health products/ establishments/facilities/devices and technologies % of authorized/accredited entities with detected violations of license or accreditation conditions % of applications for permits, licenses or accreditation acted upon within 3 weeks of application Monitoring	62,082 4% 70%
No. of inspections of regulated products and entities % of submitted reports that resulted in the issuance of notice of violations and penalties imposed. % of entities which have been monitored at least once a year Enforcement No. of reported violations and complaints acted upon % of cases resolved	30,000 4% 0% 760 42%
% of stakeholder who view DOH enforcement as good or better No. of cases acted upon within 30 days	0% 500

NOTE: Exclusive of Targets funded from other sources, e.g. Special Account in the General Fund.

#### B. COMMISSION ON POPULATION

#### STRATEGIC OBJECTIVES

MANDATE

MISSION

: Central policy-making, planning, coordinating and monitoring body of the national population program by virtue of R.A. 6365 of 1971, as amended by P.D. 79 of 1972 VISION : Responsible individuals, well-planned, prosperous healthy and happy families, empowered communities, guided by the Divine Providence living harmoniously and equitably in a sustainable development.

> : We are a technical and information resource agency, working in partnership with national and local government policy and decision-makers, program implementers, community leaders and civil society. We will be the leading strategic partners, policy and program advocates for the Population Program. We will create a favorable and enabling policy environment for Population, Responsible Parenthood and Reproductive Health. We are committed to: 1) Ensuring continuing high quality professional development programs for Population, Responsible Parenthood and Reproductive Health, which will enhance the competencies and strenghten the capabilities of local government units and our partners; and 2) Enabling men, women, couples and families to make responsible decisions to meet their expressed needs in the timing, spacing and number of children. Together, we will make champion their well-being. Together, we will make a difference.

KEY RESULT
AREAS : Poverty reduction and empowerment of the poor and vulnerable

SECTOR OUTCOME: Attained a desired population growth and distribution

NOTE : Net of RLIP

: Access to quality population management information and services is improved OUTCOME

	S	: EXPENDITURE PRO (in pesos)	OGRAM		
No./ Code	GASS / STO / OPERATIONS / PROJECTS	2012 Actual	2013 Current	2014 Proposed	
100000000	General Administration and Support	101,077,000	116,721,000	112,842,000	
	PS MOOE CO	66,113,000 31,337,000 3,627,000	61,353,000 50,653,000 4,715,000	57,472,000 50,653,000 4,717,000	
300000000	Operations	172,060,000	187,822,000	186,972,000	
	PS MOOE	62,256,000 109,804,000	40,698,000 147,124,000	39,848,000 147,124,000	
TOTAL AGENC	Y BUDGET	273,137,000	304,543,000	299,814,000	
	PS MOOE CO	128,369,000 141,141,000 3,627,000	102,051,000 197,777,000 4,715,000	97,320,000 197,777,000 4,717,000	
NOTE : Net	of RLIP				
		2	STAFFING SUMMARY		
		2012	2013	2014	
	ING ber of Authorized Positions ber of Filled Positions	422 281	420 254	420 254	
			PROPOSED 2014		
	OPERATIONS BY MFO	 PS	MOOE	C0	TOTAL
	PULATION MANAGEMENT POLICY VICES	13,887,000	12,809,000		26,696,000
MFO 2: TEC	CHNICAL SUPPORT SERVICES	25,961,000	134,315,000		160,276,000

SECTION 2 : EXPENDITURE PROGRAM BY CENTRAL / REGIONAL ALLOCATION, 2014 (in pesos)

REGION	PS	MOOE	CO	TOTAL
CENTRAL OFFICE	22,006,000	90,312,000	1,717,000	114,035,000
Regional Allocation (net of Central Office):	75,314,000	107,465,000	3,000,000	185,779,000
National Capital Region (NCR)	4,477,000	5,341,000	260,000	10,078,000
Region I - Ilocos	4,470,000	4,597,000	260,000	9,327,000
Region II - Cagayan Valley	5,656,000	3,388,000	100,000	9,144,000
Cordillera Administrative Region (CAR)	4,942,000	3,534,000	260,000	8,736,000
Region III - Central Luzon	4,172,000	3,807,000	100,000	8,079,000
Region IVA - CALABARZON	3,642,000	10,926,000	100,000	14,668,000
Region V ~ Bicol	6,277,000	9,625,000	260,000	16,162,000
Region VI - Western Visayas	5,616,000	10,005,000	260,000	15,881,000
Region VII - Central Visayas	3,781,000	6,569,000	260,000	10,610,000
Region VIII - Eastern Visayas	5,125,000	7,465,000	260,000	12,850,000
Region IX - Zamboanga Peninsula	4,585,000	6,043,000	100,000	10,728,000
Region X - Northern Mindanao	6,803,000	10,031,000	260,000	17,094,000
Region XI - Davao	5,640,000	6,755,000		12,395,000
Region XII - SOCCSKSARGEN	4,972,000	12,441,000	260,000	17,673,000
Region XIII - CARAGA	5,156,000	6,938,000	260,000	12,354,000
TOTAL AGENCY BUDGET	97,320,000	197,777,000	4,717,000	299,814,000

NOTE : Net of RLIP

# SECTION 3 : SPECIAL PROVISION(S)

 Appropriations for Programs and Specific Activities. The amounts appropriated herein for the programs of the agency shall be used specifically for the activities in the amounts indicated under the Details of the FY 2014 Budget attached as Annex A (Volumes 1 and 2) of this Act.

# SECTION 4 : PERFORMANCE INFORMATION

# KEY STRATEGIES :

MFO / PIs	2014 Targets
MFO 1: POPULATION MANAGEMENT POLICY SERVICES	
Policy Services	
No. of policies issued, updated, and disseminated	45
% of Stakeholders that rate population policies as satisfactory or better	80%
% of policies that are reviewed/ updated in the last 3 years	80%
MFO 2: TECHNICAL SUPPORT SERVICES  Promotional Services  Number of promotional advocacy activities provided with funding support  % of population familiar with one or more population management policies	182
promoted % of requests for funding support that are responded to within 5 days of	80%
receipt	80%

Technical Services						

No, of technical service assignments undertaken 22,342

% of clients who rate the technical services provided as satisfactory or

better 80%

% of requests for technical assistance that are acted upon within 5 days of

receipt

80%

#### C. NATIONAL NUTRITION COUNCIL

#### STRATEGIC OBJECTIVES

MANDATE : The NNC, as mandated by law, is the country's highest policy-making and coordinating body on nutrition. NNC Core Functions: 1. Formulate national food and nutrition policies and strategies and serve as the policy, coordinating and advisory body of food and nutrition and health concerns; 2. Coordinate planning, monitoring, and evaluation of the national nutrition program; 3. Coordinate the hunger-mitigation and malnutrition prevention program to achieve relevant Millennium Development Goals; 4. Strengthen competencies and capabilities of stakeholders through public education, capacity building and skills development; 5. Coordinate the release of funds, loans, and grants from government organizations (GOs) and non-government organizations (NGOs); and 6. Call on any department, bureau, office, agency and other intrumentalities of the government for assistance in the form of personnel, facilities and resources as the need arises.

VISION : NNC is the authority in ensuring the nutritional well-being of all Filipinos, recognized locally and globally, and led by a team of competent and committed public servants.

: To orchestrate efforts of government, private sector, international organizations and other stakeholders at all levels, in addressing hunger and malnutrition of Filipinos through:

1. Policy and program formulation and coordination;

2. Capacity development:

3. Promotion of good nutrition;

4. Nutrition surveillance;

5. Resource generation and mobilization;

6. Advocacy; and

7. Partnership and alliance building

KEY RESULT

MISSION

AREAS : Poverty reduction and empowerment of the poor and vulnerable

SECTOR OUTCOME: Improved health status of the population

ORGANIZATIONAL

OUTCOME : Improved access to quality nutrition and related interventions

# SECTION 1 : EXPENDITURE PROGRAM (in pesos)

No./ Code	GASS / STO / OPERATIONS / PROJECTS	2012 Actual	2013 Current	2014 Proposed
100000000	General Administration and Support	26,193,000	20,519,000	27,222,000
	PS MOOE CO	14,587,000 11,606,000	8,240,000 12,279,000	11,899,000 13,223,000 2,100,000

NOTE : Net of RLIP

200000000 Sup	port to Operations	5,526,000	6,766,000		
	PS MOOE	4,104,000 1,422,000	4,258,000 2,508,000		
300000000 Ope	rations	183,941,000	300,459,000	308,976,000	
	PS MOOE CO	26,132,000 157,524,000 285,000	27,975,000 265,484,000 7,000,000	37,061,000 269,295,000 2,620,000	
Pro	jects	80,381,000			
	MOOE	80,381,000			
TOTAL AGENCY BUDG	ET	296,041,000	327,744,000	336,198,000	
	PS MOOE CO	44,823,000 250,933,000 285,000	40,473,000 280,271,000 7,000,000	48,960,000 282,518,000 4,720,000	
NOTE : Net of RLI	p				
		S	TAFFING SUMMARY		
		2012	2013	2014	
	Authorized Positions Filled Positions	132 94	115 93	115 93	
			PROPOSED 2014		
OPERA.	TIONS BY MFO	PS	MOOE	CO	TOTAL
MFO 1: NUTRITION	MANAGEMENT POLICY SERVICES	7,504,000	25,341,000	1,500,000	34,345,000
MFO 2: TECHNICAL	SUPPORT SERVICES	29,557,000	243,954,000	1,120,000	274,631,000
NOTE : Net of RLI					
	SECTION 2 : EXPENDITURE	PROGRAM BY CENTRAL / REG	GIONAL ALLOCATION	, 2014	
REG.	TON	PS	MOOE	CO	TOTAL
Regional Allocatio	on (net of Central Office):	48,960,000	282,518,000	4,720,000	336,198,000
National Cap	ital Region (NCR)	48,960,000	282,518,000	4,720,000	336,198,000

# SECTION 3 : SPECIAL PROVISION(S)

1. Appropriations for Programs and Specific Activities. The amounts appropriated herein for the programs of the agency shall be used specifically for the activities in the amounts indicated under the Details of the FY 2014 Budget attached as Annex A (Volumes 1 and 2) of this Act.

## SECTION 4 : PERFORMANCE INFORMATION

# KEY STRATEGIES :

MFO / PIs	2014 Targets
MFO 1: NUTRITION MANAGEMENT POLICY SERVICES	
Nutrition management policy services	
No. of policies issued, updated, and disseminated	36
% of Stakeholders that rate nutrition policies as satisfactory or better	85%
% of policies that are reviewed/ updated in the last 3 years	50%
MFO 2: TECHNICAL SUPPORT SERVICES	
Assistance to various stakeholders	
Number of stakeholders assisted	94,024
% of stakeholders who rate the assistance as satisfactory or better	85%
% of requests for assistance that are acted upon within 5 days of request	90%
Conduct trainings	
No. of trainings conducted	722
% of trainees who rate the training as good or better	85%
% of scheduled training courses that commence within 24 hours of planned	
scheduled start time	95%