COVID-19

HEALTH BULLETIN

June 29, 2020

Introduction

ActiveLink helps businesses optimize and implement a sustainable benefits program that empowers employees to do more, give more, and live more.

As the pandemic tempers throughout the world, we initiated a health bulletin to share insights and government updates about COVID-19. Our goal is to make sure you get the information you need to anticipate irregularities brought by the coronavirus outbreak.

We will closely monitor the coronavirus crisis to bring you the latest combined information from different medical research institutions, government agencies, and insurance companies. We're here to make your benefits better. Connect with us at inquiries@benefitsmadebetter.com to see how we can help you.

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COVID-19 Update

AS OF JUNE 29, 2020

No. of cases worldwide: 9,962,193[1]
No. of deaths: 498,723 (5%)[1]
Confirmed cases in the Philippines: 36,438[2]
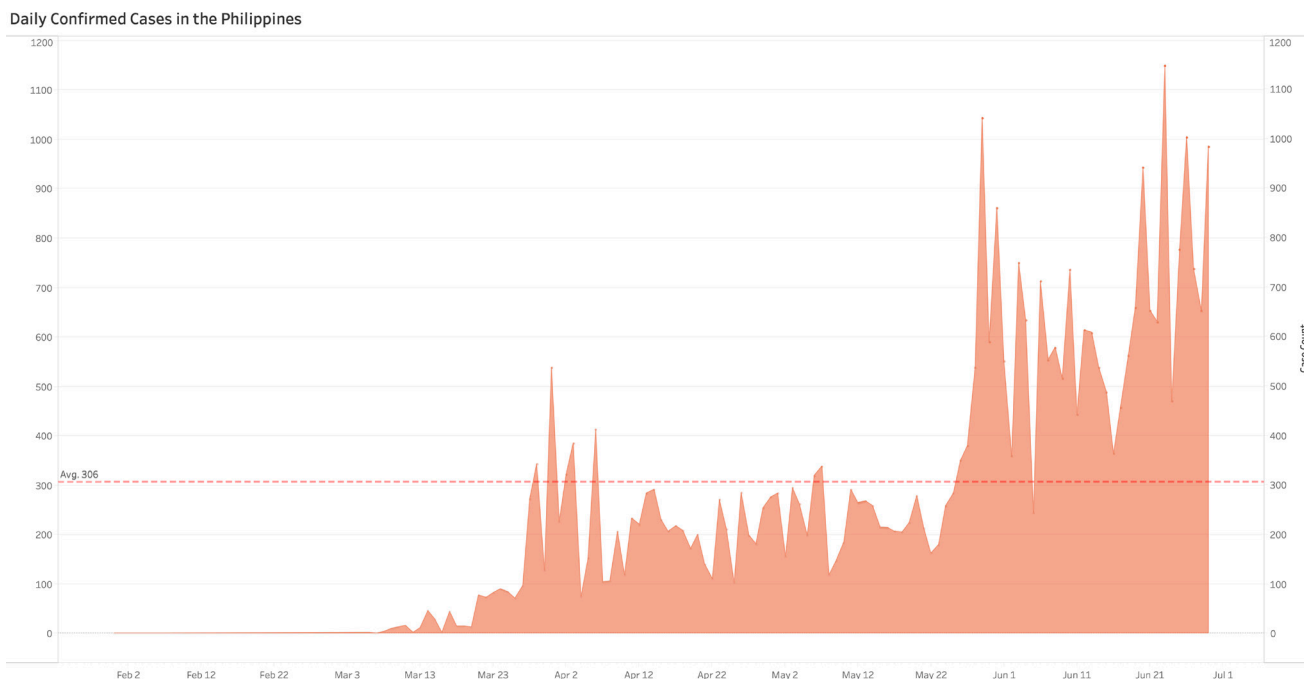
State update on coronavirus outbreak

Figure 1. Trend of daily confirmed COVID-19 cases

According to Johns Hopkins University, the number of coronavirus cases worldwide has surpassed 10 million, and the total death toll reached more than 500,000.

As of June 29, the country's total number of confirmed COVID-19 cases stood at 36,438. Of these cases, 9,956 have recovered and 1,255 have died.

The Department of Health (DOH) said that the spike in the number of infections may be attributed to the ramped-up daily testing capacity of 16,000 tests per day.[3] The DOH's COVID-19 tracker posted 6.9% "positivity rate", or the number of positive cases over total individuals tested. This means that for every 100 individuals tested, at least 6 will test positive for the virus.

Aside from the increased daily testing capacity, the DOH also mentioned that the other reason for the surge in cases is community transmission, or the increasing number of local cases where links cannot be established.

Per DOH, the daily recorded number of confirmed cases in Metro Manila have been decreasing, while other cities and provinces in the country are emerging as the next COVID-19 hotspots.[4]
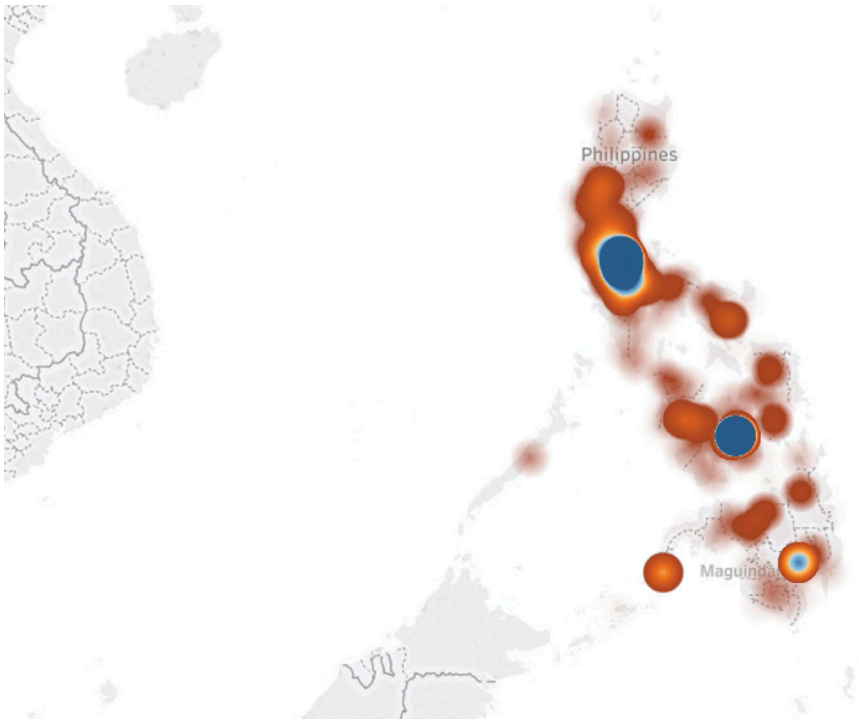
Figure 2. Confirmed COVID-19 cases per region

Cebu City has now the highest confirmed of cases, with 4,562 individuals who tested positive for COVID-19 as of June 28. Quezon City placed second highest, with 3,161 confirmed cases; followed by Manila, with 2,290; the province of Cebu, with 1,036; and Makati City, with 961 confirmed cases.

Local government units are containing the transmission of the virus by zoning of barangays, or placing certain areas under localized lockdowns.

The Department of the Interior and Local Government (DILG) stated that there are 112 localized lockdowns across the country. Of 112 locally quarantined areas, the Cordillera Administrative Region has placed 67 areas under localized lockdown. This encompasses "7 municipalities, 51 barangays, 1 purok, 1 subdivision, 2 buildings, and 5 zones within Mt. Province, Apayao, Kalinga, Ifugao, Abra, Benguet, and Baguio City".[5]

Table 1. Number of localized lockdown areas per region, province, city, as of June 21

LOCATION	NO. OF LOCALIZED QUARATINE AREAS
Cordillera Administrative Region	67
Cebu City	19

National Capital Region	**18**
Parañaque City	9
Quezon City	4
Caloocan City	2
Muntinlupa City	1
Navotas City	1
Malabon City	1
Cagayan de Oro City	**5**
Cavite	**1**
Quezon	**1**
Leyte	**1**

Medical Updates

- Remdesivir is now the first drug recommended in the European Union by health authorities for treating COVID-19. Earlier, it was approved for COVID-19 treatment in Japan.[6]

  In the United States, remdesivir has never been and still is not approved by the US FDA for any use.

  Remdesivir was originally developed for the treatment of Ebola, but studies showed it was not effective for the purpose.[7]

  For COVID-19, clinical trials suggest that when adult COVID-19 patients with lower respiratory tract infection receive remdesivir, they recover faster that those who received placebo.[8] Several other Phase 3 clinical trials are currently being held to evaluate the safety and efficacy of remdesivir for COVID-19 treatment.

  At present, remdesivir has received Emergency Use Authorization in the United States.[9]

- For critically ill patients – and only for critically ill patients – there is data suggesting that another drug, dexamethasone, may help reduce deaths by one-third.

  In other words, if you have 2 groups of an unknown number of COVID-19 patients, then for every 3 people who died in the group that did not receive dexamethasone, only 2 people died in the group that received dexamethasone.

  There is no data to suggest any benefit in using dexamethasone for COVID-19 patients who do not need oxygen support.

What you should do and why

According to the US Centers for Disease Control and Prevention, people who have mild COVID-19 symptoms should stay home, even if COVID-19 infection is confirmed.

If you have employees who test positive for COVID-19, but they only have mild COVID-19 infection, encourage them to get treated at home: get rest, drink plenty of water, and take paracetamol to feel better. Provide them with the contact details of an online healthcare professional, whom they should consult before taking any medication.

Advise your employees that is only recommended to go to the hospital if they have the following symptoms:

- Persistent pain or pressure in the chest
- New confusion
- Inability to wake up or stay awake
- Bluish lips or face
- Other symptoms that are severe and cause concern for the patient or caregiver

Before going to the hospital, they should consult online with a healthcare professional.

COVID-19 patients should not take public transportation. If possible, provide private transportation such as a company vehicle or a contracted ambulance service for your employees to get to the hospital if they need to go. Do not advise them to take a taxi or use a ride-sharing service such as Grab.[10]

PhilHealth, HMO and group life insurance coverage

HMO Coverage on PPEs

Due to the demand for extra protection for those who are administering healthcare services during the COVID-19 pandemic, ActiveLink reached out to HMO providers to clarify if the personal protective equipment (PPE) used in availments are covered by HMOs. Provided below are the HMO provider's response:

- **PhilCare** will cover PPE charges for outpatient, inpatient, and emergency cases, provided that the PPEs were utilized by COVID-19 patients or individuals who are probable or suspected with COVID-19. Otherwise, all PPEs utilized for non–COVID-19–related cases are not covered and become miscellaneous items, since PPEs are not medically necessary in such conditions. (As of June 15, 2020)

- **Intellicare and Avega** will cover PPE charges for inpatient and emergency cases only for COVID-19 and related cases only. PPEs used for non–COVID-19 cases will not be covered and may be charged to the patient. (As of June 17, 2020)

- **Etiqa** will cover PPE charges for emergency and inpatient availments on COVID-19 and related cases only, subject to the usual coordination of benefits, limits of the plan, and applicable PhilHealth coverage. PPEs used for outpatient and diagnostic services may be charged to the patient, depending on the existing policy of the healthcare plan. (As of June 17, 2020)

- **Maxicare** mentions that some hospitals and clinics may charge additional fees for services or items that are not covered by Maxicare, such as:
  - Requiring members to undergo COVID-19 testing prior to consultation
  - Charging the costs of PPE to patients

  While it is possible that these extra measures adhere to the clinic or hospital's safety protocols, the additional costs will not be reimbursed by Maxicare, because these deviate from the testing protocol prescribed by the Department of Health (DOH) and are not part of Maxicare's coverage. (As of June 25, 2020)

PhilHealth and HMO coverage for COVID-19 cases

The Philippine Health Insurance Corporation (PhilHealth) will shoulder the cost of treatment for patients with COVID-19 based on a case-rate package, including COVID-19 testing.

The state-run insurance agency has also clarified that patients may use their health insurance coverage and mandatory discounts, such as senior citizen and PWD discounts, to help substantially cover the cost of treatment.

As of May 15, the following HMO providers and healthcare administrator confirmed that they will continue to cover availments related to COVID-19, based on the allowable limit of the member's policy:
- Intellicare
- Maxicare
- Avega
- PhilCare
- Cocolife
- Etiqa

HMO providers will only cover availments in accredited hospitals. Meanwhile, availments in government-owned hospitals are not covered, and reimbursement claims are subjected for approval.

These group life insurance providers will also cover loss of life due to COVID-19, as of April 17:
- Manulife Philippines
- Etiqa
- Generali

Please take note that the above provisions are based on the notification sent by HMO, medical insurance and group life insurance providers, which are subject to change without prior notice.

Meanwhile, HMO providers are operating with a skeletal workforce; hence, members may experience delay in contacting their HMO providers' call center hotlines.

1. **Maxicare**
   Customer Care Hotlines: (02) 8582-1900, (02) 7798-7777
   Provincial Toll-Free Hotline: 1-800-10-582-1900 (PLDT), 1-800-8-582-1900 (Globe)
   Online Member Gateway for LOA issuances: membergateway.maxicare.com.ph

   All Maxicare Helpdesks are temporarily closed, while some primary care centers are open from Monday to Sunday, 7 AM to 7 PM.

2. **Intellicare**
   24/7 Call Center Hotline: (02) 7902-3400, (02) 8789-4000

3. **PhilCare**
   Customer Service: (02) 8462-1800
   COVID Care Helpline: (02) 8462-1818

4. **Etiqa (formerly AsianLife)**
   Primary care centers are closed until further notice. For urgent medical availments, members may call the following:
   Medical Information Center Hotline: (02) 8895-3308
   Provincial Toll-Free Hotline: 1-800-10-8895-3308 (PLDT)
   Mobile No.: 0917-5208919, 0908-8834901

   Email: mic@etiqa.com.ph (for Certification of Coverage and LOA issuances)

5. **Cocolife**
   Landline: (02) 8812-9090, (02) 8396-9000
   SMS: 0917-622-COCO
   Call: 0917-5360962 (Globe), 0908-8947763 (Smart), 0922-8928828 (Sun)

Hospital Network

Emergency cases during the COVID-19 pandemic

It was recently reported that some hospitals have refused patients despite their being emergency cases. Here are some pointers to prevent this from happening to you:

1. For non–COVID-19 cases, avoid bringing the patient to a COVID-19 referral hospital.
2. For probable or suspected COVID-19 cases, inform your Barangay Health Emergency Response Team (BHERT) so that they can assist you in transporting the patient to the nearest hospital. Don't forget to also get in touch with your HMO provider for proper handling and coordination of benefits.

As of April 17, 2020, these hospitals are **at full capacity** and can no longer admit patients who are positive with COVID-19:

1. St. Luke's Medical Center – BGC and Quezon City
   (outpatient COVID-19 testing can be accommodated)
2. The Medical City
3. Makati Medical Center
4. Asian Hospital Medical Center
5. Chinese General Hospital and Medical Center
6. Victor R. Potenciano Medical Center
7. De Los Santos Medical Center
8. Capitol Medical Center
9. United Doctors Medical Center
10. De La Salle University Medical Center
11. Our Lady of the Pillar Medical Center
12. Medical Center Imus
13. Bautista Hospital
14. De La Salle University - Rodolfo Poblete Memorial Hospital
15. N.L. Villa Memorial Medical Center

Meanwhile, here are some hospitals currently accommodating and handling COVID-19 cases:[11]

NCR

PRIVATE HOSPITAL	ADDRESS	CONTACT NO.
Fatima University Medical Center	20 MacArthur Highway, Valenzuela City	(02) 8291-6538
Cardinal Santos Medical Center	10 Wilson, Greenhills West, San Juan City	(02) 8727-0001
University of the East Ramon Magsaysay Memorial Medical Center	64 Aurora Blvd., Quezon City	(02) 8715-0861
Diliman Doctors Hospital	251 Commonwealth Ave., Matandang Balara, Quezon City	(02) 8883-6900
Manila Doctors Hospital	667 United Nations Ave, Ermita, Manila	(02) 8558-0888
University of Santo Tomas Hospital	España Blvd., Sampaloc, Manila	(02) 8731-3001
Our Lady of Lourdes Hospital	46 P. Sanchez Street, Sta. Mesa, Manila	(02) 8716-8001 to 20
Adventist Medical Center – Manila	1975 Donada cor. San Juan St., Pasay City	(02) 8525-9191
San Juan de Dios Education Foundation, Inc. Hospital	Service Rd, 2772 Roxas Blvd., Pasay City	(02) 8831-9731 to 36, 02) 8831 5641
Veterans Memorial Medical Center	North Ave., Diliman, Quezon City	(02) 8927-6426
Metropolitan Medical Center	1357 G. Masangkay St. Sta. Cruz, Manila	(02) 8863-2500, (02) 8254-1111
Medical Center Manila (ManilaMed)	850 United Nations Avenue, Ermita, Manila	(02) 8523-8131
St. Clare's Medical Center	1838 Dian St. cor. Boyle St., Makati	(02) 8831-6511
Fe Del Mundo Medical Center	11 Banawe St., Brgy. Doña Josefa, Quezon City	(02) 8712-0845 to 50, (02) 8712-2552 to 53, (02) 8732-7103
FEU – Dr. Nicanor Reyes Medical Foundation	Regalado Ave. cor. Dahlia St., West Fairview, Quezon City	(02) 8983-8338
New Era General Hospital	Commonwealth Ave, New Era, Quezon City	(02) 8932-7387
Alabang Medical Clinic	297 Montillano St., Alabang, Muntinlupa City	(02) 8842-0680 0917-7123400 0933-851 4427
Las Piñas Doctors Hospital	8009 CAA Rd., Pulanglupa II, Las Piñas	(02) 8825-5236, (02) 8825-5293

Outside NCR

PRIVATE HOSPITAL	ADDRESS	CONTACT NO.
Qualimed - Sta. Rosa Hospital	W, E Nature Ave., Santa Rosa City, Laguna	(049) 303-0000
Our Lady of Mt. Carmel Medical Center	Km.78 McArthur Highway Brgy. Saguin, San Fernando, Pampanga	(045) 435-2420
Bataan St. Joseph Hospital and Medical Center	151 Don Manuel Banzon Avenue, City of Balanga, Bataan	(047) 237-0226
Urdaneta Sacred Heart Hospital	15 MacArthur Highway, Urdaneta, Pangasinan	(075) 656-2296
Ace Dumaguete Doctors, Inc.	Claytown Road, Dumaguete City, Negros Oriental	(035) 523-5957
Daniel O. Mercado Medical Center	1 Pres. Laurel Highway, Tanauan City, Batangas	(043) 778-1810, (043) 405-1000
Dr. Pablo O Torre Memorial Hospital	BS Aquino Dr, Bacolod, Negros Occidental,	(034) 433-7331
Clinica Antipolo Hospital and Wellness Center	L. Suumulong Memorial Circle., Antipolo City	(02) 8695-9486
Divine Grace Medical Center	Antero Soriano Highway, General Trias, Cavite	(046) 482-6888
Nueva Ecija Doctors Hospital	AH 26, Cabanatuan City, Nueva Ecija	(044) 960-5500
Perpetual Help Medical Center-Binan	National Highway, Sto. Nino, Binan City, Laguna	(049) 531-4475
San Pedro Calungsod Medical Center	Kalayaan Rd. Kawit, Cavite	(046) 484-3112
The Medical City South Luzon	L. United Blvd., Santa Rosa City, Laguna	(049) 544-0120
The Medical City Iloilo	Locsin St. Molo, Iloilo City	(033) 500-1000
Angono Medics Hospital	Rainbow Village 1, Quezon Ave., Brgy. San Isidro, Angono, Rizal	(032) 451-1996
Batangas Health Care Hospital Jesus of Nazareth	Gov. Antonio Rd., Batangas City	(043) 723-4144
Binakayan Hospsital and Medical Center	179 Covelandia Rd. Balsahan-Bisita, Kawit, Cavite	(046) 516-0500
Binangonan Lakeview Hospital	193 Manila East Rd., Binangonan, Rizal	(02) 8570-0791
Cavite Medical Center	Manila-Cavite Rd., Dalahican, Cavite City	(046) 431-9988

Please contact your HMO provider or log in to your Benefits Made Better (www.benefitsmadebetter.com) account to know if these facilities are accredited by your HMO provider.

Government Guidelines and Instructions

PhilHealth's benefits package for COVID-19 testing using RT-PCR
PhilHealth revised the benefits package for COVID-19 testing using RT-PCR machines:[12]

Benefits availment

1. The benefits package shall cover all PhilHealth members who were tested for SARS-CoV-2 using RT-PCR, provided that the conducted tests adhere to the DOH guidelines for expanded testing, and the laboratories are DOH licensed and PhilHealth accredited.

2. Non-members are automatically covered, provided that they complete the member registration upon availment of the benefits package. During the state of national emergency, the Case Investigation Form (CIF), which is required for claims filing and reimbursement, shall serve as the basis for the PhilHealth Identification number (PIN) assignment, provided that the CIF includes a contact number for validation and verification. The submission of requirements such as PhilHealth Member Registration Form (PMRF) and PIN assignment shall resume upon the lifting of the national emergency.

3. The single period of confinement and 45 days annual benefit limit will not be applied in this benefit package.

4. Accredited testing laboratories are required to have an electronic health record of all patients who underwent the SARS-CoV-2 testing using RT-PCR. If this is not available, a manual record shall be accepted during the state of national emergency.

5. The benefit package covers the following services or minimum standards:
    a. Screening/clinical assessment
    b. Specimen collection
    c. Specimen handling
    d. Conduct of RT-PCR testing, including the test kit and other supplies
    e. Analysis and reporting of results

6. For all eligible PhilHealth members, SARS-CoV-2 testing shall not be charged co-payment for these services included in the package.

7. Package rate for SARS-CoV-2 testing using RT-PCR:

Condition for payment	Services covered by PhilHealth	Package amount
All services and supplies for the testing are procured and provided by the testing laboratory	Complete service or minimum standards	Php 3,409
Test kits are donated to the testing laboratory	Screening or clinical assessment, specimen collection and handling, conduct of RT-PCR testing, and analyzing of result	Php 2,077
Test kits are donated to the testing laboratory; cost of running the laboratory, and the RT-PCR machine for testing are subsidized by the government	Screening or clinical assessment, specimen collection and handling	Php 901

8. PhilHealth shall pay the package amount directly to the testing laboratory.

9. The testing laboratory shall be responsible for the reimbursement of the swabbing centers or referring facilities who handled the screening, specimen collection, and handling.

10. The benefit package shall be updated as needed to reflect current protocols and standards, including significant changes in market prices of supplies and commodities, among others, in collaboration with relevant institutions, experts, and stakeholders.

Claims filing and reimbursement
1. All claims for SARS-CoV-2 testing shall be filed through the PhilHealth-certified electronic system. While the system is not yet fully functional, submission of claims via electronic media (e.g., compact disk [CD], hard drive, flash drive) shall be allowed.

2. Subject to the requirements for claims filing, all claims shall be filed by the accredited laboratories. Only rendered services from February 1 to April 14, 2020, are reimbursable.

3. Members may be reimbursed for the amount not exceeding the corresponding benefit package, if the benefit was not availed or was not deducted from the actual charges, provided that requirements are complied with.

4. The basis for the payment of claims shall be the package code for the specific testing package availed, which shall be indicated in the SARS-CoV-2 Claims Summary Form. All claims shall be subject to monitoring and post-audit.

5. Claims applications for this benefit package shall be filed separately from other COVID-19 claims. These include claims for test done on patients admitted in PhilHealth-accredited healthcare providers (HCPs) with licensed testing laboratories.

6. The following are required documents for the filing of claims:
   a. Accomplished SARS-CoV-2 Claims Summary Form, preferably in XLS, XLSX, or CSV format
   b. Scanned copy of the properly accomplished CIF prescribed by the DOH, preferably in PDF format
   c. Itemized billing statement, which includes the reader's fees, preferably in XLS, XLSX, or CSV format
   d. For directly filed claims, the original copy of the official receipt and waiver issued by the licensed laboratory indicating that the member paid full amount for the testing and that no PhilHealth deductions were credited

   The Claims Signature Form (CSF); Claim Forms 1, 2, 3, 4; and summarized statement of account (SOA) are not required.

7. All claims applications shall have complete attachments as required in this policy. Claims with incomplete attachments shall be returned to the testing laboratory/ HCP, following the existing rule on Return to Sender (RTS).

8. All claims shall be filed within 60 calendar days from the date of the test. If the delay in filing is due to natural calamities or other fortuitous events, 120 calendar days shall be accorded.

9. PhilHealth shall reimburse for repeated tests as prescribed in the DOH guidelines. Dates of repeat tests should be indicated in the SARS-CoV-2 Claims Summary Form.

10. Rules on late filing shall apply.

11. Claims applications shall be processed by PhilHealth within the prescribed period for claims processing, provided that all requirements are complied with.

References:

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