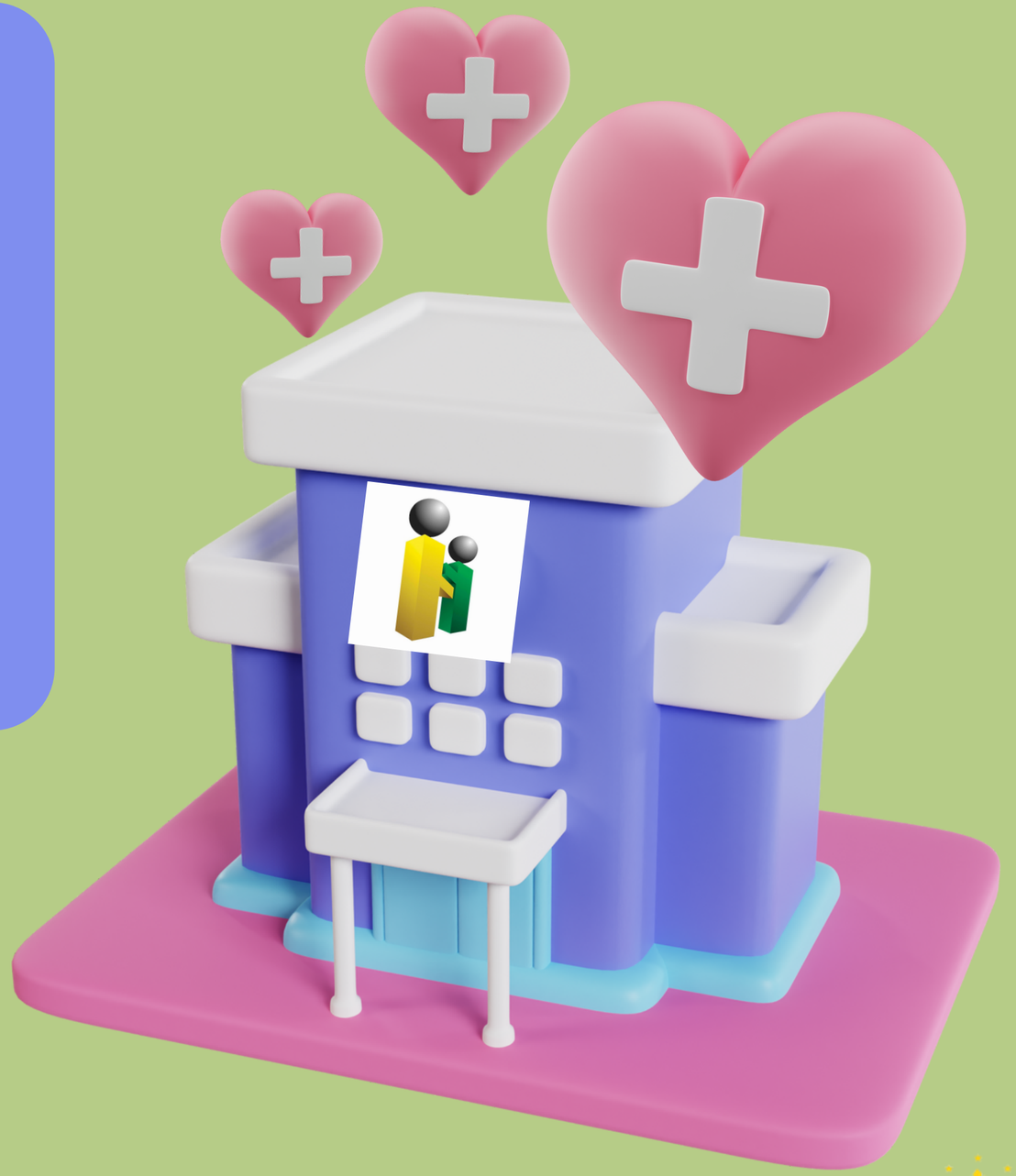
PhilHealth and Wellness

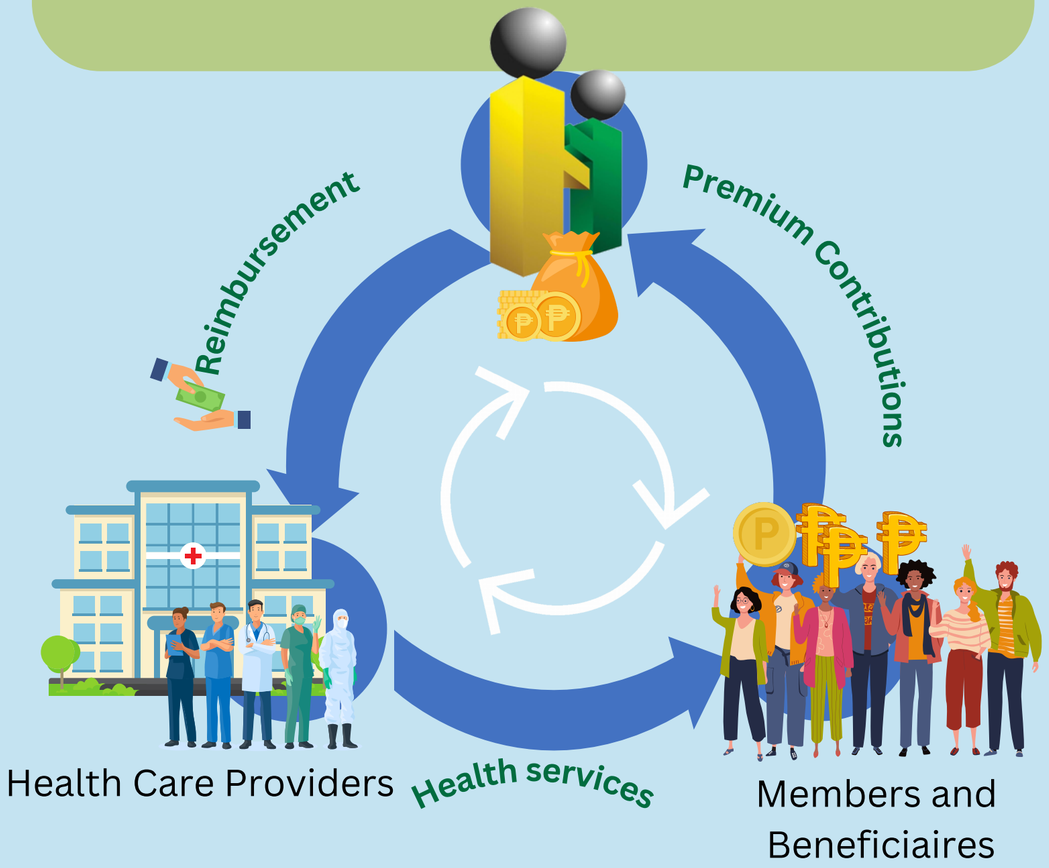
Universal Health Care for Universal Wellness



Dr. Mary Antonette Yason-Remonte
Head, Project Management Team for Primary Care
PhilHealth

The Manila Times Health Forum
January 30, 2024

PHILHEALTH



- Provides mechanisms for financial access to health services
- Functions of health financing
  - resource mobilization
  - pooling of funds
  - purchase health care

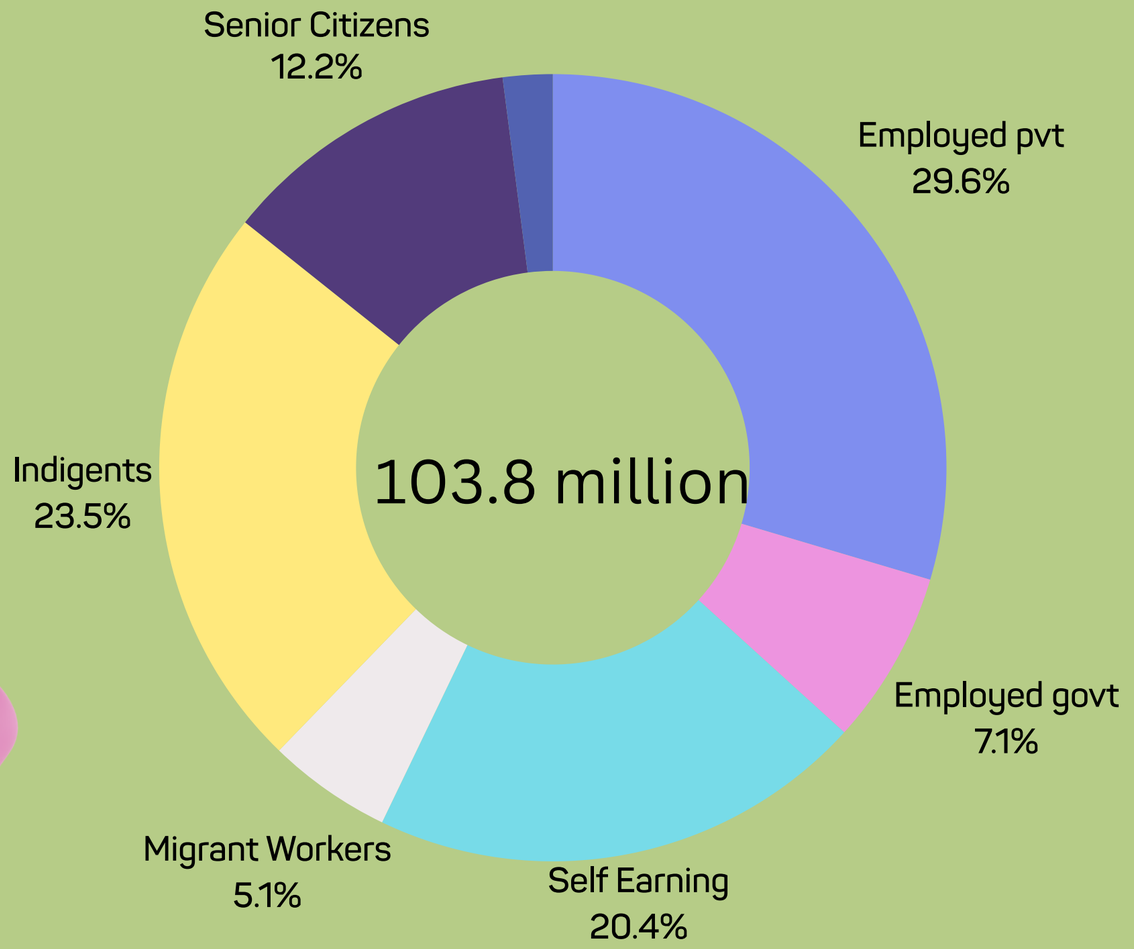




PHILHEALTH

- Wellness of public health
- Concern on well being of its memers
- Universal wellness through universal health care





PhilHealth Membership as of June 2023



Provisions:

- Every Filipino shall be granted immediate eligibility and access to preventive, promotive, curative, rehabilitative, and palliative care for medical, denta mental, and emergency health services, delivered either as population based or individual based healt services.
- Essential health benefit package refers to a set of individual-based entitlements covered by the Natio Health Insurance Program (NHIP) which includes primary care; medicines, diagnostics and laboratory and preventive, curative, and rehabilitative services
- Every Filipino shall register with a public or private primary care provider of choice.

CHANGE OF FOCUS FOR CHANGING DEMAND IN HEALTH CARE

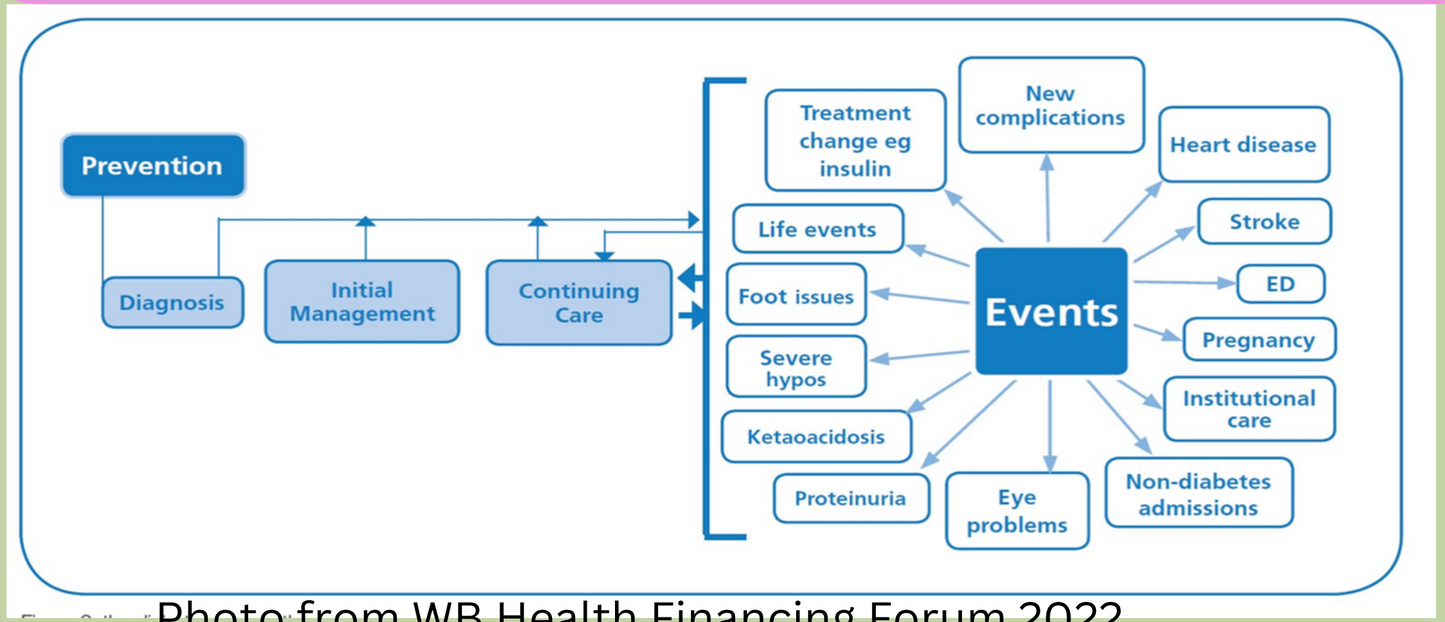
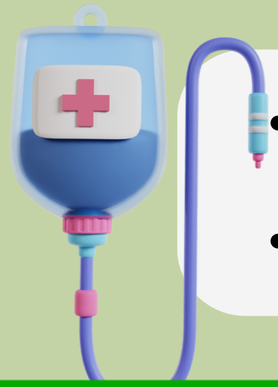
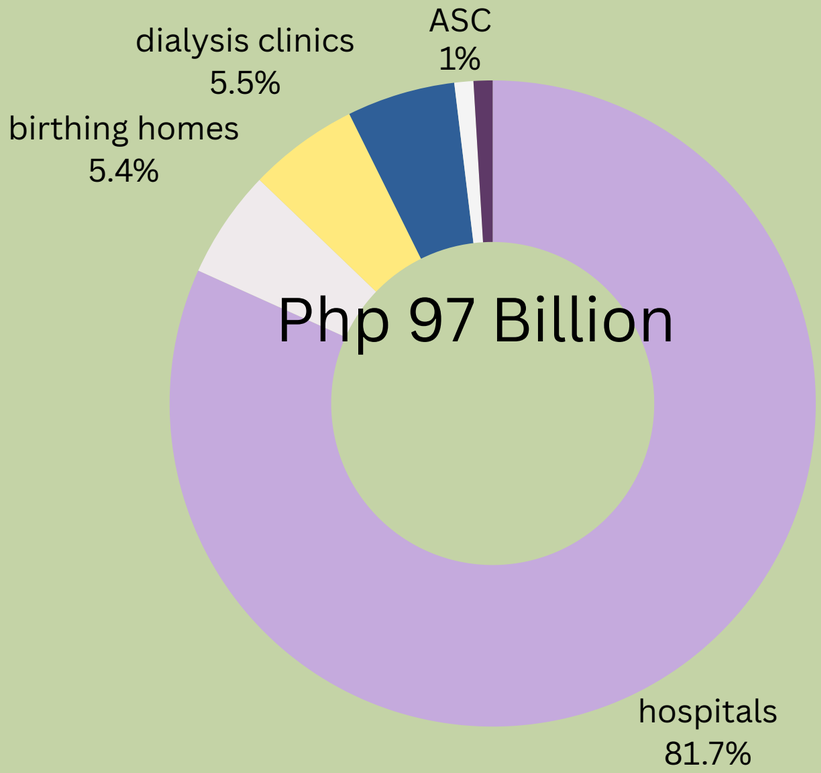


Photo from WB Health Financing Forum 2022

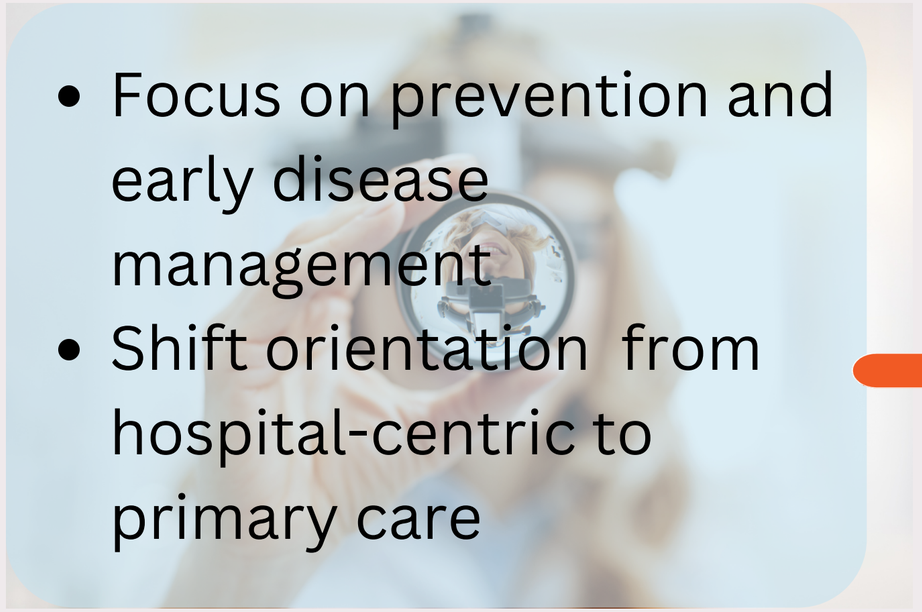


- **Managing life events or complications instead of prevention**
- **In the past years, benefit payouts, mostly to hospitals**



Claims Payment
2019

REFOCUS TO PRIMARY CARE



- Focus on prevention and early disease management
- Shift orientation from hospital-centric to primary care

PhilHealth Konsulta
Konsultasyong Sulit at Tama

CBC with Platelet Count

Urinalysis

Fecalysis

Sputum Microscopy

Fecal Occult Blood

Pap Smear

Lipid Profile (Total Cholesterol, HDL and LDL Cholesterol, Triglycerides)

Fasting Blood Sugar

Oral Glucose Tolerance Test

ECG

Chest X-ray

Creatinine

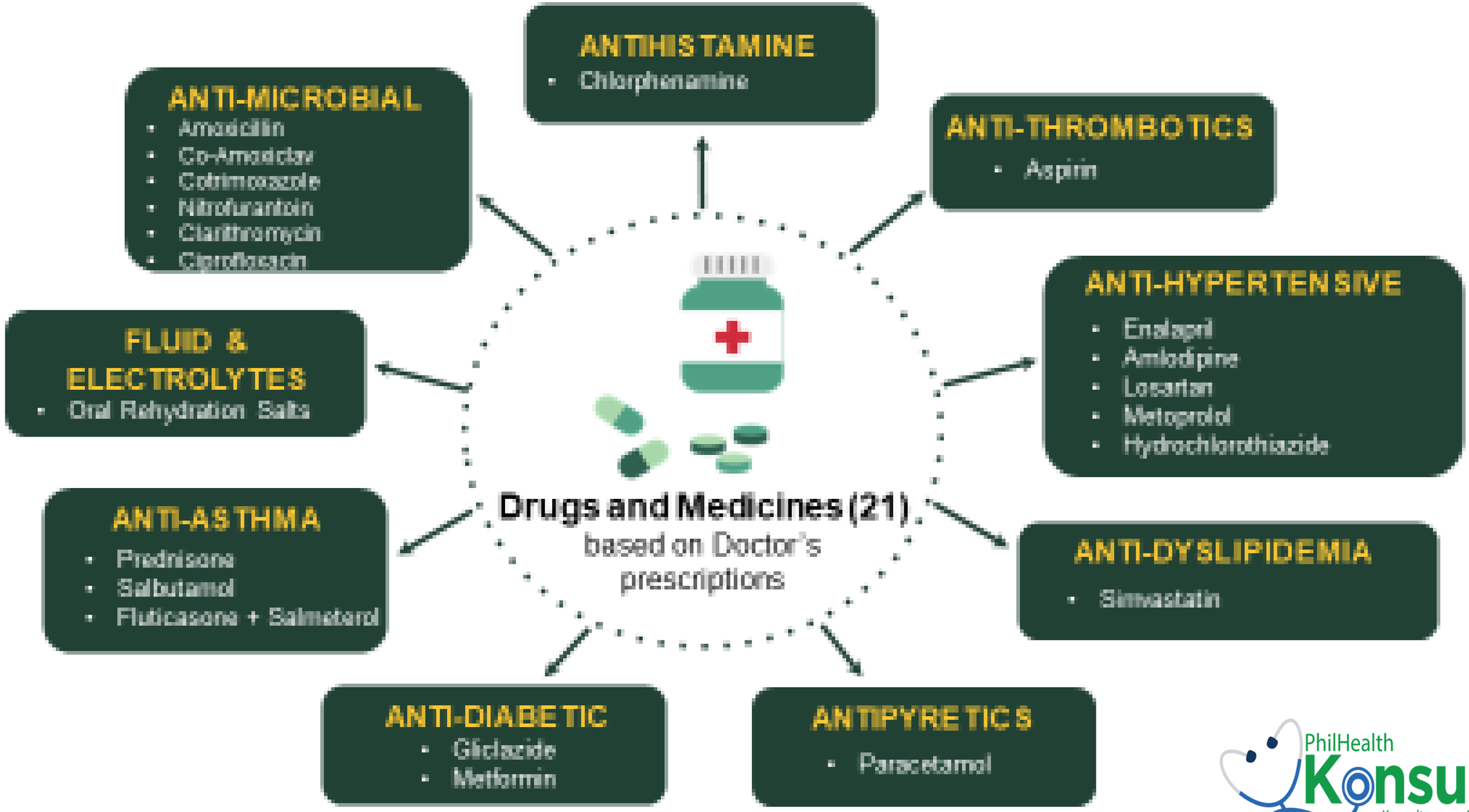
HBA 1C Test

Diagnostic Examinations

based on doctor's prescriptions



PhilHealth Konsulta



PhilHealth Konsulta
Konsultasyong Sulit at Tama

To avail of PhilHealth Konsulta Benefit

Magparehistro at Magpakonsulta!

01 Registration



Self-registration or Assisted

thru PhilHealth, LGUs and other authorized third-party

02 First patient encounter



Obtain health data/profile and assess risks

PhilHealth pays 40% of the payment rates for every first patient encounter

03.a Follow-up consults



Subsequent consults/ episodes of care

03.b Laboratory



Performed as necessary based on life stage/health risks

03.c Medications



Based on the diagnosis, as prescribed by MD

PhilHealth pays 60% of the payment rates based on the achieved targets

FRAGMENTATION OF CARE







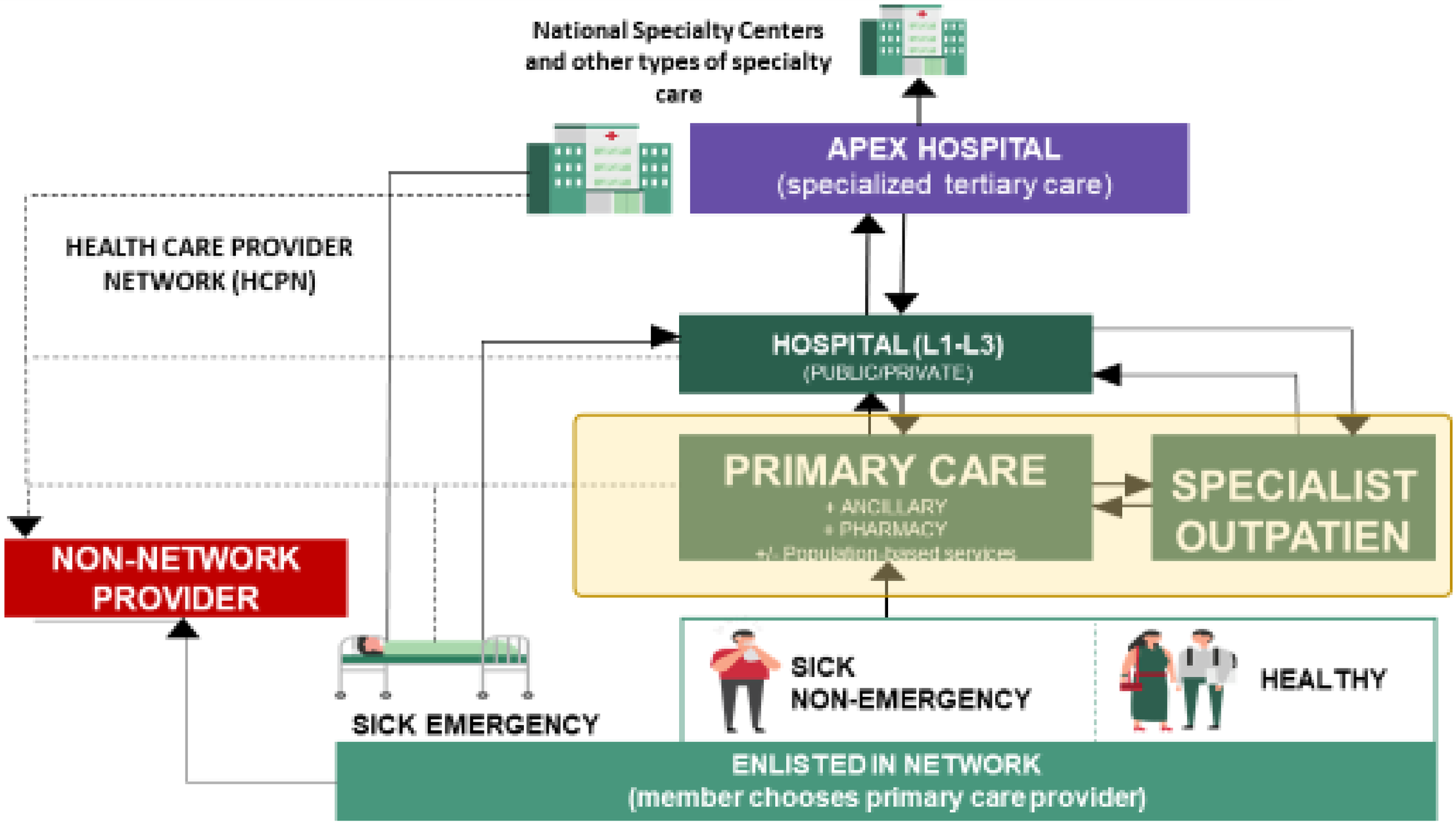
- fragmented
- uncoordinated
- lost patients



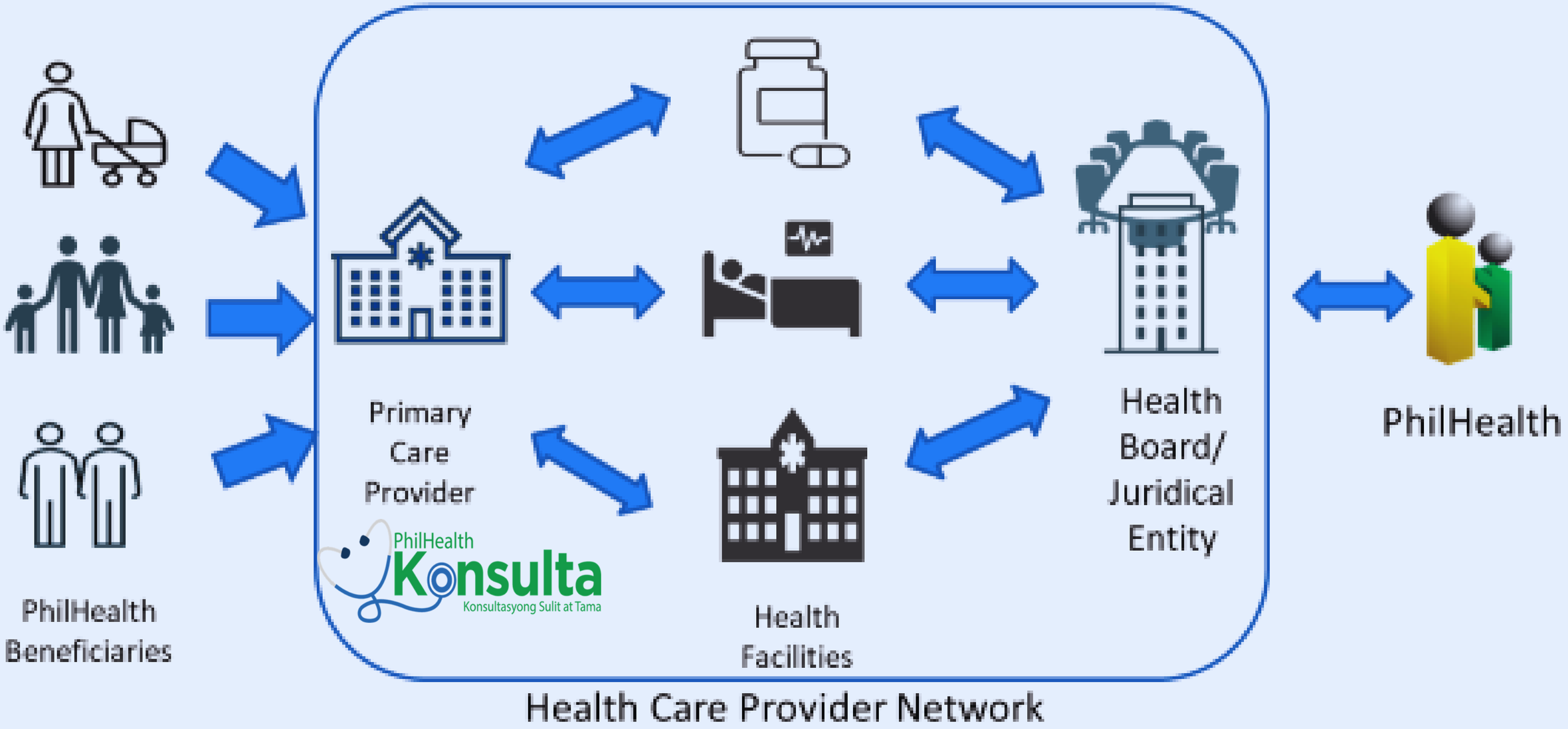




Health Care Provider Network



Engagement of Health Care Provider Network



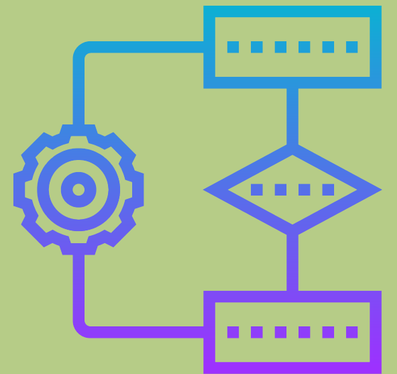
PROVIDER PAYMENT REFORMS

ACR VS. DRG

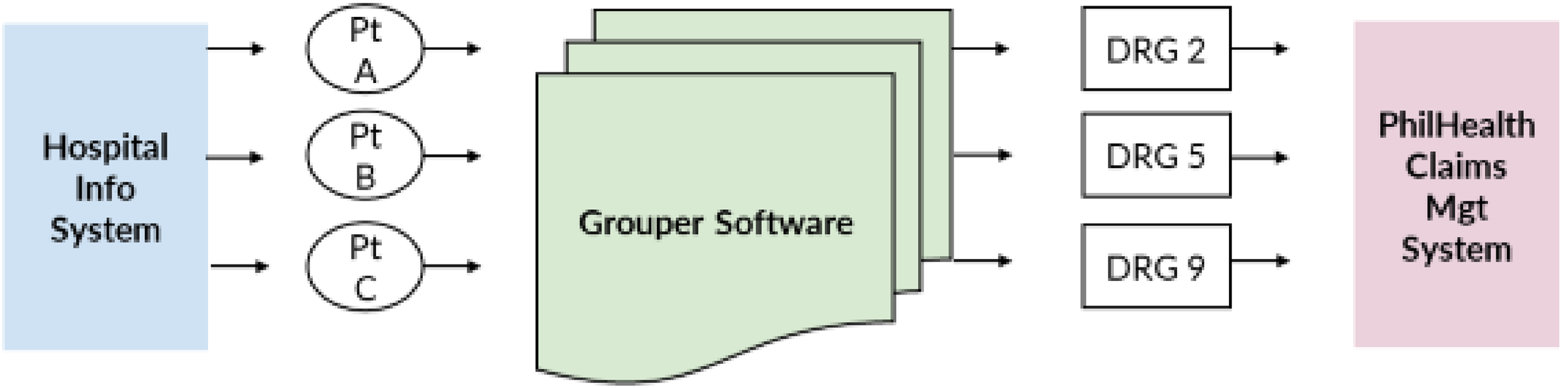
same rate for each case/procedure despite co-morbidities, age, length of stay	**diagnoses are grouped based on clinical and economic homogeniety**
8000+ medical and surgical case rates	**starts with about 2450 groups**
no modifiers and adjustment factors	**modify payments for every factors that can affect the cost (e.g., comorbidities), requires accurate claims**

Disease Related Groups (DRG)

- Groups of diagnoses that are both clinically cohesive and similar in the intensity of resources required to treat a case, or to complete a phase of case management
- To be more responsive to added costs due to comorbidities, complex procedures, or longer LOS



What are DRGs?



Underlying mechanism is a **decision tree**, deciding on case complexity and overall relative cost

To be **embedded** in both PhilHealth's and hospitals' financial managements for payments

This **minimizes** human errors and makes the process more **efficient and accurate**

SUMMARY



1 PRIMARY CARE

Refocus through PhilHealth Konsulta

2 COORDINATED & INTEGRATED CARE

Engaging health care providers, with PhilHealth Konsulta as focal point

3 PROVIDER PAYMENT REFORMS

Patient-centered and responsive benefit coverage

THANK YOU VERY MUCH.