

**[ PHIC PHILHEALTH CIRCULAR NO. 50, S. 2009, November 10, 2009 ]**

**GUIDELINES FOR ACCREDITATION OF HOSPITALS USING THE BENCHMARK STANDARDS, NEW APPLICATION FORM, CHECKLIST AND WARRANTIES OF ACCREDITATION OF IHCPs AND HOSPITAL SELF-ASSESSMENT TOOL**

Rule IX, Section 50 of the Revised Implementing Rules and Regulations of the National Health Insurance Act (RA 7875) as amended by RA 9241 states that "The Corporation shall implement a Quality Assurance Program applicable to all health care providers for the delivery of health services nationwide." The goal of this program is to achieve the desired health outcomes and member satisfaction through quality health services rendered by accredited health care providers.

In accordance with PhilHealth Board Resolution No. 453, s. 2002, the Benchmark shall be the new accreditation standards of the Corporation. Subsequent issuances provided the initial guidelines towards the full implementation of the Benchmark standards. Circular No. 12, s. 2005, adopted the Benchmark as its main reference for assessing and evaluating the performance of accredited health care providers and made it as the basis for accreditation of hospitals. It also enjoined providers to participate in trainings, workshops and orientations on Benchmark provided or organized by the Corporation. Circular 12, s. 2006 required the establishment of a continuous quality improvement (CQI) program for hospitals applying for accreditation starting 2007. In line with these, the following guidelines, checklist, forms and new warranties of accreditation for hospitals are hereby issued.

**GUIDELINES FOR ACCREDITATION OF HOSPITALS:**

The PhilHealth Benchmark Standards for Health Care Provider Organizations shall be the basis for accreditation of hospitals starting the 2010 accreditation year.

**I. CONDUCT OF SELF-ASSESSMENT:**

A hospital that intends to apply for accreditation shall determine its level of achievement/compliance in relation to the PhilHealth Benchmark standards by conducting a self-assessment of its organization, thereby determining which accreditation award it will apply for. The hospital shall institute corrective actions to address the areas for improvement identified during the self-assessment.

A self-assessment shall be conducted by a hospital prior to the submission of its application for accreditation. A copy of the self-assessment and survey form shall be secured from the PhROs or may be downloaded from the PhilHealth website at [www.philhealth.gov.ph](http://www.philhealth.gov.ph). This form is composed of three parts, namely: 1) Self-assessment and Survey Tool, 2) Score Sheet and 3) Self-assessment Summary.

**II. ACCREDITATION AWARDS:**

The following are the Accreditation Awards and the corresponding requirements and accreditation coverage:

Table 1: Accreditation Awards

Accreditation Award	Requirement	Accreditation Coverage
Center of Safety	a. Compliance with 100% of CORE indicators and b. At least 60% compliance with each of the following performance areas: 1. Patient Rights and Organizational Ethics 2. Patient Care 3. Safe Practice and Environment	1 year
Center of Quality	a. Compliance with 100% of CORE indicators and b. At least 75% compliance with each of the following performance areas: 1. Patient Rights and Organizational Ethics 2. Patient Care 3. Safe Practice and Environment 4. Leadership and Management 5. Human Resource Management 6. Information Management	2 years
Center of Excellence	a. Compliance with 100% of CORE indicators and b. At least 90% compliance with each of the following	3 years

performance areas:

1. Patient Rights and Organizational Ethics
  2. Patient Care
  3. Safe Practice and Environment
  4. Leadership and Management
  5. Human Resource Management
  6. Information Management
  7. Improving Performance
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### III. FILING OF APPLICATIONS

1. PhilHealth shall accept only applications for accreditation with **complete documentary requirements**.
2. An application fee shall be charged appropriate to the level the hospital is applying for (see payment scheme below).

#### A. Documentary requirements for application for accreditation of hospital (Annex B<sup>\*</sup>):

1. PhilHealth application form - properly accomplished. (Annex A<sup>\*</sup>).
2. Warranties of Accreditation - duly notarized
3. DOH License - with validity applicable to accreditation period applied for
4. Certificate of Membership in PHA/PHAP - with validity applicable to accreditation period applied for
5. Benchbook Self-Assessment and Survey Form - fully accomplished; for 2010 accreditation period, this is optional if hospital already submitted its baseline self-assessment or accomplished Manual II.
  - a. Self-assessment and survey tool
  - b. Score sheet
  - c. Self-assessment summary
6. Accreditation fee - proof of payment
7. Statement of Intent (SOI) - **if applicable**
  - a. For Hospitals applying for initial/re-accreditation from January to April (see section III.E, Option A and B regarding validity of accreditation), and/or
  - b. For hospitals applying as Centers of Quality/Excellence (see section V.2)

Additional Documentary Requirement for Initial Accreditation:

- DOH licenses for 3 previous years or its required equivalent document/s (Circ. No. 21 s. 2009).

A hospital shall file its application for accreditation at the designated PhRO/SO where the said institution is located and pay the corresponding application fee. It shall indicate in the application form the accreditation award it is applying for, namely: Center of Safety, Center of Quality or Center of Excellence.

#### B. Schedule of Filing of Application

1. Applications for initial accreditation and re-accreditation may be submitted anytime of the year.
2. For 2010 renewal of accreditation, a hospital shall submit its application for accreditation starting December 1, 2009 until February 1, 2010.
3. The incentive period for filing of 2010 renewal of accreditation is December 1 to 31, 2009. The regular filing period is January 1, 2010 to February 1, 2010. Applications filed after February 1, 2010 shall be subject to a corresponding surcharge as shown in Table 2. Filing date shall be reckoned from the date of submission of complete documents.

#### C. Applications with Incomplete Documentary Requirements

1. Applications with incomplete documentary requirements shall be returned and a notice of deficiency/ies on documentary requirements shall be issued to the applicant according to the following schedules:
  - a. Walk-in applicant: immediately upon receipt of the incomplete application
  - b. Mailed application: within five (5) working days from receipt of incomplete application
2. The applicant hospital shall be advised to complete the required document/s within thirty (30) days from receipt of notice of deficiency/ies.

#### D. Payment Scheme

1. Applications for 2010 renewal of accreditation that are received during the incentive period of from December 1 to 31, 2009 shall be given a ten percent (10%) discount from the amount of the regular accreditation fees.
2. Applications for renewal of accreditation received after the prescribed filing period shall incur penalty charges in addition to the regular accreditation fee and shall be tagged as re-accreditation.