

AGAP TECHNICAL SEMINAR

15 April, 2024 | 03:00Pm | AFP Commissioned Officers Club House, Camp Emilio Aguinaldo, Quezon City

PhilHealth's Directions & Thrust in Ensuring Full Financial Risk Protection

Presented by: Dr. RENATO L. LIMSIACO, JR., CPA, MPA, CFrA, BLTCE, CESE

> Senior Vice President, Fund Management Sector Cel No. 09173065138; rllimsiacojr@yahoo.com





PRESENTATION OUTLINE

1. PhilHealth's UHC Deliverables & Strategic Priorities

2. PhilHealth Konsulta Program



1. PhilHealth's UHC Deliverables & Strategic Priorities





RA No. 11223 - Universal Health Care Act





The UHC Act seeks to "ensure that all Filipinos are guaranteed equitable access to quality and affordable health care goods and services and protected against financial risk."

(Section 3(b) – RA 11223)

The major reforms seek to:

- consolidate existing yet fragmented financial flows
- increase the fiscal space for benefit delivery
- improve the governance and performance of devolved local health systems
- institutionalize support mechanisms such as health technology assessment and health promotion



PhilHealth Mandate



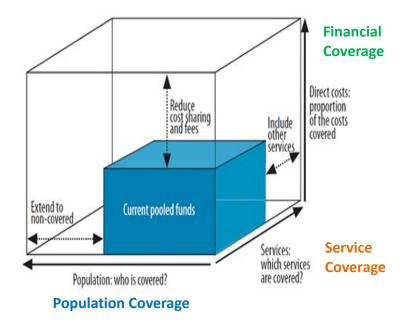
To provide health insurance coverage and ensure affordable, acceptable, available and accessible health care services for all citizens of the Philippines.

To serve as the means for the healthy to help pay for the care of the sick and for those who can afford medical care to subsidize those who cannot.

Universal Health Care Act RA No.11223

UHC's Mandate

WHO's UHC Cube Framework





Population Coverage – automatic inclusion of every Filipino citizen into the National Health Insurance Program



Service Coverage – immediate eligibility & access to population-based and individual-based health services



Financial Coverage – reduce out-of-pocket expenditure for health



Spectrum of PhilHealth Benefits

Acute Lymphocytic Leukemia Early Breast Cancer Prostate Cancer Kidney Transplantation Coronary Artery Bypass Graft

Outpatient (Primary Care & SDG)

Primary Care Benefit Maternity Care/NSD Package Prenatal care Newborn Care Package TB-DOTS Package Animal Bite Package Malaria Package Outpatient HIV-AIDS Package Inpatient (Case Rates)

> Inpatient cases Day surgeries Chemotherapy Radiotherapy Hemodialysis

Catastrophic (Z benefits)

Total Correction of TOF Closure of VSD Cervical Cancer Z Morph Ortho Implants Peritoneal Dialysis Colon and rectum cancers



PhilHealth Key Deliverables





Automatic Coverage



Comprehensive Outpatient Benefit



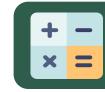
Diagnosis-related Groups (DRGs)



Global budget (GB)



Contracting of networks

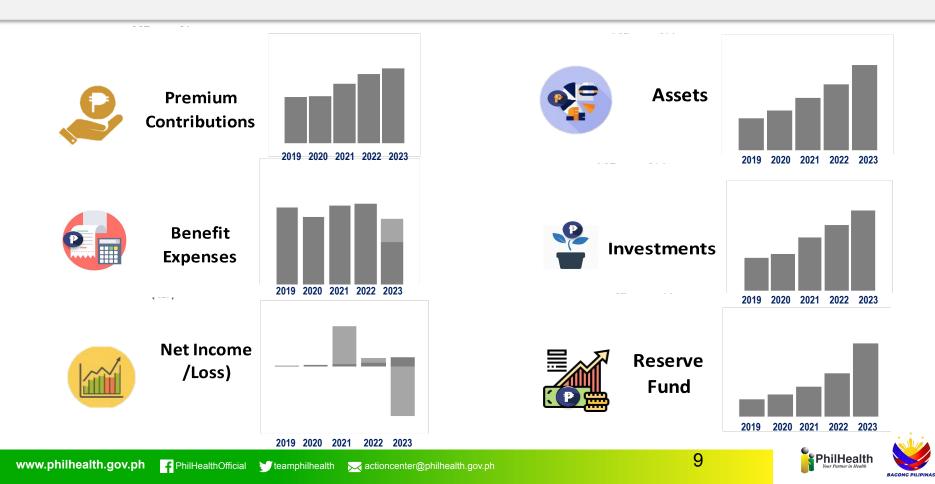








5-Year Financial Highlights (amounts in billion pesos)



2023 to 2025 PhilHealth Priorities







Strengthen PhilHealth's Primary Care Benefits

Protektado ang kalusugan ng bawat Filipino sa pinakabagong benepisyong handog namin sa inyo



PC No. 2020-0002 – Konsulta (GP) PC No. 2020-0021 – Accreditation of HCPs for Konsulta PC No. 2022-0005 – Konsulta (IG Rev1) PC No. 2022-0023 – Konsulta PCPN PC No. 2022-0032 – Konsulta+ (GP) PC No. 2023-0008 – Konsulta PCPN (Rev1) RBM 26 Apr 23 – Konsulta+SDG, PhilHealth GAMOT





The Universal Health Care Act

Every Filipino shall be granted immediate eligibility and access to **preventive**, promotive, curative, rehabilitative, and palliative care for medical, dental, mental, and emergency health services, delivered either as population based or individual based health services.

Essential health benefit package refers to a set of individual-based entitlements covered by the National Health Insurance Program (NHIP) which includes **primary care**; medicines, diagnostics and laboratory; and preventive, curative, and rehabilitative services

Primary care refers to initial-contact, accessible, continuous,

comprehensive and coordinated care that is accessible at the time of need including a range of services for all presenting conditions, and the ability to coordinate referrals to other health care providers in the health care delivery system, when necessary.



Primary Care

- initial-contact, accessible, continuous, comprehensive and coordinated care
- accessible at the time of need
- includes a range of services for all presenting conditions
- able to coordinate referrals to other health care providers in the health care delivery system, when necessary.







- Paid per capita
- Covers a defined set of primary care health services based on their life-stage, health risks, and needs
- Covers individual-based health services including initial and follow-up primary care consultations, health screening and assessment, and access to selected diagnostic services, and medicines



SERVICES

Consultation and case management

Provision of preventive health services

Assisting eligible beneficiaries in accessing services in partner facilities

Referral to specialty and higher level of care

LABORATORIES (13)

CBC w/ platelet count Lipid profile (Total Cholesterol, HDL and LDL Cholesterol, Triglycerides) Fasting Blood Sugar **Oral Glucose Tolerance Test** HbA1C Creatinine Chest X-Ray Sputum Microscopy ECG Urinalysis Pap smear Fecalysis Fecal Occult Blood Test

MEDICINES (21)

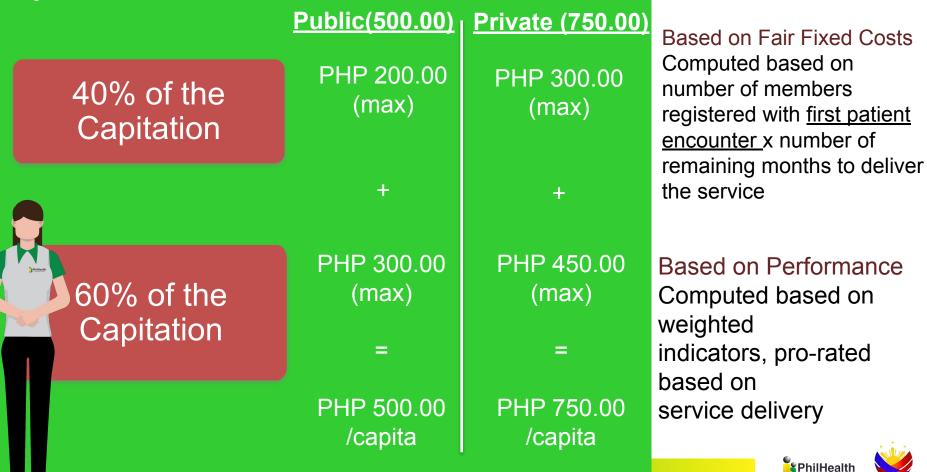
Anti-microbial	Amoxicillin Co-Amoxiclav Nitrofurantoin Cotrimoxazole Ciprofloxacin Clarithromycin
Fluid & electrolytes	Oral Rehydration Salts
Anti-asthma	Prednisone Salbutamol Fluticasone + Salmeterol
Antipyretics	Paracetamol
Anti-dyslipidemia	Simvastatin
Anti-diabetic	Gliclazide Metformin
Anti-hypertensive	Enalapril Metoprolol Amlodipine Hydrochlorothiazide Losartan
Anti-thrombotics	Aspirin
Antihistamine	Chlorphenamine maleate

Specific list of services included in the package





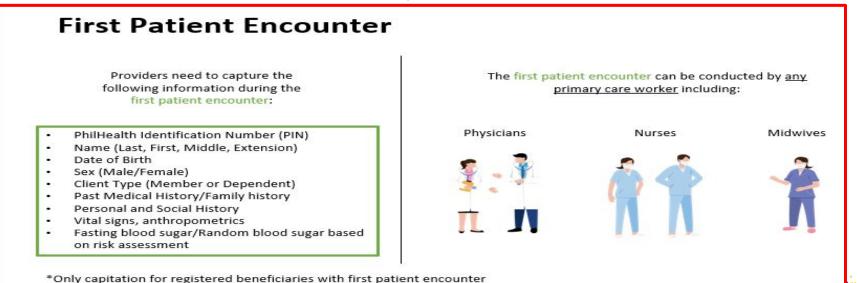
Capitation Tranches



Konsulta Payment Mechanism

Tranche 1 - REGISTRATION OF MEMBERS TO THE KONSULTA PROVIDER (40%) – P200

Number of registered member with First Patient Encounter (Data Uploaded in the PhilHealth System)



will be paid to the Provider

Tranche 2 - Provision of Konsulta Services – 60% P300

NO.	PATICULAR	TARGET
1	Primary Care Consultation	100%
2	Utilization of Laboratory Services	50%
3	Dispensing of Medicines(Antibiotics)	15%
4	Dispensing of Medicines (NCD)	20%





Ano-ano ang mga serbisyong maaaring ma-avail mula sa PhilHealth Konsulta package?



Libreng **konsultasyon** mula sa primary care physician



律

Health risk **screening at assessment**

Mga piling **laboratory at diagnostic tests** (tulad ng CBC blood test, urinalysis, at chest X-ray)

Mga piling **gamot** ayon sa health risks, edad, at pangangailangan ng pasyente (tulad ng maintenance kontra altapresyon at diabetes)

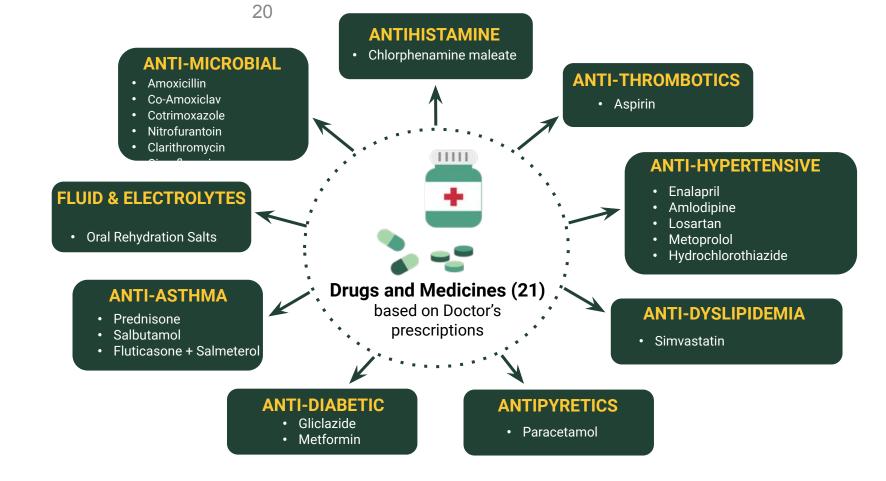
x actioncenter@philhealth.gov.ph PhilHealthOfficial teamphilhealth www.philhealth.gov.ph



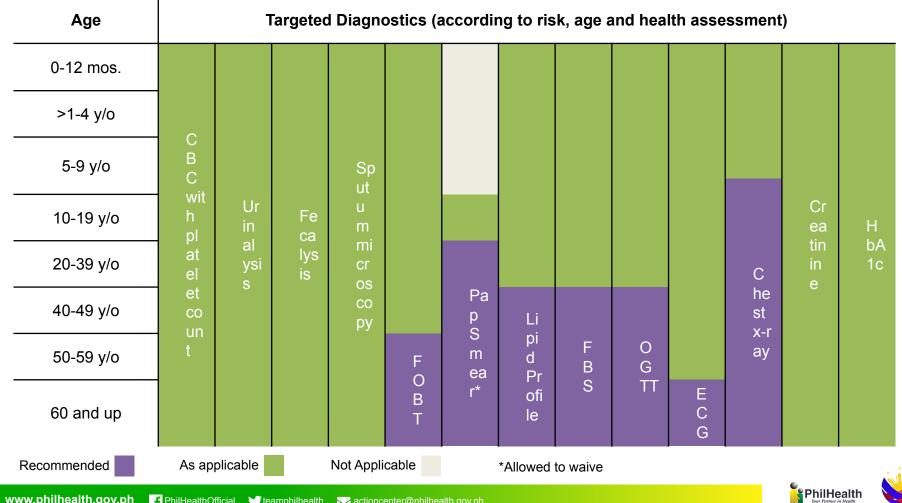
LABORATORY TESTS (13)

- CBC with platelet count
- Lipid Profile (Total Cholesterol, HDL and LDL Cholesterol, Triglycerides)
- Fasting Blood Sugar (FBS)
- Oral Glucose Tolerance Test
- HbA1c
- Creatinine
- Chest X-Ray
- Sputum Microscopy
- ECG
- Urinalysis
- Pap smear
- Fecalysis
- Fecal Occult Blood



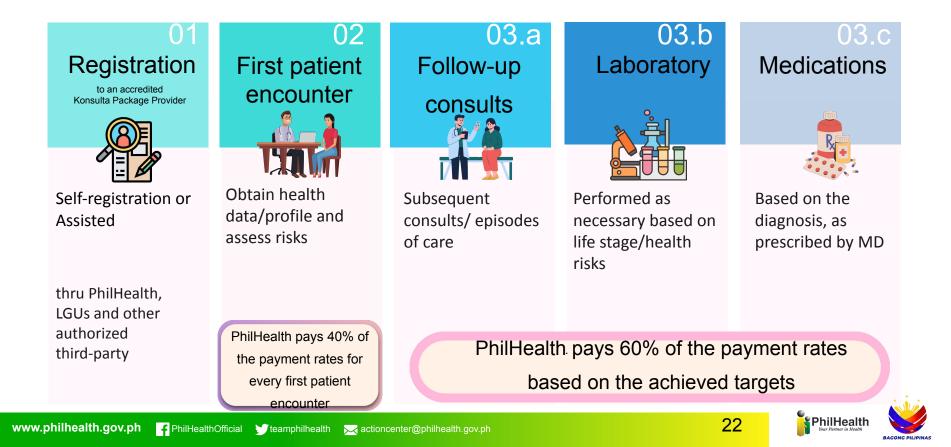






BAGONG PILIPINA

How to avail of PhilHealth Konsulta Benefit



STEP 1: UPDATE MEMBER DATA RECORD (MDR) and REGISTER

STEP 2: GET AUTHORIZATION TRANSACTION CODE (ATC) or PERFORM FACE CAPTURE ONSITE

STEP 3: PROCEED TO YOUR PROVIDER FOR YOUR HEALTH ASSESSMENT AND CONSULTATION





STEP 1: UPDATE MDR and REGISTER

STEP 2: GET ATC or PERFORM FACE CAPTURE ONSITE	
STEP 3: HEALTH ASSESSMENT AND CONSULTATION	
STEP 4: GIVE FEEDBACK	
www.philhealth.gov.ph	

Member and dependent shall update their MDR and have their own PIN.

Check PhilHealth website for the list of Konsulta providers.

Done yearly and fixed for one calendar year

ctioncenter@philhealth.gov.ph



STEP 1: UPDATE MDR and REGISTER





Registration to a preferred Konsulta Provider may be done through any of the following:

<u>SELF</u>

Member Portal (website)

ASSISTED

•Local Health Insurance Office (LHIO)

PCARES

•LGU/OSCA (My PhilHealth Portal)

PhilHealth Call Action Center



www.printeartingov.pri 💦 Printeartinomiciai y teamphilhealth 📈 actioncenter@philhealth.gov.ph





STEP 1: UPDATE MEMBER DATA RECORD (MDR) and REGISTER

STEP 2: GET AUTHORIZATION TRANSACTION CODE (ATC) or PERFORM FACE CAPTURE ONSITE

STEP 3:PROCEED TO YOUR PROVIDER FOR YOUR
HEALTH ASSESSMENT AND CONSULTATION

STEP 4: GIVE FEEDBACK



STEP 1: UPDATE MDR and REGISTER

STEP 2: GET AUTHORIZATION TRANSACTION CODE (ATC) or PERFORM FACE CAPTURE ONSITE



STEP 4: GIVE FEEDBACK

Member shall secure Authorization Transaction Code (ATC) through any of the following:

SELF

•Member Portal (website)* *for development

ASSISTED

•Local Health Insurance Office (LHIO)

•PCARES

•PhilHealth Call Action Center (02) 866 225 88

New Hotline: (02) 866-225-88 Click-to-Call via homepage www.philhealth.gov.ph (bottom-right portion) Mobile Hotlines Call and text Smart: 0998-857-2957, 0968-865-4670 Globe: 0917-127-5987, 0917-110-9812 To request for callback via mobile hotline, text. "PHICallback <space> Mobile Number to be called <space> details of your concern". Callback schedule is from 8 am – 8 pm, 12 hours by 7 days, including weekends and holidays. Ask agent for details to make sure the callback is from PhilHealth.

actioncenter@philhealth.gov.ph

🎫 PhilHealthOfficial 🚩 teamphilhealth

www.philhealth.gov.ph

STEP 1: UPDATE MDR and REGISTER

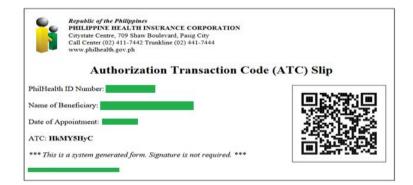
STEP 2: GET AUTHORIZATION TRANSACTION CODE (ATC) or PERFORM FACE CAPTURE ONSITE

STEP 3: HEALTH ASSESSMENT AND CONSULTATION An ATC or face capture will be needed for each patient (member or dependent) for every health assessment and consultation.

Valid within the day of appointment until 11:59 PM.

If the beneficiary fails to visit the clinic within the validity period of the ATC, the beneficiary shall secure another ATC.

Write down the generated ATC and validity period or print the ATC Slip





STEP 1: UPDATE MEMBER DATA RECORD (MDR) and REGISTER

STEP 2: GET AUTHORIZATION TRANSACTION CODE (ATC) or PERFORM FACE CAPTURE ONSITE

STEP 3: PROCEED TO YOUR PROVIDER FOR YOUR HEALTH ASSESSMENT AND CONSULTATION







Member/dependent can now go to their provider

Provision of targeted diagnostics based on age, risk and health assessment.

STEP 3: HEALTH ASSESSMENT AND CONSULTATION



www.phinreattn.gov.phinreattnOnicial reampnineattn at actioncenter@philhealth.gov.ph

STEP 1: UPDATE MEMBER DATA RECORD (MDR) and REGISTER

STEP 2: GET AUTHORIZATION TRANSACTION CODE (ATC) or PERFORM FACE CAPTURE ONSITE

STEP 3: PROCEED TO YOUR PROVIDER FOR YOUR HEALTH ASSESSMENT AND CONSULTATION

www.phi STEP 4: GIVE FEEDBACK



PhilHealth ELEC	TRONIC KONSULTA AVAILMENT SLIP (EKAS)
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		ng Pasilidad)

KI NAME.	Case No.:	HCI Accrediat	17.10° (17.10°)	ansaction No.:	
W (PhiHealth Iden Bleation Number):	Momborship Cate	gary (Kategorya	ng pagiging Miyon	abra:)	
aSentName (Pangalan ngPasyente):	Age (Edad):	Casta	etNo. (Numero ng	Telepono):	
Newborship Type: MEMBER DEPENDENT	Authorization T	Transaction Cade (ATC)			
Konsulta Services		Performed ⊻ ⊻	Date Performed	Performed by	
complete Blood Count (CBC) w/ platelet count	0				
ipid profile (Total Cholesterol, Triglycerides, HDL Cheles	steral, LDL Cholesteral)			330	
asting Blood Sugar (FBS)					
ral Glucose Tolerance Test		10) 		3.3	
ilycosylated Hemoglobin (HbA1c)					
reatinine		100 100			
Chest X-Ray					
putum Microscopy		14 C			
lectrocardiogram (ECG)					
Irinatysis				3.0	
'ap smear		22 20			
ecalysis					
ecal Occult Blood Test					
rhe: In form shall be provided to The Kanaulta beneficiary.					
o be filled-out by the patient (Pupu we yes received the above mentioned essential services? intergrap we be any map perspectively on a schere	() _Ye	10) 100 _No(Hindi)			
ore satisfied are yes with the services provided 7 isono ka nasiyaban sa natanggiap na serbisya 7)	п.	⊕ _ (2	



To be filled-out by the facility (Pupunan ng Pasilidad)

HCI NAME:	Case No	Case No.:		ediation No.	Transaction No.:	
PIN (PhilHealth Identification Number):	Membership	Monitorship Category:		Membership Typ	C D MEMBER	
Patient Name (Pangalan ng Pasyente):	Age (Edad):		1	Contact No. (Numero ng Telepono):		
R _x	USE GED	ERIC NA	ME			

Next Dispensing Date: (Petsa ng sasan od na bigay ng gamot)

*

To be filled-out by the patient (Pupunan ng Pasyente)

Did you received the above-mentioned medecines? (Naturggap me be any mgin gamet to a subangg(IT) Are you satisfied with the medecines you received?

(Nasiyahan ka ba sa mga gamut na natanggap mo?) Fer yourcemment, saggestian er complaint:

(Para sa lyongkomenta, mangkabi o reklamo):

Sula: Accomplished from shall be submitted to Konsulta Provider (Jug hampishing form ay dapat inamity catagoogbigay ng Konsulta

Dags 1 of 1 of Annow LI

PhilHealth

Physician: PBC LIC Na. PTR Na.:

\$2 No.

-@

_Yes(Do) _Ne(Hed)

Phillipally Identification Number of Patient:

-<u>O</u>



Strategic Progression of Primary Care Coverage

Coverage Strategies	Purpose	Service Inclusions	Payment Mechanism	Policy
	Current main primary care benefit of PhilHealth	Consultation, select drugs (21) and select diagnostics (13)	Capitation (40% with condition, 60% based performance)	PC No. 2020 - 0002
Konsulta				PC No. 2020 - 0022
-				PC No. 2022 - 0005
PhilHealth Konsulta PCPN Sandbox	A sandbox of SHF and network payments using current Konsulta package	Consultation, select drugs (21) and select diagnostics (13)	Capitation (30% initial front load, succeeding 50% and 20% based on performance)	PC No. 2022 - 0023
+ SDGs	Committed interim package to expand to COBP	Current Konsulta package, integrating existing SDG outpatient packages (TB, HIV, animal bite, malaria)	Capitation (50% initial front load, succeeding 50% based on performance)	Ongoing policy finalization for ExeCom approval



Prospective Payment under Konsulta PCPN

1/n • 🥑













- Quezon Prov 74M
- So Cotabato Prov 53M
- Bataan Prov 114M
- Baguio City 14M











34

With Mammogram & Ultrasound

No Balance Billing & No Co-pay

with bias for the poor in public facilities

There shall be **no fixed co-payment** for primary care services provided in public facilities to ensure **continued access for the poor** in public facilities.



DOH & LGUs cross subsidizes input costs to provide mammogram in primary care facilities.

No adjustment to labour cost as interpretation would require specialist services which is not included in the capitation.

BOARD APPROVED March 13, 2024

Predictable costs

for all Filipinos in **private facilities**



Mammogram is included as a diagnostic for screening provided annually for women aged 50-69.

Ultrasound is used for Liver Cancer Screening. Cost per capita is negligible.



PhilHealth Konsulta What services are included?

HEALTH SERVICES IS DIAGNOSTICS	21 MEDICINES		
<section-header> Health Risk Screening (TB, HV, etc.) Consultations with a Primary Care Provider Wellness Consultations (Maternal & Child, Prenatal, etc.) Sick Consultations (TB, Malaria, etc.) Counselling (FP, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental health, etc.) Counselling (-P, health and lifestyle, smoking cessation, alcohol, mental hea</section-header>	 Amoxicillin Co-Amoxiclav Nitrofurantoin Cotrimoxazole Ciprofloxacin Clarithromycin Oral Rehydration Salts Prednisone Salbutamol Fluticasone + Salmeterol Paracetamol 	 Simvastatin Gliclazide Metformin Enalapril Metoprolol Amlodipine Hydrochlorothiazide Losartan Aspirin Chlorophane maleate 	

PhilHealth

BAGONG PILIPIN

PhilHealth Konsulta

Why pay for Primary Care?



of household spending for health is paid towards medical outpatient services (13.3%) and outpatient drugs (31.4)* *Family Income & Expenditure Survey (FIES), 2012



Purchasing outpatient services through PhilHealth reduces out-of-pocket(OOP) spending for all Filipinos.

- Many Primary and Outpatient services are insufficiently covered (coverage gap), despite being almost half of the total household expenditure for health.
- While primary care is traditionally not paid through insurance, PhilHealth can leverage its market power to purchase services at lower rates or fees (strategic purchasing).
- Covering primary and outpatient care will have a more immediately felt (damang-dama) effect to OOP.





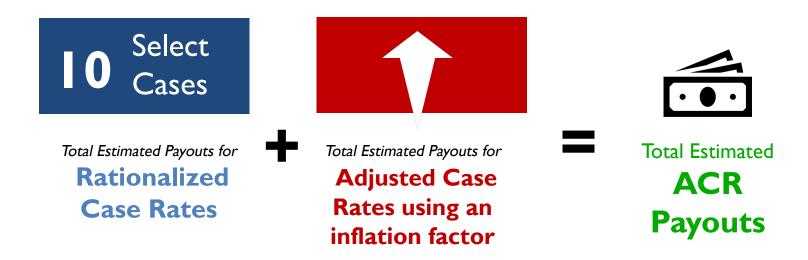
Sa Universal Health Care, ramdam ang **Pinalawak at mga Bagong Benepisyo para sa Mamamayang Filipino**







Case Rates Adjustment



Data Sources:

- PhilHealth Claims Data (2020-2022) to determine the SGR
- PhilHealth Stats and Charts (2013-2022) to estimate intervention effect on budget





2023 Expansion of Case Rates

ILLNESS/ CASE RATE DESCRIPTION	CURRENT PACKAGE AMOUNT	BOARD-APPRO VED PACKAGE AMOUNT	% INCREASE
HIGH-RISK PNEUMONIA	Php 32,000	Php 90,100	181%
ACUTE STROKE, ISCHEMIC	Php 28,000	Php 76,000	171%
ACUTE STROKE, HEMORRHAGIC	Php 38,000	Php 80,000	111%



Case Rates Adjustment

EFFECTIVE: FEBRUARY 14, 2024

Presented to and recommended by the Benefits Committee based on:

- 1. **Technical recommendation** based on health inflation using CPI; and,
- 2. Recommendation by the ExeCom with 2. commitments to ensure compliance with fiduciary responsibilities.

Cost Control Mechanisms:

- 1. Adherence to **No Balance Billing** in public and private wards
- Not charge patients above the Maximum Out-of-Pocket (MOOP) in public non-ward

accommodation**s**.

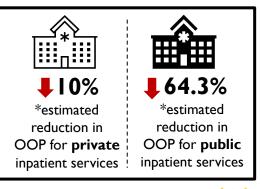
Incentivise Providers:

- 1. To share provider fees and charges whether in public or private facilities (as part of accreditation and through the electronic SOA)
 - To participate in shadow billing for DRG.

*Simulated effect of policy on

Php 40B to 42.7B

Estimated increase in payouts for 2024 due to the Adjusted Case Rates to a total of **Php 175.2B** to 185.1B





Expansion in Benefits

(2023 – 2025)

Funded by PAGCOR and PCSO

- 1. Increase in dialysis sessions from 90 to 156
- 2. Rationalization of select Inpatient Case Rates
- 3. Enhancement of select Z Benefits
 - Orthopedic implants
 - Kidney Transplantation
 - Cancer
 - Breast (from 100K to 1.4M)
 - Cervical
 - Prostate
 - Open heart surgeries for children:
 - Ventricular Septal Defect
 - Tetralogy of Fallot

Funded by Regular Contributions

- 1. Outpatient benefit package for mental health
- 2. Outpatient therapeutic care for Severe Acute Malnutrition for children below 5 years old
- 3. PhilHealth GAMOT
 - Expansion of coverage under Konsulta+ (Comprehensive Outpatient Benefit Package)





Balancing collections with payments

RCR

Adjustment Factors (RCR & IAF)

ICD10 / RVS Description

145.9	Bronchial Asthma, in Acute Exacerbation	247%
P36.9	Bacterial sepsis of newborn, unspecified Sepsis neonatorum; Septicemia, newborn	217%
A97.2	Severe Dengue; Severe Dengue fever; Severe Dengue hemorrhagic fever	293%
121.9	Acute myocardial infarction, unspecified	425%
118.92	Community-acquired pneumonia III	197%
66984	Extracapsular cataract removal w/ insertion of intraocular lens prosthesis (Irrigation and aspiration)	149%
66987	Extracapsular cataract removal w/ insertion of intraocular lens prosthesis (Phacoemulsification)	189%
96408	Chemotherapy administration	193%
96440	Chemotherapy administration into pleural cavity, requiring and including thoracentesis (for lung cancer)	119%
J18.93	Community-acquired pneumonia IV (high risk)	362%
161.9	Intracerebral hemorrhage, unspecified; Cerebrovascular Accident hemorrhage	245%
163.9	Cerebral infarction, unspecified; Reversible Ischemic Neurologic Deficit (RIND) CVA with infarction	246%

Sensitivity Analysis	IAF
Scenario 1	20%
Scenario 2	25%
Scenario 3	30%

BOARD APPROVED March 13, 2024



Benefit Expenses Allocation 2024

(in million pesos)

PARTICULAR	2024	2023	Inc (Dec)	
	Proposal ¹	СОВ	Amount	%
KONSULTA ²	26,250	17,013	9,237	54
KONSULTA-SDG	3,154			
ZBENEFITS	1,000	6,151	(5,151)	(84)
MENTAL HEALTH	50	3,013	(2,963)	(98)
ALL CASE RATES	9,243	9,243	-	-
SEVERE ACUTE MALNUTRITION	200	1,070	(870)	(81)
EXISTING BENEFITS	162,239	162,239	-	-
HEMODIALYSIS	5,112	5,780	(668)	(12)
ALL CASE RATES ADJUSTMENT	32,448		32,448	
GAMOT	3,956		3,956	
STANDALONE	288		288	
TOTAL	243,940	204,509	39,431	19

¹ Based on Adjusted Calibrated Benefit Plan

² KONSULTA REGULAR AND PCPN





and many more

PAY WHICHEVER IS LOWER

NO MORE, REPEALED





Provider Payment Mechanism

- DRG stakeholder engagement
- Global Budget
- Continuing costing survey
- Capacity building of healthcare providers
- Cost sharing
- Network Contracting

ACR to DRGs

All Case Rates to Diagnosis-Related Groups





LEGAL BASIS: Contracting

Guidelines for Contracting Healthcare Provider Networks (HCPN)

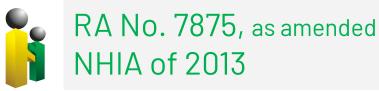


UHC Act IRR, Section 18.2

PhilHealth shall endeavor to contract health care provider networks for the delivery of individual-based health services

UHC Act IRR, Section 18.10

PhilHealth shall adopt any or a combination of closed-end, prospective provider payment mechanisms...



NHIA of 2013, Section 16 (j)

PhilHealth has the power to negotiate and enter into contracts regarding payment mechanisms and delivery of health services, among other.

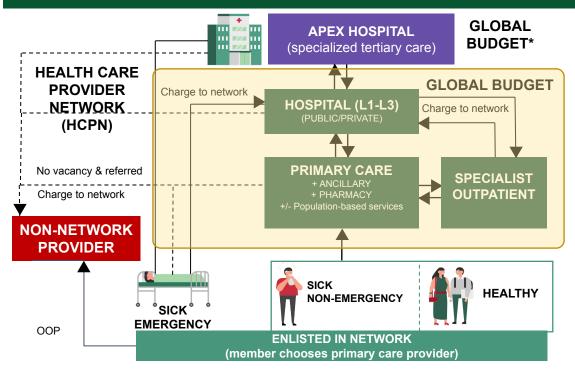


VISION: Continuum of Care

Health Care Provider Networks (HCPNs)



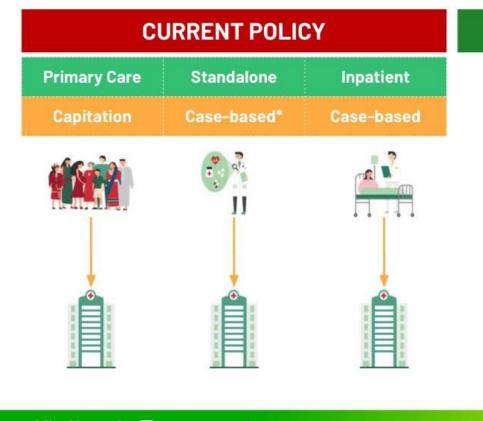
Health financing as ENABLER of health service delivery



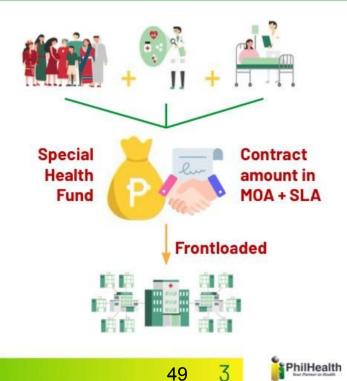


BAGONG PILIPINA

PROSPECTIVE PAYMENT MECHANISMS

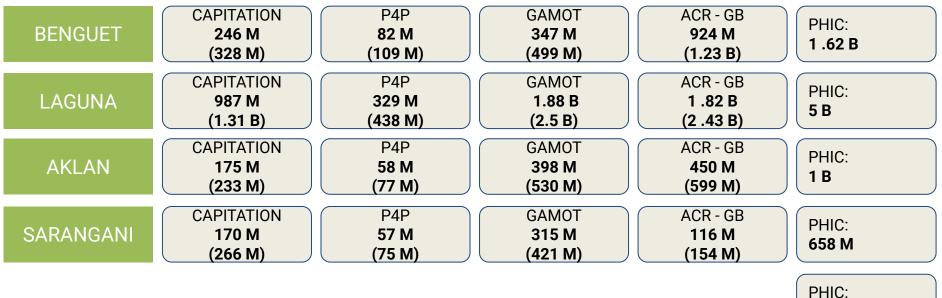


PROPOSED POLICY



BACONC PILIPINA

Projected Benefit Payouts



8.6 B





Fund Sustainability



- Strengthen Accounts Management
- Electronic Registration (e.g. Philippine Business Hub Portal)
- Expansion of payment channels



*PSA's Population Projection for 2023



PhilHealth Digitalization- Target State

- Providing amazing service before and after transacting with PhilHealth, i.e. greater personalization, integrated or connected experience across all channels;
- Less human interventions in transacting with PhilHealth;
- Cashless transactions or payments are done without the exchange of physical cash;
- Paperless services resulting from business process re-engineering or improvements;
- Strong digital validation and controls for improved authentication and verification of members; improved identification and prevention of fraudulent activities like making multiple claims for the same procedures in a short period, repetitive bills for unnecessary services or procedures, among others;
- Use of machine learning algorithms to analyze large amounts of data from PhilHealth/National Health Data Repository (claims data, electronic health records, others), detect patterns and anomalies that indicate fraudulent behavior; and
- Improved PhilHealth's integrity by ensuring that legitimate claims are processed efficiently and resources appropriately used.
- Digital consent to give permission to share data or information.

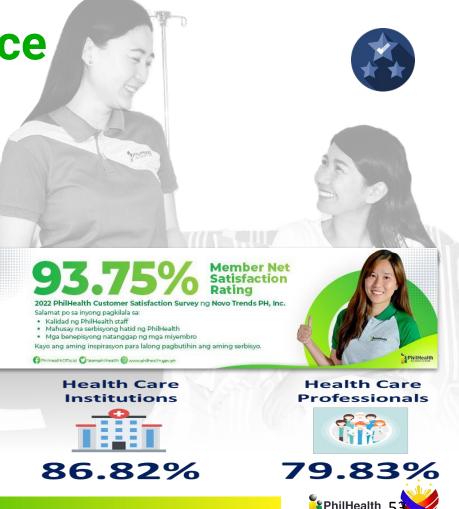




Good Governance

- Reorganization
- Enhanced Anti-Fraud Mechanisms
- Ease-of-Doing-Business (EODB) / ARTA
- ISO Certification
- Customer Satisfaction





Questionnaire by the Governance Commission for GOCCs (GCG)

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PhilHealth is laser-focused on delivering much-needed health financing... dahil sa PhilHealth, Bawat Buhay ay Mahalaga.









