



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
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OFFICE ORDER

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SUBJECT : **2012 CORPORATE THRUSTS**

The Aquino Health Agenda aims to achieve Universal Health Care (UHC) or “Kalusugan Pangkalahatan” (KP) for all Filipinos. The three strategic objectives of UHC/KP are: 1) financial risk protection, 2) improved access to quality hospital and healthcare facilities, and 3) attainment of health-related Millennium Development Goals.

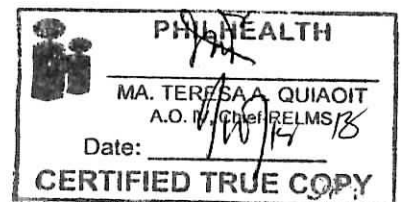
As the prime mover in effecting the reforms of UHC, PhilHealth must pursue policy reforms that will catalyze the achievement of UHC to ensure that **nobody** gets left behind as health reforms move forward.

The following encapsulates the four main thrusts of the new and revitalized PhilHealth, and sets forth some of the corresponding initiatives:

A. Satisfied and Empowered Beneficiaries and Stakeholders

- To enroll all Filipinos into the National Health Insurance Program and ensure that their membership is sustained
 - To institute policies that facilitate enrolment and ensure renewal (*two-year policy contracts*)
 - To engage and earn continuous support of LGUs
 - To measure coverage effectively *through Oplan Total Head Count (UMID data capture initiative)*
 - To make PhilHealth’s *Health Insurance Card (HI Card)* a recognized government-issued transactional identification card

- To provide financial risk protection
 - To reduce and eliminate members’ out-of-pocket expenditures *by intensifying the implementation of No Balance Billing Policy (NBB) for government providers and expanding NBB to private providers*
 - To expand benefits to cover outpatient services, diagnostics and drug treatment packs *through the Primary Care Benefit Package*



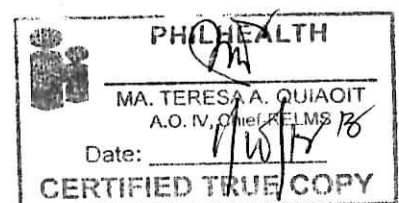
- To provide additional benefits to vulnerable membership groups (*e.g. senior citizens and children under five years old*)
- To develop and/or participate in programs that provide additional benefits to PhilHealth members (*Catastrophic Illness Relief Fund with PCSO, PAGCOR, President's Social Fund and Philhealth Plus*)
- To create an enabling environment to promote the appropriate use and ease of availment of quality outpatient and inpatient services at accredited facilities
 - To ensure that benefits are comprehensible *by shifting to case payment scheme for all services*
 - To institute policies that simplify availment (*eclaims, link with HMOs*)
 - To ensure that gatekeeping mechanism is put in place *through the Primary Care Benefit*
- To increase the level of knowledge and satisfaction of stakeholders as to the NHIP
 - To maximize all available resources to educate members about their entitlements (*CHTs, RNheals, DSWD Family Development Seminar, PhilHealth Cares, selected advocacy groups – NGOs and academe*)
 - To establish baseline and regularly measure level of knowledge and satisfaction *by conducting regular nationwide surveys*
 - To strengthen linkages and networking with stakeholders *through a comprehensive and sustainable communication plan which allows for a regular feedback mechanism*
- To promote physical access to providers by facilitating investments in remote and high-risk areas *through Access Benefit*
- To promote improvement in the quality of care provided *by instituting Performance Commitment Contracts in place of the Warranties of Accreditation and by providing incentives linked to performance and accreditation status*

B. Excellent Business Processes

- To institute policy and implement procedural, information and communications technology reforms towards operational excellence
 - To establish and maintain an updated, accurate, and secured database
 - To establish and maintain an integrated information system
- To promote transparency in operations
 - To establish and maintain an online e-procurement system
 - To engage academic and research institutions and share declassified PhilHealth database
- To aspire for International Organization for Standardization (ISO) accreditation

C. Viable Social Health Insurance Fund

- To improve the corporation's financial stability



- To ensure effective and efficient collection of arrears and current premium contributions
- To ensure sufficiency of premium collection against benefit payment and other expenses
- To ensure effective and efficient financial management

D. Adequate Organizational Capability

- To maximize the corporation's information and communications technology infrastructure to aid evidence-based policy and decision-making
 - To establish an automated dashboard/reporting system
- To promote and maintain a highly competent and productive workforce
 - To define job level competencies, provide appropriate training and develop corresponding assessment tool
 - To promote a performance-driven, customer-centered culture
 - To provide and maintain a healthy, conducive working environment
 - To provide adequate equipment and facilities (e.g. providing motor vehicles for all Local Health Insurance Offices)
 - To review the staffing requirements including possible regularization of project-based and contractual staff

All sectors, offices, departments, regional and service offices are hereby directed to prepare their respective activities and initiatives, in line with and in pursuance of the above-stated organizational thrusts.

The harmonized *PhilHealth UHC Development Plan*, including indicators and yearly targets from 2012 - 2016, shall be published after consultation with central office and regional office representatives.

For the information and compliance of all concerned.

DR. ^{EPZ}EDUARDO P. BANZON
President and CEO

