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AMENDMENTS AND ADDITIONAL GUIDELINES ON THE PROCESSING OF APPLICATIONS FOR ACCREDITATION OF AMBULATORY SURGICAL CLINICS (ASCS), FREE STANDING DIALYSIS (FSDCS), OUT PATIENT BENEF...

PHILHEALTH CIRCULAR NO. 22, S. 2010, August 20, 2010

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Pursuant to PhilHealth Board Resolution No. 1380, the following are amendments and additional guidelines on processing of applications for accreditation of Ambulatory Surgical Clinics (ASCs), Free Standing Dialysis Clinics (FSDCs), Out Patient Benefit (OPB) Package, Maternity Care Package (MCP) and Anti TB/DOTS Providers, collectively referred to in this circular as outpatient clinics (OPCs):

I. TYPES OF APPLICATIONS AND DOCUMENTARY REQUIREMENTS FOR ACCREDITATION OF OPCs:

Type of Application

Description

Documentary Requirements

A. Initial Accreditation

No previous accreditation

For ASCs and FSDCs:

1. PhilHealth Application Form

2. Warranties of Accreditation

- duly notarized

4. Application fee

5. DOH license for 3 previous years or its equivalent

For OPB, MCP and DOTS providers:

1. Items 1, 2 and 3 mentioned above and

2. Location map

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B. Renewal of Accreditation

1. An OPC with active accreditation that filed their applications within the incentive or prescribed filing period

For ASCs and FSDCs:

1. Items 1, 2 and 3 mentioned above and

2. Current DOH license

2. Late Filer - an OPC with active accreditation that filed its application beyond the prescribed filing period but before the expiry of its current accreditation

For OPB, MCP and DOTS providers:

1. Items 1,2 and 3 mentioned above and

2. For DOTS providers only

-Updated DOH-PhilCAT Certificate

C. Re-accreditation

1. Previous accreditation has lapsed regardless of length of gap in accreditation

Same as application for renewal of accreditation

2. Previous application for renewal of accreditation was denied

3. Transfer of location

4. Additional Services

[*]no application fee for out patient malaria package providers

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5. Change in ownership

1. Same as application for renewal of accreditation; and

2. Proofs of ownership

a. SEC/ DTI Certificate or

b. MOA/Deed of Sale/etc.

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6. Resumption of operation after closure/cease of operation

Same as application for renewal of accreditation

1. An OPC applying for renewal of accreditation as a late filer may incur a gap in its accreditation depending on the length of processing time.

2. Application of OPCs for initial accreditation or re-accreditation shall be filed together with the Statements of

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Intent (SOI – Annexes A and B) indicating the preferred start date of accreditation. Once the application is received and stamped complete by the Corporation, the SOI shall no longer be changed.

3. The matrix for checklist of requirements and matrix of application fees (Circ. 50 s. 2009 - Annex B) is revised accordingly (Annex C) to reflect the re-classification of types of accreditation regarding late filers in accordance with Circ. 15 s. 2010.

II. CRITICAL FILE UPDATES

The following information shall be critical file updates to the accreditation status of the OPC that the Corporation shall incorporate in the database upon receipt of the corresponding documentary requirements:

Critical File Update

Documentary Requirements

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1. Reduction in Services (Ex. 3-in-1 to 2-in-1)

1. Letter from the head/owner of the facility that it is reducing its services, or

2. Monitoring report from the PhRO indicating the incapability of the health facility to provide the service

2. Change in Validity of Accreditation for FSDCs and ASCs: as reflected in the DOH-OSS license

DOH license or its equivalent

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3. Change in name of Institutional Health Care Provider (IHCP)

1. Letter of Intent which indicates the date of effectivity; and

2. DOH license, SB resolution or Provincial Health Board Resolution or Issuance of the LGU that such facilities shall bear the said name for PHIC purposes for LGU owned facilities

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4. Change in medical director/head of the facility

1. Letter of Intent which indicates the date of effectivity; and

2. Appointment paper/board resolution/its equivalent

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5. Termination of accreditation due to closure/cease of operation

1. Validation report of PhRO and

2. Notice of closure of hospital (if available)

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These critical file updates shall not require application fees and survey. File updates 1, 2 and 3, shall take effect based on the date indicated in the DOH license or its equivalent, File update 4 shall take effect on the date of conduct of Accreditation Subcommittee meeting or on the date reflected in the Letter of Intent. File update 5 shall take effect on the date of actual closure of hospital. In case the date is not indicated in the documents submitted it shall take effect on the date of the conduct of the Accreditation Subcommittee Meeting.

III. CLARIFICATION ON THE HUMAN RESOURCE REQUIREMENT FOR OUT PATIENT (OPB) PACKAGE PROVIDERS:

1. An accredited RHU/HC must have at least one (1) of each of the following personnel with updated license who shall render at least four (4) hours service per day, five days a week:

a. Physician
b. Nurse
c. Midwife
d. Medical Technologist (if the RHU has a laboratory)

[*]If laboratory examinations are referred to another facility, the OPB provider should submit a photocopy of the license of the Medical Technologist performing the laboratory examination.

2. In case one of the abovementioned (#1) personnel can no longer deliver services for the RHU/HC within the validity of its accreditation, the local government unit (LGU) may implement the following measures:

a. Temporary replacement of said personnel with the same qualifications which may include arrangements within a functional Inter Local Health Zone (ILHZ), or

b. Temporary assignment of sponsored members assigned to the RHU/HC to another accredited/authorized OPB Package Provider.

The PhilHealth Capitation Fund (PCF) for the period of temporary assignment of members to another accredited/authorized OPB provider shall be given to the actual provider of the OPB Package service.

IV. APPLICATIONS OF OPCS FOR INITIAL AND RE-ACCREDITATION FILED WITHIN 4 MONTHS PRIOR TO THE REGULAR END DATE OF ACCREDITATION

ASCs, FSDCs, OPB Packge, MCP and DOTS providers, that filed their applications within 4 months from the last day of the fixed accreditation schedule of institutional health care providers (IHCP), shall have the following options regarding the start of the validity of their accreditation in case their applications for accreditation are approved. This shall be reflected by signing the applicable Statement of Intent (Annexes A and B).

A. OPTION A

1. The start date of the accreditation shall be on the date of the conduct of pre- accreditation survey. Accreditation shall be valid until April 30 of the current year for ASCs and FSDCs or December 31 of the current year for OPB, MCP and DOTS Providers.

2. Once accredited, the OPC shall renew its accreditation within thirty (30) calendar days from receipt of the letter of approval of accreditation by submitting the following:

a. Application form for renewal of accreditation – duly accomplished

b. Warranties of Accreditation – duly notarized
c. Proof of payment of the application fee

3. Said IHCP shall be exempted from the penalty charges for late filers and therefore shall pay the application fee for renewal of accreditation as reflected the expiry of accreditation applicable penalty charges shall apply (see Annex C)

4. The succeeding accreditation period shall be valid from May 1 of the current year to April 30 of the succeeding year for ASCs and FSDCs or January 1 to December 31 of the succeeding year for OPB, MCP and DOTS providers.

5. However, in case the pre-accreditation survey was conducted after April 30 of the current year for ASCs and FSDCs or after December 31 of the previous year for OPB Package, MCP and DOTS Providers, the start date of accreditation shall be on the date of the conduct of the survey and it shall be valid until December 31 of the current year.

6. The applications of OPCs filed beyond thirty (30) calendar days from receipt of the letter of approval of accreditation and beyond the date of expiry of accreditation shall be considered as re-accreditation (with gap).

OPTION B

1. The OPC agrees that the validity date of accreditation shall start on May 1 of the current year for ASCs or FSDCs or January 1 of the succeeding year for providers of the OPB, MCP or DOTS Packages. This shall be indicated by signing the applicable Statement of Intent.

2. Failure of any OPC to sign the SOI regarding the start date of the validity of accreditation shall result in application of Option A.

V. ACCREDITATION OF ASCs and FSDCs

1. Starting 2011, ASCs and FSDCs shall be granted full accreditation validity period from May 1 of the current year to April 30 of the succeeding year. However, the claims for patients served starting January 1 shall only be processed upon submission of their updated DOH licenses. The Corporation shall update the accreditation record of hospitals upon receipt of their DOH license to reflect the Critical File Updates.

2. ASCs and FSDCs with gaps in their DOH license shall also incur gaps in their accreditation corresponding to the gaps in the validity of their DOH license.

3. Previously paid claims for services rendered during the accreditation gaps shall be charged to the pending and/or future claims of the facility.

4. The head of the facility or medical director who is a physician shall be accredited prior to the approval of the application of the concerned IHCP.

VI. INCOMPLETE/NON-COMPLIANT APPLICATIONS:

All applications for accreditation of OPCs that were received by PhilHealth but were later noted to be incomplete or non-compliant with the requirements and standards of accreditation may be granted accreditation provided that both of the following conditions are satisfied:

1. It has complied with all the requirements and standards of accreditation and

2. Deficiencies were complied with/corrected within three (3) months from the date of the conduct of

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pre-accreditation survey.

For Initial Accreditation and Re-accreditation the start date of accreditation shall be on the date of complete compliance to all requirements and standards of accreditation.

All existing issuances inconsistent with this office order are hereby repealed and/or amended.

This Circular shall take effect immediately.

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

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