

# **PhilHealth eClaims Implementation Guide**

**Version 3.0**

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## **APPROVAL SHEET**

This document along with its attachments have been approved as the Official Implementation Guide for the Electronic Claims (eClaims) Project.

Following approval of this document, the documents will be distributed to Health Care Institutions and HIS/EMR Service Providers for compliance to the said project

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**Amendment History**

<b>Revision Number</b>	<b>Remarks</b>
20240215	Initial Release

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# INTRODUCTION

The Philippine Health Insurance Corporation (PhilHealth) has been implementing the Electronic Claims (eClaims) System since 2016 for the All Case Rates (ACR) provider payment mechanism. This system was developed to automate the claims process, enabling improved turnaround times for claims processing and reimbursement of providers. Despite notable improvements in the efficiency of claims processing, there exists continued delays in turnaround time, and high numbers of “Return-to-Hospital” claims. These can be mainly attributed to the existence of manual procedures in the claims process, including the adjudication of claims, and the lack of front-end claims data validation mechanisms.

The Universal Health Care Act of 2019 aims to address these issues by mandating PhilHealth to shift to paying providers prospectively using Diagnosis-Related Groups (DRG). A key component of this reform is an enhanced version of the current eClaims system which accommodates the collection of data required for DRG grouping.

This guide is designed to provide in-house hospital developers and service providers essential insights and instructions on how to successfully navigate the electronic claims submission process within the context of the PhilHealth DRG system.

## **Disclaimer:**

All information and content in this material is provided in good faith by Philippine Health Insurance Corporation-Universal Health Care Surge Team (PhilHealth-UHCST), and is based on sources believed to be reliable and accurate at the time of development. The PhilHealth-UHCST, and their respective officers, employees and supervisors, do not accept legal liability or responsibility for the Material, or any consequences arising from its use.

Philippine Health Insurance Corporation (PhilHealth) is committed to ensuring ease of availability at the point of care for all its beneficiaries.

# APPLICATION PROGRAM INTERFACE (API)

The Application Programming Interface (API) of the PhilHealth e-Claims Web Service (PECWS) serves as the primary interface for interactions with PhilHealth's electronic claims processing system. This existing facade API is the gateway through which healthcare institutions and service providers can connect to and communicate with PhilHealth's infrastructure for the purpose of submitting electronic claims.

It acts as the bridge, allowing these entities to send claim-related data and information to PhilHealth, enabling the processing and evaluation of healthcare claims. Through the PECWS API, users can submit data regarding patient information, medical procedures, diagnoses, and other relevant details necessary for the billing and reimbursement of healthcare services.

# WEB SERVICE METHODS

## 1. SearchCaseRate Method

A method that allows the caller to search for the case rate amounts with different applicable periods for target benefit packages.

### HTTP Header Format:

Key	Values
None	

### Input Payload Format

```
{  
  "pUserName": "{Format: ':' + Software Certification ID}",  
  "pUserPassword": "{Leave as blank}",  
  "pHospitalCode": "{The PMCC No. of the Health Facility (HF)}"  
  "pICD": "{The ICD code of the target benefit package}",  
  "pRVS": "{The RVS code of the target benefit package}",  
  "pDescription": "{substring or full text of the name /description of the target benefit packages}",  
  "pTargetDate": "{Format: yyyy-mm-dd. If this parameter has a valid date value (which, normally the admission date),  
this method will return only the record for the applicable period that covers the target date. If blank value is passed to this  
parameter, all the applicable periods of the target benefit packages will be returned}"  
}
```

### Output

This method returns the matching records for the target benefit packages.

### Output Payload DTD

```
<?xml version='1.0' encoding='UTF-8'?>  
<!ELEMENT eCASERATES (CASERATES)*>  
<!ELEMENT CASERATES (AMOUNT)*>  
<!ATTLIST CASERATES  
  pCaseRateCode CDATA #IMPLIED  
  pCaseRateDescription CDATA #IMPLIED  
  pItemCode CDATA #IMPLIED  
  pItemDescription CDATA #IMPLIED  
  pEffectivityDate CDATA #IMPLIED  
  pEffectivityEndDate CDATA #IMPLIED  
>  
<!ELEMENT AMOUNT EMPTY>  
<!ATTLIST AMOUNT  
  pPrimaryProfFee CDATA #IMPLIED  
  pPrimaryHCIFee CDATA #IMPLIED  
  pCheckFacilityMAT CDATA #IMPLIED
```

```
pPrimaryCaseRate CDATA #IMPLIED
pSecondaryHCIFee CDATA #IMPLIED
pSecondaryProfFee CDATA #IMPLIED
pSecondaryCaseRate CDATA #IMPLIED
pCheckFacilityH1 CDATA #IMPLIED
pCheckFacilityH2 CDATA #IMPLIED
pCheckFacilityFSDC CDATA #IMPLIED
pCheckFacilityH3 CDATA #IMPLIED
pCheckFacilityASC CDATA #IMPLIED
pCheckFacilityPCF CDATA #IMPLIED
pCheckFacilityTSEKAP CDATA #IMPLIED
pCheckFacilityABTC CDATA #IMPLIED
pCheckFacilityTBDOTSC CDATA #IMPLIED
pCheckFacilityOPMC CDATA #IMPLIED
pCheckFacilityRHU CDATA #IMPLIED
pCheckFacilityDATRC CDATA #IMPLIED
pCheckFacilityHIVTH CDATA #IMPLIED
pCheckFacilityFPC CDATA #IMPLIED
pCheckFacilityCIU CDATA #IMPLIED
pCheckFacilityDSP CDATA #IMPLIED
pCheckFacilityPCB CDATA #IMPLIED
```

>

### Sample Encrypted Output Payload

```
{
  "docMimeType": "text/xml",
  "hash": "dc8f4d74d977dfe701c0c9bbca0678300540591fac928f71a3841317e7c",
  "key1": "",
  "key2": "",
  "iv": "y1jPMxvQE2aJPVnqqn1pDQ==",
  "doc": "Pms1FWFZT+odAp0qf2zMmroSUR31YgDFnhYeJqBkuhJNMJU5geEN=="
}
```

### Sample Decrypted Output Payload

```
<eCASERATES>
  <CASERATES pCaseRateCode="CR0389" pCaseRateDescription="DIALYSIS PROCEDURE OTHER THAN
HEMODIALYSIS (E.G. PERITONEAL, HEMOFILTRATION)" pItemCode="90945" pItemDescription="DIALYSIS
PROCEDURE OTHER THAN HEMODIALYSIS (E.G. PERITONEAL, HEMOFILTRATION)" pEffectivityDate="09-
15-2015" pEffectivityEndDate="02-13-2024">
    <AMOUNT pPrimaryProfFee="350.0" pPrimaryHCIFee="2250.0" pCheckFacilityMAT="F"
pPrimaryCaseRate="2600.0" pSecondaryHCIFee="0.00" pSecondaryProfFee="0.00"
pSecondaryCaseRate="0.00" pCheckFacilityH1="F" pCheckFacilityH2="F" pCheckFacilityFSDC="F"
pCheckFacilityH3="F" pCheckFacilityASC="F" pCheckFacilityPCF="T" pCheckFacilityTSEKAP="F"
pCheckFacilityABTC="F" pCheckFacilityTBDOTSC="F" pCheckFacilityOPMC="F"
pCheckFacilityRHU="F" pCheckFacilityDATRC="F" pCheckFacilityHIVTH="F" pCheckFacilityFPC="F"
pCheckFacilityCIU="F" pCheckFacilityDSP="F" pCheckFacilityPCB="F" />
  </CASERATES>
  <CASERATES pCaseRateCode="CR0389" pCaseRateDescription="DIALYSIS PROCEDURE OTHER THAN
HEMODIALYSIS (E.G. PERITONEAL, HEMOFILTRATION)" pItemCode="90945" pItemDescription="DIALYSIS
PROCEDURE OTHER THAN HEMODIALYSIS (E.G. PERITONEAL, HEMOFILTRATION)" pEffectivityDate="12-
02-2014" pEffectivityEndDate="09-14-2015">
    <AMOUNT pPrimaryProfFee="500.0" pPrimaryHCIFee="3500.0" pCheckFacilityMAT="F"
pPrimaryCaseRate="4000.0" pSecondaryHCIFee="0.00" pSecondaryProfFee="0.00"
pSecondaryCaseRate="0.00" pCheckFacilityH1="F" pCheckFacilityH2="F" pCheckFacilityFSDC="F"
```

```

pCheckFacilityH3="F" pCheckFacilityASC="F" pCheckFacilityPCF="T" pCheckFacilityTSEKAP="F"
pCheckFacilityABTC="F" pCheckFacilityTBDOTSC="F" pCheckFacilityOPMC="F"
pCheckFacilityRHU="F" pCheckFacilityDATRC="F" pCheckFacilityHIVTH="F" pCheckFacilityFPC="F"
pCheckFacilityCIU="F" pCheckFacilityDSP="F" pCheckFacilityPCB="F" />
</CASERATES>
<CASERATES pCaseRateCode="CR0389" pCaseRateDescription="DIALYSIS PROCEDURE OTHER THAN
HEMODIALYSIS (E.G. PERITONEAL, HEMOFILTRATION)" pItemCode="90945" pItemDescription="DIALYSIS
PROCEDURE OTHER THAN HEMODIALYSIS (E.G. PERITONEAL, HEMOFILTRATION)" pEffectivityDate="01-
01-2014" pEffectivityEndDate="12-01-2014">
<AMOUNT pPrimaryProfFee="500.0" pPrimaryHCIFee="3500.0" pCheckFacilityMAT="F"
pPrimaryCaseRate="4000.0" pSecondaryHCIFee="0.00" pSecondaryProfFee="0.00"
pSecondaryCaseRate="0.00" pCheckFacilityH1="F" pCheckFacilityH2="F" pCheckFacilityFSDC="F"
pCheckFacilityH3="F" pCheckFacilityASC="F" pCheckFacilityPCF="T" pCheckFacilityTSEKAP="F"
pCheckFacilityABTC="F" pCheckFacilityTBDOTSC="F" pCheckFacilityOPMC="F"
pCheckFacilityRHU="F" pCheckFacilityDATRC="F" pCheckFacilityHIVTH="F" pCheckFacilityFPC="F"
pCheckFacilityCIU="F" pCheckFacilityDSP="F" pCheckFacilityPCB="F" />
</CASERATES>
<CASERATES pCaseRateCode="CR0389" pCaseRateDescription="DIALYSIS PROCEDURE OTHER THAN
HEMODIALYSIS (E.G. PERITONEAL, HEMOFILTRATION)" pItemCode="90945" pItemDescription="DIALYSIS
PROCEDURE OTHER THAN HEMODIALYSIS (E.G. PERITONEAL, HEMOFILTRATION)" pEffectivityDate="02-
14-2024" pEffectivityEndDate="12-31-9999">
<AMOUNT pPrimaryProfFee="455.0" pPrimaryHCIFee="2925.0" pCheckFacilityMAT="F"
pPrimaryCaseRate="3380.0" pSecondaryHCIFee="0.00" pSecondaryProfFee="0.00"
pSecondaryCaseRate="0.00" pCheckFacilityH1="F" pCheckFacilityH2="F" pCheckFacilityFSDC="F"
pCheckFacilityH3="F" pCheckFacilityASC="F" pCheckFacilityPCF="T" pCheckFacilityTSEKAP="F"
pCheckFacilityABTC="F" pCheckFacilityTBDOTSC="F" pCheckFacilityOPMC="F"
pCheckFacilityRHU="F" pCheckFacilityDATRC="F" pCheckFacilityHIVTH="F" pCheckFacilityFPC="F"
pCheckFacilityCIU="F" pCheckFacilityDSP="F" pCheckFacilityPCB="F" />
</CASERATES>
</eCASERATES>

```

## 2. GenerateToken

A method that will generate token as authorization key to access API methods using encrypted Accreditation Number and Software Certification ID of the health facility.

### HTTP Header Format:

Key	Values
pan	valid accreditation number
softwarecertid	valid software certification id

### Input Payload Format (Unencrypted):

Encrypted text of the JSON shown below:

```

{
  "pan": "{valid HF accreditation number}",
  "softwarecertid": "{valid software certification id}"
}

```

## Sample Encrypted Payload

```
{
  "docMimeType": "text/xml",
  "hash": "dfe701c0c9bbca0678300540591fac928f7dc8f4d74d9771a3841317e7a99aec",
  "key1": "",
  "key2": "",
  "iv": "y1jPMxvQE2aJPVnqqn1pDQ==",
  "doc": "PMs1FWFZT+odAp0qf2zMmroSUR31YgDFnhYeJqBkuhJNMJU5geEN=="
}
```

## Output Payload Format

```
{
  "message": "String",
  "result": "String",
  "success": boolean
}
```

### 3. ValidateEsoa

A method that will validate encrypted eSOA XML format against Document Type Definition (DTD), data format and values set by PhilHealth.

#### *Important Note:*

After successful validation, eSOA XML should be encrypted using PhilHealth Public Key and submitted as attachment to electronic claims using the **EclaimsUpload Method** of PECWS version 2.5.

#### HTTP Header Format:

Key	Values
token	generated token

## Input Payload (Encrypted)

```
{
  "docMimeType": "text/xml",
  "hash": "dfe701c0c9bbca0678300540591fac928f7dc8f4d74d9771a3841317e7a99aec",
  "key1": "",
  "key2": "",
  "iv": "y1jPMxvQE2aJPVnqqn1pDQ==",
  "doc": "PMs1FWFZT+odAp0qf2zMmroSUR31YgDFnhYeJqBkuhJNMJU5geEN=="
}
```

## eSOA XML DTD

```
<?xml version="1.0" encoding="utf-8"?>
```

```
<!ELEMENT eSOA (SummaryOfFees, ProfessionalFees, ItemizedBillingItems)>
<!ATTLIST eSOA
  pHciPan CDATA #REQUIRED
  pHciTransmittalId CDATA #REQUIRED>
<!ELEMENT SummaryOfFees (RoomAndBoard, DrugsAndMedicine, LaboratoryAndDiagnostic,
  OperatingRoomFees, MedicalSupplies, PhilHealth, Balance)>
<!ELEMENT ProfessionalFees (ProfessionalFee*, PhilHealth, Balance)>
<!ELEMENT ItemizedBillingItems (ItemizedBillingItem+)>
<!ELEMENT PhilHealth EMPTY>
<!ATTLIST PhilHealth
  pTotalCaseRateAmount CDATA #REQUIRED
>
<!ELEMENT Balance EMPTY>
<!ATTLIST Balance
  pAmount CDATA #REQUIRED
>
<!ELEMENT OtherFundSource EMPTY>
<!ATTLIST OtherFundSource
  pDescription CDATA #REQUIRED
  pAmount CDATA #REQUIRED>
<!ELEMENT SummaryOfFee EMPTY>
<!ATTLIST SummaryOfFee
  pActualCharges CDATA #REQUIRED
  pSeniorCitizenDiscount CDATA #REQUIRED
  pPWDDiscount CDATA #REQUIRED
  pPCSO CDATA #REQUIRED
  pDSWD CDATA #REQUIRED
  pDOHMAP CDATA #REQUIRED
  pHMO CDATA #REQUIRED
>
<!ELEMENT RoomAndBoard (SummaryOfFee, OtherFundSource*)>
<!ELEMENT DrugsAndMedicine (SummaryOfFee, OtherFundSource*)>
<!ELEMENT LaboratoryAndDiagnostic (SummaryOfFee, OtherFundSource*)>
<!ELEMENT OperatingRoomFees (SummaryOfFee, OtherFundSource*)>
<!ELEMENT MedicalSupplies (SummaryOfFee, OtherFundSource*)>
<!ELEMENT ProfessionalFee (ProfessionalInfo, SummaryOfFee)>
<!ELEMENT ProfessionalInfo EMPTY>
<!ATTLIST ProfessionalInfo
  pPAN CDATA #REQUIRED
  pFirstName CDATA #REQUIRED
  pMiddleName CDATA #REQUIRED
  pLastName CDATA #REQUIRED
  pSuffixName CDATA #REQUIRED
>
<!ELEMENT ItemizedBillingItem EMPTY>
<!ATTLIST ItemizedBillingItem
```

pServiceDate CDATA #REQUIRED  
pItemCode CDATA #REQUIRED  
pItemName CDATA #REQUIRED  
pUnitOfMeasurement CDATA #REQUIRED  
pUnitPrice CDATA #REQUIRED  
pQuantity CDATA #REQUIRED  
pTotalAmount CDATA #REQUIRED

>

## Sample eSOA XML

```
<eSOA
  pHciPan=""
  pHciTransmittalId="">
  <SummaryOfFees>
    <RoomAndBoard>
      <SummaryOfFee
        pActualCharges=""
        pSeniorCitizenDiscount=""
        pPWDDiscount=""
        pPCSO=""
        pDSWD=""
        pDOHMAP="0"
        pHMO="0"
      />
      <OtherFundSource
        pDescription="Henry Sy Foundation"
        pAmount="3000.00"
      />
    </RoomAndBoard>
    <DrugsAndMedicine>
      <SummaryOfFee
        pActualCharges="3500"
        pSeniorCitizenDiscount="0"
        pPWDDiscount="0"
        pPCSO="0"
        pDSWD="1000.00"
        pDOHMAP="0"
        pHMO="0"
      />
    </DrugsAndMedicine>
    <LaboratoryAndDiagnostic>
      <SummaryOfFee
        pActualCharges="4000.00"
        pSeniorCitizenDiscount="0"
        pPWDDiscount="0"
        pPCSO="0"
        pDSWD="0"
        pDOHMAP="0"
        pHMO="0"
      />
    </LaboratoryAndDiagnostic>
    <OperatingRoomFees>
      <SummaryOfFee
        pActualCharges="12000.00"
        pSeniorCitizenDiscount="0"
        pPWDDiscount="0"
        pPCSO="0"
        pDSWD="0"
        pDOHMAP="0"
        pHMO="0"
      />
    </OperatingRoomFees>
  </SummaryOfFees>
</eSOA>
```

```

    />
  </OperatingRoomFees>
  <MedicalSupplies>
    <SummaryOfFee
      pActualCharges="2000.00"
      pSeniorCitizenDiscount="1000.00"
      pPWDDiscount="0"
      pPCSO="0"
      pDSWD="0"
      pDOHMAP="0"
      pHMO="0"
    />
  </MedicalSupplies>
  <PhilHealth
    pTotalCaseRateAmount="15000.00"
  />
  <Balance
    pAmount="3500.00"
  />
</SummaryOfFees>
<ProfessionalFees>
  <ProfessionalFee>
    <ProfessionalInfo
      pPAN="1234-4567890-1"
      pFirstName="JUAN"
      pMiddleName="TAMAD"
      pLastName="DELA CRUZ"
      pSuffixName=""
    />
    <SummaryOfFee
      pActualCharges="0"
      pSeniorCitizenDiscount="0"
      pPWDDiscount="0"
      pPCSO="0"
      pDSWD="0"
      pDOHMAP="0"
      pHMO="0"
    />
  </ProfessionalFee>
  <PhilHealth
    pTotalCaseRateAmount="2000.00"
  />
  <Balance
    pAmount="27180.00"
  />
</ProfessionalFees>
<ItemizedBillingItems>
  <ItemizedBillingItem
    pServiceDate="06-30-2021"
    pItemCode="DM-1353"
    pItemName="Paracetamol"
    pUnitOfMeasurement="Box"
    pUnitPrice="700.00"
    pQuantity="5"
    pTotalAmount="3500.00"
  />
  <ItemizedBillingItem
    pServiceDate="06-30-2021"
    pItemCode="LD-13434"
    pItemName="CT Scan"
    pUnitOfMeasurement="Box"
    pUnitPrice="500.00"
    pQuantity="3"
    pTotalAmount="4000.00"
  />

```

```

/>
<ItemizedBillingItem
  pServiceDate="06-30-2021"
  pItemCode="OR-13452"
  pItemName="Operating Room"
  pUnitOfMeasurement="Item"
  pUnitPrice="12000"
  pQuantity="1"
  pTotalAmount="12000"
/>
<ItemizedBillingItem
  pServiceDate="06-30-2021"
  pItemCode="MS-2521"
  pItemName="Gloves"
  pUnitOfMeasurement="Box"
  pUnitPrice="500.00"
  pQuantity="1"
  pTotalAmount="500"
/>
<ItemizedBillingItem
  pServiceDate="06-30-2021"
  pItemCode="MS-2522"
  pItemName="Face Mask"
  pUnitOfMeasurement="Box"
  pUnitPrice="500.00"
  pQuantity="3"
  pTotalAmount="1500.00"
/>
</ItemizedBillingItems>
</eSOA>

```

## eSOA Data Dictionary

Element	Attribute	Data Type	Size	Description	Required	Remarks	Reference	Format	Valid Values
eSOA	pHciPan	varchar2	9	The accreditation number issued by PhilHealth to the health facility	YES				
	pTransmittalId	varchar2	50	A UNIQUE reference number assigned to the claim by the submitting health facility	YES				
Summary of Fees	pChargesNetOfApplicableVat	number	10,2	Refed to the total charges net of applicable vat	YES			99999999D99	0.00 to 99999999.99
	pSeniorCitizenDiscount	number	10,2	The amount of senior citizen (SC) discount, if applicable	NO			99999999D99	0.00 to 99999999.99
	pPWDDiscount	number	10,2	The amount of Person with Disability (PWD) discount, if applicable	NO			99999999D99	0.00 to 99999999.99
	pPCSO	number	10,2	The amount of Philippine Charity Sweepstakes Office (PCSO) discount, if applicable	NO			99999999D99	0.00 to 99999999.99
	pDSWD	number	10,2	The amount of Department of Social Welfare and Development (DSWD) discount, if applicable	NO			99999999D99	0.00 to 99999999.99
	pDOHMAP	number	10,2	The amount of Department of Health (DOHMAP) discount, if applicable	NO			99999999D99	0.00 to 99999999.99
	pHMO	number	10,2	The amount of HMO discount, if applicable	NO			99999999D99	0.00 to 99999999.99

Element	Attribute	Data Type	Size	Description	Required	Remarks	Reference	Format	Valid Values
eSOA	pHciPan	varchar2	9	The accreditation number issued by PhilHealth to the health facility	YES				
	pTransmittalId	varchar2	50	A UNIQUE reference number assigned to the claim by the submitting health facility	YES				
	pDescription	varchar	10,2	The description of other funding source, if applicable	NO				
	pAmount	number	10,2	The amount of other funding source discount, if applicable	NO			9999999D99	0.00 to 9999999.99
Other Funding Source	pDescription		300						
	pAmount								
PhilHealth	pTotalCaseRate Amount	number	8,2	The amount of case rate package being claimed	YES			999999D99	0.00 to 999999.99
Balance	pAmount	number	10,2	The difference between the total amount of charges, net of applicable vat, for the room and board, drugs and medicine, laboratory and diagnostic, operating room and medical supplies charges, less applicable discounts and the case rate amount.	YES			9999999D99	0.00 to 9999999.99
Professional Information	pPAN	varchar	14	The corresponding PhilHealth Accreditation Number (PAN) of the attending Physician	NO	Required if pFirstName or pMiddle Name or pLastName or pSuffixName is null		XXXX-XXXXXX-X	
	pFirstName	varchar	60	The first name of the attending physician	NO	Required if pPAN is null			
	pMiddleName	varchar	60	The middle name of the attending physician	NO	Required if pPAN is null			
	pLastName	varchar	60	The last name of the attending physician	NO	Required if pPAN is null			
	pSuffixName	varchar	60	The suffix or extension name of the attending physician (ex. Jr., Sr. II, III and so on)	NO	Required if pPAN is null			
Itemized Billing	pServiceDate	date		the date of service for room and board, laboratory and diagnostic service and operating room fees; the date of issuance for drugs and medicine and medical supplies	YES			mm-dd-yyyy	
	pItemCode	varchar	25	Refer to the code of the item in the electronic Statement of Account (eSOA)	YES		item_library.xls (sheet name: esoa_item_lib)		as listed in eSOA Item Library
	pItemName	varchar	300	Refer to the description of an item in the electronic Statement of Account (eSOA)	YES		item_library.xls (sheet name: esoa_item_lib)		as listed in eSOA and Item Library
	pUnitOfMeasurement	varchar	50	Refer to the unit of measurement used for an item in the electronic Statement of Account (eSOA)	YES		eSOA Library.xls (sheet name: esoa_unit_lib)		as listed in eSOA and PhilHealth Drug Library

Element	Attribute	Data Type	Size	Description	Required	Remarks	Reference	Format	Valid Values
eSOA	pHciPan	varchar2	9	The accreditation number issued by PhilHealth to the health facility	YES				
	pTransmittalId	varchar2	50	A UNIQUE reference number assigned to the claim by the submitting health facility	YES				
							PhilHealth Drug Library.xls		
	pUnitPrice	number	8,2	Refer to the unit amount of an item in the electronic Statement of Account (eSOA)	YES				0.00 to 999999.99
	pQuantity	number	4,0	Refer to the total number or quantity of an item in the electronic Statement of Account (eSOA)	YES				0 to 9999
	pTotalAmount	number	11,2	Refer to the total amount of an item in the electronic Statement of Account (eSOA) i.e pTotalAmount = pQuantity x pUnitPrice)	YES				0.00 to 999999999.99
	pCategory	varchar	50	Refer to eSOA category	Yes		category.xls		as listed in eSOA and Category Library

#### 4. ValidateCF5 Method

A method that will validate encrypted CF5 XML format against Document Type Definition (DTD), data format and values set by PhilHealth.

##### *Important Note:*

After successful validation, CF5 XML should be encrypted using PhilHealth Public Key and submitted as attachment to electronic claims using the **EclaimsUpload Method** of PECWS version 2.5.

##### **HTTP Header Format:**

Key	Values
token	generated token

##### **Input Payload Format**

```
{
  "cf5": "{encrypted CF5 XML using cipher key}",
  "eclaims": "{encrypted eClaims XML using cipher key}"
}
```

##### **Encrypted CF5 XML using cipher key**

```
{
  "docMimeType": "text/xml",
  "hash": "dc8f4d74d977dfe701c0c9bbca0678300540591fac928f71a3841317e7a99aec",
  "key1": "",
  "key2": "",
  "iv": "y1jPMxvQE2aJPVnqqn1pDQ==",
  "doc": "PMs1FWFZT+odAp0qf2zMmroSUR31YgDFnhYeJqBkuhJNMJU5geEN=="
}
```

### Encrypted e-claims XML using cipher key

```
{
  "docMimeType": "text/xml",
  "hash": "f13e39c73fd6e5b7123b588f447d2982ed73d35a505bbd1f3f974674145610d7",
  "key1": "",
  "key2": "",
  "iv": "adG7ADBkK9xaEvrVvKYzumw==",
  "doc": "c3kCPZ9FJiRwDogZFw1WwGDconXXjvpp+2TdpGvjMzHCpTY4f1s=="
}
```

### Sample CF5 XML (Unencrypted)

```
<CF5 pHospitalCode="300806" Series="" Lhio="">
  <DRGCLAIM ClaimNumber="300806-20221216-1-1" PrimaryCode="A00.0" NewBornTimeOfBirth=""
NewBornAdmWeight="2" Remarks="">
    <SECONDARYDIAGS>
      <SECONDARYDIAG SecondaryCode="A00.1" Remarks=""/>
    </SECONDARYDIAGS>
    <PROCEDURES>
      <PROCEDURE RvsCode="" Laterality="" Ext1="" Ext2="" Remarks=""/>
    </PROCEDURES>
  </DRGCLAIM>
  <DRGCLAIM ClaimNumber="300806-20221216-1-2" PrimaryCode="A00.0" NewBornTimeOfBirth=""
NewBornAdmWeight="2" Remarks="">
    <SECONDARYDIAGS>
      <SECONDARYDIAG SecondaryCode="A00.1" Remarks=""/>
      <SECONDARYDIAG SecondaryCode="a10.1" Remarks=""/>
    </SECONDARYDIAGS>
    <PROCEDURES>
      <PROCEDURE RvsCode="96.72" Laterality="" Ext1="1" Ext2="1" Remarks=""/>
    </PROCEDURES>
  </DRGCLAIM>
  <DRGCLAIM ClaimNumber="300806-20221216-1-1" PrimaryCode="A00.0" NewBornTimeOfBirth=""
NewBornAdmWeight="2" Remarks="">
    <SECONDARYDIAGS>
      <SECONDARYDIAG SecondaryCode="A00.1" Remarks=""/>
      <SECONDARYDIAG SecondaryCode="a10.1" Remarks=""/>
    </SECONDARYDIAGS>
    <PROCEDURES>
      <PROCEDURE RvsCode="96.72" Laterality="" Ext1="1" Ext2="1" Remarks=""/>
    </PROCEDURES>
  </DRGCLAIM>
</CF5>
```

## Output Payload Format

```
{  
  "message": "String",  
  "result": "String",  
  "success": boolean  
}
```

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# Annex A

## Document Type Code and Description

Document Code	Description
CAB	Clinical Abstract
CAE	Certification of Approval/Agreement from the Employer
CF1	Claim Form 1
CF2	Claim Form 2
CF3	Claim Form 3
CF4	Claim Form 4
COE	Certificate of Eligibility
CSF	Claim Signature Form
CTR	Confirmatory Test Results by SACCL or RITM
DTR	Diagnostic Test Result
ITB	Itemized Billing (PDF format)
ITX	Itemized Billing (MS Excel Format)
MBC	Member's Birth Certificate
MDR	Proof of MDR with Payment Details
MEF	Member Empowerment Form
MMC	Member's Marriage Contract
MSR	Malarial Smear Results
NHC	Newborn Hearing Registry Card (Blue Card)
NHT	Newborn Hearing Screening Test Result
MWV	Waiver for Consent for Release of Confidential Patient Health Information
NTP	NTP Registry Card
OPR	Operative Record
ORS	Official Receipts
PAC	Pre-Authorization Clearance
PBC	Patient's Birth Certificate

PIC	Valid Philhealth Indigent ID
POR	PhilHealth Official Receipts
SOA	Statement of Account
STR	HIV Screening Test Result
TCC	TB-Diagnostic Committee Certification (-) Sputum
TYP	Three Years Payment of (2400 x 3 years of proof of payment)
MRF	PhilHealth Member Registration Form
ANR	Anesthesia Record
HDR	Hemodialysis Record
CF4	Claim Form 5
ESA	Electronic Statement of Account (eSOA)
OTH	Other documents