

**PHILIPPINE HEALTH INSURANCE CORPORATION (PHILHEALTH)**  
**Validation Result of 2021 Performance Scorecard**

Component						PhilHealth Submission		GCG Validation		Supporting Documents	Remarks
Objective/ Measure	Formula	Wt.	Rating Scale	Target	Actual	Rating	Actual	Rating			
<b>SATISFIED CLIENTS</b>											
SO 1	<b>Total Client Experience</b>										
SM 1	Percentage of Satisfied Customers	Number of respondents who rated PhilHealth service with at least Satisfactory / Total number of respondents	10%	(Actual/ Target) x Weight Below 80% = 0%	≥ 90%	91.06%	10.00%	Noncompliant with back-checking requirement	0%	<ul style="list-style-type: none"> <li>2020 PhilHealth Client Awareness and Satisfaction Survey conducted by a Third-Party Consultant (Novo Trends)</li> <li>Database of the respondents' answers</li> <li>80 Sample Questionnaires from the database</li> </ul>	<p>GCG noted that initially, only respondents from the PRO NCR North out of the several LHIOs of PhilHealth had been backchecked. In compliance with the 30% requirement, the samples from other regions have been re-contacted, and a total of 900 samples were back-checked. The call-back period was from August to September 2022.</p> <p>It should be noted that the conduct of the back-checking should have been completed prior to the submission of the CSS final report. It is clear under Part X of the Enhanced CSS Guidelines that the back-checking and spot-checking report is part of the reports required to be submitted every quarter. Hence, the conduct of the back-checking post-submission of the final report is no longer acceptable.</p>

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SM 2	Percentage of Filipinos Registered in the National Health Insurance Program (NHIP)	No of Beneficiaries Registered in the Database / Total Population (per PSA)	5%	(Actual/Target) x Weight	≥90%	88.96% (98,030,269/110,198,654)	4.94%	88.96%	4.94%	<ul style="list-style-type: none"> <li>Member Management Group (MMG) Summary Report on the Registration Rate with Projected Population</li> <li>Raw files (.txt) to come up with the MMG Summary Report</li> <li>Samples of Member Data Record (MDR) per region</li> </ul>	Acceptable.
SM 3	Percentage of Accredited KONSULTA Providers	Actual Accomplishment <sup>1</sup>	2.5%	All or Nothing	Establish Baseline	95.92% (188/196 Accredited Konsulta Providers)	2.5%	91.92% (182/198 Accredited Konsulta Providers)	2.5%	<ul style="list-style-type: none"> <li>Summary of the Total No. of Accredited KONSULTA Providers</li> <li>Sample Provider Data Record (PDR)</li> <li>Performance Commitment (PC).</li> </ul>	Acceptable

<sup>1</sup> No. of KONSULTA providers Accredited / Total Number of KONSULTA Providers.

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Objective/ Measure	Formula	Wt.	Rating Scale	Target	Actual	Rating	Actual	Rating			
<b>SO 2 Responsive Benefits</b>											
SM 4	Percentage of Individuals Registered to a KONSULTA Provider	Actual Accomplishment <sup>2</sup>	2.5%	All or Nothing	Establish Baseline	11.37% (213,828/ 1,880,000)	2.50%	213,828 Individuals	2.50%	<ul style="list-style-type: none"> <li>• Summary of the Total Number of Registered Beneficiaries as of 31 December 2021</li> <li>• Samples of PhilHealth Konsulta Registration Form (PKRF)</li> <li>• Raw file of the List of Registered Beneficiaries</li> </ul>	Acceptable.

<sup>2</sup> Total No. of Individuals Registered to KONSULTA Provider / Projected Population

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Objective/ Measure	Formula	Wt.	Rating Scale	Target	Actual	Rating	Actual	Rating			
SM 5	Percentage of Patients Admitted in Basic or Ward Accommodation with No Co-Payment	$\frac{\text{Total No. of Patients Admitted in Basic or Ward Accommodation with No Co-Payment}}{\text{Total No. of Patients Admitted in Basic Ward or Ward Accommodation}}$	5%	All or Nothing	Establish Baseline (All Members Categories and all accredited private and government hospitals)	Government – 48.37% (1,281,250 out of 2,649,069)  Private – 19.88% (139,229 out of 700,333).	5%	Unverifiable	0%	<ul style="list-style-type: none"> <li>Letter dated 12 Jan 2022 regarding Non-submission of Reports on No-Co Payments for the 4th quarter 2021 and December 2021</li> <li>Summary of 2021 No Co-Pay Compliance extracted from the system</li> <li>Snippet of the Summary No Co-payment Compliance Report</li> <li>Summary of NBB report 2021 (Annual)</li> <li>IT Advisory email</li> <li>Internal Memorandum on the Additional Supporting Documents</li> </ul>	The GCG could not establish the veracity and reliability of the data provided due to COA's findings related to Claims of PhilHealth. Moreover, PhilHealth failed to submit supplemental due diligence report on the 2021 validation findings on the erroneous entries made by Health Care Institution (HCI) in the "Consumption of Benefits" portion of the forms on paid claims received for 2021.
		<b>Sub-Total</b>	<b>25%</b>				<b>24.94%</b>		<b>9.94%</b>		

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Validation Result of 2020 Performance Scorecard (Annex A)

	Component					PhilHealth Submission		GCG Validation		Supporting Documents	Remarks	
	Objective/ Measure	Formula	Wt.	Rating Scale	Target	Actual	Rating	Actual	Rating			
SUSTAINABLE FUND	SO 3	Revenue Generated										
	SM 6	Collection Efficiency Rate	Actual collection / Potential collection <sup>3</sup>	20%	(Actual/Target) x Weight	≥ 95% (Direct Contributors)	90.63%	19.08%	Unverifiable	0%	<ul style="list-style-type: none"> <li>Collection Performance Report with data extracted from the Member Management Group (MMG)</li> <li>Letter from the Insurance Commission (IC)</li> <li>COA Annual Audit Report</li> </ul>	The GCG could not establish the veracity and reliability of the data provided by PhilHealth due to the comments of IC and COA findings on the premium contributions and receivables accounts.
			<b>Sub-Total</b>	<b>20%</b>				<b>19.08%</b>		<b>0%</b>		

<sup>3</sup> Potential Collection should be confirmed by Insurance Commission



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	SO 4	Boost Innovation in Research, Policy, and Process										
EXCELLENT PROCESS	SM 7	ISO Certification	Actual Accomplishment	5%	All or Nothing	<p>Recertification of the ISO 9001:2015 on the Public Administration covering the following Processes: Member Coverage Management, Benefit Delivery, Provider Management, and Support Processes</p>	<p>Conduct of Internal Quality Audit (IQA) has been completed and concluded in September 2021.</p> <p>PCEO approved revisions in the TOR for entering Multi-year Contractual Authority (MYCA)</p> <p>Two bidding failed.</p> <p>Conversation between OSDO and SBAC was done 04 January 2020.</p> <p>OSDO Prepared a Memo to OPCEO recommending for the Hiring of Consultancy Firm for the ISO Certification</p>	5.00%	<p>No ISO Recertification has been made on the Public Administration covering the following Processes: Member Coverage Management, Benefit Delivery, Provider Management, and Support Processes</p>	0%	<ul style="list-style-type: none"> <li>Internal Memorandum to the PCEO on the Result of Procurement Activities Conducted for the Procurement of Multi-Year Services of a Third-Party Certifying Body to Conduct Recertification Audit</li> <li>Bids and Awards Committee (BAC)-A Resolutions</li> <li>Certification of Internal Quality Audit (IQA)</li> <li>Corporate Personnel Orders</li> <li>Email from SOCOTEC</li> <li>Letter to GCG dated on the PhilHealth's ISO Certification</li> </ul>	Target not met. Bidding on the procurement of Certifying Body started only at the end of November 2021.

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Objective/ Measure	Formula	Wt.	Rating Scale	Target	Actual	Rating	Actual	Rating			
<b>SO 5</b>	<b>Ensure Operational Effectiveness and Efficiency</b>										
SM 8	Fraud Index	No. of Claims tagged as Potential Fraud / Total Claims Filed	5%	(Actual/Target)x Weight	7%	11% based on Preliminary Report  Revised to 5% upon receipt of Final Report	5.00% <i>Based on revised accomplishment</i>	5%	5.00%	Final Report on Fraud Index Study	Acceptable
SM 9a	Increase in the Percentage of Cases Disposed (Arbitration and Prosecution Department)	Number of Cases disposed (resolved or filed with charges) / Total number of cases	5%	(Actual/Target)x Weight	50% from backlog cases covering October 2020 and earlier  25% from current cases covering received cases from November 2020 to October 2021	<u>Backlog cases:</u> <i>Arbitration:</i> 23.76% (800/3,367) Total Received: 6,734 <i>Prosecution:</i> 100% (4,199/4,102) Total Received: 8,203 <u>Current cases:</u> <i>Arbitration:</i> 36.42% (436/1,197) Total Received: 4,786 <i>Prosecution:</i> 100% (2,038/1,869) Total Received: 7,473	3.26% (0.30+1.25+0.46+1.25)	33.41% (Backlog cases)  20.18% (Current Cases)	1.67% + 2.02% = 3.69%	<ul style="list-style-type: none"> <li>Summary Report from the Prosecution, and Arbitration Departments</li> <li>Position Paper</li> <li>Prosecution, and Arbitration Database</li> <li>Resolutions and Decisions of Prosecution and Arbitration Office</li> </ul>	Acceptable.
SM 9b	Increase in the Percentage of Cases Investigated (FFIED and PROs)	No. of red flagged providers investigated / Total number of red flagged	5%	(Actual/Target)x Weight	50% from backlog cases covering October 2020 and earlier	<u>Backlog cases:</u> <i>FFIED:</i> 100% (423/326) Total Received: 651 <u>Current cases:</u>	5.00% (2.50+2.50)	Unverifiable	0%	<ul style="list-style-type: none"> <li>Excel file database of "Red-Flagged" Health Care Providers (HCPs)</li> <li>Performance</li> </ul>	Date received of the identified red-flagged providers were not properly identified. The GCG could not properly validate whether the

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Objective/ Measure	Formula	Wt.	Rating Scale	Target	Actual	Rating	Actual	Rating			
		providers			25% from current cases covering received cases from November 2020 to October 2021	FFIED: 100% (506/237) Total Received: 947				Report	cases belong to current or backlog.  In addition, it was noted that FFIED reported as accomplishment those cases with no final resolution/conclusion/ decision yet.
<b>SO 6 Strengthen Customer and Partner Relations</b>											
SM 10a	Disposition of Backlog Claims Received from 1995-2020	Number of "In-Process" claims from 1995 to 2020 with dispositive action /Total Number of "In-Process Claims from 1995-2020	5%	(Actual/Target) x Weight 0% = If less than 90%	100%	99% (114,026,316/114,808,843)	4.95%	Unverifiable	0%	<ul style="list-style-type: none"> <li>Summary of Disposition of Backlog Claims received from 1995-2020 as extracted from the PhilHealth Corporate Dashboard</li> <li>Internal Memorandum on the report for the Strategic Objective 6: Strengthen Stakeholder Relation</li> </ul>	The GCG could not establish the veracity and reliability of the data provided due to COA findings related to Claims of PhilHealth.
SM 10b	Percentage of Claims Processed within Applicable Time (Claims received during the year)	Number of claims processed within Applicable Processing Time <sup>4</sup> / Total number of	5%	(Actual/Target) x Weight 0% = If less than 90%	100%	92% (11,613,477/12,598,630)	4.60%	Unverifiable	0%	<ul style="list-style-type: none"> <li>Report/IT advisory on the restoration of the data and system</li> <li>COA Annual Audit Report</li> </ul>	

<sup>4</sup> Applicable processing time subject to compliance with Republic Act No. 7875, as amended by R.A. No. 10606 or Republic Act No. 11032 otherwise known as Ease of Doing Business and Efficient Government Service Delivery (EODB) Act of 2018, whichever is applicable. PhilHealth to seek clarification with the ARTA Authority.



Validation Result of 2020 Performance Scorecard (Annex A)

Component						PhilHealth Submission		GCG Validation		Supporting Documents	Remarks
Objective/ Measure	Formula	Wt.	Rating Scale	Target	Actual	Rating	Actual	Rating			
	claims received										
SM 10c	Percentage of Claims Paid within the Acceptable Time	$\frac{\text{Number of Claims Paid Within the Acceptable Time}^5}{\text{Total Number of Approved Claims}}$	5%	(Actual/Target) x Weight 0% = If less than 90%	100%	86% (5,704,042/6,636,952)	0%	Unverifiable	0%		

<sup>5</sup> Applicable processing time subject to compliance with Republic Act No. 7875, as amended by R.A. No. 10606 or Republic Act No. 11032 otherwise known as Ease of Doing Business and Efficient Government Service Delivery (EODB) Act of 2018, whichever is applicable.

Component						PhilHealth Submission		GCG Validation		Supporting Documents	Remarks
Objective/ Measure	Formula	Wt.	Rating Scale	Target	Actual	Rating	Actual	Rating			
SM 11	Percentage of Social Marketing Communication Plan Implemented (SMCP)	SMC Plans Implemented/ Total SMC Plans	5%	(Actual/Target) x Weight 0% = If less than 85%	100% <sup>6</sup>	1. Intensify marketing and communication channels (97.50%) 2. Boost content creation (100%) 3. Increase Capacity for Feedback Mechanism (100%) 4. Develop Communication Plans and Creative Campaigns (100%) 5. Improve Brand Management (100%)	4.98%	88.89%	4.44%	<ul style="list-style-type: none"> <li>• Audio Video Presentation (AVP)</li> <li>• Flyers</li> <li>• Tarpaulin</li> <li>• Corporate Personnel Orders</li> <li>• After-Event Reports</li> <li>• Memorandum of Agreement/Understanding (MOA/U)</li> <li>• Certifications</li> <li>• Broadcast Scripts</li> <li>• Attendance</li> </ul>	Target not met.
		<b>Sub-Total</b>	<b>40%</b>				<b>32.79%</b>		<b>13.13%</b>		
STRONG FOUNDATION	SO 7	<b>Ensure Organizational Alignment and Workforce Engagement</b>									
	SM 12	Improvement on the Competency Level of the Organization	Competency Baseline <sup>7</sup> 2021 – Competency Baseline 2020	5%	All or Nothing	Improvement on the Competency Level of the Organization based on the	CY2020: 90% CY2021: 85%	5%	5% decrease in the Competency Level.	0%	-HRD Memorandum -Alamin and Kakayahan, Pagbutihin at

<sup>6</sup> Based on the Board-Approved Social Marketing Communication Plan.

<sup>7</sup> The competency baseline of the organization shall pertain to the average percentage of required competencies met which can be computed using the following formula:  
 where: a = Competency required, A = Total number of competencies required of position, b = Personnel profiled, B = Total number of personnel profiled

$$\frac{\sum_{n=1}^B \left[ \frac{a - a - 1 \left( \frac{\text{Actual Competency Level}}{\text{Required Competency Level}} \right)}{a} \right]}{B}$$

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				2020 assessment					Panatilihin (AKaPP) 2021 Result -AKaPP Comparison of CY2019 CY2020 and CY2021 -Corporate Order No. 2016-0094 on the Guidelines on the Conduct of Annual Competency Survey Under PhilHealth's Competency Management Program AKaPP; -Excel file of the computation of the competency level for the year 2020 and 2021 -Samples of accomplished competency assessment surveys.	representations made by PhilHealth in terms of the relationship of productivity and competency level of the employees as well as the current manpower of the organization. However, it is worth to note that the overarching goal of this measure is to respond to the competency-based hiring, retention of competent employees, and efficiency of intervention in closing competency gaps, since these aforementioned areas may affect the increase or decrease in the competency level of this organization.

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SM 13	Percentage of Budget Utilization	Actual Disbursement / DBM approved COB (both net of PS)	5%	All or Nothing	Not lower than 90% but not exceeding 100% of the DBM-approved COB (net of PS)	95.81%  (Note: Using the Proposed Formula of Total Obligation/Total COB)	5%	39.65%	0%	<ul style="list-style-type: none"> <li>• Computation Summary of Disbursement/ COB net of PS</li> <li>• Board Resolutions</li> <li>• Status of Corporate Operating Budget (SCOB)</li> <li>• Statement of Appropriation Allocation Obligation Disbursement and Balances (SAAObDB)</li> </ul>	<p>Target not met.</p> <p>The request to revise the formula is <b>DENIED</b>. It should be noted that the objective of the measure is to ensure the efficient use of the government resources and execution of PhilHealth's function as the fund administrator.</p>
SO 9 Integrated and Optimized Information Systems											
SM 14	Percentage of Systems Enhanced or Developed Based on UHC Policies	No. of Systems Enhanced, Developed, or Implemented / No. of Systems Targeted under the DICT-Approved ISSP	5%	(Actual/Target) x Weight	100% implementation of targets for 2021 reflected in the ISSP as approved by the DICT	100%	5%	100%	5%	<ul style="list-style-type: none"> <li>• 2021 DICT-approved ISSP</li> <li>• Performance Monitoring of the Information System (IS) Based on the ISSP Report</li> <li>• Systems Developed/Enhanced under ISSP Projects Report</li> <li>• Screenshot of ticket status, Acceptance Checklist and</li> </ul>	Acceptable.

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Objective/ Measure	Formula	Wt.	Rating Scale	Target	Actual	Rating	Actual	Rating			
										other documentary forms supporting the accomplishment	
		<b>Sub-Total</b>	<b>15%</b>				<b>15%</b>		<b>5%</b>		
		<b>TOTAL</b>	<b>100%</b>				<b>91.81%</b>		<b>28.07%</b>		

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