



TAMANG SAGOT

PHILHEALTH CIRCULAR NO. 2016-0026

Re: Health Care Provider Performance Assessment System (HCP PAS) Revision 1

1. What is the Health Care Provider Performance Assessment System?

It is a set of guidelines standardizing the process of monitoring the performance of all PhilHealth-accredited Health Care Providers (HCP) in terms of access to PhilHealth benefits, provision of quality health care and assurance of financial risk protection to all NHIP beneficiaries.

2. How will PhilHealth address the findings gathered from the different monitoring activities?

The PhilHealth Regional Offices have to perform the monitoring activities and a monthly deliberation shall be conducted to discuss findings reported from the different monitoring activities. Appropriate Notice of Warning for validated findings with quality issues shall be issued by the PRO if warranted.

All questionable/unethical practices as determined by the Quality Assurance Group (QAG) through the Quality Assurance Committee (QAC) from validated adverse monitoring findings as identified in Title IV Rule II Sec 47-e of abovementioned IRR, and other violations relative to quality healthcare delivery are also covered by this policy.

Adverse monitoring findings that are legal in nature shall be endorsed to the PRO or Central Office Legal Office for appropriate action.

3. How many warnings shall be given to the erring HCP before they are penalized?

Health Care Providers (HCPs) with quality issues are given up to two (2) warnings. A third validated violation shall be regarded as one (1) offense. For adverse findings with Legal issues, one (1) validated violation shall already be regarded as one (1) offense.

The HCP shall be sanctioned and/or penalized accordingly as prescribed in the IRR of RA 10606 or the National Health Insurance Act of 2013. Due process shall be observed at all times.

4. What is being referred to as “feedback mechanism” in the Circular?

PhilHealth shall provide feedback on all adverse monitoring findings to the concerned HCP. The HCP shall be informed of any identified poor performance, adverse monitoring finding or administrative offense for corrective measure/s. The performance assessment process encourages HCPs to improve their performance.

The Health Care Institution (HCI) shall be informed of any breach of Performance Commitment (PC) committed by health care professionals affiliated with it and the case



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may be taken against the facility. The HCIs shall ensure that their affiliated health care professionals perform according to the PC that they have signed. The concerned HCPs are required to submit a notarized justification/explanation letter for any validated adverse monitoring finding within ten (10) working days from receipt of the feedback.

5. When is the monitoring done by PhilHealth?

PhilHealth conducts the following monitoring activities before, during processing of, and after claims payment (post-audit):

- a. Before claims payment:
 - PhilHealth Patient Exit Surveys conducted in hospitals among all PhilHealth patients for discharge
 - Routine Facility Inspection

- b. During processing of claims payment:
 - In cases of apparent and probable presence of irregularities and/or abuses of the NHIP, PhilHealth may issue a temporary suspension of payment of claims for HCPs with pending further evaluation/verification of the monitoring findings and may be subject to the following monitoring activities:
 - Chart/Document review
 - Field validation
 - Domiciliary visits

- c. After claims payment (post-audit):
 - Medical Post-audit Module (MPAM)
 - Mandatory Monthly Hospital Report (MMHR)
 - Chart review
 - Facility inspection
 - Field validation
 - Claims profiling or utilization review
 - Domiciliary visits
 - Patient exit surveys
 - Relevant reports from internal and external stakeholders

6. When does this Circular take effect?

This Circular takes effect 15 days after publication in a newspaper.