



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
 CITY STATE CENTRE BUILDING
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PhilHealth Circular

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by

TO : REGIONAL MANAGERS, NON-HOSPITAL BASED MATERNITY CLINICS, RURAL HEALTH UNITS/HEALTH CENTERS, PHYSICIANS, LICENSED MIDWIVES AND ALL OTHERS CONCERNED

SUBJECT : Guidelines for Accreditation of Out-Patient Clinics, Physicians and Midwives for Low Risk Maternity Care Package

In line with the thrust of the National Health Insurance Program to provide its members/dependents a new benefit package at affordable cost, the Philippine Health Insurance Corporation now includes the accreditation of Out-Patient Clinics for the Low Risk Maternity Care Package. This new package covers second low risk pregnancy and normal birth. The accreditation of this type of institutional health care provider will ensure the accessibility of low risk maternity care at the peripheral level which is feasible and safe.

The Out-Patient Clinic for the Low Risk Maternity Care Package is defined as a non-hospital out-patient facility which provides services for prenatal care, normal birth, routine newborn care, postpartum care and family planning.

Attached is the guidelines for the initial accreditation of outpatient clinics, physicians and midwives to ensure the smooth implementation of the Low Risk Maternity Care Package.

For information and guidance.

ENRIQUE M. ZALAMEA
 President and CEO

Accreditation Department
 NDT/IF/jme/3-15-01

GUIDELINES FOR INITIAL ACCREDITATION OF MIDWIVES and OUTPATIENT CLINICS FOR THE LOW RISK MATERNITY CARE PACKAGE

A. STANDARDS FOR ACCREDITATION OF OUTPATIENT CLINICS FOR THE LRMC PACKAGE

- ❖ The **OUTPATIENT CLINIC** for the **LRMC Package** is a non-hospital outpatient facility, such as a Rural Health Unit (RHU), lying-in clinic or any other health clinic with adequate facilities and trained staff, and capable of providing all the maternal and newborn services included in the **LRMC Package**.

1. Service Capability

The Outpatient Clinic for the Low Risk Maternity Care Package shall be able to attend to low risk delivery and provide maternal and newborn care. The Outpatient Clinic shall be able to provide the following services:

- 1.1. Prenatal Care
- 1.2. Normal Birth
- 1.3. Routine Newborn Care
- 1.4. Postpartum Care
- 1.5. Family Planning

2. Technical Standards

The Outpatient Clinic for the **LRMC Package** shall comply with all of the following:

2.1. General Infrastructure:

- 2.1.1. Space for a large and clear sign bearing the name of the **OUT-PATIENT CLINIC FOR THE LOW RISK MATERNITY CARE PACKAGE** with an additional sign indicating it as a "**Philhealth Accredited**" provider for the **LRMC Package**.
- 2.1.2. Space for a large placard/sign enumerating the service components of the **LRMC Package**
- 2.1.3. Generally clean environment
- 2.1.4. Fire safety provision
- 2.1.5. Sufficient seating for patients in a well ventilated area
- 2.1.6. Adequate lighting/electric supply
- 2.1.7. Adequate clean water supply
- 2.1.8. Covered garbage containers, properly labeled or color coded for segregation
- 2.1.9. Separate receptacle for disposing pointed or sharp objects
- 2.1.10. Private consultation / examination room or cubicle
- 2.1.11. Examination table with clean linen
- 2.1.12. Delivery Room with delivery table
- 2.1.13. Recovery area with bed/s
- 2.1.14. Area for cleaning / resuscitation of newborn
- 2.1.15. Toilet facility
- 2.1.16. Area for cleaning of instruments
- 2.1.17. Cleaning supplies for the facility and clinical instruments

2.2. Basic Consultation and Delivery Room Equipments

- 2.2.1. Alligator forceps 10"
- 2.2.2. Ambu bag (adult & pedia)
- 2.2.3. Bassinet/newborn carrier
- 2.2.4. BP apparatus
- 2.2.5. Delivery table
- 2.2.6. Electric stove
- 2.2.7. Footstool
- 2.2.8. Gooseneck lamp (2)
- 2.2.9. Haemeostatic straight forceps
- 2.2.10. Instrument cabinet
- 2.2.11. Instrument table
- 2.2.12. IV stand
- 2.2.13. Jar with stainless cover
- 2.2.14. Jar without cover
- 2.2.15. Kelly pad
- 2.2.16. Needle holder
- 2.2.17. Ovum forceps
- 2.2.18. Oxygen gauge/regulator
- 2.2.19. Oxygen tank (5lbs. minimum)
- 2.2.20. Pail
- 2.2.21. Pick up forceps
- 2.2.22. Portable emergency light or flashlight
- 2.2.23. Rubber suction bulb syringe
- 2.2.24. Sponge holding forceps
- 2.2.25. Stainless bowl (kidney shape)
- 2.2.26. Stainless bowl (round shape)
- 2.2.27. Stainless iodine cup
- 2.2.28. Stainless steel instrument tray with cover
- 2.2.29. Stainless steel instrument tray without cover
- 2.2.30. Stethoscope
- 2.2.31. Stool
- 2.2.32. Straight forceps 10"
- 2.2.33. Suction apparatus
- 2.2.34. Surgical scissors (straight)
- 2.2.35. Tenaculum forceps
- 2.2.36. Tissue forceps 6" (regular)
- 2.2.37. Uterine forceps 10"
- 2.2.38. Uterine sound 12"
- 2.2.39. Vaginal speculum
- 2.2.40. Wall clock with second hand
- 2.2.41. Weighing scale (adult & infant)

2.3. Standard Supplies

- 2.3.1. Alcohol 70% isopropyl
- 2.3.2. Bed sheets
- 2.3.3. Butterfly set (G19)
- 2.3.4. D5LR
- 2.3.5. Disposable syringes with needle
- 2.3.6. DR gown/scrub suit
- 2.3.7. IV Tubing (adult)
- 2.3.8. Linen for bassinet/newborn carrier
- 2.3.9. Nasal Cannula
- 2.3.10. Plaster

- 2.3.11. Plastic apron
- 2.3.12. Povidone iodine
- 2.3.13. Soaking/sterilizing solution
- 2.3.14. Sterile absorbable suture with/without needle
- 2.3.15. Sterile cord clips for baby
- 2.3.16. Sterile cotton balls
- 2.3.17. Sterile cotton pledgets
- 2.3.18. Sterile cutting needle
- 2.3.19. Sterile drapes
- 2.3.20. Sterile gauze
- 2.3.21. Sterile gloves
- 2.3.22. Sterile round needle
- 2.3.23. Surgical cap
- 2.3.24. Surgical masks
- 2.3.25. Tape measures
- 2.3.26. Thermometer (oral/rectal)
- 2.3.27. Xylocaine/Lidocaine
- 2.3.28. Methylergonovine maleate ampule
- 2.3.29. Tetanus Toxoid
- 2.3.30. Erythromycin ophthalmic ointment 0.5%
- 2.3.31. Vitamin K ampule
- 2.3.32. Progesterone only pills
- 2.3.33. D-Medroxyprogesterone Acetate (DMPA)
- 2.3.34. Intrauterine device (copper T)

2.4. Standard FP-MCH Records / Reports / Materials

- 2.4.1. Consultations/Admissions Logbook
- 2.4.2. Patient's Clinical Record
- 2.4.3. Referral Forms
- 2.4.4. Printed materials / posters for patient education

2.5. Readily available means of transport for conduction of patients

2.6. Clinic Staff

- 2.6.1. At least one (1) PhilHealth Accredited PROVIDER of the LRMC Package
- 2.6.2. Clinic Aide (full-time or on-call)
- 2.6.3. Two (2) Partner Physicians (on-call)

3. Quality Assurance Activities (optional for initial accreditation)

The Outpatient Clinic for the LRMC shall be encouraged to conduct quality assurance / improvement activities post-accreditation. Such activities include:

- 3.1. mission/vision
- 3.2. clinical standard operating procedures (SOP) of performance & referral
- 3.3. records management
- 3.4. human resource development
- 3.5. satisfaction surveys for employees and patients
- 3.6. compliance to monitoring and evaluation activities of PHIC

B. QUALIFICATION STANDARDS FOR ACCREDITATION OF PROFESSIONAL PROVIDERS FOR THE LRMC PACKAGE

- ❖ The PROVIDERS of the LRMC Package shall be MIDWIVES or PHYSICIANS duly accredited by Philhealth.
- ❖ The said PROVIDERS shall render the LRMC Package Services in an OUTPATIENT CLINIC accredited by Philhealth.
- ❖ The PROVIDERS shall be allowed affiliation to a maximum of three (3) accredited OUTPATIENT CLINICS for the LRMC Package

1. Standards for Philhealth Accreditation of MIDWIVES as PROVIDERS of the LRMC Package

- 1.1. The midwife shall be a licensed practitioner.
- 1.2. The midwife shall be a member in good standing of a PHIC recognized national association of midwives, such as the Integrated Midwives Association of the Philippines (IMAP) and the Philippine League of Government Midwives (PLGM).
- 1.3. The midwife shall have an active practice. Evidence of active practice include:
 - 1.3.1. For employed Midwives – appointment papers/certificate of employment as a registered midwife in a PHIC accredited institutional health care provider, private clinic, government/private hospital, rural health unit/center; or
 - 1.3.2. For privately practicing midwives – certification from barangay captain as an independent Domiciliary Obstetrical Practitioner in the municipality/place of practice
 - 1.3.3. At least 25 deliveries in the past 12 months supported by clear photocopies of birth certificates
- 1.4. The midwife shall have competence in the Midwifery skills. She shall be able to present Certificate/s of Training in all of the following:
 - 1.4.1. Suturing 1st and 2nd degree perineal lacerations
 - 1.4.2. Performing internal examination
 - 1.4.3. IV insertion
 - 1.4.4. Family planning
- 1.5. The midwife shall have two (2) PARTNER PHYSICIANS, one for obstetric cases and one for newborn cases, who are affiliated in PHIC accredited secondary or tertiary hospital.
 - 1.5.1. The Partner Physician for Obstetric Cases shall be a:
 - 1.5.1.1. Diplomate of the Philippine Obstetrical & Gynecological Society, or

1.5.1.2. General Practitioner (allowed only in provinces where there are no certified OB-GYNE Specialist) with a:

1.5.1.2.1. Certificate of Training in a POGS accredited Residency Program, or

1.5.1.2.2. Certificate of Training in a PAFP accredited Family Medicine Training Program, or

1.5.1.2.3. Certificate of at least six months in-service training in OB-GYNE (for government physicians)

1.5.2. The Partner Physician for Newborn Cases shall be a:

1.5.2.1. Diplomate of the Philippine Pediatric Society, or

1.5.2.2. General Practitioner (allowed only in provinces where there are no certified Pediatrics Specialist) with a:

1.5.2.2.1. Certificate of Training in a PPS accredited Residency Program, or

1.5.2.2.2. Certificate of Training in a PAFP accredited Family Medicine Training Program, or

1.5.2.2.3. Certificate of at least six months in-service training in Pediatrics (for government physicians)

2. Standards for Philhealth Accreditation of PHYSICIANS as PROVIDERS of the LRMC Package

2.1. The physician shall be a licensed practitioner.

2.2. The physician shall be PHIC accredited.

2.3. The physician shall be affiliated with a secondary or tertiary PHIC accredited hospital.

C. ACCREDITATION PROCESS FOR THE OUTPATIENT CLINICS for the LRMC PACKAGE

1. The Outpatient Clinic for the LRMC shall submit an application for accreditation to the Regional Health Insurance Office (RHIO).

2. A fee of P500 shall be paid upon initial or renewal of accreditation. Mode of payment can either be through Postal Money order payable only to the Philippine Health Insurance Corporation or cash paid directly to the cashier. The accreditation fee shall be non-refundable.

3. Upon receipt of the application for accreditation, the Accreditation Section of the RHIO or Accreditation Department, Central Office (for NCR) shall schedule and conduct an inspection of the Outpatient Clinic.

4. The application forms and inspection reports shall be immediately forwarded to the Accreditation Department, Central Office for deliberation and approval by the Accreditation Committee.

5. Once application for accreditation has been approved, a Certificate of Accreditation shall be given to the Outpatient Clinic for the LRMC Package.
6. The validity period of accreditation shall be for one (1) year, renewable on the anniversary date.
7. For renewal of accreditation, applications shall be filed within thirty (30) calendar days before the ninety (90) calendar days prior to the expiration of the existing accreditation.

D. ACCREDITATION PROCESS FOR THE PROFESSIONAL PROVIDERS for the LRMC PACKAGE

1. The professional provider (midwife or physician) shall submit an accomplished application for accreditation and the required documents to the Regional Health Insurance Office (RHIO) or the Accreditation Department, Central Office (for NCR).
2. A fee of P500 shall be paid upon initial or renewal of accreditation. Mode of payment can either be through Postal Money order payable only to the Philippine Health Insurance Corporation or cash paid directly to the cashier. The accreditation fee shall be non-refundable.
3. The Accreditation Section of the RHIO shall screen the application forms and documentary requirements.
4. The application forms and required documents shall be forwarded to the Accreditation Department, Central Office for processing, evaluation and approval.
5. Once application for accreditation has been approved, the professional provider shall be informed through a letter.
6. The Accreditation ID shall be issued/sent directly to the professional provider by mail.
7. The validity period of accreditation shall be for three (3) years, renewable on the anniversary date.
8. For renewal of accreditation, applications shall be filed within thirty (30) calendar days before the ninety (90) calendar days prior to the expiration of the existing accreditation.

PROCEDURES FOR APPLICATION FOR OUT-PATIENT CLINICS FOR LRMC PACKAGE

A. Procedure for filing of applications:

1. Secure a copy of the application form from the Philhealth Central Office or any of the Regional Health Insurance Offices where the Out-Patient Clinic is located.
2. Accomplish the form completely and legibly. The owner/operator shall duly sign the forms.
3. Have the Warranties of Accreditation notarized.
4. Submit the accomplished forms to the RHIO or to the PhilHealth Central Office for those in NCR and Rizal together with the required documents and accreditation fee of P500.00

B. Payment of Accreditation fees

1. Accreditation fee of P500.00 shall be paid **annually**.
2. For out of town applications, the accreditation fees shall be paid in cash or in postal money order (PMO) directly to the corresponding Regional Health Insurance Office. The PMO, shall be filled up as follows:

Pay to : Philippine Health Insurance Corporation
Pasig City
From : Name of institution

Note:

Signature of issuing officer should be present
Month, date and year of issue should be clearly stamped
Back of postal money order should be **left blank**

3. Applications from Metro Manila and Rizal shall be directly filed to the PhilHealth Central Office, accreditation fees may be paid directly to the PhilHealth cashier, either in cash, DBP checks or postal money order payable to the Philippine Health Insurance Corporation Shaw Blvd., Pasig City. The PHIC cashier's office is open from 8:00 to 12:00 noon, 1:00 to 5:00 pm., Mondays to Fridays.

C. Processing Requirements

1. All requirements for the accreditation of the Out-Patient Clinics for the LRMC Package as stipulated in the checklist must be complied with.
2. The RHIO shall received the application together with the documentary requirements with date of receipt indicated. After verification and inspection of your institution, the RHIO will forward the application with recommendation to the PhilHealth Central Office for deliberation and approval.
3. Applications with **incomplete or insufficient documentary requirements** shall be **denied**, without prejudice to the option of the applicant to re-file, upon submission of needed documents.

For more inquiries, please write to:

The Officer-In-Charge
Accreditation Department
Philippine Health Insurance Corporation
12th Flr, City State Center, 709 Shaw Blvd. Oranbo, Pasig City

or call the Accreditation Hotline at 637-6265 and Telefax No. 6372527.

3. For Metro Manila and Rizal applications filed directly with the PhilHealth Central Office, the payment of fees may be made directly to the PhilHealth cashier, either in cash, DBP checks or postal money order payable only to the Philippine Health Insurance Corporation Shaw Blvd., Pasig City. The PHIC cashier's office is open from 8:00 to 12:00 noon, 1:00 to 5:00 pm., Mondays to Fridays.

C. PROCESSING REQUIREMENTS:

1. All requirements for accreditation of midwives as stipulated in the application form must be complied with.
2. The RHIO shall receive the application and documentary requirements with date of receipt indicated. After evaluating the application and documentary requirements, the RHIO will forward these to the Accreditation Department, PhilHealth Central Office for final approval.
3. Applications with **incomplete or insufficient documentary requirements** shall be **denied**, with prejudice to the option of the applicant to re-file, together with the required documents.

For more inquiries, please write to:

The Officer-In-Charge
Accreditation Department
Philippine Health Insurance Corporation
12th Flr, City State Center, 709 Shaw Blvd. Oranbo, Pasig City

or call the Accreditation Hotline at 637-6265 and Telefax No. 637-2527

PROCEDURES FOR APPLICATION FOR MIDWIVES FOR LRMC PACKAGE

A. Filing of Applications

1. Secure a copy of the application form from the PhilHealth Central Office/Regional Health Insurance Offices.
2. Fill out the form completely, have it signed and notarized.
3. Attach a photocopy of the following:
 - 3.1 Updated PRC license (back to back) or Certificate of Renewal
 - 3.2 RFI or MI b of NHIP Membership
 - 3.3 Certificate of Good Standing in any PHIC recognized national association of Midwives (e.g. IMAP, PLGM)
 - 3.4 Evidence of active practice
 - 3.4.1 For employed Midwives-appointment papers as a registered midwife in a private clinic, government hospital, rural health unit/center
 - 3.4.2 For privately practicing midwives-certification from barangay captain as an Independent Domiciliary Obstetrical Practitioner in the municipality/place of practice
 - 3.4.3 Clear photocopies of birth certificates of at least 25 deliveries done in the past 12 months
 - 3.5 Evidence of Competence in Midwifery, specifically Certificates of Post-Midwifery/Post-Graduate training from DOH and /or PRC accredited institutions in all of the following
 - 3.5.1. Suturing perineal lacerations
 - 3.5.2. Performing IE
 - 3.5.3. IV insertion
 - 3.5.4. Training course on FP
 - 3.6 TIN card or ITR for preceding year or BIR Form 2316 or approved BIR Forms 1901/1902 indicating TIN
4. Two 1x1 photo, signed at the back
5. MOA with two PARTNER PHYSICIANS
6. Submit the accomplished forms to the RHIO or to PhilHealth Central Office for those in NCR and Rizal together with the required documents and accreditation fee.

B. PAYMENT OF ACCREDITATION FEE:

1. Accreditation fee of P500.00 is good for three (3) years.
2. For out of town applications, accreditation fees should be paid in cash or in postal money order directly to the corresponding Regional Health Insurance Office. Postal money orders, should be properly filled up as follow.

Pay to : Philippine Health Insurance Corporation
Shaw Blvd., Pasig City
From : Name of institution

Note:

- Signature of issuing officer should be present
- Month, date and year of issue should be clearly stamped
- Back of postal money order should be **left blank**