

# **Outsourcing** brief

## **Q3 2017**



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## **Revenue Memorandum Order (RMO) No. 17 – 2017: Prescribing Policies and Procedures in Monitoring Compliance of Top Taxpayers in Revenue Regions**

This Order is issued to:

1. Establish a system to monitor and improve compliance of top taxpayers in the Revenue Regions with filing of internal revenue tax returns and payments/remittances and other compliance requirements;
2. Define the scope and coverage of the initial implementation of such monitoring system in terms of taxpayers and Revenue Regions covered; and
3. Create and activate regional teams who shall analyze taxpayers' compliance and recommend measures to be implemented by concerned Revenue District Offices (RDOs).

### **I. SCOPE AND COVERAGE:**

A. The 12 Revenue Regions that contribute the largest share in the total BIR collection shall comprise the offices which will adopt the prescribed monitoring procedures:

- i. Revenue Region No. 1 – Calasiao, Pangasinan

- ii. Revenue Region No. 4 – San Fernando, Pampanga
- iii. Revenue Region No. 5 – Caloocan City
- iv. Revenue Region No. 6 – Manila
- v. Revenue Region No. 7 – Quezon City
- vi. Revenue Region No. 8 – Makati City
- vii. Revenue Region No. 9A – CaBaMiRo
- viii. Revenue Region No. 9B – LaQueMar
- ix. Revenue Region No. 12 – Negros Island Region
- x. Revenue Region No. 13 – Cebu City
- xi. Revenue Region No. 16 – Cagayan de Oro
- xii. Revenue Region No. 19 – Davao City

B. The Top 500 non-individual taxpayers of the said Revenue Regions who satisfy the criteria for Large Taxpayers under Revenue Regulations No. 17-2010, but have not been notified by the Commissioner of the Internal Revenue as such, shall be covered by the Order, except for the following:

1. National Government Agencies (NGAs);
2. Local Government Units (LGUs);
3. Government Owned and Controlled Corporations (GOCCs); and

4. State Universities and Colleges (SUCs).

C. The said top taxpayers who shall be monitored by their respective Regional Offices shall comprise the Medium Taxpayers segment of the BIR.

### **II. NATIONAL AND REGIONAL MONITORING TEAMS**

A. A Regional Monitoring Team shall be created and shall perform the following functions:

1. Monitor tax compliance and analyze drastic changes in the monthly tax payments of taxpayers;
2. Profile taxpayers by sector/industry for benchmarking;
3. Act on preprocessed data (RELIEF, TRS, and BIR-BOC), if available;
4. Analyze tax compliance report card;
5. Provide inputs to be used in formulating strategies to maximize taxpayer compliance;
6. Based on analysis of tax compliance, recommend the conduct of audit and investigation of taxpayers by the concerned RDOs; and

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7. Submit monthly status reports to the National Monitoring Team.

B. A National Monitoring Team shall be created to oversee the performance of Regional Monitoring Teams, conduct a national analysis of taxpayer compliance, and provide specific guidelines on the operations of the regional teams.

C. The National and Regional Monitoring Teams shall be created through the issuance of a Revenue Special Order.

### III. EFFECTIVITY:

This Order shall take effect immediately.

For the full Order, please visit BIR website: [www.bir.gov.ph](http://www.bir.gov.ph)

## RMO No. 18-2017: Prescribing the Policies, Guidelines and Procedures for Tagging/Classifying Inactive Business Taxpayers

### I. OBJECTIVES

This Order is issued to:

1. Define and set criteria in tagging/classifying taxpayers as “Inactive”;
2. Provide policies, guidelines and procedures in handling inactive business taxpayers;
3. Include “Inactive” status in the Integrated Tax System (ITS) under the list of values of taxpayer status;
4. Clean- up the Taxpayer Registration Database to minimize the significant increase of stop filer cases and prevent additional creation of invalid stop filer cases.

### II. DEFINITION OF TERMS

1. Inactive Taxpayers shall have an “Inactive” status and shall be defined as:
  - 1.1. A registered business taxpayer (individuals and non-individuals)

who were identified to have failed to file all of the required internal revenue tax returns for all tax types to which they are registered and to pay taxes due thereon for the last two (2) consecutive years from:

- 1.1.1. the date of the last returns filed;
- 1.1.2. the date of registration to cover the following scenarios:
  - a) with issued TIN and COR only;
  - b) with issued TIN via eREG without COR;
  - c) with issued TIN without COR;
  - d) with issued TIN thru SEC with PSIC “0000” — Unclassified
- 1.2. A taxpayer that has notified the BIR district office of the temporary cessation of its business operations;
- 1.3. Cannot be Located (CBL) Taxpayers — are taxpayers which cannot be located or contacted after the conduct of the ocular inspection/verification/ Tax Compliance Verification Drive (TCVD), or taxpayers that cannot be served Letter Notices, Letters of Authority and Tax Verification Notices due to the

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failure of the concerned Revenue Officers to locate the subject taxpayers after exhausting all possible means to do so.

### III. POLICIES AND GUIDELINES

1. To tag/classify the status of the taxpayer, the registration system shall provide the following list of values:

Table I

| ITS              | ETIS                  |
|------------------|-----------------------|
| Active           | Registered (Active)   |
| Inactive         | Registered (Inactive) |
| Ceased/Dissolved | Deregistered          |
| Cancelled        | Deregistered          |
| Transferred      |                       |

2. All registered taxpayers engaged in trade or business (individual or non-individual) who fall under the definition of Inactive Taxpayers under this Order shall be classified as Inactive Business Taxpayers.

3. Inactive self-employed individuals who are also registered as employees (Mixed-Income Earners) shall not be tagged as “Inactive.”

4. The CRM/POS Permits issued, as well as any unused Official Receipts/Invoices for

which a valid Authority to Print has been previously granted to all Business Taxpayers tagged as Inactive shall be deemed cancelled/invalidated as of date of tagging.

5. In the case of TIN issued to Estate of a Decedent under ONETT, upon full payment of the estate tax by the heirs, administrator or executor, the issued TIN for the Estate shall be tagged as “Inactive”. However, in case of additional properties discovered after paying the estate tax, the TIN previously issued for such Estate shall be updated to “Active” status and shall be tagged as “Inactive” upon full settlement of the tax liabilities of the Estate. In case the decedent’s business is operated by heirs under the “Estate of Decedent,” the TIN shall not be cancelled. It shall be treated as a separate individual taxpayer until closed/liquidated by the heirs in accordance with existing rules and procedures.

6. The National Office Data Center (NODC)/ Revenue Data Centers (RDCs) shall generate the following to be forwarded to concerned district offices:

6.1 Alphabetical list of Inactive Business Taxpayers (Individual and Non-Individual Business Taxpayers) on or before June 30 of the following year or as required by

the concerned Revenue District Office/ Large Taxpayer Division;

7. The concerned Revenue District Officers (RDOs)/Chief, Large Taxpayers Divisions (LTDs) shall validate if the tagging as non-filer of tax returns is not due to unencoded/unuploaded tax returns.

8. All concerned RDOs/Chief, LTDs shall undertake the following necessary verification and validation strategies prior to finality of the list for tagging as inactive taxpayers, as follows:

8.1 Verify if the said tagging of the non-filer of tax returns is not due to un-encoded/un-uploaded tax returns,

8.2 Include in the TCVD operations to confirm its physical existence/nonexistence; and

8.3 Ensure that only qualified registered business taxpayers shall be recommended for tagging as “Inactive” taxpayers.

9. Business taxpayers under the List of Inactive Taxpayers who were found existing and operational will be given a prescribed reminder letter requiring them to respond within five working days upon receipt of the

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said letter. If no response is received from the the RDOs/LTDs shall recommend closure of business and file appropriate criminal/civil charges based on existing rules and regulations.

10. Registered individual business taxpayers who have an erroneous taxpayer type classification during registration must submit a duly notarized affidavit to that effect with their respective RDOs.

11. Permanent closure of business shall be effected only upon the submission of the necessary documents prior to the changing of status from “Inactive” to “Ceased/Dissolved” and resolution/closure of valid “stop-filer” cases.

12. Penalties shall be imposed on taxpayers who failed to file/pay tax returns up to the time of filing the application for closure of business. Taxpayer shall then be required to submit duly accomplished BIR Form 1905 and the necessary requirements for the closure of the business registration.

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necessary requirements for the closure of the business registration.

13. Business taxpayers that would be tagged as “Inactive,” but are determined to have business transactions in the future shall be reactivated to have their status reverted to “Active” and applicable form types and tax types shall be re-opened/registered/encoded.

14. Concerned RDOs/Chief, LTDs shall maintain a List of Inactive and Reactivated Taxpayers.

#### **IV. EFFECTIVITY:**

This Order shall take effect immediately.

For the complete Order, please visit BIR website: [www.bir.gov.ph](http://www.bir.gov.ph)

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## RMC No. 59-2017: Publishes the Daily Minimum Wage Rates in Region X pursuant to Wage Order No. ROX-19 Digest

This Order is issued to publish the new daily minimum wage rates in Region X.

### DAILY MINIMUM WAGE RATE REGION X, Northern Mindanao a/

| Classification    | Non- Agriculture   |                        |                           |          |                      | Agriculture        |                        |                           |          |                      |
|-------------------|--------------------|------------------------|---------------------------|----------|----------------------|--------------------|------------------------|---------------------------|----------|----------------------|
|                   | MWR under WO RX-18 | Increase in Basic Wage | Basic Wage under WO RX-19 | COLA     | MWR upon effectivity | MWR under WO RX-18 | Increase in Basic Wage | Basic Wage under WO RX-19 | COLA     | MWR upon effectivity |
| Wage Category I   | 318.00 Php         | 15.00 Php              | 333.00 Php                | 5.00 Php | 338.00 Php           | 306.00 Php         | 15.00 Php              | 321.00 Php                | 5.00 Php | 326.00 Php           |
| Wage Category II  | 313.00 Php         | 13.00 Php              | 326.00 Php                | 5.00 Php | 331.00 Php           | 301.00 Php         | 13.00 Php              | 314.00 Php                | 5.00 Php | 319.00 Php           |
| Wage Category III | 308.00 Php         | 10.00 Php              | 318.00 Php                | 5.00 Php | 323.00 Php           | 296.00 Php         | 10.00 Php              | 306.00 Php                | 5.00 Php | 311.00 Php           |
| Wage Category IV  | 303.00 Php         | 8.00 Php               | 311.00 Php                | 5.00 Php | 316.00 Php           | 291.00 Php         | 8.00 Php               | 299.00 Php                | 5.00 Php | 304.00 Php           |

## RMC No. 60-2017: Official Launch of the Seal of Honesty Certification (SOH) Program

This Circular is released to announce the official launch of the Seal of Honesty (SOH) Certification Program in partnership with the Center for Strategic Reforms of the Philippines

(CSR Philippines) to promote a culture of honesty and integrity in paying taxes in the country.

In line with the BIR's principal objectives of attaining collection targets, improving taxpayer satisfaction, and protecting revenues by recapturing public trust, taxpayers are given the option to subscribe to the SOH Certification Program to help them improve their voluntary compliance as partners in nation-building upon full satisfaction of the qualification criteria as a basis for entitlement of the benefits.

All taxpayers, both individual or non-individuals, may apply to get SOH Certification, especially the self-employed and professionals; estate/trust/co-ownership regardless of size and industry; and taxpayers regularly monitored by BIR for taxation and administrative compliance.

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The applications shall be submitted to the Evaluation Committee under the Office of the Commissioner of Internal Revenue, to review qualifications.

Individual and non-individual taxpayers who will subscribe to the certification program shall:

- a. Settle all open cases and pending undisputed assessments per Certification of the RDO;
- b. Observe full and honest compliance to all BIR regulations and requirements at all times;
- c. Sign the Integrity Pledge to promote and uphold honesty and integrity in paying taxes, and in dealing with all government agencies, customers, and suppliers without compromises;
- d. Not bribe any BIR personnel/officials;
- e. Increase voluntary compliance by at least 20% in total payments for those who are regularly audited by BIR, based on the level of their compliance.

A duly certified/awarded SOH taxpayer shall be entitled to the following benefits:

- a. Issuance of annual tax clearance, without prejudice to information not available at the time of issuance
- b. Last priority audit
- c. Other privileges that the DTI and other government agencies may also extend to certified honest taxpayers

The validity of the SOH is one year and is renewable every year subject to revalidation of CSR Philippines for approval of the Evaluation Committee under the Office of the Commissioner of Internal Revenue.

Details on how to apply for the SOH are specified in Annex A of the Circular.

To view the entire Circular and the FAQs on the SOH Program, please visit BIR website: [www.bir.gov.ph](http://www.bir.gov.ph)

## **RMC No. 68-2017: Approval of Permit to Use Loose-leaf Books of Accounts/Invoices/Receipts and Other Accounting Records**

The use of Loose-leaf Books of Account/Invoices/Receipts and other Accounting Records is considered as computer-aided under manual recording. Thus, the applications for Permit to Use the said loose-leaf documents should not be filed with the National Accreditation Board.

In line with the “Ease of Doing Business,” processing the application and issuance of the corresponding PTU Loose-Leaf Books of Account/Invoices/Receipts and other Accounting Records shall now be done by the concerned RDO. The requirements for evaluating and approving of the said application by the RDO where the principal office of the taxpayer is registered, remain the same, as follows:

1. Duly accomplished BIR Form No. 1900;
2. Sample Format and print-out to be used;
3. In lieu of the investigation pursuant to RMC No. 13-82, a Sworn Statement specifying the following:

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i. Identifying the books to be used, invoices/receipts, and other accounting records with the serial numbers of principal and supplementary invoices/receipts to be printed;

ii. Commitment to permanently bind the loose-leaf forms within fifteen (15) days after the end of each taxable year or upon the termination of its use.

To view the entire Circular, please visit BIR website: [www.bir.gov.ph](http://www.bir.gov.ph)

The PTU Loose-leaf issued to the taxpayer's Head Office shall cover all identified registered branches and shall be valid in any RDO where the taxpayer has registered branches at the time of issuance (refer to Annex 'A' for the sample PTU).

Updating the PTU shall be required for subsequent additional branches. A certified true copy of the PTU issued by the RDO of the Head Office must be furnished to each branch authorized to use the approved Loose-leaf.

All other circulars and other revenue issuances inconsistent herewith are hereby amended, modified, or revoked accordingly. All BIR officers and employees are enjoined to give the circular as wide a publicity as possible.



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## Circular No 2017-09: The Z Benefits for Premature and Small Newborns

### I. OBJECTIVES

This Circular aims to establish the guiding principles and to define the policies and procedure in delivering quality health service to all women and premature and small newborns under the Z Benefits.

### II. SCOPE

This Circular shall apply to all health care institutions (HCIs) contracted to provide the Z Benefits for premature and small newborns, and other relevant stakeholders involved in implementing the Z benefits.

### III. GUIDING PRINCIPLES

a. The benefit package shall be value-based, such that it addresses the highest disability adjusted life years (DALY) averted, while prioritizing and adopting cost-effective interventions.

b. The benefit package shall contribute to the attainment of universal health coverage and financial risk protection for all members;

c. Eligible members and their dependents can access health services in

government hospitals with no out-of-pocket or with a known co-payment in a private accommodation;

d. The benefit package shall encourage holistic care of the mother-baby dyad with a comprehensive primary to catastrophic approach to patient care in a multidisciplinary setting. This shall facilitate team management and strengthen referral systems within a service delivery network (SDN).

### IV. CODE, DESCRIPTION AND PACKAGE RATES

The following benefits shall be available for pregnant women who are in their 24 to 36 and 6/7 weeks of gestation, at risk of preterm delivery. The packages for preventing preterm delivery are availed exclusive of each other, with or without the coordinated referral and transfer package (Z 016.4).

**Table 1: Z Benefit Package codes, descriptions, and rates for preventing preterm delivery**

| Z CODE         | Description  | Rate (Php) |
|----------------|--|------------|
| <b>z 016.1</b> | Prevention of preterm delivery, with severe pre-eclampsia / eclampsia  | 3,000      |
| <b>z 016.2</b> | Prevention of preterm delivery, with preterm pre-labor rupture of membrane (pPROM)   | 1,500      |
| <b>z 016.3</b> | Prevention of preterm delivery, without pre-eclampsia / eclampsia or rupture of membranes but with labor or vaginal bleeding or multifetal pregnancy | 600        |
| <b>z 016.4</b> | With coordinated referral and transfer from a lower level facility   | 4,000      |

A. The following benefits shall be available for premature newborns who are visually small or very small, 24 weeks to < 37 weeks by fetal aging or 500 g to g fetal weight

**Table 2. Z Benefit package codes, descriptions, and rates for preterm and small newborns (24 weeks to <32 weeks)**

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| Z CODE         | Description  | Rate (Php) |
|----------------|--|------------|
| <b>z 016.5</b> | Essential interventions for 24 weeks to <32 weeks  | 35,000     |
| <b>z 016.6</b> | Essential interventions with minor ventilatory support and Kangaroo Care for 24 weeks to <32 weeks | 85,000     |
| <b>z 016.7</b> | Essential interventions with major ventilatory support and Kangaroo Care for 24 weeks to <32 weeks | 135,000    |

**Table 3. Z Benefit package codes, descriptions, and rates preterm and small (32 weeks to <37 weeks)**

| Z CODE         | Description  | Rate (Php) |
|----------------|--|------------|
| <b>z 016.8</b> | Essential interventions for 32 weeks to < 37 weeks   | 24,000     |
| <b>z 016.9</b> | Essential interventions with mechanical ventilation and Kangaroo Care for 32 weeks to < 37 weeks | 71,000     |

## V. CREATION OF A PATIENT REGISTRY

PhilHealth shall create a patient registry of the Z Benefits for premature and small newborns in collaboration with pertinent stakeholders. The policies and implementing guidelines for this shall be disseminated in a separate issuance.

## VI. CLAIMS FILING AND REIMBURSEMENT

**Table 4. Package code with corresponding amount and filing schedule of the packages for preventing preterm delivery**

| Package Code   | Amount (Php) | Filing Schedule                                      |
|----------------|--------------|--|
| <b>Z 016.1</b> | 3,000        | Within 30 calendar days upon discharge of the mother |
| <b>Z 016.2</b> | 1,500        |  |
| <b>Z 016.3</b> | 600          |  |
| <b>Z 016.4</b> | 4,000        |  |

The packages for the prevention of preterm delivery are availed exclusive of each other, with or without the coordinated referral and transfer package (Z 016.4).

**Table 8. Package code and amount per tranche and filing schedule for preterm and small newborns (24 weeks to <32 weeks)**

| Package Code   | Amount (Php) | Filing Schedule                                    |
|----------------|--------------|--|
| <b>Z 016.5</b> | 35,000       | Within 30 calendar days upon discharge of the baby |
| <b>Z 016.6</b> | 85,000       |  |
| <b>Z 016.7</b> | 135,000      |  |

**Table 9. Package code and amount per tranche and filing schedule for preterm and small newborns (32 weeks to <37 weeks)**

| Package Code   | Amount (Php) | Filing Schedule                                    |
|----------------|--------------|--|
| <b>Z 016.8</b> | 24,000       | Within 30 calendar days upon discharge of the baby |
| <b>Z 016.9</b> | 71,000       |  |

The following are the rules for claims filing and reimbursement:

1. All claims shall be filed by the contracted HCI in behalf of the patients. There shall be no direct filing by PhilHealth members;
2. The package code for the Z benefits for premature and small newborns is ZOI 6;
3. To file a claim for reimbursement, the contracted HCI shall submit the claims application and the following documents to PhilHealth:
  - a. PhilHealth Benefit Eligibility Form (PBEE) printout;
  - b. When the PBEE print-out indicates that the patient is not eligible to avail. of PhilHealth benefits, applicable supporting documents shall be attached, such as certificate of PhilHealth contributions, Claim Form 1, photocopy of official receipt of latest PhilHealth contribution, and updated PhilHealth Member Registration Form (PMRF);

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- c. Photocopy of the Checklist of Eligibility Criteria (Annex "A") submitted to PhilHealth prior to filing of claims;
  - d. Properly accomplished Claim Form 2;
  - e. Checklist of Mandatory and Other Services;
  - f. Photocopy of completely accomplished Z Satisfaction Questionnaire;
  - g. Checklist of Requirements for Reimbursement;
4. Results of diagnostic and laboratory tests are NOT required as attachments to the claims application. However, these documents should be attached to the patient's chart and shall be checked during monitoring;
5. The Z Satisfaction Questionnaire shall be administered to all patients prior to discharge from the contracted HCI. These are validated during monitoring and shall be used as basis of the Corporation for benefits enhancement, policy research, and quality improvement purposes;
6. Rules on late filing of claims shall apply;
7. If the delay in filing of claims is due to

natural calamities, or other fortuitous events, the contracted HCI shall be accorded an extension period of 60 calendar days as stipulated in Section 47 of the Implementing Rules and Regulation (IRR) of the National Health Insurance Act of 2013 (Republic Act No. 7875), as amended by RA No. 9241 and RA No. 10606.

## VII. CONTRACTING

PhilHealth shall engage with capable government and private HCIs, in providing of providing services for the Z benefits for premature and small newborns. The minimum requirements for contracting capable HCIs shall be identified in collaboration with relevant stakeholders. The service packages for mothers in preterm labor can be provided by any Maternity Care Package (MCP)-accredited facility or accredited HCI that provide services for normal vaginal delivery. Thus, no contracting arrangements are necessary for these.

## VIII. POLICY REVIEW

A regular policy review of the Z Benefits for premature and small newborns shall be conducted in collaboration with all relevant stakeholders, experts and technical staff

representatives from the Corporation.

## IX. REPEALING CLAUSE

All provisions of previous issuances that are inconsistent with any provision of this Circular are hereby amended, modified, or repealed accordingly.

## X. EFFECTIVITY

This circular shall take effect after 15 days following the completion of its publication in the Official Gazette or in a newspaper of general circulation, and shall be deposited thereafter at the Office of the National Administrative Register at the, University of the Philippines Law Center.

To view the entire Circular and the list of forms, please visit PhilHealth website: [www.philhealth.gov.ph](http://www.philhealth.gov.ph)

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## **Circular No. 2017-10: Clarification on the Health Insurance Coverage of Poor Families as Indigent Members through the Sin Tax Law**

### **I. RATIONALE**

This Circular is being issued to clarify the existing procedures for the coverage of DSWD, non-DSWD identified poor families, and individuals/families in the informal economy from the lowest segment not included in the lists of Listahanan, 4Ps, and MCCT beneficiaries.

### **II. COVERAGE**

This Circular shall cover LGUs, accredited HCIs, national government agencies (NGAs), non-government organizations (NGOs) and private entities. Also covered by this Circular are LGU-identified poor, hospital-sponsored members, indigent families, and members in the informal economy from the lowest income segment not included in Listahanan, 4Ps, or MCCT lists of beneficiaries.

### **III. GENERAL GUIDELINES**

A. The National Household Targeting Office (NHTO) of the DSWD shall identify poor families, using the National Household Targeting System for Poverty Reduction (NHTS-PR), to be subsidized by the national government for enrolment as Indigent Members to the National Health Insurance Program (NHIP).

B. The NHTO-DSWD shall endorse the List of Listahanan, 4Ps, and MCCT beneficiaries to the PhilHealth Head Office through the Indigent Segment-Non-Formal Sector of the Member Management Group (MMG) to facilitate initial processing prior to enrolment as Indigent Members.

C. The PhilHealth Head Office (HO), through the Information Technology and Management Department (ITMD), shall provide the PhilHealth Regional Offices (PROs) with the script to facilitate extraction of new enrollees and those requiring manual validation. Otherwise, PhilHealth HO shall automatically renew coverage of existing Listahanan, 4Ps, and MCCT beneficiaries.

D. The PROs or Local Health Insurance Offices (LHIOs) shall coordinate with LGUs, accredited HCIs implementing the Point of Care (POC) Enrolment Scheme, NGAs, NGOs, and private entities to submit their list of poor families and individuals in the informal economy from the lowest income segment, using the attached prescribed format for cross-matching with PhilHealth database.

1. The PROs shall cross match the submitted lists with the PhilHealth database to determine the poor families that are already have active coverage or are included in the List of Listahanan, 4Ps, or MCCT beneficiaries. PhilHealth shall provide the endorser of the lists with the result of the cross-matching.
2. The poor families already included in the Listahanan, 4Ps, or MCCT lists of beneficiaries without active coverage shall be enrolled as Indigent Members.

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3. Those without a match in PhilHealth's database and are not included in the list of Listahanan, 4Ps, and MCCT beneficiaries shall be forwarded to MMG through the Indigent Segment for endorsement to the National Household Targeting Office (NHTO) of DSWD for validation.

E. Only those assessed/validated as poor and endorsed by DSWD to PhilHealth shall be enrolled as Indigent Members.

F. The premium contribution of Indigent Members shall be subsidized by the National Government as stipulated in the approved General Appropriations Act (GAA). Currently, the premium contribution per member is Php 2,400 per year, which may be subject for increase as prescribed by PhilHealth based on the result of actuarial study.

G. All Indigent Members and their qualified dependents shall be assigned their PhilHealth Identification Numbers (PINs) and shall be issued PhilHealth Identification Cards (PICs) and Member Data Records (MDRs).

H. The Indigent Members and their

qualified dependents shall be entitled to benefits under All Case Rates in all accredited government and private health care institutions/facilities. However, No Balance Billing (NBB) can only be availed of in accredited DOH-retained and government-owned HCIs.

I. The Indigent Members can also avail of Primary Care Benefits in accredited rural health units (RHUs) or health centers (HCs) where they are assigned and enlisted. The RHUs/HCs shall profile Indigent members and their qualified dependents enlisted in their RHU/HC.

## IV. EFFECTIVITY

This Circular shall take effect immediately. To view the entire Circular, please visit PhilHealth website: [www.philhealth.gov.ph](http://www.philhealth.gov.ph)

## Circular No. 2017-20: IMPLEMENTATION OF AUTO-CREDIT PAYMENT SCHEME (ACPS) TO ALL HEALTH CARE INSTITUTIONS

### I. OBJECTIVE

This policy aims to improve the efficiency of the claim process by automating PhilHealth's payment mechanism with the HCI's banking service providers.

### II. SCOPE

The expanded CPS shall cover all claims coming from HCIs. The ACPS shall not apply to member-filed claims.

### III. GENERAL GUIDELINES

A. All HCIs shall be required to open deposit accounts with local banks authorized to do banking business in the Philippines under the supervision and regulation of the BSP for the PhilHealth auto-credit payment facility. The deposit account/s shall be the destination account into which reimbursements will be credited.

B. HCIs already enrolled under the ACPS with LandBank shall opt to either retain their existing account or open an account with their preferred servicing bank.

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C. For non-LandBank accounts, the RTGS fee shall be paid by the HCI/LGU HCIs.

D. All accredited HCIs shall be required to be ACPS- compliant upon effectivity of this Circular.

E. PhilHealth reimbursements shall be credited through ACPS every Wednesday of the week or the next working day, in case the crediting day falls on a non-working holiday.

F. HCIs shall issue individual Official Receipts (ORs) for every PhilHealth reimbursements credited/paid to their deposit account/s. The OR must indicate the following details:

1. Name of HCI (or Name of LGU, as applicable)
2. Bank account name  
For Government/LGU owned HCI, indicate if for HCI charges or Professional fee designated for pooling
3. Bank account number
4. Benefit Disbursement Voucher Number
5. Net amount received
6. Credit date
7. If Official Receipt (OR) is not printed from Point of Sale, signature in the OR shall be required.

It shall ensure that the ORs are received by PhilHealth within 15 calendar days after the corresponding credit date.

G. HCIs that fail to issue and deliver an OR on or before the deadline shall not receive reimbursements on the credit date after the 15th day.

H. In case there is a valid problem PhilHealth may temporarily revert to check issuance, but only up to such time that the issue has been resolved.

I. The reimbursements of HCI claims shall be governed by relevant policies on benefits, monitoring, and other pertinent issuances of PhilHealth.

J. The HCI shall be subjected to the applicable banking rules and regulations of their partner bank.

## IV. SPECIFIC GUIDELINES

A. Following are the required deposit accounts that shall be opened and maintained with the partner bank/s:

1. Private HCIs - one deposit account only, exclusively for PhilHealth reimbursements. It shall

bear the account name: *{(Name of HCI) for HCI Charges}*

2. Government HCIs - two deposit accounts as trust funds

a) *{(Name of HCI) for HCI Charges}*

b) *{(Name of HCI) for Professional Fee designated for Pooling}*

B. The HCI shall submit the following to its respective PRO upon opening the bank account/s:

1. Duly accomplished outaccomplished and signed Notice of ACPS Compliance — Annex A, B, and C for private, government, and LGU- owned HCI, respectively.
2. Bank Certification, duly signed by the Branch Manager, from where the deposit account is opened.

C. The respective PRO shall email the HCI their respective bank information, to which the latter shall reply to affirm correctness of details.

D. HCIs with existing bank accounts with their preferred partner bank need not open

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a new deposit account, as long as item V.A is fulfilled.

E. PhilHealth shall issue an Auto - Credit Payment Notice (ACPN) containing the details/breakdown of the paid claims.

F. The HCI shall be responsible for acquiring a copy of the ACPN from the respective PRO or LHIO.

## **V. SERVICE PROVIDERS FOR ACPS**

A. LandBank shall be the primary service provider for ACPS.

B. In case HCI opts to replace their ACPS servicing bank, they shall notify PhilHealth 15 days before effectivity of the account. HCI shall submit a Notice of Change of Bank Account for ACPS.

## **VI. REPEALING CLAUSE**

This shall amend PhilHealth Circular No. 43 s. 2012 and other related issuances that are inconsistent with this Circular.

## **VII. EFFECTIVITY**

This Circular took effect on September 1, 2017.

To view the full Circular, please visit PhilHealth website: [www.philhealth.gov.ph](http://www.philhealth.gov.ph)

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## **DO No. 178-17: SAFETY AND HEALTH MEASURES FOR WORKERS WHO BY THE NATURE OF THEIR WORK HAVE TO STAND AT WORK**

This Order issues the following guidelines for compliance of all concerned:

### **I. PURPOSE AND COVERAGE**

This Order covers employers or establishments that need to address the occupational health and safety issues and concerns related to wearing high-heeled heeled female shoes and/or standing at work for long periods or frequent walking, such as retail and/or service employees, assembly line workers, teachers, and security personnel.

### **II. OCCUPATIONAL SAFETY AND HEALTH MEASURES FOR WORKERS WHO HAVE TO STAND**

Pursuant to the State policy ensuring the safety and health of women employees, all employers and/or establishments are hereby directed to institute appropriate control measures to address the risks to the safety and health of workers while standing at work or frequently walking.

These measures shall include, among others, the following:

1. Implement rest periods to break or

cut the time spent standing or walking.

2. Install appropriate flooring or mats that will mitigate the impact of frequent walking and prevent fatigue.
3. Provide tables or work surfaces with adjustable heights.
4. Provide readily accessible seats to be used during rest periods or even during working hours, provided that the employees can perform their duties in this position without detriment to efficiency.
5. Implement the use of footwear that is practical and comfortable.

The employers, in construction with the workers, may adopt other measures to address the occupational safety and health concerns of workers.

### **III. REPORTING AND MONITORING**

The covered employers or establishments shall comply and notify DOLE, through the Regional Office that has jurisdiction over the workplace, of the adoption of safety and health measures as required herein within 30 ) days from the effectivity of this Order.

The DOLE Regional Offices shall inspect and monitor the proper and strict implementation of this Department Order.

### **IV. SEPARABILITY CLAUSE**

If any provision of this Order is held invalid or unconstitutional, any other provision not so affected shall continue to be valid and effective.

This Department Order shall become effective 15 days after its publication in a newspaper of general circulation.

For the full version of the Order, please visit DOLE website: [www.dole.gov.ph](http://www.dole.gov.ph)



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We welcome your suggestions and feedback so that the Outsourcing brief may be even more useful to you. Please get in touch with us if you have any comments and if it would help you to have the full text of the materials in the Outsourcing brief.

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