

COVID-19

HEALTH BULLETIN

April 14, 2020

Introduction

ActiveLink helps businesses optimize and implement a sustainable benefits program that empowers employees to do more, give more, and live more.

As the pandemic tempers throughout the world, we initiated a health bulletin to share insights and government updates about COVID-19. Our goal is to make sure you get the information you need to anticipate irregularities brought by the coronavirus outbreak.

We will closely monitor the coronavirus crisis to bring you the latest combined information from different medical research institutions, government agencies, and insurance companies. We're here to make your benefits better. Connect with us at inquiries@benefitsmadebetter.com to see how we can help you.

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COVID-19 Update

AS OF APRIL 14, 2020

No. of cases worldwide: 1, 863,406¹

No. of deaths: 115,225 (6%)¹

Confirmed cases in the Philippines: 5,223²

Philippines COVID-19 cases highest in SEA

Days since 100th Case per Country

Days Since the Total Confirmed Cases of COVID-19 Reached 100

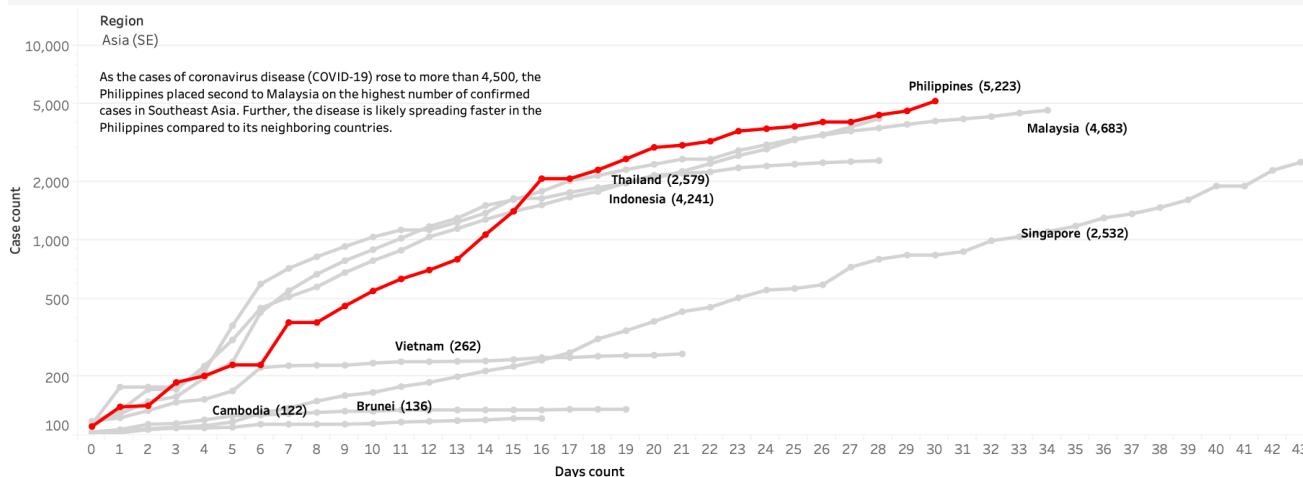


Figure 1. ActiveLink's Business Intelligence Dashboard on COVID-19 Analysis, April 12 & 13 global data

The Philippines now has the highest number of reported coronavirus cases in Southeast Asia with 5,223 confirmed cases, as of April 14. This is higher than Malaysia with 4,987 confirmed cases; Indonesia with 4,839 confirmed cases; and Singapore with 2,918 confirmed cases of coronavirus disease 2019 (COVID-19).

The forecast for confirmed cases continues to rise as the government certifies more hospitals for COVID-19 testing.³

As of April 11, there are 11 facilities conducting clinical test for COVID-19, while other hospitals are still on the accreditation process.⁴ The total number of individuals tested reached 33,814.⁵

FACILITY	ESTIMATED DAILY TESTING CAPACITY	INDIVIDUALS TESTED
Research Institute for Tropical Medicine, Inc.	900	25,400
San Lazaro Hospital	60–100	315
UP National Institutes of Health (UP NIH)	80	583
Lung Center of the Philippines	100	753

Baguio General Hospital and Medical Center	150	1,674
Western Visayas Medical Center	80	1,282
Vicente Sotto Memorial Medical Center	240	1,391
Southern Philippines Medical Center	100	1,908
The Medical City	—	—
St. Luke's Medical Center – Quezon City		431
Bicol Public Health Laboratory		77

Average day in hospital

Count of Case No. by Days in Hospital (Recovered)

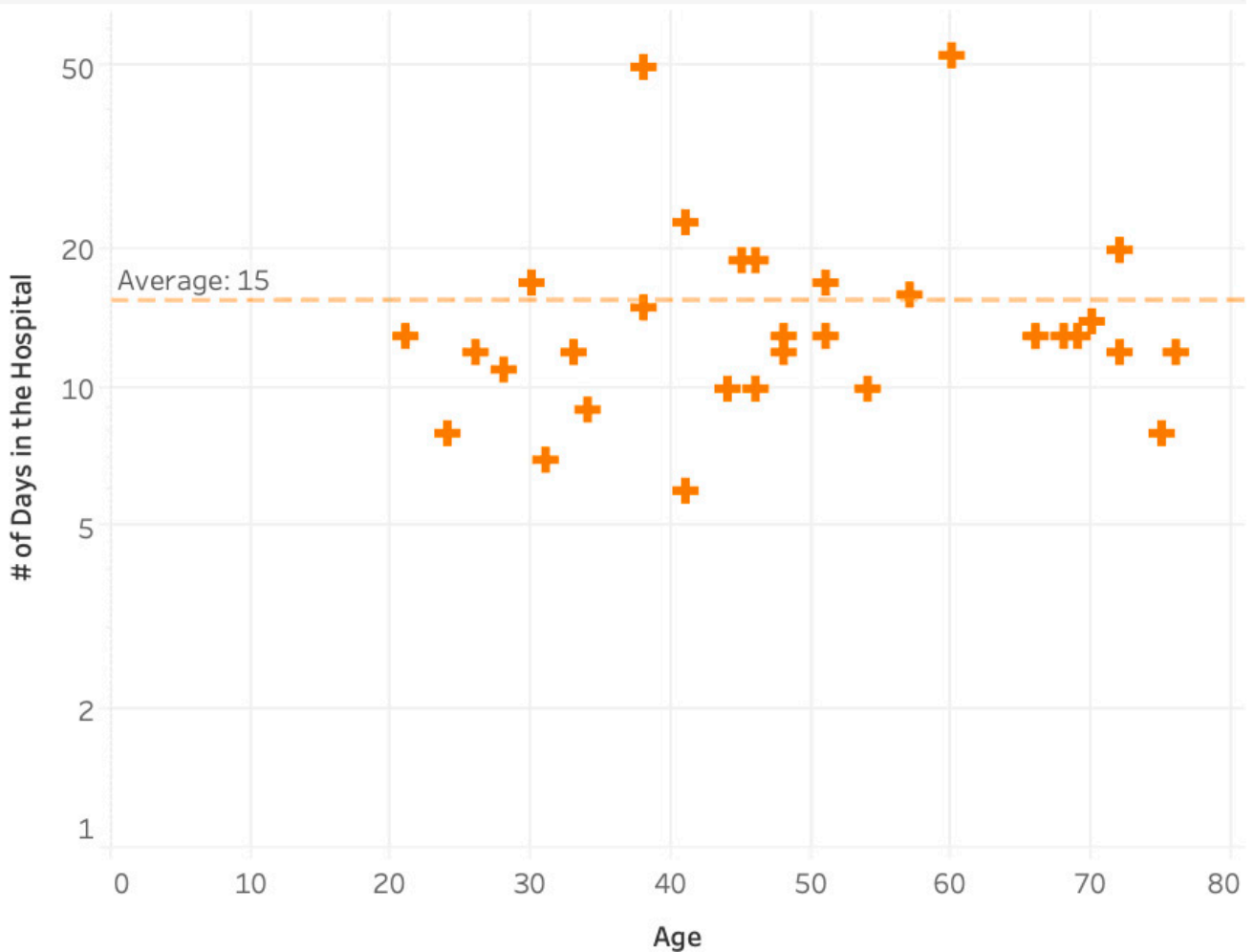


Figure 2. Average days in hospital of patients who recovered from COVID-19

As the number of Filipinos who are infected with COVID-19 increases, many of us wonder: How long does treatment take, and how much does treatment cost?

The average length of recorded hospital stays of patients in the Philippines who recovered from the disease is 15 days, while deceased patients were confined for an average of seven days.

For 51 patients who recovered from COVID-19, majority were confined for 12 to 13 days. The longest period that a patient stayed in a hospital facility for treatment was 53 days.

The data used to measure the average stay in hospital were based on the confirmed admission dates and the dates of recorded final status of the patients.

Almost a third of the patients were treated in major Metro Manila hospitals, where cost of treatment is higher than other tertiary hospitals. Majority of the individuals who recovered were treated in St. Luke’s Medical Center, the Asian Hospital and Medical Center, Makati Medical Center, and The Medical City, while the remaining patients received treatment from COVID-19 referral hospitals and hospitals outside of Metro Manila.

The fear of incurring significant financial burden from getting health services in the country may cause ill individuals to delay or refrain from seeking immediate medical treatment.

Cost of hospitalization

People with COVID-19 have dry cough and fever, which could later develop to pneumonia.

To get an idea on how much the treatment for pneumonia would cost, doctors from Metro Manila hospitals conducted a study focusing on the costs of hospitalization and the economic burden of community-acquired pneumonia among patients aged 19 years and above.⁶

The study also included a societal perspective, which included the sum of productivity losses and the consumption cost of non-healthcare resources needed for the patients’ hospitalization.

The study cites two tertiary private hospitals: the first was located in Manila and the second was located in a suburban area approximately 30 km south of Manila.

Table 1. Cost of hospitalization for community-acquired pneumonia-medium risk, 2012

COST	HOSPITAL A (PHP)	HOSPITAL B (PHP)
Out-of-pocket expenses	29,470 – 68,153	19,903 – 52,514
Professional fee	4,500 – 12,160	4,500 – 12,160
Production losses	11,400 – 19,000	9,500 – 15,200
Cost of consumption of other resources	3,120 – 5,200	2,250 – 3,600
Total cost*	48,490 – 113,633	36,153 – 83,474

*Real prices, base year = 2012

1. Out-of-pocket expenses refer to costs incurred for inpatient treatment of pneumonia; these include emergency room fees, diagnostic examinations, medication and intravenous fluids, room and board, supplies, etc.
2. Professional fees vary according to type of accommodation, length of hospital stay, and difficulties encountered in the management of the disease.
3. Production losses pertain to the loss of income incurred by the patients or the patients' relatives during the hospitalization.
4. Cost of consumption of other resources include averaged cost of meals and transportation of the patients' relatives, multiplied by the duration of hospitalization.

Using 2012 figures, the estimated cost of hospitalization for moderate-risk pneumonia, also known as community-acquired pneumonia – moderate risk, ranged from Php 36,000 to Php 113,000, plus a one-week postdischarge cost between Php 1,450 and Php 8,800.

Table 2. Out-of-pocket (healthcare cost) for community-acquired pneumonia – medium risk, 2012

Subtotal (without professional fees)	Hospital A: 4.5 days average hospitalization	Hospital A: 8 days average hospitalization	Hospital B: 6 days average hospitalization	Hospital B: 10 days average hospitalization
Co-Amoxiclav + azithromycin regimen				
Ward: lower cost -expensive brand	31,021–31,341	33,781–34,101	20,951–21,271	27,839–28,159
Private room: lower cost - expensive brand	44,450–44,771	55,650–55,971	32,189–32,509	39,189–39,509
Cefuroxime + clarithromycin regimen				
Ward: lower cost -expensive brand	32,099–47,110	34,859–49,870	22,028–37,040	28,917–43,928
Private room: lower cost - expensive brand	45,528–60,540	56,728–71,740	33,267–48,278	40,267–55,278
Ceftriaxone + azithromycin regimen				
Ward: lower cost -expensive brand	32,991–41,059	35,751–43,819	22,921–30,989	29,809–37,877
Private room: lower cost - expensive brand	46,421–54,489	35,751–43,819	34,159–42,227	41,159–49,227

Table 3. Cost of hospitalization for community-acquired pneumonia – high risk, 2012

COST	HOSPITAL A (PHP)	HOSPITAL B (PHP)
Out-of-pocket expenses		
a. Invasive ventilation Professional fee	105,716–179,803 9,600–33,592	86,544–149,612 9,600–19,152
b. Noninvasive ventilation professional fee	99,516–173,603 9,600–33,592	83,248–146,315 9,600–19,152
Production losses	7,600–28,500	5,700–20,900
Cost of consumption of other resources	4,160–7,800	2,700–4,950
Total cost*		
a. Invasive ventilation	127,076–249,695	104,544–194,614
b. Noninvasive ventilation	111,276–243,495	101,248–191,317

**Real prices, base year = 2012*

1. Out-of-pocket expenses refer to costs incurred for inpatient treatment of pneumonia; these include emergency room fees, diagnostic examinations, medication and intravenous fluids, room and board, supplies, etc.
2. Professional fees vary according to type of accommodation, length of hospital stay, and difficulties encountered in the management of the disease.
3. Production losses pertain to the loss of income incurred by the patients or the patients' relatives during the hospitalization.
4. Cost of consumption of other resources include averaged cost of meals and transportation of the patients' relatives, multiplied by the duration of hospitalization.

For patients diagnosed with high-risk pneumonia, the cost of hospitalization ranged from Php 104,000 to Php 250,000 – cost was slightly lower if patients were treated using noninvasive ventilation. The postcharge cost for high-risk pneumonia ranged from Php 1,700 to Php 10,500.

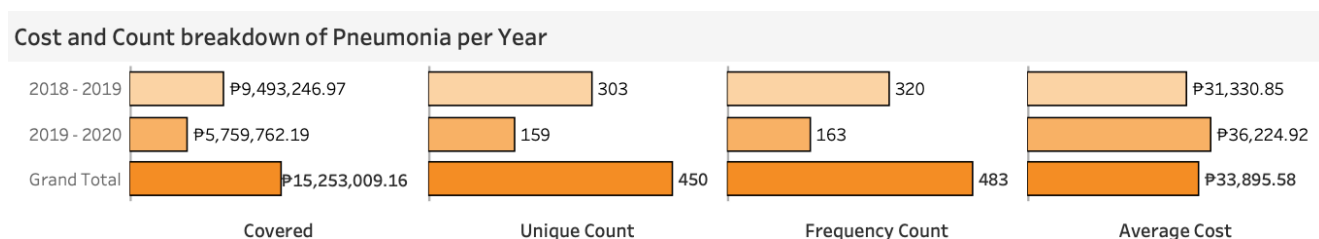


Figure 3. Average amount that HMOs covered for patients with pneumonia, 2018-2020

ActiveLink also analyzed the medical claims of 450 patients with HMO coverage, who were hospitalized between 2018 and 2019 due to pneumonia. Overall, HMO claims for inpatient avilment due to pneumonia reached more than Php 15 million, or an average of almost Php 34,000 per member.

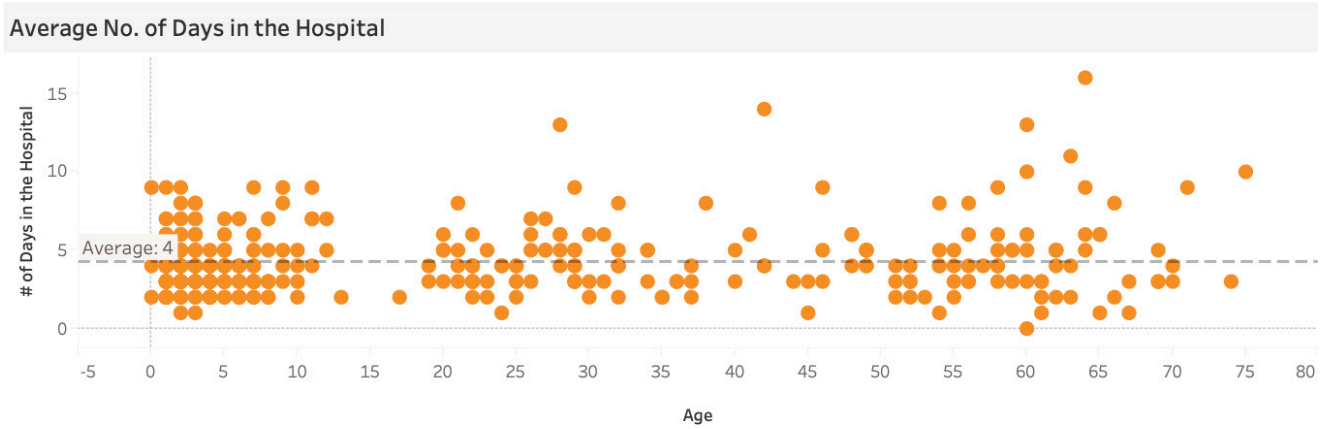


Figure 4. Average stay in hospitals of 450 patients with HMO, 2018-2020

Further, patients were confined for an average of four days; this duration is four times shorter than the average hospitalization of patients who had recovered from COVID-19.

If the patient has HMO or medical insurance, the insurance company usually covers most of the bill based on the maximum limit set by the policy. Prior to the COVID-19 outbreak, Philippine Health Insurance Corporation (PhilHealth) covered only a portion of the bill, and any excess was to be shouldered by the patient.

However, only a fraction of the population has HMO or medical insurance plan. The majority would likely rely on the government’s health insurance program.

The government responds to these problems by releasing local policies to shoulder healthcare cost and income loss of the affected workforce.

PhilHealth released a statement declaring that it will shoulder the cost of treatment for all patients who have COVID-19.⁷ For patients confined starting April 15, the appropriate case rates shall apply. This specifies the adjusted coverage rate depending on the final diagnosis of the patient:⁸

SEVERITY	PACKAGE AMOUNT (PHP)	HOSPITAL CATEGORY
Mild pneumonia in the elderly or with comorbidities	43,997	Levels 1-3 hospital, private room
Moderate pneumonia	143,267	Levels 1-3 hospital, private room
Severe pneumonia	333,519	Levels 2-3 hospital, private room, ICU
Critical pneumonia	786,384	Levels 2-3 hospital, private room, ICU (capable of ECMO, RRT)

Medical Updates

Although a vaccine has still not been found for COVID-19, scientists are finding a glimmer of hope in a vaccine that has been around for over a hundred years: the Bacillus Calmette-Guerin vaccine, better known in the Philippines as the BCG.

The BCG vaccine is an anti-tuberculosis vaccine. Therefore, it renders no specific immunity to the coronavirus. Tuberculosis isn't even caused by a virus; it is caused by a bacterium, the *Mycobacterium tuberculosis*.⁹

However, the scientific community has long observed that the BCG vaccine had "off-target effects". In other words, during the decades of monitoring this vaccine's possible adverse effects in humans, researchers discovered instead that it had positive side effects. For instance, there are already studies documenting the benefits of the BCG vaccine on completely unrelated diseases such as Type 1 diabetes.¹⁰

Now researchers think there is a reverse correlation between BCG vaccination and COVID-19 infection and deaths. Clinical trials, or human studies, are currently being started to verify this hypothesis.⁴

BCG has been part of the Philippines' standard immunization program since 1976. In contrast, it was never part of vaccination programs in the US, Canada, Italy, Belgium, and the Netherlands. It used to be recommended in Spain, France, and Germany, but it was discontinued.¹¹

China does have a universal BCG policy now, but it had been weakened during the 1960s and 1970s, which could have resulted in a middle-aged group that did not receive the vaccine.⁴

What you should do and why

If you are not sure whether you have received the BCG vaccine, it is a good time to consult with your physician how you can receive it.

Even if it turns out that the vaccine does not protect against COVID-19, it will protect you from tuberculosis, which is an airborne disease, highly prevalent in the Philippines (around 1 million Filipinos have active tuberculosis), and continues to kill at least 2,000 Filipinos every *month*.¹²

PhilHealth and HMO coverage

The Philippine Health Insurance Corporation (PhilHealth) assures the public that it will shoulder the cost of treatment for all patients who have COVID-19.

- For patients who were admitted from February 1 through April 14 and who paid for their hospital bills, PhilHealth will reimburse the expenses in full amount.
- After April 14, PhilHealth will continue to cover admission costs using a recomputed case rate.

As of April 13, 2020, HMO providers have not yet released their official statements regarding the integration of PhilHealth's new coverage for COVID-19 treatment. Thus, HMO providers will continue to provide coverage on COVID-19-related cases.

Meanwhile, HMO providers are operating with a skeletal workforce; hence, members may experience delay in contacting their HMO providers' call center hotlines.

1. Maxicare

Customer Care Hotlines: (02) 8582-1900, (02) 7798-7777

Provincial Toll-Free Hotline: 1-800-10-582-1900 (PLDT), 1-800-8-582-1900 (Globe)

Online Member Gateway for LOA issuances: membergateway.maxicare.com.ph

All Maxicare Helpdesks are temporarily closed, while some primary care centers are open from Monday to Sunday, 7 AM to 7 PM.

2. Intellicare

24/7 Call Center Hotline: (02) 7902-3400, (02) 8789-4000

3. PhilCare

COVID Care Helpline: (02) 8462-1810

Customer Service: (02) 8462-1800

4. Etiqa (formerly AsianLife)

Primary care centers are closed until further notice. For urgent medical availments, members may call the following:

Medical Information Center Hotline: (02) 8895-3308

Provincial Toll-Free Hotline: 1-800-10-8895-3308 (PLDT)

Mobile No.: 0917-5208919, 0908-8834901

Email: mic@etiqa.com.ph (for Certification of Coverage)

5. Cocolife

24/7 Helpline:

Landline: (02) 8812-9090, (02) 8396-9000

Mobile No:

SMS: 0917-622-COCO

Call:

Globe: 0917-5360962

Smart: 0908-8947763

Sun: 0922-8928828

Hospital Network

As of April 13, 2020, these hospitals are **at full capacity** and can no longer admit patients who are positive with COVID-19:

1. St. Luke’s Medical Center – BGC and Quezon City (*outpatient COVID-19 testing can be accommodated*)
2. The Medical City
3. Makati Medical Center
4. Asian Hospital Medical Center
5. Chinese General Hospital and Medical Center
6. Victor R. Potenciano Medical Center
7. De Los Santos Medical Center
8. Capitol Medical Center
9. United Doctors Medical Center
10. De La Salle University Medical Center
11. Our Lady of the Pillar Medical Center
12. Medical Center Imus
13. Bautista Hospital
14. De La Salle University - Rodolfo Poblete Memorial Hospital
15. N.L. Villa Memorial Medical Center

Meanwhile, here are some hospitals currently accommodating and handling COVID-19 cases:¹³

NCR

PRIVATE HOSPITAL	ADDRESS	CONTACT NO.
Fatima University Medical Center	20 MacArthur Highway, Valenzuela City	(02) 8291-6538
Cardinal Santos Medical Center	10 Wilson, Greenhills West, San Juan City	(02) 8727-0001
University of the East Ramon Magsaysay Memorial Medical Center	64 Aurora Blvd., Quezon City	(02) 8715-0861
Diliman Doctors Hospital	251 Commonwealth Ave., Matandang Balara, Quezon City	(02) 8883-6900
Manila Doctors Hospital	667 United Nations Ave, Ermita, Manila	(02) 8558-0888
University of Santo Tomas Hospital	España Blvd., Sampaloc, Manila	(02) 8731-3001
Our Lady of Lourdes Hospital	46 P. Sanchez Street, Sta. Mesa, Manila	(02) 8716-8001 to 20
Adventist Medical Center – Manila	1975 Donada cor. San Juan St., Pasay City	(02) 8525-9191

San Juan de Dios Education Foundation, Inc. Hospital	Service Rd, 2772 Roxas Blvd., Pasay City	(02) 8831-9731 to 36, 02) 8831 5641
Veterans Memorial Medical Center	North Ave., Diliman, Quezon City	(02) 8927-6426
Metropolitan Medical Center	1357 G. Masangkay St. Sta. Cruz, Manila	(02) 8863-2500, (02) 8254-1111
Medical Center Manila (ManilaMed)	850 United Nations Avenue, Ermita, Manila	(02) 8523-8131
St. Clare's Medical Center	1838 Dian St. cor. Boyle St., Makati	(02) 8831-6511
Fe Del Mundo Medical Center	11 Banawe St., Brgy. Doña Josefa, Quezon City	(02) 8712-0845 to 50, (02) 8712-2552 to 53, (02) 8732-7103
FEU – Dr. Nicanor Reyes Medical Foundation	Regalado Ave. cor. Dahlia St., West Fairview, Quezon City	(02) 8983-8338
New Era General Hospital	Commonwealth Ave, New Era, Quezon City	(02) 8932-7387
Alabang Medical Clinic	297 Montillano St., Alabang, Muntinlupa City	(02) 8842-0680 0917-7123400 0933-851 4427
Las Piñas Doctors Hospital	8009 CAA Rd., Pulanglupa II, Las Piñas	(02) 8825-5236, (02) 8825-5293

Outside NCR

PRIVATE HOSPITAL	ADDRESS	CONTACT NO.
Qualimed - Sta. Rosa Hospital	W, E Nature Ave., Santa Rosa City, Laguna	(049) 303-0000
Our Lady of Mt. Carmel Medical Center	Km.78 McArthur Highway Brgy. Saguin, San Fernando, Pampanga	(045) 435-2420
Bataan St. Joseph Hospital and Medical Center	151 Don Manuel Banzon Avenue, City of Balanga, Bataan	(047) 237-0226
Urdaneta Sacred Heart Hospital	15 MacArthur Highway, Urdaneta, Pangasinan	(075) 656-2296
Ace Dumaguete Doctors, Inc.	Claytown Road, Dumaguete City, Negros Oriental	(035) 523-5957
Daniel O. Mercado Medical Center	1 Pres. Laurel Highway, Tanauan City, Batangas	(043) 778-1810, (043) 405-1000
Dr. Pablo O Torre Memorial Hospital	BS Aquino Dr, Bacolod, Negros Occidental,	(034) 433-7331
Clinica Antipolo Hospital and Wellness Center	L. Suumulong Memorial Circle., Antipolo City	(02) 8695-9486
Divine Grace Medical Center	Antero Soriano Highway, General Trias, Cavite	(046) 482-6888

Nueva Ecija Doctors Hospital	AH 26, Cabanatuan City, Nueva Ecija	(044) 960-5500
Perpetual Help Medical Center-Binan	National Highway, Sto. Nino, Binan City, Laguna	(049) 531-4475
San Pedro Calungsod Medical Center	Kalayaan Rd. Kawit, Cavite	(046) 484-3112
The Medical City South Luzon	L. United Blvd., Santa Rosa City, Laguna	(049) 544-0120
The Medical City Iloilo	Locsin St. Molo, Iloilo City	(033) 500-1000
Angono Medics Hospital	Rainbow Village 1, Quezon Ave., Brgy. San Isidro, Angono, Rizal	(032) 451-1996
Batangas Health Care Hospital Jesus of Nazareth	Gov. Antonio Rd., Batangas City	(043) 723-4144
Binakayan Hospsital and Medical Center	179 Covelandia Rd. Balsahan-Bisita, Kawit, Cavite	(046) 516-0500
Binangonan Lakeview Hospital	193 Manila East Rd., Binangonan, Rizal	(02) 8570-0791
Cavite Medical Center	Manila-Cavite Rd., Dalahican, Cavite City	(046) 431-9988

Please contact your HMO provider or log in to your Benefits Made Better (www.benefitsmadebetter.com) account to know if these facilities are accredited by your HMO provider.

Government Guidelines and Instructions

Social Amelioration Program

On March 25, the government signed into law the Bayanihan to Heal As One Act, or Republic Act 11469. This law grants the Philippine president special powers to address the coronavirus outbreak by expediting the procurement of testing kits and the accreditation of confirmatory laboratories, directing PhilHealth to shoulder all medical expenses of public and private health workers, and ensuring that all local government units (LGUs) are acting within the directives of the national government, among others.

One of the provisions of RA 11469 authorizes the Department of Social Welfare and Development (DSWD) and other concerned departments to implement a nationwide social amelioration program (SAP), or emergency subsidy to 18 million affected low-income families.

Target beneficiaries

Each low-income household will receive Php 5,000 to Php 8,000 cash and/or in-kind benefits, depending on the region's minimum wage rate, if at least one (1) member belongs to the following:

- Pantawid Pamilyang Pilipino Program (4Ps) beneficiaries
- Informal economy workers:
 - Directly hired or occasional workers
 - Subcontracted workers
 - Homeworkers
 - House helpers
 - Public transportation drivers (pedicab, tricycle, PUV, TNVS)
 - Micro-entrepreneurs and producers (sari-sari stores, agri-business)
 - Family enterprise owners (*carinderia*, fruit or vegetable vendors, street vendors)
 - Sub-minimum wage owners
 - Farmers and fisherfolks
 - Employees affected by "no work, no pay" policy
 - Stranded workers (e.g., construction workers stranded in their respective construction sites)
- Other household members belonging to the vulnerable sector (senior citizens, PWDs, pregnant and lactating women, solo parents, distressed OFWS, indigent indigenous people and homeless individuals)

Programs under SAP

The social amelioration measures aim to implement social protection programs, projects, and services to mitigate the socio-economic impact of the COVID-19 outbreak and the enhanced community quarantine. A joint memorandum circular was issued to provide guidelines for each concerned departments' assistance programs.¹⁴

The following social amelioration programs are under the banner of DSWD:

1. Food and non-food item distribution

A sustained distribution of food and non-food items to the most affected families, in coordination with LGUs and regional offices of DSWD. The Armed Forces of the Philippines and/or the Philippine National Police shall bring the items to designated LGUs, and then the LGUs shall distribute the food and non-food items to the target beneficiaries.

Food and non-food items must be delivered directly to the beneficiary's residence to avoid mass gathering during distribution

2. Assistance to Individuals in Crisis Situation (AICS)

Outright cash assistance once a month during the quarantine period:

- Php 3,000 cash assistance shall be provided to target beneficiaries for the basic needs of their families.
- Php 5,000 cash assistance for a family with two or more members belonging to any of the identified sectors.
- A burial assistance of Php 25,000 may also be claimed by families who suffered loss due to a family member's death from COVID-19.

3. Livelihood Assistance Grants (LAG)

The beneficiaries of the existing Sustainable Livelihood Program (SLP), whose livelihoods were affected by the community quarantine, are eligible for a maximum grant amount of Php 15,000 per eligible family. The LAG aims to assist affected SLP beneficiaries through grant assistance that can also be used as a startup capital or for enhancing existing livelihood programs, and/or for employment-related activities.

Identification and eligibility requirement

1. The LGU barangays will identify and prepare a list of beneficiaries.
2. The LGU barangays will organize a house-to-house distribution of the Social Amelioration Cards (SACs) that will capture the family profile of the listed beneficiaries.
3. The accomplished SAC shall determine the social amelioration program that eligible families may access from any government agency.

Enhanced operations for BPO companies

Following the extension of the Luzon-wide enhanced community quarantine until April 30, 2020, the Department of Trade and Industry (DTI) issued a memorandum circular outlining the enhanced operations for business process outsourcing (BPO) companies and their support service providers.¹⁵

The DTI shall facilitate the enhanced operations throughout the extended community quarantine period of these enterprises:

- BPO companies
- Export companies
- Support service providers of BPO companies and export enterprises

Allowed activities of BPO companies and their support service providers throughout the extended community quarantine period:

1. Delivery, installation or transfer of necessary equipment to set up work-from-home arrangement, including provisions for troubleshooting support
2. Delivery or installation of telecommunication services by telcos
3. Delivery of logistical support, such as food or essential goods, for employees in the temporary housing or who are working from home
4. Other support services required in the operations of BPO companies

Further, BPO companies are allowed to continue their operations by providing employees with on-site or near-site accommodation arrangements and/or point-to-point shuttle services:

- *Near-site accommodation* refers to temporary accommodations arranged by the company for its employees within a 5 km radius from the facility or located in the same city or an adjacent city as the facility. In the accommodation sites, proper health protocols, including social distancing, should be strictly observed.
- Employees who are residents of the areas within a 5 km radius from the office shall be allowed to work.
- Point-to-point shuttle services for employees in near-site accommodations or near-site residences will be allowed but is subject to strict social distancing and routine disinfection of vehicles.

Documentation to facilitate unhampered movement of personnel and equipment:

- Company ID containing the addresses of the workplace and the employee's residence
- Certificate of employment issued by the employer
- For personnel of export enterprises, copy of the company's Certificate of Registration (CR) showing that it is an export-oriented enterprise. The CR is either issued by the BOI, PEZA, other investment-promotion agencies, or the SEC.
- For personnel of support service providers, a certification from the BPO company or export enterprise

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