

# TAMANG SAGOT

## PhilHealth Circular No. 2017-0033

### **Per Family Payment (PFP) Processing Using the Automated Payment Utility in the PhilHealth HCI Portal (U-PCM) and Other Certified Electronic Medical Record (EMR)** Revision 1

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#### **1. What is PFP?**

Per Family Payment (PFP) is a reimbursement to incentivize accredited Primary Care Benefit 1 providers that have afforded access to primary care to assigned eligible members through enlistment, profiling and delivery of basic healthcare services.

#### **2. What is UPCM?**

The Updated Primary Care Module (UPCM) is a module developed by PhilHealth to automate the 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 Records (EMR), especially if there are problems with internet connectivity. Electronic data submission may be through UPCM until December 31, 2016.

#### **4. What is an EMR?**

An EMR is the electronic record system or digital medical and clinical records of patient's encounter within one health facility.

#### **5. What are the other EMRs?**

EMRs are those that were jointly certified by DOH and PhilHealth such as iClinicSys (on-line and off-line), CHITS (on-line and off-line), WAH, eHatid LGU (on-line and off-line), SHINE OS+ (on-line and off-line).

#### **6. What happens if the PCB1 provider does not have a UPCM or EMR?**

The PFP claims shall not be processed. Manual submission of claims shall only be allowed during fortuitous events.

#### **7. 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. However, accredited PCB providers may use UPCM until December 31, 2016 only.

## **8. How will the EMR systems facilitate the PFP Processing?**

All PCB1 providers can now input all data of members and dependents from enlistment and profiling. All encoded data shall automatically be processed by EMR system for PFP computation and report generation.

For 2016, only accredited PCB providers who are able to electronically transmit data shall be reimbursed.

Beginning January 1, 2017, only data transmitted through the above mentioned certified Electronic Medical Record (EMR) providers shall be processed for PFPR reimbursements.

PCB accredited hospitals and Rural Health Units without EMR system shall submit PCB data using Manual Excel File with additional data requirements (MEF Plus) from January to December 31, 2017. Submission of MEF Plus shall be within seven (7) days at the end of every month for uploading at the LHIO. However, Statement of Accounts Payable shall still be generated on a quarterly basis.

## **9. 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 entered into the system whose eligibility had been verified from the PhilHealth Membership database. Inclusion to the PFP computation shall start on the quarter when the members and dependents were initially enlisted and profiled.

PCB1 eligible members shall include Sponsored members, National Household Targeting System identified, land-based Overseas Filipino Workers, organized groups, and DepEd personnel. 4P card holders not found in the database shall be required to accomplish a PhilHealth Member Registration Form (PMRF) for verification and updating of membership status and submit this to the nearest Local Health Insurance Office (LHIO) through their PCB1 provider.

## **10. How does PhilHealth electronically compute for the PFPR?**

The electronic processing of PFPR shall be done through Centralized Automated Scheduled Batch Processing (CASBP) which shall compute for the Per Family Payment Rate (PFPR) and generate the SAP. Computation of PFPR shall be based on current available data on the prescribed cut-off date.

## **11. What would be the other reasons for non-reimbursement of PFP?**

- If member is eligible but was not assigned to the claiming PCB provider;
- If an LGU sponsored member has expired validity/effectivity of coverage;
- If 4Ps card holder has not been registered/identified by Department of Social Welfare and Development through the NHTS;
- If enlistment and profiling were done beyond the applicable quarter; and
- If OFW/Organized Group member has no qualifying contributions

**12. 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 system. Since the system processes patient encounters, updating of enlistment and profiling is required for inclusion in the PFP computation for each applicable year.

**13. Since the process has been automated, what is the schedule of submission of report?**

Table 1. Schedule of Submission and Transmission of Reports

LEVELS OF DATA TRANSMISSION	REPORTING MODULE		
	MEF Plus	EMR- Online	EMR-Offline
RHUs to LHIOs	Within seven (7) calendar days after the applicable month	N/A	N/A
RHUs to EMR providers	N/A	Daily/Real-time	Within seven (7) calendar days after the applicable month
EMR providers to PHIE Lite	N/A	Daily/Real-time	Within three (3) calendar days after the receipt of reports from PCB1 providers

**14. Does the PCB1 provider need to submit hard copy documents?**

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

Name of documents	Schedule of generation	Required action taken by the PCB1 Provider										
1. Statement of Accounts Payable (SAP)	15 <sup>th</sup> calendar day of the two immediately succeeding months after the applicable quarter:  <table border="0"> <tr> <td>Covered Quarter</td> <td>Schedule of SAP generation</td> </tr> <tr> <td>1<sup>st</sup></td> <td>April 15; May 15</td> </tr> <tr> <td>2<sup>nd</sup></td> <td>July 15; August 15</td> </tr> <tr> <td>3<sup>rd</sup></td> <td>Oct. 15; Nov. 15</td> </tr> <tr> <td>4<sup>th</sup></td> <td>Jan. 15; Feb. 15 of the following year</td> </tr> </table>	Covered Quarter	Schedule of SAP generation	1 <sup>st</sup>	April 15; May 15	2 <sup>nd</sup>	July 15; August 15	3 <sup>rd</sup>	Oct. 15; Nov. 15	4 <sup>th</sup>	Jan. 15; Feb. 15 of the following year	The signed SAP shall be returned to the LHIO three (3) calendar days upon receipt for timely processing of the PFP. Delay in the submission of signed SAP shall result to delay in the processing of PFP.
Covered Quarter	Schedule of SAP generation											
1 <sup>st</sup>	April 15; May 15											
2 <sup>nd</sup>	July 15; August 15											
3 <sup>rd</sup>	Oct. 15; Nov. 15											
4 <sup>th</sup>	Jan. 15; Feb. 15 of the following year											

2. Fund Utilization Report		Submit FUR on a quarterly basis. Non-submission of FUR shall be construed as non-compliance to Performance Commitment.
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A2 and A4 forms shall no longer be required as documentary requirements.

The said SAP should be taken-up in the books of accounts of the PCB provider and should follow the applicable accounting and auditing rules and regulations.

The PCB provider, upon receipt of the payment, shall issue an official receipt to PhilHealth.

**15. What is the formula for PFP computation?**

$$PFPR = [EM \times P50] + [EM \times A]$$

$$\text{Where } A = (PMD/EMD) \times 100 = \% \text{ PMD}$$

$$A = \% \text{ PMD (Use Table 1 to identify the amount allotted for the \%)}$$

Table1. Amount allotted on the percentage of profiled members and dependents

Percentage profiled MM and DD (%PMD)	Amount Allotted
80%-100%	P 75
70%-79%	P 50
50%-69%	P 25
Less than 50%	P 0

Where:

A = Amount Allotted

EM = number of enlisted members

EMD = number of enlisted members and their dependents

PMD = number of profiled members and dependents

If the PCB1 provider has 1,000 enlisted members and 5,000 dependents and they were able to profile 1,000 members and 3,000 dependents, the PFPR for 1<sup>st</sup> quarter 2016 shall be:

**Sample Computation:**

**1<sup>st</sup> Quarter 2016**

$$\begin{aligned}
 PFP &= [EM \times P50] + [EM \times A] \\
 &= [1,000 \times P50] + [1,000 \times ((4,000/6,000 \times 100)] \\
 &= [P50,000] + [1,000 \times (66.66\%)], \text{ where } 66.6\% \text{ of PMD is equivalent to P25(see table 1)} \\
 &= [P50,000] + [1,000 \times P25] \\
 &= P50,000 + P25,000 \\
 &= P 75,000
 \end{aligned}$$

## 2<sup>nd</sup> Quarter 2016

Additional enlistment of 500 members and 1,000 dependents

Additional profiling of 500 members and 2,000 dependents

$$\begin{aligned} \text{PFP} &= [\text{EM} \times \text{P50}] + [\text{EM} \times \text{A}] \\ &= [1,500 \times \text{P50}] + [1,500 \times ((6,500/7,500) \times 100)] \\ &= [\text{P75,000}] + [1,500 \times 86.6\%], \text{ where } 86.6\% \text{ of PMD is equivalent to P75 (see Table 1)} \\ &= [\text{P75,000}] + [1,500 \times \text{P75}] \\ &= \text{P75,000} + \text{P112,500} \\ &= \text{P187,500} \end{aligned}$$

## 3<sup>rd</sup> Quarter 2016

Additional enrolment/assignment of 500 members with 1,000 dependents but they were able to enlist the 500 members and 500 dependents within the quarter.

$$\begin{aligned} \text{PFP} &= [\text{EM} \times \text{P50}] + [\text{EM} \times \text{A}] \\ &= [2,000 \times \text{P50}] + [2,000 \times ((7,500/9,000) \times 100)] \\ &= [\text{P100,000}] + [2,000 \times (83.3\%)], \text{ where } 83.3\% \text{ of PMD is equivalent to P75 (see Table 1)} \\ &= [\text{P100,000}] + [2,000 \times \text{P75}] \\ &= \text{P100,000} + 150,000 \\ &= \text{P250,000} \end{aligned}$$

## 4<sup>th</sup> Quarter 2016

No additional enlisted and profiled members and dependents

$$\begin{aligned} \text{PFP} &= [\text{EM} \times \text{P50}] + [\text{EM} \times \text{A}] \\ &= [2,000 \times \text{P50}] + [2,000 \times (7,500/9,000) \times 100] \\ &= [\text{P100,000}] + [2,000 \times (83.3\%)] \\ &= [\text{P100,000}] + [2,000 \times \text{P75.00}] \text{ where } 83.3\% \text{ of PMD is equivalent to P75} \\ &= \text{P100,000} + 150,000 \\ &= \text{P250,000} \end{aligned}$$