



REPUBLIKA NG PILIPINAS  
SANGGUNIANG PANLUNGSOD  
LUNGSOD NG ORMOC



EXCERPT FROM THE MINUTES OF THE REGULAR SESSION OF THE  
THIRTEENTH SANGGUNIANG PANLUNGSOD NG ORMOC HELD  
AT THE SANGGUNIANG PANLUNGSOD SESSION HALL,  
ORMOC CITY HALL BUILDING  
ON FEBRUARY 11, 2016

PRESENT:

Hon. Leo Carmelo L. Locsin, Jr.	Vice Mayor & Presiding Officer
Hon. Rolando M. Villasencio,	SP Member, Majority Floor Leader
Hon. Tomas R. Serafica,	SP Member, Asst. Majority Floor Leader
Hon. Mario M. Rodriguez	SP Member, Presiding Officer "Pro-Tempore"
Hon. Ruben R. Capahi,	SP Member, Asst. Minority Floor Leader
Hon. Benjamin S. Pongos, Jr.,	SP Member
Hon. Antonio M. Codilla,	SP Member
Hon. Vincent L. Rama,	SP Member
Hon. Eusebio Gerardo S. Penserga,	SP Member
Hon. John Eulalio Nepomuceno O. Aparis II,	SP Member
Hon. Mariano Y. Corro,	Ex-Officio SP Member

Chapter President, Liga ng mga Barangay ng Ormoc

ON OFFICIAL BUSINESS:

Hon. Pedro Godiardo P. Ebcas, (Acting City Mayor), SP Member

PREFATORY STATEMENT

Whereas, Article II, Section 15 of the Philippine Constitution, states that the "State shall protect and promote the right to Health of the People and to instill health consciousness among them", and Article XIII, Section II farther states that "The State shall adopt an integrated and comprehensive approach to health development which shall endeavor to make essential goods, health and other social services available to all people at affordable cost".

Whereas, it is embodied in the same Philippine Constitution that "There shall be priority for the needs of the underprivileged, sick, disabled, women and children".

Whereas, Section 17 of RA 9710, otherwise known as "The Magna Carta of Women", calls for "Women's Right to Health" stating that "The State shall, at all times, provide for a comprehensive, culture-sensitive and gender-responsive health services and programs covering all stages of a woman's cycle and which addresses the major causes of women's mortality and morbidity".

Whereas, the Millennium Development Goals as set by the United Nations during the Millennium Summit of September 2000, to which our country is a signatory, calls for, among its goals, Goal # 4 'To reduce infant mortality' and Goal # 5 'To improve maternal health' by 2015, goals which could only be achieved by encouraging behavioral change in pregnant women for the purpose of attaining safe delivery by increasing facility-based deliveries.



Whereas, Section 6 of our City Ordinance # 159 otherwise known as "The Ormoc City Maternity and Newborn Care Ordinance of 2010" states that "Hilots whether trained or untrained, or any individual for that matter, are hereby prohibited from performing live birth deliveries at home", thus dramatically increasing our facility-based deliveries from a low of 3,078 facility-based deliveries in 2010 to a high of 4,109 facility-based deliveries in 2015 and decreasing our home deliveries from a high of 1,594 home deliveries in 2010 to a low of 212 home deliveries in 2015 though this is still far from our goal of "ZERO home deliveries".

Whereas, PhilHealth has come up with a performance-based incentive program designed to promote safety of mother and child during pregnancy, delivery and post-natal period by encouraging pregnant women to give birth at the City District Health Center Birthing Facilities under the care of our skilled birth attendants who are duly accredited health professionals.

Wherefore, on motion of the Honorable SP Member Mario M. Rodriguez, Chairman, Committee on Health and Sanitation, severally seconded by the Honorable SP Members Tomas R. Serafica, Ruben R. Capahi, Antonio M. Codilla, Pedro Godiardo P. Ebcas, Eusebio Gerardo S. Penserga, John Eulalio Nepomuceno O. Aparis II and Mariano Y. Corro, be it resolved, to pass and enact:

*ORDINANCE NO. 022*

*AN ORDINANCE IMPLEMENTING THE MATERNAL CARE INCENTIVE PROGRAM (MCIP).*

Be it ordained by the THIRTEENTH SANGGUNIANG PANLUNGSOD NG ORMOC in session assembled, That:

**SECTION 1. DEFINITION OF TERMS.** As used in this Ordinance, the following definition of terms shall apply:

1. **Maternal Care Incentive Program (MCIP)** - a performance-based incentive program designed to promote safety of mother and child during pregnancy, delivery and post natal period. The herein incentive scheme shall encourage pregnant women to give birth at the City District Health Center Birthing Facilities.
2. **Maternity Care Package (MCP)** - refers to the PhilHealth benefits to accredited non-hospital birthing facilities for the following services: prenatal, delivery, postpartum care and family planning.
3. **Pregnant mother** - refers to pregnant women who are PhilHealth members and qualified to receive the cash incentive under the MCIP.
4. **PhilHealth** - is a government-owned and controlled corporation mandated to administer the National Health Insurance Program (NHIP).
5. **Maternal Death** - defined by the World Health Organization as "the death of a woman while pregnant or within 42 days of termination of pregnancy, irrespective of the duration and the site of pregnancy, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes"



6. **Neonatal death** – defined by the World Health Organization as number of deaths during the first 28 completed days of life per 1,000 live births in a given year or period. Neonatal deaths maybe subdivided into early neonatal deaths, occurring during the first seven days of life, and late neonatal deaths, occurring after the seventh day but before the 28<sup>th</sup> completed days of life.
7. **Facility-Based Deliveries** – refers to birth deliveries duly attended by a Skilled Birth Attendant in a duly accredited and/or licensed health facility by an appropriate governmental regulatory body (e.g. PhilHealth, Department of Health).
8. **Birthing Facilities** – refers to health facilities of Ormoc City duly accredited by PhilHealth to render Normal (Uncomplicated) vaginal deliveries and Newborn screening services such as the District Health Centers and Barangay Health Stations.
9. **Home deliveries** – any birth deliveries other than health facility based delivery.
10. **Skilled Birth Attendant** – according to the World Health Organization (WHO), this refers to “an accredited health professional such as midwife, doctor or nurse who has been formally educated and trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies, childbirth and the immediate post natal period, and in the identification, management and referral of complications in women and newborns. Traditional birth attendants (TBAs) either trained or untrained are excluded from the category of Skilled Birth Attendants.
11. **Health Worker Volunteer (HWVs)** – refers to the community health volunteers such as Barangay Health Workers (BHWs), Barangay Nutrition Scholar (BNS) and Traditional Birth Attendants (TBAs) who provide support and assistance to expectant mother and their newborns before, during and after delivery in the birthing facility.
12. **Normal (Uncomplicated) Delivery** – birth characterized by spontaneous onset of labor; low risk at the start of labor, throughout labor, and delivery; infant in vertex position; 37-42 weeks of completed pregnancy. Delivery shall include services for ante natal care, actual delivery care, postpartum care and newborn care.
13. **Basic Emergency Obstetrical and Newborn Care (BEmONC)** – the elements of obstetric & newborn care that relates to the management of pregnancy, child birth (delivery), the postpartum and newborn period; early detection and treatment of problem pregnancies to prevent progression to an emergency; and management of complications such as hemorrhage, obstructed labor, pre-eclampsia/eclampsia, infection, asphyxia and hypothermia.



14. **No Balance Billing Policy** – shall mean that no other fees or expenses shall be charged or paid for by the PhilHealth patient-member/dependent under the Sponsored Program, above and beyond the packaged rates.

**SECTION 2. BENEFICIARIES.**

1. The MCIP shall cover all pregnant mother who are PhilHealth members, eligible to avail the Maternity Care Package upon availment of *four prenatal visits as defined by the Department of Health (1 visit at 0-84 days Age of Gestation (AOG), 1 visit at 85-189 days AOG and 2 visits at 190 days and above AOG), delivery and postpartum care (1 postpartum visit within 24 hours after delivery and 1 postpartum visit within 7days after delivery) from PhilHealth accredited District Health Center/MCP Birthing Facility of LGU Ormoc City; and*
2. Health Worker Volunteers (HWVs).

**SECTION 3. AMOUNT AND PAYMENT OF CASH INCENTIVE.**

1. A mother shall receive a total cash incentive of P1, 200 upon availment of four prenatal visits, delivery, and postpartum care from a PhilHealth accredited District Health Center/MCP Birthing facility of LGU Ormoc City. This incentive will be used to cover/reimburse her expenses on transportation, communication, supply and food during her stay in the health facility. It shall be released once the pregnant woman has delivered the baby on the following distribution:

Maternal Care Services	Payment	Expenses paid for
1 <sup>st</sup> Antenatal care	P 300.00	Transportation, Communication, and Food
2 <sup>nd</sup> ANC	100.00	Transportation, Communication, and Food
3 <sup>rd</sup> ANC	100.00	Transportation, Communication, and Food
4 <sup>th</sup> ANC	100.00	Transportation, Communication, and Food
Delivery	400.00	Transportation, Communication, and Food and Delivery Kit to include thermometer, baby clothes and sanitary napkins for mother
Postpartum Care	200.00	Transportation, Communication, and Food
<b>TOTAL</b>	<b>1,200.00</b>	

2. A health Worker Volunteer (HWV) shall receive a cash incentive of P800.00 for every pregnant mother referred to the health facility. It shall be released to the HWV after the pregnant mother has delivered according to the following distribution:

Maternal Care Services	Payment	Expenses Paid for
1 <sup>st</sup> Antenatal care	200.00	Transportation, Communication, and Food
2 <sup>nd</sup> ANC	100.00	Transportation, Communication
3 <sup>rd</sup> ANC	100.00	Transportation, Communication
4 <sup>th</sup> ANC	100.00	Transportation, Communication
Delivery	200.00	Transportation, Communication, and Food
Postpartum Care	100.00	Transportation, Communication, and Food
<b>TOTAL</b>	<b>800.00</b>	

#### **SECTION 4. UNDERTAKINGS OF BENEFICIARIES.**

- The pregnant mother shall perform the following:
  - Avail four antenatal visits to the health facility prior to delivery.
  - Deliver in the health facility.
  - Avail of two postpartum care visits
- The HWV shall keep track of pregnant mothers in her catchment area, counsel and facilitate their enrollment to PhilHealth, to wit:
  - Track all pregnant and postpartum mothers in their respective areas and report/assign the same to the health facility for antenatal, natal and postpartum care.
  - Facilitate enrollment of pregnant mothers to PhilHealth.
  - Counsel the pregnant woman and encourage delivery in health facility.
  - Orient women about PhilHealth benefits and Maternal Care Incentives Program.
  - Monitor Compliance of antenatal visits and other maternal care services.
  - Encourage postnatal visit within 7 days of delivery to track mother's health and counsel for breastfeeding and family planning.



**SECTION 5. PROCESS FLOW AT THE HEALTH FACILITY.** The Rural Health Unit/Birthing Facility of LGU shall do the following

1. Tracking Mothers – The Existing tracking tools of the LGU facility shall be used in order to track pregnant mothers in the community. The HWVs shall assist the facility in tracking the pregnant mothers in the community.
2. Assignment of Mothers – The HWVs shall assign mothers to a facility. Once the HWV found out the mother is a PhilHealth member, she shall facilitate the assignment of such mother to a health-facility, however, if the mother is not a PhilHealth member yet, she shall facilitate her PhilHealth enrolment prior to assignment.
3. Orientation of pregnant mothers – The HWVs shall orient the pregnant mothers on the MCP and their PhilHealth benefits as PhilHealth members.
4. Identification of pregnant mothers as PhilHealth members – the PhilHealth Link shall be tapped to identify the PhilHealth membership of mothers or a Master list from PhilHealth shall be used to guide the health facility in verifying the PhilHealth status of mothers. A pregnant mother shall be a PhilHealth member to be included as beneficiary of this project. A non-member shall be enrolled by the LGU if found to be an indigent or as self-employed for income earner.
5. Performance of Obligations – the pregnant mothers shall have regular visit to the health facility based on the schedule set by the midwife or nurse. The availment of the services shall be reflected on the existing health records of the health facility such as the Target Client List and individual health record.
6. Payment of Incentives – The pregnant mother and her HWV shall sign on the payroll reflecting the amount of cash incentive received, once payment is accepted.
7. Filing of MCP and NCP Claims – The District Medical Officer shall prepare, process and submit within thirty (30) days from date of discharge, the claim documents of qualified PhilHealth patients to the nearest PhilHealth offices.

**SECTION 6. SOURCE OF FUND.**

1. The MCIP financial incentive scheme shall be fully funded from the Maternal Care Incentive Program benefits.
2. A trust fund for the MCIP shall be set-up by the LGU and be administered by the City Health Officer, subject to the usual accounting and auditing rules and regulations.



**SECTION 7. PROCESSING OF THE MCIP PAYMENT.**

1. The LGU health facility shall establish a monitoring system to continuously monitor the activities and payments of pregnant mothers and HWVs under the MCIP.
2. The payment shall be made after the mother has completed the postpartum care one week after delivery.
3. The District Health/Birthing Center must submit the names of the mothers/beneficiaries for the month with the necessary supporting documents to the Administrative Office of City Health Department.
4. The payment shall be done thru a payroll which shall be prepared at the end of the month to be prepared by the City Health Department Administrative Office.
5. The payroll should be attached with the following documents from the claimant: Prenatal, delivery and postpartum care records signed by the medical officer/nurse/midwife.

**SECTION 8. MONITORING TOOLS.** The following monitoring tool shall be used to properly document the MCIP:

1. MCIP Operation Report is a document used to monitor the cash incentive releases of mothers and her HWV. It shall reflect the updated cash payments to the beneficiaries and shall be filed in the facility.
2. The Maternal Care Incentive Program Payroll shall contain the maternal care services rendered and the corresponding payment being made. It shall be accomplished in two (2) copies, as file copy of the facility and as supporting document to the Liquidation.

**SECTION 9. ENROLLMENT OF ALL PREGNANT MOTHERS TO PHILHEALTH.**

1. Pregnant mothers who are indigent and non -PhilHealth members shall be enrolled by the LGU to PhilHealth as mandated by the National Health Insurance Act of 2013 or RA 10606, under Section 29-B which states that, "the annual required premium for the coverage of women about to give birth shall be fully borne by the national government and/or LGUs and/or legislative sponsor which shall be determined through the means testing protocol recognized by the DSWD."
2. Pregnant mothers who are not indigent and are income earner shall enroll to the PhilHealth as Self-Employed members by paying the required premium contributions of three months prior to childbirth.

**SECTION 10. PHILHEALTH BENEFIT FOR PREGNANT MOTHERS.** A pregnant mother shall receive the following benefits as PhilHealth Member:



1. MATERNITY CARE PACKAGE

- 1.1. Pregnant mother registered as PhilHealth members can avail of PhilHealth Maternity Care Package benefit subject to member eligibility requirements: and existing and/or subsequent PhilHealth policies, rule and regulations.
- 1.2 Existing PhilHealth policy on Maternity Care Package benefit has the following payment components, to wit:

Facility Fee (including Professional Fee)	Php 6,500.00
Member's Prenatal Care	1,500.00
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<b>Total</b>	<b>Php 8,000.00</b>

- 1.3 All pregnant mother shall submit themselves to four (4) Antenatal check-ups in the City Birthing Facility. This shall commence from the 1<sup>st</sup> trimester of pregnancy or upon knowledge of existing pregnancy and three (3) subsequent check-ups thereafter before delivery.
- 1.4 All pregnant mother shall undergo routine laboratory test to include complete blood count (CBC), blood typing and urinalysis. Additional medically-necessary test may be as subject to the professional assessment of the attending physician.
- 1.5. Pregnant mothers shall submit themselves to tetanus toxoid immunization.
- 1.6 Pregnant mother on their 9<sup>th</sup> month pregnancy must be watchful for possible sign of labor. They should seek early consultation during labor in order to avoid home deliveries attributed to late notice given to health personnel.
- 1.7 All normal (uncomplicated) vaginal deliveries shall assisted by the skilled birth attendant in a PhilHealth accredited birthing facility.
- 1.8 Postpartum care shall include perennial wound care and counseling/education on breastfeeding nutrition and family planning.
- 1.9 Mothers are encouraged to exclusively breastfeed their babies from birth up to six (6) months of age.
- 1.10 Existing and subsequent PhilHealth policies on Maternity Care Package benefit are hereby deemed incorporated in this issuance.

2. NEW BORN CARE PACKAGE

- 2.1 Newborn registered as dependents of PhilHealth members may avail of the Newborn Care Package subject to member eligibility requirements, and existing and/or subsequent PhilHealth policies, rules and regulation.



2.2 Existing PhilHealth Policy on Newborn Care Package benefit has the following component, to wit:

Facility Fee	Php 550.00
Professional Fee	500.00
Newborn Screening Test	500.00
Newborn Hearing Screening Test	200.00
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TOTAL	Php 1,750.00

- 2.3 Newborn care shall include the following services:
- a. Immediate drying of the newborn;
  - b. Early skin-to-skin contact;
  - c. Non-separation of mother/baby for early breastfeeding initiation;
  - d. Eye prophylaxis;
  - e. Vitamin K administration;
  - f. Weighing of the newborn;
  - g. BCG vaccination;
  - h. Hepatitis B immunization (1<sup>st</sup> dose);
  - i. Newborn Screening Test (NBS);
  - j. Newborn Hearing Test;
- 2.4 Existing and subsequent PhilHealth on Newborn Care Package benefit are hereby deemed incorporated in this issuance.

3. NO BALANCE BILLING (NBB)

No additional charge for the maternal services under the No Balance Billing in PhilHealth accredited health facilities from antenatal care, childbirth, and the postpartum care.

The No Balance Billing (NBB) Policy for sponsored Program members and dependents shall be deemed incorporated in this issuance, subject to the guidelines issued by PhilHealth. The NBB may also be extended to other PhilHealth member categories and their dependents as defined by PhilHealth.

**SECTION 11. EFFECTIVITY.** This Ordinance shall take effect on the day following its publication once in a newspaper of general circulation in Ormoc City, and its posting at conspicuous places in the City Hall of Ormoc for three consecutive weeks, whichever occurs later. (Rule 114 of the RRILGC)

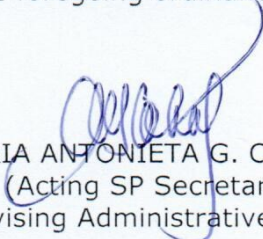
RESOLVED, further to furnish copies of this ordinance each to the Honorable City Mayor Edward C. Codilla; the City Administrator; the City Legal Officer; the City Budget Officer; the City Accountant; the City Treasurer; the City Health Office and other offices concerned;

CARRIED UNANIMOUSLY.







I HEREBY CERTIFY to the correctness of the foregoing ordinance.

  
MARIA ANTONIETA G. CO HAT  
(Acting SP Secretary)  
Supervising Administrative Officer

ATTESTED:

  
LEO CARMELO L. LOCSIN, JR.  
Vice Mayor & Presiding Officer

APPROVED:

  
EDWARD C. CODILLA  
City Mayor

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(Date)