

# 2020 Vision in the Time of COVID-19

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The Santa Lucia International Eye Bank (SLIEB) of the Eye Bank Foundation of the Philippines or simply the **Eye Bank** is 25 years old this October 16, 2020. The Philippine Academy of Ophthalmology (PAO) turns 75 years old in 2020. Vision 2020, the global initiative of the International Agency for the Prevention of Blindness (IAPB) inaugurated in 2010, had the year 2020 as its target for the elimination of avoidable blindness.<sup>1</sup> While the IAPB has since changed its target to a more realistic “reduction in prevalence of avoidable visual impairment by 25%” before the year 2020, all of these organizations are bound by one common mission: helping people see as clearly as possible. The year 2020 is an important year.

For the three organizations, much of the planned celebrations and activities had to take a back seat to the COVID-19 pandemic. The universe and our Creator had other plans. But while activities meant to highlight the importance of physical sight were on hold, clarity of vision still started to happen for those who chose to keep the eyes of their hearts open to unfolding events.

The Eye Bank was ready for this important year. And we had much to celebrate. By March 14, 2020, immediately before the start of the lockdown, our Eye Bank had a network of 5 operational eye tissue retrieval centers outside Metro Manila. These centers were located at the Baguio General Hospital,

the Paulino J. Garcia Memorial Research and Medical Center in Cabanatuan City, the Ilocos Training and Regional Medical Center, the Cagayan Valley Medical Center; and our continuing program in Cebu City. By March 14, we had literally just inaugurated yet another eye tissue retrieval program in the Eastern Visayas Regional Medical Center in Tacloban. And we had plans to open up another center in Davao by year end. Through the successful operation of these eye tissue retrieval centers around the country, we had realized part of our vision of institutionalizing cornea and eye donation in the Philippines. From the start of the Eye Bank operation in 1995 up to 2017; eye tissue for transplant came mainly from Metro Manila hospitals and morgues. Save for a local Eye Bank in Cebu, there was no organized retrieval system outside Metro Manila. The flow of tissue was one way: from Metro Manila to the rest of the country. This gradually changed after 2017. And by late 2019 there was a significant growth in the number of tissue retrieved from the centers outside Metro Manila.

Before the reality of the COVID-19 pandemic dawned on all of us, our eye bank had signed MOAs for intensified public information campaigns, and we had completed the recording of our 5 videos<sup>2,3,4,5,6</sup> that would be released through various media platforms starting August, culminating in our silver anniversary ball on October 16, 2020. Everything was set. Things were looking good.

Then the COVID-19 Pandemic happened; and God set unexpected things in motion.

Our government was ill-prepared for the pandemic, especially in the months from March to June. As a result, many of us found ourselves having to take on different roles in order to respond to the crisis. We became frenzied fundraisers, vloggers, psychologists, and therapists for our neighbors and family who we had to help in various ways. Those who had to work in COVID-19 hospitals had to learn all things COVID-19 regardless of specialization; and some of us even became instant media resource persons on everything from COVID-19 testing to staying sane and centered during the pandemic. Our lives were turned upside down. But throughout this upheaval of sorts, some great things also happened. We became who we are. And for those of us who kept the eyes of our hearts open, so many truths were revealed.

One of the things that struck me was how COVID-19 exposed the hypocrites and separated them from those with truly good hearts. This became clearer as the months passed by, particularly to those like me who had to bridge government and the private sector. It was so ironic to see people who were better known as making money from the “sin” industries like gambling and the motel business, go all out in donating personal protective equipment, test kits, medicines, free accommodation for front liners, and many more, without asking for anything in return. Then side-by-side with these genuinely good hearts were those who used their NGOs and their government positions to profiteer even as they kept a nauseating front of concern for public welfare.

One of the funnier and yet rather poignant moments I remember was when we were orienting priests and bishops on the upcoming testing of their members from various dioceses around Metro Manila and environs. One major concern was where to quarantine people who tested positive for SARS-CoV-2. The Diocese of Caloocan was the first to be ready. I found it so amusing when the head priest from “Team Caloocan” proudly announced that they would not have any problem finding quarantine sites because they could use the rooms of a popular motel chain known for its rather racy “fantasy rooms” frequented by trysting lovers, to quarantine their priests, nuns, and employees who tested SARS-CoV2 positive. The same motel chain owner also later helped me when I needed to quarantine

some asymptomatic and mildly symptomatic COVID positive people who could not afford a prolonged stay in the hospital. No questions asked. No fanfare. Just a truly good heart who wanted to help.

Contrast this to the obscene overpricing of Reverse Transcription-Polymerase Chain Reaction (RT-PCR) machines and test kits that we discovered in the course of our putting up RT-PCR laboratories of our own for Project ARK. We were able to buy the same brand of kits as well as the same brand of machines, at a fraction of the price that government was buying them. As a result, we were able to offer the same tests at 1/3 the going rate. The same overpricing of test kits was made public during a senate hearing in June.<sup>7</sup> PhilHealth was thereafter forced to bring down its packages for RT-PCR testing.<sup>8</sup> Furthermore, the information was used by the Department of Budget and Management (DBM) to purchase test kits at a lower price henceforth. But this crusade also came at a price. Some of us got pummeled in the process. Media demolition jobs sprouted from all over the place. We had displeased some very powerful people and we were not welcome in their little circle of influence. But the cat was out of the bag. There was no turning back on prices for testing. Furthermore, the hearts of many people had been revealed in the process. They were unmasked.

But if it is the uncovering of deep rooted dirt we are talking about, perhaps nothing can beat the revelations about PhilHealth corruption that occurred in the recent months. This is by no means the first time corruption inside PhilHealth became the subject of national headlines. But it was the first time the depth and breadth of this systemic corruption really sank into the consciousness of our citizens at large. We have the COVID-19 pandemic to thank for this.

I devoted a considerable portion of my Jose Rizal Memorial Lecture last December 5, 2017<sup>9</sup> to PhilHealth. Allow me to quote some portions:

*“PhilHealth is very important to all physicians and our patients. But it is in a precarious state. It is running on reserves. Unless major reforms and changes in policy are carried out soon, reforms that will balance efficiency with transparency; fiscal responsibility with expansion of benefits, employee benefits with responsible stewardship; unless reforms can be carried out that will balance all of this,*

*it may run out of money in 3 years. Simply infusing funds into PhilHealth without the reforms will make the problems worse, not better.*

*Its problems are very deep-rooted and very difficult, even dangerous, to tackle as they already involve syndicates inside and outside PhilHealth.*

*Fixing the problems of PhilHealth will have to start with cleansing its ranks.*

*The main tragedy is that these problems affect the practice of medicine beyond the financial. Integrity, ethics, professionalism are all values contained in the warranties of accreditation each healthcare provider has to sign before accreditation by PhilHealth. But unless both the healthcare providers and PhilHealth take these values seriously, all of it is nothing but empty rhetoric. And as we have seen, ignoring these values can result in anarchy, an obscene race for who can make the most money in the shortest time by gaming the national health insurance program. And in the process, patient welfare often falls by the wayside. “*

I, as well as a handful of quixotic officers of Philhealth, had tried our best to address the problem of PhilHealth corruption. This strange love affair of mine with Philhealth started as soon as I took my oath of office as PAO president in December 2005. But my resolve to address the corruption intensified after I was appointed as Head Executive Staff in March 31, 2015; a position I held until the change in administration on June 30, 2016. I had testified in 5 congressional and senate hearings since 2015; the last of which was in 2018. I wrote about PhilHealth corruption and even allowed myself to be interviewed and quoted by name for the Philippine Daily Inquirer investigative series triggered by the PhilHealth/Wellmed Ghost Dialysis scandal in June, 2019.<sup>10</sup> But always, the dirt was inevitably swept under the rug, and the significant reforms we had hoped for did not come. Instead, the syndicate became more entrenched; emboldened by their seeming invincibility.

But while the voices in the wilderness appeared to have been silenced, the work for reforms continued; and we kept the faith. Then COVID-19 brought about the perfect storm that made “business as usual” unsustainable for the syndicates operating inside and outside PhilHealth. Like rats scurrying away with whatever morsels they could take from a ship perceived to be sinking, they tried to use the COVID-19 pandemic to steal with greater impunity. They did not expect that there were also good, honest and brave souls who saw what was happening from the inside, who had to speak out.

When Col. Etrobal Laborte, assistant and long-time aid of then PhilHealth President Ricardo Morales, was asked what made him resign and tell all about the thievery he had witnessed inside PhilHealth, he said: “My conscience can no longer take what’s happening. I would rather lose my job than lose my soul.”<sup>11</sup>

From July to September, 2020, the country was glued to the hearings in both houses of congress where revelations about systemic PhilHealth corruption were being spewed out, each one seemingly more diabolical than the other.<sup>12</sup> The public outrage is palpable. Suspensions and resignations inside PhilHealth have already occurred.<sup>13,14,15</sup> An unprecedented task force was formed headed by the Secretary of Justice.<sup>16</sup> A preliminary report recommending criminal and administrative charges against high ranking PhilHealth officers was released on September 14.<sup>17</sup> This is just the start of more charges to come. For the first time since 2005, amidst a major pandemic whose end is not yet in sight, I see some light at the end of the tunnel. We don’t expect the syndicate to go gently into the night, especially with ugly rumors about how high and wide the corruption reaches. But I believe that this administration wants to leave a legacy of Universal Health Care. Now that much of the malignancy has been revealed, it has little choice but to excise the tumor and institute reforms. This would not only be morally right; it would also be politically sound.

The year 2020 has indeed been a year of important revelations, both personal and otherwise. Only the utterly dense can possibly remain blind. The challenge now lies in what we are willing to do about what we have been allowed to see.

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