

Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

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



PHILHEALTH CIRCULAR

No. 0026, s. 2013

TO

ALL HEALTH CARE PROVIDERS, PEOPLE OF

ZAMBOANGA CITY, REGIONAL OFFICES (PROs), AND

ALL OTHERS CONCERNED

SUBJECT

Implementing Guidelines on the NHIP Coverage for Victims of

the Armed Conflict in Zamboanga City

In view of the effects brought about by the on-going armed conflict in Zamboanga City, appropriate response to this extraordinary situation shall be undertaken by the Corporation by extending NHIP privileges to all victims of the armed conflict as well as health care providers.

A. SCOPE AND COVERAGE

This Circular shall cover claims of victims of the armed-conflict in Zamboanga City that satisfy any of the following conditions:

- 1. PhilHealth or non-PhilHealth members
- Sought health care services in accredited or non-accredited but DOH licensed health care institutions
- 3. Attended by accredited or non-accredited health care professionals.
- 4. Treated as an inpatient or outpatient.
- Transferred from or managed by health personnel from accredited facilities in an evacuation area, or an improvised health care facility.

B. GENERAL RULES

- The Corporation shall accord special privileges to the victims and the health care providers as follows:
 - a. Exemption to the forty five (45) day benefit limit rule, the single period of confinement (SPC) and premium payment shall be applicable to those admitted from September 9, 2013 up to the date to be determined by PRO IX.
 - b. Maximum of one hundred twenty (120) calendar days from the date of discharge shall be allowed to file the claim of the affected health care institutions. This is regardless whether the claim is filed by the health care institution or directly filed by members. This shall cover for discharge dates from July 11, 2013 until the end of the conflict, as determined by the PRO IX.
 - c. Both referring and referral/receiving health care institution shall be reimbursed the applicable amount based on the benefit schedule.
 - d. These special privileges shall be terminated on the date to be determined by PRO IX.



- 2. No Balance Billing (NBB) Policy will apply to all cases reimbursed either as Case Rates or under the Fee-For-Service mechanism. Private health care institutions are encouraged to implement the NBB policy for the victims of the conflict.
- Elective procedures when performed during this period shall not be covered by any of the special privileges.
- 4. Claims for management of patients attended by personnel of Zamboanga City Medical Center, whether in the facility itself or in satellite facilities set up during the crisis, shall be reimbursed according to the level of the facility.
- Reimbursement shall be based on the provider payment mechanism at the time of admission.
- Claims shall be evaluated to determine the applicable payment mechanism and appropriate reimbursement.
- Rules on direct filing except the special privileges and other applicable provisions stated above shall still be in effect.
- 8. For ambiguous cases that may be attributed to the conflict (example: AGE in evacuation centers, Fleart Attack during the assault, vehicular accidents while fleeing from the site of conflict) the PRO IX shall validate each case and decide for their inclusion or NON-inclusion in the coverage of this circular.

C. MEMBERSHIP

All non-members of PhilHealth residing in areas affected by the armed conflict who have been treated for various conditions arising from the armed conflict shall be accorded PhilHealth benefits. For non-members less than 21 years old whose parents are neither members, one parent shall be automatically covered.

- a. The Health Care Institution (HCI) shall check first whether the patient is indeed a non-member through any of the following means, if available: the PhilHealth Website, the IHCP portal, Claims Eligibility Web Service and/or the PhilHealth Cares personnel.
- b. The non member shall fill out a PhilHealth Member Registration Form (PMRF) and/or Claim Form 1 (CF1) which shall be provided either by a PhilHealth Cares staff or shall be made available at the PhilHealth or Billing Section of the hospital.
- c. The HCI shall submit the following to PhilHealth Regional Office IX (PRO IX) within 120 days after discharge:
 - i. PMRF/Claim Form 1
 - ii. Claim Forms 2, 3 and other relevant documents.

D. PROCEDURE

Filing of claims by health care institutions shall be in accordance to the following:

1. The health care institution shall indicate in the upper left corner of the claim form 2 "wictim of armed conflict" to appropriately identify the claim to be accorded the special privileges among others. In cases where the victim was referred by another health care institution, the receiving health care institution shall submit the Referral Form, sample of which is attached as Annex A.

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- 2. Claims for PhilHealth members shall follow the regular procedure in filing claims.
- 3. For non-PhilHealth members, a completely filled out PhilHealth Membership Registration Form (PMRF) and/or Claim Form 1 shall be submitted along with completely filled out Claim Forms 2 and 3.

E. REPEALING CLAUSE

All provisions of previous issuances, circulars, and directives that are inconsistent with any of the provisions of this Circular are hereby amended, modified, or repealed accordingly.

F. EFFECTIVITY

This shall take effect immediately.

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Data: A P 13 B



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REFERRAL FORM

NAME OF REFERRING HOSPITAL DATE OF REFERRAL NAME OF PATIENT DIAGNOSIS/ES	
HOSPITAL REFERRED TO	
SIGNATURE OVER PRINTED NAME OF REFERRING HOSPITAL'S REPRESENTATIVE	SIGNATURE OVER PRINTED NAME OF REFERRAL HOSPITAL'S REPRESENTATIVE



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