

Project Administration Manual

Loan Number: XXXX
February 2021

Republic of the Philippines: Second Health System Enhancement to Address and Limit COVID-19 under the Asia Pacific Vaccine Access Facility

ABBREVIATIONS

ADB	–	Asian Development Bank
AIB	–	Asian Infrastructure Investment Bank
APVAX	–	Asia Pacific Vaccine Access Facility
COVAX	–	COVID-19 Vaccines Global Access Facility
COVID -19	–	coronavirus disease
DOF	–	Department of Finance
DOH	–	Department of Health
FMA	–	financial management assessment
GIDA	–	geographically isolated and disadvantaged areas
HEAL 2	–	Second Health System Enhancement to Address and Limit COVID-19 under the Asia Pacific Vaccine Facility
LGU	–	local government unit
NDVP	–	National Deployment and Vaccination Plan for COVID-19 Vaccines
NPI	–	non-pharmaceutical intervention
PMT	–	project management team
RRC	–	rapid response component
SAGE	–	Strategic Advisory Group of Experts on Immunization
WEDC	–	women in especially difficult circumstances
WHO	–	World Health Organization
UNICEF	–	United Nations Children's Fund

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Project Administration Manual Purpose and Process

The project administration manual (PAM) describes the essential administrative and management requirements to implement the project on time, within budget, and in accordance with the policies and procedures of the government and Asian Development Bank (ADB). The PAM should include references to all available templates and instructions either through linkages to relevant URLs or directly incorporated in the PAM.

The DOH is wholly responsible for the implementation of ADB-financed projects, as agreed jointly between the borrower and ADB, and in accordance with the policies and procedures of the government and ADB. ADB staff is responsible for supporting implementation including compliance by DOH of its obligations and responsibilities for project implementation in accordance with ADB's policies and procedures.

At loan negotiations, the borrower and ADB shall agree to the PAM and ensure consistency with the loan agreement. Such agreement shall be reflected in the minutes of the loan negotiations. In the event of any discrepancy or contradiction between the PAM and the loan agreement, the provisions of the loan agreement shall prevail.

After ADB Board approval of the project's report and recommendation of the President (RRP), changes in implementation arrangements are subject to agreement and approval pursuant to relevant government and ADB administrative procedures (including the Project Administration Instructions) and upon such approval, they will be subsequently incorporated in the PAM.

I. PROJECT DESCRIPTION

1. Under the rapid response component (RRC) of the Asia Pacific Vaccine Access Facility (APVAX), HEAL 2 will provide the Government of the Philippines with timely financing for safe and effective vaccine procurement and logistics, based on an agreed list of eligible expenditures. It will supplement the initial support of the Asian Development Bank (ADB) to the government's coronavirus disease (COVID-19) response under the Health System Enhancement to Address and Limit COVID-19 (HEAL) project.¹ It will be jointly supported by the Asian Infrastructure Investment Bank (AIIB). HEAL 2 is aligned with three operational priorities of ADB's Strategy 2030: (i) addressing remaining poverty and reducing inequalities; (ii) accelerating progress in gender equality; and (iii) fostering regional cooperation and integration.²

2. The Philippines recorded its first case of COVID-19 on 30 January 2020. It registered a doubling time of 22.9 days and a halving time of 101.32 days since the first confirmed local transmission on 7 March 2020, and the crude fatality rate stands at 2.03% as of January 2021. Infection rate started to spike in July 2020. In August 2020, government re-imposed stricter implementation of various non-pharmaceutical interventions (NPIs),³ which has helped to reduce the spread of coronavirus in the country. The stricter NPIs, together with the expanded government facilities for testing, tracing, isolating, and treating COVID-19 cases (includes 184 accredited laboratories for COVID-19 testing, increased supply of personal protective equipment supply, and deployment of around 46,000 contact tracers in various regions of the country), have contributed to controlling the spread of infection.⁴

3. While the number of daily cases has decreased between August and November 2020, without a concerted nation-wide vaccination campaign, the pandemic will continue to undermine public confidence and threaten the recovery of the Philippine economy. The government has prepared to secure COVID-19 vaccines, but it is constrained by limited global supply of, and inadequate institutional capacity to access safe and effective COVID-19 vaccines to cover its priority populations groups in a timely manner.

4. The government aims to provide vaccines to approximately 50-70 million of the country's population, for which it estimates that about ₱82.5 billion (about \$1.7 billion) will be needed.⁵ Of this amount, it has allocated ₱12.5 billion (about \$260 million) from its own resources and will have to secure ₱70 billion (about \$1.45 billion) through loans from multilateral lenders, bilateral partners, and/or other sources. About 84.5% will be spent for the procurement of vaccines, and the remaining on non-vaccine expenditure items (e.g., logistics, vaccine campaign, risk communications, monitoring and evaluation). The government requested ADB to finance \$400 million through the RRC under ADB's APVAX facility. Similarly, the government requested from AIIB a loan in the amount of \$300 million for joint cofinancing of the proposed HEAL 2. In addition, the government has also requested a loan in the amount of \$500 million from the World Bank for vaccine procurement.⁶

¹ ADB. 2021. *Major Change in Loan: Health System Enhancement to Address and Limit COVID-19*. Manila.

² Contribution to Strategy 2030 Operational Priorities (accessible from the list of linked documents in Appendix 2).

³ NPIs include social distancing measures, face mask and face shield policies, bans on public gatherings, school and workplace closures, transport and travel restrictions, enforcement of large-scale quarantines including stay-at-home and work-at-home orders, and national lockdowns.

⁴ World Health Organization (WHO). 2020. *COVID-19 in the Philippines Situation Report 62*. Manila.

⁵ DOH 2021. DOH's submission to the National Economic and Development Authority dated January 27, 2021.

⁶ The World Bank is proposing an additional financing to an ongoing COVID-19 emergency response project (World Bank. 2020. *Philippines COVID-19 Emergency Response Project*. Washington D.C.), which is expected to be considered by its board by 11 March 2021.

5. **Impact and outcome:** The HEAL 2 will align with the following impacts: (i) health system performance in addressing public health outbreaks improved (National Objectives for Health 2017–2022)⁷; (ii) protection of the public and reduction of morbidity and mortality due to COVID-19 infection fostered (National COVID-19 Vaccine Roadmap); and (iii) economic growth and citizens' confidence restored (Asia Pacific Vaccine Access Facility).⁸ It is also aligned with the following operational priorities (OP) of Strategy 2030: (i) addressing remaining poverty and reducing inequalities (OP1); (ii) accelerating progress in gender equality (OP2); and (iii) fostering regional cooperation and integration (OP7). It will measure (i) people benefiting from improved health services; (ii) poor and vulnerable people with improved standards of living; (iii) health services for women and girls established or improved; (iv) gender quality measures supported; and (v) regional public health and education services improvements. The project will have the following outcome: priority populations vaccinated against COVID-19.⁹

6. **Output: COVID-19 vaccines efficiently and effectively delivered.** The project will support the procurement of safe and effective vaccines against COVID-19 through APVAX's RRC in compliance with ADB's vaccine eligibility criteria and with Asian Infrastructure Investment Bank (AIIB) cofinancing. It will procure a total of up to 110 million doses of vaccines,¹⁰ which will be administered to up to 50 million Filipinos by 2023 based on identified priority populations. The eligible vaccines will be procured through either the COVID-19 Vaccines Global Access (COVAX) facility or bilateral arrangements with vaccine manufacturers or distributors. The vaccines are expected to be introduced swiftly to priority populations following the National Deployment and Vaccination Plan for COVID-19 Vaccines (NDVP), and according to vaccination protocols and standards, such as those governing waste management and monitoring of adverse events. With the help of ongoing technical assistance,¹¹ the project team will support Department of Health (DOH)'s communication management, and help develop and disseminate a gender and socially inclusive protocol to support last-mile vaccine outreach to marginalized women and women in especially difficult circumstances (WEDC).

⁷ Department of Health (DOH). 2018. *National Objectives for Health 2017–2022*. Manila.

⁸ DOH. 2020. *National Objectives for Health-Philippines 2017–2022*. Manila.

⁹ The design and monitoring framework is in Appendix 1.

¹⁰ This includes 40 million doses from the COVID-19 Vaccines Global Access (COVAX) whose cost-share will be financed by the project; and 6 million single doses of Johnson & Johnson vaccine. The estimated coverage of about 50 million Filipinos assumes a wastage rate of 10%.

¹¹ ADB. 2020. *Technical Assistance for Regional Support to Address the Outbreak of Coronavirus Disease 2019 and Potential Outbreaks of Other Communicable Diseases*. Manila; ADB. 2016. *Technical Assistance to the Philippines for Strengthening Social Protection, Education, and Health Reforms*. Manila; ADB. 2019. *Support for Human and Social Development in Southeast Asia*. Manila.

Activities	2021				2022				2023				2024
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1
1.7 Procure the required number of vaccine doses for ADB financing and AIIB cofinancing.													
B. Project Management Activities													
Conduct procurement value for money analysis and post-review sampling.													
Prepare and submit quarterly and annual progress report													
Submit annual Audited Project Financial Statement													
Prepare Project Completion Report													

ADB = Asian Development Bank; COVID-19 = coronavirus disease; DMF = design and monitoring framework; Q = quarter.
Source: Asian Development Bank.

III. PROJECT MANAGEMENT ARRANGEMENTS

A. Project Implementation Organizations: Roles and Responsibilities

Project Implementation Organizations	Management Roles and Responsibilities
Department of Health (DOH)	<ul style="list-style-type: none"> Serve as executing agency and implementing agency Ensure the day-to-day management and implementation Ensure adequate counterpart in-kind contribution Liaise directly with Asian Development Bank (ADB) on all concerns related to this project
Project Management Team	<ul style="list-style-type: none"> Manage, coordinate, and monitor activities Oversee day-to-day administration and implementation of the project Establish Technical Support Unit Ensure that suppliers are compliant with DOH standards Manage budgeting and financial planning/reporting, and disbursement Ensure auditing of loan proceeds Prepare withdrawal application, complete with all required disbursement-related documentation Submit quarterly progress reports (and consolidated annual report) to ADB in agreed format Prepared other reports specified in the loan agreement Establish, maintain and update the project performance monitoring system Prepare project completion report with support from consultants Prepare contract documents for further approval Prepare procurement plan in consultation with ADB Submit annual contract award and disbursement projections Monitor and ensure compliance with ADB's Safeguard Policy Statement Submit Gender Action Plan monitoring report to ADB
Asian Development Bank	<ul style="list-style-type: none"> Assist with the vaccine procurement through advice on the volatile market, associated procurement related risks, review and input on contracts under bilateral agreements, assistance with price validation, and support in the negotiation process. Review withdrawal applications for ADB and Asian Infrastructure Investment Bank (AIIB) Disburse funds for ADB's portion of eligible expenditures Send advise to AIIB for disbursement of their portion of expenditures Monitor compliance with loan agreement, financing agreement, procedures and the project administration manual Conduct periodic reviews including mid-term and completion reviews to assess project implementation progress towards achieving the project outcome and outputs, compliance to loan covenants, environment and safeguards requirements, and gender action plan

Project Implementation Organizations	Management Roles and Responsibilities
Asian Infrastructure and Investment Bank	<ul style="list-style-type: none"> • Will join ADB team in conducting periodic reviews, including mid-term and completion review to assess the project implementation progress • Ensure AIIB's fund flows to the project activities are achieved in a timely and efficient manner and in compliance with the co-financing agreement between ADB and AIIB

Source: Asian Development Bank.

B. Key Persons Involved in Implementation

Executing Agency

Department of Health

Dr. Mario C. Villaverde
Undersecretary of Health
Health Policy and Systems Development Team
Telephone No: +63 2 8651 7800 loc 1141, 1139,1143
Email address: mcvillaverde@doh.gov.ph;
officeofusecmcv@gmail.com
Office Address: San Lazaro Compound, Tayuman, Sta. Cruz, Manila, Philippines

Dr. Maria Rosario S. Vergeire
Undersecretary of Health
Public Health Services Team
Telephone No: +63 2 8651 7800 loc 1711 – 1714, 2916 – 2918
Email address: officeofasecrsv@gmail.com
Office Address: San Lazaro Compound, Tayuman, Sta. Cruz, Manila, Philippines

Asian Development Bank

Human and Social Development Division (SEHS), Southeast Asia Regional Department, (SERD)

Ms. Ayako Inagaki
Director
Telephone No.: +63 2 8632 4531
Email address: ainagaki@adb.org

Co-Mission Leaders

Sakiko Tanaka
Principal Social Sector Specialist
Telephone No.: +63 2 8632 6676
Email address: sakikotanaka@adb.org

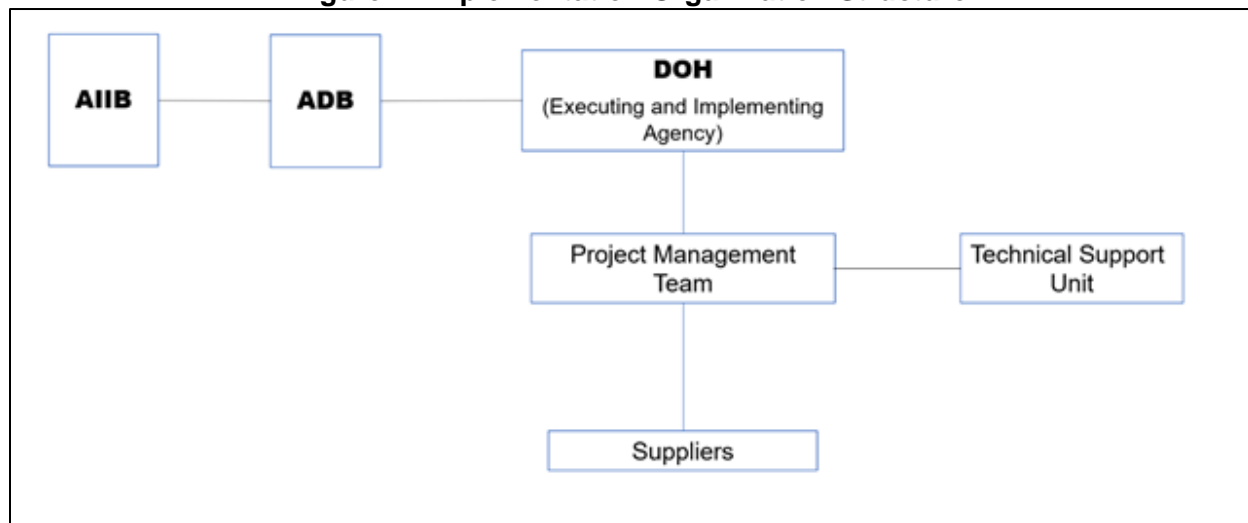
Eduardo Banzon
Principal Health Specialist
Telephone No. +63 2 8632 6742
Email address: ebanzon@adb.org

Ruby Alvarez
Senior Project Officer (Infrastructure)
Telephone No. +63 3 8683 1005
Email address: ralvarez@adb.org

C. Project Organization Structure

8. DOH will be the executing agency. The DOH will set up a Project Management Team with a Project Director (Undersecretary level) and Project Manager (Director level). A technical support unit comprising individual consultants (health experts, a gender specialist, a financial management specialist, a procurement specialist, and administration staff) will be engaged to support the Project Management Team in all stages of the implementation. The project will be implemented from March 2021 to March 2025. Project completion date is on 31 March 2024 and project closing date is 30 September 2024.

Figure 1: Implementation Organization Structure



ADB = Asian Development Bank, AIIB = Asian Infrastructure Investment Bank, DOH = Department of Health.
Source: Asian Development Bank

IV. COSTS AND FINANCING

9. The project is estimated to cost \$764.17 million including vaccine-related costs, taxes and duties, physical and price contingencies, and interest charges during implementation.

**Table 3: Project Investment Plan
(in \$ million)**

Item	Description	Amount (\$million) ^a	Cost Share (%)
A.	Base Cost ^b		
	COVID-19 vaccines swiftly and properly delivered	714.57	93.51
B.	Contingencies ^c	37.50	4.91
C.	Financing Charges During Implementation ^d	12.10	1.58
	Total Cost (A+B+C)	764.17	100.00

COVID-19=coronavirus disease.

^a The project costs are inclusive of taxes and duties (\$5.58 million) for recurrent cost, which will be financed by the government. Such amount does not represent an excessive share of the project cost. The government will finance all taxes and duties for Covid-19 vaccine through tax exemption and its estimated amount is not included in the project cost. COVID.

^b In January 2021 prices.

^c Includes physical and price contingencies, and a provision for exchange rate fluctuation.

^d Includes interest, commitment, and other charges on all sources of financing.

Source: Asian Development Bank.

10. ADB will finance \$400 million from its ordinary capital resources under the APVAX RRC and \$300 million as joint co-financing with the AIIB. The balance of \$64.17 million will be provided through government financing (Table 4).

11. The AIIB loan's terms and conditions¹² will be described in a loan agreement between AIIB and the government.

Table 4: Project Financing Plan

Source	Amount (\$million)	Share of Total (%)
Asian Development Bank		
Ordinary capital resources (APVAX RRC loan)	400.00	52.34
Asian Infrastructure Investment Bank	300.00	39.26
Government	64.17	8.40
Total	764.17	100.00

APVAX = Asia Pacific Vaccine Access Facility, RRC = rapid response component.
Source: Asian Development Bank estimates.

12. ADB and AIIB will finance a combined 91.60% of the total project cost, which will cover the procurement of COVID-19 vaccines and physical and price contingencies.

13. The government will fund 8.40% of the total project cost, to cover loan interest and charges of \$12.10 million and \$52.07 million for other vaccine costs including injection devices, personal protective equipment, vaccine transportation, storage, waste disposal and surveillance, and taxes and duties.

A. Cost Estimates Preparation and Revisions

14. The cost estimates were prepared in January 2021. The cost estimates were discussed and agreed with DOH during project processing. The determination of the volume of vaccines from prospective suppliers along with the associated costs of storing, distributing, administering and monitoring vaccine rollout were derived from the Governments detailed vaccine rollout plans with DOH. The vaccine unit costs are provided as indicative rates based on early discussions the government has had with prospective suppliers. During project implementation, the responsibility for updating the cost estimates will be with DOH.

15. The government is contemplating a tax exemption for all COVID-19 vaccines.¹³ Local Value Added Taxes (VAT) are calculated at 12% on all other costs and included in the base figures and will be borne by the Government. government.¹⁴

16. The cost estimates for vaccine are fluid and may change as the market prices of COVID-19 vaccines and other costs continue to be volatile and uncertain.

B. Key Assumptions

17. The following key assumptions underpin the cost estimates and financing plan:

¹² Asian Infrastructure Investment Bank. https://www.aiib.org/en/treasury/_common/_download/Sovereign-Backed-Loan-Pricing-Basics-and-Major-Terms.pdf

¹³ If tax exemption is not granted, taxes and duties for vaccine will be paid by the Government.

¹⁴ Government will pay tax in cash in case the regulation would not pass in time.

- (i) exchange rate: Php 48.00 = \$1.00 (as of 18 January 2021);
- (ii) physical contingencies are computed at 4% for COVID-19 vaccines;
- (iii) price contingencies based on expected cumulative inflation over the implementation period are as follows:

Table 5: Escalation Rates for Price Contingency Calculation

Item	2020	2021	2022	2023	2024	Average
Foreign rate of price inflation (USD)	(0.5)%	1.6%	1.7%	1.7%	1.8%	1.3%
Domestic rate of price inflation (PHP)	2.4%	2.6%	3.0%	3.0%	3.0%	2.8%

Source: Asian Development Bank.

- (iv) In-kind contributions were calculated based on estimates of the non-vaccine related costs for injection devices, operations, disposal, and other related costs as reflected in the Philippines National COVID-19 Vaccination Deployment Plan.

C. Detailed Cost Estimates by Expenditure Category

Table 6: Detailed Cost Estimates by Expenditure Category

		(in \$ million)			
		Foreign Exchange	Local Currency	Total	% of Total Base Cost
A. Investment Costs					
1.	Advance payment to supply contract for Eligible Vaccines by ADB	150.00	0.00	150.00	19.63
2.	Supply contract for Eligible Vaccines by ADB	228.57	0.00	228.57	29.91
3.	Advance payment to supply contract for Eligible Vaccines by AIIB	0.00	0.00	0.00	0.00
4.	Supply contract for Eligible Vaccines by AIIB	283.93	0.00	283.93	37.16
	Sub-total (A)	662.50	0.00	662.50	86.70
B. Recurrent Costs					
5.	Other Vaccine-Related Costs	0.00	52.05	52.05	6.81
	Sub-total (B)	0.00	52.05	52.05	6.81
	Total Base Cost	662.50	52.05	714.55	93.51
C. Contingencies					
6.	Physical Contingencies	29.41	0.00	29.41	3.85
7.	Price Contingencies	8.09	0.00	8.09	1.06
	Sub-total (C)	37.50	0.00	37.50	4.91
D. Loan Financing Charges					
8.	Interest during implementation	0.00	12.12	12.12	1.58
	Sub-total (D)	0.00	12.12	12.12	1.58
	Total Project Cost (A+B+C+D)	700.00	64.17	764.17	100.00

ADB = Asian Development Bank, AIIB = Asian Infrastructure Investment Bank.

Notes: Numbers may not sum precisely because of rounding.

1. The project costs are inclusive of taxes and duties (\$5.58 million) for recurrent cost, which will be financed by the government. Such amount does not represent an excessive share of the project cost. The government will finance all taxes and duties for Covid-19 vaccine through tax exemption and its estimated amount is not included in the project cost.
2. Other vaccine-related costs include injection devices, personal protective equipment, vaccine transportation, storage, waste disposal, and surveillance.
3. Government contributions amounting to \$64.17 million are in cash and in kind to cover all non-procurement costs associated with COVID-19 vaccine (\$52.05 million) and loan interest (\$12.12 million). The Government will also provide in kind contributions of \$35 million to cover personnel and facility costs to support the vaccine rollout.

Source: Asian Development Bank estimates.

D. Allocation and Withdrawal of Loan Proceeds**Table 7.1: Allocation and Withdrawal of ADB Loan Proceeds**

No.	Item	Total Amount Allocated for ADB Financing (\$)	Percentage and basis for withdrawal from loan account
1	Advance payment to supply contract for Eligible Vaccines**	150,000,000	100% of total expenditure claimed*
2	Supply contract for Eligible Vaccines**	250,000,000	100% of total expenditure claimed*
	Total	400,000,000	

ADB = Asian Development Bank.

*Exclusive of taxes and duties imposed in the territory of the Borrower.

**Subject to the condition for withdrawal described in paragraph 8 of Schedule 3.

Source: Asian Development Bank estimates

Table 7.2: Allocation and Withdrawal of AIIB Loan Proceeds

No.	Item	Total Amount Allocated for AIIB Financing (\$)	Percentage and basis for withdrawal from loan account
1	Advance payment to supply contract for Eligible Vaccines**	TBD	100% of total expenditure claimed*
2	Supply contract for Eligible Vaccines**	300,000,000	100% of total expenditure claimed*
	Total	300,000,000	

AIIB = Asian Infrastructure Investment Bank, TBD = to be determined.

*Exclusive of taxes and duties imposed in the territory of the Borrower.

**Subject to the condition for withdrawal described in the AIIB loan agreement.

Source: Asian Infrastructure Investment Bank estimates

E. Detailed Cost Estimates by Financier

**Table 8: Detailed Cost Estimates by Financier
(\$ million)**

	ADB		AIIB		GOP**		Total Cost	
	Amount	% of Cost Category	Amount	% of Cost Category	Amount	% of Cost Category	Amount	Taxes and Duties*
A. Investment Costs								
1. Advance payment to supply contract for Eligible Vaccines by ADB	150.00	100.00	0.00	0.00	0.00	0.00	150.00	0.00
2. Supply Contract for Eligible Vaccines by ADB	228.57	100.00	0.00	0.00	0.00	0.00	228.57	0.00
3. Advance payment to supply contract for Eligible Vaccines by AIIB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
4. Supply Contract for Eligible Vaccines by AIIB	0.00	0.00	283.93	100.00	0.00	0.00	283.93	0.00
Sub-total (A)	378.57	57.14	283.93	42.86	0.00	0.00	662.50	0.00
B. Recurrent Costs								
1. Other Vaccine-Related Costs***	0.00	0.00	0.00	0.00	52.05	100.00	46.47	5.58
Sub-total (B)	0.00	0.00	0.00	0.00	52.05	100.00	46.47	5.58
C. Contingencies								
1. Physical Contingencies	16.81	57.14	12.60	42.86	0.00	0.00	29.41	0.00
2. Price Contingencies	4.62	57.14	3.47	42.86	0.00	0.00	8.09	0.00
Sub-total (C)	21.43	57.14	16.07	42.86	0.00	0.00	37.50	0.00
D. Loan Financing Charges								
1. Interest during implementation	0.00	0.00	0.00	0.00	12.12	100.00	12.12	0.00
Sub-total (D)	0.00	0.00	0.00	0.00	12.12	100.00	12.12	0.00
Total Project Cost (A+B+C+D)	400.00	52.73	300.00	39.26	64.17	8.40	758.59	5.58

ADB = Asian Development Bank, AIIB = Asian Infrastructure Investment Bank, GOP = Government of the Philippines.

*The project costs are inclusive of taxes and duties \$5.58 for recurrent cost, which will be financed by the government. Such amount does not represent an excessive share of the project cost. The government will finance all taxes and duties for COVID-19 vaccine through tax exemption and its estimated amount is not included in the project cost.

**Government contributions of \$64.17 million are in cash to cover all non-procurement costs associated with the COVID-19 vaccine (\$52.05 million) and loan interest (\$12.12 million). The Government will also provide in-kind contributions of \$35 million to cover personnel and facility costs to support the vaccine rollout.

^a Other vaccine-related costs include injection devices, personal protective equipment, vaccine transportation, storage, waste disposal, and surveillance.

Source: Asian Development Bank estimates.

F. Detailed Cost Estimates by Outputs

**Table 9: Detailed Cost Estimates by Output
(\$ million)**

Item	Output 1		Total
	Amount	% of Category	
A. Investment Costs			
1. Advance payment to supply contract for Eligible Vaccines by ADB	150.00	100.00	150.00
2. Supply contract for Eligible Vaccines by ADB	228.57	100.00	228.57
3. Advance payment to supply contract for Eligible Vaccines by AIIB	0.00	0.00	0.00
4. Supply contract for Eligible Vaccines by AIIB	283.93	100.00	283.93
Sub-total (A)	662.50	100.00	662.50
B. Recurrent Costs			
1. Other Vaccine-Related Costs	52.05	100.00	52.05
Sub-total (B)	52.05	100.00	52.05
C. Contingencies			
1. Physical Contingencies	29.41	100.00	29.41
2. Price Contingencies	8.09	100.00	8.09
Sub-total (C)	37.50	100.00	37.50
D. Loan Financing Charges			
1. Interest during implementation	12.12	100.00	12.12
Sub-total (D)	12.12	100.00	12.12
Total Project Cost (A+B+C+D)	764.17	100.00	764.17

ADB = Asian Development Bank, AIIB = Asian Infrastructure Investment Bank.

Notes:

1. In January 2021 prices.
2. Physical contingencies computed at 4% for COVID-19 vaccines.
3. Domestic price contingencies are based on cost escalation factors for Philippines at 2.9% per annum.
4. International price contingencies are based on US\$ cost escalation factors at 1.7% per annum.
5. Other vaccine-related costs include injection devices, personal protective equipment, vaccine transportation, storage, waste disposal, and surveillance.
6. Interest during implementation is computed at 1.128% with a commitment fee of 0.15% charged on the Asian Development Bank rapid response component loan.

Source: Asian Development Bank estimates.

G. Detailed Cost Estimates by Year

Table 10: Detailed Cost Estimates by Year
(\$ million)

	Total Cost	2021	2022	2023	2024
A. Investment Costs					
1. Advance payment to supply contract for Eligible Vaccines by ADB	150.00	16.96	47.56	85.49	0.00
2. Supply contract for Eligible Vaccines by ADB	228.57	17.90	71.34	139.33	0.00
3. Advance payment to supply contract for Eligible Vaccines by AIIB	0.00	0.00	0.00	0.00	0.00
4. Supply contract for Eligible Vaccines by AIIB	283.93	26.15	89.17	168.61	0.00
Sub-total (A)	662.50	61.01	208.07	393.42	0.00
B. Recurrent Costs					
1. Other Vaccine-Related Costs ^a	52.05	4.79	16.35	30.91	0.00
Sub-total (B)	52.05	4.79	16.35	30.91	0.00
C. Contingencies					
1. Physical Contingencies	29.41	2.71	9.24	17.47	0.00
2. Price Contingencies	8.09	0.26	1.95	5.88	0.00
Sub-total (C)	37.50	2.97	11.19	23.24	0.00
D. Loan Financing Charges					
1. Interest during implementation	12.12	0.64	2.73	6.79	1.97
Sub-total (D)	12.12	0.64	2.73	6.79	1.97
Total Project Cost (A+B+C+D)	764.17	69.41	238.33	454.46	1.97
% Total Project Cost	100.00	9.08	31.19	59.47	0.26

ADB = Asian Development Bank, AIIB = Asian Infrastructure Investment Bank.

^a Other vaccine-related costs include injection devices, personal protective equipment, vaccine transportation, storage, waste disposal, and surveillance.

Source: Asian Development Bank estimates.

H. Contract and Disbursement S-Curve

Figure 2. Contract Award and Disbursement S-Curve

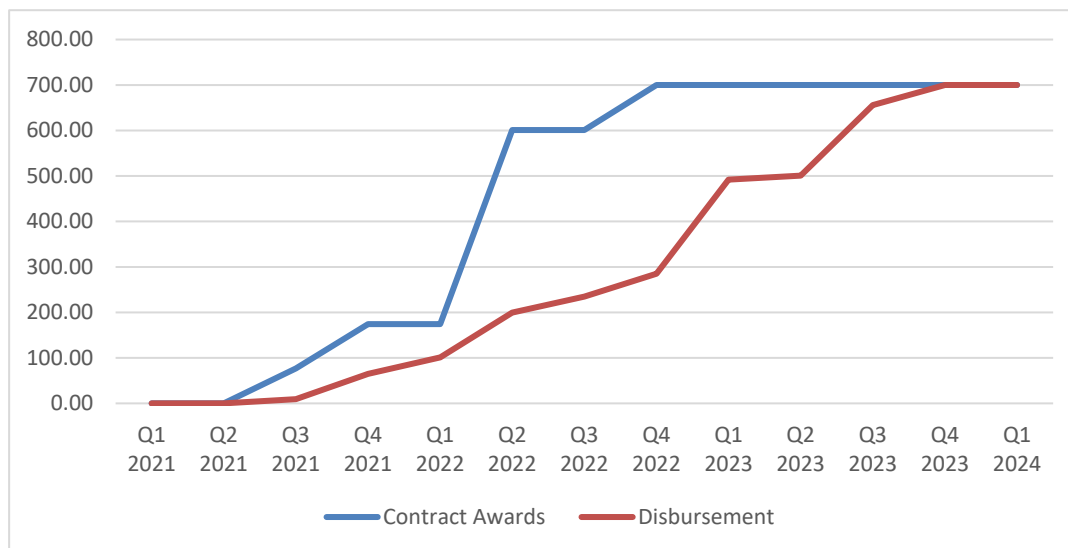


Figure 3. Projected Contract Awards and Disbursements for ADB

Year	Contract Awards (in \$ million)					Disbursements (in \$ million)				
	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total
2021	0.00	0.00	43.83	55.71	99.55	0.00	0.00	5.33	31.63	36.95
2022	0.00	243.89	0.00	56.56	300.45	20.87	56.19	20.13	28.84	126.03
2023	0.00	0.00	0.00	0.00	0.00	118.08	5.13	88.57	25.23	237.02
2024	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Contract Awards					400.00	Total Disbursements				400.00

Q =quarter

Source: Asian Development Bank estimates.

Figure 4. Projected Contract Awards and Disbursements for AIIB

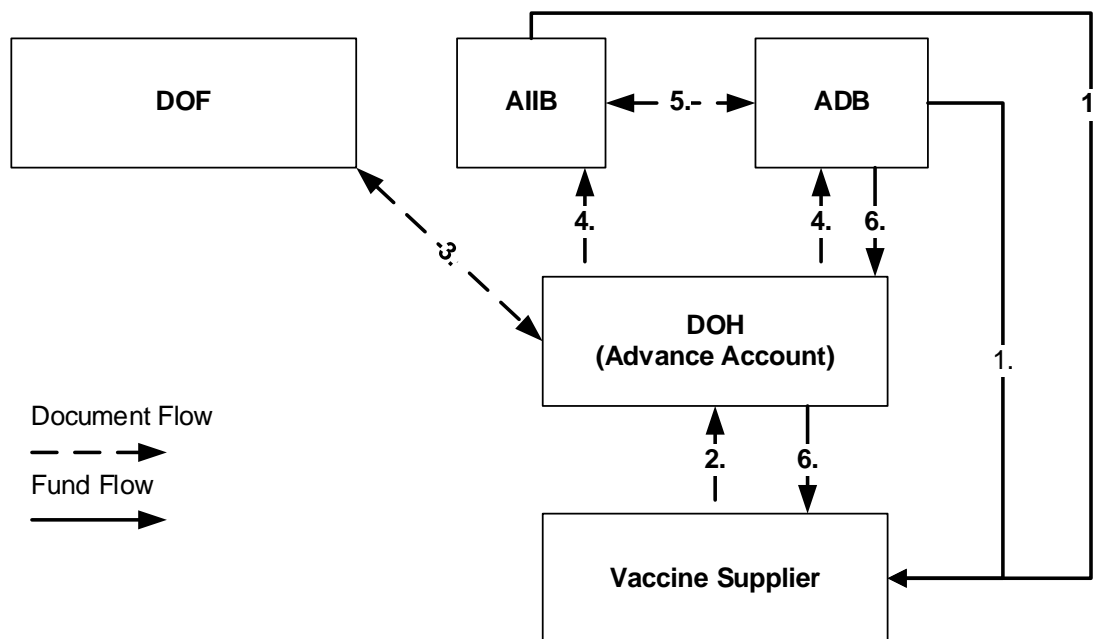
Year	Contract Awards (in \$ million)					Disbursements (in \$ million)				
	Q1	Q2	Q3	Q4	Total	Q1	Q2	Q3	Q4	Total
2021	0.00	0.00	32.88	41.79	74.66	0.00	0.00	3.99	23.72	27.72
2022	0.00	182.92	0.00	42.42	225.34	15.65	42.15	15.09	21.63	94.52
2023	0.00	0.00	0.00	0.00	0.00	88.56	3.85	66.43	18.93	177.76
2024	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Total Contract Awards					300.00	Total Disbursements				300.00

Q =quarter

Source: Asian Development Bank estimates.

I. Fund Flow Diagram

Figure 3: Fund flow Diagram



ADB = Asian Development Bank, AIIB = Asian Infrastructure Investment Bank, DOF = Department of Finance, DOH = Department of Health

1. Direct payments to suppliers for vaccines from ADB and AIIB funds.
2. Documents from vaccine suppliers requesting contractual payments.
3. Withdrawal application endorsed by DOF and submitted by DOH.
4. Withdrawal application submitted to ADB and AIIB.
5. ADB notify AIIB that withdrawal application is in order. AIIB notify ADB when payment is released.
6. Funds Flow through advance account should one be established at DOH.

V. FINANCIAL MANAGEMENT

A. Financial Management Assessment

18. The financial due diligence was conducted in January 2021 in accordance with the ADB Guidelines for the Financial Management and Analysis of Projects¹⁵ and its Financial Due Diligence: A Methodology Note.¹⁶ The financial management (FM) assessment evaluated the capacity of DOH, including funds-flow, staffing, accounting, and financial reporting, financial information systems, and internal and external auditing arrangements. As the project is focused on ADB's rapid response to the Government of the Philippines for the procurement of COVID-19 vaccines, the FM assessment emphasized the internal control around supply chain management and specifically on inventory management systems, cold chain storage, vaccine security, deployment, and information technology systems availability and data management.

19. The pre-mitigation risk is assessed as high due to the scale and complexity of the project. The Government of the Philippines and the DOH have agreed on an FM Action Plan to address deficiencies in the deployment plan to mitigate the risks (Table 11).

Table 11: Financial Management Action Plan

Mitigating Action	Responsible Party	Timeframe
1. Identification and assignment DOH focal persons to the project. Detailed stakeholder engagement plans with delegated responsibilities clearly outlined.	DOH	Q1 2021
2. Establishment and roll out of financial management arrangements through orientations, trainings, or workshops.	DOH, ADB	Within 6 months from effectiveness
3. Quarterly monitoring of project including physical and financial progress.	DOH	Q2–Q4 2021 Q1–Q4 2022 Q1–Q4 2023
4. Updating of inventory management procedures with cold storage handling protocols and training for key stakeholders.	DOH	Q2 2021
5. Engagement of external experts to support project delivery where necessary and appropriate.	DOH/ADB	Q2 2021
6. Enhanced due diligence on private sector capacity prior to engaging for project critical roles in transportation, storage deployment, and providing IT support.	DOH	Q2 2021
7. Development of contingency plans if GOP funding is not available, or when needed to support logistics and other vaccine deployment costs.	DOH/DBM/DOF/ADB	Q1 2021
8. Updating of vaccine deployment plans to clearly identify responsibility and accountability for vaccines between regional warehouses and local government facilities/sites for administering vaccines.	DOH/LGUs	Q1-Q2 2021

¹⁵ ADB. 2005. *Financial Management and Analysis of Projects*. Manila

¹⁶ ADB. 2009. *Financial Due Diligence, A Methodology Note*. Manila

Mitigating Action	Responsible Party	Timeframe
9. Establishment of asset registers for all cold storage facilities.	DOH/ADB	Q1–Q2 2021
10. Completion of the assessment of LGUs capacity to oversee vaccine deployment at subnational level prior to vaccine distribution. This should include a review of facilities, management, technical, and administrative skills available at the LGUs.	DOH	Q2 2021
11. Coordination on annual audit arrangements to ensure timely submission of acceptable audit reports in accordance with ADB standards.	DOH/COA	Q1 2021
12. Performance audits on project activities.	DOH/COA	Annual
13. Routine inventory management audits of vaccine storage facilities and vaccine distribution sites.	COA/IAS	Annual

ADB = Asian Development Bank, COA = Commission on Audit, DBM = Department of Budget and Management, DOF = Department of Finance, DOH = Department of Health, GOP = Government of the Philippines, IAS = Internal Affairs Service, IT = information technology, LGU = local government unit, Q - quarter.

B. Disbursement

1. Disbursement Arrangements for ADB and AIIB Funds

20. The loan proceeds of ADB and AIIB loans will be disbursed in accordance with ADB's *Loan Disbursement Handbook* (2017, as amended from time to time),¹⁷ and detailed arrangements agreed upon between the Borrower, ADB, and AIIB. The Borrower shall submit to ADB the original withdrawal applications covering the finances of ADB. ADB will review submitted withdrawal applications and pay its share of financing.

21. Online training for project staff on disbursement policies and procedures is available.¹⁸ Project staff are encouraged to avail of this training to help ensure efficient disbursement and fiduciary control.

22. Direct payment will generally be used for paying suppliers. If necessary, DOH will avail of advance financing for the procurement of vaccines which will be disbursed following advance fund procedures. DOH will be responsible for (i) collecting and retaining supporting documents; and (ii) preparing and sending withdrawal applications to ADB.

23. **Advance fund procedure.** A separate advance account may be established and maintained by DOH under the RRC. A financial management assessment (FMA) of DOH capacity for managing the advance account must be performed prior to funding the advance account. The results of the FMA need to be informed prior to process the withdrawal application. If supported by the FMA, the advance account will be established in a commercial bank. The currency of the advance account will be in the United States dollar. The advance account is to be used

¹⁷ The handbook is available electronically from the ADB website (<http://www.adb.org/documents/loan-disbursement-handbook>).

¹⁸ Disbursement eLearning. http://wpqr4.adb.org/disbursement_elearning

exclusively for ADB's share of eligible expenditures. DOH will administer the advance account and will be responsible for proper use advance account funds.

24. Under the RRC, the total outstanding advance to the advance account should not exceed the estimate of ADB's share of expenditures to be paid through the advance account for the forthcoming 6 months, or 50% of the total RRC financing amount, whichever is lower.¹⁹ DOH may request for initial and additional advances to the advance account based on the estimated expenditures to be financed through the forthcoming 6 months. Supporting documents should be submitted to ADB or retained by the Borrower in accordance with ADB's Loan Disbursement Handbook (2017, as amended from time to time) when liquidating or replenishing the advance account.

25. **Statement of Expenditure procedures.** It will not be used for this project.

26. Before the submission of the first withdrawal application, the Borrower should submit to ADB sufficient evidence of the authority of the person(s) in DOH who will sign the withdrawal application on behalf of the government, together with the authenticated specimen signatures of each authorized person. The minimum value per withdrawal application is stipulated in the Loan Disbursement Handbook (2017, as amended from time to time). The Borrower should ensure sufficient category and contract balances before requesting disbursements. The use of ADB's Client Portal for Disbursements²⁰ system is encouraged for submission of withdrawal applications to ADB.

27. **Disbursement of AIIB Financing.** The Borrower shall submit the original withdrawal application and copies of supporting documents to ADB, and concurrently one identical copy of such withdrawal applications and copies of supporting documents to AIIB. ADB will review each WA and advise AIIB to make the necessary payment, if any. AIIB shall process the application with ADB after receipt of the advice from ADB on the result of the review by ADB. AIIB will promptly inform ADB once payment has been made. In case AIIB rejects the payment requested in the withdrawal application, it shall promptly inform ADB and the Borrower in writing of its decision and the basis of such decision. ADB shall not be held liable for any decision made by AIIB with respect to payments requested in withdrawal applications or any delay in disbursement outside of ADB's control.

28. **Disbursement conditions.**

No withdrawals shall be made from the loan account for (i) financing an advance payment for a contract to supply eligible vaccines until ADB has received a letter from the government confirming (a) which COVID-19 vaccine(s) have been selected to be procured using the proceeds of the loan; and (b) which of the eligibility criteria in the definition of eligible vaccine has been satisfied in respect of the COVID-19 vaccine(s) to be procured, and based on the information provided in the aforementioned letter, ADB has notified the government that the COVID-19 vaccine to be procured meets ADB's eligibility criteria; and (ii) financing a contract to supply eligible vaccines until ADB has received a letter from the government confirming that in addition to (i)(a) and (i)(b) above, the eligible vaccines have received all necessary authorizations of the government, and have been authorized by the FDA of the Philippines and any other relevant regulatory authorities for distribution and administration within the territory of the country; and

¹⁹ Per ADB's APVAX guidance note, the combined outstanding balance of advance financing and the percentage approved for retroactive financing should not, at any time, exceed 60% of the loan amount.

²⁰ The Client Portal for Disbursements facilitates online submission of withdrawal applications to ADB, resulting in faster disbursement. The forms to be completed by the Borrower are available online. ADB. 2016. [Guide to the Client Portal Online](#). Manila

based on the information provided in the aforementioned letter, ADB has notified the government that the COVID-19 vaccines to be procured are designated as eligible vaccines.

2. Disbursement Arrangements for Counterpart Fund

29. The Department of Finance (DOF) and DOH will be responsible for the relevant disbursement and liquidation procedures for government funds and will be responsible for (i) preparing disbursement projections, and (ii) requesting budgetary allocations for counterpart funds. The government will finance recurrent costs including the corresponding taxes (\$5.58 million). It will also finance the taxes and duties for the vaccines through tax exemption.

C. Accounting

30. DOH will maintain, or cause to be maintained, separate books and records by funding source for all expenditures incurred on the project following accrual-based principles of accounting in accordance with the Philippine Public Sector Accounting Standards. DOH will prepare project financial statements in accordance with the government's accounting laws and regulations as prescribed by the Commission on Audit, which may issue updates and guidelines from time to time.

31. DOH shall prepare the following financial statements: (i) Statement of Financial Position; (ii) Statement of Financial Performance; (iii) Statement of Cashflows; (iv) Notes to Financial Statements; (v) Statement of Budget vs. Actual; (vi) Statement of Withdrawals; and (vii) Advance Account Reconciliation Statement. A report of the government's in-kind contribution should be included in the financial statements.

D. Auditing and Public Disclosure

32. DOH will cause the detailed project financial statements to be audited in accordance with International Standards for Supreme Audit Institutions, by an independent auditor acceptable to ADB. The audited project financial statements together with the auditor's opinion will be presented in the English language to ADB within 6 months from the end of the fiscal year by the DOH.

33. The audit report for the project financial statements will include a management letter and auditor's opinions, which cover (i) whether the project financial statements present an accurate and fair view or are presented fairly, in all material respects, in accordance with the applicable financial reporting standards; (ii) whether the proceeds of the loan were used only for the purpose(s) of the project; and (iii) whether the borrower or executing agency was in compliance with the financial covenants contained in the legal agreements (where applicable).

34. Compliance with financial reporting and auditing requirements will be monitored by review missions and during normal program supervision, and followed up regularly with all concerned, including the external auditor.

35. DOH has been made aware of ADB's approach to delayed submission, and the requirements for satisfactory and acceptable quality of the audited project financial statements.²¹

²¹ ADB's approach and procedures regarding delayed submission of audited project financial statements:

(i) When audited project financial statements are not received by the due date, ADB will write to the executing agency advising that (a) the audit documents are overdue; and (b) if they are not received within the next 6

ADB reserves the right to require a change in the auditor (in a manner consistent with the constitution of the borrower), or for additional support to be provided to the auditor, if the audits required are not conducted in a manner satisfactory to ADB, or if the audits are substantially delayed. ADB reserves the right to verify the project's financial accounts to confirm that the share of ADB's financing is used in accordance with ADB's policies and procedures.

36. Public disclosure of the audited project financial statements, including the auditor's opinion on the project financial statements, will be guided by ADB's Public Communications Policy 2011.²² After the review, ADB will disclose the audited project financial statements and the opinion of the auditors on the project financial statements no later than 14 days of ADB's confirmation of their acceptability by posting them on ADB's website. The management letter, additional auditor's opinions, and audited entity financial statements will not be disclosed.²³

VI. PROCUREMENT AND CONSULTING SERVICES

A. Advance Contracting and Retroactive Financing

37. All advance contracting and retroactive financing will be undertaken in conformity with ADB's Procurement Policy (2017, as amended from time to time) and the Procurement Regulations for ADB Borrowers: Goods, Works, Nonconsulting and Consulting Services (2017, as amended from time to time).²⁴

38. **Advance contracting.** Advance contracting is expected for the procurement of COVID-19 vaccines.

39. **Retroactive financing.** The government may request Withdrawals from the loan account may made for eligible expenditures in relation to vaccine procurement incurred before loan effectiveness but not more than 12 months before signing of the loan agreement, equivalent to a maximum of 30% of the loan amount. The combined outstanding balance of advance financing and the percentage approved for retroactive financing should not, at any time, exceed 60% of the loan amount, and the advance financing and retroactive financing will not exceed their respective ceilings. Any advance financing and retroactive financing will be subject to the vaccine eligibility criteria and other requirements under the Asia Pacific Vaccine Access Facility being fully met.

40. The DOH has been advised that the approval of advance contracting and retroactive financing does not commit ADB to finance advance payment to vaccine developers and/or any vaccine-related procurement costs.

months, requests for new contract awards and disbursement such as new replenishment of advance accounts, processing of new reimbursement, and issuance of new commitment letters will not be processed.

(ii) When audited project financial statements are not received within 6 months after the due date, ADB will withhold processing of requests for new contract awards and disbursement such as new replenishment of advance accounts, processing of new reimbursement, and issuance of new commitment letters. ADB will (a) inform the executing agency of ADB's actions; and (b) advise that the loan may be suspended if the audit documents are not received within the next 6 months.

(iii) When audited project financial statements are not received within 12 months after the due date, ADB may suspend the loan.

²² Public Communications Policy: <http://www.adb.org/documents/pcp-2011?ref=site/disclosure/publications>

²³ This type of information would generally fall under public communications policy exceptions to disclosure. ADB. 2011. *Public Communications Policy*. Paragraph 97(iv) and/or 97(v).

²⁴ ADB. 2017. *Procurement Regulations for ADB Borrowers. Goods, Works, Nonconsulting and Consulting Services*. Manila.

B. Procurement of Goods, Works, and Consulting Services

41. All procurement of goods, works, and services will be undertaken in a manner consistent with the simplified and expedient procedures permitted under the ADB's Procurement Policy (2017, as amended from time to time) and the Procurement Regulations for ADB Borrowers: Goods, Works, Nonconsulting and Consulting Services (2017, as amended from time to time).

42. Certain procurement packages under the project will be jointly cofinanced with AIIB; ADB will be the lead cofinancier and its procurement policy will apply to all procurement. Bidding documents for cofinanced packages will reflect i) that ADB and AIIB are jointly financing the project; and that both ADB and AIIB may inspect and audit the procurement process undertaken and subsequent contracts entered into by the borrower. These arrangements form part of a cofinancing framework agreement signed by ADB and AIIB. Vaccine suppliers will issue separate invoices to ADB and AIIB for each WA request except for those contracts financed only by ADB prior to the effectiveness of AIIB loan.

43. The procurement of vaccines against COVID-19 will be undertaken through the RRC, in conformity with its vaccine eligibility criteria. The procurement of vaccines and related services will be done by direct contracting method.

44. Procurement under the RRC is restricted to the purchase of vaccines and associated international logistics costs necessary for their delivery to the Philippines. The government may procure eligible vaccines through two different avenues: (i) the COVAX facility Advance Market Commitment mechanism and (ii) procurement of bilaterally negotiated contracts with vaccine manufacturers.

45. The United Nations Children's Fund (UNICEF) is the procurement coordinator for COVAX. Procurement of additional COVAX doses will require the government to enter into a supply agreement with UNICEF. This agreement will include the procurement of vaccines and related services, including transport of the vaccines from the vaccine origin to a designated entry point stated by the government. For bilateral deals, the government will enter into direct negotiations with vaccine manufacturers. All vaccine agreements shall be subject to prior review to confirm that the terms are acceptable to ADB.

46. Following ADB's APVAX policy, ADB's member country procurement eligibility requirements are waived.

47. Value for money in procurement will be achieved through (i) selecting candidate vaccine types that are best suited to the domestic logistics supply chain and distribution mechanisms; (ii) identifying vaccines that will efficiently meet the project disbursement conditions; (iii) engaging with COVAX and manufacturers that have advantageous vaccine availability and delivery timelines, and (iv) entering into agreements on terms and conditions that are reasonable, noting the currently constrained global market for vaccines.

48. The initial procurement plan is presented in Appendix 2. The information in the procurement plan is indicative and further details will be provided once the vaccines to be procured under the loan is confirmed.

VII. SAFEGUARDS

49. **Prohibited investment activities.** Pursuant to ADB's Safeguard Policy Statement (2009), ADB funds may not be applied to the activities described on the ADB Prohibited Investment Activities List set forth at Appendix 5 of the Safeguard Policy Statement (2009).

50. In compliance with ADB's Safeguard Policy Statement (2009), the project's safeguard categories are as follows.²⁵

51. **Environment (category C).** The project will not entail civil works or other activities with potential for significant adverse impact on the environment. The distribution and use of COVID-19 vaccines will result in a temporary increase in immunization waste generation at the point of use. The National Deployment and Vaccination Plan for COVID-19 Vaccines defines immunization waste management arrangements and responsibilities and includes a training program on immunization waste for local health care facilities. Immunization waste will be managed in compliance with the DOH Health Care Waste Management Manual, DOH Interim Guidelines on the Management of Health Care Wastes Generation from COVID-19 Vaccination, and the requirements of the Department of Environment and Natural Resources (DENR) based on Republic Act 6969 and its implementing rules and regulations. Movement of immunization waste offsite will comply with DENR's licensing, reporting and monitoring requirements through the existing Hazardous Waste Manifest system.

52. **Involuntary resettlement (category C).** The project will not require any land acquisition or lead to any resettlement impacts.

53. **Indigenous peoples (category C).** The project is not expected to have any direct or indirect impacts on the dignity, human rights, livelihood systems, or culture of indigenous peoples, or the territories or natural or cultural resources that indigenous peoples own, use, occupy, or claim as an ancestral domain or asset.

VIII. GENDER AND SOCIAL DIMENSIONS

54. COVID-19 has exacerbated inequalities between women and men in terms of livelihoods and economic empowerment, personal safety and security, and responsibility for household care roles. More women (77%) are employed in crisis-affected services (tourism, accommodation, food services, and other service-based livelihoods) than men (47%).²⁶ Under COVID-19 situation, intimate partner violence rates are very likely to have increased, in line with global trends reported – the United Nations Economic and Social Commission for Asia and the Pacific reported 30-50% increase in women calling dedicated GBV hotlines during 2020.²⁷ COVID-19 also affects mental health: reported cases of anxiety and depression have increased,²⁸ and women suffer particularly because of their heightened burden of care and risk management.

²⁵ ADB. [Safeguard Categories](#).

²⁶ Philippine Statistics Authority. 2020. [Labor Force 2019 Annual Estimates](#). 10 August 2020.

²⁷ UNESCAP. 2020. [The Covid-19 Pandemic and Violence Against Women in Asia and the Pacific](#). Policy paper.

²⁸ M. Tee et al. 2020. [Psychological impact of COVID-19 pandemic in the Philippines](#). *Journal of Affective Disorders*. 277. pp. 379–391.

55. While the priority population groups for vaccination are dominated by women, many marginalized women, WEDC,²⁹ and women in geographically isolated and disadvantaged areas (GIDA), face significant barriers to accessing COVID-19 health support including vaccines. Barriers affecting health-seeking behavior by marginalized women and WEDC include: (i) limited time to spend commuting to and waiting in long lines at public health facilities that are stretched beyond capacity; (ii) mobility constraints including cultural norms governing freedom of movement; (iii) limited access to public transportation to reach health facilities; and (iv) the costs associated with the commute and time away from productive and household responsibilities. DOH has expressed concerns that their definition of ‘social demographic groups at higher risk’ may not be sufficiently comprehensive to ensure the last mile outreach between LGU primary healthcare facilities and vaccine delivery to these women. The DOH acknowledges the essential role of information, education, and communication (IEC) campaigns; risk communication; and community engagement to ensure effective vaccine access and uptake.

56. Unconscious and conscious gender-based discrimination and bias influence both the health-seeking behavior of marginalized women and WEDC, as well as the willingness of healthcare providers to deliver services to them.³⁰ Further, these women often possess low literacy skills, head low-income households and experience significant time poverty. Additional barriers affecting health-seeking behavior by marginalized women and WEDC in major cities and GIDA include: (i) limited time to spend commuting to and waiting in long lines at public health facilities that are stretched beyond capacity; (ii) mobility constraints including cultural norms governing freedom of movement and/or the need to seek permission from others prior to accessing services; (iii) limited access to public transportation to reach health facilities; (iv) the costs associated with the commute; (v) time away from productive and household responsibilities; and (v) challenges balancing the care for others over their own care needs. While the Government of the Philippines has committed to the equitable delivery of vaccines in alignment with the WHO Strategic Advisory Group of Experts on Immunization (SAGE) principles, the DOH has expressed concerns that their definition of ‘social demographic groups at higher risk’ may not be sufficiently comprehensive to ensure the last mile outreach between LGU primary healthcare facilities and vaccine delivery to the women and other GIDA groups identified herein. Through the National Strategic Policy Framework for COVID-19 Vaccine Deployment and Immunization, the DOH acknowledges the essential role of IEC campaigns; risk communication; and community engagement plans to ensure effective vaccine access and uptake. In response to these issues, the HEAL-2 APVAX will support the DOH on communication for vaccine safety and efficacy through alignment with the WHO SAGE vaccine hesitancy framework.³¹

57. The project is categorized as effective gender mainstreaming. Through ongoing technical assistance,³² the project will make sure to minimize the last-mile service delivery constraints for marginalized women and WEDC, so as to maximize vaccine uptake and immunization. HEAL 2 will help DOH develop, approve, and disseminate a gender- and socially-inclusive protocol to reduce the barriers that now hamper both the willingness and ability of marginalized women and

²⁹ United Nations Population Fund and UP Population Institute. 2020. [Significant rise in maternal deaths and unintended pregnancies feared because of COVID-19, UNFPA and UPPI study shows](#). News release. 14 August.

³⁰ [International Journal of Public Health. 2016 Nov; 61\(8\): 945–957](#). A human rights-focused HIV intervention for sex workers in Metro Manila, Philippines: evaluation of effects in a quantitative pilot study. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5226624/>

³¹ WHO. *Strategies for Addressing Vaccine Hesitancy – A Systematic Review: WHO SAGE working group dealing with vaccine hesitancy*.

³² ADB. 2020. *Technical Assistance for Regional Support to Address the Outbreak of Coronavirus Disease 2019 and Potential Outbreaks of Other Communicable Diseases*; ADB. 2016. *Technical Assistance to the Philippines for Strengthening Social Protection, Education, and Health Reforms*; ADB. 2019. *Support for Human and Social Development in Southeast Asia*. Manila.

WEDC to access COVID-19 health services and vaccines, and to improve the capacity of local government unit (LGU)s' primary health care facilities to meet the specific needs of these women for effective vaccine delivery. The protocol will be developed in collaboration with multiple DOH bureaus and departments, Department of Social Welfare and Development (DSWD), and the Department of Interior and Local Government, and be resourced via LGU gender and development program budgets. In addition, HEAL 2 will support DOH and the departments in (i) the analysis of sex-disaggregated data through the Vaccine Information Management System; (ii) specific communication and messaging to marginalized women and WEDC in major cities or geographically isolated and disadvantaged areas; and (iii) online consultations and outreach, (to be led by DOH and in collaboration with DSWD and Department of Interior and Local Government), especially to marginalized and WEDC, to monitor their awareness of vaccine safety and gather feedback on issues that curtail access to health services. A gender consultant will be hired to support DOH's gender activities (Table 12).

Table 12: Gender Action Plan

Gender Objectives	Activities / Targets	Responsibilities	Timeframe
Outcome: Priority populations safely vaccinated against COVID-19			
Human capital and social protection enhanced for all ^a (OP 1.1)	a. Up to 50 million Filipinos (43.8% of the total population) vaccinated against COVID-19 by 2023 (disaggregated by sex and age) ^b (2021 baseline: 0%) (OP 1.1; OP 1.3; OP 4.1) DMFa.	DOH	Ongoing
Output 1: Coronavirus vaccines efficiently and effectively delivered			
1.1 Gender equality in human development enhanced (OP 2.2)	1.1.1 Gender and socially inclusive protocol on the deployment and administration of vaccines addressing the specific needs of marginalized women and women in especially difficult circumstances developed, approved, and disseminated ⁹ (2020 baseline: none in place) (OP 2.3.2)	DOH; DPCB; DSWD 4Ps; BLHSD	Developed Q2-Q3/2021; Adopted Q4/2021 – Q1/2022
	1.1.2 Dissemination plan developed and implemented ⁸ to enhance knowledge and understanding of the protocol (under 1.1.1 above) among healthcare workers involved in implementing the National COVID-19 Vaccine program, especially in selected LGUs in major cities and GIDA. (2021 baseline: 0)	DOH; DPCB	Q1/2022
	1.1.3 Healthcare workers involved in implementing the National COVID-19 Vaccine program demonstrate enhanced capacity ⁷ to target and vaccinate marginalized groups as described in the protocol under 1.1.1, especially in selected LGUs in major cities and GIDA. ⁹ (2021 baseline: 0)	DOH; DPCB tbc	Q2/2022 – project close
	1.1.4 In alignment with the Demand Generation and Communication Plan, support the development of gender and culturally sensitive and age appropriate, information, education and communication (IEC) products in accessible formats (e.g., pictographic, in Tagalog and other local languages), targeting marginalized women and women in especially difficult	DOH/HPB; Philippine Information Agency;	Developed in Q2/2021; Disseminated Q3/2021 – project close

Gender Objectives	Activities / Targets	Responsibilities	Timeframe
	circumstances including in major cities and geographically isolated and disadvantaged areas. (2021 baseline: 0)		
	1.1.5 At least one online consultation and/or survey and associated gender analysis undertaken in selected LGUs in big cities and GIDA, ^e to monitor awareness of vaccine safety and gather feedback on issues affecting access to health services; including specific engagement with marginalized women and women in especially difficult circumstances (2021 baseline:0)	DOH/HPB; DSWD; DILG	DOH/HPB; DSWD; DILG

2. Project Management

- 2.1 A Gender and Social Specialist is engaged by the PMU early in the project (Q2/2021).
 2.2 Project reports include details on progress against the GAP (good practices, lessons learned etc.)
 2.3 Collection of sex-disaggregated and gender-related information relevant to the Design and Monitoring Framework and GAP is integrated in the overall project performance monitoring system.
 2.4 DOH maintains a database that records the administration of COVID-19 vaccines and monitors alignment with the government's vaccination allocation plan, including disaggregation by sex, age, co-morbidity(ies), other risk category(ies)ⁱ and ADB-financed doses (2020 baseline: not applicable).

4Ps = Pantawid Pamilyang Pilipino Program, BLHSD = Bureau of Local Health Systems and Development, COVID-19 = coronavirus disease, DILG = department of Interior and local Government, DMF = design and monitoring framework, DOH = Department of Health, DPCB = Disease Prevention and Control Bureau, DSWD = Department of Social Welfare and Development, GAP = Gender Acton Plan, GIDA = Geographically-Isolated and Disadvantaged Areas, HPB = Health Promotion Bureau, LGU = local government unit, OP = operational priority, PMU = project management unit, Q = quarter, tbc = to be confirmed.

- ^a ADB acknowledges that a. and b. in this matrix are not gender performance indicators. However, the accurate collection and analysis of disaggregated data on vaccination rates for both COVID-19 and routine vaccinations is important to the gender actions proposed under 1.1 below.
- ^b Reporting on vaccinations will be disaggregated by gender, age, priority group, e.g., % of frontline workers in health workers; % indigent senior citizens; % of remaining senior citizens; % of remaining indigent population; % of uniformed personnel; sex; and region, province and/or rural/urban.
- ^c The protocol will be developed through collaboration with multiple Bureaux in DOH, DSWD and DILG. Implementation resourcing will come from LGU GAD budgets following the completion of project activities.
- ^d In alignment with the WHO SAGE equity principle, these protocols and guidelines acknowledge that specific groups of the population are less able to access information and services than others. To ensure broad-based coverage of information and equity in vaccine access, the gender and socially-inclusive protocols and guidelines will specifically target marginalized women, women in especially difficult circumstances and people in geographically isolated and disadvantaged areas as defined by the Magna Carta of Women sections 4 (d) and 30.
- ^e The selected LGUs in big cities and GIDA will be determined during the inception mission.
- ^f The type of dissemination plan will be determined based on alignment with ongoing activities related to the DOH Interim Implementation Plan outreach and training plan
- ^g The method of verification of 'enhanced capacity' will be dependent on the dissemination approach undertaken in 1.1.5.
- ^h Other risk categories must include, but not necessarily limited to, those presented under footnote 5.
- ⁱ Where possible, surveys and analysis will be informed by the data collection exercises undertaken to develop the Vaccine Information Management System (VIMS).

IX. PERFORMANCE MONITORING, EVALUATION, REPORTING, AND COMMUNICATION

A. Project Design and Monitoring Framework

58. The DMF is in Appendix 1.

B. Monitoring

59. **Project performance monitoring.** DOH will be responsible for all aspects of monitoring and evaluation, including (i) performance evaluation against milestones, (ii) safeguards and Gender Action Plan (GAP) implementation monitoring, (iii) financial commitments, and (iv) implementation of risk management and mitigating action plans. Progress reports and achievements will be prepared quarterly and summarized annually. Quarterly reports will include updates on contract awards and disbursement achievements compared to the projections based on project performance review requirements presented.

60. The APVAX policy requires additional information on vaccine procurement in the quarterly and summarized annual reports.

61. **Compliance monitoring.** The status of compliance with loan covenants (financial, safeguards, and others) will be monitored and reported in the progress report and during ADB review missions. Any non-compliance and compliance issues will be specified in the quarterly progress reports together with remedial actions.

62. **Safeguards monitoring.** Since the project is categorized C for all safeguards areas (environment, involuntary resettlement and Indigenous Peoples), no standalone safeguards monitoring report is required. However, the consolidated annual reports and the project completion report stated in para 57 below shall report on compliance with the loan agreement including those clauses pertaining to safeguards. The reports shall also document and assess the adequacy of the COVID-19 immunization waste management system put in place, and planned actions to improve its effectiveness, as needed.

63. **Gender and social dimensions monitoring.** As HEAL 2 is classified as *effective gender mainstreaming* at entry, a GAP is required and will be monitored during implementation. All actions taken under HEAL 2 will disaggregate data by sex and age where possible, and seek to collate feedback from recipients through surveys to measure improved knowledge and understanding. A gender specialist will be engaged to, among other things, monitor the gender design features of HEAL 2, and report on the progress of implementing the GAP through submitting GAP reports annexed to regular project progress reports. The GAP report shall follow the template instituted by the ADB.

C. Evaluation

64. An inception mission will be scheduled shortly after loan effectiveness.³³ Implementation review missions will be held every 3 to 6 months. A midterm review is tentatively scheduled for Q3 2022. Within 6 months of physical completion of HEAL 2, DOH will submit a project completion report to ADB.

D. Reporting

65. DOH will provide ADB with (i) quarterly progress reports in a format consistent with ADB's project performance reporting system; (ii) consolidated annual reports including (a) progress achieved by output as measured through the indicator's performance targets, (b) key implementation issues and solutions, (c) updated procurement plan, and (d) updated implementation plan for the next 12 months; and (iii) a project completion report within 6 months

³³ Online meetings will be considered if quarantines due to COVID-19 persist.

of physical completion of the project. To ensure that projects will continue to be both viable and sustainable, project accounts and the executing agency audited financial statement together with the associated auditor's report, should be adequately reviewed.

E. Stakeholder Communication Strategy

66. HEAL 2 will comply with the policy of transparency and accountability of the Access to Information Policy. To do so, it will establish a communications strategy that will ensure an efficient and continuous two-way communication about ADB projects with stakeholders with a focus on managing stakeholders' expectation during all phases of implementation. The strategy will follow the following approaches:

- (i) **Stakeholders.** Critical stakeholders for HEAL 2 include people affected by COVID-19, and women and vulnerable groups. Other key stakeholders include, but are not limited to, DOH as executing and implementing agency, government officials at national and sub-national levels, interested community-based organizations, interested civil society organizations, interested private sector entities, and interested development partners.
- (ii) **Disclosure.** DOH will disclose on their website all information relevant to this project, including the scope, cost, financial and institutional arrangements, the consolidated annual progress reports, progress on procurement, and the audited project financial statements. HEAL 2 will also provide contact details of the project management team (PMT) counterpart staff.
- (iii) **Communication focal point.** DOH PMT will be responsible for implementation and monitoring of information dissemination and disclosure of project components. DOH will also designate a focal person for information dissemination and disclosure, who will also serve as the custodian of all information relevant to HEAL 2.
- (iv) **Awareness-raising materials.** HEAL 2 will at the minimum prepare: (a) a fact sheet or information booklet containing objectives, components, activities, timelines, relevant contact information, and grievance redress mechanism; and (b) a project brief summarizing details of HEAL 2 in a simple language and utilizing stories and infographics targeting a wider group of audience, including the poor and women. Both documents will be made in the English language and will be made available to the public in print at DOH headquarters, distributed during all stakeholders' consultations and outreach activities, and posted in the ADB website. Other information materials may be developed for distinct stakeholder groups.
- (v) **Channels.** For effective dissemination and efficient use of resources, collaboration with other readily available channels should be highly prioritized, including but not limited to government websites both at national and subnational levels; government social media accounts; and ADB website and its other online platforms. All online platforms will be optimally utilized to ensure unrestricted public access to information and documents repository. Meanwhile, conventional methods will remain to be used, as appropriate, to ensure that all interested stakeholders have access to information, including through DOH PMT.
- (vi) **Coordination.** HEAL 2, through the DOH focal point, will coordinate with relevant government agencies and development partners, particularly those working on COVID-19 response efforts, to ensure effective communication, avoid overlaps, and identify potential collaboration, where possible.

X. ANTICORRUPTION POLICY

67. ADB reserves the right to investigate, directly or through its agents, any violations of the Anticorruption Policy relating to the project.³⁴ All contracts financed by ADB shall include provisions specifying the right of ADB to audit and examine the records and accounts of the executing agency and all project contractors, suppliers, consultants, and other service providers. Individuals and/or entities on ADB's anticorruption debarment list are ineligible to participate in ADB-financed, administered or supported activities and may not be awarded any contracts under the project.³⁵

68. To support these efforts, relevant provisions are included in the loan agreement and the contracts for HEAL 2.

XI. ACCOUNTABILITY MECHANISM

69. People who are, or may in the future be, adversely affected by the project may submit complaints to ADB's Accountability Mechanism. The Accountability Mechanism provides an independent forum and process whereby people adversely affected by ADB-assisted projects can voice, and seek a resolution of their problems, as well as report alleged violations of ADB's operational policies and procedures. Before submitting a complaint to the Accountability Mechanism, affected people should make an effort in good faith to solve their problems by working with the concerned ADB operations department. Only after doing that, and if they are still dissatisfied, should they approach the Accountability Mechanism.³⁶

XII. RECORD OF CHANGES TO THE PROJECT ADMINISTRATION MANUAL

70. All revisions and/or updates during the course of implementation should be retained in this section to provide a chronological history of changes to implemented arrangements recorded in the PAM, including revision to contract awards and disbursement s-curves.

³⁴ Anticorruption Policy: <https://www.adb.org/documents/anticorruption-policy>.

³⁵ ADB's Office of Anticorruption and Integrity website: <https://www.adb.org/site/integrity/main>.

³⁶ Accountability Mechanism. <http://www.adb.org/Accountability-Mechanism/default.asp>.

PROJECT DESIGN AND MONITORING FRAMEWORK

Impact(s) the Project is Aligned with			
Health system performance in addressing public health outbreaks improved (<i>National Objectives for Health 2017–2022</i>) ^a			
Protection of the public and reduction of morbidity and mortality due to COVID-19 infection fostered (<i>National COVID-19 Vaccine Roadmap</i>) ^b			
Economic growth and citizens' confidence restored (<i>ADB's Support to Enhance COVID-19 Vaccine</i>) ^c			
Results Chain	Performance Indicators	Data Sources and Reporting Mechanisms	Risks and Critical Assumptions
Outcome	By 2024:		
Priority populations ^d vaccinated against COVID-19	a. Up to 50 million Filipinos ^e (43.8% of the total population) vaccinated against COVID-19 (2021 baseline: 0) <i>[disaggregated by gender, age, and priority group]</i> (OP 1.1; OP 1.3)	a. DOH COVID-19 vaccination coverage report; WHO and UNICEF immunization estimates; ADB project monitoring and progress report.	R: Political pressure shifts priority populations to different target groups at national and local levels. A: Adequate and effective campaign and delivery system ensure that priority populations are willing to get vaccinated.
Output	By 2023:		
1. COVID-19 vaccines efficiently and effectively delivered	1a. Up to 110 million ^f doses of COVID-19 vaccines procured and delivered to the country (2020 baseline: 0) (OP 1.1.2) (Under TA Facility) ^g 1b. Vaccine information management system launched (providing data disaggregated by gender, age, and priority group) (2020 baseline: not applicable) (OP 7.3.3) 1c. Gender- and socially inclusive protocol and guidelines on the deployment and administration of vaccines, addressing the specific needs of marginalized women and women in especially difficult circumstances, developed, approved, and disseminated ^h (2020 baseline: not applicable) (OP 2.3.2)	1a–1c. DOH updates, project survey and project progress report, data from vaccine information management system.	R: Limited vaccine suppliers' capacity to meet global demand, including commitments to the Philippines, lead to delay in vaccine delivery. A: Vaccine doses are delivered with required cold storage (both cross-country and in-country), thereby maintaining quality and efficacy against COVID-19.

<p>Key Activities with Milestones</p> <p>COVID-19 vaccines efficiently and effectively delivered</p> <ol style="list-style-type: none"> 1. Finalize national COVID-19 vaccine deployment plan (Q1–Q2 2021). 2. Develop end-to-end logistical arrangements (cross-country and in-country shipping), transportation, and delivery of vaccines from point of manufacture to designated central and/or regional hub or storage facility (Q1–Q3 2021). 3. Develop COVID-19 vaccination delivery system, including operational plans relating to safeguards and medical waste management (Q1–Q3 2021). 4. Set up central and regional cold chain system and storage facilities that meet temperature and equipment requirements (Q1 2021–Q2 2022). 5. Update effective vaccine management protocols and procedures for COVID-19 vaccination and national immunization programs (Q1–Q4 2021). 6. Develop, approve, and disseminate gender and socially inclusive protocol (Q2 2021–Q1 2022). 7. Procure the required number of vaccine doses for ADB financing and AIIB cofinancing (Q1 2021–Q3 2023). <p>Project Management Activities</p> <p>Conduct procurement value for money analysis and post-review sampling Prepare and submit quarterly and annual progress report Submit annual Audited Project Financial Statement Prepare project completion report</p> <p>Inputs</p> <p>ADB: \$ 400,000,000 (loan) and \$500,000,000 (TA)^e AIIB: \$300,000,000 Government: \$ 64,170,000</p>
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coronavirus disease, DOH = Department of Health, OP = operational priority, Q = quarter, R = risk, TA = technical assistance, UNICEF = United Nations Children's Fund, WHO = World Health Organization.

^a DOH. 2020. *National Objectives for Health, Philippines 2017–2022*. Manila.

^b Government of the Philippines. *National COVID-19 Vaccination Roadmap*. 11 January 2021; and DOH. *DOH Strategic Plan for COVID-19 & National Deployment and Vaccination Plan*. 11 January 2021.

^c ADB. 2020. *ADB's Support to Enhance COVID-19 Vaccine*. Manila.

^d The government has set target groups and prioritized eligible populations for the vaccination program in line with the WHO's Strategic Advisory Group of Experts on Immunization (SAGE) and its values framework for the allocation and prioritization of COVID-19 vaccination, and the Philippines' country context. Group A (estimated at 24.7 million or 23% of the total population), the first target group, prioritizes frontline health workers, indigent senior citizens, remaining senior citizens and indigent populations, and uniformed personnel. Group B, the second target group (up to 44% of the total population), covers teachers and social workers; other government workers (national and local); other essential workers outside health, education, and social sectors; socio-demographic groups at significant risk other than senior citizens and indigent populations (persons with disability, persons deprived of liberty, persons living in high-density areas); overseas Filipino workers; and the remaining Filipino workforce (as may be determined by government agencies). Group C are the remaining Filipinos not included in Group A or Group B.

^e Up to 110 million doses of COVID-19 vaccines are to be procured under the project. The coverage of up to 50 million Filipinos assumes a waste rate of 10%.

^f This is expected to include 44 million doses from the COVID-19 Vaccines Global Access (COVAX) whose cost-share will be financed by the project, and 6 million single doses of Johnson & Johnson vaccine. The estimated coverage of up to 50 million Filipinos assumes a wastage rate of 10%.

^g Output indicators 1b and 1c will be financed by the following TAs: ADB. 2020. *Technical Assistance for Regional Support to Address the Outbreak of Coronavirus Disease 2019 and Potential Outbreaks of Other Communicable Diseases*; ADB. 2016. *Technical Assistance to the Philippines for Strengthening Social Protection, Education, and Health Reforms*; and ADB. 2019. *Support for Human and Social Development in Southeast Asia*. Manila.

^h In alignment with the WHO SAGE equity principle, these protocols and guidelines acknowledge that specific groups of the population are less able to access information and services than others. To ensure broad-based coverage of information and equity in vaccine access, the gender- and socially-inclusive protocols and guidelines will specifically target marginalized women, women in especially difficult circumstances, and people in geographically isolated and disadvantaged areas as defined by the Magna Carta of Women, Sections 4 (d) and 30. The selected LGUs in big cities or geographically isolated and disadvantaged areas will be determined during the inception mission.

Contribution to the ADB Results Framework:

Expected values and methodological details for all OP indicators to which this project will contribute results are detailed in Contribution to Strategy 2030 Operational Priorities.

Source: Asian Development Bank.

PROCUREMENT PLAN

Basic Data		
Project Name: Second Health System Enhancement to Address and Limit COVID-19 with Asia Pacific Vaccine Access Facility (HEAL 2)		
Project Number: 54171-003	Approval Number:	
Country: Philippines	Executing Agency: Department of Health	
Procurement Risk: High	Implementing Agency: Department of Health	
Project Financing Amount: \$ 764.17 million ADB Financing: \$ 400 million Cofinancing (ADB Administered): \$ 300 million (AIIB) Non-ADB Financing: \$ 64.17 million	Project Closing Date: xx March 2024	
Date of First Procurement Plan: 11 February 2021	Date of this Procurement Plan: 11 February 2021	
Procurement Plan Duration: 18 months	Advance contracting: Yes	eGP: No

A. Methods, Review and Procurement Plan

Except as the Asian Development Bank (ADB) may otherwise agree, the following methods shall apply to procurement of goods, works, nonconsulting services, and consulting services.

Procurement of Goods, Works and Nonconsulting Services	
Method	Comments
Direct Contracting (DC)	All vaccine contracts will be subject to direct contracting

B. List of Active Procurement Packages (Contracts)

The following table lists goods, works, nonconsulting, and consulting services contracts for which the procurement activity is either ongoing or expected to commence within the procurement plan's duration

Goods, Works, and Nonconsulting Services							
Package Number	General Description	Estimated Value (\$ million)	Procurement Method	Review	Bidding Procedure	Advertisement Date	Comments
G01	Procurement of COVID-19 Vaccines through COVAX	77.0	DC	Prior Review	N/A	N/A	No. of Contracts: 1 Domestic Preference: No Advance Contracting: Yes High Risk Contract: Yes COVID-19 Response: Yes Other: Agreement with UNICEF
G02	Procurement of COVID-19 Vaccines through bilateral deals	623.0	DC	Prior Review			No. of contracts: Multiple Domestic Preference: No Advance Contracting: Yes High Risk Contract: Yes COVID-19 response: Yes

COVAX = COVID-19 Vaccines Global Access, COVID-19 = coronavirus disease, DC = direct contracting, NA= not applicable, UNICEF = United Nations International Children's Emergency Fund

C. Non-ADB Financing

The following table lists goods, works, nonconsulting, and consulting services contracts over the life of the project, financed by non-ADB sources.

Goods, Works and Nonconsulting Services				
General Description	Estimated Value (cumulative, \$ million)	Estimated Number of Contracts	Procurement Method	Comments
Procurement of needles, syringes and other COVID-19 vaccine related commodities	14.20	To be confirmed	Competitive	Financed by the Government
Third-Party Logistics Provider (customs brokerage, warehousing / storage, local transportation, and return logistics)	20.00	To be confirmed	Competitive	Financed by the Government