

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 <u>inquiries@benefitsmadebetter.com</u> to see how we can help you.

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COVID-19 Update

AS OF OCTOBER 12, 2020

No. of cases worldwide: 37,109,851¹ **No. of deaths:** 1,070,355 (2.9%)¹ **Confirmed cases in the Philippines:** 342,816²

State update on coronavirus outbreak



Figure 1. Trend of daily confirmed COVID19 cases and community quarantine in the National Capital Region (data as of October 11, 2020)

On October 6, experts from the University of the Philippines (UP) OCTA Research Group recommended stricter quarantine classifications for 13 areas in the country.³

Based on the data from August 25 to October 5, the following high-risk areas had a spike in the daily attack rate per 1,000 population:

- 1. Benguet (including Baguio City)
- 2. Davao Del Sur (including Davao City)
- 3. Iloilo (including Iloilo City)
- 4. Misamis Oriental (including Cagayan de Oro)
- 5. Nueva Ecija
- 6. Quezon
- 7. Pangasinan (including Dagupan)
- 8. Western Samar

- 9. Zamboanga Del Sur (including Zamboanga City)
- 10. South Cotabato
- 11. Surigao del Sur

"Attack rate" is the percentage of the population that catches the virus over a period. The areas listed above have a daily attack rate greater than 1% and have reported an upward trend since September 16.

Despite the provinces of Cagayan and Isabela being classified as low risk, the research team also suggested implementing stricter quarantine in these provinces due to their rise in new cases and limited healthcare capacity.



Figure 2. Trend of daily confirmed COVID19 cases per quarantine level in the National Capital Region (data as of October 11, 2020)

The research group noted that the number of cases in Metro Manila went down to less than 1,000 new cases per day, and that the reproduction number was at 0.82 from August 25 to October 5.

Still, Metro Manila accounts for the highest daily reported cases among the regions in the country. The region's positivity rate is at 8%, which is above the World Health Organization's (WHO) recommended ideal level of 5%.

Metro Manila remains under general community quarantine (GCQ) until October 31.

Even though the virus transmission has slowed down based on overall data, the Philippines is among the top 20 worst-hit countries and has the longest and strictest lockdown worldwide.

Last week, the country breached 6,000 deaths due to COVID-19. As of October 12, the Philippines recorded 342,816 cases, of which 293,152 recovered and 6,332 died.

Medical Updates

On October 9, 2020, the biomedical journal *Morbidity and Mortality Weekly Report* published a case that offers greater insight on COVID-19 transmission.⁴

The source of infection was a 13-year-old girl, who was exposed to COVID-19 in June. Four days later, she sought testing and was given a rapid test, which came back negative.

Two days afterward, the girl and her family joined nine other relatives for vacation. On that same day, the girl began experiencing symptoms, but it was just a stuffy nose and apparently did not give anyone much cause for concern.

The group stayed together in a five-bedroom house for 8–25 days and did not wear masks or practice physical distancing.

Three to 19 days later, 11 people began experiencing symptoms. Eventually, one needed ER help, and another needed to be confined at the hospital. All came out positive for COVID-19.

Six other relatives joined the vacation, but they stayed in a different house, only joined outdoor activities, and practiced physical distancing. None of them developed symptoms. Four of them got RT-PCR testing for COVID-19 and the results came back negative.

PhilHealth, HMO and group life insurance coverage

PhilHealth and HMO coverage for COVID-19 cases

The Philippine Health Insurance Corporation (PhilHealth) will shoulder the cost of treatment for patients with COVID19 based on a case-rate package, including COVID19 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 August 17, 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 (as of September 29)
- 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.

Per PhilHealth's circular, HMO coverage will be deducted first from the hospital bill, and then the PhilHealth benefits.⁵

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: <u>membergateway.maxicare.com.ph</u> 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: <u>mic@etiqa.com.ph</u> (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 COVID19 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 October 7, 2020, these hospitals are **at full capacity** and can no longer admit patients who are positive with COVID-19:

СІТҮ	HOSPITAL
Baguio City	St. Louis University Hospital of the Sacred Heart
Laoag City, Ilocos Norte	Karmelli Clinic and Hospital Corporation
San Fernando, La Union	Bethany Hospital, Inc.
San Jose Del Monte, Bulacan	QualiMed Hospital
Malolos City, Bulacan	Sacred Heart of Malolos
Olongapo City, Zambales	Ridon's St. Jude Medical Center Corp.
	James L. Gordon Memorial Hospital
	Our Lady of Lourdes International Medical Center
Caloocan City	MCU-FDT Medical Foundation Hospital
Makati	Makati Medical Center
	St. Clare's Medical Center, Inc.
Mandaluyong	VRP Medical Center
Manila	Chinese General Hospital
	Medical Center Manila, Inc.
	Manila Doctors Hospital
	Our Lady of Lourdes Hospital
Pasig	The Medical City

San Juan City	Cardinal Santos Medical Center
Marikina City	Marikina Valley Medical Center
	Marikina Doctors Hospital and Medical Center, Inc.
Pasay City	Adventist Medical Center and College Manila, Inc.
	San Juan De Dios Hospital
Quezon City	Bernardino General Hospital
	Commonwealth Hospital and Medical Center
	Dr. Fe Del Mundo Medical Center
	Dr. Jesus C. Delgado Memorial Hospital
	FEU-Dr. Nicanor Reyes Medical Foundation, Inc.
	Metro North Medical Center
	National Kidney and Transplant Institute
	Lung Center of the Philippines
	St. Luke's Medical Center – Quezon City
	UERM Memorial Medical Center
Taguig	St. Luke's Medical Center – Global City
Pateros	Allied Care Experts Medical Center
Parañaque City	Medical Center Parañaque, Inc.
Las Piñas City	Las Piñas City Medical Center
	Las Piñas Doctor's Hospital
	University of Perpetual Help Dalta Medical Center, Inc.
Muntinlupa City	Asian Hospital and Medical Center
	Medical Center Muntinlupa, Inc.
Valenzuela	Allied Care Experts Medical Center - Valenzuela
	Fatima University Medical Center Corp.
Antipolo City	Metro Antipolo Medical Center
	Fatima Medical Center - Antipolo
	Clinica Antipolo Hospital and Wellness Center

Taytay, Rizal	Taytay Doctors Hospital
	Manila East Medical Center
Binangonan, Rizal	Binangonan Lakeview Hospital
Cainta, Rizal	Ortigas Hospital & Healthcare Center
Santo Tomas, Batangas	St. Frances Cabrini Medical Center
Tanauan, Batangas	Daniel O. Mercado Medical Center
Kawit, Cavite	Binakayan Hospital & Medical Center, Inc.
Carmona, Cavite	Carmona Hospital & Medical Center, Inc.
Molino, Cavite	Metro South Medical Center
Tagaytay City, Cavite	Tagaytay Medical Center, Inc.
Cavite City	Cavite Medical Center
Trece Martirez City, Cavite	Korean-Philippines Friendship Project Care Center
General Trias, Cavite	City of General Trias Doctors Medical Center Inc.
Bacoor City, Cavite	South City Medical Center
Tayabas City, Quezon	Tayabas Community Hospital
Lucena, Quezon	Lucena United Doctors Incorporated
General Trias, Cavite Bacoor City, Cavite Tayabas City, Quezon	City of General Trias Doctors Medical Center Inc. South City Medical Center Tayabas Community Hospital

For a list of HMO-accredited facilities, please log in to your Benefits Made Better account (<u>www.benefitsmadebetter.com</u>) or ActiveLink mobile app account.

Your healthcare benefits assistant

The ActiveLink mobile application gives users a convenient healthcare benefits assistant. The application aims to empower employees by providing easy access to key HMO information, searchable directories of accredited facilities, and the latest health and wellness trends.

ActiveLink app features to support COVID-19 communications

We are taking these steps to deliver important updates and publish communications and advisories to your employees amidst the community quarantine:



COVID-19 Health Declaration Form

The ActiveLink app offers a contactless in-app health symptoms checker for easy access. All gathered data are linked to the Business Intelligence dashboard for daily monitoring and report generation.



Benefits Communications

With our built-in content management system, ActiveLink can push communications in real time. You and your employees will get to read announcements and advisories straight from the app.



Knowledgebase and Admin Connect

(https://helpdesk.benefitsmadebetter.com/en)

We also offer an online library, or Knowledgebase, where we publish latest updates and information about COVID-19.

Strategies and guidelines

New supplemental workplace guidelines

The Department of Labor and Employment (DOLE) and Department of Trade and Industry (DTI) released the supplemental guidelines for COVID-19 workplace control and prevention.⁶

Management of asymptomatic and symptomatic employees in the workplace

COVID-19 testing

- **a.** Employers are encouraged to coordinate with the national or local government-testing efforts like drive-thru or walk-thru testing facilities.
- **b.** The following priority workers shall undergo RT-PCR tests (based on the expanded testing strategy in DOH DM 2020-0258 and DOH DM 2020-0258-A):
 - All employees in the hospitality and tourism sectors in El Nido, Boracay, Coron, Panglao, Siargao, and other tourist zones identified and declared by the Department of Tourism (DOT) once every four weeks.
 - All employees of manufacturing companies and public service providers in economic zones located within special concern areas once every quarter.
 - Frontline and economic priority workers, defined as those who (1) work in high priority sectors, both public and private; (2) have high interaction and exposure to the public; and (3) live or work in special concern areas, once every quarter. These include:
 - **1.** Transport and logistics
 - a. Drivers of taxis, ride hailing services (two and four wheels), buses
 - **b.** Public transport vehicles
 - c. Conductors
 - d. Pilots, flight attendants, flight engineers
 - e. Rail operators, mechanics, servicemen
 - f. Delivery staff
 - g. Water transport workers such us ferries, inter-island shipping, ports
 - 2. Food retail
 - a. Waiters, waitresses, bar attendants, baristas
 - **b.** Chefs and cooks
 - c. Restaurant managers and supervisors
 - 3. Education (once face-to-face classes resume)
 - a. Teachers at all levels of education
 - b. Other school frontliners such as guidance counselors, librarians, cashiers

- 4. Financial services bank tellers
- 5. Non-food retail
 - **a.** Cashiers
 - **b.** Stock clerks
 - c. Retail salespersons
- 6. Services
 - a. Hairdressers, barbers, manicurists, pedicurists, massage therapists
 - **b.** Embalmers, morticians, undertakers, funeral directors
 - c. Parking lot attendants
 - d. Security guards
 - e. Messengers
 - f. Ushers, lobby attendants, receptionists
 - g. Clergy
- 7. Market vendors
- 8. Construction
 - a. Carpenters
 - **b.** Stonemasons
 - c. Electricians
 - **d.** Painters
 - e. Construction workers, including foremen, supervisors
 - f. Civil engineers, structural engineers, construction managers
 - g. Crane and tower operators
 - **h.** Elevator installers and repairers
- 9. Water supply, sewerage, waste management
 - **a.** Plumbers
 - **b.** Recycling and reclamation workers/garbage collectors
 - **c.** Water/Wastewater engineers
 - d. Janitors and cleaners
- 10. Public sector
 - a. Judges
 - **b.** Courtroom clerks, staff and security
 - **c.** All national and local government employees rendering frontline services in special concern areas

- **11.** Mass media
 - a. Field reporters
 - b. Photographers
 - c. Camera crew
- Employers are highly encouraged to regularly send their employees for testing once every quarter, at no cost to the employees.
- c. Testing of symptomatic and close contacts
 - All employees experiencing symptoms of COVID-19, and those who are close contacts, must undergo RT-PCR testing.
 - Employers shall inform the respective LGUs of both workplace and residence of the symptomatic employees and close contacts before testing, for monitoring purposes.
 - Symptomatic employees with travel/exposure to COVID-19 shall undergo 14 days quarantine. Upon its completion and prior to resumption of work, the employee shall present a Certificate of Quarantine Completion from the step-down care facility or local health office, per Philippine Society for Microbiology and Infectious Disease (PSMID) Guidelines on Return to Work.
 - A step-down care facility refers to a DOH- or LGU-identified facility. Examples of such facility are temporary treatment mega facilities (TTMF) for recovering COVID-19 patients who have been hospitalized but have not yet been certified as COVID-free and transferred to the TTMF.
- d. Testing of asymptomatic employees returning to work
 - RT-PCR or antibody-based tests are not recommended nor required for asymptomatic employees returning to work.
 - Employees physically reporting to work shall be screened for COVID-19 symptoms, including fever, cough, colds and other respiratory symptoms, and/or determination of travel or exposure to COVID-19 cases within the last 14 days.
 - Asymptomatic employees prior to physically returning to work may be cleared by the local health officer or OSH physician.

Occupational Safety and Health Committees (OSH Committees)

- **1.** Employers shall establish OSH Committees in accordance with the Republic Act No. 11058, its implementing rules and regulations, and DOLE Department Order No. 198, Series of 2018.
- **2.** The OSH Committee and/or safety officer of the workplace shall oversee enforcement and monitoring of the minimum public health standards for COVID-19 prevention in the workplace.

- **3.** Monitoring by the OSH Committees shall include evaluation and analysis of the company's implementation of the minimum health standards and protocols to immediately address the spread of COVID-19 in the workplace. Health surveillance may be conducted to determine the cause/s of the spread of the virus in the workplace.
- **4.** For two or more private establishments housed under the same building, a joint OSH Committee shall also be established in accordance with DOLE Department Order No. 198, Series of 2018. They may share resources for a successful implementation of a comprehensive OSH program, including a COVID-19 prevention and control program.

Disinfection and closure of buildings or offices

1. If at least one confirmed case of COVID-19 is detected in the workplace, the facility shall be disinfected with an appropriate disinfectant solution (0.5% bleach solution). The conduct of a comprehensive disinfection by specialists is recommended.

The building must be locked down for 24 hours prior to disinfection to lessen transmission to sanitation personnel. During the disinfection process, all doors and windows should be opened to maximize ventilation. The building may only be opened 24 hours after the disinfection process.

- **2.** Case clustering shall be defined as two or more confirmed cases from the same area/ facility, whether in the same or different office spaces.
- **3.** Employers are encouraged to develop their own company policies on the temporary closure of the workplace, disinfection, and more extensive contact tracing, in the event of case clustering, to ensure continuity of operations.
- **4.** Employers shall ensure that the temporary closure of their establishments for disinfection purposes be done in accordance with the National Task Force Against COVID-19 Memorandum Circular No. 2 dated 15 June 2020 (Operational Guidelines on the Application of Zoning Containment Strategy in the Localization of the National Action Plan against COVID-19 Response).
- **5.** Individual businesses and offices, regardless of the community quarantine status in their respective areas, must abide by the directives of their LGU/City Epidemiology Surveillance Unit (CESU)/ Regional Epidemiology Surveillance Unit (RESU) on building closure due to case clustering.

Leave of absences and entitlements

- **1.** Use of leaves of absence and entitlements shall be governed by the pertinent rules and regulations promulgated by the DOLE.
- **2.** Hospitalization benefits of PhilHealth members shall be based on PhilHealth rules and regulations.
- **3.** Social security benefits shall be according to the policies and regulations of the Social Security System.
- **4.** Employee's compensation benefits shall be according to Presidential Decree No. 626 "Employee's Compensation and State Insurance Fund" and its implementing rules and regulations.
- **5.** Employers are highly encouraged to provide sick leave benefits, medical insurance coverage, including supplemental pay allowance, for COVID-19 RT-PCR confirmed employees or close contacts made to undergo the 14-day quarantine.

Notification and reporting

- 1. Reporting of COVID-19 test results to the DOH shall be done in accordance with DOH Administrative Order No. 2020-001 (Revised Guidelines for the Inclusion of COVID-19 in the List of Notifiable Diseases for Mandatory Reporting to the Department of Health).
- 2. Even before testing, the OSH officer or employer must report COVID-19–positive employees, symptomatic employees, and their close contacts to the local health office with jurisdiction over the workplace and the barangay health emergency team (BHERT) of their place of residence.
- **3.** The data privacy provisions under the Data Privacy Act and DM 2020-0189 shall be strictly complied with, to ensure that the data privacy rights of patients/subjects are respected and protected.
- **4.** The LGU, through their CESU, Municipal Epidemiology Surveillance Unit (MESU) or Provincial Epidemiology Surveillance Unit (PESU), shall submit reports to the RESU using the event-based surveillance system of the Epidemiology Bureau of DOH.
- 5. Reporting to the DOLE shall be made in accordance with Section X of the DTI-DOLE Interim Guidelines on Workplace Prevention and Control of COVID-19 using the Work Accident/Illness Report (WAIR) COVID-19 form.

References:

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