# HIGHLIGHTS OF 3<sup>rd</sup> ASSESSMENT-BASED NATIONAL DIALOGUE (ABND) CORE GROUP MEETING

4/F Employees Compensation Commission (ECC) Building, 455 Gil Puyat Avenue, Makati City 03 February 2015, 9:00 am - 5:00 pm

### I. ATTENDANCE

Government Sector

Executive Director Stella Z. Banawis - ECC

Director Adeline T. De Castro - DOLE-PS

Director Ahmma Charisma Lobrin-Satumba - DOLE-BWSC

Atty. Alan Ortiz - SSC

Dr. Pilar D. Ibarra DND-PVAO Ms. Emielynn E. Francisco **DND-OUSPURA** Ms. Ofelia M. Pascua **DND-PVAO** Ms. Girlie Casimiro **NEDA** Ms. Loida M. Villanueva **DSWD** Ms. Lourdes Miñoza PHIC Ms. Lian Rivera NAPC Ms. Ella Mae Eleazor NAPC Ms. Cynthia Barriga **NCDA** 

Ms. Ma. Lourdes A. Macapanpan - ILO
Mr. Charles Van Miraflores - PSA
Mr. Mario Q. Ang II - GSIS
Mr. Dennis Alcaraz - DILG

Mr. Cyrus C. Policarpio - DOLE-BWSC

Worker & Employer Sector

Mr. Antonio Asper - FFW
Mr. Robert Ela - ECOP

## II. AGENDA

The following are the meeting agenda: (1) Validate and finalize the revised draft Assessment-Based National Dialogue (ABND) matrices which will be presented in the Island-wide Consultation Meetings, and (2) Discuss the preparations for the upcoming ABND-related activities.

### III. HIGHLIGHTS

Director Adeline De Castro gave a brief overview on the efforts of the Philippines government to
establish Social Protection Floor (SPF) in response to the vulnerabilities present across various
sectors in the country. Afterwards, she discussed the on-going initiatives led by Department of
Labor and Employment (DOLE) and National Economic and Development Authority (NEDA) to
assess the context of social protection system present in the country through the conduct of
Assessment-Based National Dialogue (ABND). Through the technical assistance of International

Labor Organization (ILO), ABND will identify gaps and possible options for existing social protection programs, and estimate its possible costing, through the consultations with stakeholders from civil society, government agencies, employers and workers sectors. She noted that this initiative has been supported by the Secretaries in the Human Development Poverty Reduction (HDPR) Cluster.

Lastly, she discussed the activity plan for ABND. As of the present, meetings with stakeholders were conducted to introduce ABND as well as gather necessary data for the matrices. It will be followed then by island consultation meetings in Luzon, Visayas and Mindanao respectively.

• The body conferred on its agenda: (1) conduct of ABND-related activities and (2) validation of assessment matrices. Before the inputs were tackled, Director De Castro gave a brief background about it. The matrix is essentially categorized by ILO social protection guarantees, which are focused to health, children, working age population and elderly, and Philippine SP Enhanced Operational Framework provisions which include social insurance, social welfare, labor market intervention and social safety net.

The following were raised during the discussions:

AGENDA	ISSUES/ CONCERNS	DISCUSSION POINTS
ABND- related activities	On finalization of ABND activity plan and schedule	<ul> <li>Director De Castro said that they will check with ILO since the latter also have their own timeline, especially with logistical arrangements.</li> <li>When finalized, CG members will be notified so that they can coordinate with their respective regional counterparts.</li> </ul>
	On composition of island-wide consultation meetings	<ul> <li>The consultations are multi-sectoral.</li> <li>Will check and coordinate with NEDA through Regional Development Council (RDC) to finalize the participants in the regional level.</li> </ul>
SPF1		• Director De Castro facilitated the discussion for SPF1 (Health), SPF2 (Children) and SPF4 (Elderly).
HEALTH	On PHILHEALTH Coverage	<ul> <li>DOLE had a bilateral talk with PHILHEALTH last 02 February 2015. As of June 2014, 82% of the total population are covered by PHILHEALTH. However it not necessarily translated to quality services.</li> </ul>
		<ul> <li>No identified policy gap on coverage sine the law covers all population.</li> </ul>
	On recommendation, "Strengthening linkages between DOLE and PHILHEALTH"	<ul> <li>Director Banawis referred to Labor Law Compliance System (LLCS), where checking the compliance of establishments to PHILHEALTH coverage is a significant part, as one area for convergence. Director Satumba added that the agencies will work first on information sharing to avoid double counting.</li> </ul>
		<ul> <li>It was clarified that the coordination is more on operational rather than in the policy level.</li> </ul>
		<ul> <li>Mr. Asper asked if the LGUs can play an important role in the convergence for monitoring compliance to PHILHEALTH in particular to kasambahays. It was also added that the promotion of labor standards be part of the said convergence.</li> </ul>

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	On recommendation, "Establishing	<ul> <li>Mr. Asper said that it could be costly for the government, which instead can be utilized for health care subsidies. PHILHEALTH might consider to hold its offices in Philippine Embassies.</li> </ul>
	PHILHEALTH overseas offices"	Ms. Casimiro also agreed that it would be costly for the government.     One stop shop/business center in PH Embassies could be explored.
	On micro- insurance schemes	Mr. Asper and Ms. Casimiro said that there were no available data/study pertaining to micro-insurance/finance.
		• It was suggested to include in the recommendation, "conduct a comprehensive inventory on micro-insurance scheme to complement with mandatory schemes" to have a complete picture of the coverage of social insurance.
	On provision of data	The Core Group must ensure that data/statistics on concerned areas e.g. coverage, membership, population is present, especially in the conduct of RAP Model, to effectively identify appropriate policy/program measures.
		• Director Banawis said that the statistics on coverage for different sectors, e.g. informal sector & migrant workers, are not readily available. Director De Castro suggested that PSA may contribute on this matter.
		<ul> <li>Ms. Casimiro said that data on social protection programs are available through DSWD, wherein they can be asked to update the database.</li> </ul>
The state of the s	On coverage on informal sector	<ul> <li>In 2011 Labor Force Survey, the informal sector accounts to 15.1 million, which are classified to self-employed and unpaid family workers. Data on informal sector needs to be sharpened.</li> </ul>
		<ul> <li>PHILHEALTH is covering 3 Million members for the informal sector. However, Director Banawis clarified that the informal sector definition of DOLE/PSA and PHILHEALTH is different, which the latter includes migrant workers.</li> </ul>
		<ul> <li>Ms. Minoza said that they are already linking with organized IS worker groups for collection. They are identifying issues in the implementation.</li> </ul>
		<ul> <li>The coverage of sponsored program funded by is decreasing because some of the members are now covered under indigent program, funded through the national level. PHIC is supporting the subsidy recommendations.</li> </ul>
	On targeting mechanism	<ul> <li>LGUs use their own targeting mechanisms. They identify the beneficiaries for the Sponsorship programs, and submitted to PHIC for coverage. On the part of PHIC, they cross check the names with NHTS-PR.</li> </ul>
		<ul> <li>UMID is ideal but may conflict with databases of other government agencies involved. The recommendation will be validated in the regional level</li> </ul>

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		<ul> <li>NAPC reperesentatives raised their concern on enlistment gap There were cases that PHILHEALTH benefits are released to common law husbands, which technically invalidates mothers from availment Further, it was recommended to promote women as primare members of government programs.</li> </ul>
		<ul> <li>Some LGUs were observed to pull funds arbitrarily thus limiting the funds of the local health care providers and out-of-pocket paymen of members. It was recommended to strictly enforce the income retention to providers in order to improve services.</li> </ul>
	On improving health facilities and infrastructure	<ul> <li>In some instances, PHIC reimbursement were used improve hospital services, especially in purchasing supplies and medicines. The recommendation was retained.</li> </ul>
	On lack of sanctions and regulations on fees	There exist a sanctions for non-compliance. The recommendation was to strengthen the monitoring and enforcement of sanctioning.
		<ul> <li>Regulations for overcharging of medical practitioners is beyond the control of PHILHEALTH. The benefits are at package rate.</li> </ul>
		<ul> <li>Advocacy to increase awareness among members in reporting incidents to management.</li> </ul>
	On information awareness	<ul> <li>NAPC cited that one of the observed issue is the lack of information on their entitlements for indigent members. The recommendations was for DSWD to include in the family development session module for the benefit packages, mobilize health care knowledge providers, and LGUs to augment trainings.</li> </ul>
	On no sustained coverage among Overseas Filipino Workers	<ul> <li>PHILHEALTH is not included in the integrated system for overseas workers. It was recommended to increase PHILHEALTH awareness with through POEA's PDOS.</li> </ul>
	Philippine Veterans Affairs Office (PVAO)	<ul> <li>Dr. Pilar gave an overview of the programs provided under PVAO. Benefits identified under PVAO-VMMC hospitalization program wherein free hospitalization for veterans and dependents, P 1, 200.00 hospital subsidy (outside VMMC). The pension coverage is 65 years old and above AFP/war veterans.</li> </ul>
		<ul> <li>The fund of PVAO is tax-based (no contribution scheme). They are looking for other sources (e.g. BCDA)</li> </ul>
		• Director De Castro requested for data on coverage and other relevant inputs.
		<ul> <li>Identified implementation gaps are (1) lack of information dissemination, (2) Need to strengthen linkages/coordination with other government agencies (e.g. DOH, DILG). They have developed MOA with DOH on hospitalization program.</li> </ul>
		<ul> <li>Director Banawis noted that ECC is working with the Department of National Defense (DND) on information dissemination program for Employee Compensation Program.</li> </ul>

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	On Pantawid Pamilyang Pilipino Program (4Ps)	<ul> <li>The total cash grant for Y2014 is P28.6 Billion</li> <li>For recommendations, municipal/city focal persons should be consulted for identification of gaps/recommendations since they are more immersed in the implementation at the ground.</li> </ul>
	On pursuance of 4Ps law	<ul> <li>The 4Ps legislative bill is still subject for discussion.</li> <li>Ms. Casimiro asked if the move to institutionalize 4Ps has passed thru consultations with government agencies, civil society organizations and other groups. Ms. Villanueva assured that they will provide updates of their consultations with stakeholders.</li> </ul>
	On program framework	At the policy level, the modified conditional cash transfer covers street families and indigenous people. Thus, it was emphasized that the problems of CCT are most in the implementation side.
		<ul> <li>Mr. Asper said that they reservations on the model "Asset transfer" of CCT as effective means to poverty reductions programs. There must be convergence programs with relevant government agencies.</li> </ul>
	On identified recommendations	<ul> <li>Mr. Asper raised the following points: (1) Transfer the reporting system to implementation gaps/recommendations, (2) They have reservations for "arranging free transportation". Instead, the government must focus on implementing mobilized health service/facilities.</li> </ul>
		Ms. Casimiro agreed with the point raised by Mr. Asper on convergence programs and free transportation. She noted that they are currently pushing DOH to work on the supply-side.
	On data on target and actual beneficiaries	<ul> <li>Ms. Villanueva said that the 2015 target is 4.4 million registered households. They have no segregate data for health/education yet available.</li> </ul>
		<ul> <li>Ms. Casimiro added that DSWD can provide proxy indicator on the compliance to the conditionality on health services. It can be backed up by data on the supply-side to know which areas still a problem of access to health facilities.</li> </ul>
		<ul> <li>NHTS-PR do not include indigenous people, street families and rebel returnees. DSWD will provide an update. The second round of survey is not starting.</li> </ul>
CHILDREN the	On maintaining the weight Supplemental	<ul> <li>According to DSWD, the coverage as of December 2014 is almost 1,576,497 day-care children with a proposed budget for 2015 at P 3.3 B. Feeding is sustained throughout the summer course.</li> </ul>
	Feeding Program	DSWD only covers feeding program for day-care children while DEPED covers the elementary students.
		<ul> <li>It was discussed that the mentioned gap may refer to CCT program wherein a cycle of 120 days for feeding to reach a target weight (weigh in/weigh out). After the cycle, the parents are required to maintain the weight to maintain their CCT allowance.</li> </ul>

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		Data/ identified gaps and recommendations will be checked and validated to DEPED
	On SPES	Bureau of Local Employment will be requested to check and validate the data and identified gaps and recommendations in the matrix.
		<ul> <li>The word lack will be replaced by limited, making it "Limited partnership with private sector". DOLE has recognized this gao and Regional Offices were ordered to increase private sector participation.</li> </ul>
	On trainings and scholarship programs	Certain enlisted TESDA programs will be transferred to SPF-3     (Income Security for Working Age) since there are overlaps in the target age population as required by respective programs.
		PVAO was requested to provide inputs for its scholarship program.
SPF3 WORKING AGE		Director Satumba facilitated the discussion for the SPF3 – Income Security for the Working Age People. Before it started, she gave a brief overview of the guarantee and the programs involved.
	Social Security System (SSS)	<ul> <li>Director Satumba noted that most of the sectors given focus on the gaps and recommendations are with migrant workers and informal sector workers.</li> </ul>
	On limited number of land- based OFWs under SSS	<ul> <li>In response to Director Satumba's question if covering OFWs as compulsory members feasible, Atty. Ortiz replied that legislative efforts to amend the charter are ongoing making OFWs as SSS compulsory members. As of the present, the law requires the overseas workers as voluntary members.</li> </ul>
		The conduct of advocacy missions was noted which aimed to encourage more OFWs to sustain their SSS contribution.
	On innovating payment schemes	<ul> <li>Currently, SSS has overseas offices (through the POEA). However, the collection or majority of payments are done in the country mostly through their home-based families.</li> </ul>
		Efforts are made to innovate payment methods which includes developing online payment system.
		<ul> <li>Mr. Asper inquired for the feasibility of manning agencies/recruitment agencies to collect premiums. In response, Director De Castro said recruitment agencies are considered as intermediaries and not as employers.</li> </ul>
		For recommendations, developing innovative collection scheme is suggested.
	On portability of social security	<ul> <li>Ms. Macapanpan mentioned that totalization policy with other countries, which refers to the integration of a member's contributions who has worked for the home country and the host country, was mentioned during their bilateral meeting.</li> </ul>
		Director De Castro informed the body that only few social security agreements with foreign countries to implement portability of social

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		insurance.
	On non-coverage of GSIS on COS, JO, MOA workers	• It was noted that DSWD has on-going discussion in their Department to cover their contract workers to GSIS. Director Satumba requested for updates on this matter.
		<ul> <li>Mr. Asper recommended to come up with a policy to pay workers rates with social insurance and facilitate deduction and remittance. However, Mr. Ang asked which agency will be responsible since they are not considered by Civil Service Commission (CSC) as government employees. On this matter, Director Satumba suggested to have bilateral talk with CSC.</li> </ul>
	On programs for the Migrant Workers	CG will coordinate with OWWA/NRCO for complete inputs.
	On Social	BWSC will provide inputs for the gaps and recommendations
	Amelioration Program	It was suggested to replicate SAP in other worker sectors (e.g. construction)
		Increasing maternity benefits is one of the considered for policy improvements.
	On KALAHI-CIDSS	DSWD will provide inputs for the policy/implementation gaps and recommendations.
	On Livelihood programs of the government	On the SLP, SSS have developed a compensation for the beneficiaries with amount of P20,000.00 for the loss of income in accessing trainings.
		Ms. Casimiro emphasized the need for an effective monitoring system for the convergence programs.
		With the inquiry on the incentives for PWDs, Dir. Satumba replied that RA 10524 is being implemented requiring government agencies to reserve 1% of its plantilla.
	On Community- Based Employment	Director De Castro oriented the body about CBEP. She noted the need for recalibration of the enlisted programs and ensure that they are responsive as stop-gap mechanisms.
	Program (CBEP)	Will be transferred to Social Safety Nets.
	On PESO	<ul> <li>It was suggested that all employment facilitation programs/services and training services enlisted in the matrices would be integrated respectively.</li> </ul>
		PESOs are deemed to be One-stop shop (single window service system) for all employment-related services of the government.
		It was also to suggest to establish one-stop shops at the barangay level.
	On Social Safety Net Programs	NAPC suggested to include in the recommendation the provision unemployment insurance. The cost will be paid by the beneficiaries

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	,	once employed.
SPF-4 Elderly)		• It was noted that in the Philippine Law those 60 years old and above are recognized as senior citizens.
		Since the concern of insufficiency of SSS to meet present needs of the beneficiaries It was suggested for the review of SSS Charter to be considered in lieu of developing mechanisms to adjust contribution to the necessary thru legislative matters
		<ul> <li>Provident fund will be developed for voluntary members who seek for higher pension benefits, which is originally for the overseas workers. However, it would be contrary to the SSS model wherein the pension funds for the lower premiums could not be supported.</li> </ul>
		Director Banawis reminded that lapses in the collection must be checked.
		Mr. Asper suggested that actuarial standard methods/procedures must be reviewed to be consistent with international standards.
		Ms. Macapanpan noted that during their bilateral meeting with SSS, low ceiling of monthly premiums was identified as gap.
	On AFP RSBS	The funds is not increasing well as compared to the increase of the AFP veterans. In response, an actuarial study is being conducted by GSIS and AFP on developing a unified pension scheme for the Philippine Military Pension system.
		CG Will coordinate with AFP-RSBS to validate the inputs.
		It was noted that pension indexation to active wages in GSIS would not be feasible for social insurance.
	On PVAO elderly programs	There are currently legislative effort to increase the pension benefit from 5k to 10k (house and senate have different versions). Burial assistance from 10k to 20k was implemented last year
		To establish two veteran's hospital in Visayas/Mindanao (Cagayan De Oro was identified as site) which will cater
	Social Pension for Indigent Elderly	By 2016, they are planning to include 60-76 years old. As of the present, the approved floor age is 65 (2015).
		NHTS is still used for targeting. However, the problem is in the implementation in the local level
		On inadequacy, there was a findings (during a study) that the social pension is inadequate.
		CG will coordinate with PSA requesting statistics on Senior Citizens.
	Discounts on basic goods for elderly	CG will coordinate with DOH for inputs.
	On PWDs concerns	Ms. Casimiro said that the problem for the acquisition of discount lies in the PWDs, compare to the Senior Citizens. Based on their dialogue with PWD organizations, there is a need to increase its

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		advocacy works to increase the information awareness on the benefits for the PWDs.
		<ul> <li>On discounts, all are classified 20% (medical care/medicines only), except for basic commodities. To access, There is a Philippine Online registry for PWDs being developed and maintained by DOH</li> </ul>
	On issuance of	<ul> <li>According to NCDA, PWDs can access to their respective LGU.</li> </ul>
	PWD IDs	<ul> <li>DILG will issue a Memorandum Circular reiterating LGUs to provide PWD IDs, ULAP and Leagues of Local Officials</li> </ul>
	On creation of 5 <sup>th</sup> social protection guarantee	<ul> <li>Due to the vulnerability of climate disasters, it was recommended to highlight government programs in a social protection floor for people affected by natural disasters and man-made calamities.</li> </ul>
		<ul> <li>Director De Castro with recommendation to identify disaster preparedness programs.</li> </ul>
	Other matters	<ul> <li>It was suggested to omit the recommendation "Social security coverage for 15 and below"</li> </ul>
		<ul> <li>On the reason of exclusion of PAG-IBIG Fund in the ABND, Director Satumba and Director De Castro said that they are not part of the SPF framework. It was also added that provident fund is not considered as social insurance.</li> </ul>

## IV. AGREEMENTS

- 1. Department of Education (DEPED), Department of Health (DOH), Office of the Civil Defense (under Department of National Defense), Philippine Crop Insurance Corporation (PCIC) will be requested for inputs to the Assessment Matrices.
- 2. Deadline of submission for the comments and inputs of respective agencies is on or before 06 February 2015.
- 3. The member—agencies of the Core Group will be notified about the final schedule and line-up of activities for the Assessment-Based National Dialogue.

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