

Republic of the Philippines Department of Health OFFICE OF THE SECRETARY

SEP 0 6 2011

ADMINISTRATIVE ORDER No. 2011 - OOI 2

SUBJECT: <u>Implementing Guidelines on Electronic Drug Price Monitoring</u>

System (EDPMS) version 2.0

I. RATIONALE

Under Republic Act (RA) No. 7581 or the "Price Act" of 1992, the Department of Health (DOH) is identified as the lead implementing agency in classifying essential drugs as "basic necessities" and monitoring their corresponding prices to ensure that they are reasonable at all times.

In support to the abovementioned law, the DOH issued Administrative Order (AO) No. 2006-0009 dated February 14, 2006, establishing the guidelines institutionalizing and strengthening the Essential Drug Price Monitoring System (e-EDPMS) in the DOH. The Order covered all data collection activities and analysis undertaken by all health facilities and units under the DOH on the prices of essential drugs sold to the general public. Said issuance was initially implemented as a manual system.

Republic Act (RA) No. 9502, otherwise known as the Universally Accessible Cheaper and Quality Medicines Act of 2008, states that "it is the policy of the State to protect public health and when the public interest or circumstances of extreme urgency so require, it shall adopt appropriate measures to promote and ensure access to affordable quality medicines for all".

Subsequently, Administrative Order (AO) No. 2008-01 was jointly formulated by the Department of Health, Department of Trade and Industry, Intellectual Property Office, and Bureau of Food and Drugs (now known as Food and Drugs Administration), which set the Implementing Rules and Regulations (IRR) of RA No. 9502. Chapter V provides for the Price Monitoring and Regulation System and the Creation of Advisory Bodies and Consultative Councils.



Rule 26 of the same chapter mandated the Secretary of Health to establish and initiate an electronic price monitoring and regulation system for drugs and medicines. To support this directive, the Department of Health developed the Electronic Essential Drug Price Monitoring System (e-EDPMS) and issued AO No. 2008-0014 which provides the "Guidelines on the Pilot Implementation of the e-EDPMS".

In an effort to continuously improve the system, the DOH through consultations with the end-users and stakeholders has developed version 2.0. This order defines the implementing guidelines in the implementation of the EDPMS version 2.0.

II. OBJECTIVES

General Objective: To provide a more effective and efficient implementation of EDPMS Version 2.0

Specific Objectives:

- 1. To expand the scope of implementation of the system to cover all drug establishments and outlets.
- 2. To establish guidelines on data validation, analysis, report generation and dissemination, monitoring and evaluation.
- 3. To strengthen and provide more coherent roles and responsibilities of the different agencies and stakeholders involved in the implementation of the system.

III.DEFINITION OF TERMS

For purposes of this Order, the following terms are defined as follows:

1. Bureau of Health Facilities and Services	Refers to the authorized body of the DOH in		
(BHFS)	charge of regulation of hospitals and other health		
	facilities and services.		
2. Center for Health Development (CHD)	Refers to the extension office of the DOH		
	responsible for undertaking public health		
	operation, health regulatory functions and other		
	roles and responsibilities within a defined		
	administrative and geographical boundary as		



	embodied and implied in the Executive Order.		
3. Department of Health (DOH)	Refers to the National Government Agency		
	organized and existing under and by virtue of		
	the laws of the Philippines, which ensures		
	accessibility and quality of health care in line		
	with administration's thrust to prioritize delivery		
	of services to the masses and improve the		
	quality of life of all Filipinos, especially the		
-	poor.		
4. Drug Establishment (DE)	Refers to either sole proprietorship, partnership,		
	corporation, institution, association or		
	organization engaged in the manufacture,		
	importation, exportation, sale, offer for sale,		
	distribution, donation, transfer, use, testing,		
	promotion, advertising, or sponsorship of drug		
	products including the facilities and installations		
	needed for its activities.		
5. Drug Outlets (DO)	Refers to drug stores, pharmacies and any other		
	business establishments (including Non-		
	traditional Outlet)duly licensed by the FDA to		
	sell drugs and medicines.		
6 Department of Trade and Ladert (DTT)	Defens to the mineral account account		
6. Department of Trade and Industry (DTI)	Refers to the primary government agency with		
	the dual mission of facilitating the creation of a		
	business environment wherein participants could		
	complete, flourish, succeed and, at the same		
	time, ensuring consumer welfare.		

7. Electronic Drug Price Monitoring System	Refers to a computer-based solution with the			
(EDPMS)	functionalities to capture, process, store and			
	generate reports on essential drug prices and			
	inventories from drug companies,			
	establishments and outlets.			
8. Electronic Data (ED)	Refers to drug specifications (i.e., generic name,			
	dosage form and strength, manufacturer,			
	packaging, lot no., expiry date) needed to be			
	uploaded to EDPMS.			
9. Food and Drug Administration (FDA)	Refers to the agency under DOH created			
	pursuant to Republic Act No. 9711, known as			
	the "Food and Drug Administration Act of			
	2009"			
10. Information Management Service (IMS)	Refers to the office within the DOH that is			
	responsible for the formulation and			
	implementation of plans, programs and			
	standards for management of information			
	technology development. It also provides			
	technical support related to Information			
	Technology and develops and manages the			
	health and management information systems, the			
	infrastructure corporate database and			
	telecommunication services, tools to facilitate			
	intellectual capital of Department of Health.			
11. Local Government Unit (LGU)	Refers to a territorial and political subdivision of			
	the Republic of the Philippines as defined in the			
	Local Government Code.			

12. Hospital (H)	Refers to a place devoted primarily to the			
	operation of facilities for the diagnosis,			
	treatment and care of individuals sufferings from			
1	illness, diseases, injury or deformity, or in need			
· · · · · · · · · · · · · · · · · · ·	of obstetrical or other medical and nursing care.			
13.Government Hospital (GH)	Refers to a hospital operated and maintained			
	either partially or wholly by the national,			
	provincial, municipal or city government or			
	other political subdivision, or by any			
	department, division, board or other agency			
	thereof.			
14. Private Hospital (PH)	Refers to one which privately owned,			
	established and operated with funds raised or			
	contributed through donations, or by private			
	capital or other means, by private individuals,			
	association, corporation, religious organization,			
	firm, company or joint stock association.			
15. National Center for Pharmaceutical	Refers to the center created under the Office of			
Access and Management (NCPAM)	the Secretary of Health based on AO No. 2010-			
	0005 dated 08 January 2010.			
16. Non-Traditional Drug Outlet (NTDO)	Refers to supermarkets, convenience stores, and			
_ , ,	other retail establishment duly licensed by the			
	FDA to sell Over- The-Counter drugs.			
17 DUR - TI MIT				
17. Philippine Health Insurance Corporation	Refers to a Government corporation established			
(PHIC)	pursuant to RA No. 7875, which instituted the			
	National Health Insurance Program for all			
	Filipinos.			

18. Upload Data (UD)	Means a process of submitting of sending data to			
	the Department of Health using a formatted file.			
19. Maximum Drug Retail Price	Refers to Maximum Drug Retail Price, imposed			
(MDRP)	under Executive Order 821 " Prescribing the			
	Maximum Drug Retail Prices for selected Drugs			
	and Medicines that address diseases that account			
	for the leading causes of Morbidity and			
	Mortality".			
20. Government Mediated Access Price	Refers to Government Mediated Access Price			
(GMAP)	covering selected drugs and medicines with			
	voluntarily reduced prices by at least 50%.			

IV.SCOPE

This Order applies to all DOH Central Offices, Attached Agencies, Centers for Health Development Offices, Local Government Units, Government and Private Health Facilities, Drug Establishments and outlets and other agency data beneficiaries subject to the rules on compliance provided below.

V. GENERAL GUIDELINES

- For initial applications for LTO, attendance to the EDPMS training seminar conducted by NCPAM shall be required. Thereafter, the use of the EDPMS for regular reporting of data shall be required for the renewal of License to Operate (LTO) issued by FDA, BHFS and CHDs.
- 2. Those with existing LTO but has not undergone trainings required under this Order shall undergo such trainings as a requirement to the renewal of the LTO. Thereafter, the use of the EDPMS for regular reporting of data shall be required for the subsequent renewal of License to Operate (LTO) issued by FDA, BHFS and CHDs.
- 3. The NCPAM shall define the users who are authorized to use the system, define access level and permission rights, review and approve requests to access the system and/or data.

- 4. Drug establishments and outlets shall report data on drug prices and inventories on a monthly basis using the EDPMS Version 2.0 and other succeeding versions.
- 5. CHD offices shall undertake validation to check the quality of data (e.g. reliability, completeness, and timeliness) being submitted by the drug establishments and outlets prior to official release of reports. The NCPAM shall generate, analyze and officially release the required reports or information only after the CHD offices have validated the data.
- 6. The PhilHealth may use the price information from the EDPMS as reference or basis for reimbursement of government and private health facilities.
- 7. For the effective implementation of this Order, a monitoring team composed of personnel from IMS, NCPAM and FDA shall be created and authorized to enter drug establishments and outlets to conduct monitoring activities to assess compliance of reporting facilities and the performance of the system.

VI. SPECIFIC GUIDELINES

- 1. Attendance of the drug establishments and outlets representative (Pharmacist/owner/IT personnel, etc.) to trainings and use of the EDPMS for regular reporting of data, as the case may be, shall be required for the initial or renewal of License to Operate (LTO) issued by FDA, BHFS and CHDs.
- 2. Drug establishments and outlets applying for initial application for LTO including those with existing LTO but have not undergone EDPMS training as required in this Order shall undergo training on EDPMS for the respective initial and renewal issuance of LTO.
- 3. Once the initial or renewed LTO is issued drug establishments and outlets shall regularly report or upload the data into the EDPMS. The reporting shall be a requirement for subsequent renewal of LTO.
- 4. The trainings required under this Order shall be included in the regular licensing trainings conducted by the FDA every two months; and by the BHFS/CHDs every September 15th of the current year and annually thereafter.



- 5. For levels three and four hospitals, the BHFS and FDA shall verify if the same facility regularly reports to the EDPMS before any license or accreditation is issued. Below level three hospitals, the CHD shall be responsible for the aforementioned verification.
- 6. Drug establishments who are interested to participate in government bidding for drugs and medicines must show proof of compliance with the reporting on the use of the EDPMS.
- 7. The NCPAM shall define the users who are authorized to use the system, define access level and permission rights, review and approve requests to access the system and/or data.
 - a. The NCPAM shall assign and issue user names and passwords to drug establishments and outlets who are going to use the system. The NCPAM shall also grant appropriate access levels and rights to the following:
 - Philhealth for verification or checking of submitted medicine prices for reimbursement by the government and private health facilities and for other purposes.
 - ii. Procuring entities, namely Procurement Service, CHDs, Hospitals and Committees on Bids and Award may check the current medicine prices in the market.
 - iii. DOH Management, namely Executive Committee, Directors, and Program Managers, and personnel of concerned offices including FDA.
- 8. The NCPAM shall review and assess the requests of other agencies, offices, units, departments, and other organizations to have access to the system. The NCPAM shall assign and issue the appropriate access level and rights.
- 9. Drug establishments and outlets shall report data on drug prices and inventories on a monthly basis using the EDPMS Version 2.0 and other succeeding versions.
 - a. Drug and medicines covered by or subject of the Maximum Drug Retail Price (See Annex A. for the List of Drugs and Medicines that are subject for Price Regulation) shall not exceed the maximum retail price imposed by law or Orders wherever they may be sold. This also applies to government and private health facilities regardless of the established room rates.



b. Drug establishments and outlets shall report on a monthly basis the following data depending on the type of establishments:

Type of Establishment (Facility)	Purchased Price	Selling Price	Stock on Hand
Drug Establishment			
• Manufacturer	X	√	X
• Trader	✓	✓	X
• Importer	✓	✓	X
• Exporter	✓	✓	X
• Wholesaler	✓	✓	X
Drug Outlet	-		
Hospital (government and private)	√	V	√
• Drugstore	/	· ·	√
Non- traditional drug outlet	/	V	√

- c. The data to be reported shall include the latest transactions per item that occurred during the reporting month. Example: For January 2011, latest purchase transaction for paracetamol is January 15, 2011, and latest selling transaction is January 31, 2011. As such, the purchase transaction to be reported is as of January 15, 2011; and the selling transaction to be reported is as of January 31, 2011.
- d. Drug establishments and outlets shall enter or upload data every first (1st) five (5) working days of the month. The report represents the previous month's data. Example: To report the latest purchase price and selling price transactions and other required data for the month of January 2011, it shall be entered or uploaded within the period February 1-4 and 7; For February 2011, the data shall be entered or uploaded within the period March 1-4 and 7.
- e. Drugstores with up to four branches shall comply with the reporting requirements effective January 2012.
- f. List of drugs and medicines as stipulated in Section 5, Rule 30, Chapter VI of the Implementing Rules and Regulations of RA 9502 shall be subjected to price



- regulations. Changes or updates in the said list shall be automatically included in the price regulation.
- g. The DOH shall update the Price List as deemed necessary and shall be properly disseminated or posted in the DOH's official website.
- 10. CHD offices and FDA shall undertake validation to check the quality of data (e.g. reliability, completeness, and timeliness) being submitted by the drug establishments and outlets prior to official release of reports. The NCPAM shall generate, analyze and officially release the required reports or information only after the CHD offices and FDA have validated the data.
 - a. The CHD offices and FDA shall be given access levels and rights to view and validate the data of all drug establishments and outlets within their regions. As such, the CHD Regional Directors shall assign or designate person(s) to check or verify the quality of submitted data.
 - b. The CHD offices and FDA shall be given five (5) working days to check or verify the data from the time the drug establishments and outlets have entered their reports, i.e. after the fifth working day of the month.
 - c. The CHD offices and FDA shall report within three (3) working days the facilities that complied and violated over the MDRP and GMAP.
 - d. All issues, concerns and/or problems in the validation of data shall be properly elevated to the NCPAM. Thus, the NCPAM shall address these accordingly.
- 11. The NCPAM shall generate, evaluate and officially release the required reports or information only after the CHD offices and FDA have validated the data.
 - a. The NCPAM shall generate the monthly price medicine report every third (3rd) week of the month. This is the period where data has been entered or uploaded, and validated by the CHD offices and FDA.
 - b. The NCPAM shall regularly release and/or post the Quarterly Price Medicine Report and Annual factsheets on the DOH website at www.doh.gov.ph.
 - c. The NCPAM shall analyze the reports or information using the factsheet format for purposes of generating the Annual Drug Price Bulletin, which shall include the following concerns: variations in government and privately procured medicine



prices, trending, mark-up of medicine prices, regional variation in prices and others.

- d. An Annual Drug Price Bulletin shall be generated every third (3rd) week of January. Example: The Annual Drug Price Bulletin for 2011 shall be generated on the third week of January 2012.
- 12. For the effective implementation of this Order, monitoring activities to assess compliance of reporting facilities and the performance of the system shall be conducted. The NCPAM, BHFS, FDA, IMS and concerned CHDs are hereby authorized to conduct monitoring activities, which shall be done regularly or as the need arises through spot monitoring or checking.
 - a. The NCPAM shall develop, maintain and utilize the standard monitoring and reporting tools to be used during monitoring, reporting and disseminating the reports.
 - b. The following shall be the minimum basis in selecting drug establishments and outlets for monitoring:
 - i. Total non-compliance in reporting data;
 - ii. Irregular reporting of data;
 - iii. Prices of medicines that exceeded the MDRP and GMAP;
 - iv. Delayed reporting of data; or
 - v. Other deficiencies related to the implementation of this Order as assessed by the concerned CHD, NCPAM, BHFS, IMS or FDA.

VII. ROLES AND RESPONSIBILITIES

- 1. The NCPAM, as the system owner and over-all lead office in managing the implementation of the EDPMS, shall:
 - a. Establish policies, procedures and guideline in data collection, reporting, processing, analysis and dissemination of information.
 - b. Issue orders requiring all drug establishments and outlets to use the Electronic Drug Price Monitoring System (EDPMS) Version 2.0 software in reporting data to the



DOH, and other automated tools or software to support the implementation of the price monitoring and regulation system.

- c. Provide direction and guidance in the implementation of the EDPMS Version 2.0.
- d. Review reports or information, and provide analysis or interpretation.
- e. Prepare factsheets and annual medicines price bulletin.
- f. Address issues, concerns and other problems accordingly.
- g. Provide funds necessary to maintain and implement the system (e.g. system development and maintenance, cost of meetings, workshops, conferences, symposium, and other related activities).
- h. Provide orientation and training on matters related to the use or operation of the system and other relevant trainings.
- i. Grant user names and passwords to users who are authorized to use the EDPMS.
- j. Monitor and evaluate the implementation of the system.
- k. Perform other tasks or activities as may be necessary in the implementation of this Order.

2. The FDA shall:

- a. Validate the data being reported by drug establishments and outlets in NCR to the NCPAM.
- b. Monitor compliance of drug establishments and outlets in regularly reporting data.
- c. Assist the NCPAM in monitoring the implementation of the system.
- d. Maintain and update registry of drugs and medicines, and list of licensed drug establishments and outlets.

3. The BHFS shall:

- a. Act on cases referred to it by the NCPAM and/ or FDA, involving violations on EDPMS committed by hospital owners and/or staff, as the case may be, for their appropriate action.
- b. Monitor compliance of health facilities in regularly reporting data as one of the requirements in the renewal of LTO.
- c. Suspend or revoke the LTO of hospitals for levels 3 and 4.



4. The CHDs shall:

- a. Validate the data being reported to the DOH.
- b. Orient and train drug establishments and outlets within their area of responsibility on how to operate the software.
- c. Monitor compliance of drug establishments and outlets reporting data and adherence to the MDRP and GMAP.
- d. Monitor and evaluate the implementation of the system.
- e. Validate requests for user names and passwords, and endorse to NCPAM for proper issuance.
- f. Suspend or revoke the LTO of hospitals for levels 1 and 2 under their regions.

5. The IMS shall:

- a. Provide technical support in software maintenance, implementation, deployment and operations, such as but not limited to the following: software enhancement, system troubleshooting, debugging, database backup and recovery, network administration, database administration, and others.
- b. Train the trainers from CHDs and NCPAM, and/or users on how to operate the software.
- c. Train the System Administrators on the mechanics of technical assistance, database administration, and other relevant technical support.
- d. Monitor the operations and performance of the system.

6. The Area Cluster Heads shall:

- a. Develop appropriate mechanisms to ensure that all relevant policies and plans are implemented by the CHDs.
- b. Resolve issues that may be elevated to the Cluster.
- c. Support the technical assistance packages necessary to enhance capacity of the CHDs and the regional partners in providing assistance to the local government units, and as necessary, in coordination with concerned clusters/technical units.
- 7. Drug establishments and outlets and other covered entities shall:



- a. Comply strictly with the standard system and procedures in submitting reports to the NCPAM.
- b. Comply with the use of the software as part of the performance evaluation for the initial issuance and renewal of License to Operate.
- c. Attend trainings, workshops, meetings or conferences related to the implementation of the system.
- d. Register the personnel who are authorized to use the EDPMS to NCPAM.
- e. Report issues, concerns or problems in the implementation of the system to the NCPAM.

VIII.ADMINISTRATIVE SANCTIONS:

- 1. Administrative sanctions shall be imposed on erroneous submission or failure to submit the required data by drug establishments, hospital pharmacies and drug outlets and non-traditional drug outlets as required by the NCPAM without justifiable reason, *provided* that such erroneous submission or failure to submit electronic data does not fall as any of the activities defined as illegal acts of price manipulation in which case the penalty provided for under RA 7581 or RA 9502 as may be appropriate and their implementing rules and regulations shall be followed.
- 2. The DOH shall impose the following sanctions and penalties; as stated in R.A. 9502, IRR, Chapter XIV:
 - a. 1st violation Written Warning
 - b. 2nd violation Administrative fine of a minimum of Ten Thousand (P10, 000.00) to Fifty Thousand (P50, 000.00) Pesos depending on the gravity and extent of the violation, including the recall of the offending product when applicable;
 - c. 3rd violation Administrative fine of minimum of Sixty Thousand (P 60,000.00) to One hundred Fifty thousand (P 150,000.00 Pesos, depending on the gravity and extent of the violation, and in addition thereto, the recall of the offending product, and suspension of the Certificate of Product registration (CPR) when applicable;
 - d. 4th violation Administrative fine of a minimum of Two hundred thousand (P200,000.00) to five Hundred Thousand (P500.000.00) Pesos, depending on the



gravity and extent of the violation, and in addition thereto, the recall of the offending product, revocation of the CPR, suspension of the License to Operate (LTO) and or License to Import and Distribute, when applicable, for a period of time.

- e. 5th and succeeding repeated violations Administrative fine of One million (P1,000,000.00) Pesos, and, when applicable the recall of the offending product, revocation of the CPR, revocation of the License to Operate (LTO) and or License to import and Distribute of the company concerned, including the blacklisting of the company to be furnished Government Procurement policy Board (GPPB) and the Department of Trade and Industry (DTI);
- f. An additional penalty of Two thousand five Hundred (P2,500.00) Pesos per day shall be made for every day the violation continues after having received the order from the DOH or other such appropriate body, notifying and penalizing the offending person or company for the infraction.
- 3. Suspension or revocation of the License to Operate as drug establishments and drug outlets may also be imposed by the Secretary of Health in addition to the above administrative fine. In case of suspension of the License to Operate, the duration thereof shall not exceed one (1) year.

4. Rule 78. of the IRR of R.A. 9502

a. Fees, charges and Fines. All fees collected, charges imposed and administrative fines that have accrued as a consequence of the implementation of the Act and these Implementing rules and regulations shall be for the account and income of the BFAD.

IX. REPEALING CLAUSE

Administrative Order No. 2008 – 0014 dated May 7, 2008 and other provisions of previous issuances, inconsistent with this Order are hereby rescinded and modified accordingly.



X. SEPARABILITY CLAUSE

If any provision of this Order is declared invalid by any court of law or any competent authority, those provisions not affected thereby shall remain valid and effective.

XI. EFFECTIVITY:

This order shall take effect fifteen (15) days after the publication on the gazette or a newspaper of general circulation.

ENRIQUE T. ONA, MD

Secretary of Health

LIST OF DRUGS AND MEDICINES THAT ARE SUBJECT TO PRICE REGULATION.

The list of drugs and medicines that are subject to price regulation shall include-inter alia:

- (a) Drugs and medicines those are included in the current edition of the Philippine National Drug Formulary (PNDF) Essential Drug List.
- (b) All drugs and medicines indicated for treatment of chronic illnesses and life threatening conditions, such as, but not limited to, endocrine disorders, e.g., diabetes mellitus; gastrointestinal disorders, e.g., peptic ulcer; urologic disorders, e.g., benign prostatic hyperplasia (BPH; cardiovascular disease, e.g., hypertension; pulmonary disease, e.g., pulmonary tuberculosis (PTB), asthma; auto-immune disease, e.g., systemic lupus erythematosus (SLE); skin disease, e.g., psoriasis; neuro-psychiatric disorders; other infectious disease, e.g., human immunodeficiency virus-acquired immune deficiency syndrome (HIV-AIDS); and other conditions such as organ transplant and neoplasm;
- (c) Drugs and medicines indicated for prevention of disease, e.g., vaccines, immunoglobulin, anti-sera;
- (d)Drugs and medicines indicated for prevention of pregnancy, e.g., oral contraceptive;
- (e) Anesthetic agents;
- (f) Intravenous fluids; and
- (g) All other drugs and medicines which, from time to time the Secretary of Health, in accordance with the relevant.

