

the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION

Citystate Centre Building, 709 Shaw Boulevard, Pasig City
Healthline 441-7444 www.philhealth.gov.ph

PHILHEALTH CIRCULAR

No. 017 s-2012

TO : ALL HEALTH CARE PROVIDERS, PHILHEALTH REGIONAL OFFICES, SERVICE OFFICES AND ALL OTHERS CONCERNED

SUBJECT : New Health Care Provider Engagement Process in Support to Universal Health Care (UHC) or Kalusugang Pangkalahatan (KP)

RATIONALE AND BACKGROUND:

As a focused approach to health reform implementation, the Department of Health (DOH) issued Administrative Order (AO) No. 2010-0036 regarding Universal Health Care (UHC), with the goal of ensuring that all Filipinos, especially the poor, receive the benefits of health reform. Likewise, DOH AO 2011 – 0020 provided the general guidelines to streamlining the process of licensure and accreditation of hospitals. Further, Republic Act 10155, General Appropriations Act (GAA) of 2012, also included a provision that effective April 1, 2012, all government health care providers are deemed accredited by PhilHealth.

In response to the challenge of achieving Universal Health Care (UHC) or Kalusugang Pangkalahatan (KP) within the next two (2) years, the Corporation needs to increase the number of accredited facilities to improve access to quality hospitals and health care facilities.

Further, PhilHealth Board Resolution No. 786 s. 2005 allowed the Corporation to delegate accreditation functions, exclusive of the decision-making function to grant or deny accreditation, to duly recognized third-party accreditation organizations. Relative to this, organizations accredited by the International Society for Quality in Health Care (ISQua), an organization that is highly regarded worldwide as an authority in accreditation and quality health care, may be recognized by the Corporation to serve this purpose.

Likewise, PhilHealth Board Resolution No. 918 s. 2006 resolved to amend Sec 52 of the IRR of RA 7875 to reflect that all institutional HCPs which operate as part of a health system may participate as a group.

Therefore, PhilHealth adopts the new health care provider (HCP) engagement process that modifies the transactions between PhilHealth and health care providers.

A. SCOPE AND COVERAGE:

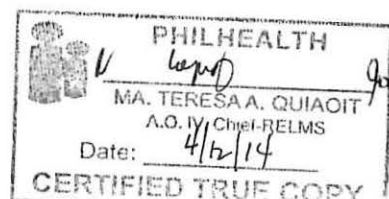
This order shall apply to all the following providers:

1. Hospitals, Ambulatory Surgical Clinics, Freestanding Dialysis Clinics and other facilities regulated by the DOH.
2. Outpatient facilities that intend to provide the PHIC outpatient packages.
3. Government health care providers (institutions and professionals) covered by the provision of the GAA of 2012 on automatic accreditation.

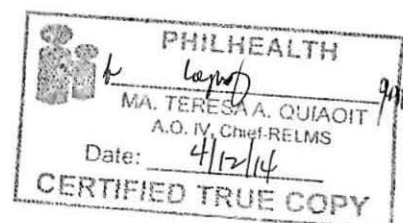
B. DEFINITION OF TERMS – see Annex 1

C. GENERAL GUIDELINES:

1. All hospitals licensed by the DOH using the DOH Assessment Tool for licensure of hospitals that integrated the fifty-one (51) core indicators of PhilHealth Benchbook Standards for hospitals shall be deemed accredited by PhilHealth as Centers of Safety. These hospitals shall no longer undergo pre-accreditation survey.



2. All hospitals granted accreditation by international accrediting organizations (IAO) that are accredited by ISQua for both organization and standards may apply as **Centers of Quality or Excellence** and shall no longer undergo pre-accreditation survey by PhilHealth.
3. All licensed hospitals that applied for a higher accreditation award, i.e., Center of Quality or Center of Excellence, that are not accredited by an IAO accredited by ISQUA shall undergo pre-accreditation survey based on their self-assessment scores. However, if their self-assessment scores do not qualify for at least a Center of Quality, these hospitals shall no longer undergo pre-accreditation survey, and shall be deemed accredited as Centers of Safety.
4. **The following government-owned facilities shall automatically qualify for PhilHealth accreditation and shall no longer undergo pre-accreditation survey:**
 - a. Primary Care Benefit (PCB) Provider
 - All government-owned health units (including authorized hospitals) that can provide the required services of the Primary Care Benefit (PCB).
 - All outpatient clinics of government owned Levels 2, 3, and 4 DOH licensed hospitals as well as that of Level 1 hospitals with a Level 2 laboratory and licensed radiology service or referral facilities.
 - b. Maternity Care (MCP) and Newborn Care Package (NCP) Provider:
 - All government-owned health units/hospitals that are certified as Basic Emergency Obstetric and Neonatal Care (BEmONC) and Newborn Screening facility by the CHDs
 - c. Anti-TB/DOTS Providers
 - All government-owned health units/hospitals that are certified as DOTS Facilities by the CHDs
 - d. Outpatient Malaria Package (OMP) Provider
 - All government-owned health units/ hospitals that are trained in the Outpatient Malaria Treatment as certified by the CHDs
 - e. Other facilities:
 - All government owned health units/DOH licensed facilities as providers of special procedures such as, but not limited to, Ambulatory Surgical Clinics, Freestanding Dialysis Clinics, etc.
 - f. Other service providers as identified by the Corporation
5. All government – employed health care professionals holding plantilla positions and duly licensed by the Professional Regulatory Commission shall be deemed accredited as a professional provider of the applicable PHIC benefit.
6. **All automatically accredited HCPs shall now follow the new HCP Engagement Process (Annex 2):**
 - a. **All automatically accredited HCPs shall register with PhilHealth** by submitting a completely filled up Provider Data Record and paying the corresponding fee for them to be reflected in the roster of PHIC health care providers.
 - b. All HCPs shall sign a Performance Commitment (PC) (Annex 5 or 6) in order to receive remuneration/reimbursement from PhilHealth.
 - i. All currently accredited HCPs shall sign the appropriate PC along with its application for renewal of participation in the NHIP. For PCB 1 providers, guideline per PhilHealth Circular No. 10 s. 2012 shall apply.
 - ii. The PC shall be valid for the duration of the accreditation. However, if there are additions or reductions in the service capability within the duration of the current accreditation, a new PC shall be submitted for updating.
7. All institutional health care providers (IHCPs) which operate as part of a health system may be accredited as a group. These IHCPs shall sign the PC for health system provider (HSP) and are subject to the rules and regulations of the Corporation.



8. Automatic accreditation of all government health care providers who are not yet accredited upon the effectivity of this issuance shall be prospective and shall start only from April 1, 2012 or upon full compliance of the requirements for registration (Annex 2), whichever comes later.

D. MONITORING

1. ALL participating HCPs shall be monitored using the corresponding standards for the facility e.g., Benchbook Standards for hospitals, Circ. 10 s. 2008 re: Grounds for Non-Renewal of Accreditation/Non-Granting of Re-Accreditation as a result of Performance Monitoring of Health Care Providers and other applicable policies/issuances. Therefore, any deficiency/violation noted during monitoring shall be subject to existing Corporate rules and regulations.
2. All HCPs with deficiencies on standards and requirements for licensing and accreditation noted during monitoring shall be referred to DOH and/or to other concerned offices.

E. EFFECTIVITY

This circular shall take effect fifteen (15) days from publication in the official gazette or any newspaper of general circulation. This shall apply to all applications of HCPs that are on process upon the effective date of this circular.

All PhilHealth Offices through the Public Affairs Department, Public and Media Affairs Unit and Health Care Delivery and Management Division of the PhROs shall ensure appropriate and massive information campaign efforts.

All other provisions of previous issuances which are inconsistent with this Circular are hereby repealed.

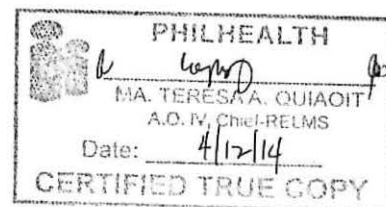
F. Annexes:

1. Definition of Terms
2. Guidelines for New HCP Engagement Process
3. Flow chart for new HCP engagement process
4. Provider Data Record
5. Performance Commitment for Institutional Health Care Providers
6. Performance Commitment for Health Systems Providers

Please be guided accordingly.


DR. EDUARDO P. BANZON
President and CEO

Date signed: 4/11/12



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ANNEX 1. DEFINITION OF TERMS:

1. **Center for Health Development (CHD)** – regional office of DOH
2. **DOH Assessment Tool for licensure of hospitals** – the checklist which prescribes the minimum standards and requirements for hospital licensure. It is the tool used by regulatory officers of DOH to evaluate compliance of a hospital to DOH standards and technical requirements for safety. This is the survey tool for hospitals which integrated the fifty one (51) PhilHealth Benchbook Core Indicators into the licensing requirements of DOH.
3. **Government employed health care professional** – a health care professional either employed or detailed to provide service in a government –owned health care facility as supported by any of the following documents:
 1. Appointment
 2. Detail order
 3. Secondment
4. **HCP – Health care provider**
 - a. **Institutional HCP (IHCP)** - a health care institution, which is duly licensed, certified or accredited, as applicable, devoted primarily to the maintenance and operation of facilities for health promotion, prevention, diagnosis, treatment and care of individuals suffering from illness, disease, injury, disability or deformity, drug addiction or in need of obstetrical or other medical and nursing care.

It shall also be construed as any institution, building or place where there are installed beds, cribs or bassinets for twenty-four (24) hour use or longer by patients in the treatment of disease, injuries, deformities or abnormal physical and mental states, maternity cases or sanitarial care; or infirmaries, nurseries, dispensaries, rehabilitation centers and such other similar names by which they may be designated.

- b. **Professional HCP (PHCP)** – a health care professional, who is any doctor of medicine, nurse, midwife, dentist, pharmacist or other health care professional or practitioner duly licensed to practice in the Philippines and accredited by the Corporation.
5. **HCP Engagement Process** – process by which HCPs transact with PhilHealth to register and participate in the NHIP
6. **Health System Provider** – a group of institutional health care providers that operates as part of a health system such as, but not limited to, Provincial Health (Hospital) System or Inter-Local Health System (Zone)
7. **International Accrediting Organizations (IAOs)** – international accrediting bodies on health that are accredited by the International Society for Quality in Health Care (ISQua) for standards and organization.
8. **Participation** - process where HCPs enter into an agreement with PhilHealth to deliver the National Health Insurance Program by providing health care services to NHIP beneficiaries for reimbursement by PhilHealth
9. **Performance Commitment** – a document signed by HCPs who intend to participate in the National Health Insurance Program which stipulates their undertakings to provide complete and quality service to members of the NHIP and guarantee compliance to PhilHealth policies on benefits payment, information technology, data management and reporting and referral among others.

10. **Provider Data Record** – a form accomplished, whether manually or electronically, by an HCP upon registration containing basic data in relation to its demographical information and service capability.
11. **Registration** – process whereby an HCP submits information to PhilHealth by accomplishing the Provider Data Record and paying the registration fee.

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Annex 2. Implementing Guidelines on the New HCP Engagement Process

I. HOSPITALS

A. Registration:

1. Submit to any Philhealth Office the following documents:
 - a. Provider Data Record
 - b. Updated DOH license
 - c. Certificate of Accreditation by an ISQua accredited international accrediting organization (IAO) (if applicable)
 - d. Fee
 - e. Performance Commitment (see I.B below)
2. The following hospitals shall **not** undergo pre-accreditation survey:
 - a. Hospitals licensed by the DOH using licensure standards that has integrated the fifty-one (51) core indicators of the Philhealth Benchbook Standards for hospitals
 - b. DOH licensed hospitals granted accreditation by international accrediting organizations (IAOs) accredited by ISQUA that applied as Centers of Quality (CoQ) or Excellence (CoE)
 - c. DOH licensed hospitals that applied for a higher accreditation award i.e., CoQ or CoE, whose self-assessment scores do not qualify for at least a CoQ.
3. Hospitals that are granted accreditation by international accrediting organizations (IAOs) accredited by ISQUA that applied as CoQ or CoE shall be subject to the following guidelines:
 - a. If their self-assessment scores do not qualify for at least a CoQ, they shall be deemed accredited as Center of Safety (CoS).
 - b. If they applied as a CoE and their self-assessment scores only qualified as a CoQ, they shall only qualify as a CoQ
 - c. These hospitals may qualify as a CoQ or CoE if they comply with ALL of the following provisions:
 - Non-withholding of necessary/essential services to patients applicable to licensed service capability;
 - Compliance to policies on the implementation of case rate and/or “no balance billing” (if applicable);
 - No Writ of Execution issued against the applicant provider by PhilHealth within three (3) years prior to application of accreditation; and,
 - No negative monitoring findings, e.g., irrational drug use, over/underutilization of services, etc., that remain uncorrected for the year preceding the applicable period.
 - d. A hospital awarded as a CoQ or CoE shall inform PHIC on any change in the status of its IAO accreditation within 15 days from receipt of notice from the IAO. In case the accreditation granted by an IAO is terminated within the 3-year accreditation cycle the following shall apply:
 - The hospital's CoQ or CoE accreditation shall end on April 30 of the applicable year.

To illustrate:

Example	Date of termination of accreditation with IAO	Validity of Accreditation as COE	End of PHIC accreditation as COE
Hospital A	December 15, 2012	May 1, 2012 to April 30, 2015	April 30, 2013
Hospital B	January 31, 2013	May 1, 2012 to April 30, 2015	April 30, 2013

- Hospital shall apply for renewal of participation within thirty (30) days from its receipt of the notice from the concerned IAO, subject to the applicable HCP engagement process.

4. All hospitals awarded as CoS shall still conduct self-assessments although they need not submit the Benchbook Self-Assessment and Survey Tool (from Manual II). These documents should be available for perusal by Philhealth surveyors during the monitoring survey.
5. DOH licensed hospitals that applied for a higher accreditation award i.e., CoQ or CoE, not accredited by IAOs shall be subject to pre-accreditation survey and evaluation following existing standards and policies for accreditation including I.A.3b above. In addition to registration requirements enumerated in item I.A.3b (above), the following shall be submitted:
 - a. Benchbook (Self-Assessment) Scoresheet
 - b. Self-Assessment Summary (Benchbook)
6. DOH licensed hospitals that applied for a higher accreditation award i.e., CoQ or CoE, that are not accredited by IAOs, whose self-assessment scores do not qualify for at least a CoQ, shall be deemed accredited as Centers of Safety.

B. Performance Commitment (PC)

To activate its participation in the NHIP and be entitled to receive reimbursements, the HCP shall sign a Performance Commitment based on the NHIP benefit it intends to provide. This may be submitted together with the requirements for registration enumerated in I.A.1.

C. Certificate of Eligibility to Participate (CEP)

Upon compliance to the preceding requirements and procedures, a CEP shall be issued by Philhealth.

II. OUTPATIENT CLINICS

A. Registration:

Submit to any Philhealth Office the following documents:

1. Provider Data Record
2. DOH license/certificates (if applicable)
3. Fee
4. Performance Commitment

B. Pre-Accreditation Survey

1. All government-owned facilities qualified under item C.4 in this Circular, as providers of any PHIC outpatient package, are exempted from pre-accreditation survey.
2. All other outpatient facilities (government and private) not covered by item C.4 in this circular shall be subject to pre-accreditation survey and evaluation following existing standards and policies for accreditation of specific facility.

C. Performance Commitment (PC)

To activate its participation in the NHIP and be entitled to receive reimbursement, HCP signs a Performance Commitment based on the NHIP benefit it intends to provide. This may be submitted together with the requirements for registration enumerated in II.A above.

D. Certificate of Eligibility to Participate (CEP)

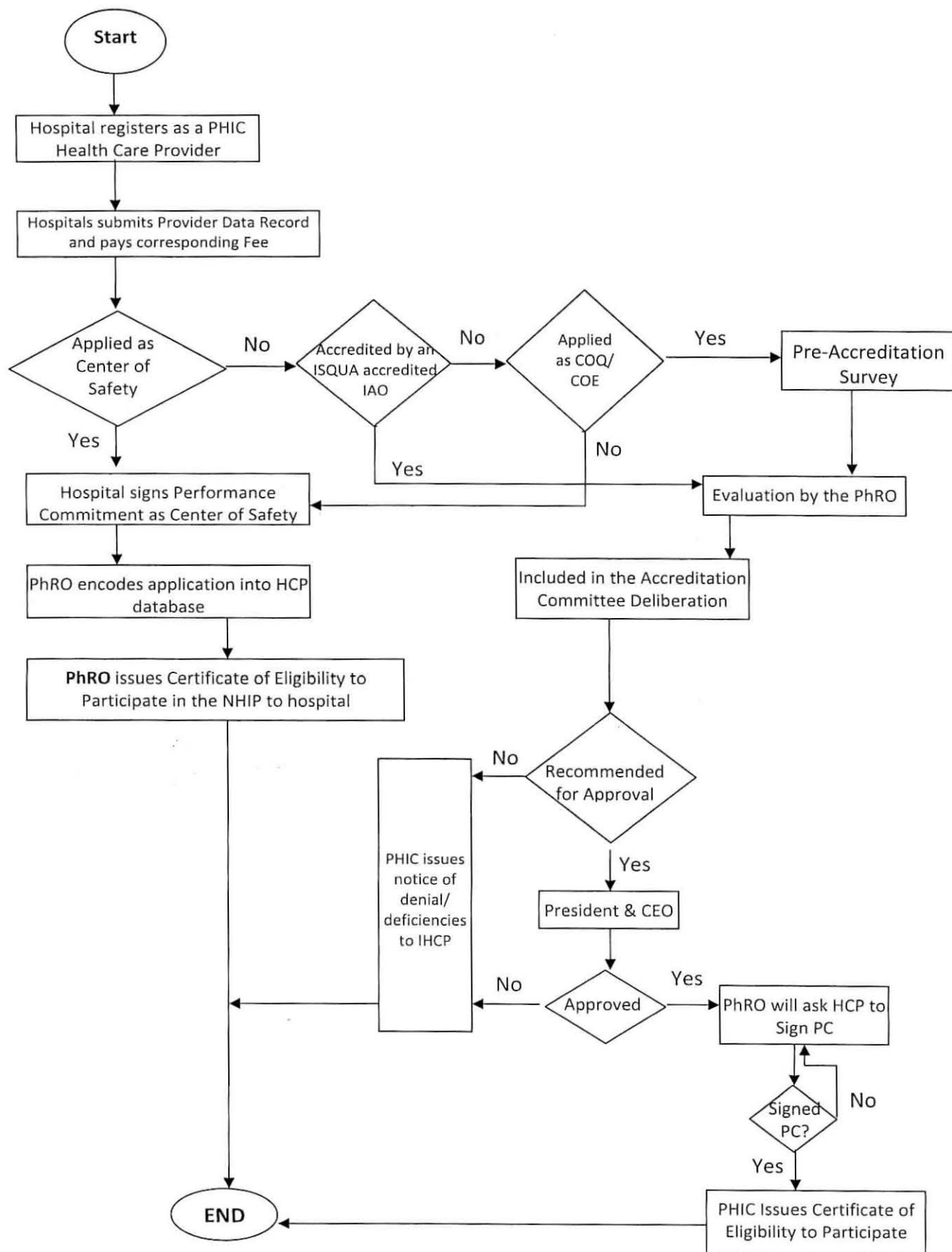
Upon compliance to the preceding requirements and procedures, a CE shall be issued by PhilHealth.

III. Health System Provider (HSP)

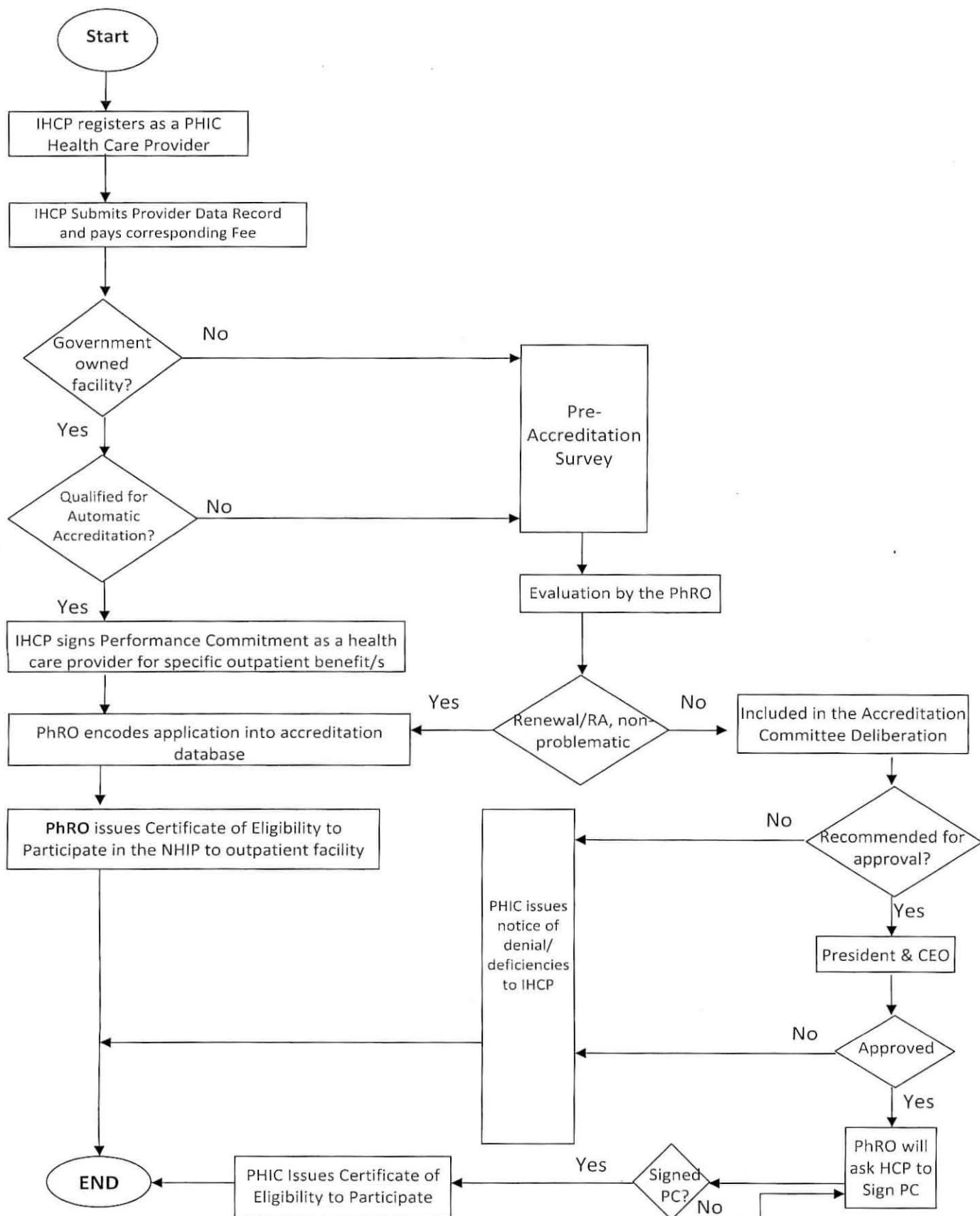
- A. All facilities under one local government unit (LGU) may apply as a group and submit the PC for Health System Provider (for all the included facilities) found in Annex 6. The Local Chief Executive and the individual managers of the facilities shall sign the PC.
- B. Each facility shall register individually and submit its own accomplished PDR as specified above.
- C. Each facility shall be issued a CEP as part of the local health system.
- D. Each facility shall be subject to the monitoring guidelines set by the Corporation.

Annex 3. Flowchart for new HCP Engagement Process for Institutional Health Care Providers

A. Hospitals



B. Outpatient facilities (Primary Care Benefit Providers including hospitals, Maternity Care Providers, DOTS Providers, Out Patient Malaria Providers, Ambulatory Surgical Clinics, Freestanding Dialysis Clinics, and other outpatient package providers)



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 City State Bldg., 709 Shaw Blvd., Pasig City
 Health line 441-7444; www.philhealth.gov.ph

PROVIDER DATA RECORD
INSTITUTIONAL HEALTH CARE PROVIDER (IHCP)

THE PRESIDENT & CEO

Philippine Health Insurance Corporation
 Pasig City, Philippines

Sir/Madam:

I, _____, of legal age, _____ with
 (Position/Designation)
 address at _____ and the duly authorized representative to act for and
 in behalf of _____, hereby submits the following pertinent information and
 (name of Health Care Institution)
 documentary requirements under Sec. 52 L of R.A. 7875 as amended by RA 9241 and its Implementing Rules and
 Regulations thereto.

Type of Institution: (Please shade the appropriate box)**Hospital:****Award Applied For:** **Self-assessment Scores:**

- ☐ Center of Safety Pt. Rights & Organizational Ethics _____ %
☐ Center of Quality Patient Care _____ %
☐ Center of Excellence Leadership and Management _____ %
Hospital Level: Human Resource Management _____ %
☐ Level 1 Information Management _____ %
☐ Level 2 Safe practice and Environment _____ %
☐ Level 3 Improving Performance _____ %
☐ Level 4 Core indicator _____ %

Outpatient Clinic:

- ☐ Single service ☐ 2-in-1 ☐ 3-in-1 ☐ Multiple
☐ Freestanding Dialysis Clinic (FDC)
☐ Primary Care Benefit Provider
☐ Maternity Care Package Provider
☐ Anti-TB/DOTS Package Provider
☐ Malaria Package Provider
☐ Animal Bite Treatment Package Provider
☐ Other Package Provider (Specify): _____

Facility Ownership (Please shade the appropriate box)

- ☐ Government ☐ Private
☐ Province ☐ DOH ☐ Single proprietorship ☐ Foundation
☐ City/Municipality ☐ Military/Police ☐ Partnership ☐ Cooperative
☐ University ☐ Others ☐ Corporation ☐ Others _____

Type of Application: (Please shade the appropriate box)

- ☐ Initial ☐ Re-accreditation
☐ Renewal ☐ with gap in accreditation ☐ Change in location/ownership
☐ Late Filer ☐ Upgrading/add'l services

Accreditation No. _____

Name of Institution: (Please print legibly and provide appropriate spaces)**Mailing/Billing Address:**

No. / St. / Brgy. _____

Municipality / City _____ Province _____ Zip Code _____

Other Contact Information

Contact No. _____ Fax No. _____ Email Address: _____

Medical Director/Chief of Hospital _____ Accreditation Number (If applicable) _____

Head of Facility _____ Administrator (If applicable) _____ Owner of the Institution _____

For PhilHealth Use Only

Date Evaluated: _____ By: _____ SO _____ Control No. _____
 PhRO _____
 Date Received: _____ By: _____ SO _____ OR No. _____
 PhRO _____ Date Paid: _____
 Date Encoded: _____ By: _____ SO _____ Amt Paid: _____
 PhRO (Data Entry) _____ PhRO _____

(Letterhead of Healthcare Provider)

(Date)

PHILIPPINE HEALTH INSURANCE CORPORATION

17th Flr., City State Centre Bldg.,
Shaw Blvd., Pasig City

SUBJECT : Performance Commitment

Sir/Madam:

To guarantee our commitment to the National Health Insurance Program (NHIP), we respectfully submit this Performance Commitment.

For the purposes of this Performance Commitment, we hereby warrant the following representations:

1. That we are [duly registered and licensed by the DOH] / [non-regulated health care facility] capable of delivering the services expected from the type of healthcare provider that we are applying for.
2. That we are owned by _____ and managed by _____ and doing business under the name of _____ [with license/certificate number _____].
3. That all professional health care providers in our facility have proper credentials and given appropriate privileges in accordance with our policies and procedures.
4. That our officers, employees, other personnel and staff are members in good standing of the NHIP.

Further, we hereby commit ourselves to the following:

5. That as responsible owner(s) and/or manager(s) of the institution, we shall be jointly and severally liable for all violations committed against the provisions of R.A 7875 including its Implementing Rules and Regulations and policies.
6. That we shall promptly inform PhilHealth prior to any change in the ownership and/or management of our institution.
7. That any change in ownership and/or management of our institution shall not operate to exempt the previous and/or present owner and/or manager from violations of R.A. 7875 including its Implementing Rules & Regulations and policies.
8. That we shall maintain active membership in the NHIP as an employer not only during the entire validity of our participation in the NHIP as an Institutional HealthCare Provider (IHCP) but also during the corporate existence of our institution.
9. That we shall abide with all the implementing rules and regulations, memorandum circulars, office orders, special orders and other administrative issuances by PhilHealth affecting us.

10. That we shall abide with all administrative orders, circulars and such other policies, rules and regulations issued by the Department of Health and all other related government agencies and instrumentalities governing the operations of IHCPs in participating in the NHIP.
11. That we shall adhere to pertinent statutory laws affecting the operations of IHCPs including but not limited to the Expanded Senior Citizens Act of 2003 (R.A. 9257), the Breastfeeding Act (R.A. 7600), the Newborn Screening Act (R.A. 9288), the Cheaper Medicines Act (R.A. 9502), the Pharmacy Law (R.A. 5921), the Magna Carta for Disabled Persons (R.A. 9442) and all other laws, rules and regulations that may hereafter be passed by the Congress of the Philippines or any other authorized instrumentalities of the government.
12. That we shall promptly submit reports as may be required by PhilHealth, DOH and all other government agencies and instrumentalities governing the operations of IHCPs.
13. That we are duly capable to deliver the following services [as provided in our DOH license] for the duration of the validity of this commitment (*please check appropriate boxes*):

- ☐ Level 1 hospital services
- ☐ Level 2 hospital services
- ☐ Level 3 hospital services
- ☐ Level 4 hospital services
- ☐ Specialized services
 - ☐ Radiotherapy
 - ☐ Hemodialysis/Peritoneal Dialysis
 - ☐ Others (please specify) _____
- ☐ Benefit package and other services
 - ☐ Tuberculosis Directly Observed Treatment System (TB DOTS)
 - ☐ Maternity Care Package
 - ☐ Newborn Care Package
 - ☐ Malaria Package
 - ☐ Primary Care Benefit Package 1 (For government hospitals only)
 - ☐ Outpatient HIV/AIDS Package (for DOH identified hospitals only)
 - ☐ Others(please specify) _____

14. That we shall provide and charge to the PhilHealth benefit of the client the necessary services including but not limited to drugs, medicines, supplies, devices, and diagnostic and treatment procedures for our PhilHealth clients.
15. That we shall provide the necessary drugs, supplies and services with no out of-pocket expenses on the part of the members as contained in PhilHealth's 'No Balance Billing' (NBB) Policy.
16. That we shall maintain a high level of service satisfaction among PhilHealth clients including all their qualified beneficiaries.
17. That we shall be guided by PhilHealth-approved clinical practice guidelines or if not available, other established and accepted standards of practice.
18. That we shall provide a PhilHealth Bulletin Board for the posting of updated information of the NHIP (circulars, memoranda, IEC materials, price reference index, etc.) in conspicuous places accessible to patients, members and dependents of the NHIP within our healthcare facility.
19. That we shall always make available the necessary forms for patient's use.
20. That we shall treat clients with courtesy and respect, assist them in availing PhilHealth benefits and provide them with accurate information on PhilHealth policies and guidelines.
21. That we shall ensure that clients with needs beyond our service capability are referred to appropriate PhilHealth-accredited facilities.

22. That we shall maintain a registry of all our clients/patients (including newborns) including a database of all claims filed containing actual charges (board, drugs, labs, auxiliary, services and professional fees), actual amount deducted/ by the facility as PhilHealth reimbursement and actual Philhealth reimbursement, which shall be made available to PhilHealth or any of its authorized personnel.
23. That we shall maintain and submit to PhilHealth an electronic registry of physicians including their fields of practice, official e-mail and mobile phone numbers.
24. That we shall electronically encode the drugs and supplies used in the care of the patient in our information system, which shall be made available for PhilHealth use.
25. That we shall ensure that true and accurate data are encoded in all patients' records.
26. That we shall only file legitimate claims recognizing the period of filing after the patient's discharge prescribed in PhilHealth circulars.
27. That we shall submit claims in the format required for our facility.
28. That we shall regularly submit PhilHealth monitoring reports as required in PhilHealth circulars and the PhilHealth Benchbook.
29. That we shall annually submit a copy of our audited financial statement/report.
30. That we shall extend full cooperation with duly recognized authorities of PhilHealth and any other authorized personnel and instrumentalities to provide access to patient records and submit to any assessment conducted by PhilHealth relative to any findings, adverse reports, pattern of utilization and/or any other acts indicative of any illegal, irregular and/or unethical practices in our operations as an accredited IHCP of the NHIP that may be prejudicial or tends to undermine the NHIP and make available all pertinent official records and documents including the provision of copies thereof.
31. That we shall ensure that our officers, employees and personnel extend full cooperation and due courtesy to all PhilHealth officers, employees and staff during the conduct of assessment/visitation/investigation/monitoring of our operations as an accredited IHCP of the NHIP.
32. That at any time during the period of our participation in the NHIP, upon request of PhilHealth, we shall voluntarily and unconditionally sign and execute a new 'Performance Commitment' to cover the remaining portion of our engagement or to renew our participation with the NHIP as the case may be, as a sign of our good faith and continuous commitment to support the NHIP.
33. That we shall take full responsibility for any inaccuracies and/or falsities entered into and/or reflected in our patients' records as well as in any omission, addition, inaccuracies and/or falsities entered into and/or reflected in claims submitted to PhilHealth by our institution.
34. That we shall comply with PhilHealth's summons, subpoena, subpoena 'duces tecum' and other legal or quality assurance processes and requirements.
35. That we shall recognize the authority of PhilHealth, its Officers and personnel and/or its duly authorized representatives to conduct regular surveys, domiciliary visits and/or conduct administrative assessment(s) at any time relative to the exercise of our privilege and conduct of our operations as an accredited IHCP of the NHIP.
36. That we shall comply with the corrective actions given after monitoring activities within the prescribed period.
37. That we shall protect the NHIP against abuse, violation and/or over-utilization of its funds and we shall not allow our institution to be a party to any act, scheme, plan, or contract that may directly or indirectly be prejudicial to the NHIP.
38. That we shall not directly or indirectly engage in any form of unethical or improper practices as an accredited provider such as, but not limited to, solicitation of patients for purposes of compensability under the NHIP, the purpose and/or the end consideration of which tends unnecessary financial gain rather than promotion of the NHIP.

39. That we shall immediately report to PhilHealth, its officers and/or to any of its personnel, any act(s) of illegal, improper and/or unethical practices of IHCP of the NHIP that may have come to our knowledge directly or indirectly.
40. We agree that PhilHealth may deduct from our future claims, all reimbursements paid to our institution during the period of its non-accredited status as a result of a gap in validity of our DOH license, suspension of accreditation, etc; downgrading of level, loss of license for certain services including any and all other fees due to be paid to PhilHealth.

Furthermore, recognizing PhilHealth's indispensable role in the NHIP, we hereby acknowledge the power and authority of PhilHealth to do the following:

41. To suspend, shorten, pre-terminate and/or revoke our privilege of participating in the NHIP including the appurtenant benefits and opportunities at any time during the validity of the commitment for any violation of any provision of this Performance Commitment.
42. To suspend, shorten, pre-terminate and/or revoke our accreditation including the appurtenant benefits and opportunities incident thereto at any time during the term of the commitment due to verified adverse reports/findings of pattern or any other similar incidents which may be indicative of any illegal, irregular or improper and/or unethical conduct of our operations.
43. To deny our accreditation and consequently participation in the NHIP should there be a case, regardless of the nature thereof, filed by us against PhilHealth, its Officers and/or any of its Personnel. Provided that, if in the discretion of PhilHealth, the specific nature of the case is such that it will not directly or indirectly affect a healthy business relationship with us, PhilHealth, upon the recommendation of the Accreditation Committee, may favorably consider the approval of our accreditation.

We commit to extend our full support in sharing PhilHealth's vision in achieving this noble objective of providing accessible quality health insurance coverage for all Filipinos.

Local Chief Executive (if LGU-owned)/Owner

Head of Facility/Medical Director/Manager

(Letterhead of LGU)

(Date)

PHILIPPINE HEALTH INSURANCE CORPORATION

17th Flr., City State Centre Bldg.,
Shaw Blvd., Pasig City

SUBJECT : Performance Commitment

Sir/Madam:

To guarantee our commitment to the National Health Insurance Program (NHIP), we respectfully submit this Performance Commitment.

For the purposes of this Performance Commitment, we hereby warrant the following representations:

1. That the following facilities are capable of delivering the services expected from the type of healthcare provider that we are applying for:

Name of Facility	Type of facility (hospital, RHU, HC, Lying-in, TB-DOTS, ABTCs, etc)	Hospital Level (if applicable)	License Number/Certificate Number (if applicable)	Management (if different from the LGU)

2. That all professional healthcare providers in our facility have proper credentials and given appropriate privileges in accordance with our policies and procedures.
3. That our officers, employees, other personnel and staff are members in good standing of the NHIP.

Further, we hereby commit ourselves to the following:

4. That as responsible owner(s) and/or manager(s) of the institution, we shall be jointly and severally liable for all violations committed against the provisions of R.A 7875 including its Implementing Rules and Regulations and policies.
5. That we shall promptly inform PhilHealth prior to any change in the ownership and/or management of our institution.
6. That any change in ownership and/or management of our institution shall not operate to exempt the previous and/or present owner and/or manager from violations of R.A. 7875 including its Implementing Rules & Regulations and policies.

Annex 6 – Performance Commitment for Health Systems Providers

7. That we shall maintain active membership in the NHIP as an employer not only during the entire validity of our participation in the NHIP as an Institutional HealthCare Provider (IHCP) but also during the corporate existence of our institution.
8. That we shall abide with all the implementing rules and regulations, memorandum circulars, office orders, special orders and other administrative issuances by PhilHealth affecting us.
9. That we shall abide with all administrative orders, circulars and such other policies, rules and regulations issued by the Department of Health and all other related government agencies and instrumentalities governing the operations of IHCPs in participating in the NHIP.
10. That we shall adhere to pertinent statutory laws affecting the operations of IHCPs including but not limited to the Expanded Senior Citizens Act of 2003 (R.A. 9257), the Breastfeeding Act (R.A. 7600), the Newborn Screening Act (R.A. 9288), the Cheaper Medicines Act (R.A. 9502), the Pharmacy Law (R.A. 5921), the Magna Carta for Disabled Persons (R.A. 9442) and all other laws, rules and regulations that may hereafter be passed by the Congress of the Philippines or any other authorized instrumentalities of the government.
11. That we shall promptly submit reports as may be required by PhilHealth, DOH and all other government agencies and instrumentalities governing the operations of IHCPs.
12. That we shall deliver the following services [as provided in our DOH license] for the duration of the validity of this commitment:

Name of Facility	Committed Services (choose from the enumerated services below; e.g. 1, 6a, 6b, 6c)

1. Level 1 hospital services
 2. Level 2 hospital services
 3. Level 3 hospital services
 4. Level 4 hospital services
 5. Specialized services
 - a. Radiotherapy
 - b. Hemodialysis/Peritoneal Dialysis
 - c. Others (please specify in table)
 6. Benefit package and other services
 - a. Tuberculosis Directly Observed Treatment Shortcourse (TB DOTS)
 - b. Maternity Care Package
 - c. Newborn Care Package
 - d. Outpatient Malaria Package
 - e. Primary Care Benefit Package 1 (For government hospitals only)
 - f. Outpatient HIV/AIDS Package (for DOH identified hospitals only)
 - g. Outpatient Animal Bite Treatment Package
 - h. Others (please specify in table)
13. That we shall provide and charge to the PhilHealth benefit of the client the necessary services including but not limited to drugs, medicines, supplies, devices, and diagnostic and treatment procedures for our PhilHealth clients.
 14. That we shall provide the necessary drugs, supplies and services with no out-of-pocket expenses on the part of the members as contained in PhilHealth's 'No Balance Billing' (NBB) Policy.

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15. That we shall maintain a high level of service satisfaction among PhilHealth clients including all their qualified beneficiaries.
16. That we shall be guided by PhilHealth-approved clinical practice guidelines or if not available, other established and accepted standards of practice.
17. That we shall provide a PhilHealth Bulletin Board for the posting of updated information of the NHIP (circulars, memoranda, IEC materials, price reference index, etc.) in conspicuous places accessible to patients, members and dependents of the NHIP within our healthcare facility.
18. That we shall always make available the necessary forms for patient's use.
19. That we shall treat clients with courtesy and respect, assist them in availing PhilHealth benefits and provide them with accurate information on PhilHealth policies and guidelines.
20. That a functional referral system, which will ensure that patients are managed in appropriate facilities, shall be established and institutionalized among the signatories of this Performance Commitment.
21. That we shall ensure that clients with needs beyond our service capability are referred to appropriate PhilHealth-accredited facilities.
22. That we shall maintain a registry of all our clients/patients (including newborns) including a database of all claims filed containing actual charges (board, drugs, labs, auxiliary, services and professional fees), actual amount deducted/ by the facility as PhilHealth reimbursement and actual Philhealth reimbursement, which shall be made available to PhilHealth or any of its authorized personnel.
23. That we shall maintain and submit to PhilHealth an electronic registry of physicians including their fields of practice, official e-mail and mobile phone numbers.
24. That we shall electronically encode the drugs and supplies used in the care of the patient in our information system, which shall be made available for PhilHealth use.
25. That we shall ensure that true and accurate data are encoded in all patients' records.
26. That we shall only file legitimate claims recognizing the period of filing after the patient's discharge prescribed in PhilHealth circulars.
27. That we shall submit claims in the format required for our facility.
28. That we shall regularly submit PhilHealth monitoring reports as required in PhilHealth circulars and the PhilHealth Benchbook.
29. That we shall annually submit a copy of our audited financial statement/report.
30. That we shall extend full cooperation with duly recognized authorities of PhilHealth and any other authorized personnel and instrumentalities to provide access to patient records and submit to any assessment conducted by PhilHealth relative to any findings, adverse reports, pattern of utilization and/or any other acts indicative of any illegal, irregular and/or unethical practices in our operations as an accredited IHCP of the NHIP that may be prejudicial or tends to undermine the NHIP and make available all pertinent official records and documents including the provision of copies thereof.
31. That we shall ensure that our officers, employees and personnel extend full cooperation and due courtesy to all PhilHealth officers, employees and staff during the conduct of assessment/visitation/investigation/monitoring of our operations as an accredited IHCP of the NHIP.
32. That at any time during the period of our participation in the NHIP, upon request of PhilHealth, we shall voluntarily and unconditionally sign and execute a new 'Performance Commitment' to cover the remaining portion of our engagement or to renew our participation with the NHIP as the case may be, as a sign of our good faith and continuous commitment to support the NHIP.
33. That we shall take full responsibility for any inaccuracies and/or falsities entered into and/or reflected in our patients' records as well as in any omission, addition, inaccuracies and/or falsities entered into and/or reflected in claims submitted to PhilHealth by our institution.
34. That we shall comply with PhilHealth's summons, subpoena, subpoena 'ducestecum' and other legal or quality assurance processes and requirements.

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35. That we shall recognize the authority of PhilHealth, its Officers and personnel and/or its duly authorized representatives to conduct regular surveys, domiciliary visits and/or conduct administrative assessment(s) at any time relative to the exercise of our privilege and conduct of our operations as an accredited IHCP of the NHIP.
36. That we shall comply with the corrective actions given after monitoring activities within the prescribed period.
37. That we shall protect the NHIP against abuse, violation and/or over-utilization of its funds and we shall not allow our institution to be a party to any act, scheme, plan, or contract that may directly or indirectly be prejudicial to the NHIP.
38. That we shall not directly or indirectly engage in any form of unethical or improper practices as an accredited provider such as, but not limited to, solicitation of patients for purposes of compensability under the NHIP, the purpose and/or the end consideration of which tends unnecessary financial gain rather than promotion of the NHIP.
39. That we shall immediately report to PhilHealth, its officers and/or to any of its personnel, any act(s) of illegal, improper and/or unethical practices of IHCP of the NHIP that may have come to our knowledge directly or indirectly.
40. We agree that PhilHealth may deduct from our future claims, all reimbursements paid to our institution during the period of its non-accredited status as a result of a gap in validity of our DOH license, suspension of accreditation, etc; downgrading of level, loss of license for certain services including any and all other fees due to be paid to PhilHealth.

Furthermore, recognizing PhilHealth's indispensable role in the NHIP, we hereby acknowledge the power and authority of PhilHealth to do the following:

41. To suspend, shorten, pre-terminate and/or revoke our privilege of participating in the NHIP including the appurtenant benefits and opportunities at any time during the validity of the commitment for any violation of any provision of this Performance Commitment.
42. To suspend, shorten, pre-terminate and/or revoke our accreditation including the appurtenant benefits and opportunities incident thereto at any time during the term of the commitment due to verified adverse reports/findings of pattern or any other similar incidents which may be indicative of any illegal, irregular or improper and/or unethical conduct of our operations.
43. To deny our accreditation and consequently participation in the NHIP should there be a case, regardless of the nature thereof, filed by us against PhilHealth, its Officers and/or any of its Personnel. Provided that, if in the discretion of PhilHealth, the specific nature of the case is such that it will not directly or indirectly affect a healthy business relationship with us, PhilHealth, upon the recommendation of the Accreditation Committee, may favorably consider the approval of our accreditation.

We commit to extend our full support in sharing PhilHealth's vision in achieving this noble objective of providing accessible quality health insurance coverage for all Filipinos.

Head of Facility/Medical Director/Manager

With my express conformity:

Local Chief Executive