REVISED PROCUREMENT PLAN

	Procurement Method	Latest Allocation ('000)	Revised Amount ('000)	Remarks
Output 1: Strengthened regional leadership and financing for malaria & other communicable disease threats in Asia & Pacific				
Health Financing Expert (1.2)	Firm, QCBS	1.14	0.99	In the TA paper, budget will be reduced by \$0.15 million to be included in the proposed major change/decrease in TA amount.
Scorecard Experts (1.4)	Individual, CQS	0.58	0.58	The work was originally, in the TA paper, intended to be outsourced to WHO. This was changed to recruiting two individual consultants (minor change in scope, 24 March 2015). One of the two consultants has been hired in May 2015.
Regional Health Security Expert	Individual, CQS	-	0.50	New post. Consultant to develop sub-regional capacity development and policy dialogue between the Ministries of Finance, Health and Foreign Affairs to advance regional health security. Funds supported by CIDA using ADB's Guidelines on the Use of Consultants (amended from time to time).
Sub-total: Output 1		1.72	2.07	
Output 2: Increased availability and use of quality-assured commodities appropriate to internationally agreed guidelines for malaria and other communicable disease threats				
Pharmacological and commodities expert (2.1)	Firm, QCBS	2.60	-	In the TA paper, but will be cancelled as part of the proposed major change/decrease in TA amount. Instead two individual consultants will be hired to work on identifying pilot testing tools for post-market surveillance of pharmaceuticals, and counterfeit drugs.
Post-market surveillance tools expert (2.1)	Firm, SSS (Oxford University/Lao-Oxford- Mahosot)		0.60	New post, to pilot test new technological innovations for pharmaceutical quality test and reporting.
SFFC and Regulatory Expert (2.1)	Individual, CQS		0.20	New post, to strengthened the capacity of ASEAN countries National Regulatory Agencies to report spurious/falsely-labeled/falsified counterfeit (SFFC) medicines.
Regulatory Specialist (2.1)	Individual, CQS	0.19	0.30	Not in the TA paper but covered by the minor change in scope memo of 24 March 2015, contract to be extended by additional 15 months, revised budget from \$0.19 to \$0.300
Support the development & implementation of CORE capacity bldg plan go national regulatory agencies in particular for testing quality of ART and other communicable diseases pharmaceuticals (Q4 2016)	NGO (CORE), SSS	2.06	2.06	No change, as in the TA paper.
Recruit PSI to support 2nd round of market surveys of available anti- malarial commodities in 5 GMS + 1 AP to measure market changes (Q2- 2017)	NGO- (PSI), SSS	3.07	-	In the TA paper, but will be cancelled as part of the proposed major change/decrease in TA amount.
Sub-total: Output 2		7.92	3.16	
Output 3: Increased availability	& use of quality inf	formation, tools, & te	chnologies on malar	ria & other communicable disease threats
E- and M-Health Experts (Lead) and E-and M-Health Expert (IT and Health Info System) (3.1)	Individual/int'l, CQS	0.60	0.60	The work was originally, in the TA paper, intended to hire 1 consultant only. This was changed to recruiting 2 individual consultants, using the same budget. Consultants commenced on 13 and 19 May 2015 respectively.
Provide support to develop & test at least 2 technologies or tools in GMS countries to malaria testing & treatment (Q4 2015)	NGO/Firm, CQS	0.04	0.54	In the TA paper, to develop at least 5 technologies/ tools. This will be decreased to 2 technologies only. Budget to be increased by \$0.500 million as part of the proposed major change increse/decrese of the TA amount.
Provide 2 grants for innovative IT solution, which can be integrated in national e-and m-health strategies (Q4 2015).	NGO/firm, CQS	2.62	0.70	In the TA paper, to provide 3 grants for innovative IT solution. Target will be decreased to 2 grants instead of 3. Adjusted the budget to \$0.700 million as part of the proposed major change increase/decrease of the TA amount.
Hold on regional knowledge sharing workshop in ICT applications in malaria & communicable disease control (Q2 2016) (3.4)	NGO, CQS	0.04	0.10	In the TA paper, but budget will be increased by \$0.06 million will be included in the proposed major change, increase/decrease of TA amount.
E-Health Enterprise Artichect and ID Management System ICT Experts (3.5)	Individual, CQS	0.38	0.38	Not in the TA paper but covered by the minor change in scope memo, 24 March 2015.
Sub-total: Output 3 Output 4: 0	Communicable disea	3.68 ases addressed in la	2.32	infrastructure projects
Health Impact Assessment Expert (4.1)	Individual consultant	0.84		In the TA paper, instead of 1 individual consultant, the TOR has been revised to divide the work into 4 individual international consultants and national consultants. Included in the proposed major change increase/decrease in the TA amount.
Hold regional knowledge sharing and consultation workshop on best practices of malaria and other CD related health impact assessment issues in large infrastructure project (Q2 2016) (4.2)		0.03	0.10	In the TA paper, budget increased to \$0.100 million/included in the proposed major change/decrease in TA amount.
Identify at least 2 large infrastructure project (not necessary ADB financed) in malaria endemic area & include health component which provides malaria testing, & treatment implemented through NGOs (Q3 2017):	NGO/Firm	0.76	0.50	The original target of at least 4 large infrastructure in the TA paper will be reduced to 2, reducing the budget by \$0.26 million.
Public HealthExpert	Individual, CQS	0.16	0.16	Not in the TA paper but covered by the minor change in scope memo, 24 March 2015.
Communications Expert	Individual, SSS	0.08	0.10	Not in the TA paper but covered by the minor change in scope memo, 24 March 2015. The TOR was further revised (from Visual Communications Expert to Communications Expert) to address the needs of the TA project.
Sub-total: Output 4		1.87	1.70	Empery to address the ribbde of the 171 project.
Outputs Total TA Management & Technical Support (TA Admin)		15.19 0.23	9.25 0.31	
Contingencies		2.58	2.44	
TOTALS		18.00	12.00	