CONDITIONS TO QUALIFY A HOSPITAL FOR INITIAL ACCREDITATION WHICH HAS NOT OPERATED FOR AT LEAST THREE (3) YEARS

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Section 53, Rule X of the Implementing Rules and Regulations (IRR) of the National Health Insurance Act of 1995 (RA 7875 as amended by RA 9241), provides among others the General Accreditation Requirements and Conditions. In relation thereto, a health care provider will qualify for initial accreditation even if it has not operated for at least three (3) years provided it complies with the following conditions and rules:

A. The managing health care professional has had working experience in another accredited health care institution for at least three years provided that:

- The managing health care professional has three years experience as a medical director or hospital administrator in another accredited tertiary hospital or its equivalent;

- The tertiary hospital or its equivalent was accredited with PhilHealth for at least three years during the term of managing health care professional as medical director or hospital administrator;

- The three years experience as medical director or hospital administrator is supported by the applicable enumerated documentary proof:

- Service Record - for a government hospital

- Certification of the Board or the Hospital Owner - for a private hospital

- Certification of the Board - for a Corporation or a Foundation; and

- If the managing health care professional leaves the accredited health facility within three (3) years of the initial date of operation, he/she must be replaced by another managing health care professional who can also show the above proof of three (3) years of service.

B. The health care provider operates as a tertiary facility or its equivalent. Under the new DOH classification of hospitals, the equivalent facilities are Secondary Care Hospital and Tertiary Care Hospital.

C. The health care provider operates in a local government unit (LGU) where the accredited health care provider cannot adequately or fully serve its population as supported by the following documents:

- For primary hospitals or infirmaries

- PhilHealth records showing that the local government unit does not have any PhilHealth accredited health facility.

- Secondary hospitals and their equivalent ambulatory health facilities such as ambulatory surgical clinics and free standing dialysis clinics

- PhilHealth records showing that there is no similar accredited PhilHealth health facility in the LGU

D. In addition, pursuant to the provision that the corporation may provide for other conditions, the three (3) year

rule requirement is waived for the following providers of the following pro-poor benefits:

1. Outpatient Primary Care benefits or OPB
2. TB-DOTS Benefits
3. Non-hospital Maternity Care Benefits

Please be guided accordingly.

This Circular shall take effect 15 days after publication.

Adopted: 22 Nov. 2004

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