

## AMENDMENT TO PHILHEALTH CIRCULAR 30, S. 2004 ON CONDITIONS TO QUALIFY A HOSPITAL FOR INITIAL ACCREDITATION WHICH HAS NOT OPERATED FOR AT LEAST THREE (3) YEARS

*PHIC PHILHEALTH CIRCULAR NO. 21, S. 2009, March 17, 2009*

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1. The three (3) year rule requirement is waived for the providers of the following pro-poor benefits:
  - a. Out-Patient Benefit Package (OPB)
  - b. Anti-TB/DOTS Package
  - c. Maternity Care Package (MCP)
2. For an IHCP which failed to comply with the requirement of three (3) years in operations, any of the following conditions may be used to qualify in lieu of the said requirement as applicable.
  1. For ambulatory surgical clinic (ASC), free-standing dialysis clinic (FSDC), the managing health care professional namely, the Medical Director, Administrator or the Chief of Facility shall have at least three (3) years of work experience in a similar or analogous or at least the same level of institution/facility it is applying for, For hospitals, the Medical Director, Hospital Administrator or the Chief of Hospital shall have at least three (3) years of work experience in at least the same level of hospital it is applying for.
    - a. The IHCP where the experience was incurred has been accredited for at least three (3) years, and
    - b. The IHCP shall submit any of the following as proof of experience of the managing health care professional:
      1. Service Record if from government facilities
      2. Certification from the Board (if corporation) or facility owner (single proprietorship) if from private facilities

If the managing health care professional leaves the accredited IHCP within the initial year of accreditation, he/she must be replaced immediately by another professional with same qualifications as mentioned above to ensure continuity of service. Non-compliance shall lead to termination of accreditation effective on the date of vacancy.

2. It operates as a tertiary facility;
3. For ASCs and FSDCs, there are no currently accredited similar facility in the same locality while for hospitals, there are no currently accredited same level/category facility within the same locality as certified by the concerned PhRO and validated by the Accreditation Department, Central Office;
4. There are currently accredited IHCP of similar or same level facility it is applying for within the same area but cannot adequately provide health care services as certified by the Local Chief Executive (LCE), evidenced by the Certificate of Need (CON) issued by the Department of Health (DOH) and recommended by the respective PhRO.

All previous policies and guidelines and other administrative issuances with provisions inconsistent herewith are hereby repealed/amended accordingly.

This circular shall take effect after fifteen (15) days from publication in the official gazette or any newspaper of

general circulation.

Adopted: 17 March 2009

(SGD.) DR. REY B. AQUINO  
President and CEO

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