



PHILHEALTH CIRCULAR

No. 2021-0025

TO : ALL MEMBERS OF THE NATIONAL HEALTH INSURANCE PROGRAM, ACCREDITED HEALTH CARE PROVIDERS, ALL PHILHEALTH OFFICES AND ALL OTHERS CONCERNED

SUBJECT : Outpatient HIV/AIDS Treatment (OHAT) Package (Revision 2)

I. RATIONALE

PhilHealth through Board Resolution No. 1331, series of 2009 has approved the implementation of an Outpatient HIV/AIDS Benefit Package *for confirmed HIV/AIDS cases requiring treatment*. This benefit aims to increase the proportion of the population having access to effective HIV/AIDS treatment and patient education measures. *With the new HIV treatment guidelines, rules on eligibility, and increasing numbers of health facilities providing HIV care, there is a need to update the guidelines of the OHAT Package.*

II. OBJECTIVES

This PhilHealth Circular is issued to provide guidelines on accreditation of HIV treatment hubs and primary care facilities, and availment of Outpatient HIV/AIDS Treatment (OHAT) Package.

III. SCOPE

This issuance contains the guidelines for reimbursement of the OHAT Package *and accreditation of HIV treatment facilities*. This shall apply to all accredited health care institutions that are designated by Department of Health as HIV treatment *facilities (HIV treatment hubs and HIV Primary Care Clinics)*.

IV. DEFINITION OF TERMS

- A. *Antiretroviral (ARV) drug – drug used in the treatment and prevention of HIV infection. Different classes of antiretroviral drugs act at different stages of HIV life cycle thereby stopping or interfering with the production of the virus in the body.*
- B. *Certified rHIVda Confirmatory Laboratory – a Department of Health (DOH) – licensed clinical laboratory compliant with rHIVda laboratory standards and technical requirements set by the National HIV, AIDS, and STI Prevention and Control Program (NASPCP) and National Reference Laboratory – San Lazaro Hospital/STI, AIDS Central Cooperative Laboratory (NRL-SLH/SACCL).*

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- C. *Confirmed HIV positive test result - a series of reactive test results using rapid HIV diagnostic algorithm (rHIVda) by identified HIV Testing Service (HTS) sites, or Western Blot, or Nucleic Amplification Test (NAT) as performed by National Reference Laboratory/San Lazaro Hospital STD-AIDS Cooperative Central Laboratory (NRL/SLH SACCL) or any DOH-accredited laboratories.*
- D. *Rapid HIV Diagnostic Algorithm (rHIVda) – a method of HIV confirmatory testing that uses a combination of 2 or 3 rapid test formats done in parallel or sequence on a sample that had reactive result in the initial test.*

V. POLICY STATEMENTS

A. Accreditation of OHAT Providers

1. *DOH-recognized HIV treatment hubs and primary HIV care clinics listed on the latest DOH Department Memorandum are qualified to apply for accreditation as providers of the OHAT Package.*
 - a. *PhilHealth-accredited health facilities shall submit the following:*
 - a.1 *The latest copy of DOH issuance or a DOH certification that includes the facility as a DOH- certified treatment facility; and*
 - a.2 *A new performance commitment that will include OHAT Package as one of their services.*
 - b. *Health facilities that only provide HIV healthcare services and not accredited by PhilHealth for any type of benefit may apply as stand-alone HIV treatment facilities subject to existing guidelines¹.*
2. *The process of accreditation shall be in accordance with the existing guidelines on accreditation of HCIs and its subsequent revisions.*
3. *In line with PhilHealth policies that professional services must be provided by accredited health care professionals, physicians in HIV treatment facilities must be PhilHealth-accredited. They may file their applications for accreditation along with the application of the health facility if they are not yet accredited.*
4. *As prescribed by PhilHealth Circular No. 2, s-2014 (Enhanced Health Care Institution Portal), HCIs shall have the HCI Portal installed in their facility upon approval of their application as an OHAT provider. To ensure confidentiality, this shall be a separate user account from the one used by the facility for its general admissions and other PhilHealth claims, solely dedicated for OHAT claims. It shall only ensue once HCI's accreditation is approved.*
5. *HIV treatment facilities are required to create a trust fund or its equivalent (for private-owned health facilities) for reimbursement of OHAT Package.*

B. Eligibility Rules for Members and Dependents

Eligibility shall be based on the current PhilHealth rules of eligibility for PhilHealth Benefits.

C. Availment of OHAT Package

1. *The Outpatient HIV/AIDS Treatment (OHAT) Package shall be paid up to seven thousand five hundred pesos (Php 7,500.00) per quarter. Annual reimbursement is set at a maximum of thirty thousand pesos (Php 30,000.00).*

¹ PhilHealth Circular No. 2018-0004 Accreditation of Stand-Alone HIV Treatment Hubs and Satellite Treatment Hubs as Providers of PhilHealth Outpatient HIV/AIDS Treatment (OHAT) Package



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2. Only HIV/AIDS cases confirmed by *San Lazaro Hospital Reference Laboratory/STD AIDS Central Cooperative Laboratory (SLH-NRL/SACCL)*, *Research Institute for Tropical Medicine (RITM)*, *Certified rHIVda Confirmatory Laboratory (CrCl)* or *DOH-licensed laboratories with rHIVda services*; and requiring treatment shall be covered by the package.
3. Excluded in this OHAT Package are the following:
 - a. Diagnosis of HIV/AIDS with no laboratory confirmation;
 - b. Management of patients for pulmonary tuberculosis co-infection;
 - c. Illness (opportunistic infections) secondary to HIV/AIDS that requires hospitalization; and
 - d. HIV/AIDS cases requiring confinement are covered under the regular inpatient benefit of PhilHealth.
4. A separate package for TB-DOTS may be reimbursed in accredited TB-DOTS facilities. A member may avail of both the OHAT and TB-DOTS packages simultaneously.
5. This package shall only be availed from PhilHealth-accredited facilities that are DOH designated HIV Treatment Facilities.
6. Package shall be based on the latest HIV treatment guidelines *prescribed by the Department of Health*. All accredited OHAT facilities shall follow the guidelines set by the DOH.²
 - a. Based on the DOH treatment guidelines, antiretroviral therapy (ART) shall be initiated in all persons with confirmed positive HIV test result regardless of clinical and immunologic status.
 - b. The following minimum services prescribed by the guidelines shall be provided to OHAT beneficiaries:
 - b.1 Adherence counseling and other counseling services;
 - b.2 Consultations which include face to face consultations within the facility, home visits, or via telemedicine;
 - b.3 Client-centered or differentiated service delivery for initiation and maintenance of ART;
 - b.4 Early identification of TB among PLHIV including diagnosis through GeneXpert for MTB/RIF and radiologic examinations (as indicated);
 - b.5 Monitoring of toxicity of antiretroviral drugs including laboratory examinations such as lipid profile, complete blood count, serum creatinine, fasting blood sugar (depending on treatment regimen);
 - b.6 Monitoring of response to ART including viral load testing;
 - b.7 Diagnosis and management of treatment failure including genotyping (as indicated);
 - b.8 Diagnosis, management, and prevention/prophylaxis of opportunistic infection (i.e., CD4 count, diagnostic tests and procedures, and prophylaxis drugs);
 - b.9 Prevention of hepatitis B virus infection including HBsAg screening and Hepatitis B vaccination as indicated.

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D. Claims Filing and Processing

1. Only PhilHealth-accredited, DOH-designated HIV treatment facilities may file for reimbursement for the OHAT Package.

² Department of Health Administrative Order 2018-0024 Revised Policies and Guidelines on the Use of Antiretroviral Therapy (ART) among People Living with Human immunodeficiency virus and HIV-exposed infants



2. The package will be *claimed and paid at seven thousand five hundred pesos (Php 7,500.00) maximum per quarter*, payable to the health facility. The OHAT facility shall only file one claim for each patient per quarter regardless of the number of consultations/*patient encounters or provision of services*. However, if there are no services provided *based on the minimum services prescribed by the guidelines* (i.e., no consultation), there will be no payment for that quarter.
3. *The date during the applicable quarter when patient obtained any HIV-related services (such as consultation, refill of antiretroviral drugs, and laboratory tests) from the OHAT facility shall be considered as the admission date*. If there are several patient encounters for that quarter, the health care provider shall choose only one of them as date of admission. The discharge date shall be the same as the admission date.
4. *The OHAT Package is covered by PhilHealth Circular No. 2021-0012 (Modification on the Payment Rules of Benefit Packages under All Case Rates (ACR) Policy including COVID-19 Benefit Packages)*. To facilitate processing of claims, all health services that were charged to PhilHealth must be included in the total actual charges reflected in Claim Form 2 and the Statement of Account or its equivalent. *If there were several patient encounters during the applicable quarter, the services therein should be included in the total actual charges*.
5. PhilHealth Out-patient HIV/AIDS Treatment Package shall use the Package Code and description below:

Code	Description	RVU
99246	OUTPATIENT HIV/AIDS PACKAGE	Package

Table 1: HIV/AIDS Treatment Package Code

6. *The following procedures apply for manual submission of claims:*
 Claims to be submitted manually shall be enclosed in a sealed envelope, marked "CONFIDENTIAL" and submitted to the PhilHealth Regional Office with the following documents:
 - a. PhilHealth Benefit Eligibility Form (PBEF) OR other secondary documents required as proof of eligibility listed in PhilHealth Circulars No. 50, s-2012 and PC 1, s-2013 in cases when PBEF is not available;
 - b. Duly accomplished PhilHealth Claim Form 1 (CF1). CF1 shall no longer be required when PBEF confirmed (as indicated by a "Yes") the patient's eligibility;
 - c. Duly accomplished PhilHealth Claim Form 2 (CF2);
 - d. *Statement of Account (SOA) or its equivalent from the facility that includes all charges for the provided health services for the quarter. (Annex A - Sample Template of the Statement of Account). The information on the SOA shall be consistent with the amount encoded on the Part III A of CF2;*
 - e. Other documents to be submitted:

Initial Claim	Succeeding Claims
Photocopy of the following: 1. Confirmatory test results (SLH-NRL/SACCL, RITM, CrCl or DOH-licensed laboratory with rHIV da) 2. Health regimen booklet or a print-out of the electronic health regimen summary that reflects the current drug regimen	1. Photocopy of the health regimen booklet or electronic health regimen summary 2. Waiver and consent for release of confidential information (Annex B)

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Initial Claim	Succeeding Claims
3. Waiver and consent for release of confidential information (Annex B)	3. Referral letter (in cases of transfer)

Table 2: Additional Documents to be Submitted for Claims Filing

For previously diagnosed cases but are filing for the first time, the claimant must still submit all the necessary laboratory test results together with the other requirements. This will be considered as the initial claim.

7. Starting January 1, 2023, all OHAT claims shall be submitted through electronic claims system (eClaims). PhilHealth shall announce through an official issuance once eClaims is ready for OHAT claims.
 - a. Upon electronic claims submission, eClaims Electronic Web Service shall be used for eligibility checking. Those with Yes response shall be issued tracking number in the eCEWS and shall no longer need a printed PBEF.
 - b. All data required for claims shall be entered and done within the health facility. Details on CF1 and CF2 shall be entered electronically, and the facility shall no longer submit a hard copy of these forms.
 - c. A Claim Signature Form (CSF) is a requirement for all claims. It shall be duly accomplished and signed by appropriate signatories before scanning.
 - d. Together with the CSF, documents listed in Table 2 above shall be scanned and submitted through eClaims.
8. All the staff of the facility and PhilHealth employees who are directly involved in in submission, processing, and payment of OHAT claims shall sign a non-disclosure agreement (Annex C: Non-disclosure agreement). They shall safeguard the patient's rights to privacy and confidentiality in compliance with Republic Act (RA) No. 10173 - Data Privacy Act of 2012 and RA No. 11166 – Philippine HIV and AIDS Policy Act.
9. All claims for OHAT Package shall be evaluated and processed according to PhilHealth rules and guidelines on claims processing.
10. Claims for the OHAT Package must be submitted to PhilHealth within sixty (60) days after the discharge date unless otherwise determined by a specific issuance.
11. Claims with incomplete requirements shall be returned to sender (RTS) for completion. Re-filed claims with incomplete requirements shall be denied.
12. The rule of single period of confinement shall not apply to this Package. However, only one (1) claim per quarter may be filed and it is equivalent to Php7,500. Any other claim filed within the same quarter will be denied.
13. Each quarterly claim shall be charged one (1) day against the 45-day annual benefit limit or a maximum of 4 days per year.
14. When a patient transfer from one treatment hub to another, the following rules shall apply:
 - a. A referral letter to the receiving facility must be accomplished.
 - b. The accredited facility that provided the services for the applicable quarter shall file the claim.

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 DC: Hben Date: 12/17/2021



- c. If *the* patient transferred within the same quarter, the *receiving* facility shall file the claim. In cases when claims were filed by the referring and receiving facility within the *same* quarter, only claims from the *receiving* facility shall be paid.
15. *PhilHealth beneficiaries who are covered by the No Balance Billing Policy of PhilHealth Circular No. 2017-0017 shall have no co-payment or no balance billing for health services prescribed in the DOH HIV treatment guidelines and availed in government HIV treatment facilities.*

E. Utilization of OHAT Reimbursement

1. The disposition of PhilHealth payment for OHAT shall be:
 - a. Eighty percent (80%) for the facility to be used as revolving fund for the delivery of the required service/s such as, but not limited to drugs (*ARV, TB preventive therapy, drugs for opportunistic infection*), *vaccines*, supplies, laboratory reagents and cartridges, equipment (including *procurement and maintenance of viral load and CD4 machines*), *payment for outsourced services and referrals like laboratory tests, courier services for ARV delivery*, and other necessary services.
 - b. Twenty percent (20%) for the professional fee that shall be divided among the HIV/AIDS Core Team (HACT) and other staff directly providing the services composed of, but not limited to the following: *doctors, dentists, nurses, medical technologists, pharmacists, medical social workers, HIV case managers, counselors, and data encoders. Government hospitals shall follow the prescribed DOH guidelines in the distribution of professional fees received from PhilHealth.*
2. *Uninterrupted supplies and continuous intake of ARV are the key to viral suppression and survival of PLHIVs. ARV and other drugs procured by the facility in cases of national stock-outs or undersupply, should be charged to the OHAT Package. Likewise, when physical access is limited such as in times of community quarantine, the cost of alternative modes of delivery of supplies, ARV and HIV-related services may be charged to OHAT reimbursement.*

F. Monitoring and Evaluation

1. Monitoring of the utilization of the Outpatient HIV/AIDS Treatment Package shall be based on PhilHealth *existing guidelines on monitoring and evaluation.*
2. The *HIV treatment facilities* are required to maintain a minimum set of information on each patient such as medical records/charts including referral letters that shall be readily available to PhilHealth during monitoring and evaluation. *Administrative data such as purchase and delivery of services for ARV, purchase of equipment, payment for outsourced services, quality improvement activities (i.e., patient feedback) shall also be available.*
3. *The implementation of this PhilHealth Circular shall be monitored and evaluated with relevant stakeholders. This PhilHealth Circular shall be reviewed and revised as necessary.*

G. Annexes

1. *Annex A - Sample Template of the Statement of Account*
2. *Annex B - Waiver and consent for release of confidential information*
3. *Annex C: Non-disclosure agreement*



VI. PENALTY CLAUSE

Any violation of this PhilHealth Circular and all existing PhilHealth circulars and directives shall be dealt with and penalized in accordance with pertinent provisions of R.A. 7875, as amended by R.A. No. 10606 and R.A. No. 11223, and their respective Implementing Rules and Regulations.

VII. SEPARABILITY CLAUSE

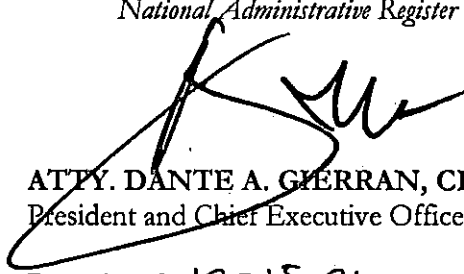
If any provision of this PhilHealth Circular shall be declared invalid, unconstitutional, or unenforceable, the validity of the remaining provisions shall not in any way be affected and shall remain enforceable.

VIII. REPEALING CLAUSE

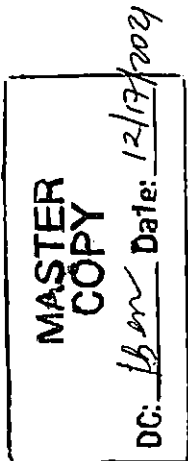
This policy repeals PhilHealth Circular No. 011-2015 or the Outpatient HIV/AIDS Treatment (OHAT) Package (PhilHealth Circular 19, s.2010) Revision 1.

IX. DATE OF EFFECTIVITY

This PhilHealth Circular shall take effect immediately upon publication in a newspaper of general circulation or the Official Gazette. A copy thereof shall be submitted thereafter to the Office of the National Administrative Register at the University of the Philippines Law Center.


ATTY. DANTE A. GERRAN, CPA,
President and Chief Executive Officer (PCEO)

Date signed: 12-15-21



Out-Patient HIV/AIDS Treatment (OHAT) Package (Revision 2)

