AMENDMENT TO PHILHEALTH CIRCULAR NO. 34, S. 2006 PHILHEALTH NEWBORN CARE PACKAGE (NCP)

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Pursuant to approved PhilHealth Board Resolution No. 1060 series of 2007 amending PhilHealth Board Resolution No. 925, s. 2006 the following are guidelines on the implementation of NCP:

GENERAL RULES

- The package shall cover all eligible newborn-dependence delivered in ail accredited health facilities including non-hospital maternity health care providers.

- Services covered shall include administration of BCG vaccine and resuscitation of the newborn. The amount of the package however shall remain at P1.000.

- It is reiterated that the health care facility should be able to provide all the required services covered by the package. In case the facility was not able to provide the complete services, claims from the said facility shall not be compensated. This however, shall not prohibit payment to members within the amount of the package item enumerated in Circular No. 34, s. 2006 provided that Official Receipt/s are attached to the claim application.

- To qualify as service providers for this package, currently accredited facilities and those I applying for initial, renewal and re-accreditation are required to submit a photocopy Of I Newborn Screening Facility (NSF) certificate issued by the Department of Health (DOH) or Newborn Screening Reference Center (NSRC) to the Accreditation Department or! Accreditation Section of PhilHealth Regional Offices (PROs) on or before December 31 2007. All claims of PhilHealth accredited facilities for NCP with admission beginning' January 1, 2008 that are not certified by DOH or NSRC as NSF shall not be reimbursed

- Newborn Screening (NBS) is ideally performed aftertwenty four hours of life but not later than three (3) days from complete delivery of the newborn. As such, claims for NCP . within the said period shall be compensated. However, for newborns placed in intensive care to ensure survival, premature and sick newborns, they may be exempted from the three day requirement but should be tested within seven (7) days of age. Official Receipt /s for NBS dated within the same period (even after discharge of patient/newborn) shall be covered by the package.

CLAIMS FILING

- The facility should indicate the filter collection card number of the NBS specimen , collection form in the Part IV (C) item no. 3 of the said claim form. The said claim form shall be returned to the facility in case the facility is not able to indicate the said number.

To illustrate:

> C. Others
>
> 1. Eye prophylaxis, umbilical cord care, Vitamin K, thermal care, administration of BCG vaccine & resuscitation of the newborn
> 2. 1st dose of Hepatitis B immunization

3. Newborn Screening Test (filter collection card number)

- All services covered by the package should be enumerated in the Part IV (C) of the said claim form as shown above.

- To facilitate speedy processing of claims it is reiterated that Claim Forms 1 and 2 shall be submitted together with maternal application within the prescribed period.

- All claim applications for NCP shall be coded using RVS code 99432

CODE	DESCRIPTIVE TERM	RVU
99432	Normal Newborn Care Package	

- PhilHealth rules on ICD-10 shall also apply for this package.

- Requirements for NCP claim applications shall include:

6.1 duly accomplished Forms 1 and 2
6.2 certificate of live birth
6.3 clear copy of Member Data Record
6.4 proof of premium payment

This Circular shall take effect for all claims with admission dates starting January 1 2008. All other benefit availment rules inconsistent with these rules are hereby repealed.

Adopted: 12 Dec. 2007

(SGD.) LORNA O. FAJARDO
Acting President and CEO

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