

**APEC Trade in Health Services Seminar
Mactan, Cebu
9-11 February 2010**

Workshop Guidelines

Objectives:

The workshop sessions are meant to:

- provide an opportunity for all participants to contribute their views on the topics and issues discussed during the seminar, as well as other concerns in the area of trade in health services;
- generate a common understanding (not necessarily consensus) of the main issues (opportunities and challenges in trade in health services; risks to national health systems and possible mitigating measures) related to trade in health services; and, equally important, of the risks posed by trade in health services to national health systems;
- provide a venue for participants to discuss, prioritize, and agree on possible cooperation projects that respond to actual needs and provide tangible benefits; and,
- impel participants to commit to specific, measurable action plans in support of the cooperation projects.

Mechanics:

The participants will be heterogeneously grouped into four (4), allowing for optimal diversity in each group. The groupings will be posted / announced during the afternoon coffee break of February 9. Each group will be asked to concentrate mainly on a particular Mode of Supplying Health Services. However, as the modes are inter-linked, groups may also discuss their specific mode's implications on the other modes. (Please see attached note for a brief discussion of the Four Modes of Supplying Health Services)

The four groups are as follows:

- Group 1: Cross-border Trade (e.g. tele-health)
- Group 2: Consumption Abroad (e.g. medical travel)
- Group 3 : Commercial Presence (e.g. foreign investments)
- Group 4: Movement of Natural Persons (e.g. temporary migration of health professionals)

Each group should appoint a discussion leader (to facilitate the flow of the group discussion and to ensure that all members participate in the exchange of ideas) and a rapporteur (to document the highlights of the group discussion).

At the start of each day, the groups will be given 10 minutes to present the highlights of their workshop discussions. The groups are free to choose their presentors, as well as the manner of presenting (e.g. thru powerpoint, flipcharts, etc.)

Workshop 1: February 9

Mode	Recommended Guide Questions
1: Cross-border Trade (e.g. tele-health)	<ul style="list-style-type: none"> • What types of health and health-related services can be transmitted across countries via the internet, the telephone or mail service? (e.g. eHealth or tele-health) • What factors facilitate or impede the transmission of these services across borders? [e.g. policies and regulatory requirements (data privacy laws), processes and practices, technology, etc.] • What challenges and opportunities does this type of trade in health services present to APEC members? How can it affect national health systems, especially in terms of access of marginalized sectors to quality, affordable health care? • What can you do to ensure that trade in health services positively affects local health systems?
2: Consumption Abroad (e.g. medical travel)	<ul style="list-style-type: none"> • What types of health and health-related services are typically delivered via medical travel? • What factors facilitate or impede patients from traveling to other countries for purposes of seeking health services? • What factors facilitate or impede health service providers or institutions from providing services to foreign patients? • What challenges and opportunities does international medical travel/tourism present to APEC members? How can it affect national health systems, especially in terms of access of marginalized sectors to quality, affordable health care? • Are there health-sector related problems which can either be alleviated or worsened by encouraging the entry of medical tourists? • What can you do to ensure that trade in health services positively affects local health systems?
3: Commercial Presence	<ul style="list-style-type: none"> • What types of health and health-related services and facilities typically receive foreign investments? • What factors facilitate or impede health service providers from seeking additional resources through foreign investments? • What factors facilitate or impede investors from investing in health-related services and facilities in other countries? • What challenges and opportunities do foreign investments in health services and facilities present to APEC members? How can foreign investments affect national health systems, especially in terms of access of marginalized sectors to quality, affordable health care? • Are there health-sector related problems which can either be alleviated or worsened by encouraging the entry of foreign investments in the health sector? • What can you do to ensure that trade in health services positively affects local health systems?

<p>4: Movement of Natural Persons</p>	<ul style="list-style-type: none"> • What types of health and health-related services typically require temporary migration foreign health professionals? • What factors facilitate or impede health professionals from migrating to other countries? • What factors facilitate or impede health facilities and institutions from recruiting foreign health professionals? • What challenges and opportunities does migration of health professionals present to sending (originating) and receiving (destination) APEC members? How can migration of health professionals affect national health systems, especially in terms of access of marginalized sectors to quality, affordable health care? • Are there health-sector related problems which can either be alleviated or worsened by encouraging the migration of health professionals? • What can you do to ensure that trade in health services positively affects local health systems?
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Workshop 2: February 10

Guide Questions:

1. With all the points raised in this seminar (from the presentations, to the discussions, to the workshops, to the networking, etc.) what do you think are the main issues related to international trade in health services? Please identify at least three issues.
2. Individually reflecting on these issues, what do you think does your country need to better address these issues? What do you think can your country offer to assist other countries better address these issues? (e.g. technology, information and data, expertise and experience, etc.)
3. Matching the APEC members' needs and resources (e.g. technology, information and data, expertise and experience, etc.), what specific cooperation projects can be pursued? Please identify at least two.
4. Please identify the specific actions (action plan) needed to pursue these projects, indicate the timetable, responsible persons or institutions, and resource needed.

Technical Note to the Workshops: Four modes of supplying health services internationally

The multilateral environment for trade in services is governed by the General Agreement on Trade in Services (GATS). The GATS, together with the General Agreement on Tariffs and Trade (GATT) and the Agreement on the Trade-Related Aspects of Intellectual Property Rights (TRIPS), is part of the Marrakesh Agreement that established the World Trade Organization (WTO) in 1995.

The GATS also defines four ways in which a service can be traded, known as the *four modes of supplying services*:

- Mode 1 – refers to services supplied from one country to another (e.g. international telephone calls), officially known as “crossborder supply”;
- Mode 2 – refers to consumers from one country making use of a service in another country (e.g. tourism), officially known as “consumption abroad”;
- Mode 3 – refers to a company from one country setting up subsidiaries or branches to provide services in another country (e.g. a bank from one country setting up operations in another country), officially known as “commercial presence”; and
- Mode 4 – refers to individuals traveling from their own country to supply services in another (e.g. an actress or construction worker), officially known as “movement of natural persons”.

In terms of health services, it is useful to illustrate the four modes of supplying services by citing the example of a doctor providing a service to a patient. What are the ways by which a doctor can provide a service to a patient? Normally, the patient goes to the doctor for consultation. However is it still possible to provide health services if the patient lives in Country A and the doctor lives in Country B?

To supply the doctor’s service internationally, the most basic way is for either the patient to go to Country B—which is called Consumption Abroad (mode 2); or for the Doctor to go to the patient in Country A—known as Movement of Natural Persons (mode 4).

Another way is for the doctor to invest in a hospital in Country A, such that even if the doctor himself or herself is not the one providing the service, it is provided by his / her agent (i.e., a hospital owned by the doctor). This is called Commercial Presence (mode 3).

In recent years, however, with advancements in ICT, more and more services are provided alternatively. The patient may undergo some diagnostic procedure in his/her home Country and then the results may be digitized and sent over the internet to the doctor in Country B; the doctor then provides his medical diagnosis of the patient’s condition via the internet. This is known as cross-border trade (mode 1), where neither the patient nor the doctor—nor his / her agent—leaves their respective countries. Although these could already be done before (i.e., by physically sending the x-ray plate through courier services), it was previously too time consuming and expensive to be viable.

Supplying Health Services Internationally:

Case of a Patient living in Country A and Doctor living in Country B

	Country A: Patient		Country B: Doctor
Mode 1: Cross-border Trade	Patient stays in Country A; has his X-ray taken.	X-ray result is digitized and sent via the internet	Doctor stays in Country B, retrieves digitized X-ray from the internet and sends his diagnosis to patient (also via internet)
Mode 2: Consumption Abroad			Patient travels to see Doctor in Country B
Mode 3: Commercial Presence	Patient stays in Country A; goes to a hospital owned by the Doctor (from Country B).	Doctor invests in hospital in Country A.	Doctor stays in Country B.
Mode 4: Movement of Natural Persons	Patient stays in Country A; Doctor travels to Country A to treat the Patient.		

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WORKSHOP 1

“ Barriers and Opportunities on Trade in Health Services”

**GROUP 1: MODE 1 - CROSS BORDER TRADE (e.g. Tele-health)
 MODE 2 - CONSUMPTION ABROAD (e.g. medical travel)**

VENUE: MACTAN BALLROOM 2

Facilitator/Moderator: Mr. Michael Lyndon Garcia and Ms. Twinkle Rodolfo

Rapporteur: Dr. Allan Evangelista

Members:

Ms. NORAINI MANAP (BRUNEI)

MS. BAI XUE (CHINA)

MR. MOHD RIDHA MOHSIN (MALAYSIA)

DR. LOKE WAI CHIONG (SINGAPORE)

DR. SONGPHAN SINGKAEW (THAILAND)

MS. NGUYEN THUY PHUONG (VIETNAM)

MS. MAYLENE BELTRAN (PHILS)

ATTY. GENESIS ADARLO (PHILS)

MS. JOYCE CIRUNAY (PHILS)

MS. EMILY ESCASINAS (PHILS)

MS. LAURITA MENDOZA (PHILS)

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WORKSHOP 1

“Barriers and Opportunities on Trade in Health Services”

**GROUP 2 : MODE 3 - COMMERCIAL PRESENCE (e.g. foreign investment)
MODE 4 - MOVEMENT OF NATURAL PERSON (e.g. temporary
migration of health personnel)**

VENUE: MACTAN BALLROOM 3

**Facilitator/Moderator: Dr. Kenneth Ronquillo and Dr. Anthony Calibo
Rapporteur: Ms. Georgina Ramiro**

Members:

**DR. WADI HANA SUDIN (BRUNEI)
MR. GAO XINGQUIANG (CHINA)
MS. NURUL ADNI ZAINUL ARIFF (MALAYSIA)
MS. WEI NA TAN (SINGAPORE)
DR. VEERACHAT PETPISIT (THAILAND)
DR. NGUYEN MANH CUONG (VIETNAM)
ATTY. NICOLAS LUTERO (PHILS)
MS. MARGARET BENGZON (PHILS)
MS. ESPERANZA MELGAR (PHILS)
MS. MILLICENT JOY URGEL (PHILS)
MS. CRISPINITA VALDEZ (PHILS)**