

Discussion Paper

Healthcare:

STRATEGIC INITIATIVES SUPPORTING THE
PHILIPPINES' 2026 ASEAN CHAIRSHIP

PREPARED BY:

*US-ASEAN Business Council in partnership with the
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This paper was developed by the US-ASEAN Business Council (USABC) and the ASEAN Business Advisory Council Philippines (ASEAN-BAC) to frame the roundtable discussion on healthcare scheduled for March 4, 2026, focusing on key issues and private-sector proposals.

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About the US-ASEAN Business Council

For more than 40 years, the US-ASEAN Business Council (USABC) has been the premier advocacy organization for U.S. corporations operating within the dynamic Association of Southeast Asian Nations (ASEAN), serving as the leading voice of the U.S. private sector in promoting mutually beneficial trade and investment relationships between the United States and Southeast Asia. USABC believes that opening and investing in efficient, resilient, and competitive markets are critical to the continued growth of its member companies and innovation and job creation in the United States and Southeast Asia. ASEAN now represents more than 650 million people and a combined GDP of US \$2.8 trillion across Brunei Darussalam, Cambodia, Indonesia, Laos, Malaysia, Myanmar, the Philippines, Singapore, Timor Leste, Thailand, and Vietnam. USABC's members include many of the world's largest American multinational corporations in numerous industries and range from those that have been working in Southeast Asia for more than a century to newcomers entering Asia's most dynamic regional economic community. USABC has its headquarters in Washington, D.C. and offices in New York, Bangkok, Hanoi, Jakarta, Kuala Lumpur, Manila, and Singapore.

Over the next decade, by virtue of its growing middle class, infrastructure development, and strategic position at the center of Pacific trade routes, ASEAN's eleven members will enjoy growth rates among the most robust in the world. With more than 65 percent of ASEAN's population under the age of 35, ASEAN's demographic trends will continue to fuel growth well into the future. USABC is convinced on strategic grounds that America's economic vitality depends on its success in the Asia-Pacific region, and ASEAN plays a central role.

USABC is the only U.S.-based organization recognized in the ASEAN charter as a supporting organization of ASEAN. In service to its members, USABC leads major business missions to all eleven ASEAN countries, convenes multiple meetings with ASEAN heads of state and ministers and is the only U.S. organization to be given the privilege to raise member company concerns in consultations with the ASEAN Economic, Energy, Finance, Transport, Travel & Tourism, and Forestry & Agriculture Ministers, as well as the ASEAN Customs Directors-General, at their annual meetings.

USABC's committees serve as umbrellas for its membership's initiatives at both the local and regional level. The committees include one for every ASEAN country, ASEAN, APEC, Customs, Aerospace, Defense & Security, Energy, Financial Services, Food & Agriculture, Health & Life Sciences, Information & Communications Technology, Supply Chains, Travel & Tourism, and Sustainability.

About the ASEAN Business Advisory Council

The ASEAN Business Advisory Council (ASEAN-BAC) was established in 2001 to serve as the region's apex private sector advisory body, providing essential business insights and recommendations to ASEAN Leaders. As the primary platform for private sector engagement, the Council advocates for economic cooperation and plays a pivotal role in advancing the ASEAN integration agenda. Each ASEAN member government appoints three high-level CEOs to the ASEAN-BAC—including a dedicated representative for small and medium-sized enterprises—to ensure a diverse and influential business voice in regional policy.

The ASEAN-BAC's mandate is driven by a commitment to inclusive growth and the modernization of the regional economy. By focusing on critical areas such as MSME empowerment, digital transformation, and sustainable development, ASEAN-BAC works to bridge the gap between government policy and the practical needs of the marketplace. Through its various working groups and legacy projects, it addresses cross-border challenges, promotes circular economy practices, and facilitates the adoption of emerging technologies like AI to ensure that the region remains globally competitive and resilient.

In 2026, ASEAN-BAC Philippines assumes the Chairship under the leadership of Chair Joey Concepcion, alongside members George Barcelon and Michael Tan. Guided by the theme "Advancing Prosperity for All," the Philippine leadership focuses on four strategic pillars: People, Planet, Platform, and Productivity. To turn these goals into action, the ASEAN-BAC is spearheading tangible deliverables such as the ASEAN Food Security Alliance (AFSA) and ASEAN Business and Investment Summit (ABIS), alongside policy papers and recommendations presented directly to ASEAN Leaders to shape the economic landscape toward ASEAN 2045.

Executive Summary

The Healthcare Initiative is a set of regionally focused initiatives proposed by the US-ASEAN Business Council (USABC), in collaboration with its member companies, to support the Philippines' 2026 ASEAN Chairship. These initiatives are designed as implementation-ready programs that ASEAN member states can fund, support, and implement in partnership with the private sector, while reinforcing continuity with ASEAN's longer-term strategic vision toward 2045.

Situating healthcare as both a social and economic priority for ASEAN, this paper emphasizes that the region is undergoing a rapid demographic and epidemiological transition characterized by population aging and a rising burden of noncommunicable diseases (NCDs), occurring at a pace far faster than that experienced by advanced economies. NCDs already account for more than half of deaths in ASEAN, with cardiovascular disease remaining the leading cause of premature mortality, while mental health and metabolic disorders impose growing economic costs through lost productivity and increased health expenditures. These pressures are compounded by persistent shortages and uneven distribution of healthcare workers, particularly in rural and underserved areas, as well as by fragmented health information systems that limit coordinated care, disease surveillance, and evidence-based policymaking.

Despite these challenges, the paper underscores that ASEAN possesses strong institutional foundations to act. Existing mechanisms such as ASEAN health sectoral bodies, the ASEAN Centre for Public Health Emergencies and Emerging Diseases (ACPHEED), and the accumulated experience from SARS, H1N1, and COVID-19 provide a solid platform for deeper cooperation. The paper further highlights that the recent advancements in digital transformation, health security, and the ASEAN Community Vision 2045 create momentum that the Philippines can build upon.

Within this context, USABC members articulate a set of priorities that shape the proposed initiatives. These include the integration and interoperability of digital health systems, regulatory convergence and procurement reform to accelerate access to diagnostics and medical technologies, the use of artificial intelligence (AI) for preventive healthcare, workforce and regulatory capacity development in digital health and data governance, and the strengthening of health supply chains, including cold chain reliability and emergency logistics. The paper makes clear that these priorities are not stand-alone private sector interests but are directly aligned with ASEAN and Philippine government objectives, particularly Priority Economic Deliverable (PED) 14 on AI for Health and the implementation of the ASEAN Digital Economy Framework Agreement (DEFA).

To operationalize these priorities during the 2026 Chairship year, the paper proposes four flagship initiatives that are designed to be feasible within existing ASEAN processes and timelines (Section IV).

The **ASEAN Preventive Health Systems Accelerator** seeks to translate evidence-based preventive health policies into scalable, region-ready pilots. The initiative prioritizes consumer education and empowerment strategies, including standardized front-of-package nutrition labeling, multi-channel public health campaigns, school-based nutrition education, and mobile health applications, as cost-effective approaches for addressing diet-related NCDs without imposing financial burdens on vulnerable populations. A cornerstone component of this

project addresses hospital malnutrition through advancing ISO standards for prevention, detection, and treatment of undernutrition, linking improved patient outcomes with reduced healthcare costs.

The **ASEAN Health Supply Chain Resilience and Cold Chain Security Program** focuses on practical systems strengthening. The initiative responds to documented weaknesses in vaccine, diagnostics, and medical product supply chains by proposing regional mapping of vulnerabilities, training for health logistics personnel, and the development of standards for sustainable and climate-resilient cold chain management. By linking routine service delivery with emergency preparedness and environmental and social governance (ESG) principles, the program addresses both immediate health security needs and longer-term system sustainability.

Moreover, the **ASEAN High-Level Forum on Artificial Intelligence for Health and Preventive Healthcare** is intended to convene senior health officials, regulators, experts, and private sector leaders to develop a shared regional vision for responsible AI use in disease prevention, early detection, and primary care. Expected outputs include policy recommendations to inform the ASEAN AI for Health working group and the outline of a regional framework for AI-enabled preventive healthcare, directly supporting PED 14.

Finally, the **ASEAN Digital Health Interoperability and Regulatory Harmonization Laboratory** is designed as a technical working platform for regulators and digital health leaders. It aims to accelerate readiness for interoperable digital health systems and regulatory convergence consistent with DEFA, including the use of regulatory reliance, common submission dossiers, and aligned cybersecurity frameworks. The paper emphasizes that such convergence can reduce regulatory burden, shorten time-to-market for essential innovations, and allow regulators to focus resources on post-market surveillance and patient safety while retaining national decision-making authority.

For policymakers, the value proposition of these initiatives lies in their practicality and strategic fit. The programs are explicitly designed to be implemented alongside ASEAN sectoral meetings, to leverage private sector expertise without displacing government leadership, and to deliver visible outcomes within the Chairship year. At the same time, they reinforce longer-term ASEAN objectives by embedding disease prevention, digital transformation, and resilience into health systems strengthening. As emphasized in the concluding section of the paper, these initiatives provide structured platforms for public-private collaboration, support investment and capacity building, and help ensure that the Philippines' 2026 ASEAN Chairship delivers a substantive, forward-looking healthcare agenda with lasting regional impact.

I. Context and Rationale

The US-ASEAN Business Council (USABC), together with select member companies, has developed this implementation-focused discussion paper to support the Philippines' ASEAN Chairship in 2026. The paper consolidated private sector perspectives into actionable, high-impact, and regionally scalable recommendations to guide upcoming high-level roundtable discussions with government and industry.

This discussion paper is one of five Philippines-focused papers organized around the following priority pillars identified by the USABC:

- (1) Sustainability and Food Security;
- (2) Healthcare;
- (3) Sustainable Supply Chains and Logistics;
- (4) Digital Economy and Workforce Development; and
- (5) Artificial Intelligence (AI).

In addition to outlining key issues and priorities, the paper proposes concrete initiatives aligned with ASEAN priorities to help guide Philippine government decision-makers as they shape the Chairship agenda and associated deliverables.

This paper builds on Malaysia's legacy as ASEAN Chair (See Appendix 1), particularly its role in shaping the *ASEAN 2025: Forging Ahead Together* blueprint and advancing the ASEAN Economic Community's vision of a unified, competitive, inclusive, and globally integrated region. Drawing from the joint [USABC-SERI white paper](#) that identified priority areas under Malaysia's leadership, such as digital transformation, AI, the green economy, energy transition, workforce upskilling, healthcare innovation, and inclusive growth, USABC seeks to carry forward this momentum into the Philippines' ASEAN Chairship in 2026, supporting continuity across leadership terms, and facilitating a seamless transition to Singapore's turn as Chair in 2027.

II. Background of the Discussion Paper

The ASEAN region is undergoing a major transition in its healthcare landscape, shaped by demographic and epidemiological changes and rising expectations for health system performance. Southeast Asian nations are experiencing a shift from infectious to chronic disease burdens within a relatively short period, often before health systems have fully matured in terms of financial stability, workforce capacity, and service integration. This accelerated transition places sustained pressure on systems historically oriented toward acute and episodic care.

These dynamics underscore the importance of regional dialogue on how ASEAN can strengthen preventive healthcare, improve system efficiency, and leverage innovation while maintaining equity and sustainability.

A. Rising Burden of Noncommunicable Diseases

Noncommunicable diseases (NCDs) account for a substantial and growing share of morbidity and mortality across ASEAN, representing more than half of all deaths in the region, or approximately 9.5 million persons annually, with a significant proportion occurring prematurely before age 70 (WHO South-East Asia Regional Office, 2019).

Cardiovascular diseases remain the leading contributor to premature NCD mortality. Long-term analyses indicate that cardiovascular diseases are the primary cause of death in ASEAN countries over the past three decades, with persistent disparities in access to specialized care and treatment across the region (The Lancet Public Health, 2025).

Beyond health outcomes, the economic impact of NCDs is staggering. The direct economic losses from cardiovascular disease and diabetes combined in Myanmar, Indonesia, Philippines, Thailand, and Vietnam reached USD 7 billion between 2006 and 2015. At the macroeconomic level, the cost of inaction on NCDs in low- and middle-income countries is projected at USD 7 trillion between 2011 and 2025. Moreover, mental disorders alone are projected to cost USD 16 trillion in lost economic output globally between 2011 and 2030—more than cancer, diabetes, and respiratory diseases combined.

B. Healthcare Workforce and Service Capacity Constraints

In parallel with rising NCD burdens, many ASEAN health systems face critical and persistent healthcare workforce constraints. Several Member States remain below internationally recognized thresholds for health worker density.

According to a 2011 study in *The Lancet*¹, five ASEAN countries (Indonesia, Vietnam, Laos, Cambodia, and Myanmar) fall below the World Health Organization (WHO) threshold of 2.28 doctors, nurses, and midwives per 1,000 population. The average ratio of nurses to the general population in Europe is 10 times higher than in Southeast Asia.

Country-specific healthcare workforce challenges are also severe. The Philippines faces a shortage of 127,000 nurses, which is expected to rise to 250,000 by 2030 (Reed, 2025). In 2022, Vietnam's nurse-to-physician ratio is about 2:1, while the global average is 4:1 (Vietnam News, 2022). Cambodia has an acute shortage of healthcare professionals in rural areas—where 80% of Cambodians reside—resulting in infant mortality rates three times higher than in urban areas (Sorn, 2025). Many healthcare workers are concentrated in urban areas and private facilities, leaving rural and underserved populations without adequate access to care.

¹ See Churnrurtai Kanchanachitra, Magnus Lindelow, Timothy Johnston, Piya Hanvoravongchai, Fely Marilyn Lorenzo, Nguyen Lan Huong, Siswanto Agus Wilopo, Jennifer Frances dela Rosa, Human resources for health in southeast Asia: shortages, distributional challenges, and international trade in health services, *The Lancet*, Volume 377, Issue 9767, 2011, Pages 769-781, ISSN 0140-6736, [https://doi.org/10.1016/S0140-6736\(10\)62035-1](https://doi.org/10.1016/S0140-6736(10)62035-1).

C. Consumer Education and Empowerment Strategies in Other Countries

Globally, consumer education and empowerment have emerged as primary strategies for improving health and nutrition outcomes, with countries like Australia, Singapore, and Chile demonstrating success through comprehensive food labeling systems combined with public awareness campaigns (World Health Organization, 2013). These approaches prioritize equipping consumers with knowledge and tools to make informed dietary choices through front-of-package nutrition labels, multi-channel health education, and mobile health applications that enable sustainable behavioral change without imposing financial burdens on vulnerable populations (World Health Organization, 2013). Evidence from these countries shows that when standardized nutrition labeling is paired with consumer education initiatives, populations can shift dietary behaviors toward healthier choices while maintaining health equity across diverse socioeconomic contexts (World Health Organization, 2013).

D. Universal Health Coverage Progress

According to WHO data from 2019, the average Universal Health Coverage (UHC) service coverage index in ASEAN Member States is 67.80 for essential health services based on tracer interventions including reproductive, maternal, newborn, and child health; infectious diseases; NCDs; and service capacity and access (ASEAN Socio-Cultural Community, 2024). While ASEAN Member States have made considerable progress toward UHC, with Singapore achieving comprehensive coverage through a hybrid financing system, significant gaps remain. Health financing systems in the region remain heavily skewed toward curative care, with inconsistent depth of coverage for preventive programs and diagnostics.

E. Digital Health and Interoperability Challenges

Health information systems across ASEAN remain largely non-interoperable, limiting coordinated action, disease surveillance, and evidence-based policymaking. This fragmentation creates inefficiencies and prevents coordinated care across institutions and borders. The region's health systems display fragmentation from vertical disease programs provided by international donors, leading to underutilized equipment and missed opportunities for integrated service delivery.

F. Geographic Barriers to Access

The geography of ASEAN, marked by large archipelagic countries like Indonesia and the Philippines, alongside mountainous regions in Vietnam and Laos, creates unique challenges for healthcare delivery. This geography necessitates hybrid models combining Point-of-Care (POC) testing with empowered community health workers in remote areas and centralized laboratory hubs with efficient sample transport systems in urban areas.

G. Opportunities for ASEAN

Institutional Foundations and Regional Cooperation

Despite these challenges, ASEAN possesses institutional and policy advantages that create opportunities to strengthen transformative health systems. The existing regional architecture for health cooperation, which includes the ASEAN Health Clusters² and the ASEAN Center for Public Health Emergencies and Emerging Diseases (ACPHEED), provides established mechanisms for coordination and knowledge sharing. Member States have accumulated substantial experience from prior epidemics, including SARS, H1N1, and COVID-19, which is foundational for regional capacity building and unified response.

The growing political commitment to universal health coverage and improved primary healthcare delivery reflects readiness for systematic health investments. Preventive health interventions such as vaccination, nutrition programs, and population screening are receiving increased attention at the regional level, creating momentum for strategic shifts towards prevention-focused health systems.

Technology and Innovation

Technological advancement presents significant opportunities for innovation and efficiency gains across ASEAN health systems. The rapid expansion of digital health tools, AI applications, and improved surveillance technologies enables early detection of cancers, cardiovascular diseases, infectious outbreaks, and diseases related to lung health, shifting systems from reactive treatment to proactive prevention. Digital platforms offer enhanced capabilities for monitoring supply chains, vaccine distribution, and health financing systems, improving transparency and accountability. Strengthened primary care models supported by these technologies can extend preventive services to underserved populations. A growing policy window to integrate preventive healthcare into economic planning allows Member States to position health investments as drivers of productivity and inclusive growth rather than purely social expenditures.

Evidence-Based Health Promotion Frameworks

The convergence of regional policy frameworks creates favorable conditions for implementing evidence-based health promotion and prevention strategies. The WHO Global Action Plan for the Prevention and Control of Noncommunicable Diseases 2013–2020 demonstrates that health education and health literacy represent the most scalable and cost-effective interventions for reducing healthcare expenditure and system strain (WHO, 2013). The Shanghai Declaration on Promoting Health in the 2030 Agenda for Sustainable Development shows how health literacy empowers individuals and communities to engage actively with health systems, while multi-sectoral action creates environments where healthy choices become accessible and sustainable (WHO, 2016). These global frameworks provide ASEAN with proven approaches and methodologies that can be adapted to regional contexts and implementation capacities.

² ASEAN Health Clusters serve as the operational coordination mechanisms for implementing the ASEAN Post-2015 Health Development Agenda, translating policy directions from the ASEAN Health Ministers Meeting (AHMM) and the SOMHD into regional health programs through cluster-specific work plans led by ASEAN Member States' Ministries of Health, with support from the ASEAN Secretariat.

Policy Integration and Multi-Sectoral Approaches

ASEAN's evolving policy architecture, which includes the ASEAN Post-2025 Health Development Agenda emphasizing preventive care and community-based interventions, and the Kuala Lumpur Declaration on ASEAN 2045: Our Shared Future reinforcing people-centered development (ASEAN, 2025), enables comprehensive implementation of prevention strategies. Member States can leverage opportunities to move beyond fiscal measures alone, implementing integrated approaches encompassing consumer education, transparent labeling, product reformulation, universal screening programs, social prescribing³, and early intervention strategies utilizing predictive analytics. Multi-sectoral governance frameworks implementing "Health in All Policies" principles create opportunities to engage private sector entities as partners in health outcomes and integrate health considerations into urban planning, education systems, and economic development strategies. Integrating health considerations in various aspects of development leads to achieving population health improvements that support broader sustainable development objectives.

III. Key Priorities and Alignment with Priority Economic Deliverables

Reflecting perspectives gathered through consultations with USABC members, this section outlines key priorities relevant to ASEAN healthcare cooperation and their alignment with the Priority Economic Deliverables (PEDs) identified by the Philippines' for its 2026 ASEAN Chairship.

A. Digital Health Integration and Interoperability

USABC members consistently emphasize the importance of advancing digital health integration and data interoperability across ASEAN. Fragmented health information systems limit coordinated care, disease surveillance, and evidence-based policymaking. Greater interoperability, through a system that allows electronic medical records, diagnostic data, and public health inputs to move securely across institutions and across borders, is among those advocated by the members.

B. Regulatory Convergence and Procurement Reform

A second priority is regulatory harmonization and procurement reform to accelerate access to medicines, essential diagnostics, medical devices, and digital health technologies. Members highlight that inconsistent regulatory pathways and unpredictable review periods can delay the delivery of high-quality healthcare products. To accelerate safe, equitable access to digital health innovations and trusted digital health implementation, members propose to implement regulatory reliance, attain convergence on international regulatory standards and guidelines, and establish fit-for-purpose digital health regulatory frameworks that enable innovation and iterative improvement while safeguarding patients and consumers.

³ Social prescribing is an approach connecting individuals to community support services to improve health and well-being (Lancet, 2026).

C. Artificial Intelligence for Preventive Care

USABC members strongly support AI-enabled preventive healthcare. AI tools for early detection of cardiometabolic diseases, cancers and infectious diseases, can strengthen primary healthcare and shift systems toward prevention. Members emphasize that responsible AI deployment must be accompanied by robust data governance, transparency, and health literacy to ensure equitable and effective use.

D. Workforce Development

Workforce development is viewed as essential to successful digital preventive health transformation. Members underscore the need for expanded training in health data science, digital health management, epidemiology, clinical analytics, and logistics. Additionally, regulator-specific capability building in digital health is needed to support oversight of digital health technologies, including pre- and post-market evaluation of AI-enabled tools, cybersecurity enforcement, and governance of cross-border data flows.

E. Health Supply Chain Resilience

USABC members emphasize the importance of strengthening health supply chains, including cold chain reliability, vaccine security, diagnostic distribution, and emergency logistics, recognizing that resilient and transparent supply networks are essential to ensuring timely and equitable access to essential medicines and technologies and safeguarding public health during both routine care and crisis situations.

F. Alignment with Priority Economic Deliverables (PEDs)

These priorities align closely with several PEDs for 2026. PED 14 on AI for Health establishes a regional program for safe, ethical, and effective adoption of AI in health, directly supporting member interests in digital diagnostics, early detection tools, and data governance.

The ASEAN Digital Economy Framework Agreement (DEFA) is also relevant, as it provides the foundation for secure cross border data flows and interoperable digital systems that are essential for digital health. Member concerns on interoperability and harmonized data governance fall squarely within DEFA implementation.

Member priorities likewise align with PED 11 related to micro, small, and medium enterprises (MSME) through community-based preventive healthcare models and local health networks. PED 18, which addresses investment promotion, also aligns with expansion of regional investments in diagnostics, medical technology, and supply chain infrastructure.

IV. Proposed Activities and Projects For 2026

The Healthcare Initiative proposes a portfolio of four high impact programs to support the Philippines' ASEAN Chairship in 2026. Together, these projects are designed to advance regional cooperation in preventive healthcare, digital health, supply chain resilience and nutrition, while supporting PEDs, including PED 14 on AI for Health.

While each project addresses a distinct policy and implementation gap, they are intended to mutually reinforce and collectively contribute to coherent ASEAN approaches to preventive, resilient and innovation-enabled health systems.

A. Proposed Project One: ASEAN Preventive Health Systems Accelerator

This first project seeks to establish an ASEAN Preventive Health Systems Accelerator—a public-private platform designed to translate evidence-based preventive health policies into scalable, region-ready pilots. The Accelerator would focus on advancing proven, high-impact preventive interventions that strengthen health systems, empower consumers, and improve population health outcomes across ASEAN Members states.

Consistent with the health promotion and prevention principles outlined in Section II, the Accelerator reflects WHO's all-of-society approach, prioritizing health literacy, consumer empowerment, and system-level enablers of sustainable behavior change. Prevention interventions—particularly those centered on nutrition, education, and early detection (e.g. diseases related to lung health and cardiovascular diseases)—represent the most scalable intervention available to ASEAN benefiting both rural and urban populations alike while reducing healthcare expenditures.

Recognizing that fiscal measures such as food and beverage taxation alone may have limited effectiveness in changing consumer behavior and may disproportionately affect low-income populations, the Accelerator would prioritize consumer education and empowerment as primary strategies for improving health and nutrition outcomes. These include consumer education, transparent information tools, and institutional capacity-building to improve health and nutrition outcomes without imposing additional financial burdens on vulnerable groups.

Specific strategies include: (1) Development of ASEAN-wide standardized front-of-package nutrition labeling systems that provide clear, actionable information to consumers, building on successful models such as traffic light labeling or health star ratings; (2) Multi-channel public health awareness campaigns utilizing traditional and digital media to educate consumers about reading nutrition labels, understanding portion sizes, and making informed dietary choices; (3) School-based nutrition education programs that reach children and families with practical guidance on healthy eating patterns and prevention of diet-related NCDs; (4) Community health worker training programs to deliver culturally appropriate nutrition counseling at the grassroots level; and (5) Mobile health applications and digital tools that help consumers track nutritional intake, identify healthier alternatives, and receive personalized dietary recommendations.

Expected outputs would include a portfolio of leading preventive health innovations and pilot opportunities that can be matched with USABC members' support. A cornerstone component addresses hospital malnutrition, which affects up to 50% of inpatients and increases length of stay, complications, readmissions, and mortality, by advancing ISO standards for prevention, detection, and treatment of undernutrition in hospitals aligned with global normative frameworks. This initiative supports UN Sustainable Development Goal 3 on health and well-being, particularly Universal Health Coverage (Target 3.8), the UN Decade of Action on Nutrition extended to 2030, WHO's ICD-11 code 5B72 for undernutrition in adults, and the Vienna Declaration recognizing nutrition care as a human right, while aligning with USABC members' expertise in nutrition and malnutrition reduction across the region.

B. Proposed Project Two: ASEAN Health Supply Chain Resilience and Cold Chain Security Program

The second project focuses on addressing documented weaknesses in the region's health commodity supply chains, including vaccines, diagnostics, and essential medical products. Its objective is to strengthen regional preparedness for public health emergencies while improving the reliability of routine delivery mechanisms. Supply chain resilience plays a critical role in enabling access to preventive health interventions, including vaccines, diagnostic tools, and nutritional supplements required for community-based screening programs and primary healthcare delivery. The program would incorporate environmental and social governance (ESG) principles, promoting sustainable supply chains and climate-resilient sourcing for nutrition and medical devices to ensure long-term system sustainability and environmental stewardship.

The initiative would also integrate gender-sensitive approaches to ensure equitable access, particularly addressing maternal and child health disparities in supply chain planning. Activities would include an assessment of health supply chain gaps incorporating climate vulnerability analysis, training for health logistics officers on sustainable cold chain management, and the development of model standards for temperature-controlled logistics, traceability systems, and low-bandwidth digital solutions, ensuring equitable access for underserved and remote populations.

These efforts could support the development of a regional health supply chain mapping report with ESG metrics. Other expected outcomes would include technical recommendations for integration with ACPHEED emergency response protocols and affordability strategies utilizing social protection vouchers and blended financial models. Among the key stakeholders are the ministries of health, customs and logistics agencies, private sector cold chain providers, WHO, United Nations International Children's Emergency Fund (UNICEF), and academic and private sector partners.

C. Proposed Project Three: ASEAN High Level Forum on Artificial Intelligence for Health and Preventive Healthcare

This initiative would support the development of a shared ASEAN approach to the responsible use of AI in preventive healthcare.

The forum would convene senior health officials, scientific experts, and private sector leaders to advance a regional vision for AI in preventive healthcare, facilitating focused discussion on the applications of AI in public health, including early detection tools for NCDs, AI-supported infectious disease prediction systems, and responsible data governance mechanisms. It would also explore opportunities for integrating AI into primary healthcare delivery, including the deployment of connected diagnostic devices with algorithm-driven screening programs for chronic disease management. The forum would emphasize that effective AI deployment must be complemented by strong health literacy programs and workforce readiness to ensure equitable adoption and effective real-world impact, consistent with the principles outlined in Section II and the Philippines' Chairship priorities outlined in Appendix 2.

Expected outputs would include a set of recommendations for the ASEAN working group on AI for Health and a draft outline for a regional framework on AI-enabled preventive healthcare. Key stakeholders would include health officials, the ASEAN Committee on Science, Technology and Innovation (COSTI), the ASEAN Centre for Public Health Emergencies and Emerging Diseases (ACPHEED), the World Health Organization (WHO), academic institutions, and private sector partners.

D. Proposed Project Four: ASEAN Digital Health Interoperability and Regulatory Harmonization Laboratory

This project would serve as a technical working session for digital health leaders and regulators across ASEAN. The objective is to accelerate the readiness of ASEAN Member States for interoperable digital health platforms, consistent and internationally converged regulatory standards, and data governance models aligned with the ASEAN DEFA. Recognizing that digital tools can only be maximized with health-literate populations, the Laboratory would explore how interoperability can support community-based primary healthcare delivery and health education programs. The program would involve practical demonstrations, case studies, and technical design sessions exploring electronic medical record integration, diagnostic data frameworks, disease surveillance, and secure cross-border data exchange.

Key principles for regulatory harmonization include (1) embedding regulatory reliance principles in ASEAN through the ASEAN Medical Device Directive (AMDD) and Global Harmonization Working Party (GHWP) to drive regulatory harmonization and reduce the burden of resources within regulators; (2) strengthening international harmonization with the International Medical Device Regulators Forum (IMDRF), WHO, and OECD; and (3) promoting regulator capability building and regulatory sandboxes.

Outputs would include an ASEAN digital health interoperability blueprint, a regulatory harmonization assessment, and a set of technical proposals submitted to the ASEAN Senior Officials' Meeting on Health Development (SOMHD) and DEFA implementation bodies. These proposals may include:

- Institutionalized regulatory reliance for Software as a Medical Device (SaMD) and AI in health to be consistent with WHO and IMDRF, where national authorities may give weight to trusted assessments from reference regulators and workshare within ASEAN, while retaining sovereign decision-making and focusing resources on post-market vigilance. Pre-market submissions would

use the AMDD-anchored ASEAN Common Submission Dossier Template (CSDT) to streamline dossiers.

- Proposals on cybersecurity aligned with IMDRF's Cybersecurity Framework and guidelines to avoid independent regulation outside of regulations covering products classified as medical devices or in vitro diagnostics (IVDs).
- Regulator-specific capability-building programs in digital health and relevant frameworks to evaluate implementation of pre- and post-market AI and software oversight, enforcement of cybersecurity, and governance of cross-border privacy transfers. This includes the technical training on real-world evidence generation and AI governance for medical device software.
- Fast lane regulatory pilots for priority product categories, including medical nutrition products, connected diagnostic devices, and biosimilars, demonstrating expedited pathways that maintain rigorous safety standards while reducing time-to-market for innovations addressing regional health priorities.

V. Matters for Roundtable Consideration

The roundtable discussions are intended to facilitate open and constructive exchanges on priorities, feasible actions, and practical pathways for advancing healthcare initiatives during the 2026 Philippine Chairship.

Recognizing the time, resource, and coordination constraints inherent in a Chairship year, the roundtables aim to provide an opportunity to identify areas where focused public-private collective efforts may generate the greatest impact. The discussions are designed to be exploratory and inclusive, helping surface shared perspectives and realistic opportunities for cooperation.

The discussions will seek to:

- Invite government reflections on private sector perspectives on healthcare and the use of AI within this sector;
- Exchange views on the feasibility and timing of proposed activities outlined in this paper; and
- Explore how private sector engagement, where appropriate, can complement public sector efforts.

VI. Conclusion

Taken together, these initiatives provide an implementation-ready framework for strengthening ASEAN healthcare systems in line with Philippine ASEAN Chairship priorities. They operationalize PED 14 on AI for Health, advance DEFA implementation through concrete health applications, embed preventive care into national systems, and reinforce health supply chain resilience. Importantly, they establish structured platforms for sustained private sector participation and investment. Through these programs, the Philippines can anchor its Chairship in tangible, forward-looking deliverables that strengthen ASEAN's long-term resilience and economic competitiveness.

Appendices

Appendix I: Healthcare and Life Sciences Achievements from Malaysia's 2025 ASEAN Chairship

Under the theme "Inclusivity and Sustainability," Malaysia's 2025 ASEAN Chairship advanced several healthcare and life sciences priorities that provide a foundation for the Philippines' 2026 Chairship:

- **Social Protection and Health Systems Strengthening:** Reaffirmed ASEAN commitments to strengthening social protection in health through programmatic implementation of key declarations, including the Declaration on Strengthening Social Protection in ASEAN, and frameworks addressing older persons' health, disability-inclusive development, gender equality, and family development (Chairman's Statement of the 26th ASEAN Plus Three Foreign Ministers' Meeting, 2025).
- **Aging and Life-Course Health:** Advanced cooperation on aging populations through the Kuala Lumpur Declaration on Ageing: Empowering Older Persons in ASEAN and the successful convening of the ASEAN+ROK Conference on Care and Support for Older Persons (30 June-1 July 2025), addressing the growing health needs of aging populations across the region (Chairman's Statement, 26th ASEAN Plus Three Foreign Ministers' Meeting, 2025).
- **Digital Health and Innovation Foundations:** Advanced negotiations on the Digital Economy Framework Agreement (DEFA) toward signing in 2026, establishing the digital infrastructure foundation essential for cross-border health data flows, telemedicine, and interoperable digital health systems. DEFA aims to double the region's digital economy from USD 1 trillion to USD 2 trillion by 2030, with significant implications for digital health innovation (CONFIDENTIAL PED Summary, 2025).
- **Health Security and Emergency Preparedness:** Emphasized regional collaboration on health emergencies and pandemic preparedness through the 32nd ASEAN Regional Forum, reinforcing preventive diplomacy and confidence-building measures relevant to health security cooperation (Chairman's Statement of the 32nd ASEAN Regional Forum, 2025).
- **Sustainable Development Goals Implementation:** Reiterated ASEAN Plus Three commitment to advancing cooperation in promoting sustainable, inclusive, and innovative development aligned with the United Nations Sustainable Development Goals (SDGs), including SDG 3 on health and well-being (Chairman's Statement, 26th ASEAN Plus Three Foreign Ministers' Meeting, 2025).
- **ASEAN Community Vision 2045:** The Kuala Lumpur Declaration on ASEAN 2045: Our Shared Future established a comprehensive 20-year strategic roadmap emphasizing resilience, innovation, and people-centered development, with health system strengthening as a core component of inclusive and sustainable regional growth (ASEAN, 2025).

These achievements establish continuity for the Philippines' 2026 Chairship to advance AI in health (PED 14), digital health interoperability through DEFA implementation, preventive healthcare strengthening, and health supply chain resilience; building on Malaysia's foundation of inclusivity and sustainability.

Appendix 2: Proposed Projects Alignment with Philippine PEDs and Member Companies' Priorities

Project	Aligned PEDs	Member Company Priorities
Project 1: ASEAN High-Level Forum on AI for Health and Preventive Healthcare	PED 14 (AI for Health), DEFA (PED 8)	<ul style="list-style-type: none"> • AI-enabled preventive healthcare • Early detection tools for NCDs • Digital health integration • Data governance • Regulatory reliance principles
Project 2: ASEAN Digital Health Interoperability and Regulatory Harmonization Laboratory	DEFA (PED 8), PED 14 (AI for Health)	<ul style="list-style-type: none"> • Digital health integration • Data interoperability • Regulatory harmonization and reliance • Procurement reform • Regulator capability building
Project 3: ASEAN Preventive Healthcare Innovation Challenge	PED 11 (MSME Center), PED 14 (AI for Health), PED 18 (Investment Promotion)	<ul style="list-style-type: none"> • AI-enabled preventive healthcare • Digital health integration • Workforce development • Community-based healthcare • Malnutrition standards
Project 4: ASEAN Health Supply Chain Resilience and Cold Chain Security Program	PED 1 (Strategic Trade Management), PED 18 (Investment Promotion)	<ul style="list-style-type: none"> • Health supply chain strengthening • Cold chain reliability • Vaccine security • Emergency logistics resilience

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