



St. Jude Global Scholars Projects: Ana Patricia Alcasabas



The Philippines Standard-Risk Acute Lymphoblastic Leukemia Universal Healthcare Package: Implementation Analysis for Improved Adoption

This project aimed to measure the implementation of the universal healthcare package for standard-risk acute lymphoblastic leukemia (SR ALL) through PhilHealth, the national health insurance program in the Philippines. The PhilHealth ALL Z Package (ALLZP) was assessed at the individual and institutional levels using the RE-AIM framework, and findings were shared with internal and external stakeholders.

A mixed-methods, implementation science review of the ALLZP was conducted in eight hospitals nationwide, utilizing semi-structured interviews and data from hospital medical records. Barriers and facilitators to implementation were identified, and 12 potential interventions were proposed. Development of educational materials was prioritized to address three key barriers: lack of knowledge about the policy, miscommunication among hospital stakeholders, and low motivation. These materials were co-designed through an online design-thinking workshop attended by physicians, hospital administrators, and parents from the eight sites. Moving forward, the hope is to monitor the effect of this intervention over the next two years through the efforts of the professional civil societies, the PhilHealth leadership, and the Department of Health.

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Project Details



Location
Philippines



Setting
Multiple Centers
within a Country



Health Condition
Childhood Cancer



Focus Areas
Access, Equity



Target Age Group
All Pediatric Patients

Systems-Level Change

Participants

1,416 Children

30 Health Care Workers

22 Caregivers

UN Sustainable Development Goal

Goal 3: Good Health and Well-Being

WHO Health System Building Blocks

Health system financing

GICC CureAll Projects

7. Economic analysis and benefit packages review of cancer



Key Findings

The following are key findings from this Global Scholars Project analyzing implementation of the PhilHealth ALL Z Package in the Philippines.

The results according to the RE-AIM variables are:

- For the reach: Among 666 eligible SR ALL patients, only 405 (mean 61%, range across sites: 19–84%) were enrolled in the ALLZP.
- For adoption: The reasons for non-enrollment included physician confusion on eligibility, early deaths, treatment refusal, and lack of health insurance.
- For effectiveness:
 - Five-year overall survival was 62% (48% abandonment-sensitive), while event-free survival was 44% (35% abandonment-sensitive). These are well below the WHO GICC target of 60% ALL survival by 2030.
 - Average total treatment costs reported amounted to only 42% of the ALLZP package (range 1–254%).
- For implementation, all hospitals designated an ALLZP officer; five had patient navigators, and only one had formal standard operating procedures.
- For maintenance, only one hospital was suspended for missed enrollment and 16.4% of enrolled patients abandoned treatment.

Among SR ALL patients enrolled in ALLZP, the overall and abandonment-sensitive five-year survival rates were 62% and 48%, respectively, while the corresponding five-year overall and event-free survival rates were 44% and 35%, respectively. Those enrolled had significantly higher 5-year abandonment-sensitive overall, but there were no significant differences in the five-year event-free survival or in abandonment rates ($p=0.157$).



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