

## PHILIPPINE HEALTH INSURANCE CORPORATION (PhilHealth)

Component					Annual Target	2nd Quarter		
	Strategic Objective (SO)/ Strategic Measure(SM)		Formula	Weight		Rating System	Target	Actual
	SATISFIED CLIENTS	SO 1 Total Client Experience	SM1 Percentage of Satisfied Clients	Number of respondents who rated PhilHealth service with at least Satisfactory/ Total number of respondents	10%	(Actual/Target) x Weight  Below 80% = 0%	≥ 90%	≥ 90%
<i>Sub-total</i>			10%					
SO 2 Responsive Benefits		SM 2 % of Eligible Members Availed of the No Balance Billing	Total Number of Surveyed NBB Claims/ Total Number of Surveyed NBB-Eligible Claims	10%	(Actual/Target) x Weight	≥ 90%	≥ 90%	<b>84.76%</b> (193,622/228,515)

**PES Form 4**  
**2nd Quarter Monitoring Report for 2019**

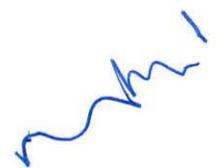
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	SM 3 Improvement of Provider- Payment Mechanism	Actual Accomplish ment	10%	All or Nothing	1. Conduct capacity building of accredited health care providers per area;  2. Conduct capacity building of PhilHealth technical staff on data analysis of the cost data; and,  3. Management ExeComm-approved policy on the institutionalization of the regular submission of cost data, as part of the Performance Commitment, by all accredited health care providers.	1. Conduct capacity building of accredited health care providers per area;  2. Conduct capacity building of PhilHealth technical staff on data analysis of the cost data; and,  3. Management ExeComm-approved policy on the institutionalization of the regular submission of cost data, as part of the Performance Commitment, by all accredited health care providers.	1. Conducted orientation on the costing framework and data collection tools for selected HCIs in NCR.  2. Conducted orientation on the costing framework and data collection tools for selected officers and technical staff in PRO NCR and PROs in Areas I, III and IV  3. Board approved PhilHealth Costing Framework and Data Collection Tools, Institutionalization of regular costing of health services and Development of IT solutions in support to the institutionalization of costing (per PBR No. 2347, s. 2019)  Policy on the Institutionalization of PhilHealth costing and data collection forms drafted.
<b>Sub-total</b>			<b>20%</b>				

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	<b>SUSTAINABLE FUND</b>	SO 3 Revenue Generated	SM 4 Improve Collection Efficiency Rate	Actual Collection/ Potential Collection	10%	(Actual/ Target) x Weight	≥95%  <i>(Formal and Informal economies, and overseas Filipinos)</i>	≥95%  <i>(Formal and Informal economies, and overseas Filipinos)</i>
SO 4 Optimized Asset		SM 5 Increase in Benefit Expense to Premium Income Ratio	Benefit Expense/ Premium Income	10%	[100% - (Actual- Target)/Target]	1:1	1:1	<b>0.99:1</b>  (P67.22B : P67.60B)
<b>Sub-total</b>				<b>20%</b>				
<b>EXCELLENT PROCESS</b>	SO 5 Boost innovation in Research, Policy and Process	SM 6 Implement Quality Management System	Actual Accomplish ment	10%	All or Nothing	Maintain ISO 9001:2015 certification covering all sites and processes	Maintain ISO 9001:2015 certification covering all sites and processes	<b>Continuing implementation of ISO 9001:2015</b>

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SO 6 Ensure Operational Effectiveness and Efficiency	SM 7 Potential Fraud Incidence  (Fraud Risk Index)	Third-party rating	5%	All or Nothing	Implementation and Establishment of Baseline	Implementation and Establishment of Baseline  Fraud Risk Index	Ongoing data analysis of the Third-party
	SM 8 Increase in the Percentage of Cases Disposed	Number of Cases Disposed (resolved or filed with charges)/ Total number of cases	15%	All or Nothing	Establish Baseline	Establish Baseline	<u>FACT-FINDING AND INVESTIGATION ENFORCEMENT DEPARTMENT</u>  38.70% (291/751)  <u>PROSECUTION</u> 4.74% (29/611)  <u>ARBITRATION</u> 0 % (0/115)



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SO 7 Strengthen Customer and Partner Relations	SM 9 Percentage of Good Claims Within Applicable Time	Number of Good Claims Processed within Applicable Processing Time/ Total Number of Claims	10%	(Actual/Target) x Weight  If Below 90% = 0%	100%	100%	<p><b>98% *</b></p> <p>(4,738,150/ 4,831,059)</p> <p>Within 60 Days*</p> <p>* All claims for reimbursement or payment for services rendered shall be filed within a period of sixty (60) calendar days from the date of discharge of the patient from the health care provider (RA 10606 Revised IRR Article VIII Section 35).</p>
<b>Sub-total</b>			<b>40%</b>				

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STRONG FOUNDATION	SO 8 Ensure Organizational Alignment and Workforce Engagement	SM 10 Percentage of Employees Meeting Required Competencies	Actual Accomplishment	10%	All or Nothing	Development of Position Profile and Competency- Based Job Description	Development of Position Profile and Competency-Based Job Description	<ul style="list-style-type: none"> <li>• <b>Position Profile</b> 96% Position drafted; on-going review and refinement with Business Process Owners</li> <li>• <b>Competency-Based Job Description (CBJD)</b> 97% with initial submission; on-going refinements with Business Process Owners</li> </ul>
	<b>Sub-total</b>			<b>10%</b>		Establishment of Baseline	Establishment of Baseline	
	<b>Total</b>				<b>100%</b>			

