TAMANG SAGOT

PhilHealth Circular No. 2016-013

Subject: Per Family Payment (PFP) Processing Using the Automated Payment Utility in the PhilHealth HCI Portal (U-PCM) and Other Certified Electronic Medical Records (EMR)

1. What is PFP?

Per Family Payment (PFP) is an incentive paid to accredited PCB1 providers who have afforded access to care to assigned eligible members through enlistment, profiling and delivery of basic healthcare services.

2. What is UPCM?

Updated Primary Care Module (UPCM) is a module developed by PhilHealth to automate the Per Family Payment (PFP) processing from assignment of PCB1 members to payment. This module can be accessed in the PhilHealth HCI portal.

3. Is the UPCM the only electronic system that may be used by a PCB1 provider?

No. PCB1 providers may opt to use any of the certified Electronic Medical Record (EMR), especially if there are problems in internet connectivity.

4. What are the other EMRs?

The other EMRs are those that were jointly certified by DOH and PhilHealth such as Integrated Clinic Information System (I-Clinicsys), Community Health Information Tracking System (CHITS), Wireless Access for Health (WAH), eHealth TABLET for Informed Decision- making (eHATID), Secured Health Information Network and Exchange (SHINE) and Segworks.

5. What happens if the PCB1 provider does not have a UPCM or EMR?

Their PFP claims cannot be processed. Manual submission of claims shall only be allowed during fortuitous events.

6. Can the accredited PCB1 provider have both UPCM and EMR in their facility?

No. A PCB1 provider may only choose **one (1): either** UPCM or any of the certified EMRs.

7. How will the UPCM and EMR facilitate the PFP Processing?

All PCB1 providers can just input all data of members and dependents for their enlistment and profiling. All encoded data shall automatically be processed by the UPCM/EMR for PFP computation and report generation.

8. Will the PCB1 provider be reimbursed for ALL enlisted and profiled members and dependents entered into the system?

No. The PCB1 provider will only be reimbursed for members and dependents encoded into the system whose eligibility has been verified from the PhilHealth Membership database. Only encoded eligible members and dependents shall be included in the PFP computation, beginning on the quarter they were enlisted and profiled during the applicable year. Hence, a provider will not receive the full 500 pesos PFPR if enlistment and profiling occurred beyond the 1st Quarter of the applicable year.

PCB1 eligible members shall include Sponsored members, NHTS identified, land-based OFWs, organized groups, and DepEd personnel.

4P card holders not found in the PhilHealth Membership Database shall be required to accomplish a PhilHealth Membership Registration Form (PMRF) for verification and updating of membership status. The accomplished form shall then be submitted by the PCB1 provider to the nearest Local Health Insurance Office (LHIO).

The PMRF shall be made available in all accredited PCB1 providers.

9. What happens to all enlisted and profiled data entered into the system? Will these data be deleted from the system for the following year?

All enlisted and profiled data shall be stored in the data warehouse. Since the system processes member and dependent transactions, all enlistment and profiling data must be updated to be included in the PFP computation for each applicable year.

10. Since the process has been automated, does the PCB1 provider need to submit hard copy documents?

Yes. The PCB1 provider shall submit the following system-generated documents to the Local Health Insurance Office (LHIO) on or before the 15th day of the first month of the succeeding quarter.

Name of documents	Schedule of generation	Required action taken by the
		PCB1 Provider
1. A2 & A4	On or before the 5 th day of the	Signed by the Head of the facility
2. Billing Statement	first month of the succeeding	- 8 , -
	quarter	and shall be recorded and kept by the
		Local Accountant in the books of
		accounts of the PCB1 provider.