

POLICY BRIEF

INTEGRATING TELEPSYCHIATRY IN MENTAL HEALTH BENEFITS PACKAGE FOR OVERSEAS FILIPINOS

GREGORIO R. CANDELARIO JR., MPA
CRISTELA MAE C. CANDELARIO, RMT, MSMT
MA. ANGELICA C. PLATA, RN, MD
ISMAEL L. CORDERO, JR., MD, DPCAM
REAGAN JOSEPH T. VILLANUEVA, MD, DPCAM, MAHA



Philippine Health Insurance, Inc.

* BACKGROUND

Mental health care in the Philippines faces significant financial accessibility challenges. This burden is particularly acute for OFWs, who face unique mental health problems while working abroad. When mental health issues go unaddressed, they often lead to increased healthcare utilization through crisis interventions, which are typically more costly than preventive care. Thus, telepsychiatry has emerged as an innovative solution to improve mental healthcare access over the years. While concerns remain, the Philippine Health Insurance Corporation (PhilHealth) can play a pivotal role in addressing certain implementation challenges through its mandate under the Universal Health Care Act (RA 11223) and the Mental Health Act (RA 11036). This policy brief outlines evidence-based recommendations for integrating telepsychiatry services into PhilHealth's mental health benefits package. Based on: (1) Focus group discussions with key stakeholders, including PhilHealth representatives; (2) Service utilization data from Kuwait telepsychiatry implementation; and (3) Analysis of current mental health coverage gaps and financial barriers.

EVIDENCE BASE

Research Findings from the Kuwait
Telepsychiatry Study (Candelario et al., 2024):

- Service Utilization:
 - 55 OFWs served through telepsychiatry
 - 40% diagnosed with mental health conditions
 - Multiple consultations required for most cases
- Financial Impact:
 - Cost identified as major barrier to seeking mental healthcare
 - High OFW satisfaction with telepsychiatry services (4.77/5.00)
 - Potential cost savings through early intervention and treatment

Stakeholder Engagement Meeting:

- This policy brief draws from findings of a stakeholder engagement meeting conducted on November 22, 2024.
- Using purposive sampling, key representatives from seven critical organizations were selected based on their direct or indirect involvement with migrant workers, policy-making, mental health, psychiatry, psychology, telemedicine, e-Health, or information and communications technology.
- Individuals from the academe and private sector were also invited for a well-rounded discussion.



Focus group discussions with relevant stakeholders.
Legend:
A – representatives from DMW-OWWA, DFA, DOST-PCHRD;
B – representatives from DOH, PHIC, DOST-PCHRD;
C – representatives from DICT, PPA, PAP, DOST-PCHRD, private sector;
D – representatives from PMHN, private sector and academe.





PhilHealth must act decisively to remove financial barriers to mental health care for OFWs. The evidence from Kuwait demonstrates both the critical need and viability of telepsychiatry services. By integrating telepsychiatry into the mental health benefits package, PhilHealth can fulfill its mandate under the Universal Health Care Act and Mental Health Act while ensuring sustainable, accessible mental health support for OFWs. The time for action is now – our OFWs' mental health cannot wait!

RECOMMENDED IMPLEMENTATION

PHASE ONE:

Package Development

- Define service inclusions
- Set payment rates
- Establish provider requirements
- Create monitoring frameworks

PHASE TWO

Provider Engagement

- Begin provider accreditation
- Conduct provider training
- Set up support systems
- Implement quality measures

PHASE THREE

Full Implementation

- Launch complete coverage
- Monitor service delivery
- Evaluate outcomes
- Make necessary adjustments

MONITORING AND EVALUATION:



- Service utilization tracking
- Financial performance monitoring
- Provider compliance assessment
- Beneficiary satisfaction survey
- Outcome measurement and reporting

EXISTING FRAMEWORK:



- Recent implementation of mental health package (Circular 2023-0018)
- Limited accredited service providers for mental health services
- High costs deterring OFWs from seeking mental health support
- Need for expanded coverage and accessibility

POLICY RECOMMENDATIONS

1. Benefits Package Enhancement

- Core Coverage Components:
 - Telepsychiatry consultations (initial and follow-up)
 - Mental health medications
 - Crisis intervention services
 - Psychotherapy sessions
- Cost-Sharing Structure:
 - Reasonable co-payment schemes
 - Medication subsidies
 - Special consideration for older and disabled OFWs

2. Provider Network Development

- Accreditation Framework:
 - Streamlined facility accreditation process
 - Technical standards for telepsychiatry
 - Quality assurance mechanisms
 - Provider performance monitoring
- Provider Support:
 - Training and capacity building
 - Technical assistance
 - Claims processing support

3. Financial Sustainability Measures

- Sustainable Financing:
 - Evidence-based pricing
 - Cost containment strategies
 - Utilization management
- Monitoring Systems:
 - Claims analysis
 - Utilization tracking
 - Cost-benefit assessment

For more information, contact:

Gregorio R. Candelario, Jr. (gregjrcandelario2@gmail.com)