ENGAGEMENT OF HEALTH INFORMATION TECHNOLOGY PROVIDERS TO FACILITATE ELECTRONIC CLAIMS SUBMISSION EFFECTIVE APRIL 2017

In compliance to PC 2016-0016, stating the guidelines on Full Implementation of the Electronic Claims System, the Health Care Institutions shall engage with a Health Information Technology Provider (HITP) to facilitate the electronic claims submission effective April 2017.

The Health Care Facilities are given the option to select from the seven (7) accredited HITPs that can provide their specific requirements.

As a guide to eClaims schedule of implementation and selection of appropriate HITPs, PhilHealth is dissemanating the eClaims Implementation Primer (Version 1.0).

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Electronics Claims System (eClaims) Implementation Primer
(Version 1.0)

I. Background/Rationale

This document named as eClaims Implementation Primer refers to the *transition phase* for Health Care Institutions (HCIs) to efficiently move from manual to electronic submission of insurance claims data to PhilHealth using Health Information Technology Providers (HITPs). This facilitates compliance to *Philhealth Circular No. 2016-0016 – Full Implementation of Electronic Claims System*. Said PhilHealth Circular serves as reference for the development and implementation of eClaims towards improving operational efficiency for health insurance transactions through the use of information technology. The definition of terms, and eClaims system framework, properties, and implementation guide are included in the Circular for reference purposes.

Production Implementation Environment (PIE) is the phase where eClaims application is already up and running. To date, the PIE is already open to those HCIs who are ready to implement eClaims. PhilHealth recognizes that there are HCIs which are preparing to comply with the full implementation of eClaims. As such, this implementation primer serves as guide to facilitate the implementation of eClaims by providing the recommended minimum activities for transition planning, products and benefits of having HITPs, selection of HITP, and HITP information.

May 1, 2017 is the scheduled date of full implementation which means that (1) all HCIs are submitting insurance claims using eClaims, (2) implementation by each HCIs is fully tested and possible problems already resolved/addressed, and (3) services of accredited HITPs are engaged to comply with the requirements of Philhealth Circular No. 2016-0016. Thus, to provide guidance to the HCIs to achieve the scheduled date of full implementation, this primer is being released to provide the minimum recommended major activities that need to take place within the *transition period, i.e. from now to April 30, 2017*.

II. Transition Phase – Present State to April 30, 2017

The following are the scheduled timeframe for using the existing or manual systems, and recommended minimum activities for the HCIs to achieve the scheduled date of full implementation:

ACTIVITIES	Jan	Feb	Mar	Apr	May
1. Continuing use of the HCI Portal for PhilHealth Benefit Eligibility Verification Module (PhilHealth Circular # 0002-2014)	√	√	√	√	√
2. Submission of Claims using PhilHealth Information and Claims System (PHICS), Soft Copy Claims System (SCLAIMS), and Paper-based Claims Data Entry	√	√	√	-	-
3. Selection of appropriate HITP a. Meeting(s) with HITPs regarding their products/software/applications and/or services (also called as Product) b. Product Demo c. Product Evaluation / Selection and Cost-Benefit Analysis d. Memorandum of Understanding (MOU) / Memorandum of Agreement (MOA) / Contract / Service Level Agreement (SLA) Signing / Other applicable legal documents e. Actual HITP Engagement	√	√	√	√	-
4. Procurement of the necessary resources to run the selected	√	√	√	-	-

	HITP product				
5.	Training of Users / Technical Support if applicable	√	√	√	√	√
6.	Pre-implementation as preparation to May 1, 2017 full implementation a. Submission of the required documents to PhilHealth like MOU/MOA/Contract/SLA and/or Business Engagement Form b. Hardware / Server / Product Installation / Configuration if applicable c. Deployment of other applicable resources like manpower d. HITP Testing e. Data Migration f. Problem Management to address issues/concerns/problems	-	-	-	√	-
7.	Full Implementation : All health facilities using EMRs/HITPs	-	-	-	-	√

III. eClaims Modulesa

a. Claims Eligibility Checking – Currently the PhilHealth Benefit Eligibility Form (provided in the HCI Portal) is the web-based implementation of this module. Initially provided for HCI to have eligibility checking prior to admission. Now the HCI has access to this service directly via the system provided by HITP. This will replace the PBEF Portal as eligibility checking is already incorporated in the HITP applications.

b. Claims Submission – Claims Transport Service provided for HCI to prepare Philhealth claims electronically and send to PHIC. The supporting documents are archived and secured, and also loaded to HITP data centers to be sent to Philhealth data centers at a later time. These encrypted documents shall be accessed by authorized claims adjudicators and used as basis for payment, denial or return to hospital. Compliance to deficient documents shall also be done here.

c. Claims Reconciliation/Status Inquiry – This is where each claims submitted by the facility can be reconciled on the action (Payment, RTS, Denial) of Philhealth on the each claim. The latest status can be monitored and tracked in through this module.

d. Auto-Credit – Though not directly provided as a separate module, this process is already implemented in the current Philhealth internal claims system. It would further reduce the processing time if HCIs are enrolled in the auto-credit payment scheme.

e. Major services/functionalities provide via the eClaims Web Services, among others:

    i. Checking of Doctor / Health Care Provider Accreditation
    ii. Searching of Employer
    iii. Getting member information via the PhilHealth Identification Number

Note: Denied claims can be appealed for Claims review, but this process will take the usual Appeals Process.

Exemptions: The following are currently excluded from eClaims submission but shall be submitted under the current manual process. Philhealth will release a separate issuance once available.

- Primary Care Benefit Package/Tsekap scheme;

- For readjustment of amount claimed;
- Fee-for-service and directly-filed claims
- MERS-COV and EBOLA
- OHAT (Outpatient HIV/AIDS Treatment) package
- Filipinos not yet registered (no Philhealth Identification Number yet). These are unregistered Senior Citizen and 4Ps.
- ZBenefit Claims – This will be included by the 2nd quarter of this year

IV. Products and Benefits of Engaging HITP

The products, software, and/or services provided by the existing HITPs vary, e.g. full Hospital Information System (HIS) and Claims Data Broker / Transport Utility. Product descriptions and benefits are as follows:

1. Hospital Information System

    a. Integrated and fully utilized in every aspect of HCI operations (from admission, outpatient department, emergency room, billing, medical records, doctor's orders, pharmacy charging, laboratory, radiology, other ancillary services, Philhealth claims processing, Department of Health disease registries, and others)
    a. Improve / Optimize work flows
    b. Improve HCI operational efficiency and reduce redundancy in data encoding
    c. Re-down to customer/patient satisfaction due to faster processes during the course of the patients stay in the facility

2. Non-Hospital Information System or Claims Data Broker/Transport Utility

    Hospital with in-house capability can utilize the Claims Data Broker / Transport Utility to comply with eClaims. This is also cost effective considering the required resources to connect directly to Philhealth like data centers that is compliant to international standards like ISO certification, leased line connection / secured tunnel connection, and others security requirements of PhilHealth.

Regardless of the product selected by the HCIs, the major benefit is the reduced complexities in managing the information technology resources since the job of keeping/maintaining the servers, connectivity, provision of technical support or help desk, system troubleshooting, problem management, system enhancements / updates, and other agreed services will be the responsibilities and/or accountabilities of the HITPs. HCIs can shift to other HITPs as provided or stipulated in the MOU/MOA/Contract.

V. Checklist for Selecting a HITP

HCIs must assess or evaluate the product/software/services of the HITPs that satisfy their existing or future environment, information technology direction, and requirements. The checklist below provides the recommended minimum areas to look into to assess or evaluate the HITPs:

1. Basic Minimum Services Being Offered, among others

    a. Application front-end system/utility as certified like for eClaims, z-Claims, and others
    b. After Sales Service, Helpdesk, and/or Consulting Service(s)
    c. Training of Users
    d. Capability Building
    e. Assistance to HCIs to comply with security requirements like authentication

f. Secured data storage

g. Secured connection or line from the HITP to PhilHealth for purposes of transmitting electronic data/messages

2. The nature, level, and quality of user and technical support. This includes the Level and quality of support provided by the HITP, this can be seen in the Service Level Agreement (SLA) committed by the HITP

3. The breadth and depth of the HITP offerings and features

4. Packages, plans, and cost schedules

5. Variety and class of current clients

6. Client testimonials and history

7. Speed with which they can enhance/modify their system once Philhealth release new issuances

8. Alignment of HITP systems process with HCI current process

9. Ease of adoption by the HCI staff and ICT hardware readiness

10. Security is deeply engraved in the system (encryption, user accounts, segregation of roles and privileges, https)

11. Level of protection in case of failure in (server hardware, network, database).

12. Data Backup and recovery services

13. Data export and import (in case the need to change HITPs)

VI. Checklist for MOU/MOA/Contract

The checklist below provides the recommended minimum items that must be included in a MOU/MOA/Contract as part of the scope of works, obligations and/or undertakings of HITPs:

1. Description of the Product, Model, and/or Services Offered

2. Scope and Limitations of the Product/Model/Services

3. Compliance with PhilHealth standards: Develop systems in conformity and compliance with standards and specifications of PhilHealth

4. Data Integrity: Provide measures to ensure the integrity of the data from encoding/extraction to transmission to PhilHealth in accordance with the standards set forth by PhilHealth

5. Data Privacy and Confidentiality:
   a. Comply with the provisions of the Data Privacy Act 2012 and its implementing rules and regulations, and that of the National Privacy Commission circulars, rules, and/or regulations
   b. Absolutely prohibited to disclose, release, or sell information, or allow other parties to obtain a copy of any data from the system for any purpose other than that permitted by PhilHealth or as required by law
   c. Product/software/system/application maintains the confidentiality of information between the patients and HCI, and between the HCI and the HITP

6. Non-Disclosure Agreement (NDA): Agree to execute, comply with, and unconditionally abide by the terms and conditions of a Non-Disclosure Agreement, as shall be agreed upon

7. Agreed Reporting Methodology: Immediately report to the HCI the following in an agreed manner to enable the HCI to promptly investigate the incident, take appropriate measures, and comply with the obligations under applicable laws:
   a. Any access, acquisition, use or disclosure of information that is unauthorized or violates any provisions of the NDA, and any governing laws of the Philippines, or that is otherwise prohibited under the Business Agreement between PhilHealth and HITP
   b. Any attempted or successful unauthorized access, use, disclosure, modification, or destruction of information
   c. Any actual or suspected instance of theft involving the HCI account

8. Maintenance of Secured Data Center: Store all the required data in a Data Center that meets agreed/required standards for security, redundancy, and data loss prevention.
9. Data Encryption, Storage and Backup:
   a. Provide appropriate safeguards to prevent access by unauthorized entities, keep all data encrypted during transmissions, in a resting state, and in storage, in compliance with PhilHealth standards.
   b. Provide encrypted backup files to HCI.
10. Database Portability: HCI can request for a full backup of its data or database in a form that can be restored and utilized in the system of another HITP.
11. Data Ownership:
    a. All data lodged in the HITP care/custody are rightfully owned by the HCI, even after the MOU/MOA/Contract (also called as Agreement) is terminated.
    b. Upon termination/expiration of the Agreement, the HITP shall turnover the data to the HCI and delete (not retain) any data or copy thereof.
12. Data/System Audit: As agreed upon, HCI can perform or conduct data/system audit to assess the quality of data or the product/software/application.
13. Data Breach Procedures and Accountabilities
14. System Enhancements/Updates: Regularly and promptly update the product/software/application and services, and ensure compliance to PhilHealth policies pertaining to it.
15. Service Level Agreement: Define the level of service expected from the HITP with the following minimum contents:
    a. Reliability – when the service is available (percentage uptime) and the limits outages expected to stay within
    b. Responsiveness – punctuality of services to be performed in response to requests and scheduled service dates
    c. Procedure for reporting problems: who can be contacted, how problems will be reported, escalation procedure, steps to be taken to efficiently address or resolve the problems
    d. Monitoring and reporting service level: who will monitor performance, what data to be collected, and how often (frequency) as well as how much access the HCI is given to generate statistics or reports
    e. Escape Clauses or Constraints: Circumstances under which the level of promised service shall not apply like cases of floods, fire or hazardous situations.
16. Contract Price and Terms of Payment; Billing Policy or Protocols
17. Breach and Termination of the Agreement
18. Term and Effectivity
19. Miscellaneous Provisions, if any
20. Documentary Requirements, if any
21. Applicable Penalties and Liabilities: Consequences for not meeting obligations to the extent of terminating the Agreement
22. Representations / Warranties / Liability Limits / Indemnification, if applicable
23. Statement that Philhealth shall not be privy nor has a part in the contract between the HCIs and the HITPs, and thus shall not be held liable and accountable.

VII.   HITPs Information

#	Office / Agency / Company	Contact Person	Features
1	Knowledge Management & Information Technology Service – Department of Health Integrated Hospital Operations and Management Information System (iHOMIS)	Crispinita A. Valdez kmits.ssed@doh.gov.ph (02) 6517800 loc 1926, 1927 www.doh.gov.ph	▪ Hospital Information System functions ▪ eClaims Reference Model ▪ Compliant with DOH national health data reporting ▪ Compliant with Philhealth

			eClaims requirements ■ Aligned with the standard government hospital operations / processes and business rules
2	Bizbox Inc.	Yhen Nueva info@bizbox.ph yhen@bizbox.ph (02) 7503967 (63) 9178918884 (63) 9228095901 (63) 9088122688	■ Compliant with Philhealth eClaims requirements ■ Option for full HIS and Mini Bizbox Hospital System ■ Master files, transactions and others ■ Materials Management ■ Financial Management ■ System Setup, User Configuration, Reports
3	Eurolink Network International Corporation	Contact Center: EUROLINK EASY CLAIMS TEAM PLDT Landline Numbers: (02) 6614797; (02) 6316095 Cellphone Numbers: 09177070839 (Globe); 09175158700 (Globe); 09175158799 (Globe); 09228289151(Sun); 09228289152(Sun); 09989628890 (Smart) Email Address: easyclaimsph@eurolinkonline.com; llanahbagalayos@eurolinkonline.com Website: www.easyclaimsph.com; www.eurolinkonline.com	■ Stand Alone Claims Transport System (Easy Claims) ■ With Offline Mode and Batch Uploading of Claims ■ Provides Free integration tool for non HITP HIS and other systems (Easy Claims Connect) ■ Easy Installation via downloadable set up file (with username and password) ■ With User Management Tool and Reports Generation ■ With Billing and Claims Monitoring Software ■ Compliant with PhilHealth eClaims Requirements
4	Medilink Network Inc.	Rey Geminiano / Angel Balanag eclaims@medilink.com.ph (02) 7796555 www.medilink.com.ph	■ Agent/broker for Health Insurance ■ Compliant with Philhealth eClaims requirements
5	Segworks Technologies Corporation	Samuel Matunog topgun@matunog.com (082) 2868636 segworks.wordpress.com	■ Has Stand-alone and HIS-embedded Versions ■ User authentication ■ Dashboard ■ Compliant with Philhealth eClaims requirements
6	Topaz Philippines Software Development and Management Services	Alicia Melendez topazphilippines@outlook.com, topaz_phil_25@yahoo.com.ph (63) 9052461957, (63) 9083972173, (63) 9165789930, (63) 9179744399 www.topazincusa.com	■ Hospital Information System from Admission, OPD, OR, Laboratory, Radiology, Pharmacy to Billing/EMR/eClaims Submission ■ Compliant with Philhealth eClaims requirements ■ Designed for hospitals and

			quasi-hospital facilities • Customizable
7	Total Transcription Solutions Inc.	Margarita M. Paz eclaims@ttsibpo.com (02) 4104733, (02) 3747134 (0917) 8253068 www.ttsibpo.com	• Web-based, Remote Data Server • Standalone Claims Transport System • Provides separate claims transport and HIS • Application Programming Interface • Turnkey solution for Philhealth eClaims Implementation • Audit Trail, Role-based Access • Management Tool, Dashboard and Reports • Partial Claims Processing • Data Security