

Supplemental Advisory Regarding Implementation Updates and Clarifications on the PhilHealth Outpatient Emergency Care Benefit (OECB Package)

A. Direct filing

Patients seen in the Emergency Department (ED) from February 14, 2025 who were unable to receive OECB coverage can directly file for reimbursement and follow the existing PhilHealth rules for direct filing of claims. For inquiries on direct filing of claims, you may contact our PhilHealth 24/7 Hotline at (02) 8662-2588. The documentary requirements for the OECB Package direct filing are as follows:

- Claim Form 1 or generated PhilHealth Benefit Eligibility Form (PBEF)
- Claim Form 2 (CF2)
- Claim Form 4 (CF4)
- Itemized Statement of Account/Billing with applied fixed fee schedule from the Essential Emergency Care List (EECL)
- Laboratory and/or Imaging Results
- EECL Summary Form
- Hospital waiver and official receipt

B. EECL Summary Form

As to the OECB Package claims, an EECL Summary Form shall be provided for easier determination of PhilHealth reimbursement and shall be included as a pdf attachment for claims submission with signature from authorized HCI Representative. The EECL Summary Form shall only serve as a guide and the final PhilHealth reimbursement shall be set through claims adjudication. Health facilities are requested to coordinate with your respective IT System Service Providers or In-house IT Developer for details and concerns.

C. Clarification on coverage

The triage classification of a patient seen in the ED shall be left to the discretion of the health care provider. The definition of Urgent and Emergent Care as defined in the circular shall serve as a guide in the classification and are as follows:

1. **Urgent Care** - Care delivered to patients who should be seen as early as possible but are not in immediate risk to life or permanent disability. These cases are usually classified as Level 4 and 5 in the Triage Scale
2. **Emergent Care** - the response to a situation where there is urgently required medical care and attention which are life threatening or with potential for permanent disability, and shall include procedures required for initial diagnosis, use of equipment and supplies in sufficiently addressing the emergency situation, considering the welfare of the patient. Cases requiring emergent care are classified as Triage Level 1-3. It also includes the necessary medical procedures and treatment administered to a woman in active labor to ensure safe delivery of the newborn. (RA 109321)

PhilHealth acknowledges that patients with non-life threatening conditions may exhibit acute symptoms requiring Urgent Care in the ED as determined by a licensed physician. However we would like to reiterate that the policy also mandates that "OECB-accredited health facilities shall endeavor to refer patients triaged at level 5 to the outpatient department" for proper patient navigation.

D. Claims monitoring

Claims shall be monitored regularly to check quality standards and ensure delivery of quality care to patients availing of the OECB Package. PhilHealth shall utilize the Healthcare Provider Performance Assessment System (HCP-PAS) to its full extent to avoid abuse of the package.

E. Application of charging order for mandatory discounts

Regarding the charging order for deductions for mandatory discounts in relation to the PhilHealth Circular No. 2024-0033 policy statement V. D. 10., PhilHealth shall comply and follow the order of charging based on the DOH-DSWD-PCSO-PHIC Joint Administrative Order 2020-0001 (Operational Guidelines for the Implementation of Medical and Financial Assistance to Indigent and Financially Incapacitated Patients Pursuant to Republic Act No 11463 also known as "Malasakit Center Act of 2019") and all relevant laws such as RA No. 9994 or the Expanded Senior Citizens Act of 2010 and RA No. 10754 or An Act Expanding the Benefits and Privileges of Persons with Disability including prospective laws and guidelines for mandatory discounts from Bureau of Internal Revenue (BIR).

As such, mandatory discounts shall be deducted first to the hospital bill prior to PhilHealth deductions for OECB Claims. The PhilHealth Circular No. 2024-0033 policy statement V. D. 10 shall therefore be unenforceable, in compliance to the above mentioned Joint Administrative Order. Through the Separability Clause, the remaining provisions of the policy shall not be in any way affected and remain enforceable.

F. Summarized clarifications on the EECL

The following clarifications to the EECL have been made to facilitate claims filing for facilities without changes to the policy body.

- The Resuscitation price item refers to cardiopulmonary resuscitation.
- Ultrasound shall be quantified by body region and counted separately per doctor's request.
 - As an example, the following are separately counted: Chest, Pelvis, Transvaginal Ultrasound, Abdomen, Neck, etc.
 - A doctor's request for bundled ultrasound, regardless of the number of organs involved shall be charged as one request. Examples are HBT, KUB, TVS, etc.
- X-rays shall be quantified by anatomic part counted as single use regardless of the number of views
 - Example of one use for x-ray: 1 Chest PA is equivalent to 1 X-ray (Chest), 1 Chest PA/L is still equivalent to 1 X-ray (Chest).
 - As an example for the X-ray (Extremity), one X-ray Forearm AP/L is equivalent to one X-ray (Extremity), or one X-ray Leg AP/L is also equivalent to one X-ray (Extremity).
- CT-Scan (Extremity) shall be similar for X-ray (Extremity) wherein it is quantified per anatomic part.
- The dosage, preparations and packaging information were included for some therapeutics .
- Acronyms are expanded to reflect a more accurate description of the price items.
- Bundled price items of the health facility shall be paid per component if the EECL does not list a corresponding bundled price item.
- For Laboratory price items with "(Other Body Fluid)" in their descriptor, these pertain to other body fluids other than blood or serum.
- The price item IV Fluid (Other Formulations) pertain to other IV fluids for infusion that are not listed in the EECL but are included in the Philippine National Formulary.

These summarized clarifications are reflected in the updated Annex A hereto attached and to PhilHealth Circular No. 2024-0033 as uploaded in the PhilHealth official website (<https://www.philhealth.gov.ph>) in compliance with the Policy Statement V.F.2 of the said circular.

For the information and guidance of all concerned.

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Date signed: March 26, 2025