



Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

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PHILHEALTH CIRCULAR

No. 20 s. 2010

[Signature]
TO

: All Institutional Health Care Providers, PhilHealth Regional Offices (PhROs) and Service Offices (SOs) and All Others Concerned

SUBJECT : Amendment to PhilHealth Circular No's. 30 s. 2009 and 15 s. 2001 on the Requirements for a Partner Physician—(Guidelines for Accreditation of Providers for the Maternity and Newborn Care Package)

To facilitate accreditation of non-hospital institutional providers and improve member access to maternal and neonatal care packages, the following amendments to *PhilHealth Circular No. 15 s. 2007*, which is the guideline for accreditation of out-patient clinics, physicians and midwives for low risk maternity care package, specifically *item A no. 2.6*, and to *PhilHealth Circular No. 30 s. 2009*, which is the guideline for accreditation of providers for maternity and newborn care package, specifically *item A no. 2.6.3*, relative to the requirement of an on-call partner physician of professional provider, shall be applied.

I. System of Referral for Complicated Obstetric and Pediatric Cases

To ensure that continuity of care and appropriate referral practices are performed and to qualify for accreditation as provider for the maternity care package (MCP), the facility shall have **any** of the following options:

A. Partner Physicians:

The professional provider (midwife or physician) shall have two partner physicians who shall accept referrals and provide further management for complicated obstetric and pediatric cases. There shall be one partner physician for obstetric cases and one partner physician for newborn cases who are both accredited by PhilHealth. However, if the professional provider is a diplomate or fellow of the Philippine Obstetrical and Gynecological Society (POGS) or the Philippine Pediatric Society (PPS), he/she may have only one partner physician as guided by Table No. 1 below. This arrangement should be supported by a Memorandum of Agreement (MOA) between the professional provider and the partner physician/s which should be presented to PhilHealth during the accreditation survey.

Table No. 1

MCP Clinic Owner/Provider	Partner Physician
Licensed Midwife	1 for obstetric cases, 1 for pediatric cases
Physician other than a diplomate or fellow of the POGS or the PPS	1 for obstetric cases, 1 for pediatric cases
Diplomate or fellow of the POGS	1 for pediatric cases
Diplomate or fellow of the PPS	1 for obstetric cases

PHILHEALTH
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 MA. TERESA A. QUIAOIT
 A.O. IV, Chief-RELMS
 Date: 8/20/10
CERTIFIED TRUE COPY

Qualifications of Partner Physicians

1. General Qualifications

Partner physicians should be PhilHealth-accredited professionals.

2. For obstetric cases, any of the following professionals may be considered as partner physician:

- a) Diplomate/Fellow who are certified specialists of the POGS;
- b) In areas where there are no certified specialists of POGS, a physician with any of the following trainings:
 - Graduate of the POGS accredited residency training program;
 - Diplomate/Fellow of the Philippine Academy of Family Physicians (PAFP);
 - Completed a six (6) month in-service training in obstetrics for government physicians;
 - Training and certification on Basic Emergency Obstetric and Newborn Care (BEmONC);
 - Training and certification on Comprehensive Emergency Obstetric and Newborn Care (CEmONC)

3. For pediatric cases, any of the following professionals may be considered as partner physician:

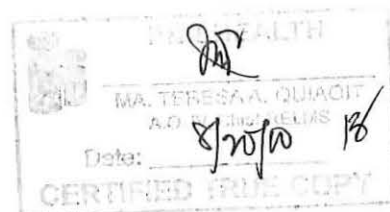
- a) Diplomate/Fellow who are certified specialists of the PPS;
- b) In areas where there are no certified specialists of PPS, any of the following physicians may be considered:
 - Graduate of the PPS accredited residency training program;
 - Diplomate/Fellow/Graduate of accredited residency training program of the PAFP;
 - Training and certification on BEmONC;
 - Training and certification on CEmONC

B. Affiliation with a PhilHealth Accredited Hospital

The owner or the authorized representative of the owner of the facility may opt to present a MOA with a PhilHealth accredited hospital that is at least level 2. If the owner is a physician, a proof of affiliation from an accredited level 2 category hospital shall be required in lieu of a MOA with the PhilHealth accredited hospital.

C. Memorandum of Agreement (MOA) with Interlocal Health Zone/System (ILHZ/S)

Municipalities or cities with an existing Interlocal Health Zone/System (ILHZ/S) which allows sharing of resources including human resources, shall present its ILHZ MOAs in lieu of a MOA with partner physicians. The PhilHealth Regional Office (PhRO) shall ensure the following:



1. There are accredited physicians within the health system that are qualified to be partner physician; and
2. There is a functional referral system in the ILHZ/S

D. Memorandum of Agreement with BEmONC-CEmONC Network

The MCP owner/professional provider shall present its MOA with a DOH- certified BEmONC-CEmONC Network in lieu of partner physicians, affiliation with a PhilHealth accredited hospital or ILHZ/S.

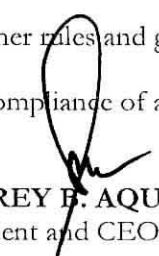
II. Accreditation of Birthing Homes that are BEmONC-Capable

Considering that BEmONC-capable facilities have a functioning referral system and are located in geographically isolated and disadvantaged areas (GIDA), they need not present a MOA with partner physicians for accreditation. However, they shall be required to present a certification or recognition from the Department of Health (DOH) that they are BEmONC-capable and should comply with other requirements for accreditation as stipulated in PhilHealth Circular No. 30, s-2009.

This circular shall take effect after fifteen days from publication in an official gazette or any newspaper of general circulation.

All other rules and guidelines not contrary to this circular shall remain in full force and effect.

For compliance of all concerned


DR. REY B. AQUINO
President and CEO

Date signed: 05 Aug 10

