

- The providers within the network needs to be collectively capable of providing required services under Konsulta.
- Navigation and referral protocols must be in place to direct patients/beneficiaries to the required services within the network. This should include referral-back protocol to the primary care provider where the beneficiary is registered and referral to other providers outside of the network, as needed.

### Financial Management Support

One of the prescribed elements in organizing the province/city wide health system under the UHC is financial integration. This shall support the operations of the network and shall ensure sustained adequate availability of resources for the provision of Konsulta services. The funding allocation for Konsulta or primary care related activities and commodities can be verified from the following LGU documents:

- Local investment plan for health (LIPH)/Investment Plan and Annual Operations Plan (AOP)
- Health Board approved guideline on compensation, incentives and fees for contracted services within the network including the disbursement and procurement transactions. These can be verified or supported by signed contracts with other providers.

Table 1 summarizes the standards for contracting a PCPN to be used as assessment tool by both the network and PhilHealth.

Table 1. PCPN Contracting Standard

Key Features	Criteria	Evidence
<b>Management</b>		
Legal Personality <b>(core key feature)</b>	Has legal rights and responsibilities to enter into agreement and receive payment from PhilHealth	<p>Document review all as applicable: For purely public or <i>mixed</i> public-led network:</p> <p><input type="checkbox"/> Province: Sanggunian Resolution authorizing the province to contract with PhilHealth and other health care providers, and to open an account for the SHF for health services and signed MOA between governor and participating component city and municipal mayors or private/public Konsulta providers in the case of province</p> <p><input type="checkbox"/> City: Resolution authorizing the highly urbanized city or independent component city to contract with PhilHealth and other health care providers, and to open an account for the SHF for health services</p> <p>Document review all:</p> <p><input type="checkbox"/> SHF Bank account</p> <p><input type="checkbox"/> Evidence of book of accounts</p>

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Key Features	Criteria	Evidence
		Document review all: For purely private or <i>mixed</i> private-led network: <input type="checkbox"/> Copy of SEC-approved Articles of Incorporation or Partnership or any proof/document of legal entity indicating the name/s of Incorporators or Partners <input type="checkbox"/> Updated LGU Business Permit <input type="checkbox"/> BIR Certificate of Registration <input type="checkbox"/> Pooled Bank account <input type="checkbox"/> Evidence of book of accounts
Organizational structure	Has a well-defined organizational structure	Document review: <input type="checkbox"/> PCPN organizational structure/chart
Qualified individual providers <b>(core feature)</b> <b>key</b>	Has DOH license and/or PhilHealth accreditation for all involved facilities (as applicable)	Document review: <input type="checkbox"/> Primary care certification from DOH or PhilHealth accreditation as applicable
	Has a capacity to meet the defined minimum health care professional to patient ratio	Document review: <input type="checkbox"/> List of providers by type of services matched with the number of target beneficiaries for each service type based on the HRH Manual
Integrated Information System <b>(core feature)</b> <b>key</b>	Has an interconnected and integrated information system among all facilities in the network that ensures that privacy and confidentiality laws are followed	<input type="checkbox"/> PhilHealth IT requirements  1. Adoption of enhanced eKonsulta system, an equivalent PhilHealth system for Konsulta Sandbox, or its own developed/contracted PhilHealth-certified electronic medical record system as its recording, reporting, and monitoring system, preferably connected or linked to each provider within the network for automatic patient record updating.  <b>2. Software:</b> (choose one option) a. XAMPP V1.8.3-3 b. Apache v2 4.7, MySQL 5.6 and PHPv5.5  <b>Support Browsers:</b> Best used in updated versions of Google Chrome, Mozilla Firefox and Microsoft Edge  <b>OS Supported:</b> Windows 7x64, Windows 7x 32, Windows 10X32, Windows 10x64

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Key Features	Criteria	Evidence
		<b>Hardware Requirements</b> <ul style="list-style-type: none"> <li>a. Memory: min of 2GB RAM</li> <li>b. Storage: 500GB HD</li> <li>c. Processor: min of 1GHz</li> </ul>
<b>Data Privacy Compliance (core feature)</b>	Observes and upholds patient's privacy and confidentiality at all times during exchange of data between facilities within the network	Document review: <ul style="list-style-type: none"> <li><input type="checkbox"/> Consent forms</li> </ul> Interview with IT: <ul style="list-style-type: none"> <li><input type="checkbox"/> Demonstration of IT security and confidentiality of records</li> <li><input type="checkbox"/> Demonstration of medical records sharing and exchange of information</li> </ul>
<b>Records Keeping</b>	Maintains a detailed, efficient, and complete medical records management	Interview/ system demonstration with IT/health workers: <ul style="list-style-type: none"> <li><input type="checkbox"/> Patient recording system showing               <ul style="list-style-type: none"> <li>o Record of first patient encounter and follow-up care</li> <li>o Record of patients provided with completed services</li> <li>o Record of referrals to other providers for services and the type/description of services</li> <li>o Record of services rendered and prescribed but not provided to individual patients</li> </ul> </li> </ul>
<b>Administrative Service</b>	Has a capacity to ensure adequacy of resources to deliver service commitments	Document review: <ul style="list-style-type: none"> <li><input type="checkbox"/> Record of available supplies</li> <li><input type="checkbox"/> Record of trained providers/staff</li> </ul>
<b>Performance Monitoring</b>	Implements policies and procedures on network-wide results-based performance monitoring & evaluation	Document review (may also be found in MOA/contract, memos, etc.) or key informant interview (KII): <ul style="list-style-type: none"> <li><input type="checkbox"/> Policies and procedures on performance monitoring</li> <li><input type="checkbox"/> Quality assurance program</li> <li><input type="checkbox"/> Patient satisfaction survey</li> <li><input type="checkbox"/> Participant provider satisfaction survey</li> <li><input type="checkbox"/> Facility performance evaluation/scorecard</li> <li><input type="checkbox"/> Network evaluation/scorecard</li> </ul>
<b>Performance Monitoring</b>	Has a framework for incentivizing high-performing facilities within the network	Document review (may also be found in MOA/contract, memos, etc.): <ul style="list-style-type: none"> <li><input type="checkbox"/> Policies and procedures on performance monitoring</li> </ul>

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Key Features	Criteria	Evidence
<b>Technical Function</b>		
Population coverage	Has a defined population that it shall serve	<input type="checkbox"/> Network agreement regarding performance-based incentives or disincentives Document review (may also be found in memos, issuances, etc.): <input type="checkbox"/> Mechanism to register everyone in the catchment <input type="checkbox"/> Database of assigned individuals
Services	Has a capacity to deliver all Konsulta services prescribed in PC No. 2022-0005	Document review any of the following: <input type="checkbox"/> List of all providers and respective services including appropriate licenses and status of accreditation in PhilHealth <input type="checkbox"/> List of providers by type of services matched with the number of target beneficiaries for each service type based on the HRH Manual <input type="checkbox"/> Contract or MOA with providers outside of LGU supervision, for outsourced services <input type="checkbox"/> Memorandum of instruction from the LCE or the network management engaging providers under LGU supervision, for services within the network.
Patient navigation and coordinated care	Implements policies and procedures on primary care providers as initial contact	Document review (may be found in memos/issuances): <input type="checkbox"/> Network's policies and procedures on navigation and coordination/Patient Pathway Interview with health worker: <input type="checkbox"/> Demonstration of patient navigation procedure/patient pathway
	Has provisions on navigation of patient during emergencies and special situations	Document review (may be found in memos/issuances): <input type="checkbox"/> Network's policies and procedures on navigation and coordination with specific provisions on emergencies and special situations/patient pathway for emergencies and special situations Interview with health worker: <input type="checkbox"/> Demonstration of patient navigation procedure specifically during emergencies and special situations
	Has a mechanism/system for coordination of care	Document review and/or KII: <input type="checkbox"/> Network's referral protocols including referral-back protocol to the primary care provider where

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Key Features	Criteria	Evidence
		<p>the beneficiary is registered and referral to other providers outside of the network</p> <p>Interview with health worker:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Demonstration of mechanism/system for coordinating care</li> </ul>
<b>Financial Management Support</b>		
<p>Fiscal authority (core feature)</p> <p>key</p>	<p>Pools funds at the network level (network-wide accounting) and has a mechanism for dividing funds fairly</p>	<p>Document review all:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Network agreement for the use of bank accounts/evidence of books of accounts and financial reporting and sub-ledgers</li> <li><input type="checkbox"/> LGU's investment plan for health/Annual Operations Plan/work and financial plan</li> <li><input type="checkbox"/> Copy of DILG's Seal of Good Financial Housekeeping</li> <li><input type="checkbox"/> Buffer fund or escrow account</li> </ul> <p>Document review/interview with Finance Officer:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Network's policies and procedures on handling of capitation payments from PhilHealth</li> </ul>
	<p>Has a network-wide investment plan and resource allocation supporting the PCPN's strategic and financial goals, and operational targets</p>	<p>Document review:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> LIPH /AOP or Investment Plan</li> <li><input type="checkbox"/> Health Board approved guideline on compensation, incentives and fees for contracted services within the network including the disbursement and procurement transactions. These can be verified or supported by signed contracts with other providers.</li> </ul>
	<p>Has a menu of charges which is implemented across the network, which includes professional fees</p>	<p>Document review:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Network's policies and procedures on charging and co-payment</li> <li><input type="checkbox"/> Network's publicized menu of charges</li> </ul> <p>Interview with Finance Officer:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Demonstration of implementation of menu of charges in the network – bills and statements of account</li> </ul>

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