

Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION Citystate Centre, 709 Shaw Boulevard, Pasig City Call Center (02) 441-7442 Trunkline (02) 441-7444 www.philhealth.gov.ph



PHILHEALTH - SAT - F15

## Self- Assessment/Survey Tool for Z Benefit Package Providers for Children with Developmental Disabilities

Name of HCI:

Date of Survey:

Time started: \_\_\_\_\_ Time ended: \_\_\_\_\_

## **Directions for the HCI:**

- 1. Put a check ( $\sqrt{}$ ) in the box if the service is available or an X if the same is not available in the HCI.
- 2. For outsourced services, put an X in the "no" box and state in the remarks that the service is outsourced and write the name of the outsourced service provider.

	REQUIREMENTS		HCI		IIC	DEMADKS
			No	Yes	No	REMARKS
1	Health Care Institution (HCI) License and Accreditation					
1.1	The HCI has an updated DOH License					
1.2	The HCI has an updated PhilHealth Accreditation					
2	Minimum Service Capability					
2.1	Mandatory Services as stated in PhilHealth Circular No. 2017-0029 OR with formal referral process to a licensed referral facility (Memorandum of Agreement):					
2.2	Certification to conduct at least one of the following standardized tools:					
	<ul> <li>Medical developmental assessment: (at least one certification)</li> <li>Griffiths Mental Development Scale</li> <li>Batelle Developmental Inventory V2</li> <li>Vineland Adaptive Behavior Scales</li> </ul>					
	<ul> <li>Allied health assessment:</li> <li>For occupational therapists (at least one certification)</li> <li>Beery-Buktenica Developmental Test of Visual-Motor Integration</li> <li>Test of Visual Perceptual Skills</li> <li>Brigance Inventory of Early Development</li> <li>Erhardt Developmental Prehension</li> </ul>					

	DECUUDEMENTS	H	CI	PH	IIC	DEMADKO
	REQUIREMENTS	Yes	No	Yes	No	REMARKS
	Assessment					
	<ul> <li>Sensory Profile or Sensory</li> </ul>					
	Processing Measure					
	Peabody Developmental Motor Scale					
	- For physiotherapists					
	Gross Motor Function Measure (tool					
	only)					
	- For speech therapists (at least one					
	certification)					
	Preschool Language Scale					
	Clinical Evaluation of Language					
	Fundamentals					
	Picture Articulation Test					
	Functional and outcome assessment services					
	using the following standardized tests					
	(tool only for both are required)					
	- Functional Independence Measure (FIM					
	or WEE-FIM)					
	- Pediatric Quality of Life Inventory or					
	WHO-Quality of Life Assessment					
3	Technical Standards					
3.1	General Infrastructure					
	Consultation/clinical assessment /individual					
	therapy room					
	Accessibility features					
	- Compliant to BP 344 "An Act To					
	Enhance The Mobility Of Disabled					
	Persons By Requiring Certain Buildings,					
	Institutions, Establishments And Public					
	Utilities To Install Facilities And Other					
	Devices"					
	- Ramps					
	- Restroom for PWD					
3.2	Equipment/Supplies					
	Stethoscope					
	Sphygmomanometer					
	Digital thermometer					
	Weighing scale					
	Goniometer					
	Tape measure					
<u> </u>	Full length mirror and face only mirror					
	Picture cards					
	Floor mats					
	Toys					
	Educational materials (for writing, drawing					
	e.g. crayons, coloring books)					

		H	CI	PH	IIC	DEMARKO
	REQUIREMENTS	Yes	No	Yes	No	REMARKS
	Paraffin bath					
	Low-intensity ultrasound unit					
	Refrigerator					
	Trampoline					
	Tilt board					
	Equipment for the fabrication of adaptive					
	device of daily function					
	• Thermoplastics (at least 10 sheets on					
	stock)					
	Electric water bath					
						+
	Heat gun					
	Velcro strap					
	• Foam					
	• Scissors, pliers, cutter, hammer,					
	screw driver					
3.3	Utilities					1
	Sink (different from the CR sink)					1
	First aid kit					
	Waste segregation system					
4	Human Resource					
	The HCI shall have a functional					
	Multidisciplinary team:					
	A Physiatrist (Rehabilitation Medicine					
4.1	Specialist) certified by the Philippine Board					
	of Rehabilitation Medicine					
	i. Valid PRC License					
	ii. Valid PhilHealth Accreditation					
	A Behavioral-Developmental Pediatrician or					
	a Neurodevelopmental Pediatrician certified					
4.2	by the Philippine Society for Developmental					
	and Behavioral Pediatrics					
	i. Valid PRC License					
	ii. Valid PhilHealth Accreditation					1
4.3	Occupational Therapist					t
	i. Valid PRC License					1
4.4	Physical Therapist					
	i. Valid PRC License					
	Speech Language Pathologist or Speech					
	Therapist who graduated from a CHED					
	accredited school (Diploma), and is a					
4.5	member of the Philippine Association of					
	Speech Pathologists (PASP). (Certificate of					
	membership)					
	1,					
4.6	Medical Social Worker					1
	Valid PRC License					1

REQUIREMENTS		HCI		PHIC		REMARKS
	KEQUIKEMEN 15		No	Yes	No	KEMAKK5
4.7	Z-Benefit Coordinator					
5	General algorithm of care					
	Presence of policy adopting the general algorithm of care					
6	Z Benefit Program Implementation					
6.1	Full awareness of the PhilHealth Z benefit program including No Balance Billing (NBB) and maximum co- payments					
6.2	Action plan/ commitment of the HCI to abide with the NBB policy					
6.3	Conduct advocacy programs/seminars at least annually					
6.4	Submit report on patient outcomes, and other statistical report					
6.5	Costing for maximum co-pay					
6.6	Process for the provision of services					

## PhilHealth Survey Team

Surveyor's Name	Designation	Signature

## HCI Management Team

Names of Management Team	Designation	Signature