

The effect of telemedicine provision on public primary health care in the Philippines (IE-Telemedicine)

Project stakeholders

Consortium lead: Institute of Health Economics (IHE) – Leibniz University Hannover (LUH)

Project partners: De La Salle University (DLSU); University of Passau (UP); University of Wollongong (UW)

Funding agency, duration and funds

Funding agency/line: pending¹

Duration: 15 months

Project goals

To steer the direction of its future telemedicine efforts, the Philippine Department of Health (DoH) has expressed a strong need for rigorous evidence on the possible benefits of telemedicine services in terms of (a) increasing access to primary health care services, (b) improved quality of care and population health, and (c) health care expenditure savings. To provide more nuanced evidence for facilitating future policy decisions, the impact evaluation moreover aims to assess the effects (i) of different intensities, (ii) of different forms of telemedicine services that facilities currently employ, (iii) among different categories of primary care and (iv) among different population groups.

Background and project description

Access to telemedicine has increased during COVID-19-related lockdowns and mobility restrictions in many countries. Telemedicine allows for remote health care consultations between health care professionals and patients via information and communication technologies. While the literature on telemedicine is growing rapidly, there is still little causal evidence on its effects.

Policymakers around the world now face the decision on how and to what extent they should further focus on facilitating the adoption of telemedicine. The Philippines are no exception; during the early stages of the COVID-19 pandemic, the health sector in the Philippines has seen an unprecedented emergence in the provision of primary care telemedicine services. This surge can be partly attributed to the efforts of the DoH, which reacted during the pandemic with a nationwide Telemedicine Service Program allowing the population access to telemedicine services free of charge. Many public health care providers are interested in continuing to offer consultations via video or telephone in their catchment area even if the reduced risk and severity of COVID-19 infections would allow for more face-to-face consultations. With the dedicated funding line for “free telemedicine” ending in late 2023, the Philippine government is now navigating how (and whether) to incorporate telemedicine in the country’s health system in a post-pandemic world.

The proposed impact evaluation will provide outside expertise to assist in crafting evidence-based policy decisions in these further telemedicine endeavors. Taking advantage of the variation in patient’s access to telemedicine and available high-frequency social health insurance claims data, we apply a difference-in-differences approach, where we compare primary health care outcomes before the pandemic and after the period of COVID-19 related lockdowns between patients of public health facilities that offer telemedicine services and patients of those which do not. Evidence from the quantitative evaluation will be complemented with insights from qualitative research.

¹ We originally procured funding through the International Initiative for Impact Evaluation (3ie) for the Policy Window Philippines - Phase 2 (PWP2) initiative financed by the Australian Department of Foreign Affairs and Trade (DFAT). Yet, before grant signature, DFAT retracted the funding due to political disagreements with the Philippine government. We are currently exchanging with our governmental counterpart (DoH) about promising, alternative funding opportunities.