



Philippine Health Insurance Corporation

# **CITIZEN'S CHARTER HANDBOOK**

## 2021



# **PHILIPPINE HEALTH INSURANCE CORPORATION**

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### **2021**

## **I. MANDATE**

The National Health Insurance Program was established to provide health insurance coverage and ensure affordable, acceptable, available and accessible health care services for all citizens of the Philippines. It shall serve as the means for the healthy to help pay for the care of the sick and for those who can afford medical care to subsidize those who cannot. It shall initially consist of Programs I and II or Medicare and be expanded progressively to constitute one universal health insurance program for the entire population. The program shall include a sustainable system of funds constitution, collection, management and disbursement for financing the availment of a basic minimum package and other supplementary packages of health insurance benefits by a progressively expanding proportion of the population. The program shall be limited to paying for the utilization of health services by covered beneficiaries. It shall be prohibited from providing health care directly, from buying and dispensing drugs and pharmaceuticals, from employing physicians and other professionals for the purpose of directly rendering care, and from owning or investing in health care facilities. (Article III, Section 5 of RA 7875 as amended)

## **II. VISION**

“Bawat Filipino, Miyembro,  
Bawat Miyembro, Protektado,  
Kalusugan ng Lahat, Segurado”

## **III. MISSION**

"Benepisyong Pangkalusugang Sapat at De-kalidad para sa Lahat"

#### **IV. SERVICE PLEDGE**

Kami ay nangangakong ilalaan ang mga sarili sa pagsasakatuparan ng Kalusugang Pangkalahatan.

Sisikapin naming makapagbigay nang mabilis at dekalidad na serbisyong pangkalusugan sa lahat ng Pilipino, ano man ang edad, kasarian o estado ng pamumuhay.

Kaagapay namin ang mga miyembro sa pagtataguyod ng pagkakaisa bilang isang konseptong mahalaga sa pagkamit ng aming layunin.

Patuloy naming paghuhusayin ang aming mga serbisyo at titiyaking ang mga ito'y umaayon sa nagbabagong panahon at sumasabay sa pandaigdigang pamantayan.

Titiyakin naming laging mauuna ang serbisyo-publiko at taas-noo na maglilingkod sa bayan.

Sisikapin naming maging huwarang kawani at makamit ang tunay na pagbabago sa ating bansa.

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## **EXTERNAL SERVICES**

# **A. Local Health Insurance Offices (LHIOs)**

## **I. MEMBERSHIP**

## 1. ENROLLMENT OF INFORMAL SECTOR (INDIVIDUAL)

Registration of individuals belonging to the Informal Sector, payment of the premium contribution and issuance of their PhilHealth identification Cards (PIC)

Office/Division	Local Health Insurance Offices			
Classification	Simple			
Type of Transaction	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
Who may avail:	All individuals belonging to the Informal Sector category			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
PhilHealth Membership Registration Form (PMRF) (original, 2 copies)		downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO		
Payment of premium contribution		Not applicable		
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit duly accomplished PMRF and supporting documents and payment slip once the number is called.	Receive and screen duly accomplished PMRF and supporting documents	None	10 minutes per PMRF	Frontline Officer LHIO
	Process the receive documents			
	Print the Member Data Record (MDR) and PhilHealth Identification Card (PIC)			
	Endorse payment slip to the assigned payment processor and advise client to proceed to the Payment Processor window and return after payment has been made			

Proceed to the Cashier's window once number is called, tender payment (premium contribution) and receive Official Receipt	Encode payment slip, assign number and advise client to proceed to Cashier's window once the number is called	300/month, 3600/ annum (no. of months to be paid depends on the assessment of the payment processor)	5 minutes	Payment Processor - LHIO
	Receive payment from client, print and issue Official Receipt (OR)		5 minutes	Collecting Officer - LHIO
Go back to the Frontline Officer and receive PIC and MDR	Release PIC and MDR	None	5 minutes	Frontline Officer - LHIO
TOTAL		300/month x No. of months to be paid per member	25 minutes x the No. of PMRF submitted for processing	

## 2. ENROLLMENT OF LANDBASED MIGRANT WORKERS (INDIVIDUAL)

Registration of individuals belonging to the Migrant Worker category, payment of the premium contribution and issuance of their PhilHealth identification Cards (PIC) and Member Data Record (MDR)

<b>Office/Division</b>	Local Health Insurance Offices			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
<b>Who may avail:</b>	All individuals belonging to the Landbased Migrant Worker category			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
PhilHealth Membership Registration Form (PMRF) (original, 2 copies)		downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO		
Contract (photocopy, 1 copy)		Not applicable		
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit duly accomplished PMRF and supporting documents and payment slip once the number is called.	1. Receive and screen duly accomplished PMRF and supporting documents and payment slip	None	10 minutes per PMRF	Frontline Officer - LHIO
	2. Process receive documents			
	3. Endorse payment slip to the Payment Processor and advise client to proceed to the Payment Processor window and return after payment has been made			

2. Proceed to the Payment Processor desk and receive priority number	4. Encode payment slip and assign number	None	5 minutes	Payment Processor - LHIO
	5. Advise member to proceed to Cashier's Window once the number is called			
3. Proceed to the Cashier's window once number is called and tender payment (premium contribution) and receive Official Receipt	6. Receive payment, issue OR and advise client to go back to the Frontline Officer to get PhilHealth Identification Card (PIC) and Member Data Record (MDR)	3% of the monthly income, subject to ceiling	5 minutes	Collecting Officer - LHIO
4. Receive PIC and MDR	7. Print and release MDR and PIC	None	5 minutes	Frontline Officer - LHIO
<b>Total</b>		<b>None</b>	<b>15 minutes plus 10 minutes x No. of PMRFs submitted for processing</b>	

### 3. ENROLLMENT OF LIFETIME MEMBERS (INDIVIDUAL)

Registration of individuals belonging to the Lifetime Members category and issuance of their PhilHealth identification Cards (PIC) and Member Data Record (MDR)

<b>Office/Division</b>	Local Health Insurance Offices	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen	
<b>Who may avail:</b>	All individuals who have reached minimum retirement age required of their profession (in case of professionals) or otherwise, individuals who have reached sixty years of age and have contributed at least 120 monthly premium contributions to the National Health Insurance Program	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
PhilHealth Membership Registration Form (PMRF) (original 2 copies) duly signed by the member		downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO
Proof of 120 months contribution to the NHIP or Proof that the 120 months requirement is not required (see specific requirements per category of retiree); (clear photocopy, 1) or PhilHealth Official Receipts showing at least 120 months contribution to the NHIP (clear photocopy, 1)		Previous employer/SSS/GSIS  Not applicable
Latest 1 x 1 ID pictures (2 copies)		Not applicable
Specimen signature of the member		Not applicable
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)		
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit duly accomplished PMRF and supporting document/s, if applicable, once the number is called.	1. Receive and screen duly accomplished PMRF and supporting documents	None	30 minutes per PMRF	Frontline Officer LHIO
	2. Process the received documents			
	3. Print the Member Data Record (MDR) and Identification Card.			
	4. Laminate the printed Identification Card with the ID picture of the member (if applicable)			
	5. Release the laminated Identification Card to the client together with the Member Data Record (MDR) and have the client acknowledge receipt of documents by affixing his signature over his printed name in the releasing logbook.			
2. Receive the Identification Card and Member Data Record (MDR) and sign in the releasing logbook.				
<b>TOTAL</b>		<b>None</b>	<b>30 minutes per PMRF x No. of PMRF</b>	

#### 4. ENROLLMENT OF SENIOR CITIZENS (INDIVIDUAL)

Registration of individuals belonging to the Senior Citizens category and issuance of their PhilHealth identification Cards (PIC) and Member Data Record (MDR)

<b>Office/Division</b>	Local Health Insurance Offices	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen	
<b>Who may avail:</b>	All Filipinos who have reached sixty years of age, even without contribution to the National Health Insurance Program for as long as the subsidy of the National Government for the premium contribution of this category continues.	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
PhilHealth Membership Registration Form (PMRF) (original 2 copies) duly signed by member		
1 x 1 photo taken within the last six (6) months; and (2 pcs)		
Senior Citizens' Identification Card issued by the OSCA in the city or municipality where the elderly resides; or		
ANY of the following as proof of status as senior citizen: (1 clear photocopy) <ul style="list-style-type: none"> <li>• Philippine passport;</li> <li>• Birth certificate;</li> <li>• Baptismal Certificate;</li> <li>• Valid Driver's license;</li> <li>• Voter's ID;</li> <li>• SSS/GSIS ID;</li> <li>• Valid Professional Regulatory Commission (PRC) ID;</li> <li>• Postal ID;</li> <li>• National Bureau of Investigation (NBI) Clearance;</li> <li>• Overseas Filipino Worker's ID;</li> <li>• Valid identification cards issued by recognized government institutions/agencies/corporations that specify the full name, sex, date of birth, address and signature of owner; or</li> </ul>		



In the absence of the abovementioned documents, the following may be accepted, subject to PhilHealth validation: (original) <ul style="list-style-type: none"> <li>• Certificate from the National Council for the Welfare of Disabled Persons (NCWDP);</li> <li>• DSWD or Local DSWD certification;</li> <li>• Barangay Certification and Affidavit from two (2) disinterested persons certifying the age and identity of the elderly person.</li> </ul>		National Council for the Welfare of Disabled Persons  Department of Social Welfare and Development Barangay Hall Notary public		
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit duly accomplished PMRF and supporting documents once the number is called.	1. Receive and screen duly accomplished PMRF and supporting document/s.	None	10 minutes per PMRF	Frontline Officer LHIO
	2. Process the receive documents			
	3. Print Member Data Record (MDR) and PhilHealth Identification Card (ID)			
	4. Release the Identification Card to the client together with the Member Data Record (MDR) and have the client acknowledge receipt of the documents by affixing his signature over his printed name in the releasing logbook.			
2. Receive the Identification Card and Member Data Record (MDR) and sign in the releasing logbook.				
<b>TOTAL</b>		<b>None</b>	<b>10 minutes per PMRF x No. of PMRF</b>	

## 5. ENROLLMENT OF FORMAL SECTOR EMPLOYEES (5 EMPLOYEES AND BELOW)

Registration of Formal Sector employees, maximum of 5 individuals and issuance of their PhilHealth identification Cards (PIC) and Member Data Records (MDR).

<b>Office/Division</b>	Local Health Insurance Offices			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business; G2C - Government to Citizen			
<b>Who may avail:</b>	All newly hired or existing employees in the government or private institutions, with or without PhilHealth Identification Number (PIN)			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
PhilHealth Membership Registration Form (PMRF) (original 2 copies)		downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO		
Employer Report Form 2 (ER2) (original, 2 copies)		downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO		
Valid signature and photo bearing ID of the PEER, if the bearer of the document is the PEER				
Authorization Letter from the authorized signatory of the employer and Valid Signature and photo bearing ID of the representative, if the process is thru a representative other than the PEER (1 photocopy)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit duly accomplished PMRF together with the Report of Employee-Members (Er2 Form) and supporting documents to the frontline officer once the number is called	1. Receive and screen duly accomplished PMRF, Er2 and supporting documents	None	5 minutes per PMRF (25 minutes for 5 individuals)	Frontline Officer LHIO
	2. Reconcile the name/s of the employees indicated in the Er2 form against the attached PMRFs			
	3. Process the received documents			
	4. Print and release the PhilHealth Identification Cards (PIC) and Member Data Records (MDR) to the client			
2. Receive PIC and MDR				
<b>TOTAL</b>		<b>None</b>	<b>25 minutes</b>	

## 6. ENROLLMENT OF GROUP PARTNERS TO GROUP ENROLLMENT PROGRAM

Enrollment of group partners to group enrollment program

<b>Office/Division</b>	Local Health Insurance Offices – Membership			
<b>Classification</b>	Complex			
<b>Type of Transaction</b>	G2G; G2B; G2C			
<b>Who may avail:</b>	All Registered Group Partners			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Letter of Commitment (LOC) or Memorandum of Agreement (MOA)				
Mutual Non-Disclosure Agreement (MNDA)				
Group Enrollment Application Form				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit required documents to the LHIO	2. Received the submitted documents	None	7 working days	LHIO Head/LHIO staff
	3. Check the completeness of the submitted documents			
	4. If incomplete, notify client of the deficiencies			
	5. If complete, Endorse to the Regional Vice President for signature/approval			
	6. Regional Vice President signs/approve the application			Regional Vice President
	7. After approval, require notarization of MNDA and MOA, if MOA is submitted in lieu of LOC			LHIO Head/LHIO staff
	8. After notarization, generate PhilHealth Organized Group Number (POGN)			
	9. Provide copy of POGN, approved LOC or notarized MOA and MNDA to the client			
2. Receive copy of POGN, approved LOC or notarized MOA and MNDA				
<b>TOTAL</b>		<b>None</b>	<b>7 working days</b>	

## 7. ENROLLMENT OF HOUSEHOLD EMPLOYEES (5 EMPLOYEES AND BELOW)

Registration of individuals belonging to the Household category and issuance of their PhilHealth identification Cards (PIC) and Member Data Record (MDR)

<b>Office/Division</b>	Local Health Insurance Offices			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
<b>Who may avail:</b>	All individuals belonging to the Household Employees category such as Kasambahays and Drivers			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Household Employer Unified Registration Forms (HEUR1, HEUR2) and Kasambahay Unified Registration Form (KUR) (original, 2 copies)			downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO	
PhilHealth Membership Registration Form (PMRF) (original 2 copies)			downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO	
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Secure and submit duly accomplished Kasambahay Unified Registration Form (KURF) and/or PMRF (for Family Driver) together with the Household Employment Unified Report (HEUR2) form and supporting documents (if any) to the frontline staff	1. Receive and screen submitted KURF/PMRF and supporting documents	None	5 minutes per PMRF (25 minutes for 5 individuals)	Frontline Officer LHIO
	2. Reconcile the name/s of the Kasambahay/Family Driver indicated in the HEUR2 form against the attached KURF/PMRF			
	3. Advise client to wait for the release of PIC, MDR and copy of processed HEUR2			
	4. Process the receive documents			
	5. Print PICs and MDRs			
	6. Print and sign the processed HEUR2 and KURF in 3 copies and require the client to sign the same			

2. Sign the processed HEUR2 and KURS and hand them back to the front line officer.	7. Give the client 1 duly-signed copies of the processed HEUR2 and KURF and keep the other 2 originally-signed copies for endorsement to SSS and for PhilHealth file copy.			
3. Receive copy of processed HEUR2, KURF, PICs and MDRs from the frontline staff	8. Release PICs and MDRs to the client.			
<b>TOTAL</b>		<b>None</b>	<b>25 minutes</b>	

## 8. ENROLLMENT OF HOUSEHOLD EMPLOYEES (6 EMPLOYEES AND ABOVE)

Registration of individuals belonging to the Household category and issuance of their PhilHealth identification Cards (PIC) and Member Data Record (MDR)

<b>Office/Division</b>	Local Health Insurance Offices			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
<b>Who may avail:</b>	All individuals belonging to the Household Employees category such as Kasambahays and Drivers			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Household Employer Unified Registration Forms (HEUR1, HEUR2) and Kasambahay Unified Registration Form (KUR) (original, 2 copies)		downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO		
PhilHealth Membership Registration Form (PMRF) (original 2 copies)		downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Secure and submit duly accomplished Kasambahay Unified Registration Form (KURF) and/or PMRF (for Family Driver) together with the Household Employment Unified Report (HEUR2) form and supporting documents (if any) to the frontline staff	1. Receive and screen submitted KURF/PMRF and supporting documents	None	3 working days	Frontline Officer LHIO
	2. Reconcile the name/s of the Kasambahay/Family Driver indicated in the HEUR2 form against the attached KURF/PMRF			
	3. Receive the documents and inform client to return after 3 days for the release of PIC, MDR and copy of processed HEUR2.			
	4. Process the receive documents and print the PICs and MDRs			

	5. Print and sign the processed HEUR2 and KURF in 3 copies, set aside in a secure storage area and wait for the return of the client			
2. Return to the LHIO after 3 days	6. Require the client to sign the 3 copies of processed HEUR2 and KURF			
3. Sign the processed HEUR2 and KURS and hand them back to the front line officer.	7. Give the client 1 duly-signed copies of the processed HEUR2 and KURF and keep the other 2 originally-signed copies for endorsement to SSS and for PhilHealth record.			
4. Receive copy of processed HEUR2, KURF, PICs and MDRs from the frontline staff	8. Release the PICs and MDRs to the client			
<b>TOTAL</b>		<b>None</b>	<b>3 working days</b>	

## 9. ENROLLMENT OF INDIVIDUALS TO GROUP ENROLLMENT PROGRAM

<b>Office/Division</b>	Local Health Insurance Offices – Membership and Collection			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G; G2B; G2C			
<b>Who may avail:</b>	All individuals except Senior Citizens, Lifetime Members, Active Indigent Members, Active Employed Sector members, Active Kasambahays and Active Point of Service (POS) or Sponsored Members (OPAPP, KIA, KIPO and DSWD)			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
PhilHealth Membership Registration Form (PMRF)			PhilHealth website, LHIOs	
Certified List of Individuals for Enrollment to GEP in excel format				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit duly accomplished PMRF and certified list of individuals for enrollment to GEP in excel format	1. Receive the submitted documents	None	30 minutes for 5 members and below  1 working day for 6 members and above	LHIO Head/ LHIO Staff
	2. Check the completeness of the submitted documents			
	3. If incomplete, notify the client of the deficiencies			
	4. If complete, generate PhilHealth Identification Number (PIN)			
	5. Generate Group Statement of Premium Account (Group SPA)			
	6. Endorse Group SPA and list of members with PIN to group partner for payment of premium contribution			
2. Receive group SPA and List of Members with PIN				
<b>TOTAL</b>		<b>None</b>	<b>30 minutes for 5 members and below 1 working day for 6 members and above</b>	



# 10. ENROLLMENT OF SENIOR CITIZENS (BULK FROM OSCA\_MORE THAN 5 SC MEMBERS)

Registration of individuals belonging to the Senior Citizens category and issuance of their PhilHealth identification Cards (PIC) and Member Data Record (MDR)

<b>Office/Division</b>	Local Health Insurance Offices	
<b>Classification</b>	Complex	
<b>Type of Transaction</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen	
<b>Who may avail:</b>	All Filipinos who have reached sixty years of age, even without contribution to the National Health Insurance Program for as long as the subsidy of the National Government for the premium contribution of this category continues.	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Request letter and Transmittal list from OSCA		
PhilHealth Membership Registration Form (PMRF) (original 2 copies) duly signed by the Member		
1 x 1 photo taken within the last six (6) months; and (2 pcs)		
Senior Citizens' Identification Card issued by the OSCA in the city or municipality where the elderly resides; or		
ANY of the following as proof of status as senior citizen: (1 clear photocopy) <ul style="list-style-type: none"> <li>• Philippine passport;</li> <li>• Birth certificate;</li> <li>• Baptismal Certificate;</li> <li>• Valid Driver's license;</li> <li>• Voter's ID;</li> <li>• SSS/GSIS ID;</li> <li>• Valid Professional Regulatory Commission (PRC) ID;</li> <li>• Postal ID;</li> <li>• National Bureau of Investigation (NBI) Clearance;</li> <li>• Overseas Filipino Worker's ID;</li> <li>• Valid identification cards issued by recognized</li> </ul>		

government institutions/agencies/corporations that specify the full name, sex, date of birth, address and signature of owner; or				
In the absence of the abovementioned documents, the following may be accepted, subject to PhilHealth validation: (original)				
<ul style="list-style-type: none"> <li>• Certificate from the National Council for the Welfare of Disabled Persons (NCWDP);</li> <li>• DSWD or Local DSWD certification;</li> <li>• Barangay Certification and Affidavit from two (2) disinterested persons certifying the age and identity of the elderly person.</li> </ul>		National Council for the Welfare of Disabled Persons  Department of Social Welfare and Development Barangay Hall Notary public		
Letter from the OSCA (original) designating the bearer as authorized person/representative and Valid ID w/ photo of bearer/authorized representative (original and photocopy)		OSCA and representative		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complete requirements/ documents once the number is called.	1. Receive documents. Check completeness of received documents against transmittal list	None	7 working days	Frontline Officer LHIO
	2. Process the receive documents in backroom			Backroom Personnel (Membership Staff)
	3. Print Member Data Record (MDR) and PhilHealth Identification Card (PIC)			
	4. Release the Identification Card to the client together with the Member Data Record (MDR) and have the client acknowledge receipt of the documents by affixing his signature over his printed name in the releasing logbook.			Frontline Officer LHIO
2. Receive the				

Identification Card and Member Data Record (MDR) and sign in the releasing logbook.				
<b>TOTAL</b>		<b>None</b>	<b>7 working days</b>	

## 11. ENROLLMENT/ REGISTRATION OF NHTS / 4PS BENEFICIARIES FROM THE DSWD (UNMATCHED)

Enrollment/ Registration Of NHTS / 4ps Beneficiaries From The DSWD(Unmatched)

<b>Office/Division</b>	FOD – Membership Section			
<b>Classification</b>	Complex			
<b>Type of Transaction</b>	G2G; G2B; G2C;			
<b>Who may avail:</b>	All members qualified to be included in the Indigent Program based on the assessment of DSWD.			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Certificate of Financial Assessment as Financially Incapable 2. PMRF duly signed by the Member 3. Birth Certificate/ Marriage Contract/ Valid ID 4. Other documents, as necessary (e.g. Certificate of guardianship)			Member PhilHealth Website	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. MMG to forward downloaded list of indigent members for processing	1. Sort and segregate list of indigent members	None	7 working days	Membership Section Head/ Membership Section Staff
	2. Print list			
	3. Identify BRN and create batch numbers			
	4. Verifies members for possible existing PIN			
	5. Record / Exclude Active Members			
	6. Include/Enroll/Register/Renew qualified indigent members			
	7. Countercheck number of processed members from the list			
	8. Verify members without barangay address			
	9. Finalize list			
2. Remind completion of indigent member registration/ enrollment	10. Prepare and submit Certificate of Completion			FOD Chief/ Membership Section Head
<b>TOTAL</b>		<b>None</b>	<b>7 working days</b>	

## 12. ENROLLMENT/ REGISTRATION OF MEMBERS UNDER POS-FI\_THRU HCIS

PIN issuance and assignment of validity for members who enrolled through the POS scheme/Onsite Rapid Enrollment (ORE) in HCIs.

PIN Issuance and assignment of validity for members who enrolled through the POS scheme/ Onsite Rapid Enrollment (ORE) in HCl's.				
Office/Division	PRO Membership Section			
Classification	Simple Transaction			
Type of Transaction	G2G - Government to Government; G2B- Government to Business; G2c- Government to Citizen			
Who may avail:	POS Hospitals			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1. Certificate of Financial Assessment as Financially Incapable			HCI's Social Welfare Office	
2. PMRF duly signed by the Member			PhilHealth website/ HCI	
3. Birth Certificate/ Marriage Contract/ Valid ID				
4. Other documents, as necessary (e.g. Certificate of guardianship)				
5. The HCI should encode the transaction in the POS System				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. POS HCIs to enter patient information in POS System	1.1 Check pending transaction in MCIS-ERAS	None	1 to 3 working days	Membership Section Staff
	1.2 Check for possible existing PIN			
	1.3 If without existing PIN, save and issue new PIN If with existing PIN, save and absorb existing PIN			
	1.4 PIN with active contribution, capture PIN for tagging in system with PIN eligible PIN is inactive, capture existing PIN during validation to assign validity as POS-FI			
	1.5 If existing and is an active Listahanan/4PS but outside catchment area- tag as Denied and notify HCI regarding active PIN If emancipated minor declared as dependents to active NHTS members - tag as Denied and notify HCI to advise patient to enroll under PC 32, s. 2015			
	Notify HCIs of the PIN to be used			
TOTAL		None	3 working days	

### 13. ENROLLMENT/ REGISTRATION OF MEMBERS UNDER POS-FINANCIALLY INCAPABLE THRU LHIOS

PIN issuance and assignment of validity for members enrolled under POS-Financially Incapable thru LHIOs

Office/Division	Local Health Insurance Office				
Classification	Simple Transaction				
Type of Transaction	G2G - Government to Government; G2B- Government to Business; G2c- Government to Citizen				
Who may avail:	Members				
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE			
1.	Certificate of Financial Assessment	DSWD			
2.	PMRF duly signed by the Member	PhilHealth website			
3.	Birth Certificate/ Marriage Contract/ signature bearing Valid ID				
4.	Proof of Confinement				
5.	Other documents, as necessary (e.g. Certificate of guardianship)				
CLIENT STEPS		AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Member to secure Certificate of Financial Assessment as Financially incapable to DSWD for submission to LHIOs	1. Received requirements from member	None	1 to 3 working days	LHIO Staff	
	1. Screen submitted documents				
	2. if without existing PIN, issue new PIN as POS- FI				
	3. If with existing PIN and is inactive, change category to POS-FI				
	4. If w/ existing PIN and is an active Listahanan/4PS or any category, inform the member.				
	5. Issue MDR with validity as POS-FI				
TOTAL		None	3 working days		

## 14. CHECK RELEASING TO HEALTH CARE INSTITUTIONS

Releasing of check to Health Care Institutions for payment of benefit claims.

<b>Office/Division</b>	Local Health Insurance Offices – Membership			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business			
<b>Who may avail:</b>	All HCIs who are not enrolled in the Auto-Credit Payment Scheme			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Valid signature and photo bearing ID of HCI authorized check claimant, if client is HCI authorized check claimant (1 photocopy)				
Authorization Letter from the HCI authorized check claimant and Valid signature and photo bearing ID of the HCI authorized check claimant and the representative, if the process is thru a representative (1 photocopy)				
Official Receipt/s				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Present valid IDs and/or authorization letter once number is called at the Check Releasing Counter/Cashier's window	Assess IDs and/or authorization letter presented and verify if claim check/s is available	None	30 minutes	Frontline Officer at the Check Releasing Counter/Cashier's Window – LHIO
	If claim check is not yet available, advise client of the status of the check			
	If claims check is available, release the check/s to the client			
Countercheck/validate cheques received then acknowledge receipt of check by affixing signature in the logbook and disbursement voucher	Require client to acknowledge receipt of the check by signing the logbook and disbursement voucher.			
Acknowledge receipt of check and issue official receipt	Receive the official receipt and file			
<b>TOTAL</b>		<b>None</b>	<b>30 minutes</b>	

## 15. CHECK RELEASING TO MEMBERS

Releasing of benefit payment check to members for those who were not able to avail of automatic deduction during confinement and other cases allowed by existing guidelines on processing of benefit claims.

<b>Office/Division</b>	Local Health Insurance Offices – Membership			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business			
<b>Who may avail:</b>	All members who have legitimate reimbursement of benefit claims in PhilHealth due to cases allowed by existing guidelines.			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
2 Valid signature and photo bearing IDs of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and 2 Valid signature and photo bearing IDs of the member and the representative, if the process is thru a representative (1 photocopy)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Present valid IDs and/or authorization letter once number is called at the Check Releasing Counter/Cashier's window	1. Assess IDs and/or authorization letter presented and verify if claim check/s is available	None	15 minutes	Frontline Officer at the Check Releasing Counter/Cashier's Window - LHIO
	2. If claim check/s is not yet available, advise client of the status of the check			
	3. If claims check is available, release the check/s to the client			
	4. Require client to acknowledge receipt of the check/s by signing in the check releasing logbook.			
2. Acknowledge receipt of the check/s				
<b>TOTAL</b>		<b>None</b>	<b>15 minutes</b>	



## 16. CLEAN-UP OF MULTIPLE PINS THROUGH ONLINE METHOD

Clean-up of Multiple PINs requested by LHIOs and HCPs through online channels.

<b>Office/Division</b>	PRO Membership Section			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G; G2B; G2C			
<b>Who may avail:</b>	All members admitted in HCPs			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Proof of multiple PINs		Member		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. HCP representative or LHIOs requests/forward identified Multiple PINs	1.1 Print emailed request	None	1 working day	Membership Section Staff
	1.2 Assess veracity of the forwarded multiple PINs			
	1.3 Notify HCPs or LHIOs if there is inaccuracy in the identified multiple PINs			
	1.4 If the identified multiple PINs are accurate, Tag PINs and facilitate clean-up process			
	1.5 Inform HCPs or LHIOs of the retained and clean-up PINs.			
<b>TOTAL</b>		None	1 working day	

## 17. DECLARATION OF DEPENDENTS

Editing of data records in the membership database for the purpose of declaring dependents during initial registration, declaring additional dependents not previously declared, transferring legal and qualified dependents from another PhilHealth member who becomes inactive.

<b>Office/Division</b>	Local Health Insurance Offices	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen	
<b>Who may avail:</b>	All existing PhilHealth members and all prospective members who want to declare legal and qualified dependents	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
PhilHealth Membership Registration Form (PMRF) (original, 2 copies)		downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO
<b>No documentary requirement is required during initial registration</b> except when the surname of the declarant member is different from the surname of the dependent spouse, child or parent		Not applicable
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)		
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)		
<b>For updating or correction of existing member data records, the following documents are required</b> (clear photocopy of the following documents, 1 copy)		
<b>DEPENDENT SPOUSE</b>		
Spouse	Marriage certificate/Contract with registry number	Philippine Statistics Authority (PSA)
	For marriage which took place abroad, marriage certificate stamped "Received" by the Philippine Embassy or consular office exercising jurisdiction over the place of marriage OR copy of the Marriage Contract duly issued by the NSO	Philippine Embassy; or Consular Office in the country where the marriage took place

	indicating that such marriage has been registered thereat	
(b) Muslim Spouse	Affidavit of Marriage issued by the Office of Muslim Affairs (OMA), which passed through the Shari'a Court and must be registered/authenticated in the National Statistics Office (NSO)	Office of Muslim Affairs / PSA (If the marriage has been registered with the PSA, the PSA can issue a copy of the MC printed on its security paper)
(c) 2 <sup>nd</sup> spouse	Death Certificate of 1 <sup>st</sup> Spouse Marriage Contract with 2 <sup>nd</sup> Spouse	PSA
<b>DEPENDENT CHILD</b>		
(a) Legitimate or illegitimate children below 21 years old	<ul style="list-style-type: none"> <li>Birth Certificate with registry number or Baptismal Certificate reflecting the name of the member as parent</li> <li>For births which took place abroad, Birth Certificate Stamped "received" by the Philippine embassy or Consular office exercising jurisdiction over the place of birth</li> </ul>	Philippine Statistics Authority (PSA) Church where the baptismal took place Philippine Embassy; or Consular Office in the country where the child was born
(b) Adopted children below 21 years old	<ul style="list-style-type: none"> <li>Court Decree/Resolution of Adoption or Birth Certificate of the adopted child/ren in which adoption is annotated thereto</li> </ul>	Trial court who heard the adoption proceedings Philippine Statistics Authority (PSA)
(c) Stepchildren below 21 years old	<ul style="list-style-type: none"> <li>Marriage Certificate (with registry number) between biological parents and step father/stepmother and Birth Certificate/s (with registry number) of the stepchildren</li> </ul>	Philippine Statistics Authority (PSA)
(d) Mentally or physically disabled children who are 21 years old and above	<ul style="list-style-type: none"> <li>Birth Certificate and original Medical Certificate issued by the attending physician within the past 6 months stating and describing the extent of disability</li> </ul>	Philippine Statistics Authority (PSA) Any licensed physician in the Philippine
(e) Foster Child	<ul style="list-style-type: none"> <li>Foster Placement Authority from DSWD</li> </ul>	Department of Social Welfare and Development Offices
<b>DEPENDENT PARENT</b>		
(a) Parent/s 60 years old and above		

<ul style="list-style-type: none"> <li>Birth Certificate with registry number of both registrant and parent (in the absence of Birth Certificate of parent, any proof attesting to the date of birth of parent/s)</li> </ul>		Philippine Statistics Authority (PSA)		
(b) Step parents 60 years old and above <ul style="list-style-type: none"> <li>Marriage Certificate/Contract with registry number between biological parent of the member-child and the stepparent;</li> <li>Birth Certificate of the stepparent (in its absence, a notarized affidavit of 2 disinterested persons attesting to the date of birth);</li> <li>Birth Certificate of the member-child indicating the name of his/her biological parent; and</li> <li>Death Certificate of member's deceased biological parent</li> </ul>		Philippine Statistics Authority (PSA)  Philippine Statistics Authority (PSA) Any licensed Notary Public Philippine Statistics Authority (PSA)  Philippine Statistics Authority (PSA)		
(c) Adoptive parents 60 years old and above <ul style="list-style-type: none"> <li>Court Decree/Resolution of Adoption or photocopy of Birth Certificate of the child in which the adoption is annotated thereto; and</li> <li>Birth Certificate/s of adoptive parents or in its absence, a notarized affidavit of 2 disinterested persons attesting to the date of birth</li> </ul>		Trial court who heard the adoption proceedings  Philippine Statistics Authority (PSA) Any licensed Notary Public		
(d) Parents with permanent disability totally dependent with member <ul style="list-style-type: none"> <li>Original Medical Certificate issued by the attending physician within the past 6 months stating and describing the extent of disability</li> </ul>		Any licensed physician in the Philippine		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit duly accomplished PMRF and supporting documents	2. Receive and screen duly accomplished PMRF with supporting documents	None	10 minutes per PMRF	Frontline Officer - LHIO
	3. Update member's data			
	4. Print and release Member Data Record (MDR)			
2. Receive updated MDR				
<b>Total</b>		<b>None</b>	<b>10 minutes per PMRF x No. of PMRF</b>	

## 18. EMPLOYER/EMPLOYEE REGISTRATION, AND UPDATING OF RECORDS USING DROPBOX METHOD (5 EMPLOYEES AND BELOW)

Receiving and processing of employer and employee registration and updating of records using a dropbox method.

<b>Office/Division</b>	Local Health Insurance Office			
<b>Classification</b>	COMPLEX			
<b>Type of Transaction</b>	G2C - Government to Citizen; G2B - Government to Business			
<b>Who may avail:</b>	All newly registered employers/ updating of employers/members records			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
ER1, ER2, ER3, PMRF		downloadable at <a href="http://www.philhealth.gov.ph/LHIOs">www.philhealth.gov.ph/LHIOs</a>		
Photocopy of supporting documents (SEC, DTI,BIR Registration, Mayor's Permit , CDA, BIR 2303)		Concerned Govt. Agencies/Office		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Drop duly accomplished PhilHealth Forms and supporting documents in the dropbox intended for the purpose	1. Receive and screen documents	None	7 working days	LHIO Personnel
	2. Processing receive documents and generate records (COR,EDR,MDR,ID)			
	3. Email/text employer for pick-up of generated records			
	4. Release generated records			
<b>TOTAL</b>		None	7 working days	

## 19. ENROLLMENT/REGISTRATION OF EMPLOYERS

The Local Health Insurance Offices shall register employers in the private/government sector.

<b>Office/Division</b>	Local Health Insurance Offices - Membership	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business; G2C- Government to Citizen	
<b>Who may avail:</b>	All Private and Government Agencies	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
<b>Manual Registration</b>		
For Government Employers:		
Employer Data Record Form (1 properly accomplished original copy)		Any PhilHealth Office/LHIO/PhilHealth Website
For Private employers:		
ER1 (1 properly accomplished original copy) 1 original copy		Any PhilHealth Office/LHIO/PhilHealth Website
Business permit / license to operate and/or any of the following:		
Department of Trade and Industry (DTI) Registration (Single proprietorship)		Department of Trade and Industry (DTI) Registration
Securities and Exchange Commission (SEC) Registration (Partnerships, Corporations, Foundations, & Non-Profit Organizations)		Securities and Exchange Commission
Cooperative Development Authority (CDA) Registration (Cooperatives)		Cooperative Development Authority
Barangay Certification and/or Mayor's Permit (Backyard Industries/Ventures and Micro-Business Enterprises)		Barangay Hall/City Hall
BIR Form No. 2303 (Tax Registration)		Bureau of Internal Revenue
Valid signature and photo bearing ID of the PEER, if client is the PEER (1 photocopy)		
Authorization Letter from the authorized signatory of the employer (original) and Valid Signature and photo bearing ID of the authorized signatory and the representative, if the transaction is thru a representative other than the PEER (1 photocopy)		

<b>Electronic Registration</b>				
For private employers who goes through;				
Registration through the Securities and Exchange Commission – Integrated Business Registration System (SEC-IBRS) – Unified Registration Record (URR)				
Registration through the Philippine Business Registry (PBR) – Information Sheet				
For Household Employers:				
Household Employer Unified Registration Form (HEUR1) (3 properly accomplished original copy)		Any PhilHealth Office/LHIO/PhilHealth Website		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit properly accomplished ER1/HEUR1 Form together with the supporting documents to any Local Health Insurance Office	Receive and assess the veracity and completeness of the submitted documents	None	15 minutes per employer	LHIO Head/LHIO Staff of the Membership Section
	If incomplete, notify client			
	If complete, check for possible existing PhilHealth Employer Number (PEN)			
	If with existing PEN, notify client			
	If no existing PEN, assign a new PEN			
	Release documents to the client (EDR, COR)			
<b>TOTAL</b>		<b>None</b>	<b>15 minutes per employer</b>	

## 20. KONSULTA REGISTRATION

Registration of PhilHealth members to Accredited Konsulta Facility.

<b>Office/Division</b>	Local Health Insurance Office			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2C - Government to Citizen; G2B - Government to Business			
<b>Who may avail:</b>	All members			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>PhilHealth Konsulta Registration Form (PKRF)</b>		Konsulta Accredited Facility LHIO		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit duly accomplished PKRF	1. Received properly accomplished PKRF. 2. Encode in UPCM and generate ATC.	None	5 minutes	LHIO personnel
<b>TOTAL</b>		<b>None</b>	<b>5 minutes</b>	



## 21. MEMBER REGISTRATION FROM POINT-OF-AVAILMENT (ONLINE METHOD)

The Field Operations Division - Local Health Insurance Offices shall provide convenience and protect the interest of all clients while aligning our processes to the mandate of contactless transactions, expedite processing of registration and generation of PIN.

<b>Office/Division</b>	Local Health Insurance Offices - Membership			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business; G2C- Government to Citizen			
<b>Who may avail:</b>	All members			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. Duly Filled out PMRF/s and signed by the Member			Accredited HCPs	
Valid Signature and Photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
Applicable supporting documents				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Client submit duly accomplished PMRFs to the PhilHealth Section of HCPs	None	None	3 working days	LHIO Head/Staff
2. HCP representative conducts initial evaluation of documents	None	None		
3. HCP representative shall scan and email documents to the LHIO	1. Check email and assess the veracity and completeness of received documents	None		
	2. Save electronic copies of received documents	None		
	3. Provide feedback to the HCPs	None		
4. HCP representative submit hardcopy of the original signed PRMF and photocopies of supporting documents to the LHIO	4. Receive the documents for safekeeping, storage and/or eventual disposal			
<b>TOTAL</b>		<b>None</b>	<b>3 Working days</b>	

## 22. PROCESSING OF INQUIRY OF WALK IN CLIENTS

The Field Operations Division - Local Health Insurance Offices shall provide services to walk-in clients.

<b>Office/Division</b>	Local Health Insurance Offices - Membership			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business; G2C- Government to Citizen			
<b>Who may avail:</b>	All walk-in clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
PhilHealth Identification Card/PIN, or		PhilHealth Local Health Insurance Offices		
Valid signature and photo bearing ID of the member, if client is the member				
Authorization Letter from the member (original) and Valid signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Convey inquiry to the PAC-D Officer	Answer the inquiry If the inquiry leads to other process/es, advise the client accordingly	None	10 minutes maximum per client	PACD Officer - LHIO
<b>TOTAL</b>		<b>None</b>	<b>10 minutes per client</b>	

### 23. RECEIVING OF APPLICATION FOR ACCREDITATION BY HEALTH CARE INSTITUTIONS

Receiving of application for accreditation filed by Health Care Institutions (HCPs) in the Philippines.

Office/Division	Local Health Insurance Offices - Membership			
Classification	Simple			
Type of Transaction	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
Who may avail:	All Health Care Institutions willing and qualified to participate in the National Health Insurance Program.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Application for Accreditation (Original)		Applicant/Concerned Health Care Institution		
Payment Slip or Order of Payment		Local Health Insurance Office		
Other supporting documents for application for accreditation (Original)				
Valid signature and photo bearing ID of the HCIs authorized signatory, if client is the authorized signatory of the HCI (1 photocopy)				
Authorization Letter from the authorized signatory of the HCI (original) and Valid signature and photo bearing ID of the authorized signatory and the representative, if the transaction is thru a representative (1 photocopy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit duly accomplished application forms for accreditation and supporting documents together with the properly-filled -out payment slip/order of payment once priority number is called.	1.1 Receive Provider Data Record (PDR), other accreditation documentary requirements and payment slip/order of payment	Based on applicable charges	15 minutes	Frontline Officer - LHIO
	1.2 Screen application and other documentary requirements as to completeness of requirements			
	1.3 Write down the HCI data in the receiving logbook			

If the application is not complete, get the receiving copy of the application, receive deficiency letter and explanation on the content of the letter and sign under "disposition" column in the receiving logbook	If the application is not complete, return the application to the HCI, furnish a Deficiency Letter, explain the content of the deficiency letter and ask HCI representative to sign under "disposition" column in the receiving logbook			
	If the application is complete, stamp complete the file copy and the receiving copy (PDR and the 1st page of the other requirements)			
	1.4 Compute for the fees to be paid and accomplish payment slip/order of payment			
	1.5 Give payment slip/order of payment to the client and advice to proceed to the Payment Processor window and return after payment has been made			
2. Proceed to Cashier for payment	2. Receive payment for accreditation of the HCI, print and release Official Receipt		5 minutes	Collecting Officer - LHIO
3. Proceed to frontline service counter and get receiving copy of the PDR and other requirements.	3. Release the receiving copy of the PDR and other requirements to the HCI representative		10 minutes	Frontline Officer - LHIO
	If LHIO has an Integrated PhilHealth Accreditation System (iPAS) , encode the following HCI data in the receiving module of IPAS: Name of HCI Address Date of submission OR number Amount of payment			

	Date of Payment Manner of submission Documents submitted			
<b>TOTAL</b>		Based on Applicable Charges	<b>30 minutes</b>	

## 24. RECEIVING OF APPLICATION FOR ACCREDITATION BY HEALTH PROFESSIONALS

Receiving of application for accreditation filed by Health Care Professionals (HCP) in the Philippines

Office/Division	Local Health Insurance Offices - Membership			
Classification	Simple			
Type of Transaction	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
Who may avail:	All Health Care Professionals willing and qualified to participate in the National Health Insurance Program.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Application for Accreditation (Original)		Applicant/Concerned Health Care Professionals		
Other supporting documents for application for accreditation (Original)				
Valid signature and photo bearing ID of the HCP, if client is the HCP (1 photocopy)				
Authorization Letter from the HCP (original) and valid signature and photo bearing ID of the HCP and the representative, if the process is thru a representative (1 photocopy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit duly accomplished application form for accreditation and supporting documents to the frontline officer once the number is called	Receive application for accreditation, and other supporting documents	None	30 minutes	Frontline Officer - LHIO
	Screen receive documents as to completeness of requirements			
	Write down the Health Care Professional data in the receiving logbook			
	If the application is not complete, return the application to the client, furnish Deficiency Letter, explain content of deficiency letter and ask the client to sign under "disposition" column in the receiving logbook			

If the application is complete, get the receiving copy of all the requirements and receipt of payment.	If the application is complete, stamp complete the file copy and receiving copy of the application and the 1st page of the other requirements.			
	Release receiving copy of the application to the client			
	If LHIO has an Integrated PhilHealth Accreditation System (iPAS) , they will encode the following HCP data in the receiving module of IPAS: Name of Health Care Professional Address Date of submission Manner of submission Documents submitted			
<b>TOTAL</b>		<b>None</b>	<b>30 minutes</b>	

## 25. RECEIVING OF DIRECTLY FILED CLAIMS

Receiving of claims directly filed by the members or their representative because they were not able to avail of the automatic benefit deduction at the facility

<b>Office/Division</b>	Local Health Insurance Offices - Membership	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business; G2C - Government to Citizen	
<b>Who may avail:</b>	All PhilHealth members who were not able to avail of the automatic benefit deduction during confinement.	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Acknowledgement Receipt Form		LHIO
PhilHealth Claim Form 1, 2, 3, & 4 and Claims Signature Form (CF1, CF2, CF3, CF4, CSF) as applicable, depending on the nature of the claims (original)		downloadable at <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO
Hospital and doctor's waiver and official receipts of full payment (original)		Facility where the patient is managed
Original official receipts or photocopies of the same authenticated by PHIC staff (with original copies seen) for medicines bought outside the hospital or laboratory tests performed outside the hospital during confinement "The authenticated photocopies is applicable in cases where original ORs are required by and submitted to HMOs		For medicines: Pharmacy where it is bought For laboratory test: Facility where it is done
Anesthesia, Surgical or Operative Record (if surgery was performed) (photocopy)		Facility where the patient is managed
Hospital Statement of Account duly signed by the hospital clerk or representative of the patient (photocopy)		
Printed PhilHealth Benefit Eligibility Form (PBEF) (for facilities with portal) (original)		
If confined abroad, Medical Certificate or Clinical Abstract indicating final diagnosis of patient, confinement period and services rendered written in English (photocopy)		
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)		
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)		



CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit duly accomplished acknowledgement receipt form and PhilHealth claims with supporting documents to the frontline officer once priority number is called	Receive and screen claims documents as to completeness of documentary requirements (non-medical)	None	10 minutes per claims	Frontline Officer - LHIO
	If the receive documents are found to have deficiency/ies, return the same and advise the client accordingly			
	If the received documents are found to be complete; Stamp "received" in the acknowledgement receipt form and give the client a receiving copy			
Receive acknowledgement receipt or claim with deficiency	Advise client to expect notice/Benefit Payment Notice (BPN) (within the 60-day period)			
<b>TOTAL</b>		<b>None</b>	<b>10 minutes per claim x the no. of claims</b>	

## 26. REGISTRATION OF MEMBERS AND UPDATING OF MEMBER RECORDS USING DROPBOX METHOD

Registration of new members and updating of existing member records using drop box method.

<b>Office/Division</b>	Local Health Insurance Office			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2C - Government to Citizen; G2B - Government to Business			
<b>Who may avail:</b>	All newly registered members/ updating of members records			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
PMRF/ ER2		downloadable at <a href="http://www.philhealth.gov.ph/LHIOs">www.philhealth.gov.ph/LHIOs</a>		
Photocopy of supporting documents (PER PC 2020-001)		Concerned Govt. Agencies/Office		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Drop duly accomplished PhilHealth Forms and supporting documents in the dropbox intended for the purpose	Receive and screen documents	None	3 working days	LHIO Personnel
	Processing receive documents and generate records (MDR,ID)			
	Email/text member for pick-up of generated records			
	Release generated records			
<b>TOTAL</b>		<b>None</b>	<b>3 working days</b>	

## 27. REQUEST FOR RECORDS

Request of Stakeholders for PhilHealth records

Office/Division	Local Health Insurance Offices			
Classification	Simple			
Type of Transaction	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
Who may avail:	All stakeholders subject to compliance of the applicable and existing laws, rules and regulations on releasing of records.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Request Slip for ID and/or MDR, Request letter for other type of documents		Public Assistance Desk – LHIO Not applicable		
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)		Government Institutions, Current Employer		
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit duly accomplished request slip/request letter to the frontline officer once number is called (with supporting document/s if applicable)	Receive properly filled-out request form/ request letter and supporting document/s	None	15 minutes per requested documents	Frontline Officer - LHIO
	Process request of the client			
	Release record/s and require client to acknowledge receipt of the same			
Receive and acknowledge receipt of the requested record/s				
<b>Total</b>		<b>None</b>	<b>15 minutes x the no. of requested documents</b>	

## 28. SUBMISSION OF REMITTANCE REPORT (RF1) FOR EMPLOYERS IN GEOGRAPHICALLY ISOLATED AND DEPRESSED AREAS (GIDA) ONLY

Receiving of remittance report from the employers in GIDA areas only.

Office/Division	Local Health Insurance Offices - Membership			
Classification	Simple			
Type of Transaction	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
Who may avail:	All employers who are non-Electronic Premium Remittance System (EPRS) users and located in Geographically Isolated and Depressed Areas only.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Employer Remittance Report (RF1)		downloadable in <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> , LHIO		
USB Flash Drive containing the report		Not applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit employer remittance report (RF1) and flash drive to the frontline officer once number is called	Receive and screen remittance report and data in the flash drive	None	30 minutes per transaction	Frontline Officer - LHIO
	If there is an issue in the remittance report or the data in the flash drive, return the same and advise the client accordingly			
	If the report and the data is OK, save an electronic copy of the data in the flash drive to the frontlines' computer or any storage device for PhilHealth's file copy and stamp "received" on the remittance report			
	Give the client receiving copy of remittance report and return flash drive to client.			
Receive copy of acknowledged remittance report				
<b>TOTAL</b>		<b>None</b>	<b>30 minutes x no. of transactions</b>	

## 29. UPDATING OF MEMBER DATA RECORDS (MDR) THROUGH ONLINE METHODS

The Field Operations Division - Local Health Insurance Offices shall provide convenience and protect the interest of all clients while aligning our processes to the mandate of contactless transactions.

Office/Division	Local Health Insurance Offices - Membership			
Classification	Simple			
Type of Transaction	G2G - Government to Government; G2B - Government to Business; G2C- Government to Citizen			
Who may avail:	All members			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
PhilHealth Member Registration Form (PMRF) (1 original copy)			PhilHealth Office/website	
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
Applicable supporting documents				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Send email requests to official email addresses of the regional offices.	Check all emails and forward request/s for updating of MDR to the person/unit responsible	None	1 to 3 days from receipt of documents	LHIO Head/LHIO Staff of the Membership Section
	Assess the veracity and completeness of the received documents			
	If incomplete, notify client			
	If complete, check for possible existing PhilHealth Identification Number (PIN)			
	If with existing PIN, update the member's record			
	If no existing PIN, assign a new PIN and encode the information indicated in the PMRF			
	Send electronic MDR to member			
<b>TOTAL</b>		<b>None</b>	<b>3 working days from receipt of documents</b>	

# **A. Local Health Insurance Offices (LHIOs)**

## **II. COLLECTION**

# 1. ADJUSTMENT / CORRECTION OF PAYMENT INFORMATION IN THE DATABASE USING THE TREASURY EDITING MODULE (TDEM)

Adjustment / Correction Of Payment Information In The Database Using The Treasury Editing Module (Tdem)

<b>Office/Division</b>	COLLECTION SECTION / LHIOS			
<b>Classification</b>	Simple Transaction			
<b>Type of Transaction</b>	G2G - Government to Government; G2B- Government to Business; G2c- Government to Citizen			
<b>Who may avail:</b>	Member, Employer, Sponsor & Organized Group			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Original copy of PhilHealth Official Receipts (POR) or PhilHealth Agent Receipts (PAR) or authorized payment receipts			OTCCS PhilHealth / Accredited Collecting Banks / Bayad Centers	
Properly accomplished Data Amendment Request Form (DARF)			Nearest LHIO	
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit required documents to the Collection Section	1.1 Receive and screen submitted documents	None	3 minutes per transaction	Collection Section Staff and LHIO staff
	1.2 Conduct necessary validation and verification through PMAIS and Treasury databases to provide inputs and recommendations	None	12 minutes per transaction	
	1.3 Edit or adjust payment information in the collection database using the Treasury Data Editing Module (TDEM)	None	15 minutes per transaction	
<b>TOTAL</b>		<b>None</b>	<b>30 Minutes</b>	

## 2. COLLECTION OF PREMIUM PAYMENT

The Local Health Insurance Offices shall accept premium payment of all members/some employers of the NHIP.

<b>Office/Division</b>	Local Health Insurance Offices - Collection
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business; G2C- Government to Citizen
<b>Who may avail:</b>	All members and some employers
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)	
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)	
<b>Individual Payment:</b>	
PMRF and proof of income (1 properly accomplished and original copy)	Any PhilHealth Office/LHIO/PhilHealth Website
PhilHealth Premium Payment Slip (PPPS) (1 properly accomplished and original copy)	Local Health Insurance Offices
SPA in consideration the SPA for All Strategy	
<b>EPRS User Employers with 10 and below employees:</b>	
EPRS-generated Statement of Premium Accounts (1 original copy)	Concerned employer
<b>Non-EPRS User Employers located in GIDAS or in Areas where there are ACAs but no available Internet Service Provider (ISP):</b>	
PhilHealth Premium Payment Slip (PPPS) (1 properly accomplished and original copy)	Local Health Insurance Offices
<b>Group Enrollment Program</b>	
PhilHealth Premium Payment Slip (PPPS) (1 properly accomplished and original copy)	Local Health Insurance Offices
Group SPA (1 properly accomplished and original copy)	
Billing statement for orphans enrolled in GEP thru DSWD (1 photocopy)	
<b>Migrant Workers (Land-Based)</b>	
PhilHealth Premium Payment Slip (PPPS) (1 properly accomplished and original copy)	Local Health Insurance Offices



original copy)				
<b>Foreign Nationals</b>				
PhilHealth Premium Payment Slip (PPPS) (1 properly accomplished and original copy)		Local Health Insurance Offices		
<b>Kasambahay</b>		Local Health Insurance Offices		
PhilHealth Premium Payment Slip (PPPS) (1 properly accomplished and original copy)				
<b>Sponsored Members (e.g. LGUs, Legislators, Private Institutions, Individuals, etc.</b>				
PhilHealth Premium Payment Slip (PPPS) (1 properly accomplished and original copy)		Local Health Insurance Offices		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Secure PMRF and payment slip from PACD	1. Direct clients to the appropriate procedures in filling up the PMRF and payment slip	Refer to appropriate schedule of premium contributions	2 minutes	PACD Officer - LHIO
2. Submit duly accomplished PPPS and/or PMRF with proof of income, and/or EPRS generated SPA to the frontline officer	2. Receive and screen received documents; validate the payment slip against the attached proof of income		5 minutes	Frontline Officer - LHIO
3. Proceed to Cashier for payment of premium	3.1 Process the payment, receive the cash or check payment from the payor		5 minutes	Cashier LHIO
	Release the PhilHealth Official Receipt (POR) to payor		3 minutes	
4. Receive the printed POR				
<b>TOTAL</b>		<b>None</b>	<b>15 minutes</b>	

### 3. EMPLOYER'S REQUEST FOR REFUND

Processing of employer's request for refund of double payment or overpayment

<b>Office/Division</b>	FOD-COLLECTION SECTION	
<b>Classification</b>	Highly Technical Transaction	
<b>Type of Transaction</b>	G2G - Government to Government; G2B- Government to Business; G2c- Government to Citizen	
<b>Who may avail:</b>	Employer	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
For payments made thru the Accredited Collecting Agents (ACA)		
Request Letter from Employer (original)		Requesting Employer
PhilHealth Official Receipt (POR)/PhilHeath Agent's Receipt(PAR)		Requesting Employer
Statement of Premium Account (SPA)/Transaction Monitoring History		Requesting Employer
For payments made thru the Over-the-Counter Collection System (OTCCS) at LHIOS		
Request Letter from Employer (original)		Requesting Employer
PhilHealth Official Receipts (1 photocopy)		Requesting Employer
Bank validated deposit slips where the proceeds of premium payment for verification in included (1 photocopy)		Requesting Employer
Bank Statement showing the amount deposited and subsequently swept (1 photocopy or snapshot)		Requesting Employer
Common requirements, whether payment is made thru ACA or OTCCS		
Properly accomplished DATA Amendment Request Form (DARF)		
Payroll applied for refund (1 photocopy)		Requesting Employer
Business permit or any equivalent documents indicating the date of operation		Requesting Employer
Recommendation Letter from the Collection Section of the PRO/Branch		
Transmittal Letter from the Office of the Regional Vice President (ORVP) to the Office of the Area Vice President (OAVP)		
Transmittal Letter from the OAVP to the FMS – Treasury Department		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit request letter and supporting documents to LHIO or via email	Receive and screen submitted documents	None	1 to 20 working days	LHIO Staff
	Validate payroll			
	Conduct completed staff work (CSW)			
	Prepare transmittal for endorsement to PRO			
	Conduct the necessary validation and verification through PMAIS,EPRS and Treasury databases to provide inputs and recommendations.			Collection Section of the PRO
	If the request is found to be valid, ColSec and the Office of the RVP shall accomplish the Data Amendment Request Form (DARF) and indicate their recommendation for the unreconciled or unposted transaction and endorse the employer's letter request with the attached supporting documents including the duly accomplished DARF to the Office of the Area Vice -President for approval/or denial.			
	Area Vice President signs the approval portion of the DARF. Once approved by the Area Vice President, the documents shall be endorsed to the Treasury Department-FMS.			Area Vice President /OAVP Staff
	Cancel and tag the transaction as "double payment" in the Treasury Database			Treasury Department-FMS
	Transfer the amount of refund to the PRO.			
	Endorse the approved request to PRO concerned with the directive to process the refund.			
	Upon receipt of the approval, the concerned PRO-FMS shall process the refund according to government accounting rules and regulations and applicable policies of the corporations			PRO-FMS Staff
<b>TOTAL</b>		<b>None</b>	<b>20 working days</b>	

#### 4. EMPLOYER REQUESTS TO COMPROMISE, WAIVE OR RELEASE, IN WHOLE OR IN PART, INTERESTS AND/OR SURCHARGES AND PAYMENT OF PREMIUM ARREARS THROUGH INSTALLMENT ARRANGEMENTS

Handling of employer's request for waiver of interest on missed/late contribution payment and/or the settlement of past due premiums or arrearages and their applicable interests/surcharges through installment arrangement.

<b>Office/Division</b>	FOD-COLLECTION SECTION			
<b>Classification</b>	Highly Technical Transaction			
<b>Type of Transaction</b>	G2G - Government to Government; G2B- Government to Business; G2c- Government to Citizen			
<b>Who may avail:</b>	Employer			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Request letter from the employer clearly stating the reason for the request (original)			Concern establishment / Government Office/Agency	
Statement of Premium Account (SPA) (1 photocopy)			Concern establishment / Government Office/Agency	
Employer Profile to be accomplished by Philhealth Accounts Officer (original)				
Valid signature and photo bearing ID of the authorized signatory of the employer, if client is the authorized signatory of the employer (1 photocopy)				
Authorization Letter from the authorized signatory of the employer (original) and Valid Signature and photo bearing ID of the authorized signatory of the employer and the representative, if the process is thru a representative (1 photocopy)				
Other documents, if necessary				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Submit request to the nearest PRO or LHIO	Receive and screen the completeness of documents submitted against the checklist provided for the purpose If receive in LHIO, endorse to the Collection Section of the PRO	None	20 working days	LHIO Staff/ Collection Section Staff
	Encode in monitoring sheet to track TAT			Collection Section Staff
	Conduct complete staff work (CSW) to prepare the case for deliberation			

	Prepare presentation of request and set schedule for deliberation of the Committee			Committee Secretariat
	Deliberate request of employer			Committee
	Prepare a CIEF, Resolution/reply letters based on the result of deliberation			Committee Secretariat
	Endorse Resolution and reply letter to the Regional Vice President for his approval / denial			
	If the total amount to be waived is less than 100,000. Endorse Resolution Memorandum to the Regional Vice President for approval/denial.			
	Regional Vice President approve or deny request and send back documents to the Committee Secretariat			Regional Vice President/ORVP Staff
	If employer request for exemption to interest is more than 100,000, endorse Resolution Memorandum to the concerned Area Vice President for approval/denial.			Committee Secretariat
	Area Vice President approve or deny request and send back the documents to the Committee Secretariat.			Area Vice President/OAVP Staff
	Send Resolution Memorandum to LHIOs or requesting party			Committee Secretariat
<b>TOTAL</b>		<b>None</b>	<b>20 working days</b>	

## 5. EXTENSION OF PAYMENT DEADLINE

Request of stakeholders to adjust the deadline of payment for reasons acceptable to the Corporation.

<b>Office/Division</b>	FOD-COLLECTION SECTION			
<b>Classification</b>	Simple Transaction			
<b>Type of Transaction</b>	G2G - Government to Government; G2B- Government to Business; G2c- Government to Citizen			
<b>Who may avail:</b>	Employer			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
<b>CHECKLIST OF REQUIREMENTS:</b>				
Request Letter				
Statement of Premium Account				
Copy of declaration of holidays				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request letter and supporting documents to the Collection Section of the PRO	1. Receive and evaluate receive request letter and supporting documents	None	1 working day	Collection Section Head
	2. Adjust EPRS deadline using COMIS		1 working day	
	3. Notify client		1 working day	
<b>TOTAL</b>		None	3 working days	

## 6. PREMIUM REMITTANCE UNDER THE GROUP ENROLLMENT PROGRAM

Brief description of the service

<b>Office/Division</b>	Local Health Insurance Offices – Cashier and Membership			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G; G2B; G2C			
<b>Who may avail:</b>	All Registered Group Partners			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Generated Group Statement of Premium Account (Group SPA)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Present generated Group SPA and pay premium either in check or in cash	Receive Group SPA and premium payment	None	15 minutes for 5 members and below  1 working day for 6 members and above	LHIO Cashier
	Process payment			
	Issue PhilHealth Official Receipt (POR) and advise client to present it to LHIO Membership staff for generation and release of PhilHealth Identification Cards (PICs) for new members.			
Receive POR and go to the membership section of the LHIO to get PICs	Print and release PICs of new members to the client			LHIO Membership Staff
Receive PICs	Advise client to inform members to register their PhilHealth Identification Number (PIN) in the PhilHealth Member Portal for downloading of their updated Member Data Record (MDR)			
<b>TOTAL</b>		<b>None</b>	<b>15 minutes for 5 members and below 1 working day for 6 members and above</b>	

## 7. PROCESSING OF REQUEST OF EXEMPTION FROM EPRS ONLINE PAYMENT FACILITY

Employers request for exemption in using PhilHealth's EPRS Online Payment Facility for reasons acceptable to the Corporation.

<b>OFFICE/DIVISION/SECTION:</b>	FOD-COLLECTION SECTION			
<b>CLASSIFICATION:</b>	Complex Transaction			
<b>TYPE OF TRANSACTION:</b>	G2G - Government to Government; G2B- Government to Business; G2c- Government to Citizen			
<b>WHO MAY AVAIL:</b>	All employers from Private and Government Institutions (Direct Contributors)			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Request letter, Proof of employee count(PEPRL)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION/PROCESS FLOW</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Submit request to the nearest PRO or LHIO or thru email	1.Evaluate received request to identify the reason for request of exemption	None	1 to 7 working days	LHIO Staff or Collection Section staff
	If received by the LHIO, endorse to Collection Section of the PRO			
	1.2 Verify the number of employees of the requesting employer			Collection Section Staff
	1.3 Generate certificate of exemption for employers with 10 and below employees or Notice of denial for employers with 10 and above employees			
	1.4 Endorse COE or Notice of Denial to Collection Section Head for countersigning			Collection Section Head/FOD Chief/Collection Section Staff
	1.5 Countersign documents and endorse to FOD then to the Regional Vice President for approval			Regional Vice President/ORVP Staff
	1.6 Signs the COE or Notice of Denial and send back to Collection Section for sending to requesting party			
	1.7 Send signed COE or Notice of Denial to LHIO or employer			Collection Section Staff
<b>TOTAL</b>		<b>None</b>	<b>7 working days</b>	



## 8. SETTLEMENT OF ARREARS (DELINQUENT EMPLOYERS WITH PENDING BILLING STATEMENT/NOTICE TO COMPLY WITH 1<sup>ST</sup> BILLING STATEMENT)

Office/Division	COLLECTION SECTION / P-AIMS			
Classification	Simple			
Type of Transaction	G2G - Government to Government; G2B- Government to Business			
Who may avail:	Employers			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Copy of the Issued Billing Statement		Copy of the Billing Statement Statement/Notice to Comply with 1 <sup>st</sup> Billing Statement is served and explained to the employer by the P-AIMS/Accounts Officer		
Generated Statement of Premium Account (SPA) for Billed Periods (For Non-Remittance of Premium Contributions)		Generated from the Electronic Premium Remittance System (EPRS)		
Copy of the Computation of Interest Sheet for Billed Periods		Issued by the designated P-AIMS/Accounts Officer		
Payment Slip (Signed by the P-AIMS)		Issued by the designated P-AIMS/Accounts Officer		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<p>Client coordinates with designated P-AIMS/Accounts Officer:</p> <p>If there are NO changes to the billed amount, the client shall submit a copy of the generated Statement of Premium Account (SPA)</p> <p>If the total billed amount is OUTDATED, the client shall submit payroll copies for re-computation of arrears</p>	Receive and screen submitted documents		5minutes	P-AIMS/Accounts Officer

	Validate the submitted documents vis-à-vis issued billing statement, PMAIS, and Treasury Database for adjustments to the billed amount as needed.		25 minutes	P-AIMS/Accounts Officer
	Issue the payment slip		2 minutes	P-AIMS/Accounts Officer
	Refer the client to the LHIO-Cashier for receipt and processing of payments.	Total amount for settlement is indicated in the Statement of Premium Account(for non-remittance)and/or computation of interest sheet (for under-remittances)	3 minutes	P-AIMS/Accounts Officer
<b>TOTAL</b>		<b>See above</b>	<b>35 minutes</b>	

## 9. SETTLEMENT OF ARREARS (DELINQUENT EMPLOYERS WITH CASE FOLDER ENDORSED TO LEGAL UNIT)

Settlement Of Arrears (Delinquent Employers With Case Folder Endorsed To Legal Unit)

<b>Office/Division</b>	COLLECTION SECTION / P-AIMS/Legal Unit			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government; G2B- Government to Business			
<b>Who may avail:</b>	Employers			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Copy of the Final Demand Letter		Copy of the Final Demand Letter is served and explained to the employer by personnel from Legal Unit		
Copy of the Issued Billing Statement		Copy of the Billing Statement Statement/Notice to Comply with 1 <sup>st</sup> Billing Statement is served and explained to the employer by the P-AIMS/Accounts Officer		
Generated Statement of Premium Account (SPA) for Billed Periods (For Non-Remittance of Premium Contributions)		Generated from the Electronic Premium Remittance System (EPRS)		
Copy of the Computation of Interest Sheet for Billed Periods		Issued by the designated P-AIMS/Accounts Officer		
Payment Slip (Signed by the P-AIMS)		Issued by the designated P-AIMS/Accounts Officer		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Client coordinates with Legal Unit as to the settlement of arrears	Discuss the precedents and require the client to submit the necessary documents for validation by the P-AIMS/Accounts Officer		10 minutes	Legal Unit
Client coordinates with designated P-AIMS/Accounts Officer:  If there are NO changes to the billed amount, the client shall	Receive and screen submitted documents		5 minutes	P-AIMS/Accounts Officer

submit a copy of the generated Statement of Premium Account (SPA)				
If the total billed amount is OUTDATED, the client shall submit payroll copies for re-computation of arrears				
	Validate the submitted documents vis-à-vis issued billing statement, PMAIS, and Treasury Database for adjustments to the billed amount as needed.		25 minutes	P-AIMS/Accounts Officer
	Inform Legal Unit of the final amount for settlement based on the validation of submitted documents		5 minutes	P-AIMS/Accounts Officer
	Issue the payment slip		2 minutes	P-AIMS/Accounts Officer
	Refer the client to the LHIO-Cashier for receipt and processing of payments.	Total amount for settlement is indicated in the Statement of Premium Account (for non-remittance) and/or computation of interest sheet (for under-remittances)	3 minutes	P-AIMS/Accounts Officer
<b>TOTAL</b>		See above	47 minutes	

## **A. Local Health Insurance Offices (LHIOs)**

### **III. SUPPORT SERVICES**

## 1. APPROVAL OF REQUEST FOR ORIENTATION

The Local Health Insurance Offices shall approve or facilitate approval of request for orientation by stakeholders.

<b>Office/Division</b>	Local Health Insurance Offices - Support Services			
<b>Classification</b>	<b>Simple or Complex</b>			
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business; G2C- Government to Citizen			
<b>Who may avail:</b>	All members			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Request Letter (original)		Requesting stakeholder		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<b>If the request can be handled by the LHIO (A)</b>				
1. Submit letter request to the LHIO Admin Designate	1. Receive and stamp the date of receipt on the request letter and forward the same to the Chief Social Insurance Officer (CSIO)	None	2 working days	LHIO Admin Designate
	2. Assess the receive request, if it can be handled by the LHIO staff or not			LHIO Head
	3. Approve the request and assign staff who will conduct the orientation			LHIO Head
	4. Notify the requesting party that the request had been approve and set the date, and/or venue and platform of the orientation.			Designated LHIO staff who will conduct the orientation
<b>TOTAL</b>		<b>None</b>	<b>2 working days</b>	

If the request cannot be handled by the LHIO due to technicality (B)				
1. Submit letter request to the LHIO Admin Designate	1.1 Receive and stamp the date of receipt on the request letter and forward the same to the Chief Social Insurance Officer (CSIO)		2 working days	
	1.2 Assess the receive request, if it can be handled by the LHIO staff or not			
	1.3 Transmit the request letter to FOD		1 working day	LHIO Admin Designate
	1.4 Receive the endorsed request letter, assess the request and transmit the same to the concerned Unit in the PRO			FOD
	1.5 Seek approval of the conduct of orientation		2 working days	Concerned Unit
	1.6 Approve the conduct of orientation			Division Chief/RVP
	1.7 Notify the requesting party that the request had been approve and set the date, and/or venue and platform of the orientation.			Concerned Unit
<b>TOTAL</b>		<b>None</b>	<b>5 working days</b>	

## 2. APPROVAL/DENIAL OF STAKEHOLDER'S REQUESTS BY THE REGIONAL VICE-PRESIDENTS

Processing of uncommon request by stakeholders and the nature of the request can only be decided by the Regional Vice President.

<b>Office/Division</b>	Local Health Insurance Offices - Support Services			
<b>Classification</b>	Complex			
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business; G2C- Government to Citizen			
<b>Who may avail:</b>	All stakeholders			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Request Letter (original)				
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
Applicable supporting documents				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit letter request to the PRO/LHIO Staff	1. Receive and stamp the date of receipt on the letter request and endorse to concerned units	None	1 - 4 working days	PRO/LHIO Head/Staff
	2. Assess and verify the received documents and draft recommendations for approval/denial of the RVP through the division chiefs.			Concerned Unit
	3. Approval or denial of the request by the Regional Vice President		2 working days	Regional Vice President
	4. Send to the requesting stakeholder the document containing the decision made on the request, be it an approval of denial.		1 working day	ORVP Staff
<b>TOTAL</b>		<b>None</b>	<b>4 working days</b>	



### 3. GENERATION OF AUTHORIZATION TRANSACTION CODE (ATC)

<b>Office / Division</b>	Local Health Insurance Offices			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2C - Government to Citizens			
<b>Who may avail</b>	All members			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>None</b>		
Request for Authorization Transaction Code (RATC)		PhilHealth Office		
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit a properly filled-out RATC to any PhilHealth Office	1. Receive the accomplished RATC from the member	None	1 to 3 working days	LHIO Staff/ PCARES
	2. Screen completeness of information in the application form			
	3. Encode the preferred schedule date in the appointment module of the UPCM and iCARES			
	4. Confirms the successful generation of Authorization Transaction Code (ATC)			

	5. If printer is available, generate and print the ATC			
	6. If camera is available, request the beneficiary to take a digital image of the QR code through camera			
	7. If no available printer or camera, write down the code and sign the RATC			
	8. Release the ATC to the client			
	9. File the RATC			
<b>TOTAL</b>		<b>None</b>	<b>3 working days</b>	

#### 4. PROCESSING OF INQUIRY OR COMPLAINT RECEIVED THROUGH EMAIL BY THE PRO

Responding to the inquiries or complaints of stakeholders received through online channels.

<b>Office/Division</b>	Public Affairs Unit			
<b>Classification</b>	G2G; G2B; G2C;			
<b>Type of Transaction</b>	Simple			
<b>Who may avail:</b>	All stakeholders			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Receive inquiry of complaint				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Sends inquiry or complaint through online channels (email, social media accounts, etc.)	Acknowledge receipt of the inquiry or complaint and inform the client that it will be acted immediately	None	1 to 4 working days	Units in-charge of monitoring email and other online platforms used by the PRO
	Evaluate inquiry or complaint receive and identify responsible unit to act on the concern of the client			
	Endorse the inquiry or complaint to the concerned unit			
	Coordinate with the client if the resolution of the inquiry or complaint requires additional documents or facts			Concerned Unit
	If the inquiry can be answered or the complaint can be resolve based solely on the email receive, answer the inquiry or informed the client of the actions taken on the complaint immediately.			
<b>TOTAL</b>		<b>None</b>	<b>4 working days</b>	

## 5. PUBLIC ASSISTANCE SERVICES

Provision of initial assistance to all walk-in clients of the Local Health Insurance Office for the purpose of establishing order and direction to the transacting public.

Office/Division	Local Health Insurance Office			
Classification	Simple			
Type of Transaction	G2G - Government to Government; G2B - Government to Business; G2C- Government to Citizen			
Who may avail:	All walk-in clients of the Local Health Insurance Office			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Secure information and appropriate PhilHealth Forms, fill-out the forms and ask for initial direction	Provide appropriate forms and information.	None None	Maximum of 10 minutes per client	Public Assistance Staff - LHIO
Get a queuing number and wait for the number to be called	Give queuing number and direct the client to the appropriate frontline counter or area in the LHIO.			
TOTAL		None	10 minutes per client	

## **B. PHILHEALTH EXPRESS**

### **I. MEMBERSHIP**

## 1. MEMBER REGISTRATION, UPDATING OF RECORDS AND ISSUANCE OF MEMBER DATA RECORD AND PHILHEALTH IDENTIFICATION CARD IN PHILHEALTH EXPRESS

Registration of new members, updating of member's data records and generation of IDs and MDRs.

<b>Office</b>	PhilHealth Expresses	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen	
<b>Who may avail:</b>	All existing and prospective members	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
<b>Principal Member</b>		
PhilHealth Member Registration Form (PMRF) (1 original copy) duly signed by the Member		PhilHealth Counter
Birth Certificate (1 photocopy) or 2 signature bearing Valid IDs (1 photocopy of each ID)		Philippine Statistics Authority
Barangay Certificate for First Time Job Seekers		Concerned Barangay
<b>Declaration of Dependents</b>		
PhilHealth Member Registration Form (PMRF) (1 original copy) duly signed by the Member		PhilHealth Counter
Birth Certificate of child with registry number (1 photocopy)		Philippine Statistics Authority
Marriage Contract with registry number (1 photocopy) for dependent spouse		Philippine Statistics Authority
Proof of relationship to the member for dependent parent and proof that the parent is already 60 years of age or proof of permanent disability, if applicable (1 photocopy each)		Philippine Statistics Authority Any licensed physician
<b>Senior Citizen Registrant</b>		
PhilHealth Member Registration Form (PMRF) (1 original copy) duly signed by the Member		PhilHealth Counter
OSCA - Senior Citizen ID or 2 Valid IDs with birthdate or Birth Certificate (1 photocopy)		Office of the Senior Citizens Affairs
Authorization Letter from the member (original) and 2 Valid signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy of each ID)		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
<b>Membership Registration and updating of records</b>				
Fill up the PhilHealth Member Registration Form (PMRF)	Give queuing number and PMRF to client	None	5 minutes per PMRF	Frontline Officer – PhilHealth Express
Submit the filled-up PMRF and the supporting documents to the Frontline Counter when number is called	Receive and assess completeness of the receive documents			
	If the receive document is not complete, return the same and advise clients accordingly			
	If complete, process receive documents			
Check the details of the information in the ID or Member Data Record (MDR)	Print ID and MDR and request client to check the printed information for accuracy purposes			
	If the client finds an error, correct the error and reprint ID and/or MDR			
Receive ID and MDR	Release ID and MDR to the client			
<b>TOTAL</b>		<b>None</b>	<b>5 minutes per PMRF</b>	

## 2. REQUEST FOR COPY OF PHILHEALTH IDENTIFICATION CARDS (PIC) AND MEMBER DATA RECORDS (MDR) IN PHILHEALTH EXPRESS

Issuance of existing PICs and MDRs by the PhilHealth Expresses

Office	PhilHealth Expresses			
Classification	Simple			
Type of Transaction	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
Who may avail:	All existing and prospective members			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Fill-up Request Form	Give queuing number and the Request Form to client	None	5 minutes	Frontline Officer - Philhealth Express
Submit the filled-up Request Form to the Frontline Officer when number is called	Receive the filled-up Request Form and print the PIC and/or MDR	None	5 minutes	
	Release the PIC and/or MDR to the client	None		
Received the PIC and/or MDR		None	5 minutes	
<b>TOTAL</b>		<b>None</b>	<b>15 minutes</b>	



# **C. SATTELITE OFFICES**

## **I. MEMBERSHIP**

## 1. MEMBERSHIP REGISTRATION AND ISSUANCE OF MDR AND PIN

Registration of individuals belonging to the Informal Sector and Land based Migrant Worker Category at the POEA Operations Satellite Office.

<b>Office/Division:</b>	POEA-OFP Operations Satellite Office			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Citizen; G2B - Government to Business			
<b>Who may avail:</b>	All individuals belonging to the Informal Sector and Land Based Migrant Worker category			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
PhilHealth Membership Registration Form duly signed by the Member				
Applicable supporting documents				
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)				
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit duly accomplished PMRF and supporting documents and payment slip once the number is called.	1. Receive and screen duly accomplished PMRF with supporting documents and payment slip;	None	10 minutes	Frontline Officer - POEA-OFP Operations Satellite Office
	2. Encode/assign/update member's data;			
	3. Endorse payment slip to the assigned Payment Processor/ Collecting Officer			

	and advise client to proceed to the Payment Processor/Cashier's window and return after payment has been made;			
2. Proceed to the Cashier's window once number is called, tender payment (premium contribution) and receive Official Receipt.	4. Encode payment slip and assign number		5 minutes	
	5. Receive payment, issue OR and advise client/member to proceed to Frontline Officer to get PhilHealth Identification Card (PIC) / Member Data Record (MDR)	based on monthly income, subject to ceiling		
3. Proceed to Frontline Officer and receive PhilHealth Identification Card and MDR	6. Print and release PIC and MDR to the Client/Member		5 minutes	
<b>TOTAL:</b>		<b>None</b>	<b>20 minutes</b>	

## 2. MEMBERSHIP REGISTRATION AND ISSUANCE OF MDR AND PIN (FOREIGN NATIONALS)

Membership Registration And Issuance Of Mdr And Pin (Foreign Nationals)

<b>Office/Division:</b>	POEA-OFP Operations Satellite Office			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Citizen; G2B - Government to Business			
<b>Who may avail:</b>	All Foreign Nationals willing and qualified to become a member of the National Health Insurance Program			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
PhilHealth Membership Registration Form (PMRF) duly signed by the Member		PhilHealth website		
PRA Identification Card, or Special Resident Retiree's Visa (SRRV), or Alien Certificate of Registration (ACR I-card)		Member		
Applicable supporting documents		Member		
Valid signature and photo bearing ID of the member, if client is the member (1 photocopy)		Member		
Authorization Letter from the member (original) and Valid Signature and photo bearing ID of the member and the representative, if the process is thru a representative (1 photocopy)		Member		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Submit duly accomplished PMRF, PRA Identification Card or Special Resident Retiree's Visa (SRRV) , Alien Certificate of Registration Identity Card (ACR I-Card) and supporting documents once the number is	Receive and screen duly accomplished PMRF with supporting documents and payment slip;	None	10 minutes	Frontline Officer - POEA-OFP Operations Satellite Office
	Encode/assign/update member's data;			

called	Endorse payment slip to the assigned Payment Processor/Collecting Officer and advise client to proceed to the Payment Processor/Cashier's window and return after payment has been made;			
2. Proceed to the Cashier's window once number is called, tender payment (premium contribution) and receive Official Receipt.	Encode payment slip and assign number		5 minutes	
	Receive payment, issue OR and advise client/member to proceed to Frontline Officer to get PhilHealth Identification Card (PIC) / Member Data Record (MDR)	17,000/annual 15,000/annual for PRA Foreign Retirees		
	Print and release PIC and MDR to the Client/Member		5 minutes	
3. Proceed to Frontline Officer and receive PhilHealth Identification Card and MDR				
<b>TOTAL:</b>		<b>17,000/annual 15,000/annual for PRA Foreign Retirees</b>	<b>20 minutes</b>	

# **CENTRAL OFFICE**

## **D. Corporate Affairs Group (CAG)**

### **I. Corporate Action Center (CAC)**

## 1. HANDLING OF SIMPLE CLIENT QUERIES AND FEEDBACK THRU CALLS

Simple queries or feedback from external clients via hotline (02) 8-441-7442.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Corporate Action Center channel: hotline (02) 8-441-7442		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Call hotline (02) 8-441-7442	1. Respond with standard opening spiel	None	8 minutes	Call, SMS, FB agent
2. Give consent on use of personal data in order to proceed with query	2. Secure consent on use of personal data in the transaction and for quality assurance purposes			
3. Provide requested information	3. Ask /clarify client's concern as necessary and request for name and PIN and other required information.			
None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
4. Answer security questions	5. Perform information security protocol, if involving sensitive personal information			

5. Receive response	6. Provide response to the query or feedback including other relevant information using spiels			
None	7. Provide contact details and transaction reference number for follow-up			
None	8. Encode transaction in CSMS/Tallysheet and close directly resolved transaction.			
<b>TOTAL</b>		<b>None</b>	<b>8 minutes</b>	



## 2. HANDLING OF COMPLEX CLIENT QUERIES AND FEEDBACK THRU CALLS

Complex Queries or feedback from external clients via hotline (02) 8-441-7442.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Corporate Action Center channels: hotline (02) 8-441-7442		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Call hotline (02) 8-441-7442	1. Respond with standard opening spiel	None	8 minutes	Call Channel agent
2. Give consent on use of personal data in order to proceed with query	2. Secure consent on use of personal data in the transaction and for quality assurance purposes			
3. Provide requested information	3. Ask /clarify client's concern as necessary and request for name and PIN and other required information.			
None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
4. Answer security questions	5. Perform information security protocol, if involving sensitive personal information			

5. Receive initial response	6. Provide initial response to the query or feedback including other relevant information using spiels			
	7. Provide contact details and transaction reference number for follow-up			
None	8. Encode transaction in CSMS/Tally sheet.			
	9. Escalate complex transaction to Team Leader for level 2 resolution of other office.			
None	10. Coordinate and endorse transaction to responsible office thru CSMS, and record in CAC Log sheet		2.9 working days	Call Channel Team Leader
5. Provide requested information	11. Request client for additional information/documents required for processing, if lacking  Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.		4 working days	Other office
6. Receive services and/or final response	12. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.  Note: This may include appropriate redress for non-conforming services i.e. re-work, correction of errors, giving of apology to the client, correction of other affected processes or services.			

	13. Communicate final response to client  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.			
	<b>TOTAL:</b>	None	<b>7 Working Days</b>	
Note: TAT of Activity 10 is 2.9 working days due to required coordination with other office and volume of escalated calls. As allowed under EODB Law, TAT extension of additional 20 working days may be applied for technical transactions, provided that, client is informed prior to deadline.				

### 3.HANDLING OF TECHNICAL CLIENT QUERIES AND FEEDBACK THRU CALLS

Technical queries or feedback from external clients via hotline (02) 8-441-7442.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Corporate Action Center channels: hotline (02) 8-441-7442		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Call hotline (02) 8-441-7442	1. Respond with standard opening spiel	None	8 minutes	Call Channel Agent
2. Give consent on use of personal data in order to proceed with query	2. Secure consent on use of personal data in the transaction and for quality assurance purposes			
3. Provide requested information	3. Ask /clarify client's concern as necessary and request for name and PIN and other required information.			
None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
4. Answer security questions	5. Perform information security protocol, if involving sensitive personal information			

5. Receive initial response	6. Provide initial response to the query or feedback including other relevant information using spiels			
	7. Provide contact details and transaction reference number for follow-up			
	8. Encode transaction in CSMS/Tally sheet.			
None	9. Escalate technical transaction to Team Leader for resolution of other office.			
None	10. Coordinate and endorse to responsible office thru CSMS, and record in CAC Log sheet		2.9 working days	Call Channel Team Leader
6. Provide requested information, if required	11. Request client for additional information/documents required for processing, if lacking  Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.		17 working days	Other office
	12. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.  Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of errors, correction of other affected processes or services, and giving of apology to the client.			
7. Receive services and/or final response				

	13. Communicate final response to client  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.			
	<b>TOTAL:</b>	<b>None</b>	<b>20 Working Days</b>	
Note: TAT of Activity 10 is 2.9 working days due to required coordination with other office and volume of escalated calls. As allowed under EODB Law, TAT extension of additional 20 working days may be applied for technical transactions, provided that, client is informed prior to deadline.				

#### 4. HANDLING OF CLIENT QUERIES AND FEEDBACK THRU EMAIL (LEVEL 1- FOR DIRECT RESOLUTION)

Simple queries or feedback from external clients via actioncenter@philhealth.gov.ph.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			Corporate Action Center channel: actioncenter@philhealth.gov.ph	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Send simple email to actioncenter@philhealth.gov.ph	1. Sort and distribute 80 valid emails to agents	None	3 working days	CAC Team Leader
None	2. Read email and check available information for database look-up			CAC Agent
None	3. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
2. Receive final response	4. Respond to email using spiel based on available information. Note: Response may be as follows: - Final response (if information/document provided is sufficient to make a response) - Request for client to provide additional information/documents			

	Contact information of CAC for follow-up is provided.			
None	5. Encode transaction in CSMS/Tally sheet and close directly resolved transaction.			
	<b>TOTAL:</b>	None	<b>3 Working Days</b>	

Note: TAT of 3 days includes cycle time. It is based on current capacity to manage regular volume of emails, with quota set at 80 per agent per day. As allowed under EODB Law, TAT extension of additional 3 working days may be applied for simple transactions, provided that, client is informed prior to deadline.



## 5. HANDLING OF CLIENT QUERIES AND FEEDBACK THRU EMAIL (LEVEL 2- FOR ENDORSEMENT TO OTHER OFFICE)

Complex queries or feedback from external clients received by Corporate Action Center via email (actioncenter@philhealth.gov.ph.). These transactions are for endorsement by CAC to another office for Level 2 resolution.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			Corporate Action Center channel: actioncenter@philhealth.gov.ph	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Send email to actioncenter@philhealth.gov.ph	1. Sort and distribute 80 valid emails to agents	None	3 working days	CAC Team Leader
None	2. Read email and check available information for database look-up			CAC Agent
None	3. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
2. Receive acknowledgement and initial response	5. Respond with acknowledgement and initial response using spiel based on available information and database  Contact information of CAC for follow-up are provided.			

None	5. Encode transaction in CSMS/tally sheet.			CAC Team Leader
None	6. Escalate complex transaction to Team Leader for resolution of other office.			
None	7. Coordinate and endorse to responsible office thru CSMS, and record in CAC Log sheet			
3. Provide requested information	<p>8. Request client for additional information/documents required for processing, if applicable.</p> <p>Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.</p>		4 working days	Other office
4. Receive services and/or final response	<p>9. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.</p> <p>Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of errors, correction of other affected processes or services, and giving of apology to the client.</p>			

	10. Communicate final response to client  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.			
	<b>TOTAL:</b>	<b>None</b>	<b>7 working days</b>	

Note: TAT of 3 days for endorsements includes cycle time. It is based on current capacity to manage regular volume of emails, with quota set at 80 per agent per day. As allowed under EODB Law, TAT extension of additional 7 working days may be applied for complex transactions, provided that, client is informed prior to deadline.

## 6. HANDLING OF CLIENT QUERIES AND FEEDBACK VIA EMAIL

Queries or feedback from external clients received by Corporate Action Center via email (actioncenter@philhealth.gov.ph.). These transactions are for endorsement by CAC and for Level 2 resolution of another office involving provision of core services (i.e. membership, collection, claims, accreditation, etc.) and/or review and management approval process.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			Corporate Action Center channel: actioncenter@philhealth.gov.ph	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Send email to actioncenter@philhealth.gov.ph	1. Sort and distribute 80 valid emails to agents	None	3 working days	CAC Team Leader
None	2. Read email and check available information for database look-up			CAC Agent
None	3. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			

2. Receive acknowledgement and initial response	5. Respond with acknowledgement and initial response using spiel based on available information and database  Contact information of CAC for follow-up are provided.			
None	5. Encode transaction in CSMS/Tally sheet.			
None	6. Escalate technical transaction to Team Leader for resolution of other office.			
None	7. Coordinate and endorse to responsible office thru CSMS, and record in CAC log sheet			CAC Team Leader
3. Provide requested information	8. Request client for additional information/documents required for processing, if applicable.  Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.		8 working days	Other office
5. Receive services, if applicable	9. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.			

None	10. Prepare final response letter to client using spiel and based on available information.  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.		3 working days	
None	11. Review draft response letter		3 working days	
None	12. Revise draft response letter as necessary			
None	13. Sign final response			
6. Receive final response letter	14. Release response letter to client			
	<b>TOTAL:</b>	None	20 working days	
Note: TAT of 3 days for endorsement of CAC includes cycle time. It is based on current capacity to manage regular volume of emails, with quota set at 80 per agent per day. As allowed under EODB Law, TAT extension of additional 20 working days may be applied for technical transactions, provided that, client is informed prior to deadline.				

## 7. HANDLING OF CLIENT QUERIES AND FEEDBACK VIA SOCIAL MEDIA AND SMS (LEVEL 1- FOR DIRECT RESOLUTION)

Simple queries or feedback from external clients via "PhilHealth official" Facebook page and text line 0917-898-7442.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			Corporate Action Center channels: "PhilHealthofficial" Facebook page Textline 0917-898-7442.	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Send message to PhilHealth FB page, or textline 0917-898-7442.	1. Respond with standard opening spiel	None	3 working days	CAC Agent
2. Give consent on use of personal data in order to proceed with query	2. Message client to secure consent on use of personal data in the transaction and for quality assurance purposes			
3. Provide requested information	3. Ask /clarify client's concern as necessary and request for name and PIN and other required information.			
None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			

4. Answer security questions	5. Perform information security protocol, if involving sensitive personal information			
5. Receive final response	6. Provide response to the query or feedback including other relevant information using spiels			
	7. Provide contact details and transaction reference number for follow-up			
None	8. Provide closing spiel.			
None	9. Encode transaction in CSMS/Tallysheet and close directly resolved transaction.			
	<b>TOTAL:</b>	None	<b>3 working days</b>	

Note: TAT of 3 days processing by CAC includes cycle time. It is based on current capacity to manage regular volume of emails, with quota set at 80 per agent per day. As allowed under EODB Law, TAT extension of additional 3 working days may be applied for simple transactions, provided that, client is informed prior to deadline.



## 8. HANDLING OF CLIENT QUERIES AND FEEDBACK VIA SOCIAL MEDIA AND SMS (LEVEL 2- FOR ENDORSEMENT TO OTHER OFFICE)

Queries or feedback from external clients received by Corporate Action Center via "PhilHealth official" Facebook page and Textline 0917-898-7442. These transactions are for endorsement by CAC and for Level 2 resolution of another office involving provision of core services (i.e. membership, collection, claims, accreditation, etc) with review process.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Corporate Action Center channels: "PhilHealth official" Facebook page Textline 0917-898-7442.		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send message to PhilHealth FB page, or textline 0917-898-7442.	1. Respond with standard opening spiel	None	3 working days	CAC Agent
2. Give consent on use of personal data in order to proceed with query	2. Message client to secure consent on use of personal data in the transaction and for quality assurance purposes			
3. Provide requested information	3. Ask /clarify client's concern as necessary and request for name and PIN and other required information.			

None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
4. Answer security questions	5. Perform information security protocol, if involving sensitive personal information			
5. Receive acknowledgement and initial response	6. Provide acknowledgement and initial response to the query or feedback including other relevant information using spiels			
	7. Provide contact details and transaction reference number for follow-up			
	8. Provide closing spiel.			
None	9. Escalate complex transaction to Team Leader for resolution of other office.			
None	10. Coordinate and endorse to responsible office thru CSMS, and record in CAC log sheet			CAC Team Leader

5. Provide requested information	11. Request client for additional information/documents required for processing, if applicable.  Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.		4 working days	Other office
6. Receive services and/or final response	12. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.  Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of errors, correction of other affected processes or services, and giving of apology to the client.			
	13. Communicate final response to client  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.			
	<b>TOTAL:</b>	None	<b>7 working days</b>	

Note: TAT of working 3 days processing by CAC includes cycle time. It is based on current capacity to manage regular volume of sms and FB messages, with quota set at 80 per agent per day. As allowed under EODB Law, TAT extension of additional 3 working days may be applied for simple transactions, provided that, client is informed prior to deadline.

## 9. HANDLING OF TECHNICAL CLIENT QUERIES AND FEEDBACK VIA SOCIAL MEDIA AND SMS

Queries or feedback from external clients via "PhilHealth official" Facebook page and textline 0917-898-7442. These transactions are for endorsement by CAC and for Level 2 resolution of another office involving provision of core services (i.e. membership, collection, claims, accreditation, etc) with review and management approval process. .

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Corporate Action Center channels: "PhilHealth official" Facebook page Textline 0917-898-7442.		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send message to PhilHealth FB page, or textline 0917-898-7442.	1. Respond with standard opening spiel	None	3 working days	CAC Agent
2. Give consent on use of personal data in order to proceed with query	2. Message client to secure consent on use of personal data in the transaction and for quality assurance purposes			
3. Provide requested information	3. Ask /clarify client's concern as necessary and request for name and PIN and other required information.			
None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			

4. Answer security questions	5. Perform information security protocol, if involving sensitive personal information			
5. Receive acknowledgement and initial response	6. Provide acknowledgment and initial response to the query or feedback including other relevant information using spiels			
	7. Provide contact details and transaction reference number for follow-up			
	8. Provide closing spiel			
None	9. Escalate technical transaction to Team Leader for resolution of other office.			
None	10. Coordinate and endorse to responsible office thru CSMS, and record in CAC log sheet			CAC Team Leader
5. Provide requested information	11. Request client for additional information/documents required for processing, if applicable.  Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.		8 working days	Other office

5. Receive services, if applicable	12. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.  Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of errors, correction of other affected processes or services, and giving of apology to the client.			
None	14. Prepare final response letter to client using spiel and based on available information.  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.		3 working days	
None	15. Review draft response letter		3 working days	
None	16. Revise draft response letter as necessary			
None	17. Sign final response			
6. Receive final response letter	18. Release response letter to client			
	<b>TOTAL:</b>	<b>None</b>	<b>20 working days</b>	

Note: TAT of 3 working days processing by CAC includes cycle time. It is based on current capacity to manage regular volume of SMS and FB messages, with quota set at 80 per agent per day. As allowed under EODB Law, TAT extension of additional 3 working days may be applied for simple transactions, provided that, client is informed prior to deadline.

## 10. HANDLING OF COMPLEX CLIENT QUERIES AND FEEDBACK VIA LETTER

Queries or feedback from external clients via letter (including letters from Presidential Complaint Center which are for Level 1 resolution by CAC with review and approval process.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C- Government to Citizen ,G2G-Government to Government			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Thru letter sent to: <b>Philippine Health Insurance Corporation Head Office</b> CityState Center, 709 Shaw Boulevard Oranbo, Pasig City <b>Presidential Complaint Center</b> pcc@malacanang.gov.ph (letter)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send query/feedback via letter to PhilHealth Head Office	1. Sort and distribute letters to agents		4 working days	Letter Channel Team Leader
None	2. Read letter and check available contact information.			Letter Channel Agent
2. Provide requested information	3. Contact client thru phone, text or email (if available), ask /clarify concern and request for name and PIN and other required information as necessary.			

None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)		3 working days	
3. Receive initial response	5. Resolve concern through phone, text or email, if possible.			
None	6. Prepare response letter using spiel and based on available information. Note: Response may be as follows: - Documentation of the resolution (if outrightly resolved via phone) - Final response (if information/document provided is sufficient to make a response) - Request for client to provide additional information/documents (if client was not able to provide requested information or was not contacted in Step 3).  Contact information of CAC for follow-up is provided.			
None	7. Review draft response letter and provide comments, if any			CAC Head
None	8. Finalize reply letter, if with comments			Letter Channel Agent
None	9. Sign finalized response letter			CAC Head



4. Receive final response letter	10. Release response letter to client via email (if available) or thru PhilHealth Mailing Section			Releasing Staff
	<b>TOTAL:</b>	<b>None</b>	<b>7 working days</b>	

Note: TAT of 7 working days processing by CAC includes cycle time. It is based on current capacity to manage regular volume of Letters. As allowed under EODB Law, TAT extension of additional 7 working days may be applied for complex transactions, provided that, client is informed prior to deadline.

# **11.HANDLING OF CLIENT QUERIES AND FEEDBACK VIA LETTER (LEVEL 2 - FOR INITIAL RESPONSE OF CAC AND RESOLUTION OF OTHER OFFICE)**

Technical queries or feedback from external clients via letter (including letters from Presidential Complaint Center). These transactions are for endorsement by CAC and for Level 2 resolution of another office involving provision of core services (i.e. membership, collection, claims, accreditation, etc.) with review and management approval process. .

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C- Government to Citizen ,G2G-Government to Government			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Thru letter sent to: <b>Philippine Health Insurance Corporation Head Office</b> CityState Center, 709 Shaw Boulevard Oranbo, Pasig City <b>Presidential Complaint Center</b> pcc@malacanang.gov.ph (letter)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send query/feedback via letter to PhilHealth Head Office	1. Assign letters to agents		3 working days	Letter Channel Team Leader
None	2. Read letter and check available contact information.			Letter Channel Agent
2. Provide requested information	3. Contact client thru phone or text (if available), ask /clarify concern and request for name and PIN and other information/document, if lacking.			

None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
None	5. Coordinate technical transaction with concerned office, as necessary, and provide advance copy of letter and attachments			
None	6. Encode transaction in CSMS and Long sheet			
None	7. Prepare acknowledgement letter to client and endorsement memorandum to responsible office, using spiel and based on available information.  Contact information of CAC for follow-up is provided.			
None	8. Review draft response letter and endorsement		3 working days	CAC Head
None	9. Revise draft response and endorsement as necessary			Letter Channel Agent
None	10. Sign finalized response and endorsement letter			CAC Head
3. Receive acknowledgement and initial response letter	11. Release acknowledgement and initial response letter to client via email (if available) or thru PhilHealth Mailing Section and endorsement			Email Team or Releasing Staff

None	12. Release endorsement memo to responsible office via official email and via CSMS; encode in log sheet			Email Channel TL and Letter Channel Agent
4. Provide requested information	13. Request client for additional information/documents required for processing, if applicable.  Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.		8 working days	Other office
5. Receive services, if applicable	14. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.  Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of errors, correction of other affected processes or services, and giving of apology to the client.			

None	15. Prepare final response letter to client using spiel and based on available information.  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.		3 working days	Action Officer Designate (AOD) of Other Office
None	16. Review draft response letter		3 working days	Head of Other Office
None	17. Revise draft response letter as necessary			Action Officer Designate (AOD) of Other Office
None	18. Sign final response			Head of Other Office
6. Receive final response letter	19. Release response letter to client via email (if available)			Releasing Staff
	<b>TOTAL:</b>	<b>None</b>	<b>20 working days</b>	

Note: As allowed under EODB Law, TAT extension of additional 20 working days may be applied for technical transactions, provided that, client is informed prior to deadline.

## 12. HANDLING OF SIMPLE CLIENT QUERIES AND FEEDBACK LODGED TO GOVERNMENT CHANNELS (LEVEL 1 - FOR DIRECT RESOLUTION OF CAC)

Simple queries or feedback from external clients lodged to Government Channels i.e. 8888, CSC-CCB and ARTA (with online system). These transactions are for direct resolution by CAC using pre-approved spiels and not requiring review and approval process. .

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen,G2G Government to Government			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		<b>Anti-Red Tape Authority (ARTA):</b> complaints@arta.gov.ph 8-478-5093 <b>Presidential Complaint Center (PCC):</b> 8888 <b>Contact Center ng Bayan (CCB):</b> email@contactcenterngbayan.gov.ph 0908-881-6565		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client sends query/feedback thru Government Channel  Government Channel endorses feedback/ transaction to CAC	1. Receive endorsement from Government Channel	None	3 working days  (Initial action must be within 72 hours)	CAC Technical Point Person

None	2. Read client's concern and check available contact information.			
2. Provide requested information	3. Contact client thru phone or text (if available), ask /clarify concern and request for name and PIN and other required information as necessary.			
None	4. Record initial action in Government Channel's online system and upload documentation.  Contact information of CAC for follow-up is provided.			
None	5. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
3. Receive final response	6. Immediately resolve simple concern through text or email for documentation.			
None	7. Record resolution of transaction in Government Channel's online system and upload documentation.  Contact information of CAC for follow-up is provided.			

None	8. Record transaction in CSMS and close directly resolved transaction.			
	<b>TOTAL:</b>	<b>None</b>	<b>3 working days</b>	

Note: Initial contact with client must be with concrete and specific action within 72 hours from receipt, as mandated by EO 6, 2016. As allowed under EODB Law, TAT extension of additional 3 working days may be applied for simple transactions, provided that, client is informed prior to deadline.



### 13. HANDLING OF COMPLEX CLIENT QUERIES AND FEEDBACK LODGED TO GOVERNMENT CHANNELS (LEVEL 1 - DIRECT RESOLUTION, COMPLEX - WITH NO AVAILABLE SPIEL)

Queries or feedback from external clients lodged to Government Channels i.e. 8888, CSC-CCB and ARTA (with online system). These transactions are for direct resolution by CAC without pre-approved spiels and requiring review and approval process. .

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C- Government to Citizen,G2G Government to Government			
<b>Who may avail:</b>	All external clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			<b>Anti-Red Tape Authority (ARTA):</b> complaints@arta.gov.ph 8-478-5093 <b>Presidential Complaint Center (PCC):</b> 8888 <b>Contact Center ng Bayan (CCB):</b> email@contactcenterngbayan.gov.ph 0908-881-6565	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Client sends query/feedback thru Government Channel  Government Channel endorses feedback/ transaction to CAC	1. Receive endorsement from Government Channel	None	3 working days  (Initial action must be within 72 hours)	CAC Technical Point Person

None	2. Read client's concern and check available contact information.			
2. Provide requested information	3. Contact client thru phone, text or email (if available), ask /clarify concern and request for name and PIN and other required information as necessary.			
None	4. Encode initial actions in Government Channel's online system.			
None	5. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
None	6. Prepare response based on available information. Note: Response may be as follows:  Contact information of CAC for follow-up is provided.			
None	7. Review draft response			CAC Head
None	8. Finalize response as necessary			CAC Technical Point Person
None	9. Approve finalized response			CAC Head
4. Receive final response letter	10. Release response to client via email (if available)		4 working days	CAC Technical Point Person

None	11. Record resolution of transaction and upload documentation in Government Channel's online system.			CAC Technical Point Person
None	12. Close the transaction ticket in CSMS			
	<b>TOTAL:</b>	<b>None</b>	<b>7 working days</b>	

Note: As allowed under EODB Law, TAT extension of additional 7 working days may be applied for complex transactions, provided that, client is informed prior to deadline.

#### 14. HANDLING OF CLIENT QUERIES AND FEEDBACK LODGED TO GOVERNMENT CHANNELS (LEVEL 2 - FOR ENDORSEMENT TO OTHER OFFICE)

Simple queries or feedback from external clients lodged to Government Channels i.e. 8888, CSC-CCB and ARTA (with online system). These transactions are for direct resolution by CAC without pre-approved spiels and requiring review and approval process. .

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C- Government to Citizen,G2G Government to Government			
<b>Who may avail:</b>	All external clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			<b>Anti-Red Tape Authority (ARTA):</b> complaints@arta.gov.ph 8-478-5093 <b>Presidential Complaint Center (PCC):</b> 8888 <b>Contact Center ng Bayan (CCB):</b> email@contactcenterngbayan.gov.ph 0908-881-6565	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Client sends query/feedback thru Government Channel	1. Receive endorsement from Government Channel	None	2 working days	CAC Technical Point Person
Government Channel endorses feedback/ transaction to CAC			(Initial action must be within 72	
None	2. Read client's concern and check available contact information.			

2. Provide requested information	3. Contact client thru phone, text or email (if available), ask /clarify concern and request for name and PIN and other required information as necessary.		hours)	
None	4. Encode initial actions in Government Channel's online system.			
None	5. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
None	6. Coordinate and endorse complex transaction with concerned office via email for documentation.			
None	7. Encode transaction and initial actions in Government Channel's online system and in CSMS and log sheet.			
3. Provide requested information	8. Request client for additional information/documents required for processing, if applicable.  Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.		5 working days	Other office

4. Receive services and/or final response	9. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.  Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of errors, correction of other affected processes or services, and giving of apology to the client.			
	10. Communicate final response to client  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.			
None	11. Record status of transaction in CSMS and endorse to CAC Technical Point Person for closure			Action Officer Designate (AOD) of Other Office
None	12. Record resolution of transaction and upload documentation in Government Channel's online system. Contact information of CAC for follow-up is provided.			CAC Technical Point Person
None	13. Close the transaction ticket in CSMS			
	<b>TOTAL:</b>	<b>None</b>	<b>7 working days</b>	

Note: As allowed under EODB Law, TAT extension of additional 7 working days may be applied for complex transactions, provided that, client is informed prior to deadline.

## 15. HANDLING OF CLIENT QUERIES AND FEEDBACK LODGED TO GOVERNMENT CHANNELS

Queries or feedback from external clients via letter (including letters from Presidential Complaint Center) which are for endorsement by CAC and for Level 2 resolution of another office involving provision of core services (i.e. membership, collection, claims, accreditation, etc.) with review and management approval process. .

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C- Government to Citizen,G2G Government to Government			
<b>Who may avail:</b>	All external clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			<b>Anti-Red Tape Authority (ARTA):</b> complaints@arta.gov.ph 8-478-5093 <b>Presidential Complaint Center (PCC):</b> 8888 <b>Contact Center ng Bayan (CCB):</b> email@contactcenterngbayan.gov.ph 0908-881-6565	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Client sends query/feedback thru Government Channel  Government Channel endorses feedback/ transaction to CAC	1. Receive endorsement from Government Channel	None	3 working days  (Initial action must be within 72 hours)	CAC Technical Point Person

None	2. Read client's concern and check available contact information.			
2. Provide requested information	3. Contact client thru phone, text or email (if available), ask /clarify concern and request for name and PIN and other required information as necessary.			
None	4. Encode initial actions in Government Channel's online system.			
None	5. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
None	6. Coordinate and endorse complex transaction with concerned office via email for documentation.			
None	7. Encode transaction and initial actions in Government Channel's online system and in CSMS and Logsheet.			



3. Provide requested information	<p>8. Request client for additional information/documents required for processing, if applicable.</p> <p>Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.</p>		8 working days	Other office
4. Receive services, if applicable	<p>9. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.</p> <p>Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of errors, correction of other affected processes or services, and giving of apology to the client.</p>			
None	<p>10. Prepare final response letter to client using spiel and based on available information.</p> <p>Note : For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.</p>		3 working days	Action Officer Designate (AOD) of Other Office

None	11. Review draft response letter		3 working days	Head of Other Office
None	12. Revise draft response letter as necessary			Action Officer Designate (AOD) of Other Office
None	13. Sign final response			Head of Other Office
6. Receive final response letter	14. Release response letter to client via email (if available) or thru PhilHealth Mailing Section.			Releasing Staff
None	15. Record status of transaction in CSMS and endorse to CAC Technical Point Person for closure		3 working days	Action Officer Designate (AOD) of Other Office
None	16. Record resolution of transaction and upload documentation in Government Channel's online system.  Contact information of CAC for follow-up is provided.			CAC Technical Point Person
None	17. Close the transaction ticket in CSMS			
	<b>TOTAL:</b>	<b>None</b>	<b>20 working days</b>	

Note: As allowed under EODB Law, TAT extension of additional 20 working days may be applied for technical transactions, provided that, client is informed prior to deadline.

## 16. HANDLING OF SIMPLE CLIENT QUERIES AND FEEDBACK VIA CAC WALK-IN COUNTER

Simple queries or feedback from external clients via CAC Walk-In Counter.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
For complaints against non-remitting employers: - "Salaysay" or affidavit (available at CAC) - Payslip and proof of non-payment  For all other complaints and queries: NONE  Core processes on membership, collection, benefit availment and accreditation are not available at CAC.		<b>CAC Walk-In Counter</b> Room 706, CityState Center, 709 Shaw Boulevard, Oranbo, Pasig City		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit simple query/feedback at CAC Walk-In Counter	1. Respond with standard opening spiel	None	8 minutes	CAC Walk-In Agent
2. Give consent on use of personal data in order to proceed with query	2. Secure consent on use of personal data in the transaction and for quality assurance purposes			
3. Provide requested information	3. Ask /clarify client's concern as necessary and request for name and PIN and other required information.			

None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
4. Answer security questions	5. Perform information security protocol, if involving sensitive personal information			
5. Receive final response and information materials	6. Provide response to the query or feedback including other relevant information using spiels			
	7. Provide contact details and transaction reference number for follow-up			
None	8. Encode transaction in CSMS and log sheet and close directly resolved transaction.			
	<b>TOTAL:</b>	None	<b>8 minutes</b>	

## 17. HANDLING OF COMPLEX CLIENT QUERIES AND FEEDBACK VIA CAC WALK-IN COUNTER

Complex queries or feedback from external clients via CAC Walk-In Counter.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
For complaints against non-remitting employers: - "Salaysay" or affidavit (available at CAC) - Payslip and proof of non-payment  For all other complaints and queries: NONE  Core processes on membership, collection, benefit availment and accreditation are not available at CAC.		<b>CAC Walk-In Counter</b> Room 706, Citystate Center, 709 Shaw Boulevard, Oranbo, Pasig City		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit complex query/feedback at CAC Walk-In Counter	1. Respond with standard opening spiel	None	8 minutes	CAC Walk-In Agent
2. Give consent on use of personal data in order to proceed with query	2. Secure consent on use of personal data in the transaction and for quality assurance purposes			
3. Provide requested information	3. Ask /clarify client's concern as necessary and request for name and PIN and other required information.			

None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
4. Answer security questions	5. Perform information security protocol, if involving sensitive personal information			
5. Accomplish forms and attach supporting documents	6. Require to accomplish forms and submit supporting documents as applicable (based on requirements per process as posted in <a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a> )			
5. Receive acknowledgment and initial response	7. Provide response to the query or feedback including other relevant information using spiels			
	8. Provide contact details and transaction reference number for follow-up			
None	10. Encode transaction in CSMS and Logsheet.		2.9 working days	CAC Walk-In Agent
None	11. Coordinate complex transaction with concerned office, as necessary, and <b><u>provide advance copy of letter and attachments</u></b>			
None	12. Prepare endorsement memorandum to responsible office, using spiel and based on available information.			
None	13. Review draft endorsement			CAC Head
None	14. Revise draft endorsement as necessary			CAC Walk-In Agent

None	15. Sign finalized endorsement letter			CAC Head
None	16. Release endorsement memo to responsible office via official email and via CSMS			CAC Walk-In agent
7. Provide requested information	17. Request client for additional information/documents required for processing, if applicable.  Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.		4 working days	Other office
8. Receive services and/or final response	18. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.  Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of errors, correction of other affected processes or services, and giving of apology to the client.			

	19. Communicate final response to client  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.			
	<b>TOTAL:</b>	<b>None</b>	<b>7 working days</b>	

Note: As allowed under EODB Law, TAT extension of additional 7 working days may be applied for complex transactions, provided that, client is informed prior to deadline.



## 18. HANDLING OF TECHNICAL CLIENT QUERIES AND FEEDBACK VIA CAC WALK-IN COUNTER

Technical queries or feedback from external clients via CAC Walk-In Counter.

<b>Office:</b>	Corporate Action Center (CAC)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	All external clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
For complaints against non-remitting employers: - "Salaysay" or affidavit (available at CAC) - Payslip and proof of non-payment  For all other complaints and queries: NONE  Core processes on membership, collection, benefit availment and accreditation are not available at CAC.			<b>CAC Walk-In Counter</b> Room 706, CityState Center, 709 Shaw Boulevard, Oranbo, Pasig City	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit technical query/feedback at CAC Walk-In Counter	1. Respond with standard opening spiel	None	8 minutes	CAC Walk-In agent
2. Give consent on use of personal data in order to proceed with query	2. Secure consent on use of personal data in the transaction and for quality assurance purposes			
3. Provide requested information	3. Ask /clarify client's concern as necessary and request for name and PIN and other required information.			

None	4. View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
4. Answer security questions	5. Perform information security protocol, if involving sensitive personal information			
5. Accomplish forms and attach supporting documents	6. Require to accomplish forms and submit supporting documents as applicable (based on requirements per process as posted in www.philhealth.gov.ph)			
6. Receive acknowledgement and initial response	7. Provide acknowledgement and initial response to the query or feedback including other relevant information using spiels			
	8. Provide contact details and transaction reference number for follow-up			
None	9. Encode transaction in CSMS	None	2.9 working days	CAC Walk-In agent
None	10. Coordinate technical transaction with concerned office, as necessary, and <b><u>provide advance copy of letter and attachments</u></b>			
None	11. Prepare endorsement memorandum to responsible office, using spiel and based on available information.			
None	12. Review draft endorsement			CAC Head
None	13. Revise draft endorsement as necessary			CAC Walk-In agent
None	14. Sign finalized endorsement letter			CAC Head

None	15. Release endorsement memo to responsible office via official email and via CSMS			CAC Walk-In agent
7. Provide requested information	<p>16. Request client for additional information/documents required for processing, if applicable.</p> <p>Note: Includes at least 3 correct information validated against client's database records for information security purposes, if applicable.</p>	None	8 working days	Other office
8. Receive services and/or final response	<p>17. Provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures.</p> <p>Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of errors, correction of other affected processes or services, and giving of apology to the client.</p>			

None	18. Prepare final response letter to client using spiel and based on available information.  Note: For services that have long processing time (i.e. claims, employer billing, claim appeal, etc.), current status may just be provided as final response, provided that contact information for follow-up is duly communicated.		5 working days	Action Officer Designate (AOD) of Other Office
None	19. Review draft response letter		4 working days	Head of Other Office
None	20. Revise draft response letter as necessary			Action Officer Designate (AOD) of Other Office
None	21. Sign final response			Head of Other Office
6. Receive final response letter	22. Release response letter to client via email (if available) or thru PhilHealth Mailing Section.			Releasing Staff
	<b>TOTAL:</b>	<b>None</b>	<b>20 working days</b>	

Note: As allowed under EODB Law, TAT extension of additional 20 working days may be applied for technical transactions, provided that, client is informed prior to deadline.

## **D. Corporate Affairs Group (CAG)**

### **II. Corporate Marketing Department (CORMAR)**

# 1. REQUEST FOR CLEARANCE OF MATERIAL/S FROM EXTERNAL PARTNERS

Request made by an external partner for the clearance/approval of marketing collaterals they have produced in which the PhilHealth corporate signature, other branding standards, and any information on PhilHealth products/services, are applied.

<b>Office:</b>		Corporate Marketing Department (CorMar)		
<b>Classification:</b>		Complex		
<b>Type of Transaction:</b>		G2G – Government to Government		
		G2B – Government to Business Entity		
<b>Who may avail:</b>		Any Government or Private Agency/External Organization/Company		
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Duly signed request letter for clearance and sample material/s			To be done/sent by requesting external partner	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request letter to CorMar.	1. Receive request.	None	1 day	Critical Support Team
	2. Ensure the proper application of PhilHealth brand elements.			Brand Management and Marketing Collateral Development Team (BMMCDT)
None	3. Check accuracy of the content of the material/s relative to the PhilHealth product and services.		4 hours	BMMCDT
None	4. Submit comments and recommendation to SM-CorMar for approval.		4 hours	BMMCDT

None	5. Seek approval of recommendation from VP-CAG.		2 days	BMMCDT, SM-CorMar
2. Receive formal communication from CorMar.	6. Endorse recommendation/clearance to external partner through formal communication.		1 Day	BMMCDT, Critical Support Team
3. Answer the CorMar Satisfaction Survey.	7. Request external partner to answer the CorMar Satisfaction Survey.			
4. Submit accomplished Satisfaction Survey to CorMar.	8. Receive accomplished survey form from end-user.			Critical Support Team
	<b>TOTAL:</b>	<b>None</b>	<b>5 days</b>	

## 2. REQUEST FOR APPROVAL OF SPONSORSHIP PROPOSAL

Request made by an external party for the approval of its sponsorship proposal in exchange for promotions/media mileage for PhilHealth

Office:	Corporate Marketing Department (CorMar)	
Classification:	Highly Technical	
Type of Transaction:	G2B- Government to Business	
Who may avail:	Proponent Offices/end-user in the Head Office	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
1. Sponsorship proposal		Proponent Office
2. Company Profile		
3. BIR 2303 (Certificate of Registration)		
4. Sample Official Receipt		
5. Originally signed Sponsorship Agreement		
6. Billing Statement		
7. Sponsorship Certification		
8. After-Event Report		
9. Copy of internet page in case of advertisement through internet		
10. Copy of Certificate of Performance issued by the advertising company and Schedule of Broadcast in case of advertisement		
11. Copy of newspaper or magazine evidencing publication in case of advertisement thru print media		
12. BIR 2306 / 2307 c/o PhilHealth		



CLIENT STEPS	AGENCY ACTION		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send letter request for sponsorship to CorMar together with Company Profile, Copy of BIR 2303, Sample Official Receipt	1. Receive request.		None	3 days	Critical Support Team
	2. Prepare Sponsorship Review.				Events Management Team
None	3.Endorse recommendation to VP-CAG for approval			3 days	Critical Support Team; SM-CorMar; Events Management Team
	a. Approved: Proceed to No. 4				
	b. Disapproved: Send regret letter				
2. Sign the Sponsorship Agreement	4. Inform proponent approval of sponsorship and send sponsorship agreement.			2 Days	Events Management Team
None	5. Prepare Certificate of Availability of Funds (CAF) and Purchase Request (PR) for processing of Comptrollership Department. (if applicable)				
None	6. Prepare and send endorsement memo to concerned PRO/s (if applicable).				
3. Perform/deliver the agreed media values per approved schedule	7.1 Provide the proponent necessary materials as per agreed media values.			2 days	Events Management Team
	7.2 Supervise sponsorship booth and provide IEC during the activity (if applicable).			3 days (depending on the agreement)	Concerned PRO

4. Provide proof if the agreed media values were performed/delivered.	8. Prepare After Event Report.		2 days	Events Management Team or concerned PRO/s
5. Send Billing Statement	9. Prepare Budget Utilization Request (BUR) and print Disbursement Voucher (DV), submit to Comptrollership Department for payment processing and inform client on the next steps. (if applicable)		3 days	Events Management Team
	<b>TOTAL:</b>	<b>None</b>	<b>18 Days</b>	

## **D. Corporate Affairs Group (CAG)**

### **III. International and Local Engagement Department (ILED)**

## 1. EVALUATION OF PROJECT PROPOSALS FOR LOCAL ENGAGEMENTS

Since the major function of ILED is to mobilize resources (grants, technical assistance, and other forms of support) to sustain the various programs and projects of PhilHealth on social health insurance this service is a function of ILED provided to external clients to evaluate and thereafter guide the development and approval of such proposals that would need support from local cooperation.

<b>Office:</b>	INTERNATIONAL AND LOCAL ENGAGEMENT DEPARTMENT	
<b>Classification:</b>	Complex	
<b>Type of Transaction:</b>	G2B-Government to Business, G2G-Government to Government	
<b>Who may avail:</b>	Business entities or other government organizations	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Letter of Intent And project proposal with the following information: Company/Organization a. Project Name b. Company/Organization Name c. Address d. Telephone e. Fax f. Email Address g. Description of Company/Organization h. Company/Organization Mission-Vision Statement  Project Information a. Project Name b. Description of Project c. Objective/Goal of the Project d. Total Project Cost e. Total Project Income f. Any Proprietary Technologies g. Project Start Date h. Project End Date		Prepared by proposing entity (Proposal Submission Form may be secured from ILED)

Qualification of Proposer a. Experience and Credentials of the Company/ Organization b. Experience and Credentials of Key Proposed Staff				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submits Letter of Intent (LOI) and the project proposal using the Project Submission Form		None		Business entities or other government organizations
None	1.1 ILED evaluates the proposal	None	5 Days	Project Development Officer III or Project Development Officer IV, ILED
None	1.2 If it passes the criteria set for local partnerships, inform proposing party through a letter and set a collaborative meeting between proposing party and the office that will potentially implement the proposed project.	None	1 Day	
None	1.3 If it fails the criteria set for local partnerships, inform proposing party by way of letter.			
<b>TOTAL:</b>		<b>None</b>	<b>7 Days</b>	

## 2. EVALUATION OF PROJECT PROPOSALS FOR FOREIGN ASSISTED PROJECTS

Since the major function of ILED is to mobilize resources (grants, technical assistance, and other forms of support) to sustain the various programs and projects of PhilHealth on social health insurance this service is a function of ILED provided to external clients to evaluate and thereafter guide the development and approval of such proposals that would need support from international cooperation.

<b>Office:</b>	INTERNATIONAL AND LOCAL ENGAGEMENT DEPARTMENT			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2B-Government to Business			
<b>Who may avail:</b>	Development Partners			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Proposal 2. Areas of Support for PhilHealth 3. Thrusts and Priorities		to be prepared by Development Partners		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Development Partner submits proposal to PhilHealth on possible areas of collaboration		None		PDO IV
None	1.1 Evaluate the proposal	None	3 Days	Project Development Officer III or Project Development Officer IV, ILED
None	1.2 If it matches a project proposal/concept note/TOR in the TA agenda, sets a collaborative meeting between development partner and potential implementing office within PhilHealth	None	1 Day	
None	1.3 If it does not match a project proposal/concept note/TOR in the TA agenda, inform development partner by way of letter	None	1 Day	
<b>TOTAL:</b>		<b>None</b>	<b>5 Days</b>	

### 3. EVALUATION OF INVITATION TO INTERNATIONAL EVENTS/ACTIVITIES

One of the functions of the International and Local Engagement Department is to coordinate the participation of PhilHealth to international for trainings/conferences/workshops/meetings/fellowships/any activity on exchange of knowledge on Social Health Insurance; this particular service addresses this function.

<b>Office:</b>	ILED			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2B- Government to Business			
<b>Who may avail:</b>	Organizer of international events/activities			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Invitation		Prepared by organizer/inviting institution		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send to ILED invitation to international events/activities/ training (with information on provision of Hotel reservation and e-ticket payment for airfares and hotel accommodations and other logistic requirements, as necessary)	1.1 Evaluates the invitation	None	1 Day	Inviting institution/event organizer
None	1.2 Endorse recommendation on the invitation to PCEO	None	1 Day	Project Development Officer II, III or IV
None	1.3 Upon receipt of instruction from PCEO, informs organizer whether or not PhilHealth can participate in the activity	None	1 Day	
<b>TOTAL:</b>		<b>None</b>	<b>3 Days</b>	

## **D. Corporate Affairs Group (CAG)**

### **IV. Social Health Insurance Academy (SHIA)**



## 1. CONDUCT OF CERTIFICATE COURSE ON ICD-10 TRAINING

Request made by a group of private individuals or healthcare providers (HCPS) to attend the conduct of the Certificate Course on ICD-10 Coding

<b>Office:</b>		Social Health Insurance Academy (SHIA)		
<b>Classification:</b>		Highly Technical		
<b>Type of Transaction:</b>		G2C – Government to External		
<b>Who may avail:</b>		Healthcare Providers staff or any private individual		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Certificate Course on ICD-10 Checklist		Social Health Insurance Academy (SHIA)		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Inquire via phone call or email on the schedule of ICD-10 training	1. Receive request and took down notes of the name, email address, phone numbers and affiliation of the caller/individual	NONE	3 Minutes	ICD-10 secretariat
	2. Discuss with the ICD-10 team the possibility of conducting the training. a. Check SHIA calendar of activities b. See if with available ICD-10 speakers c. Discuss the possible venue/date	NONE	2 Days	ICD-10 Team and SHIA SM
	3. Once a minimum number of participants is reached, and availability of speakers are confirmed, the ICD-10 registration forms are sent to the participants.	NONE	1 Day	ICD-10 secretariat

2. Fill-out Registration Form and send back to SHIA	4. Follow up with all the participants/received filled-out registration forms	NONE	1 Day	ICD-10 secretariat
NONE	5. Prepare Corporate Personnel Order (CPO) and other documentary requirements.	NONE	1 Day	Training Specialist-IV and ICD-10 secretariat
NONE	6. Follow-up signing of the CPO and start to work on the hotel quotations/catering. Make sure to count the 14 days (if with lease of venue) or 7 days (if catering services only) for submission to SBAC.	NONE	5 days	ICD-10 secretariat
NONE	7. Prepare presentation materials, participants kits, ICD-10 books, etc. (based on checklist)	NONE	2 Days	Training Specialist-IV and ICD-10 secretariat
3. Attend the ICD-10 Coding, pay the course fee	8. Receive course payment and issue O.R. 10. Conduct the Certificate Course on ICD-10 Coding	P10,000 (includes training fee, meals for 5 days, training materials, and certificates)	5 Days (actual conduct of the course)	ICD-10 Team and Speakers
<b>TOTAL</b>		<b>P10,000.00</b>	<b>17 Days and 3 Minutes</b>	

## **E. Fund Management Sector (FMS)**

### **I. Comptrollership**

## 1. SECURING ORDER OF PAYMENT

Information for Cashier as to type of transaction being paid as well as the account code to be encoded

<b>Office:</b>	Corporate Accounting Section			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2B,G2G			
<b>Who May Avail:</b>	Bidders, Philhealth Employees, Business Entities			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Bid documents - 1 Original Copy		SBAC		
Notice of Appeal - 1 Original Copy		Arbitration Department		
Service Decision - 1 Original Copy		Arbitration Department		
Certificate of Finality - 1 Original Copy		Arbitration Department		
Accreditation Document - 1 Original Copy		Treasury Department		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Present the required Document to be paid	1) Fill out the Order of Payment Document indicating the amount to be paid (listed on the bid docs, Notice of appeal, service Decision, Certificate of Finality and Accreditation Documents)	None	5 minutes	1 Fiscal Controller III - General Accounting Unit
	2) Direct the client to the Cashier Section at Room 1612 for payment	none		
TOTAL:		None	5 minutes	

## 2. PREPARATION OF FINANCIAL STATEMENTS

Consolidation of PROs and Head Office Trial Balance to come up with Financial Statements for management's decision making and for Public Information of the Financial Condition, Performance and other relevant information regarding the corporation

<b>Office:</b>	Corporate Accounting Section			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G (Internal and External)			
<b>Who May Avail:</b>	All PhilHealth Cost Centers			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
PROs Consolidated Trial Balance - 1 original Copy		Branch Accounting Section		
General Journal - 1 original Copy		Corporate Accounting Section		
Journal of Collection and Deposit - 1 original copy		Cash Division/Treasury Department		
Voucher Register -1 Original Copy		Disbursement Administration Section		
Check Register - 1 Original Copy		Cash Division and Corporate Accounting		
Trial Balance - Head Office - 1 original Copy		General Accounting Unit		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
The Branch Accounting Unit, Cash Division, Disbursement Section shall submit respective reports to the Corporate Accounting Section	Corporate Accounting Section shall analyze and process to come with the Consolidated Trial balance and classify the accounts to come up with the Financial Statements	none	20 days after the ensuing month	1Fiscal Controller IV - Corporate Accounting Section 2 Fiscal Controller III - General Accounting 4 Fiscal Controller II - General Accounting Unit 2 Fiscal Examiner A - General Accounting Unit 2 Fiscal Controller 1 -General Accounting Unit
<b>TOTAL:</b>		<b>None</b>	<b>20 days after the ensuing month</b>	

### 3. PROCESSING OF DISBURSEMENT VOUCHERS

Pre-audit disbursement vouchers in order to have a check prepared to pay an individual or an organization for goods sold or services rendered.

<b>Office:</b>	Disbursement Administration Section (DAS)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	External and Internal Clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Budget Utilization Request (BUR) Form (3 original copies)		Financial Accounting Reporting Utility (FARU)		
Disbursement Vouchers (DV) (4 original copies)		Financial Accounting Reporting Utility (FARU)		
Documentary requirements as stated in CO 2020-0118		Various sources		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Log in to FARU	1. DAS will receive the documents from the Budget Administration Section and pre-audit the transaction.	NONE	1.5 wdays for simple transactions; 3 wdays for complex transactions	1. Receiving Clerk – Disbursement Administration Section (DAS)
2. Enter all the details for DV preparation	2. Prepare the necessary accounting entries.			2. Processor – DAS
3. Print DV and BUR	3. Certify the completeness of the documentary requirements.			3. Fiscal Controller III / Authorized Box B signatory (DAS) in accordance with the Corporate Order on the Delegation and Signing Authority
4. Attach documentary requirements for the particular transaction	4. Approve the payment of the transaction.			4. Head, Das / Authorized Box C signatory (DAS) in accordance with the

				Corporate Order on the Delegation and Signing Authority
5. Sign Box A	5. Transmit the documents (manually and electronically) to the Cash Division for check preparation.			5. Receiving/releasing clerk (DAS)
6. Transmit the documents to the Budget Administration Section – Comptrollership Dept. manually and electronically using the FARU				
<b>TOTAL:</b>			<b>1.5 working days for simple transactions; 3 working days for complex transactions</b>	

#### 4. BUDGET PROPOSAL FOR THE NATIONAL GOVERNMENT SUBSIDY (NG) - SPONSORED MEMBERS

This covers the preparation and submission of the budget proposal for the NG subsidy for the Indigent Program to the Department of Budget and Management (DBM).

Office:	Fiscal Management Division (FMD), Comptrollership Department			
Classification:	Highly Technical			
Type of Transaction:	G2G,			
Who May Avail:	Sponsored Members of PhilHealth			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Original Budget Proposal for the Indigent Program (1 copy)		Member Management Group		
2. Original Approved PhilHealth Board Resolution (PBR) (1 copy)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Translate PhilHealth Board approved budget to DBM Forms	a. Collate all DBM Forms and other required documents for consolidation		5 days	MMG, CorPlan And FMD-Comptrollership Staff
	b. Prepare transmittal letter to DBM		5 days	
	c. Forward documents to the Offices of the Senior Vice President for Fund Management Sector and President and Chief Executive Officer for signature (2 copies including receiving copy)			
	d. Photocopy and submit documents to DBM			
	e. Provide receipt copies to the Office of the President (OP), MMG and CorPlan (2 copies including receiving copy)		1 day	
a. Revision of DBM Forms based on adjustments	Revision of DBM Forms based on adjustments	None	5 days	
b. Forward documents to OP for signature and submit to DBM	Facilitate the approval			
c. Submission of Budget Execution Documents (BED) based on the NEP/GAA	Submission of Budget Execution Documents (BED) based on the NEP/GAA (2 copies including receiving copy)		2 days	MMG and FMD-Comptrollership Staff
TOTAL:			20 days	



## **E. Fund Management Sector (FMS)**

### **II. Office of the Senior Vice President-Fund Management Sector**

## 1. ISSUANCE OF FINANCIAL REPORTS

Provides Financial Reports for information and reference of requesting parties, other than those mandatory monthly/quarterly/annual reports

<b>Office:</b>	Managerial Finance Section			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Other Government/Oversight Agencies/Congress, All PhilHealth Cost Center			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Letter or Email Request: 1 Original/Soft Copies		Requesting Office		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Send letter or email request	1. Evaluate the request	None	15 minutes	FC IV, Managerial Finance Section
	2. Prepare the reports *If the source of the requested report is not in the custody of the MFS, secure first from Comptrollership or Treasury Department		1 - 3 working days *depends on the complexity of the requested report **depends also if requested report needs data from other offices outside FMS	FC IV, Managerial Finance Section
	3. Review and approve the reports		40 minutes	SVP, FMS
	4. Once report is cleared for submission, forward the same to the requesting office		5 minutes	Social Insurance Assistant I, Managerial Finance Section
<b>TOTAL:</b>		<b>None</b>	<b>1 - 3 working days</b>	

# **E. Fund Management Sector (FMS)**

## **III. Treasury Department**

<b>1. ACCREDITATION OF COLLECTING AGENTS</b>	
Processing of PhilHealth Accredited Collecting Agents Application	
<b>Office</b>	AGENTS RELATION UNIT ACCREDITATION TEAM, TREASURY DEPARTMENT
<b>Classification</b>	Simple
<b>Type of Transaction</b>	G2G - Government to Government; G2B - Government to Business
<b>Who May Avail</b>	Banks and Non-banks; Government and Private Entities
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
Document No.1. Letter of Intent (1 copy, original copy)	Applicant Collecting Agent
Document No 2. Audited AFS for the past 3 yrs., including Notes to FS (1 copy , scanned copy/photocopy)	
Document No. 3. Cert. of Registration issued by BSP, SEC, NTC (1 copy, scanned/photocopy)	
Document No 4. Art. Of Incorporation and By-Laws; Art. Of Partnership duly authenticated by SEC (scanned/photocopy, 1 copy)	
Document No.5. Electronic Banking Authority from BSP ( 1 copy, scanned/photocopy)	
Document No. 6. List of Members of BOD/Partners and Key Officers ( 1 copy , scanned/photocopy)	
Document No. 7. Copy f Business License/permit from City of Municipality (scanned/photocopy, 1 copy)	
Document No. 8. Sworn Statement by the applicant in compliance to Labor Laws (1 copy, scanned/photocopy)	
Document No 9. Cert. of Good Standing	

w/Existing Industry/Association (scanned/photocopy, 1 copy)				
Document No. 10. List of Branches/Tie-ups (1 copy, scanned/photocopy)				
Document No. 11. PhilHealth Online Application Form (scanned copy/photocopy, 1 copy)				
Document No. 12. Bond (Cash, surety, fidelity) - for non-banks (1 copy, scanned/photocopy)				
CLIENT'S STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Inquire about the requirements	Acknowledge phone queries and/or letter of applicants through phone/letter/email	NONE	5 minutes	Fiscal Controller II Fiscal Examiner A Social Assistant I, AGRU, Accreditation Team
Submit accreditation requirements	Provide checklist of documentary requirements thru email or attachment to letter to applicant		5 minutes	Fiscal Controller II Fiscal Examiner A Social Assistant I, AGRU, Accreditation Team
comply remaining accreditation requirements if incomplete	Upon receipt of the documents, record it in the logbook or in the monitoring sheet		5 minutes	Fiscal Controller II Fiscal Examiner A Social Assistant I, AGRU, Accreditation Team
	Upon receipt of the documentary requirements, check completeness thereof (tick mark the checklist of documentary		5 minutes	Fiscal Controller II Fiscal Examiner A Social Assistant I, AGRU, Accreditation Team

	requirements)			
	If complete, proceed with the safekeeping of documents in the individual folder for the new applicant and prepare the FS for evaluation.		5 minutes	Fiscal Controller II Fiscal Examiner A Social Assistant I, AGRU, Accreditation Team
	If not complete, inform applicant through phone or email to comply with the deficient document/s		5 minutes	Fiscal Controller II Fiscal Examiner A Social Assistant I, AGRU, Accreditation Team
	<b>TOTAL</b>	<b>None</b>	<b>30 minutes</b>	

## 2. DISTRIBUTION OF PHILHEALTH AGENTS RECEIPT (PAR)

Issuance of PAR to Accredited Collecting Agent (ACA)

<b>Office</b>	Data Management and Systems Monitoring Unit (DMSMU), Accreditation Team, Treasury Department			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2B & G2G			
<b>Who May Avail</b>	Accredited Collecting Agent			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Document 1 Requisition and Issue Slip(RIS) ( One (1) Original Copy)		-DMSMU, Accreditation Team, Treasury Department		
Document 2 Invoice and Receipt of Accountable Form (IRAF) (One (1) Original Copy)		-DMSMU, Accreditation Team, Treasury Department		
Documents 3 Authorization letter and valid (government or Company) ID for liaison officer ( One (1) Original Copy)		- Accredited Collecting Agent (ACA)		
Document 4 Authority to Release and Gate Pass (3 Original Copies)		-DMSMU, Accreditation Team, Treasury Department		
<b>CLIENT'S STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit the filled up and signed (RIS) to Treasury Department	1. Input in the PhilHealth Agents Receipt Management Module (PARMM) the recipient ACA and the quantity of PARs for distribution	NONE	15 minutes	Social Insurance Officer (alternate Fiscal Examiner A), DMSMU, Accreditation Team
	2. Check and approve the accuracy of the details.		5 minutes	Fiscal Controller II, DMSMU /Fiscal Controller III, Accreditation Team
	3. Generate IRAF from the PARMM for signature by the authorized representative of the recipient ACA.		5 minutes	Social Insurance Officer (alternate Fiscal Examiner A), DMSMU, Accreditation Team
2. Confirm of pick up.	4. Retrieve the boxes of PAR from the storage room as specified in the IRAF and update the bin card and stock card.		60 minutes	Social Insurance Officer (alternate Fiscal Examiner A), DMSMU, Accreditation Team

	5. Coordinate with the recipient ACA the schedule and manner of distribution/pick up.		10 minutes	Social Insurance Officer (alternate Fiscal Examiner A), DMSMU, Accreditation Team
3. Pick up the PARs	6. Distribute the PARs to the recipient ACAs.		60 minutes	Social Insurance Officer (alternate Fiscal Examiner A), DMSMU, Accreditation Team
	7. Input in the PARMM the following details in the distribution of PARs to ACA using the signed IRAF: a. Manner of release; b. Date the PARs are released/distributed to ACA.		10 minutes	Social Insurance Officer (alternate Fiscal Examiner A), DMSMU, Accreditation Team
	<b>TOTAL:</b>		<b>1 hour and 45 minutes</b>	



### 3. MONITORING OF ACCREDITED COLLECTING AGENTS' (ACA) REMITTANCES, REPORTS AND DOCUMENTS

Acknowledgement of Receipt of PhilHealth Accredited Collecting Agents (ACAs) Remittances Reconciliation of ACAs Remittances vs. Treasury Database

<b>Office</b>	Standards, Enforcement and Reconciliation (SERU), Accreditation Team, Treasury Department	
<b>Classification</b>	Simple	
<b>Type of Transaction</b>	G2B & G2G	
<b>Who May Avail</b>	Accredited Collecting Agents	
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>
Document No 1. Validated ACAs Remittance Report ( 1 copy, soft copy).		Cash Division
Document No 2. Treasury Data Editing Module (TDEM) generated uploaded transactions ( 1 copy, scanned/photocopy)		SERU, Accreditation Team
Document No 3. ACAs Summary of Remittance (RF2a) and Bank Abstract of Daily Collection (1 copy, scanned/photocopy)		ACAs
Document No 4. Data Amendment Request Form (DARF) ( 1 copy, scanned/photocopy)		SERU, Accreditation Team
Document No 5. Cancelled PARs/ Dishonored Checks. ( 1 copy/scanned/photocopy)		ACAs
Document No 6. Generated Bad files ( 1 copy, scanned/photocopy)		ACAs
Document No. 7. Formal request letter to update the ACAs library in TDEM. ( 1 copy/ original or photocopy)		ACAs
Document No.8. Statements of Accounts (SOA) for late remittances, late submission of documents and late uploading of texfiles in Electronic Collection Reporting System (ECRS). ( 1 copy, original copy)		SERU, Accreditation Team

CLIENT'S STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Accredited Collecting Agents				
1. Submit Proof of Remittance and RF2a to SERU.	1. Prepare Summary of ACAs Remittances and forward to Cash Division	NONE	30 minutes	Fiscal Controller II, Fiscal Examiner A , Social Insurance Officer , SERU Account Officer, SERU, Accreditation Team
	2. Upon receipt of validation from Cash Division, prepare final Summary of ACAs Remittances		30 minutes	Fiscal Examiner A, SERU, Accreditation Team
	3. Review and sign the report		15 minutes	Fiscal Controller II, SERU/Fiscal Controller III, Accreditation Team
2. Upload RF2 textfile in ECRS.	4. Check RF2a and RF2 textfile in TDEM generated report if tally with the Proof of Remittance submitted.		30 minutes	Fiscal Controller II, Fiscal Examiner A , Social Insurance Officer , SERU Account Officer, SERU, Accreditation Team
3. Report Cancelled and Dishonored check transactions to SERU.	5. Prepare DARF.		15 minutes	Fiscal Controller II, Fiscal Examiner A , Social Insurance Officer , SERU Account Officer, SERU, Accreditation Team
4. Submit Letter Request to update ACAs Library in TDEM.	6. Adjust/ Correct transaction in TDEM.		30 minutes	Fiscal Examiner A, Data Management Systems Monitoring Unit (DMSMU), Accreditation Team
5. Upload corrected bad files to ECRS.	7. Update TDEM's ACAs Library.		15 minutes	
6. Submit Billings tally with the Reconciled	8. Post ACAs Remittance, TDEM Uploaded transactions, Adjustments (DARF) to Monitoring		15 minutes	Fiscal Controller II, Fiscal Examiner A , Social

Remittances.	Report of ACAs Collection and Remittance vs. Treasury Database (Status Report).			Insurance Officer / SERU Account Officer, SERU, Accreditation Team
	9. Prepare Statement of Account for late remittances, late submission of documents and late uploading of textfile to ECRS.		15 minutes	Fiscal Controller II, Fiscal Examiner A, Social Insurance Officer / SERU Account Officer, SERU, Accreditation Team
	10. Review and sign the SOA		15 minutes	Fiscal Controller II, SERU/Fiscal Controller III, Accreditation Team
	11. Inform ACA to submit Billings providing the transaction count of reconciled remittances		5 minutes	Fiscal Controller II, Fiscal Examiner A, Social Insurance Officer / SERU Account Officer, SERU, Accreditation Team
	12. Stamp verified and forward to Agents Relations Unit (AgRU) for monitoring of transaction fees.		5 minutes	Fiscal Controller II, Fiscal Examiner A, Social Insurance Officer / SERU Account Officer, SERU, Accreditation Team
<b>TOTAL:</b>			<b>6 hours and 20 minutes</b>	

<b>4. REMITTANCES</b>				
Acknowledgement of Receipt of PhilHealth Accredited Collecting Agents (ACAs) Remittances				
<b>Office:</b>	Treasury Department, Cash Division			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	Over-the-Counter Remittances of Accredited Collecting Agents (ACAs)			
<b>Who May Avail:</b>	G2B - Business Entity (ACAs which opted to pay OTC in PhilHealth Head Office)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Document No. 1 - 1 Managers Check		Documents 1&2 from paying ACAs		
Document No. 2 - 1 original copy of ACAs Remittance Report (RF2a)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Proceed to Cash Division and present the Managers Check and RF2A  1 Manager's check - duly signed and complete details, correct amount in words and figures 1 Original copy of ACAs Remittance Report (RF2a)	Check/ scrutinize the correctness of the details of Managers check as against Remittance Report (RF2a) and process in the Over-the-Counter Collection System (OTCCS) the remittance of ACAs.	None	10 minutes	Collecting Officer of Cash Division, Treasury Department
	Print, check the correctness of details and sign the PhilHealth Official Receipt and hand it over to the paying ACA.			
Present the PhilHealth Official Receipt (POR) and ACAs Remittance Report to Standards and Enforcement Section (SERU) of Accreditation Team in charge of ACAs	Validate the amount which may be broken down as follows: Regular remittance and penalty	None	10 minutes	Team Members of SERU, Accreditation Team, Treasury Department
<b>TOTAL:</b>			<b>20 minutes</b>	

## 5. PAYMENT OF APPROVED DISBURSEMENT VOUCHERS

### Check Releasing

Office:	Treasury Department, Cash Division			
Classification:	Simple			
Type of Transaction:	Releasing of checks to payees of approved disbursement vouchers			
Who May Avail:	G2B – Business Entity for suppliers G2G – Another Government Agency, PhilHealth Employees			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1 original set of BIR authorized Official Receipt (OR)		Provided by the Business Entity and Agency/ Payee		
2 valid government issued IDs of claimant - present the original and 1 photocopy for Cash Division's file				
1 original authorization letter of authorized personnel with attached photocopy of government issued ID of authorizing personnel of business entity				
For payee who is a PhilHealth employee/other government agencies/ former employee(s) of PhilHealth - 1 original notarized Special Power of Attorney for authorized representative of employee who is not an immediate family and with attached photocopy of 1 valid government issued ID of payee				
For family member of payee who is a PhilHealth employee /other government agencies/ former employee(s) of PhilHealth - authorization letter of payee with attached photocopy of valid government issued ID of payee and 2 valid government issued IDs of authorized representative				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
G2B - Suppliers				
Present the applicable documentary requirements enumerated above to Cash Division upon claiming of check	Validate the documents presented. Retrieve DV and check.	None	2 minutes	Check releasing personnel - Cash Division, Treasury Department
Sign the original copy of approved disbursement	Review the OR issued	None	3 minutes	Check releasing

voucher and issue original Official Receipt (OR)				personnel - Cash Division, Treasury Department
Sign the Check Register	Release the check	None	1min	
Sign the Tax Certificate original and receiving copy	Release the supplier’s copy of tax certificates (Form 2306 and/or 2307)	None	2mins	
G2G - Government Agency				
Present the documentary requirements to Cash Division upon claiming of check	Validate the documents presented. Retrieve DV and check.	None	2mins	Check releasing personnel - Cash Division, Treasury Department
Sign the disbursement voucher and issue OR	Review the OR issued	None	3mins	
Sign the Check Register	Release the check	None	1min	
G2G - Government Employee				
Present valid ID	Validate ID presented. Retrieve DV and check.	None	2mins	Check releasing personnel - Cash Division, Treasury Department
Sign the disbursement voucher and check register	Release the check	None	1min	
G2G - Government Employee's Representative				
Present Authorization Letter/Special Power of Attorney (SPA), whichever is applicable, and valid IDs	Validate documents presented. Retrieve DV and check.	None	2mins	Check releasing personnel - Cash Division, Treasury Department
Sign the disbursement voucher and check register	Release the check	None	1min	
TOTAL:			20 minutes	

## 6. ACCREDITATION OF GOVERNMENT SECURITIES ELIGIBLE DEALERS (GSEDS)

Accreditation of Government Securities Eligible Dealers (GSEDs) on the sale of Government Securities (GS) in the secondary market via Non-Restricted Trading Environment (NRTE) of the Bureau of the Treasury

<b>Office:</b>	Treasury Department, Investments Division
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	Accreditation of Counterparty Bank/Institution for Government Securities Transactions in the Secondary Market
<b>Who May Avail:</b>	G2B – Business Entity (Government Securities Eligible Dealers-Private Banks and Investment Houses)

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Document 1: Letter addressed to SVP Fund Management Sector requesting for accreditation as GSED counterparty bank of PhilHealth for Government Securities (GS) Trading	Provided by the Government Securities Eligible Dealer (GSED)
Document 2: Certified True Copy (1) of latest PDEX Certification	
Document 3: Certified True Copy (1) of renewal of SEC Registration as GSED together with the list of authorized fixed income market salesman and associated person	
Document 4: Certified True Copy (1) of GSED's SEC Registration	
Document 5: Certified True Copy (1) of latest Secretary's Certificate together with the list of authorized signatories	
Document 6: Original copy (1) of Certificate of Good Standing from Three (3) Government Agencies	
Document 7: Photocopy (1) of Audited FS for the last three (3) years (including the interim FS if available)	

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit the documentary requirements	Validate/ Check/ the completeness of documentary requirements	None	30 minutes	Fiscal Controller II, Fixed Income Section, Investment Division
	Follow -up the completion of Documentary Requirements		2 working days	Fiscal Controller II, Fixed Income Section, Investment Division
	Evaluation of the Request for Accreditation/Re-Accreditation upon completion of Documents		7 working days	Fiscal Controller II, Fiscal Controller IV of Fixed Income Section, and Chief of Investment Division
	Issuance of the Letter Confirming Accreditation/Renewal of Accreditation		2 working days	Fiscal Controller II, Fixed Income Section, Investment Division
<b>TOTAL:</b>		<b>None</b>	<b>11 days and 30 minutes</b>	



# **F. Health Finance Policy Sector (HFPS)**

## **I. Accreditation Department**

1. RECEIVING AND PROCESSING OF DATA AMENDMENT REQUEST FORM (DARF) IN THE INTEGRATED PHILHEALTH ACCREDITATION SYSTEM (IPAS)				
Process in managing Accreditation database				
<b>Office:</b>	Accreditation Compliance Review Division Accreditation Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2B			
<b>Who May Avail:</b>	PhilHealth Regional Offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The PRO send DARF with supporting documents to Accreditation Dept (AD) to post in the iPAS the recommended amendment/changes in the health care providers records	1. Evaluate the received DARF and supporting documents if compliant to existing policy	None	1 day	ACRD-Database Technical personnel
	2. Post in the iPAS the requested amendment	None	1 day	ACRD-Database Technical personnel
	3. The technical staff who execute the posting in the iPAS signs the DAF	None		ACRD-Database Technical personnel
	4. The immediate supervisor reviews the correctness of the iPAS posting executed by the technical staff	None		ACRD-Database Section Head
	5. The immediate supervisor signs the DAF if correct. If not the technical staff will post necessary changes and signs for correction.	None		ACRD-Database Section Head

	6. Feedback the concerned PRO through email on the completion of request	None	1 day	ACRD-Database Technical personnel
	<b>TOTAL</b>		<b>3 days</b>	

2. RECEIVING AND PROCESSING OF DATA AMENDMENT REQUEST FORM (DARF) IN THE INTEGRATED PHILHEALTH ACCREDITATION SYSTEM (IPAS)				
Process in managing Accreditation database				
<b>Office:</b>	Accreditation Compliance Review Division_Accreditation Department			
<b>Classification:</b>	simple			
<b>Type of Transaction:</b>	G2B			
<b>Who May Avail:</b>	<i>Other offices (if applicable)</i>			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The PRO Legal Unit sends Return of Writ of Execution to AD, copy of letter with date receipt of health care provider under Temporary Suspension of Payment of Claims (TSPC)	1. Evaluates the received documents and prepares DARF	None	1 day	ACRD-Database Technical personnel
2. <i>DOH sends to AD copy of letter to health care institutions with cease and desist order, preventive suspension and lifting order</i>	2. Posts in the iPAS the amendment in the health care providers profile	None	1 day	ACRD-Database Technical personnel
	3. The technical staff who execute the posting in the iPAS signs the DARF	None		ACRD-Database Technical personnel
	4. The immediate supervisor reviews the correctness of the iPAS posting executed by the technical staff	None		ACRD-Database Section Head

	5. The immediate supervisor signs the DARF if correct. If not the technical staff will post necessary changes and signs for correction.	None		ACRD-Database Section Head
	6. Feedback the concerned PRO through email on the completion of posing	None	1 day	ACRD-Database Technical personnel
	<b>TOTAL</b>		<b>3 days</b>	

3. RECEIVING AND PROCESSING OF DATA AMENDMENT REQUEST FORM (DARF) IN THE INTEGRATED PHILHEALTH ACCREDITATION SYSTEM (IPAS)				
Process in managing Accreditation database				
<b>Office:</b>	Accreditation Compliance Review Division_Accreditation Department			
<b>Classification:</b>	simple			
<b>Type of Transaction:</b>	G2B			
<b>Who May Avail:</b>	Philhealth Regional Offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. New health care institutions contracted as providers of Z benefit packages	1. Evaluates the received documents and prepares DARF	None	1 day	ACRD-Database Technical personnel
	2. Posts in the iPAS the amendment in the health care providers profile	None	1 day	ACRD-Database Technical personnel
	3. The technical staff who execute the posting in the iPAS signs the DARF	None		ACRD-Database Technical personnel
	4. The immediate supervisor reviews the correctness of the iPAS posting executed by the technical staff	None		ACRD-Database Section Head
	5. The immediate supervisor signs the DARF if correct. If not the technical staff will post necessary changes and signs for correction.	None		ACRD-Database Section Head
	6. Feedback the concerned PRO through email on the completion of posing	None	1 day	ACRD-Database Technical personnel
	<b>TOTAL</b>		<b>3 days</b>	

#### 4. MANAGEMENT OF INTEGRATED PHILHEALTH ACCREDITATION SYSTEM (IPAS)

Process in managing Accreditation database

Office:	Accreditation Compliance Review Division Accreditation Department			
Classification:	Highly Technical			
Type of Transaction:	G2B			
Who May Avail:	Health Care Providers and other partners			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Feedback/recommendation from PROs re: enhancement of iPAS, new policy that needs enhancement of iPAS	1. Identify the need for system enhancement based on new issuance of policies or from PROs recommendation	None	1 day	ACRD-Database Technical personnel
	2. Draft System Request Form (SRF) and User Requirement Specification (URS).	None	2 days	
	3. The supervisor and Dept Manager review and approve the SRF and URS	None	1 day	AD-Senior Manager/ACRD-Division Chief
	4. Conduct of Daily Scrum Meeting (DSM) with the developer upon their receipt of the signed SRF/URS.	None	5 days	ACRD-Division Chief/Section Head/Database Technical personnel
	4. Signing of System Requirement Specification (SRF) once reviewed.	None	1 day	ACRD-Database Technical personnel
	5. Conduct of initial testing.	None	3 days	
	6. Conduct of follow up testing until final testing.	None	3 days	
	7. Signing of User Acceptance Form (UAF) once reviewed.	None	1 day	
	8. Wait for feedback on the successful system deployment.	None	3 days	
	TOTAL		20 days	

5. RECEIVING AND PROCESSING OF CONTRACTS OF HCIS AS Z BENEFIT PACKAGE PROVIDERS				
Managing Contracts of HCIs as Z benefit package providers				
<b>Office:</b>	Accreditation Policy Research Development Division Accreditation Department			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2B			
<b>Who May Avail:</b>	Health Care Providers and other partners			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1. LOI from contracted HCI (1 copy of original Letter of Intent)			1. From HCI	
2. Recommendation from PROs (1 copy of original Memo with Recommendation)			2. From PRO	
3. NBB compliance certificate (1 copy of original Certification)			3. From PRO	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Health Care Institution submit LOI for Initial /Renewal	1. AD reviews the recommendation of PRO, CSW and the detailed Co Payment proposal of the HCI	None	3 days	APRDD-Contracting Technical personnel
	2. AD prepares endorsement to BDRD, QAG and HFPS for approval of co pay	None	1 day	
	3. AD drafts contract for Internal Legal Department clearance (as applicable)	None	2 days	
	4. AD facilitates forwarding of the contract with clearance to concerned PRO for HCI signature	None	1 day	
	5. AD receives the contracts with HCIs signature and forward to the office of OPCEO for signature and approval	None	1 day	
	6. AD tags the approved contracts on the accreditation database	None	1 day	
	7. AD facilitates the notarization of the approved contract	None	1 day	
	8. AD prepare transmittal of notarized contract to the concerned HCI and appropriate office	None	1 day	
	9. Contracts mailed to concerned PROs	None	1 day	



	<b>TOTAL:</b>	<b>None</b>	<b>12 days</b>	
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## 6. INQUIRIES FROM INTERNAL/EXTERNAL STAKEHOLDERS THRU EMAIL/MAIL

Action on Inquiries received by the office through email

<b>Office:</b>	Office of the Manager-Accreditation Department			
<b>Classification:</b>	Simple *			
<b>Type of Transaction:</b>	G2B, G2C, G2G			
<b>Who May Avail:</b>	Health Care Providers, Government Agencies, LGUs, Members and other partners			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send inquiry thru email/mail	1. Receive inquiry thru email/mail	None	10 minutes	AD Office of the Manager-Receiving Clerk
	2. Assign to concerned staff	None	10 minutes	AD Office of the Manager-Senior Manager
	3. Route to concerned staff	None	10 minutes	AD Office of the Manager-Secretary
	4. Prepare the response to inquiry	None	1 hour	APRDD/ACRD-Technical staff
	5. Draft routed for approval of the Division Chief	None	30 minutes	APRDD/ACRD-Division Chief/Clerk
	6. if with correction return to the concerned personnel for revision, if approved proceed to next step	None	1 hour	APRDD/ACRD-Clerk/Technical Staff
	7. Route to OSM for approval	None	10 minutes	AD Office of the Manager-Secretary

	8. SM approved/signed response	None	30 minutes	AD Office of the Manager-Senior Manager
	9. Response shall be emailed/mailed to client	None	20 minutes	AD Office of the Manager-Releasing Clerk
2. Send acknowledgment receipt	10. Expect acknowledgement of receipt of client	None	upon receipt of the client	AD-Office of the Manager
	<b>TOTAL</b>		<b>4 hours</b>	

*\*= Status of accreditation, appeals, motion for reconsideration*

## 7. INQUIRIES FROM INTERNAL/EXTERNAL STAKEHOLDERS THRU EMAIL/MAIL

Action on Inquiries received by the office through email

<b>Office:</b>	Accreditation Department			
<b>Classification:</b>	Complex *			
<b>Type of Transaction:</b>	G2B, G2C, G2G			
<b>Who May Avail:</b>	Health Care Providers, Government Agencies, LGUs, Members and other partners			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send inquiry thru email/mail	1. Receive inquiry thru email/mail	None	10 minutes	AD Office of the Manager-Receiving Clerk
	2. Assign to concerned staff	None	10 minutes	AD Office of the Manager-Senior Manager
	3. Route to concerned staff	None	10 minutes	AD Office of the Manager-Secretary
	4. Coordinate with other offices/personnel in relation to the inquiry	None	3 days	APRDD/ACRD-Technical staff
	5. Prepare response to inquiry – takes max of 1 day	None	1 day	APRDD/ACRD-Technical staff
	6. Draft routed for approval of the Division Chief	None	2 hours	APRDD/ACRD-Division Chief/Clerk

	7. if with correction return to the Concerned personnel for revision, if approved proceed to next step	None	1 hour	APRDD/ACRD-Clerk/Technical Staff
	8. Route to OSM for approval	None	10 minutes	AD Office of the Manager-Secretary
	9. SM approved/signed response	None	30 minutes	AD Office of the Manager-Senior Manager
	10. Response shall be emailed/mailed to client	None	20 minutes	AD Office of the Manager-Releasing Clerk
2. Send acknowledgment receipt	11. Expect acknowledgement of receipt of client	None	upon receipt of the client	AD-Office of the Manager
	<b>TOTAL:</b>		<b>4 days, 4 hours, 30 minutes</b>	
*= Concerns including other offices				

## 8. INQUIRIES FROM INTERNAL/EXTERNAL STAKEHOLDERS THRU EMAIL/MAIL

Action on Inquiries received by the office through email

<b>Office:</b>	Accreditation Department			
<b>Classification:</b>	Highly Technical *			
<b>Type of Transaction:</b>	G2B, G2C, G2G			
<b>Who May Avail:</b>	Health Care Providers, Government Agencies, LGUs, Members and other partners			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send inquiry thru email/mail	1. Receive inquiry thru email/mail	None	10 minutes	AD Office of the Manager-Receiving Clerk
	2. Assign to concerned staff	None	10 minutes	AD Office of the Manager-Senior Manager
	3. Route to concerned staff	None	10 minutes	AD Office of the Manager-Secretary
	4. Coordinate with other offices/personnel in relation to the inquiry	None	3 days	APRDD/ACRD-Technical personnel
	5. Conduct meetings in relation to the inquiry	None	2 days	AD-Senior Manager/APRDD or ACRD-Division Chiefs/Technical staff
	6. Prepare response to inquiry – takes max of 3 day	None	3 days	APRDD/ACRD-Technical personnel

	7. Draft response routed for approval of the Division Chief	None	1 day	APRDD/ACRD-Division Chief/Clerk
	8. if with correction return to the Concerned personnel for revision, if approved proceed to next step	None	1 day	APRDD/ACRD-Clerk/Technical Staff
	9. Revise draft routed to OSM for approval	None	1 hour	AD Office of the Manager-Secretary
	10. SM approved/signed response	None	30 minutes	AD Office of the Manager-Senior Manager
	11. Response shall be emailed/mailed to client	None	20 minutes	AD Office of the Manager-Releasing Clerk
2. Send acknowledgment receipt	12. Expect acknowledgement of receipt of client	None	upon receipt of the client	AD-Office of the Manager
	<b>TOTAL:</b>		<b>10 days, 2 hours, 20 minutes</b>	
*= Appeals, motion for reconsideration, contracts, plans and budget				

## **F. Health Finance Policy Sector (HFPS)**

### **II. Office of the Senior Vice President-HFPS**



1. INQUIRIES FROM INTERNAL/EXTERNAL STAKEHOLDERS THRU EMAIL/MAIL				
Action on Inquiries received by the office through email				
<b>Office:</b>	Office of the Senior Vice President			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		NONE		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Send inquiry thru email/mail	Receive mail/email inquiry	none	2 minutes	CLERK III OSVP HFPS
	Encoding of document to database	none	30 minutes to 2 hours	Clerk III osvp HFPS
	Initial review of document	none	1 day	Social Insurance Assistant I or Executive Assistant IV osvp hfps
	Document to be reviewed by the SVP	none	1 day	Senior Vice President osvp hfps
	Route to concerned staff/office for action	none	1 hour	Clerk III osvp hfps
	Prepare the response to inquiry	none	3 days	SIA I/EA IV/Office under HFPS
	If with correction return to the concerned personnel for revision, if approved proceed to next step	none	1 hour	clerk III osvp hfps
	For approval and signature of the SVP	none	1 day	Senior Vice President osvp HFPS
	Response shall be emailed/mailed to client	none	1 day	Clerk III osvp hfps
2. Send acknowledgment receipt	Expect acknowledgement of receipt of client	none		
	<b>TOTAL</b>		<b>7 days</b>	

## **F. Health Finance Policy Sector (HFPS)**

### **III. PhilHealth Cares Management Office (PCMO)**

<b>1. CUSTOMER ASSISTANCE</b>				
Customer Assistance (Check Member's Eligibility, Issue pertinent forms)				
<b>Office:</b>	PhilHealth CARES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C-Government to Client			
<b>Who May Avail:</b>	Clients within the Hospital			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Client Identification/ information		Client		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Sign in the Client Log sheet	1. Give the log sheet to the client	None	1- 2 minutes	P-CARES (PhilHealth Customer Assistance, Relations and Empowerment Staff)/ SIA I
2 Verbalize the nature of inquiry.	2. Analyze the nature of client's inquiry	None	1-5 minutes	P-CARES (PhilHealth Customer Assistance, Relations and Empowerment Staff)/ SIA I
3. Provide necessary supporting documents or information in relation to the inquiry (Government Issued Valid ID, Birth certificate, SOA, IEC Materials, BPN, etc)	3. Answer the client or refer to responsible office.	None	1 minute- 5 mins	P-CARES (PhilHealth Customer Assistance, Relations and Empowerment Staff)/ SIA I
<b>TOTAL:</b>		None	<b>3-12 minutes</b>	

## 2. CONDUCT OF PHILHEALTH PATIENT EXIT SURVEY

Conduct of PhilHealth Patient Exit Survey

<b>Office:</b>	PhilHealth CARES			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C-Government to Client			
<b>Who May Avail:</b>	Clients who availed PhilHealth Benefits			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Client Identification/ information		Client		
Statement of Account (1 original copy)		None		
Proof of Payment (1 Original copy )		None		
PPES Tool (1 original copy)		P-CARES/ SMD		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client is for discharge.	1. P-CARES seeks permission to conduct PPES	None	1- 2 minutes	P-CARES (PhilHealth Customer Assistance, Relations and Empowerment Staff)/ SIA I
2. Verbalize the willingness to participate in the survey and signs the informed consent	2. Ask client to sign informed consent and conduct the survey proper.	None	5-10 minutes	P-CARES (PhilHealth Customer Assistance, Relations and Empowerment Staff)/ SIA I
<b>TOTAL:</b>		None	<b>6-12 minutes</b>	

## **F. Health Finance Policy Sector (HFPS)**

### **IV. PhilHealth Malasakit Center**

1. PHILHEALTH- MALASAKIT CENTER CUSTOMER ASSISTANCE				
Check Member's Eligibility and Issue pertinent forms				
<b>Office:</b>	PhilHealth Malasakit Center			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Client			
<b>Who May Avail:</b>	Clients within the Malasakit Centers			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Client Identification/ information		Client		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Sign in the Client Log sheet	1. Give the log sheet to the client	None	1- 2 minutes	P-Malasakit Personnel
2. Verbalize the nature of inquiry.	2. Analyze the nature of client's inquiry	None	1-5 minutes	P-Malasakit Personnel
3. Provide necessary supporting documents or information in relation to the inquiry (Government Issued Valid ID, Birth certificate, SOA, IEC Materials, BPN, etc)	3. Answer the client or refer to partner offices	None	1 minute- 5 mins	P-Malasakit Personnel
<b>TOTAL:</b>			<b>3-12 minutes</b>	

## **G. Information Management Sector (IMS)**

### **I. Information Technology Management Department (ITMD)**

#### **a. Information System Management Division (ISMD)**

## 1. PROCESSING OF SOFTWARE CERTIFICATION/ COMPLIANCE REQUEST

This service is used to ensure that the requester's system complies with the standard data, transmission and integration requirements provided by the Corporation.

<b>Office/Division:</b>	IT Management Department - IS Management Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2B - Government to Business and G2G - Government to Government			
<b>Who May Avail:</b>	Health Care Institutions, Government Agencies, Other external partners			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Software Certification Application Form (SCAF)		PhilHealth Website		
One (1) Original Copy of Non-Disclosure Agreement (NDA)		PhilHealth Website		
One (1) Original Copy of Software Certification Agreement (SCA)		PhilHealth Website		
One (1) Original Copy of Software Certification Kit (SCK)		Philhealth Regional Office IT		
One (1) Original Copy of Software Validation Test Form (SSVTF)		Philhealth Regional Office IT		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Application for Software Certification with attached documents using IT Ticketing System.	1.1 Receive fully accomplished NDA, SCAF and SCA 1.2. Check completion of the supporting documents. 1.3. Set and coordinate schedule of the Software Certification Test.	None	3 working days	Receiving Clerk PRO IT
2. Conduct of the Scheduled Software Certification Test	3.1. Prepare test data for the test. 3.2. Conduct 3 cycles of testing to ensure compliance of the system to the Software Validation Test Form (SSVTF). 3.3. Prepare, finalize and sign-off in the SSVTF.	None	5 working days	PRO IT
3. System Software Certification	4.1 Receive PRO IT Endorsement with the attached test	None	12 working	PRO IT



Completion	documents as proof of system compliance 4.2 Prepare Software Certificate / Notice of System Compliance for signature of authorized signatories 4.3 Route the Software Certificate / Notice of System Compliance to authorized signatories 4.4 Register HCI in the Database.		days	UPECS-EMR Team RVP ITMD Heads CIO PCEO
<b>TOTAL:</b>		<b>None</b>	<b>20 working days</b>	

## 2. REGISTRATION TO PHILHEALTH SYSTEMS AND INTEGRATION SERVICES

The purpose of this service is to register and enable access to specific PhilHealth systems and/or application programming interface (API) provided by the Corporation.

<b>Office/Division:</b>	IT Management Department - IS Management Division
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2B - Government to Business and G2G - Government to Government
<b>Who May Avail:</b>	Any external partners with existing MOA/Contract facilitated by a Business Process or Program Office

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Service Request Form (1 original copy)		IT Helpdesk		
Business and User Requirements (1 original copy)		OSM-ITMD		
Memorandum of Agreement (1 original copy)		Requesting Office		
Data Sharing Agreement (1 original copy)		Requesting Office		
Non-Disclosure Agreement (1 original copy)		Requesting Office		
Application Integration Registration Form (1 original copy)		OSM-ITMD		
Service Terms of Use (1 original copy)		OSM-ITMD		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Create a ticket request using the IT Ticketing System and attach the scanned documents. Submit all hardcopy document requirements in the Office of the Senior Manager reflecting the ticket number in the Service Request Form.	1.1. Receive and log the request with existing ticket request. Return hardcopy requests for non-existing tickets. 1.2. Stamp, indicate the request number and return the receiving copy if any. 1.3. Endorse to the IS Management Division.	None	3 working days	Receiving Clerk Office of the Senior Manager, IT Management Department
	1.4. Endorse for IMS approval based on ISSP and Corporate Thrust. 1.5. Endorse to OSM-ITMD to present and report for Management Approval/Prioritization.	None	5 working days	Division Chief of the IS Management Division

	1.6. Release Request Status Update to the requesting office. 1.7. Assign a Scrum Team to handle approved request.			
	1.8. Define and document the data formats, layout and standards, transmission requirements, security to be implemented and the input/output parameters.	None	10 working days	Scrum Team ISMD
	1.9. Conduct items no. 2-5 under the #5. SOFTWARE DEVELOPMENT SERVICES	None	23 working days	Scrum Team ISMD
	1.10. Prepare the Interoperability Implementing Guidelines and Specifications, Software Validation Checklist	None	10 working days	Scrum Team ISMD
	1.11. Release of the Interoperability Kit and Confirmation Slip of the Orientation/Meeting Schedule to the external partners and requesting office.	None	3 working days	Scrum Team ISMD
2. Submit the Orientation Confirmation Slip to the OSM-ITMD.	2.1. Conduct the orientation to the external partner/s in coordination to the requesting office. 2.2. Document the conduct of the orientation.	None	5 working day	Scrum Team ISMD
<b>TOTAL:</b>		<b>None</b>	<b>59 working days</b>	

### 3. SOFTWARE DEVELOPMENT SERVICES

This service facilitates the request for automation of business processes and support to Corporate policies, programs and projects to be developed internally. Activities will be based on the Scrum Methodology where the project deliverables will be subdivided into a 2 week period, hence process from 2-5 will be repeating until completion of the Project.

<b>Office/Division:</b>	IT Management Department - IS Management Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2B - Government to Business and G2G - Government to Government			
<b>Who May Avail:</b>	Any PhilHealth Business Process Units or Program Offices.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Service Request Form (#1 original copy)		IT Helpdesk		
Business User Requirements Document (#1 original copy)		OSM-ITMD		
PhilHealth Circular and Policy Issuances (#1 copy)		Requesting Office		
Corporate Orders and Implementing Guidelines (#1 copy)		Requesting Office		
Standard Operating Procedures (#1 copy)		Requesting Office		
Risk Assessment Certificate (#1 copy)		Risk Management Department		
Updated Prioritized Sector Project List (#1 signed original copy)		Sector of the Requesting Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Create a ticket request using the IT Ticketing System and attach the scanned documents. Submit all hardcopy document requirements in the Office of the Senior Manager reflecting the ticket number in the Service Request Form.	1.1. Receive and log the request with existing ticket request. Return hardcopy requests for non-existing tickets. 1.2. Stamp, indicate the request number and return the receiving copy if any. 1.3. Endorse to the IS Management Division.	None	3 working days	Receiving Clerk Office of the Senior Manager, IT Management Department
	1.4. Endorse for IMS approval based on ISSP and Corporate Thrust. 1.5. Endorse to OSM-ITMD to present and report for Management Approval/Prioritization. 1.6. Release Request Status Update to the requesting	None	5 working days	Division Chief of the IS Management Division

	office. 1.7. Assign a Scrum Team to handle approved request.			
2. Define all product backlog based on priority.	2.1. Group the defined product backlog into actionable deliverables within the prescribed period. 2.2. Prepare the Project Releases Timeline. 2.3. Prepare the System Requirements Specification for the applicable development period based on sequence of the Project Timeline. 2.4. Release the Project Timeline and SRS to the requesting office for approval.	None	5 working days	Scrum Team
3. Submit the approved the Project Timeline and the System Requirements Specification (SRS) for the initial sprint.	3.1. Conduct Sprint Planning. 3.2. Prepare the Project Journal.	None	3 working days	Scrum Team
4. Participate in the Daily Scrum Meeting	4.1. Conduct the Daily Scrum. 4.2. Conduct the Sprint Review. 4.3. Endorse the developed application for user acceptance test and security assessment compliance. 4.4. Update the Project Journal.	None	10 working days from project start date	Scrum Team ISMD
5. Submit the completely signed System Acceptance Form (SAF).	5.1. Prepare for the deployment documentations. 5.2. Submit deployment requirements to the IT Resource Management Division - IT Management Department. 5.3. Conduct Sprint Retrospective. 5.4. For publicly facing applications, endorse project to Information Security Department to facilitate 3rd Party Vulnerability Assessment Test	None	5 working days	Scrum Team ISMD
Repeat processes from 2-5 until all project deliverables has been completed.				
<b>TOTAL:</b>		<b>None</b>	<b>31 working days per project iteration</b>	

#### 4. SUPPORT MANAGEMENT SERVICES

The service involves the processing or resolution of incidents, complaints, inquiries and issues reported by internal and external users of PhilHealth systems.

<b>Office/Division:</b>	IT Management Department - IS Management Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C - Government to Citizen, G2B - Government to Business and G2G - Government to Government			
<b>Who May Avail:</b>	Internal or external users of PhilHealth Systems			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
A detailed description of incidents, complaints, inquiries and issues (#1 original copy)		PhilHealth System Users		
Screenshot of incidents, complaints, inquiries and issues (#1 original copy)		PhilHealth System Users		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
External User: 1. Create a ticket indicating the detailed description and screenshots of incidents, complaints, inquiries and issues via the PhilHealth Ticketing System at URL?	1.1. Acknowledge receipt of the incidents, complaints, inquiries and issues 1.2 Endorse the incidents, complaints, inquiries and issues to the concerned scrum team.	None	3 working days	UPECS-EMR
Internal User: 1. Email the detailed description and screenshots of incidents, complaints, inquiries and issues to IT Helpdesk Unit (ithelpdesk@philhealth.gov.ph)	1.1. Acknowledge receipt of the incidents, complaints, inquiries and issues 1.2 Endorse the incidents, complaints, inquiries and issues to the concerned office/team.			IT Helpdesk
	1.3. Evaluate the incidents, complaints, inquiries and issues	None	1-3 working days (simple) 4-7 working days (moderate)	Concerned Scrum Team

			8-20 working days (complex)	
	1.4. Provide feedback or resolution to the UPECS-EMR team or escalate issues to concerned office.	None	1 working day	Concerned Scrum Team
	1.5. Provide feedback or resolution to the reporting user	None	1 working day	UPECS-EMR
<b>TOTAL:</b>		<b>6 working days (simple)</b> <b>10 working days (moderate)</b> <b>22 working days (complex)</b>		

## 5. SYSTEM INTEGRATION AND DATA SHARING SERVICES

This facilitates the request for system integration and/or data sharing requests received from other external partners.

<b>Office/Division:</b>	IT Management Department - IS Management Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2B - Government to Business and G2G - Government to Government			
<b>Who May Avail:</b>	Health Care Institutions, Government Agencies, Other external partners			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Service Request Form (#1 original copy)		IT Helpdesk		
Business User Requirements Document (#1 original copy)		Requesting Office		
PhilHealth Circular and Policy Issuances (#1 copy)		Requesting Office		
Corporate Orders and Implementing Guidelines (#1 copy)		Requesting Office		
Standard Operating Procedures (#1 copy)		Requesting Office		
Risk Assessment Certificate (#1 copy)		Requesting Office		
Updated Prioritized Sector Project List (#1 signed original copy)		Sector of the Requesting Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit all document requirements in the Office of the Senior Manager, IT Management Department.	1.1. Receive and log the request. 1.2. Stamp, indicate the request number and return the receiving copy if any. 1.3. Endorse to the IS Management Division.	None	3 working days	Receiving Clerk Office of the Senior Manager, IT Management Department
	1.4. Endorse for IMS approval based on ISSP and Corporate Thrust. 1.5. Endorse to OSM-ITMD to present and report for Management	None	5 working days	Division Chief of the IS Management Division



	Approval/Prioritization. 1.6. Release Request Status Update to the requesting office. 1.7. Assign a Scrum Team to handle approved request.			
2. Define all product backlog based on priority.	2.1. Group the defined product backlog into actionable deliverables within the prescribed period. 2.2. Prepare the Project Releases Timeline. 2.3. Prepare the System Requirements Specification for the applicable development period based on sequence of the Project Timeline. 2.4. Release the Project Timeline and SRS to the requesting office for approval.	None	5 working days	Scrum Team
3. Submit the approved the Project Timeline and the System Requirements Specification (SRS) for the initial sprint.	3.1. Conduct Sprint Planning. 3.2. Prepare the Project Journal.	None	3 working days	Scrum Team
4. Participate in the Daily Scrum Meeting	4.1. Conduct the Daily Scrum. 4.2. Conduct the Sprint Review. 4.3. Endorse the developed application for user acceptance test and security assessment compliance. 4.4. Update the Project Journal.	None	10 working days	Scrum Team
5. Submit the completely signed System Acceptance Form (SAF).	5.1. Prepare for the deployment documentations.	None	5 working days	Scrum Team

	5.2. Submit deployment requirements to the IT Resource Management Division - IT Management Department. 5.3. Conduct Sprint Retrospective. 5.4. For publicly facing applications, endorse project to Information Security Department to facilitate 3rd Party Vulnerability Assessment Test			
Repeat processes from 2-5 until all project deliverables has been completed.				
<b>TOTAL:</b>			<b>31 working days</b>	

## **G. Information Management Sector (IMS)**

### **II. Project Management Office-PhilHealth Identity Management System (PMO-PIMS)**

## 1. FACILITATION OF IT RELATED CONCERNS FROM OTHER PHILIPPINE GOVERNMENT AGENCIES OR EXTERNAL STAKEHOLDERS

Collaborate with external agencies (Government and Non-government) the request received for Projects within the sector. Inter-organizational collaboration such as to: mutually achieve goals, share information, resources, and responsibilities, as well as make joint decisions and solve problems.

<b>Office/Division:</b>	Project Management Office – PhilHealth Identity Management System (PMO-PIMS)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G – Government to Government, G2B - Government to Business			
<b>Who may avail:</b>	External Agencies / External Offices			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Request Letter (1 Original copy or digital copy)			Requesting Office	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request letter	1.1 Receive and identify request	None	10 minutes	Administrative Receiving Officer
	1.2 Evaluate and process the request letter	None	20 minutes	Senior Manager PMO-PIMS
	1.3 Provide further instructions	None	1 day	Senior Manager PMO-PIMS
	1.4 Coordinate with other PhilHealth offices involve	None	3 days	SIA I and SIO II
	1.5 Prepare response letter	None	1 day	SIA I and SIO II
2. Receive response letter				
<b>TOTAL:</b>		<b>None</b>	<b>5 Days and 30 Minutes</b>	

## **H. Legal Sector**

### **I. Fact-Finding Investigation and Enforcement Department (FFIED)**

## 1. CONDUCT OF FACT-FINDING INVESTIGATION

Perform claims validation through domiciliary visits and health care provider inspection, to verify from members the authenticity (and quality) of benefits and services provided by a health care provider.

<b>Office</b>	FACT-FINDING, INVESTIGATION, AND ENFORCEMENT DEPARTMENT Investigation and Enforcement Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G – Government to Government G2C – Government to Client			
<b>Who May Avail:</b>	PRO Legal Offices, Other Government Agencies such as Presidential Anti-Corruption Commission, any Individual			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
G2C – Complaint report filed by walk-in client G2G – Transmittal of report or letter recommending / requesting the conduct of investigation			Fact-Finding, Investigation, and Enforcement Department PhilHealth Regional Office – Legal Office To be issued by reporting agency/office	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
File the complaint (Salaysay) or endorse the report recommending conduct of investigation	1.1 Receive the complaint or report for investigation 2.1 Record in transaction recording system or Legal Case Management System	None	*1 day	Administrative Personnel
	3.1 Evaluate complaint/ report 4.1 Assign complaint / report to an investigator		*1 day	Department Manager / Division Chief
	5.1 Prepare documents necessary in the conduct of fact-finding investigation 5.1.1 Secure Official Business or Travel Order 5.1.2 Prepare cash advance, if necessary		*15 days	Investigator

	6.1 Perform the investigation and validation of claims through domiciliary visitation to members or health care provider inspection 7.1 Evaluate documents gathered 8.1 Prepare and submit fact-finding investigation report 8.1.1 Secure medical evaluation if necessary to substantiate the report		*43 days ** subject to Extension	
	9.1 File complaint affidavit if there is prima facie evidence of violation 10.1 Secure approval 11.1 Forward complaint to Prosecution Department		Within *10 days from the issuance of fact-finding investigation report	Investigator Department Manager
	<b>TOTAL:</b>	<b>None</b>	<b>102 days</b>	

\* Title I, Rule VI, PhilHealth Rules on Administrative Cases (PROAC) Involving Health Care Providers, Members, and PhilHealth Employees

\*\* Rule 4, Section 5 of the 2021 Revised Rules of Procedure Implementing the Electronic Complaints Handling of the Anti-Red Tape Authority

## 2. PROCESSING OF COMPLAINTS FROM WALK-IN CLIENTS

Attending to the complaints filed by walk-in clients by FFIED

<b>Office</b>	FACT-FINDING, INVESTIGATION, AND ENFORCEMENT DEPARTMENT Investigation and Enforcement Division			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C – Government to Client			
<b>Who May Avail:</b>	Any Individual			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		Not Applicable		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Coordinate with the department receiving personnel	1.1 Receiving personnel to attend to client 2.1 Coordinate with an Investigator who would assist the complainant	None	10 minutes	Administrative Personnel
	3.1 Prepare documents necessary in the interview (i.e. Domiciliary Visit Undertaking or Salaysay)		30 minutes	Investigator
Discuss/detail the circumstances  3. Provide documents being required of, if available	4.1 Conduct the interview on the client 4.1.1 Record the discussion in the Salaysay 5.1 Finalize the discussion with the client 5.1.1 Secure approval by signing the Salaysay 5.1.2 Secure certified true copies of documents to substantiate the complaint		4 hours	Investigator
	6.1 Record the transaction with client and receipt of documents			
	7.1 Evaluate the report and recommend the conduct of fact-finding investigation		2 hours	Investigator
	<b>TOTAL:</b>	<b>None</b>	<b>6 hours, 4 minutes</b>	



## **H. Legal Sector**

### **II. Protest and Appeals Review Department (PARD)**

# 1. RESOLUTION OF APPEALS ON DENIED OR REDUCED BENEFIT CLAIMS FILED BY THE MEMBER OR HOSPITAL AS APPELLANT.

Within 15 days from receipt of the order of the PRO denying the Administrative Protest of an aggrieved health care provider or member, any party may file a letter-appeal with the PARD with proof of payment of the requisite appeal fee. The PARD may grant or deny an appeal based on the evidence and/or proof submitted by the appellant. The PARD shall resolve the appeals, as far as practicable, within a period of sixty (60) days from receipt of the appeal, citing the facts and the law or rules on which the same is based. The resolution of the PARD shall be final and executory.

<b>Office:</b>	Protests and Appeals Review Department (PARD)		
<b>Classification:</b>	Highly Technical		
<b>Type of Transaction:</b>	G2C - services whose clients is the transacting public; G2G - Government to another agency, employee or official		
<b>Who May Avail:</b>	PhilHealth member and Healthcare Provider availing the benefit claim		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Standard Requirements	Situational Requirements	Standard Requirements	Situational Requirements
1. Letter-appeal (1 Original copy)	1. CF3, CF4 if applicable (1 original copy)	1. Written by the Member and/or Hospital appellant	1. Healthcare Provider
2. MR/Order letter-denial (1 Original Copy)	2. MDR (1 original copy)	2. PRO CRC	2. Any PhilHealth office
3. PRO Letter-denial (1 Original Copy)	3. Medical/Clinical Records & documents (1 certified photocopy)	3. PRO BAS	3. Healthcare Provider
4. CF1, CF2, CSF (1 Original Copy)		4. Healthcare Provider and Company filled out	4. Healthcare Provider
5. SOA/Cost of services rendered (1 Original copy)	4. Doctors' Orders/Nurses Notes (1 certified photocopy)	5. Healthcare Provider	5. Healthcare Provider
6. PBEF (1 Original copy)	5. Hospital Cert of Eligibility/ Accreditation (1 certified photocopy)	6. Healthcare Provider - PhilHealth Section	6. Healthcare Provider
7. Validation Report (1 Original copy)	6. Pre-cataract surgery authorization (1 original copy)	7. Healthcare Provider	7. Member
8. Waiver for members claim (1 original copy)	7. PHIC Official Receipts/ Bank/ Bayad Centers (1 original copy)	8. Healthcare Provider	8. BIR, Post Office, DFA, PSA, LTO, SSS, GSIS, PAG-IBIG.

	8. Government Issued Identification Card of the member and/or dependent (1 certified photocopy)			9. Healthcare Provider, other government institutions
	9. Other pertinent medical and legal documents as may be required			10. Healthcare Provider, other government institutions
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. The Appellant files his/her appeal, including all original claim documents to PARD either by personally submitting his/her appeal or thru registered mail/private courier.	1.1 Receive the appeal on denied claim and check the required documents for completeness.	None (under the new rules-PROAC, appeal fee shall be required)	Within a period of sixty (60) days, as far as practicable, under the PhilHealth Rules on Administrative Cases (PROAC) Rule XVII Section 108.	Receiving Clerk - Admin Support Section
	1.2 Assign docket number and encode to the database of PARD			ASA C - Admin Support Section
	1.3 Forward appeal with supporting documents to Medical Division for medical evaluation and Legal Division for review and drafting of resolution. Prepare transmittal.			ASA C/AO II/SIS - Admin Support Section
	1.4 Receive, encode and assign of appealed claim to Medical Officers			ASA C - Medical Review Division
	1.5 Evaluation/Assessment of the merits of each appealed claim			Medical Specialists - Medical Review Division
	1.6 Prepare and issue Letter of Deficiency, if additional medical record is needed to support the claim			ASA C - Medical Review Division

	1.7 Prepare the Medical Evaluation Report with recommendation  1.8 Approval of the Medical Evaluation Report  1.9 Forward appeal with medical evaluation report and supporting documents to Legal Division for legal review and drafting of Resolution . Prepare the transmittal.			Medical Specialists - Medical Review Division  Division Chief, Medical Review Division  ASA C - Medical Review Division
1. The Appellant files his/her appeal, including all original claim documents to PARD either by personally submitting his/her appeal or thru registered mail/private courier.	1.10 Receive, encode, update database and assign of appealed claim to Attorney V/Legal Researchers	None	Within a period of sixty (60) days as far as practicable, under the PhilHealth Rules on Administrative Cases (PROAC) Rule XVII Section 108. Section 108.	Clerk III - Legal Support Division
	1.11 Legal review, prepare and drafting of recommended Resolution			Legal Researchers - Legal Support Division
	1.12 Review and recommend approval of the draft Resolution to the SM			Division Chief - Legal Support Division
	1.13 Forward draft Resolution with recommendation to the Senior Manager for final review and approval of recommended Resolution. Prepare transmittal			Clerk III - Legal Support Division
	1.14 Receive, encode to database and forward to Senior Manager for review, comment and approval			ASA C - Admin Support Section
	1.15 Review/approval of the Senior Manager (includes revision/return to Legal Division)			Senior Manager - PARD

	1.16 For signature by authorized signatories of the Final Resolution			Division Chief for LSD, Division Chief for MRD & Senior Manager - PARD
	1.17 Forward duly signed Resolution to the Releasing for mailing to the concerned parties. Encode and prepare transmittal			ASA C - Admin Support Section
	1.18 Update PARD database as to the status of the appealed claims			ASA C - Admin Support Section
	<b>TOTAL:</b>		<b>60 days, as far as practicable</b>	

## **H. Legal Sector**

### **III. Prosecution Department (PROSEC)**

## 1. CERTIFICATION ON PENDING/ ONGOING ADMINISTRATIVE COMPLAINTS AGAINST HEALTH CARE PROVIDERS (HCPS) AND MEMBERS

This is issued to the requesting party on a per request basis

<b>Office:</b>	Prosecution Department			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction</b>	G2B/G2G			
<b>Who May Avail</b>	PhilHealth Regional Offices and Other Government Entity such as NBI, COA, other agencies and concerned institutional and professional health care providers			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Letter Request stating its purpose			Requesting office	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Letter request to the Receiving staff/ Personnel	1. Stamp “received” with date the receiving copy of the requesting office	None	1 day	Receiving staff/ personnel of the department
	1.1 Refer the request to the Head of the Department for approval	None	1 day	Receiving staff/ personnel
	1.2 Instruct the Admin staff/ personnel to validate/ check and prepare the certification	None	1-2 working days	Head of the department
	1.3 Prepare the Certification and have it signed by the Head Office	Non	1-7 working days (depending on the frequency of request and nature of request)	Admin staff/ personnel
	1.4 Upon signing, send the Certification to the requesting office either by personal service, email or mail	None	1-3 working days	Admin staff/ personnel
	<b>TOTAL</b>	<b>NONE</b>	<b>14 days</b>	

# **I. Member Management Group (MMG)**



# 1. HANDLING OF INQUIRIES: POLICY GUIDELINES ON MEMBERSHIP, CONTRIBUTION AND BENEFIT AVAILMENT AND CLAIMS CONCERNS

This service provides for the official Reply / Resolutions / Clarifications / Recommendations regarding inquiries pertaining to policies and guidelines concerning Membership, Contribution, and Benefit Availment.

<b>Office/Division:</b>	Member Management Group (All Departments)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G– Government to Government; G2C- Government to Citizen G2B- Government to Business Entity			
<b>Who may avail:</b>	Concerned Internal / External CLIENTS of the Member Management Group: e.g., Members; Employers; Hospitals; or Other Government Agencies			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Copy of documents for evaluation (Letter, Memo, Issuances and/or policies, reports and other correspondences).			Concerned offices (internal and external clients)	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Endorsement of documents to the OVP-MMG for appropriate action	1.1. Receives and logs the documents containing the inquiry.	None	1 working day	Social Insurance Assistant I; Executive Assistant; OVP, MMG
	1.2. Evaluate to whom the inquiry will be endorsed for appropriate action by the concerned Segment.			
	1.3. Endorse to concerned Segment.			
	1.4. Concerned Segment receives and logs the endorsed document.			
	1.5. Assignment to concerned Segment head/staff for appropriate action.			
	1.6. Segment head/staff performs CSW and prepares draft reply memos and/or recommendations.		5 working days	Social Insurance Assistant / Officer / Specialist of the concerned Segment

	1.7. Endorse back to the OVP-MMG for approval of the reply memos / recommendations by the Vice President.			
	1.8. Review and approval by the Vice President		1 working day	Social Insurance Assistant I; Executive Assistant; Vice President of the OVP, MMG
2. Receives the Reply / Resolutions / Clarifications / Recommendations.	1.9. Once signed off by the Vice President, immediate endorsement to concerned stakeholders			
<b>TOTAL:</b>		<b>None</b>	<b>7 working days</b>	

## 2. ADJUSTMENT, CORRECTION AND DELETION OF PREMIUM CONTRIBUTION (WALK-IN AND THROUGH E-MAIL)

This service allows adjustment, correction and deletion of premium contribution (as the need arises)

Office/Division:	Member Management Group (OFP)	
Classification:	Complex	
Type of Transaction:	G2C- Government to Citizen; G2B- Government to Business Entity	
Who may avail:	Migrant Workers; Filipinos Living Abroad and Filipinos with Dual Citizenship	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
1 original copy of duly accomplished DARF 1 photocopy of Official Receipt or any proof of payment (to be submitted) At least 1 photocopy of valid ID of the member (to be submitted)  <u>Additional requirements if through representative:</u> 1 original copy of Authorization letter from member At least 1 original of valid ID of representative (to be presented) At least 1 photocopy of valid ID of member (to be submitted)		Any PhilHealth Office
1 scanned copy of duly accomplished DARF 1 scanned copy of Official Receipt or any proof of payment At least 1 scanned copy of valid ID of the member  <u>Additional requirements if through representative:</u> 1 scanned copy of Authorization letter from member At least 1 scanned copy of valid ID of representative At least 1 scanned copy of valid ID of member		Through e-mail

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
The member shall submit the required documents for walk-in.	1.1 Print/Receive the required documents and check for completeness.	None	Walk-in: 5 minutes per DARF 7 days if under PRO jurisdiction (to be endorsed to concerned PROs)	Social Insurance Assistant I; OFP Supervisor
	1.2 Endorse the documents to the concerned PRO.			
	1.3 Checks for the correctness of the data.			
	1.4 Issue the Member Data Record.			
Make sure to secure a copy of the MDR.			Email: depends on the number of e-mails received 5 minutes per DARF 7 days if under PRO jurisdiction (to be endorsed to concerned PROs)	
<b>TOTAL:</b>		<b>NONE</b>	<b>5 minutes (walk-in);</b>  <b>7 days if under PRO jurisdiction</b>	

### 3. AMENDMENT OF MEMBER DATA RECORD (WALK-IN AND THROUGH E-MAIL)

This service allows amendment of member's data information.

<b>Office/Division:</b>	Member Management Group (OFP)
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C- Government to Citizen; G2B- Government to Business Entity
<b>Who may avail:</b>	Migrant Workers; Filipinos Living Abroad and Filipinos with Dual Citizenship
CHECKLIST OF REQUIREMENTS	
<p>Case-to-case basis but not limited to the following supporting documents may be required from the applicant/s</p> <p>To correct/ add dependents, Submit 1 photo copy (walk-in)/ scanned copy (e-mail) of any of the following:            Marriage Contract for legal spouse            Birth Certificate or proof of adoption or guardianship (children below 21 years old)            Birth Certificate of the parents and the member to establish relationship with each other</p> <p>To amend civil status, Submit 1 photo copy (walk-in)/ scanned copy (e-mail) of any of the following:            Marriage contract (Married)            Death Certificate (widowed)            Legal documents to prove that marriage is nulled, voided or legally separated</p> <p>Additional requirements if through representative            1 original (walk-in)/ scanned copy (e-mail) of Authorization letter from member            At least 1 photo copy (walk-in)/ scanned copy (e-mail) of valid ID of member (to be presented)            1 original copy (walk-in)/ scanned copy (e-mail) of valid ID of a representative            1 original copy (walk-in)/ scanned copy (e-mail) of PhilHealth Form (PMRF)</p>	
WHERE TO SECURE	
Any PhilHealth Office	

1 scanned copy of duly accomplished DARF 1 scanned copy of Official Receipt or any proof of payment At least 1 scanned copy of valid ID of the member  <u>Additional requirements if through representative:</u> 1 scanned copy of Authorization letter from member At least 1 scanned copy of valid ID of representative At least 1 scanned copy of valid ID of member		Through e-mail		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
(Walk-in) The member shall submit the required documents for walk-in or e-mail.	1.1. Assigned staff shall check for the completeness documents submitted and shall prompt client for any missing requirements.	None	Walk-in 5 minutes per PMRF	Social Insurance Assistant I; OFP
	1.2. Assigned staff shall provide amended MDR upon confirmation from the client that all data information is correct.		5 minutes	
Check correctness of data.			Email 1-3 days (depends on the number of e-mails received)	
Make sure to secure a copy of the MDR.				
<b>TOTAL:</b>		<b>NONE</b>	<b>10 mins for walk-in 1-3 days (depends on the number of e-mails received for email)</b>	

#### 4. ENROLMENT PROCEDURES (WALK-IN AND THROUGH E-MAIL)

This service allows initial registration and enrolment to the National Health Insurance Program.

Office/Division:	Member Management Group (OFP)		
Classification:	Simple		
Type of Transaction:	G2C- Government to Citizen		
Who may avail:	Land-based Migrant Workers; Filipinos Living Abroad and Filipinos with Dual Citizenship		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
1 photocopy of Proof of Income *For declaration of dependents see separate section on Declaration of Dependents 1 Original copy of PhilHealth Form: PMRF At least 1 photocopy of valid ID of member (to be submitted) 1 original copy of valid ID of member (to be presented)  <u>*Additional requirements if through representative</u> 1 Original copy of Authorization letter from member 1 original copy of valid ID of representative (to be presented) At least 1 photo copy of valid ID of member (to be submitted)		Any PhilHealth Office	
At least 1 scanned copy valid ID of member 1 scanned copy of Proof of Income *For declaration of dependents see separate section on Declaration of Dependents 1 scanned copy of PhilHealth Form: PMRF <u>*Additional requirements if through representative</u> 1 scanned copy of Authorization letter from member 1 scanned copy of valid ID of representative		Through e-mail	

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
(Walk-in) Present a copy of any valid ID of the member and any proof of income. If through a representative, representative shall submit authorization letter and a photo copy of the member's valid ID.	1.1. Upon receipt of requirements, assigned staff shall verify record (if any).	No service fee (if registration only)  Computed Premium contribution for OFWs (if with premium payment)	Walk-in 5 minutes per PMRF	Social Insurance Assistant I; OFP
	1.2. Assigned staff shall provide premium contribution for OFWs.		5 minutes	
Member shall pay computed premium contribution at any accredited collecting agents.				
(E-mail) Client shall send through e-mail a copy of duly accomplished PMRF and proof of income.	3.1. Assigned staff shall verify the record upon receipt.		Email 1-3 days (depends on the number of e-mails received)	
4. Member shall pay computed premium contribution at any accredited collecting agents.	3.2. Assigned staff shall provide premium contribution for OFWs.			
<b>TOTAL:</b>		<b>None (if registration only)</b>  <b>Computed Premium contribution for OFWs (if with premium payment)</b>	<b>10 mins for walk-in</b> <b>1-3 days (depends on the number of e-mails received for email)</b>	



## 5. HANDLING OF INQUIRIES: GUIDELINES ON MEMBERSHIP, CONTRIBUTION AND BENEFIT AVAILMENT AND CLAIMS CONCERNS

This service responds to member inquiries on the following but not limited to Membership, Contribution, Benefit Availment and Claims Concerns.

Office/Division:	Member Management Group (OFP)			
Classification:	Simple			
Type of Transaction:	G2C- Government to Citizen  G2B- Government to Business Entity			
Who may avail:	Migrant Workers; Filipinos Living Abroad and Filipinos with Dual Citizenship			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1 original copy of transaction slip			Walk-in	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
(Through E-mail)  Send message their inquiries on Membership, Contribution, Benefit Availment and Claims Concerns.	1.1. Receives the inquiry and asks follow-up questions for verification if needed.	None	Email 3 days (depends on the number of e-mails received)	Social Insurance Assistant I; OFP
	1.2. Responds to client inquiries.			
(Through Walk-in)  Fill up Transaction Slip and write the	2.1. Receives the inquiry and asks follow-up questions for verification if needed.		Walk-in  3-10 minutes per	

inquiries.	Walk-in 3-10 minutes per client		client	
(Through Phone)	3.1. Receives the inquiry and asks follow-up questions for verification if needed.		Phone	
Inquires via phone call re: Membership, Contribution, Benefit Availment and Claims Concerns.	3.2 Responds to client inquiries.		3-10 minutes per client	
<b>TOTAL:</b>		<b>None</b>	<b>3 days (email);  3-10 minutes (walk-in/ phone)</b>	

## 6. ISSUANCE OF PHILHEALTH ID (WALK-IN)

This service allows client's request for a copy of their PhilHealth IDs.

<b>Office/Division:</b>	Member Management Group (OFP)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	Migrant Workers; Filipinos Living Abroad and Filipinos with Dual Citizenship			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1 Original copy of Transaction Slip At least 1 original copy of valid ID of member (to be presented) *Additional requirements if through representative 1 Original copy of Authorization letter from member 1 original copy of valid ID of representative (to be presented) At least 1 photo copy of valid ID of member (to be submitted)		Any PhilHealth Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
(Walk-in) Fill-out transaction Slip.	(Walk-in) 1.1. Upon receipt of transaction slip, or a valid authorization letter (if through a representative), assigned staff shall verify PIN.	None	2 minutes	Social Insurance Assistant I; OFP
Present a copy of any valid ID of the member. If through a representative, representative shall submit authorization letter and a photo copy of the member's valid ID.	1.2. Assigned staff shall provide a copy of the PhilHealth ID to the client.		3 minutes per transaction	
Make sure to secure a copy of the PhilHealth ID issued.			3 minutes per transaction	
<b>TOTAL:</b>		<b>None</b>	<b>5 mins</b>	

## 7. ISSUANCE OF MEMBER DATA RECORD (WALK-IN AND THROUGH E-MAIL)

This service allows client's request for a copy of their Member Data Record.

Office/Division:	Member Management Group (OFP)	
Classification:	Simple	
Type of Transaction:	G2C- Government to Citizen G2B- Government to Business Entity	
Who may avail:	Migrant Workers; Filipinos Living Abroad and Filipinos with Dual Citizenship	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
1 original Transaction Slip At least 1 original valid ID of member (to be presented) *Additional requirements if through representative 1 Original copy of Authorization letter from member 1 original copy of valid ID of representative (to be presented) At least 1 photo copy of valid ID of member (to be submitted)		Any PhilHealth Office
Request and provide the following member information: Last Name, First Name, Middle Name Date of Birth Place of Birth Address At least 1 scanned copy of valid ID of member  Additional requirements if through representative 1 scanned copy of Authorization letter from member At least 1 scanned copy of valid ID of representative		Through e-mail

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
(Walk-in) 1. The member shall submit documents for walk-in.	(Walk-in) 1.1. Upon receipt of transaction slip, or a valid authorization letter (if through a representative) assigned staff shall verify PIN.	No Service Fee	Walk-in 2 minutes	Social Insurance Assistant I; OFP
2. Make sure to secure a copy of the MDR issued.	1.2. Assigned staff shall provide a copy of the MDR to the client.		3 minutes per transaction	
(E-mail) 3. Client shall provide the member information for Issuance of MDR through e-mail.	(E-mail) 3.1. Assigned staff shall check for the completeness information and shall prompt client for any missing member information.		Email 1-3 days (depends on the number of e-mails received)	
4. Make sure to secure a copy of the MDR issued.	3.2. Assigned staff shall provide a copy of the MDR to the client.			
<b>TOTAL:</b>		<b>None</b>	<b>5 mins for walk-in 1-3 days (depends on the number of e-mails received for email)</b>	

### 8. PIN VERIFICATION (WALK-IN AND THROUGH E-MAIL)

This service allows verification of PhilHealth Identification Number necessary for PhilHealth transactions.

<b>Office/Division:</b>	Member Management Group (OFP)
<b>Classification:</b>	Simple
<b>Type of Transaction:</b>	G2C- Government to Citizen
<b>Who may avail:</b>	Migrant Workers; Filipinos Living Abroad and Filipinos with Dual Citizenship
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
<p>1 Original copy of Transaction Slip At least 1 original copy of valid ID of member (to be presented)</p> <p><u>*Additional requirements if through representative:</u>            1 Original copy of Authorization letter from member            1 original copy of valid ID of representative (to be presented)            At least 1 photo copy of valid ID of member (to be submitted)</p>	Any PhilHealth Office
<p>Request and provide the following member information:            Last Name, First Name and Middle Name            Date of Birth            Place of Birth            Address            At least 1 scanned copy valid ID of member</p> <p><u>*Additional requirements if through representative:</u>            1 Scanned copy of Authorization letter from member            At least 1 scanned copy of valid ID of representative</p>	Through e-mail

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
(Walk-in) 1. Fill-out transaction Slip.	(Walk-in) 1.1. Upon receipt of transaction slip, assigned staff shall verify PIN.	None	Walk-in minutes 2	Social Insurance Assistant I; OFP
2. Present a copy of any valid ID of the member.	2.1. Assigned staff shall provide PIN to the client.		3 minutes per transaction	
(E-mail) 3. Client shall provide the member information asked for PIN verification via e-mail.	(E-mail) 3.1. Assigned staff shall check for the completeness of member information and shall prompt client for any missing member information. 3.2. Assigned staff shall provide PIN to the client.		Email 1-3 days (depends on the number of e-mails received)	
<b>TOTAL:</b>		<b>None</b>	<b>5 mins for walk-in 1-3 days for email</b>	

## 9. POSTING OF PREMIUM CONTRIBUTION (WALK-IN AND THROUGH E-MAIL)

This service facilitates posting of premium contributions that were not reflected in the MDR.

<b>Office/Division:</b>	Member Management Group (OFP)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C- Government to Citizen			
<b>Who may avail:</b>	Land based Migrant Workers; Filipinos Living Abroad			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1 original copy of Transaction slip At least 1 original copy of valid ID of member (to be presented) Request 1 photocopy of Official receipt  *Additional requirements if through representative: 1 Original copy of Authorization letter from member 1 original copy of valid ID of representative (to be presented) At least 1 photo copy of valid ID of member (to be submitted)		Any PhilHealth Office		
At least 1 scanned copy of valid ID of member Request 1 scanned copy of Official receipt  *Additional requirements if through representative: 1 scanned copy of Authorization letter from member 1 scanned copy of valid ID of representative		Through e-mail		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the required documents. If through a representative, representative shall submit authorization letter and a photo copy of the member's valid ID.	1.1. Print/Receive the required documents and check for completeness.	None	Walk-in 5 minutes per transaction (if posted in the Treasury	Social Insurance Assistant I; OFP
	1.2. Start processing the request.			



	1.3. If not yet posted in the database, staff verifies the payment information.		database)	
	1.4. Issue the Member Data Record.			
2. Make sure to check the correctness of payment information upon receipt of the Member Data Record.			7 days (if not yet posted in the Treasury Database- for verification	
<b>TOTAL:</b>		<b>None</b>	<b>7 days (if not yet posted in the Treasury Database)</b>	

# 10. RECEIVING AND ENDORSEMENT OF OVERSEAS CONFINEMENT CLAIMS (FILED THROUGH E-MAIL)

This service receives and facilitate filing of overseas confinement claims.

<b>Office/Division:</b>	Member Management Group (OFP)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C- Government to Citizen; G2B- Government to Business Entity			
<b>Who may avail:</b>	Migrant Workers; Filipinos Living Abroad and Filipinos with Dual Citizenship			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Confinement abroad requirements (Certified True Copy):  1. 1 scanned copy of CTC Claim Form 1, properly and completely filled out 2. 1 scanned copy of CTC Statement of Account or its equivalent 3. 1 scanned copy of CTC Official receipt or any proof of payment of hospital bills and professional fees from the hospital where the patient was confined 4. 1 scanned copy of CTC Certification from the attending physician as to the final diagnosis, period of confinement and services rendered 5. English transactions from the hospital or Embassy for all documents.		Through e-mail		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit the required documents for overseas confinement filed through email.	1.1. Print/Receive the required documents and check for completeness.	None	1 day	Social Insurance Assistant I, OFP Supervisor Senior Manager
	1.2. Start processing the request and prepares documents.			

	1.3. Endorse the documents to the concerned PRO.		5 days (For endorsement to concerned PROs/ Branch Offices; depends on the number of e-mails received; until a feedback is received)	
2. Make sure to ask for a feedback and claim details for monitoring purposes.	2.1. Communicates with the member on the details of the claim.		1 day	
	2.2. PRO shall issue check if claim is good for processing			
3. Member shall receive the reimbursement through check if claim is good for processing.				
<b>TOTAL:</b>		<b>None</b>	<b>7 days</b>	

# **11. DATA VALIDATION AND PIN ASSIGNMENT OF BENEFIT CLAIMS FOR PROCESSING AND PAYMENT OF SARS COV-2 RT- PCR TESTING CONDUCTED BY PHILIPPINE RED CROSS**

The Overseas Filipinos Program shall receive and process the benefit claims from the PRC for SARS-CoV-2 RT- PCR Testing prior to endorsement for payment.

<b>Office/Division</b>	Direct Contributor: Overseas Filipinos Program (OFP)			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2B; Government to Business			
<b>Who may avail:</b>	Philippine Red Cross and its Accredited Testing Laboratories			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Request for reimbursement (RfR) Line List with certification (e-signature) Case Information Forms (CIFs)			Philippine Red Cross and its Accredited Testing Laboratories	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.The PRC shall file to PhilHealth its claims for the testing for SARS-CoV-2 by RT-PCR within 60 calendar days from the date of specimen collection. The following shall be the claims requirements: Request for reimbursement (RfR), Line List with certification (e-signature), and Case Information Forms (CIFs).	1.Receive from the PRC in hard copy and thru email the claims requirements, verify completeness of the Line List and its corresponding CIFs against the RfR, search and download the CIFs based on the names listed in the Line List (Excel file) from the PRC remote database, and finally, issue certification on the completeness of documents.	None	Within the day of receipt of claims requirements	Receiving Staff
2.None	2.Conduct data mapping to check if the names in the Line List already have existing PhilHealth Identification Number (PIN).	None	Within the day of receipt of claims requirements	Data Validator
3.None	3.Conduct manual validation of complete Five Data Fields (Last name, First name, Middle name, Sex and Date of birth).	None	Within three (3) days upon receipt of claims requirements	Data Validator

4.None	4.Conduct Quick PIN Assignment and Generation.	None	Within three (3) days upon receipt of claims requirements	Data Controller
5.None	5.Endorse claims documents for payment, as applicable.	None	Within three (3) days upon receipt of claims requirements	Data Adjudicator
6.None	6.Upload paid Line List to the Paid Claims Library.	None	Within three (3)days upon receipt of claims requirements	Data Adjudicator
7.The PRC shall receive from PhilHealth deficient claims for compliance.	7.Prepare deficient claims and return the same to the PRC for compliance.	None	Within three(3) days upon receipt of claims requirements	Data Adjudicator
8.The PRC shall submit to PhilHealth all rectified claims that were previously returned due to deficiencies.	8.Receive Return-to-Sender (RTS) claims.	None	Within the day of receipt of RTS claims	Receiving Staff
9.None	9.Verify compliance of RTS claims.	None	Within three (3)days upon receipt of RTS claims	Data Adjudicator
10.None	10.Endorse RTS claims documents for payment, as applicable.	None	Within three(3) days upon receipt of RTS claims	Data Adjudicator
11.None	11.Upload paid RTS Line List to the Paid Claims Library.	None	Within three (3) days upon receipt of RTS claims	Data Adjudicator
<b>TOTAL</b>		<b>None</b>	<b>27 days</b>	

# **J. Office of the President (OP)**

## **I. Corporate Planning (CorPlan)**

## 1. PROCESSING OF EXTERNAL DATA REQUESTS (SIMPLE)

This process covers handling of external requests for records and data within the Corporation and ensure that all records/data releases by the Corporation shall be in compliance with the mandates of the Universal Health Care Act of 2019 (RA 11223), Ease of Doing Business and Efficient Government Service Delivery Act of 2018 (RA 11032), Freedom of Information Order (EO No. 2 s.2016), Data Privacy Act of 2012 (RA 10173), and the Department of Budget Management (DBM and Governance Commission for GOCCs' (GCG) Good Governance Requirements (e.g. Transparency Seal).

Per EODB Act of 2018, transactions are classified into the following:

1. Simple transactions – requests that are readily available (e.g., Standard Reports) and shall be processed within three (3) working days;
2. Complex transactions – requests that need to be sourced from more than one office (e.g. data from multiple offices within the Corporation) and requires packaging of data using prescribed template or format shall be processed within seven (7) working days; and
3. Highly technical transactions – requests that require technical analysis or cross-tabulations and database extractions (e.g. data for research) shall be processed within twenty (20) working days.

Office:	Corporate Planning Department (CorPlan)	
Classification:	Simple	
Type of Transaction:	G2G – Government to Government; G2C – Government to Citizen; G2B – Government to Business	
Who May Avail:	All	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Formal Letter or Accomplished Data Request Form / DRF (One original copy) containing the following:		PhilHealth Website <i>(Note for ARTA Comm: Form for uploading: Annex C of CO No.2020-0053)</i>
1. Date		
2. Full Name		
3. Office (if applicable; institution)		
4. Description of Data Being Requested		
5. Purpose of Request (e.g. use for data, etc.)		
6. Reference Period of Data Being Requested		
7. Data Needed		
8. Format (e.g. table format, print-out, digital, etc.)		

9. Other information that could help the concerned office that shall process the data (e.g. script parameters, etc.)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit letter request or accomplished Data Request Form (DRF) to the CorPlan	Receive letter/form from requesting party and forward to Knowledge Resource Unit	None	1 Hour	Administrative Staff (Office of the Senior Manager / OSM)
Receive acknowledgement receipt from this office	Send acknowledgement receipt to requesting party	None	1 Hour	Administrative Staff (Office of the Senior Manager / OSM)
	Checking of letter/DRF as to completeness of necessary details in order to properly process the request	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	If incomplete (e.g. unclear instructions, with questions for verification, etc.), the requesting party if informed	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	Checking if the requested information is available in PhilHealth website, if so, the requesting party will be informed and the link will be provided.	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	If the requested information is not in the custody of the Corporation and any of its offices, if so, the requesting party shall be advised accordingly.	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	If the requested information is the same as a previous request which was already granted or denied, if so, proper information shall be provided to the requesting party to this effect.	None	1 Hour	Planning Officer (Knowledge Resource Unit)
	Review and classify the request per internal guidelines (e.g. restricted, confidential, with	None	1 Hour	Planning Officer (Knowledge Resource



	Personally-Identifiable Information/PII, etc.)			Unit)
	Identify the source of the requested information (e.g. SharePoint/PhilHealth Corporate Dashboard (PCD), Database)			
	Locate, retrieve, and/or extract the required information			
	Properly document, record, and monitor the request, including turn-around-time			
	If with Data Privacy Concerns, endorse the request to the Data Protection Officer (DPO) for evaluation.			
	If without any Data Privacy concerns, endorse the request to concerned offices (e.g. Task Force Informatics)			
	Concerned office (e.g. Task Force Informatics, Sectors concerned) provides/extracts the data requested	None	1 Day	Data Analyst (Task Force Informatics / Office concerned)
	Provide proper information to requesting party if the request for information will require extension. These reasons may include but not limited to examination of voluminous records, the occurrence of fortuitous events, coincides with voluminous requests, or other analogous cases	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	Should this be the case, provide proper information to requesting party of the extension, explaining the reasons for such, for fifteen (15) working days, but not exceed twenty (20) working days unless in exceptional circumstances warranting a longer period	None	1 Hour	Planning Officer (Knowledge Resource Unit)

	Upon receipt of data from processing / extracting office (e.g. Task Force Informatics, Sectors concerned, etc.), this office further formats the data to the specifications of the requesting party (e.g. table formats, etc.)	None	1 Hour	Planning Officer (Knowledge Resource Unit)
	Determine applicable fees based on pricing guidelines, if any:	None	1 Hour	Planning Officer (Knowledge Resource Unit)
	(For Government agencies, Policy-makers, Local government / sponsoring institutions, prospective PhilHealth Project / Program Donors/Sponsors and as directed by judicial courts)			***
	Readily available data published in the corporate websites like philhealth.gov.ph, Knowledge Management Portal, for public or external use shall be free of charge.	None		Planning Officer (Knowledge Resource Unit)
	For data that need to be customized in a manner or format that is not readily available, the Corporation shall charge a fee covering minimal charges	Labor Cost (e.g. man-hours): Php75.00 per hour; Computer Time and Operating Costs: Php10.00 per hour; and Printing / Duplication / Reproduction Costs: Php2.00 per page		Planning Officer (Knowledge Resource Unit)

	Release of requests for databases (i.e. raw data) shall be subject to approval of Management	Php0.0375 per kilobyte plus the cost of CDs or USB drives to be used		Planning Officer (Knowledge Resource Unit)
	(For Research Organizations / Researchers / Students and Agencies with Jurisdiction over institutions and individuals)			***
	Published and readily available data/tables for public or external use shall be charged	Minimum Processing Fee (for 1-page document print): Php25.00; Additional cost per table / page document print: Php5.00		Planning Officer (Knowledge Resource Unit)
	For data need to be customized in a manner or format that is not readily available, the Corporation shall charge a fee covering minimal incidental charges	Labor Cost (per number of man-hours worked): Php 150.00 per hour; Computer Time and Operating Costs: Php 20.00 per hour; Printing /		Planning Officer (Knowledge Resource Unit)

		Duplication / Reproduction costs: Php 5.00 per page		
	Release of requests for databases (i.e. raw data) shall be subject to approval of Management	Php 0.075 per kilobyte plus the cost of CDs or USB drives to be used to be used.		Planning Officer (Knowledge Resource Unit)
	(Urgent requests will be entertained but shall be subject to higher rate)	(Rate: 10% more than the computed cost of the data request)		Planning Officer (Knowledge Resource Unit)
	(Grant or Deny of the Request for Information)	None	1 Hour	***
	If denied: Write a response letter to the requesting party informing them of the denial of the request. The letter should indicate the grounds for denial and the circumstances on which the denial was based on. Route for appropriate approval If no notice was provided within fifteen (15) working days since the submission of the request, this would indicate that the request was denied	None		Planning Officer (Knowledge Resource Unit)
Receives letter/billing from this office of total amount to be paid (if any)	If granted: Inform or notify the requesting party; including the amount of applicable fees, if any. This should comply with internal rules and procedures on payment of applicable fees.	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Requesting party pays the determined amount with the Corporation's Cashier office.	Processes the payment	None	1 Hour	Cashier Staff (Cashier Office)

Receives official receipt from Cashier	Provides official receipt to requesting party	None		Cashier Staff (Cashier Office)
Requesting party presents copy of official receipt to this office as proof of payment	Receives copy of the official receipt as confirmation	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Requesting party receives the data requested.	Sends the requested data	None		Planning Officer (Knowledge Resource Unit)
<b>TOTAL:</b>		<b>(as applicable)</b>	<b>3 Days</b>	

Note/s: Processes indicated herein lifted from Corporate Order No. 2020-0053 and Freedom of Information Manual

## 2. PROCESSING OF EXTERNAL DATA REQUESTS (COMPLEX)

This process covers handling of external requests for records and data within the Corporation and ensure that all records/data releases by the Corporation shall be in compliance with the mandates of the Universal Health Care Act of 2019 (RA 11223), Ease of Doing Business and Efficient Government Service Delivery Act of 2018 (RA 11032), Freedom of Information Order (EO No. 2 s.2016), Data Privacy Act of 2012 (RA 10173), and the Department of Budget Management (DBM and Governance Commission for GOCCs' (GCG) Good Governance Requirements (e.g. Transparency Seal).

Per EODB Act of 2018, transactions are classified into the following:

1. Simple transactions – requests that are readily available (e.g., Standard Reports) and shall be processed within three (3) working days;
2. Complex transactions – requests that need to be sourced from more than one office (e.g. data from multiple offices within the Corporation) and requires packaging of data using prescribed template or format shall be processed within seven (7) working days; and
3. Highly technical transactions – requests that require technical analysis or cross-tabulations and database extractions (e.g. data for research) shall be processed within twenty (20) working days.

Office:	Corporate Planning Department (CorPlan)	
Classification:	Simple	
Type of Transaction:	G2G – Government to Government; G2C – Government to Citizen; G2B – Government to Business	
Who May Avail:	All	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Formal Letter or Accomplished Data Request Form / DRF (One original copy) containing the following :		PhilHealth Website <i>(Note for ARTA Comm: Form for uploading: Annex C of CO No.2020-0053)</i>
1. Date		
2. Full Name		
3. Office (if applicable; institution)		
4. Description of Data Being Requested		
5. Purpose of Request (e.g. use for data, etc.)		
6. Reference Period of Data Being Requested		
7. Data Needed		
8. Format (e.g. table format, print-out, digital, etc.)		
9. Other information that could help the concerned office that shall process the data (e.g. script parameters, etc.)		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit letter request or accomplished Data Request Form (DRF) to the CorPlan	Receive letter/form from requesting party and forward to Knowledge Resource Unit	None	1 Hour	Administrative Staff (Office of the Senior Manager / OSM)
Receive acknowledgement receipt from this office	Send acknowledgement receipt to requesting party	None	1 Hour	Administrative Staff (Office of the Senior Manager / OSM)
	Checking of letter/DRF as to completeness of necessary details in order to properly process the request	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	If incomplete (e.g. unclear instructions, with questions for verification, etc.), the requesting party is informed	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	Checking if the requested information is available in PhilHealth website, if so, the requesting party will be informed and the link will be provided.	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	If the requested information is not in the custody of the Corporation and any of its offices, if so, the requesting party shall be advised accordingly.	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	If the requested information is the same as a previous request which was already granted or denied, if so, proper information shall be provided to the requesting party to this effect.	None	1 Hour	Planning Officer (Knowledge Resource Unit)
	Review and classify the request per internal guidelines (e.g. restricted, confidential, with Personally-Identifiable	None	1 Hour	Planning Officer (Knowledge

	Information/PII, etc.)			Resource Unit)
	Identify the source of the requested information (e.g. SharePoint/PhilHealth Corporate Dashboard (PCD), Database)			
	Locate, retrieve, and/or extract the required information			
	Properly document, record, and monitor the request, including turn-around-time			
	If with Data Privacy Concerns, endorse the request to the Data Protection Officer (DPO) for evaluation.			
	If without any Data Privacy concerns, endorse the request to concerned offices (e.g. Task Force Informatics)			
	Concerned office (e.g. Task Force Informatics, Sectors concerned) provides/extracts the data requested	None	1 to 5 Days	Data Analyst (Task Force Informatics / Office concerned)
	Provide proper information to requesting party if the request for information will require extension. These reasons may include but not limited to examination of voluminous records, the occurrence of fortuitous events, coincides with voluminous requests, or other analogous cases	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	Should this be the case, provide proper information to requesting party of the extension, explaining the reasons for such, for fifteen (15) working days, but not exceed twenty (20) working days unless in exceptional circumstances warranting a longer period	None	1 Hour	Planning Officer (Knowledge Resource Unit)
	Upon receipt of data from processing / extracting office (e.g. Task Force Informatics, Sectors concerned, etc.), this office further formats the data to the specifications of the requesting party (e.g. table formats, etc.)	None	1 Hour	Planning Officer (Knowledge Resource Unit)



	Determine applicable fees based on pricing guidelines, if any:	None	1 Hour	Planning Officer (Knowledge Resource Unit)
	(For Government agencies, Policy-makers, Local government / sponsoring institutions, prospective PhilHealth Project / Program Donors/Sponsors and as directed by judicial courts)			***
	Readily available data published in the corporate websites like philhealth.gov.ph, Knowledge Management Portal, for public or external use shall be free of charge.	None		Planning Officer (Knowledge Resource Unit)
	For data that need to be customized in a manner or format that is not readily available, the Corporation shall charge a fee covering minimal charges	Labor Cost (e.g. man-hours): Php75.00 per hour; Computer Time and Operating Costs: Php10.00 per hour; and Printing / Duplication / Reproduction Costs: Php2.00 per page		Planning Officer (Knowledge Resource Unit)
	Release of requests for databases (i.e. raw data) shall be subject to approval of Management	Php0.0375 per kilobyte plus the cost of CDs or USB drives to be used		Planning Officer (Knowledge Resource Unit)
	(For Research Organizations / Researchers / Students and Agencies with Jurisdiction over institutions and individuals)			***
	Published and readily available data/tables for public or external use shall be charged	Minimum Processing Fee		Planning Officer (Knowledge Resource Unit)

		(for 1-page document print): Php25.00; Additional cost per table / page document print: Php5.00		Resource Unit)
	For data need to be customized in a manner or format that is not readily available, the Corporation shall charge a fee covering minimal incidental charges	Labor Cost (per number of man-hours worked): Php 150.00 per hour; Computer Time and Operating Costs: Php 20.00 per hour; Printing / Duplication / Reproduction costs: Php 5.00 per page		Planning Officer (Knowledge Resource Unit)
	Release of requests for databases (i.e. raw data) shall be subject to approval of Management	Php 0.075 per kilobyte plus the cost of CDs or USB drives to be used to be used.		Planning Officer (Knowledge Resource Unit)
	(Urgent requests will be entertained but shall be subject to higher rate)	(Rate: 10% more than the computed cost of the data request)		Planning Officer (Knowledge Resource Unit)
	(Grant or Deny of the Request for Information)	None	1 Hour	***
	If denied: Write a response letter to the requesting party informing them of the denial of the request. The letter should indicate the grounds for denial and the circumstances on which the denial was based on. Route for appropriate approval If no notice was provided within fifteen (15) working days since the submission of the request, this would indicate that the request was denied	None		Planning Officer (Knowledge Resource Unit)

Receives letter/billing from this office of total amount to be paid (if any)	If granted: Inform or notify the requesting party; including the amount of applicable fees, if any. This should comply with internal rules and procedures on payment of applicable fees.	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Requesting party pays the determined amount with the Corporation's Cashier office.	Processes the payment	None	1 Hour	Cashier Staff (Cashier Office)
Receives official receipt from Cashier	Provides official receipt to requesting party	None		Cashier Staff (Cashier Office)
Requesting party presents copy of official receipt to this office as proof of payment	Receives copy of the official receipt as confirmation	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Requesting party receives the data requested.	Sends the requested data	None		Planning Officer (Knowledge Resource Unit)
<b>TOTAL:</b>		<b>(as applicable)</b>	<b>7 Days</b>	

Note/s: Processes indicated herein lifted from Corporate Order No. 2020-0053 and Freedom of Information Manual

### 3. PROCESSING OF EXTERNAL DATA REQUESTS (HIGHLY TECHNICAL)

This process covers handling of external requests for records and data within the Corporation and ensure that all records/data releases by the Corporation shall be in compliance with the mandates of the Universal Health Care Act of 2019 (RA 11223), Ease of Doing Business and Efficient Government Service Delivery Act of 2018 (RA 11032), Freedom of Information Order (EO No. 2 s.2016), Data Privacy Act of 2012 (RA 10173), and the Department of Budget Management (DBM and Governance Commission for GOCCs' (GCG) Good Governance Requirements (e.g. Transparency Seal).

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2. Complex transactions – requests that need to be sourced from more than one office (e.g. data from multiple offices within the Corporation) and requires packaging of data using prescribed template or format shall be processed within seven (7) working days; and
3. Highly technical transactions – requests that require technical analysis or cross-tabulations and database extractions (e.g. data for research) shall be processed within twenty (20) working days.

Office:	Corporate Planning Department (CorPlan)	
Classification:	Simple	
Type of Transaction:	G2G – Government to Government; G2C – Government to Citizen; G2B – Government to Business	
Who May Avail:	All	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Formal Letter or Accomplished Data Request Form / DRF (One original copy) containing the following :		PhilHealth Website <i>(Note for ARTA Comm: Form for uploading: Annex C of CO No.2020-0053)</i>
1. Date		
2. Full Name		
3. Office (if applicable; institution)		
4. Description of Data Being Requested		
5. Purpose of Request (e.g. use for data, etc.)		
6. Reference Period of Data Being Requested		
7. Data Needed		
8. Format (e.g. table format, print-out, digital, etc.)		
9. Other information that could help the concerned office that shall process the data (e.g. script parameters, etc.)		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit letter request or accomplished Data Request Form (DRF) to the CorPlan	Receive letter/form from requesting party and forward to Knowledge Resource Unit	None	1 Hour	Administrative Staff (Office of the Senior Manager / OSM)  Planning Officer (Knowledge Resource Unit)
Receive acknowledgement receipt from this office	Send acknowledgement receipt to requesting party	None	1 Hour	
	Checking of letter/DRF as to completeness of necessary details in order to properly process the request	None	1 Hour	
Receive letter/email from this office	If incomplete (e.g. unclear instructions, with questions for verification, etc.), the requesting party if informed	None	1 Hour	
Receive letter/email from this office	Checking if the requested information is available in PhilHealth website, if so, the requesting party will be informed and the link will be provided.	None	1 Hour	
Receive letter/email from this office	If the requested information is not in the custody of the Corporation and any of its offices, if so, the requesting party shall be advised accordingly.	None	1 Hour	
Receive letter/email from this office	If the requested information is the same as a previous request which was already granted or denied, if so, proper information shall be provided to the requesting party to this effect.	None	1 Hour	
	Review and classify the request per internal guidelines (e.g. restricted, confidential, with Personally-Identifiable Information/PII, etc.)	None	1 Hour	

	Identify the source of the requested information (e.g. SharePoint/PhilHealth Corporate Dashboard (PCD), Database)			
	Locate, retrieve, and/or extract the required information			
	Properly document, record, and monitor the request, including turn-around-time			
	If with Data Privacy Concerns, endorse the request to the Data Protection Officer (DPO) for evaluation.			
	If without any Data Privacy concerns, endorse the request to concerned offices (e.g. Task Force Informatics)			
	Concerned office (e.g. Task Force Informatics, Sectors concerned) <b>provides</b> /extracts the data requested	None	1 to 18 Days	Data Analyst (Task Force Informatics / Office concerned)
	Provide proper information to requesting party if the request for information will require extension. These reasons may include but not limited to examination of voluminous records, the occurrence of fortuitous events, coincides with voluminous requests, or other analogous cases	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	Should this be the case, provide proper information to requesting party of the extension, explaining the reasons for such, for fifteen (15) working days, but not exceed twenty (20) working days unless in exceptional circumstances warranting a longer period	None	1 Hour	Planning Officer (Knowledge Resource Unit)

	Upon receipt of data from processing / extracting office (e.g. Task Force Informatics, Sectors concerned, etc.), this office further formats the data to the specifications of the requesting party (e.g. table formats, etc.)	None	1 Hour	Planning Officer (Knowledge Resource Unit)
	Determine applicable fees based on pricing guidelines, if any:	None	1 Hour	Planning Officer (Knowledge Resource Unit)
	(For Government agencies, Policy-makers, Local government / sponsoring institutions, prospective PhilHealth Project / Program Donors/Sponsors and as directed by judicial courts)			***
	Readily available data published in the corporate websites like philhealth.gov.ph, Knowledge Management Portal, for public or external use shall be free of charge.	None		Planning Officer (Knowledge Resource Unit)
	For data that need to be customized in a manner or format that is not readily available, the Corporation shall charge a fee covering minimal charges	Labor Cost (e.g. man-hours): Php75.00 per hour; Computer Time and Operating Costs: Php10.00 per hour; and Printing / Duplication / Reproduction Costs: Php2.00 per page		Planning Officer (Knowledge Resource Unit)
	Release of requests for databases (i.e. raw data) shall be subject to approval of Management	Php0.0375 per kilobyte plus the cost of CDs or USB drives to be used		Planning Officer (Knowledge Resource Unit)

				Resource Unit)
	(For Research Organizations / Researchers / Students and Agencies with Jurisdiction over institutions and individuals)			***
	Published and readily available data/tables for public or external use shall be charged	Minimum Processing Fee (for 1-page document print): Php25.00; Additional cost per table / page document print: Php5.00		Planning Officer (Knowledge Resource Unit)
	For data need to be customized in a manner or format that is not readily available, the Corporation shall charge a fee covering minimal incidental charges	Labor Cost (per number of man-hours worked): Php 150.00 per hour; Computer Time and Operating Costs: Php 20.00 per hour; Printing / Duplication / Reproduction costs: Php 5.00 per page		Planning Officer (Knowledge Resource Unit)
	Release of requests for databases (i.e. raw data) shall be subject to approval of Management	Php 0.075 per kilobyte plus the cost of CDs or USB drives to be used to be used.		Planning Officer (Knowledge Resource Unit)
	(Urgent requests will be entertained but shall be subject to higher rate)	(Rate: 10% more than the computed cost of the data request)		Planning Officer (Knowledge Resource Unit)
	(Grant or Deny of the Request for Information)	None	1 Hour	***



	If denied: Write a response letter to the requesting party informing them of the denial of the request. The letter should indicate the grounds for denial and the circumstances on which the denial was based on. Route for appropriate approval If no notice was provided within fifteen (15) working days since the submission of the request, this would indicate that the request was denied	None		Planning Officer (Knowledge Resource Unit)
Receives letter/billing from this office of total amount to be paid (if any)	If granted: Inform or notify the requesting party; including the amount of applicable fees, if any. This should comply with internal rules and procedures on payment of applicable fees.	None	1 Hour	
Requesting party pays the determined amount with the Corporation's Cashier office.	Processes the payment	None	1 Hour	Cashier Staff (Cashier Office)
Receives official receipt from Cashier	Provides official receipt to requesting party	None		
Requesting party presents copy of official receipt to this office as proof of payment	Receives copy of the official receipt as confirmation	None	1 Hour	Planning Officer (Knowledge Resource Unit)
Requesting party receives the data requested.	Sends the requested data	None		
<b>TOTAL:</b>		<b>(as applicable)</b>	<b>20 Days</b>	

Note/s: Processes indicated herein lifted from Corporate Order No. 2020-0053 and Freedom of Information Manual

#### 4. PROCESSING OF FREEDOM OF INFORMATION (FOI) DATA REQUESTS (THROUGH EFOI PORTAL)

This process covers handling of external requests for records and data within the Corporation and ensure that all records/data releases by the Corporation shall be in compliance with the mandates of the Universal Health Care Act of 2019 (RA 11223), Ease of Doing Business and Efficient Government Service Delivery Act of 2018 (RA 11032), Freedom of Information Order (EO No. 2 s.2016), Data Privacy Act of 2012 (RA 10173), and the Department of Budget Management (DBM and Governance Commission for GOCCs' (GCG) Good Governance Requirements (e.g. Transparency Seal).

Per EODB Act of 2018, transactions are classified into the following:

1. Simple transactions – requests that are readily available (e.g., Standard Reports);
2. Complex transactions – requests that need to be sourced from more than one office (e.g. data from multiple offices within the Corporation) and requires packaging of data using prescribed template or format; and
3. Highly technical transactions – requests that require technical analysis or cross-tabulations and database extractions (e.g. data for research).

Office:	Corporate Action Center (CAC) / Corporate Planning Department (CorPlan)	
Classification:	Requests through eFOI Portal	
Type of Transaction:	G2G – Government to Government; G2C – Government to Citizen; G2B – Government to Business	
Who May Avail:	All	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
Registration through the eFOI Portal containing the following information:		Freedom of Information Website: <a href="https://www.foi.gov.ph/">https://www.foi.gov.ph/</a>
1. Date		
2. Full Name		
3. Office/ Institution (if applicable)		
4. Description of Data Being Requested		
5. Purpose of Request (e.g. use for data, etc.)		
6. Reference Period of Data Being Requested		
7. Data Needed		
8. Format (e.g. table format, print-out, digital, etc.)		
9. Other information that could help the concerned office that shall process the data (e.g. script parameters, etc.)		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit data request via eFOI Portal	Receive data request from requesting party via eFOI Portal	None	Half Day (4Hours)	Corporate Action Center (CAC) Designated FOI Officer
Receive acknowledgement receipt from this office	Send acknowledgement receipt to requesting party	None		
	Checking of completeness of necessary details in order to properly process the request	None		
Receive letter/email from this office	If incomplete inform the requesting party (e.g. unclear instructions, with questions for verification, etc.)	None		
Receive letter/email from this office	Checking if the requested information is available in PhilHealth website, if so, the requesting party will be informed and the link will be provided.	None		
Receive letter/email from this office	If the requested information is not in the custody of the Corporation and any of its offices, if so, the requesting party shall be advised accordingly.	None		
Receive letter/email from this office	If the requested information is the same as a previous request which was already granted or denied, if so, proper information shall be provided to the requesting party to this effect.	None		
	Review and classify the request per internal guidelines (e.g. restricted, confidential, with Personally-Identifiable Information/PII, etc.)	None	1 Day	Designated FOI Decision Maker (Knowledge

	If denied: Write a response letter to the requesting party informing them of the denial of the request. The letter should indicate the grounds for denial and the circumstances on which the denial was based on. Route for appropriate approval If no notice was provided within fifteen (15) working days since the submission of the request, this would indicate that the request was denied			Resource Unit)
	Identify the source of the requested information (e.g. Task Force Informatics)			
	Locate, retrieve, and/or extract the required information			
	Properly document, record, and monitor the request, including turn-around-time			
	If with Data Privacy Concerns, endorse the request to the Data Protection Officer (DPO) for evaluation.			
	If without any Data Privacy concerns, endorse the request to concerned offices (e.g. Task Force Informatics)			
	Concerned office (e.g. Task Force Informatics, Sectors concerned) extracts the data requested	None	1 to 12 Working Days	Planning Officer (Knowledge Resource Unit)

	Provide proper information to requesting party if the request for information will require extension. These reasons may include but not limited to examination of voluminous records, the occurrence of fortuitous events, coincides with voluminous requests, or other analogous cases	None	Half Day (4Hours)	Planning Officer (Knowledge Resource Unit)
Receive letter/email from this office	Should this be the case, provide proper information to requesting party of the extension, explaining the reasons for such, for fifteen (15) working days, but not exceed twenty (20) working days unless in exceptional circumstances warranting a longer period	None		
	Upon receipt of data from processing / extracting office (e.g. Task Force Informatics, Sectors concerned, etc.), this office further formats the data to the specifications of the requesting party (e.g. table formats, etc.)	None		
	Determine applicable fees based on pricing guidelines, if any:	None		
	(For Government agencies, Policy-makers, Local government / sponsoring institutions, prospective PhilHealth Project / Program Donors/Sponsors and as directed by judicial courts)			***
	Readily available data published in the corporate websites like philhealth.gov.ph, Knowledge Management Portal, for public or external use shall be free of charge.	None		Planning Officer (Knowledge Resource Unit)
	Concerned office (e.g. Task Force Informatics, Sectors concerned) extracts the data requested			

	For data that need to be customized in a manner or format that is not readily available, the Corporation shall charge a fee covering minimal charges	Labor Cost (e.g. man-hours): Php75.00 per hour; Computer Time and Operating Costs: Php10.00 per hour; and Printing / Duplication / Reproduction Costs: Php2.00 per page	Half Day (4 Hours)	
	Release of requests for databases (i.e. raw data) shall be subject to approval of Management	Php0.0375 per kilobyte plus the cost of CDs or USB drives to be used		
	(For Research Organizations / Researchers / Students and Agencies with Jurisdiction over institutions and individuals)			***
	Published and readily available data/tables for public or external use shall be charged	Minimum Processing Fee (for 1-page document print): Php25.00; Additional cost per table / page document print: Php5.00		Planning Officer (Knowledge Resource Unit)

	For data need to be customized in a manner or format that is not readily available, the Corporation shall charge a fee covering minimal incidental charges	Labor Cost (per number of man-hours worked): Php 150.00 per hour; Computer Time and Operating Costs: Php 20.00 per hour; Printing / Duplication / Reproduction costs: Php 5.00 per page		
	Release of requests for databases (i.e. raw data) shall be subject to approval of Management	Php 0.075 per kilobyte plus the cost of CDs or USB drives to be used to be used.		
	(Urgent requests will be entertained but shall be subject to higher rate)	(Rate: 10% more than the computed cost of the data request)		
	(Grant or Deny of the Request for Information)	None		***
	If denied: Write a response letter to the requesting party informing them of the denial of the request. The letter should indicate the grounds for denial and the circumstances on which the denial was based on. Route for appropriate approval If no notice was provided within fifteen (15) working days since the submission of the request, this would indicate that the request was denied	None	Half Day (4 Hours)	Planning Officer (Knowledge Resource Unit)
Receives letter/billing from this office of total amount to be paid (if any)	If granted: Inform or notify the requesting party; including the amount of applicable fees, if any. This should comply with internal rules and	None		

	procedures on payment of applicable fees.			
Requesting party pays the determined amount with the Corporation's Cashier office.	Processes the payment	None		Cashier Staff (Cashier Office)
Receives official receipt from Cashier	Provides official receipt to requesting party	None		Cashier Staff (Cashier Office)
Requesting party presents copy of official receipt to this office as proof of payment	Receives copy of the official receipt as confirmation	None		Designated FOI Decision Maker (Knowledge Resource Unit)
Requesting party receives the data requested.	Sends the requested data via eFOI Portal	None		
<b>TOTAL:</b>		<b>(as applicable)</b>	<b>15 Days</b>	

Note/s: Processes indicated herein lifted from Corporate Order No. 2020-0053 and Freedom of Information Manual



## **J. Office of the President (OP)**

## **II. Office of the Corporate Secretary (CorSec)**

## 1. ISSUANCE OF MINUTES OF MEETINGS

This is issued to the requesting party on a per request basis, subject to the provisions of Corporate Order No. 2020-0053, Data Privacy Act of 2012 and its IRR.

<b>Office:</b>	Office of the Corporate Secretary			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G (external)			
<b>Who May Avail:</b>	Congress, PACC, DOJ, NBI, Judicial and other Quasi-judicial Bodies/tribunals			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Letter Request stating the specific topic and purpose of requested document or Subpoena duces tecum ( 1 original copy)		Congress, PACC, DOJ, NBI, Judicial and other Quasi-judicial Bodies/Tribunals		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit the Letter Request stating topic and purpose of requested document or Subpoena duces tecum to the Office of the Corporate Secretary	1. Validate the appropriateness of the request	None	1 day	Division Chief Clerk of Board
	2.Recommend the Approval of release of document		2 days	Corporate Secretary
	3.Approve the release of document		3 days	Chairperson of the Board
	4. Photocopy the document		1 day	Records Custodian
	5.Release the requested document			
<b>TOTAL:</b>			<b>7 days</b>	

## 2. ISSUANCE OF PHILHEALTH BOARD RESOLUTIONS (PBRs)

This is issued to the requesting party on a per request basis, subject to the provisions of Corporate Order No. 2020-0053, Data Privacy Act of 2012 and its IRR.

<b>Office:</b>	Office of the Corporate Secretary			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G (external)			
<b>Who May Avail:</b>	Congress, PACC, DOJ, NBI, Judicial and other Quasi-judicial tribunal/bodies			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Letter request stating the specific topic and purpose of requested document (1 original copy) or Subpoena duces tecum		Congress, PACC, DOJ, NBI, Judicial and other Quasi-judicial bodies/ tribunals		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit the Letter stating the topic and purpose of requested document or the Subpoena duces tecum to the Office of the Corporate Secretary	1. Validate the appropriateness of the request	None	1 day	Division Chief Clerk of Board
	2. Recommend the approval of the request		2 days	Corporate Secretary
	3. Approve the release of the document		3 days	Chairperson of the Board
	4. Photocopy the document		1 day	Records Custodian
	5. Release the requested document			
<b>TOTAL:</b>			<b>7 days</b>	

## **J. Office of the President (OP)**

## **III. Office of the President and CEO (OPCEO)**

## 1. MANAGEMENT OF DOCUMENTS - EXTERNAL

This covers the receipts of incoming documents from External clients

<b>Office:</b>	Office of the President and CEO			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Other Government Agencies, G2C - Government to Public			
<b>Who May Avail:</b>	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Admin staff/Messenger of other Government or Private Entities Offices submits documents	1.1 Check the nature and document completeness	None	3 minutes	Receiving Officer , Office of the President
	1.2 Stamp received the transmittal, file copy and return to the admin staff	None	1 minute	Receiving Officer , Office of the President
	1.3 Encode in the documents tracking	none	5 minutes	Receiving Officer , Office of the President
	1.4 Assign reference number, segregates and forward for scanning	None	5 minutes	Receiving Officer , Office of the President
	1.5 Scan documents and forward to concerned Executive Assistant for review	None	15 minutes	Admin Staff, Office of the President
<b>TOTAL:</b>			<b>29 minutes</b>	

## **J. Office of the President (OP)**

### **IV. Secretariat for the Bids and Awards Committee (SBAC)**

1. BAC SECRETARIAT SERVICES				
Securing Bid Documents				
<b>Office:</b>	Secretariat for the Bids and Awards Committees			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2B, G2G			
<b>Who May Avail:</b>	Interested Bidders			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Filled-up Order of Payment form (2 original copy) 2. Bidding Documents (1 set photocopy with original markings and bidding document number)		BAC Secretariat Section, SBAC		
CLIENT STEPS (Internal/External)	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Supplier inspect Bid Documents (photocopy with original SBAC markings for bidding document number)	Issues Order of Payment form for filling-up of supplier	None	30 mins.	BAC Secretariat
	Signs the Order of Payment Form	None	30 mins. (provided there is no interruption in internet connectivity)	Head, SBAC
2. Supplier signifies intention to participate in the procurement opportunity and fills-up order of payment form (original copy)	Issues Order of Payment form for filling-up of supplier	None	5 mins	BAC Secretariat
	Signs the Order of Payment Form	None	5 mins	Head, SBAC
3. Supplier pays Bid Document Fees (original copy of order of payment)	Accepts payment of Bid Document Fees	Bid Documents Fee (Based on ABC	5 mins	Cashier's Office / Unit

		range)		
4. Supplier submits proof of payment (original copy of Official Receipt)	Releases Bid Documents	None	5 mins.	BAC Secretariat
	List supplier as prospective bidder for the procurement project	None	5 mins.	BAC Secretariat
	Validate if prospective bidder is included in the Document Request List at PhilGEPS, if not add name of bidder	None	5 mins	BAC Secretariat
<b>TOTAL:</b>		<b>None</b>	<b>90 mins</b>	



2. PROCUREMENT SERVICES				
Local Shopping				
<b>Office:</b>	Secretariat for the Bids and Awards Committees			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2B, G2G			
<b>Who May Avail:</b>	Interested Bonafide Bidders/Suppliers			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Properly Filled-up Purchase Request with supporting documents (3 original copy of the approved Purchase Request)		1. Purchase Request (PR) from End-user		
2. APR Preparation for PS-DBM Transaction (3 original copies)		2. Consolidated Purchase Request (PR) from PRID-PSMD		
3. Local Shopping Transaction if items are not available at PSDBM (3 original copies)		3. Purchase Request (PR) from End-user		
CLIENT STEPS (Internal/External)	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submission of properly filled-up PR with supporting documents from End-user	Evaluation of Purchase Request	None	30 mins.	Buyer/Canvasser
	Posting of opportunities at PhilGEPS and Corporate Websites		30 mins. (provided there is no interruption in internet connectivity)	Buyer/Canvasser
	Preparation of APR for PSDBM and RFQ for Local Shopping			

			30 mins.	Buyer/Canvasser
2. Indorsement of APR to PSDBM  Supplier signifies intention to participate in the procurement opportunity and fills-up RFQ or submits Quotation (original copy)	Checking & Pick-up of Supplies	Signed DV	8 Hours	Buyer/Canvasser
	Evaluation of received RFQ or Quotation	None	5 mins	Buyer/Canvasser
	AOC, PO and JO Preparation			
	Signs the prepared AOC, PO and JO		15 mins	Buyer/Canvasser
			5 mins	Buyer/Canvasser Section Head, SBAC Head
3. Supplier signs/ accepts PO/JO (3 original copy)	Indorsement of signed PO/JO to PRID-PSMD	None	30 mins.	PRID-PSMD Personnel  End-user Personnel  Buyer/Canvasser
<b>TOTAL:</b>			<b>10 hours and 30 mins</b>	

# **K. Office of the Area Vice Presidents (OAVP)**

## **Area I, II, III and IV**

<b>1. PROCESSING OF LETTER OF REQUESTS/QUERIES/ISSUES/CONCERNS SENT BY INTERNAL AND EXTERNAL CLIENTS</b>				
The Office of the Area Vice-President shall facilitate the processing of letter of requests, queries, issues and concerns of external clients .				
<b>Office/Division:</b>	Office of the Area Vice Presidents (Areas I, II, III & IV)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
<b>Who may avail:</b>	Local Health Insurance Office Heads and Local Health Insurance Office Information Officer-designate			
<b>CHECKLIST OF REQUIREMENT</b>		<b>WHERE TO SECURE</b>		
Letter of Request/Memoranda/Instructions/Routing Slips (1 Original/Scanned Copy)		Central Office Sectors/Departments/Other Stakeholders		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Forward Memo/Instructions/Routing Slip to Area Office concerned	1.1 Receive memo/instructions/routing slip from offices concerned communicating their concerns thru private mail/email/personal delivery	None	1 Day	Clerk III, Office of the Area Vice Presidents
	1.2 Print and write control number at the bottom of the documents and logs it	None		
	1.3 Review communication and proposes course of action or completed staff work before forwarding the document to the AVP	None		Executive Assistant III, Office of the Area Vice Presidents
2. Receive reply memo from Area Office/PRO	2.1 If concern can be resolved within AVP's authority, Area Office staff prepares reply within 2 days	None	2 Days	Chief Social Insurance Officer/Executive Assistant/Senior Social Insurance Officer
	2.2 For issues needing the intervention of the PROs, the Area Office transmits the scanned documents via email to the PRO concerned and the PRO shall then prepare reply within 2 days upon receipt.	None		
3. Mark as "closed" in incoming/outgoing logbook/e-logbook	3.1 Mark as "closed" in incoming logbook/e-logbook	None		Clerk III, Office of the Area Vice Presidents
<b>Total:</b>		<b>None</b>	<b>3 days</b>	

## **L. PhilHealth Regional Offices (PRO)**

**(CAR, I, II, III, IV, V, VI, VII, VIII, XI, X, XI XII, CARAGA & BARMM)**

### **I. Health Care Delivery Management Division**

## 1. FILING OF CLAIMS

External Service that is responsible for the processing and payment of benefit claims; Pay all good claims submitted by HCIs and individual members and their dependents for their in-patient health services provided to all PhilHealth members

Office:	Branch Offices	
Classification:	Simple	
Type of Transaction:	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen	
Who May Avail:	HCPs (doctors & facilities), OFW, member beneficiaries and their dependents	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
<b>For HCIs:</b>		Health Care Institution's (HCIs)/Health Care Providers (HCPs) - PhilHealth Accredited
Claim Summary Form (CSF) - 1 scanned copy		
Statement of Account (SOA) - 1 scanned copy		
Claim Form 3 (CF3), Maternity Related as may be applicable - 1 scanned copy		
Claim Form 4 (CF4) - 1 scanned copy		
Other required documents depending on the illness (1 scanned copy)		
Clinical Chart , Laboratories, X-Ray		
Claim Summary Form (CSF for COVID Testing)		
<b>For members filing directly:</b>		
Claim Form 1/Claim Form 2 (CF1/CF2) - 1 original copy		
Original Receipt (OR) - 1 original copy)		
Complete hospital records - 1 original copy		
Statement of Account (SOA) - 1 original copy		
Waiver - 1 Original copy		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
For HCIs: Submission of claims ( E-Claims) *Claims may be filed within 60 days from the date of confinement of the patient  HCI submits E-Claims through Certified Service Providers	1.1 Received the claims through the Certified Service Providers	None	1 Hour	Claims Assignor
<b>TOTAL:</b>		<b>None</b>	<b>5 Minutes</b>	
<b>For members Filing Directly :</b> *Claims may be filed within 60 days from the date of confinement of the patient * Claims Confinement Abroad may be filed with 180 days from the date of confinement  1. Secure information and/or queuing number at the Public Assistance Desk or if applicable, Special Lane Section for PWDs/ pregnant women and Senior Citizens	1.1 Direct client/s to the appropriate front line service. Provide the priority number to client/s.	None	1 Minute	Public Assistance Staff
2. When priority number is called, proceed to Frontline Service Counter and submit claims together with the transmittal list	2.1 Receive and screen claims as to the correct number and names of claimants against transmittal list.		30 minutes for every 100 Claims	Receiving Clerk

3. Affix initials to copy of transmittal list, if with correction.	3. Stamp "received" on the transmittal list if there are no deficiencies in the transmittal and total number of claim; if there is/are name/s listed but no claims attached, cross-out name/s in the list and have the transmittal list initialed by the hospital representative/health care provider.			
4. Receive copy of acknowledged transmittal list	5. Return received copy of transmittal list to hospital representative/health care provider and advise client that processing of claims will be done within the 60-day period			
<b>TOTAL:</b>		<b>None</b>	<b>31 Minutes</b>	



## 2. PROCESSING OF FILED BENEFIT CLAIMS OF HEALTH CARE INSTITUTIONS (HCIS)

The Benefits Administration Section of the regional office shall pay all good claims submitted by HCIs and individual members and their dependents for their in-patient health services provided to all PhilHealth members

<b>Office/Division:</b>	Health Care Delivery Management Division - Benefits Administration Section			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government ; G2B - Government to Business; G2C - Government to Citizen			
<b>Who May Avail:</b>	Health Care Institutions			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
1. For HCIs: CSF (1 scanned copy)			Health Care Institutions (HCIs)	
2. SOA (1 scanned copy)			Health Care Institutions (HCIs)	
3. CF4 (1 scanned copy)			Health Care Institutions (HCIs)	
4. Other required documents depending on the illness (1 scanned copy)			Health Care Institutions (HCIs)	
5. For members filing directly: CSF (1 original copy)			Health Care Institutions (HCIs)	
or (1 original copy)			Health Care Institutions (HCIs)	
Complete hospital records (1 original copy)			Health Care Institutions (HCIs)	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
<b>1. For Health Care Institutions (HCIs): Submission of claims</b>	1.1 Receive the documents	None	1 day	Claims Assignor
	1.2 Assess Claim	None	1 day	Claims Assignor
None	1.3 Medical Prepayment Review	None	5 days	Medical Evaluator
None	1.4 Assign eClaims/Post MPR	None	5 days	Claims Processing Chief/Designated
None	1.5 Adjudication of Claims	None	10 days	Adjudicator

None	1.6 Payment Approval/Generate Benefits Disbursement Vouchers	None	5 days	Claims Processor
None	1.7 Certify budget and Funds available/account codes proper	None	5 days	Budget Officer/Accounting Chief
None	1.8 Payment Generation (ACPS)	None	5 days	Cashier
None	1.9 Generate and prepare voucher if paid	None	(If paid) 7 days	Voucher processor
None	1.10 If for return to hospital, review and prepare transmittal for mailing	None	(If RTH/Denied) 13 days	Adjudicator
None	1.11 Crediting to PhilHealth Servicing Bank	None	3 days	Cashier
<b>TOTAL:</b>		<b>None</b>	<b>60 days</b>	
<b>2. For members filing directly: Submission of Claims</b>	1.1 Receive the documents	None	1 day	Receiving clerk
None	1.2 Assess Claim	None	1 day	Claims Assignor
None	1.3 Medical Prepayment Review	None	5 days	Medical Evaluator
None	1.4 Assign eClaims/Post MPR	None	5 days	Claims Processing Chief/Designated
None	1.5 Adjudication of Claims	None	10 days	Adjudicator
None	1.6 Payment Approval/Generate Benefits Disbursement Vouchers	None	5 days	Claims Processor
None	1.7 Generate and prepare voucher if paid	None	(If paid) 7 days	Voucher processor

None	1.8 Certify budget and Funds available/account codes proper	None	8 days	Budget Officer/Accounting Chief
None	1.9 If for return to member, review and prepare transmittal for mailing	None	(If RTH/Denied) 12 days	Adjudicator
None	1.10 Prepare Check under Member's Name	None	3 days	Cashier
None	1.11 Mail/Send Check to Member	None	3 days	Cashier
<b>TOTAL:</b>		<b>None</b>	<b>60days</b>	

## **Internal Services**

# **A. Actuarial Services and Risk Management Sector (ASRMS)**

## **I. Corporate Information Security Department (InfoSec)**

## 1. INFORMATION SECURITY INCIDENT MANAGEMENT (SIMPLE)

Concerns the handling of incidents reported

<b>Office/Division</b>	Corporate Information Security Department (InfoSec)			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government			
<b>Who may avail:</b>	Employees who experienced or discovered an information security incident			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Incident report (IR) form (including proofs or pieces of evidence) (1 Original and Digital Copy Accepted)		Attached as Annex A to Office Order No. 0086-2015		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. The employee /initiator properly accomplishes the IR Form	1. Receive the incident report	None	5 minutes	Information Systems Analyst II, InfoSec
2. Attach pertinent documents to support the report	2. Update the incidents register	None	5 minutes	
3. Submit the report to InfoSec (walk-in, email, direct message)	3. Review the incident report and classify	None	1 hour	
4. Expect a notification from the InfoSec Operations Division	4. Address the incident	None		
<b>TOTAL</b>		<b>None</b>	<b>3 hours, 10 mins</b>	

## 2. INFORMATION SECURITY INCIDENT MANAGEMENT (COMPLEX)

Concerns the handling of incidents reported

<b>Office/Division</b>	Corporate Information Security Department (InfoSec)			
<b>Classification</b>	Complex			
<b>Type of Transaction</b>	G2G - Government to Government			
<b>Who may avail:</b>	Employees who experienced or discovered an information security incident			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Incident report (IR) form (including proofs or pieces of evidence) (1 Original and Digital Copy Accepted)			Attached as Annex A to Office Order No. 0086-2015	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.The employee/ initiator properly accomplishes the IR Form a. Attach pertinent documents to support the report b. Submit the report to InfoSec (walk-in, email, direct message)	Receive the incident report	None	5 minutes	Information Systems Analyst II, InfoSec Information Technology Officer III, InfoSec
	Update the incidents register	None	5 minutes	
	1.3 Review the incident report and classify	None	1 hour	
	1.4 Set meeting and convene, officers, and employees involved in the incident	None	1 day	
	1.5 Facilitate the resolution of the incident	None	2 days	
	1.6 Document the incidents as well as the agreements	None	4 hours	
2. Expect a notification from the InfoSec Operations Division	2.1. Close the incident	None	5 minutes	
	2.2 Monitor the agreements.	None		
	2.3 Perform assessment if warranted.	None	5 minutes	
<b>Total</b>		<b>None</b>	<b>3 days, 5 hours, 15 mins</b>	

### 3. INFORMATION SECURITY INCIDENT MANAGEMENT (HIGHLY TECHNICAL)

Concerns the handling of incidents reported

<b>Office/Division</b>	Corporate Information Security Department (InfoSec)			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction</b>	G2G - Government to Government			
<b>Who may avail:</b>	Employees who experienced or discovered an information security incident			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Incident report (IR) form (including proofs or pieces of evidence) (1 Original and Digital Copy Accepted)			Attached as Annex A to Office Order No. 0086-2015	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1.The employee/ initiator properly accomplishes the IR Form a. Attach pertinent documents to support the report b. Submit the report to InfoSec (walk-in, email, direct message)	Receive the incident report	None	5 minutes	Information Systems Analyst II, InfoSec Information Technology Officer III, InfoSec
	Update the incidents register	None	5 minutes	
	1.3 Review the incident report and classify	None	1 hour	
	1.4 Set meeting and convene, officers, and employees involved in the incident	None	2 days	
	1.5 Facilitate the resolution of the incident	None	5 days	
	1.6 Document the incidents as well as the agreements	None	1 day	
2. Expect a notification from the InfoSec Operations Division	2.1. Close the incident	None	5 minutes	
	2.2 Monitor the agreements.	None	5 minutes	
	2.3 Perform assessment if warranted.	None		
<b>Total</b>		<b>None</b>	<b>8 days, 1 hour, 15 mins</b>	

#### 4. INFORMATION SECURITY POLICY AND PROTOCOLS DEVELOPMENT

Concerns with managing information security across the PhilHealth Organization through corporate policy development. It basically covers the formulation of security measures and controls based on the results of the identified and assessed risks, and assessed security incidents.

<b>Office/Division</b>	Corporate Information Security Department (InfoSec)			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction</b>	G2G - Government to Government			
<b>Who may avail:</b>	<p>Business Process Units (BPUs), which require secure corporate information systems (people, process and technology).</p> <p>The BPUs in consultation and coordination with Corporate Information Security Department identify and assess information security risks.</p> <p>The Corporate Information Security Department, both as a BPU and as a responsible office for information security identify and assess information security risks</p>			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Anyone of the following: Risk information sheet (RIS) (1 Original Copy);			Reported through Risk Information Management System (RIMS)/For manual copy, RIS Form is an attachment of PhilHealth-SOP-01-02-002	
Feedback through email/Report from Information Security Awareness Officer (1 Original copy)			No prescribed form	
Assessed Information Security Incident Report (1 Original Copy); or			Received and assessed incident report by Security Operations Division (OpSec) of Corporate Information Security Department	
Audit Findings and Recommendations Referred by Internal Audit Group and (Internal Audit Group/COA) (1 Original Copy)			Referred by Internal Audit Group and COA	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>		<b>FEES TO BE PAID</b>	<b>PERSON RESPONSIBLE</b>
1. Identify information security risk/information	Assessed received:		None	Information Systems Anayst



security issue/ concern and report through any of the following: a. RIS or RIMS; b. Feedback through email/Report from Information Security Awareness Officer; c. Assessed Information Security Incident Report; or d. Audit Findings and Recommendations (Internal Audit Group/COA)	edback through email/Report from Information Security Awareness Officer; essed Information Security Incident Report; or udit Findings and Recommendations (Internal Audit Group/COA)			II, InfoSec Information Systems Analyst III, InfoSec
	Develop information security controls and measures (Guidelines, Policy and Standard Operating Procedure) in accordance with PhilHealth-SOP-01-01-001 (Policy Formulation Process) and Office Order 0060, series of 2015 SOP (Creation, Revision and Use of Standard Operating Procedure)	None	17 1/2 days (Initial/Final Review of Concerned Offices/Approval and Signature of Sector Heads)	Information Systems Anayst II, InfoSec Information Systems Analyst III, InfoSec

	3. Communicate information security controls and measures through Outlook and SETA (Guidelines, Policy and Standard Operating Procedure)		1 day	Information Systems Analyst II, InfoSec Information Systems Analyst III, InfoSec Information Technology Officer III, InfoSec Senior Manager, InfoSec
<b>Total</b>		<b>None</b>	<b>20 days</b>	

## 5. MONITORING OF INFORMATION SECURITY POLICY AND PROTOCOLS

Concerns with overseeing the implementation of security controls and measures, together with other Corporate units tasked to monitor and enforce them.

Office/Division	Corporate Information Security Department (InfoSec)				
Classification	Highly Technical				
Type of Transaction	G2G - Government to Government				
Who may avail:	Business Process Units (BPUs), which require secure corporate information systems (people, process and technology).				
	The BPUs in consultation and coordination with Corporate Information Security Department identify and assess information security risks.				
	The Corporate Information Security Department, both as a BPU and as a responsible office for information security identify and assess information security risks				
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE		
Anyone of the following: Risk information sheet (RIS) (1 Original Copy);			Reported through Risk Information Management System (RIMS)/For manual copy, RIS Form is an attachment of PhilHealth-SOP-01-02-002		
Feedback through email/Report from Information Security Awareness Officer (1 Original copy)			No prescribed form		
Assessed Information Security Incident Report (1 Original Copy); or			Received and assessed incident report by Security Operations Division (OpSec) of Corporate Information Security Department		
Audit Findings and Recommendations Referred by Internal Audit Group and (Internal Audit Group/COA) (1 Original Copy)			Referred by Internal Audit Group and COA		
CLIENT STEPS	AGENCY ACTION		FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Implement information security	Monitor policy compliance through the following avenues: Security Education, Training and Awareness (SETA) activity		None	1/2 day	Information Systems Analyst

controls and measures: a. RIS or RIMS; b. Feedback through email/Report from Information Security Awareness Officer; c. Assessed Information Security Incident Report; or d. Audit Findings and Recommendations (Internal Audit Group/COA)	gathers feedback on policy implementation; identify assessment results and self-assessment; Internal Audit Group's audit findings with its recommendations relating to Information Security and Data Privacy; Audit Findings and Recommendations (Internal Audit Group/COA)			II, InfoSec Information Systems Analyst III, InfoSec
	Reassess information security risks and their corresponding controls and measures (Guidelines, Policy and Standard Operating Procedure)	None	1 day	Information Systems Analyst II, InfoSec Information Systems Analyst III, InfoSec

	3. Revises the corresponding controls and measures (Guidelines, Policy and Standard Operating Procedures) based on the results of the reassessment and in accordance with PhilHealth-SOP-01-01-001 (Policy Formulation Process) and Office Order 0060, series of 2015 (Creation, Revision and Use of Standard Operating Procedure)	None	18days (Initial/Final Review of Concerned Offices/Approval and Signature of Sector Heads	Information Systems Analyst II, InfoSec Information Systems Analyst III, InfoSec Information Technology Officer III, InfoSec Senior Manager, InfoSec
<b>Total</b>		<b>None</b>	<b>20 days</b>	

## 6. SAFEKEEPING TAPE VAULT STORAGE

Concerns the tape vault storage, safekeeping of back-up tape

<b>Office/Division</b>	Corporate Information Security Department (InfoSec)			
<b>Classification</b>	Highly Technical			
<b>Type of Transaction</b>	G2G - Government to Government			
<b>Who may avail:</b>	Information Technology Management Department			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Consolidated Vault Inventory List (2 Original Copies)			Information Technology Management Department / Information Management Sector	
Vault access request/ endorsement of back-up tape for storage (2 Original Copies)			Information Technology Management Department / Information Management Sector	
Approved withdrawal of tapes request (2 Original Copies)			Information Technology Management Department / Information Management Sector	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Document/Label Back-up tapes.	Receive, encodes and prepares Vault Inventory List based on Endorsement Letter from ITMD.	None	5 minutes	Clerk III, InfoSec Information Systems Analyst III, InfoSec
2. Prepare consolidated list of inventories/back-up tapes for transport and storage.	2. Validates the endorsed inventories. Checks the completeness and documentation of the endorsed inventories/back-up tapes.	None	5 minutes	
3. Prepare memorandum to Department Manager CISD.	3. Receives back-up tapes based on Vault Inventory List.	None	5 minutes	

	4. Signs and completes signatories of Vault Inventory List by ITMD Representative and Guard on duty	None	5 minutes	
	5. Coordinates with codes custodian and physical key custodian.	None	5 minutes	
	6. Deposit/Store back-up tapes	None	5 minutes	
<b>Total</b>		<b>None</b>	<b>30 minutes</b>	

## 7. RETRIEVAL TAPE VAULT STORAGE

Concerns the tape vault storage retrieval of back-up tapes

<b>Office/Division</b>	Corporate Information Security Department (InfoSec)			
<b>Classification</b>	Simple			
<b>Type of Transaction</b>	G2G - Government to Government			
<b>Who may avail:</b>	Information Technology Management Department			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
Consolidated Vault Inventory List (2 Original Copies)			Information Technology Management Department / Information Management Sector	
Vault access request/ endorsement of back-up tape for storage (2 Original Copies)			Information Technology Management Department / Information Management Sector	
Approved withdrawal of tapes request (2 Original Copies)			Information Technology Management Department / Information Management Sector	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Prepare letter request / back-up tape retrieval.	Receive and log all letter request.	None	5 minutes	Clerk III, InfoSec Information Systems Analyst III, InfoSec
2. Endorse approved letter request to CISC	2. Identify back-up tapes for retrieval.	None	5 minutes	
	3. Update Vault Inventory List	None	5 minutes	
	4. Coordinates with codes custodian and physical key custodian.	None	5 minutes	
	5. Retrieve back-up tapes.	None	5 minutes	
<b>Total</b>		<b>None</b>	<b>25 minutes</b>	



## **A. Actuarial Services and Risk Management Sector (ASRMS)**

## **II. Project Management Team for Risk Management (PMT- RM)**

## 1. ISSUANCE OF RISK ASSESSMENT CERTIFICATION (RAC) FOR NEW AND AMENDED PROGRAMS, PROJECTS AND POLICIES

### Issuance of Risk

As part of Completed Staff Work (CSW) requirements, the Risk Assessment Certification is issued to ensure the risk management process is carried out and applied by the proponent in the course of developing new and amended programs, projects, and policies.

<b>Office/Division</b>	Project Management Team for Risk Management (PMT-RM)			
<b>Classification</b>	Complex			
<b>Type of Transaction</b>	G2G- Government to Government			
<b>Who may avail:</b>	All PhilHealth Offices (Proponent)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Draft program, project, or policy (1 photocopy)		Proponent Office		
Risk Self-Assessment Questionnaire (1 original)		Proponent Office		
Risk Information Sheet (RIS) (1 photocopy)		Proponent Office		
Risk Registry (1 photocopy)		Proponent Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit required documents for initial assessment and verification	1.1. Receive required documents and check for completeness	None	30 minutes	Clerk/ Administration Services Assistant C (ASA C), PMT-RM
	1.2. Record documents in logbook	None		
	1.3. Endorse documents to technical staff of PMT-RM	None		
	1.4 Check documents contents for completeness	None	4 Days	Project Development Officer III, PMT-RM
	1.5 Review, evaluate and validate submitted documents	None		
	1.6 Sign Risk Self-Assessment Questionnaire (RSAQ)	None		
	1.7 Prepare certification	None		
	1.8 Review documents and sign the Risk Self-	None		

	Assessment Questionnaire (RSAQ) and Risk Assessment Certification (RAC)			
2. Receive signed RSAQ and RAC	2.1. Record the RAC Reference No.	None	30 minutes	Senior Manager, PMT-RM
	2.2. Release signed RSAQ and RAC	None	15 minutes	Clerk/ Administration Services Assistant C (ASA C), PMT-RM
<b>TOTAL</b>		<b>None</b>	<b>4 Days, 1 Hour and 15 Minutes</b>	

## **B. Corporate Affairs Group**

### **I. Corporate Communication Department**

## 1. COMMUNICATIONS DEVELOPMENT- WEBSITE AND SOCIAL MEDIA MANAGEMENT

Requests for uploading and/or updating of materials in the PhilHealth Corporate Website and official social media accounts

<b>Office:</b>	Corporate Communication Department			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G-Government to Government			
<b>Who may avail:</b>	Senior Management, Program Offices, Regional Offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Memo request from requesting proponent office and softcopy of materials		Proponent office (HFPS/ Accreditation/ MMG/ Treasury); Other Offices (CorPlan/ CorSec/ PROs/IT); Website visitors/ social media followers		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Requests for uploading of issuances, announcements, promotions through the website and/or social media accounts (together with the soft copy of data/material for uploading)	1.1 Evaluation of request; coordination with client for needed details / documents	None	Within 1 Hour	Social Media Project Team
	1.2 Preparation or review of content; forward to CADT for execution (if needed)		2 Hours	
	1.3 Request clearance of proposed material (if with layout)		10 Minutes	
2. Review and approve output	2.1 Request ITMD for web uploading/post material in social media		10 Minutes	
	2.2 Monitoring of feedback; providing feedback to requesting office		10 Minutes	
<b>TOTAL:</b>		<b>None</b>	<b>3 Hours and 30 Minutes</b>	

*\*Does not include TAT of CADT and ITMD*

## 2. COMMUNICATIONS MANAGEMENT - ADVERTISING UNIT

Requests for newspaper publication

Office:	Corporate Communication Department			
Classification:	Simple			
Type of Transaction:	G2G- Government to Government			
Who may avail:	Program Offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Duly accomplished Request for Publication Form		CorComm		
2. Soft copy of materials to be published		Program office/s		
3. Approved layout		Program office/s		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit duly accomplished Request for Publication Form <i>(including Tamang Sagot and powerpoint presentation for Circulars)</i>	Receive and process submitted documents	None	10 Minutes	Program office/s
2. Provide soft copy of materials to be published	Refer to CADT for layout		10 Minutes	Program office/s
3. Review/approval of layout	Booking/placement of policies/issuances		30 Minutes	Advertising Unit
<b>TOTAL:</b>		<b>None</b>	<b>50 Minutes</b>	

### 3. COMMUNICATIONS MANAGEMENT

Request for review/ comment/editing of documents sent with DRAR (*Document Review and Approval Request*) form

Office:	Corporate Communication Department			
Classification:	Simple			
Type of Transaction:	G2G- Government to Government			
Who may avail:	Program Offices			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1. Documents for review with DRAR			Program Offices	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Routes DRAR to Corcomm	1.1 Receive (stamp, inclusive of encoding in the DTS, if hardcopy; acknowledge if via email) the request	None	10 minutes	Senior Manager / Admin Designate
	1.2 Forward request for first pass		10 minutes	Admin Designate
	1.3 Review, edit, proofread document; and submit to the Senior Manager		1-2 hours	Technical staff
	1.4 Sign off reviewed document in DRAR		30 mins	Senior Manager
	1.5 Route back to Proponent Office		30 mins	Admin Designate
TOTAL:		None	3 hrs and 20 mins.	

## **B. Corporate Affairs Group**

# **II. Corporate Marketing Department**



## 1. REQUEST FOR EXISTING MARKETING MATERIALS

Request made by any internal office for available corporate giveaways, information materials and other marketing collaterals that may be used in their respective marketing/information dissemination activities.

<b>Office:</b>		Corporate Marketing Department (CorMar)		
<b>Classification:</b>		Simple		
<b>Type of Transaction:</b>		G2G – Government to Government		
<b>Who may avail:</b>		All Offices in the Head Office		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Properly accomplished Request Form and Monitoring for Information Materials/Corporate Giveaways/Promotional Items (See CM 2017-0119) Corporate Personnel Order (CPO) or Notice of Meeting		CorMar Office		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit properly accomplished request form to the CorMar Office together with copy of CPO or Notice of Meeting	1. Receive request.	<b>None</b>	<b>1 day</b>	Critical Support Team
None	2. Check inventory of materials. a. If available Proceed to No. 3 b. If not available, recommend other available materials.	<b>None</b>		
2. Wait for the call from the CorMar Office regarding request.	3. Approve request.	<b>None</b>	4 Hours	SM- CorMAR
None	4. Prepare requested materials.	<b>None</b>	4 Hours	Critical Support Team

3. Receive requested materials from CorMar.	5. Release requested materials to proponent office/end-user	<b>None</b>	4 Hours	
4. Answer the CorMar Satisfaction Survey.	6. Request proponent office/end-user to answer the CorMar Satisfaction Survey and submit the Monitoring Form per CM 2017-0019.	<b>None</b>		
5. Submit accomplished Satisfaction Survey to CorMar together with copy of Attendance Sheet	7. Receive accomplished survey form from end-user.	<b>None</b>		
6. Submit the Monitoring Form to CorMar	8. Receive Monitoring Form from end-user.		7 days	
<b>Total</b>		<b>None</b>	<b>9 days and 4 hours</b>	

## 2. REQUEST FOR PROCUREMENT OF APPROVED CORPORATE GIVEAWAYS, PROMOTIONAL ITEMS, EVENT MATERIAL (I.E. TARPAULIN BANNER, INVITATIONS)

Request made by any internal office for the procurement of corporate giveaways, information materials and other marketing collaterals that may be used in their respective marketing/information dissemination activities.

<b>Office:</b>		Corporate Marketing Department (CorMar)		
<b>Classification:</b>		Highly Technical		
<b>Type of Transaction:</b>		G2G – Government to Government		
<b>Who may avail:</b>		Proponent Offices/end-user in the Head Office		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Request letter		Proponent Office		
2. Technical Specifications				
3. Three (3) quotations from suppliers				
4. Abstract of Canvass				
5. Approved Budget for the Contract				
6. Purchase Request				
7. Other documents as may be required				
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request letter to CorMar.	1. Receive request.	None	3 Days	Critical Support Team
	2. Evaluate request a. Approved: Proceed to No. 3			SM-CorMar; Critical Support Team

	b. Disapproved: Inform proponent office regarding disapproval of request through formal communication.			
None	3. Prepare procurement documents and route for signing and approval		17 Days	Critical Support Team
None	4. Endorse documents to the Secretariat for Bids and Awards Committee for procurement			
	5. Inform proponent office of status of request.			
	<b>TOTAL:</b>	<b>None</b>	<b>20 Days</b>	

### 3. REQUEST FOR CLEARANCE OF CORPORATE GIVEAWAYS/PROMOTIONAL ITEMS/EVENT MATERIALS DEVELOPED BY OTHER OFFICES ESPECIALLY PROS

Request made by any internal office for the clearance/approval of marketing collaterals they have produced in which the PhilHealth corporate signature, other branding standards, and any information on PhilHealth products/services, are applied.

<b>Office:</b>		Corporate Marketing Department (CorMar)		
<b>Classification:</b>		Complex		
<b>Type of Transaction:</b>		G2G – Government to Government		
<b>Who may avail:</b>		All offices/department in PhilHealth		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Proposal letter containing the concept/design of the proposed corporate giveaways/item by other office.		Requesting office		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request letter to CorMar.	1. Receive request.	None	1 day	Critical Support Team
	2. Evaluate request for clearance of design/concept as to adherence to the provisions of Corporate Identity Manual; May also refer to existing standards and policies on giveaways/materials			Brand Management and Marketing Collateral Development Team (BMMCDT)

None	3. Seek feedback from the Creative Arts and Design Team (CADT) of the Office of the Vice President-Corporate Affairs Group regarding the design of the proposed giveaway/item		4 Hours	BMMCDT, CADT
None	4. Seek approval/clearance of SM-CorMar and VP-CAG		3 Days	BMMCDT, SM-CorMar and VP-CAG
2. Receive memo from CorMar.	5. Endorse to proponent office the recommendation regarding their request.		4 Hours	Critical Support Team
3. Answer the CorMar Satisfaction Survey	6. Request proponent office/end-user to answer the CorMar Satisfaction Survey			
4. Submit accomplished Satisfaction Survey to CorMar.	7. Receive accomplished survey form from end-user.			Critical Support Team
	<b>TOTAL:</b>	None	5 days	

#### 4. REQUEST FROM OTHER PHILHEALTH OFFICES FOR CUSTOMIZED MATERIALS

Request made by any internal office for the clearance/approval of marketing collaterals they have produced which followed basic branding standards but have been customized according to their needs/target audiences/local requirements.

<b>Office:</b>		Corporate Marketing Department (CorMar)		
<b>Classification:</b>		Complex		
<b>Type of Transaction:</b>		G2G – Government to Government		
<b>Who may avail:</b>		All offices/department in PhilHealth		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Duly signed request letter		Proponent Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit request letter to CorMar.	1. Receive request. 2. Evaluate the request.	None	4 Hours	Critical Support Team; Brand Management and Marketing Collateral Development Team (BMMCDT)
None	3. Endorse request to the Creative Arts and Design Team (CADT) of the Office of the Vice President-Corporate Affairs Group (OVP-CAG) for layout		1 Hour	BMMCDT and CADT
None	4. Seek approval/clearance of SM-CorMar and VP-CAG		3 Days	BMMCDT, SM-CorMar and VP-CAG

2. Receive memo from CorMar.	5. Endorse to proponent office the recommendation regarding their request.			
3. Answer the CorMar Satisfaction Survey	6. Request proponent office/end-user to answer the CorMar Satisfaction Survey		4 hours	Critical Support Team
4. Submit accomplished Satisfaction Survey to CorMar.	7. Receive accomplished survey form from end-user.			Critical Support Team
	<b>TOTAL:</b>	<b>None</b>	<b>4 Days and 1 Hour</b>	



## 5. REQUEST FOR DEVELOPMENT OF AUDIO-VIDEO PRESENTATION (AVP) INCLUDING PROCUREMENT

Request made by any internal office for the development and production of a corporate video that may be used in its marketing activity/event or information dissemination activities.

<b>Office:</b>		Corporate Marketing Department (CorMar)		
<b>Classification:</b>		Highly Technical		
<b>Type of Transaction:</b>		G2G- Government to Government		
<b>Who may avail:</b>		Proponent Offices/end-user in the Head Office		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Properly Accomplished CAG-JRF (See CO 2016-0101) 2. Technical Specifications 3. Three (3) quotations from suppliers 4. Matrix of Canvass 5. Approved Budget for the Contract 6. Purchase Request 7. Other documents as may be required 8. Permit 9. Endorsement Memo		CorMar Department		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request letter to CorMar.	1. Receive request.	None	1 day	Critical SupportTeam

	2. Coordinate with proponent office/end-user			Brand Management and Marketing Collateral Development Team (BMMCDT)
	3. Draft video script in close coordination with proponent office		4 days	BMMCDT
	4. Forward draft script to SM-CorMar for approval a. Approved: Proceed to Procurement b. For revision: Revise draft script then proceed to Procurement		1 day	SM-CorMar and BMMCDT
None	7. Prepare procurement documents and route for signing and approval		14 days	Critical Support Team
None	8. Endorse documents to the Secretariat for Bids and Awards Committee (SBAC) for procurement			Critical Support Team and SBAC
	<b>TOTAL</b>	None	20 days	

## 6. REQUEST FOR DEVELOPMENT OF PRINT INFORMATION MATERIAL INCLUDING PROCUREMENT

Request made by any internal office for the development and production of an information material that may be used in its marketing activity/event or information dissemination activities.

<b>Office:</b>	Corporate Marketing Department (CorMar)
<b>Classification:</b>	Highly Technical
<b>Type of Transaction:</b>	G2G- Government to Government
<b>Who May Avail:</b>	Proponent Offices/end-user in the Head Office
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>
1. Properly accomplished CAG-JRF (See CO No. 2016-0101)	CorMar Department
2. Approved circular	Proponent Office
3. Mock of print information material	
4. Request letter	
5. Technical Specifications	
6. Approved layout of print information material	
7. Three (3) quotations from suppliers	
8. Matrix of Canvass	
9. Approved Budget for the Contract	

10. Purchase Request				
11. Other documents as may be requested				
12. Endorsement Memo				
13. Distribution List				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit properly accomplished CAG-JRF to CorMar.	1. Receive request.	None	1 day	Critical Support Team
	2. Coordinate with proponent office/end-user			Brand Management and Marketing Collateral Development Team (BMMCDT)
None	3. Draft content of print information material in close coordination with proponent office		2 days	BMMCDT
None	4. Forward draft content to SM-CorMar, SM-CorComm and end-user for approval  a. Approved:		2 days	SM-CorMar and BMMCDT

	Proceed to No. 5  b. For revision:  Revise draft content then proceed to No. 5		
None	5. Request Creative Arts and Design Team (CADT) for design studies	3 Days	BMMCDT
None	6. Present design studies to SM-CorMar for approval	1 day	SM CorMar and BMMCDT
None	7. Conduct copy-testing (if applicable)		BMMCDT
None	8. Incorporate feedback and recommendations of copy testing result (revised layout included)	1 Day	BMMCDT and CADT
None	9. Seek approval of material from VP-CAG	2 days	BMMCDT, Critical Support Team
None	10. Prepare procurement documents and route for signing and approval	8 Days	Critical Support Team

None	11. Endorse documents to the Secretariat for Bids and Awards Committee (SBAC) for procurement			Critical Support Team
	<b>TOTAL:</b>	None	20 days	

## 7. REQUEST FOR MARKETING CAMPAIGN/PLAN FOR A SPECIFIC BENEFIT OR SERVICE

Request made by any internal office for the development of a marketing plan/campaign on a benefit or product.

<b>Office:</b>		Corporate Marketing Department (CorMar)		
<b>Classification:</b>		Highly Technical		
<b>Type of Transaction:</b>		G2G- Government to Government		
<b>Who may avail:</b>		Proponent Offices/end-user in the Head Office		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Request Memo		Proponent office		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request memo to CorMar.	1. Receive request.	None	5 hours	Critical Support Team
	2. Evaluate request			Brand Management and Marketing Collateral Development Team (BMMCDT)
	3. Gather necessary information (including consultation with requesting office)		2 days	BMMCDT
	4. Draft Marketing Campaign/Plan alongside meetings/consultations with other concerned offices		7 days	BMMCDT

None	5. Seek approval of Campaign/Plan from VP-CAG		2 days	SM-CorMar
None	6. Prepare endorsement memo		1 hour	BMMCDT
2. Receive plan/material from CorMar through a formal memo.	7. Endorse approved Marketing Campaign/Plan to end-user and other concerned offices		4 hours	BMMCDT, Critical Support Team
3. Answer the CorMar Satisfaction Survey.	8. Request proponent office/end-user to answer the CorMar Satisfaction Survey			
4. Submit accomplished Satisfaction Survey to CorMar.	9. Receive accomplished survey form from end-user.			Critical SupportTeam
	<b>TOTAL:</b>	<b>None</b>	<b>12 days and 2 hours</b>	



## 8. REQUEST FOR EVENT ASSISTANCE (INCLUDES SELECTION OF VENUE, VENUE SET-UP, INVITATION, PROGRAM, AND OTHER EVENT REQUIREMENTS) INCLUDING PROCUREMENT

Request made by any internal office for assistance in the preparation for a corporate event or marketing activity

<b>Office:</b>		Corporate Marketing Department (CorMar)		
<b>Classification:</b>		G2G- Government to Government		
<b>Type of Transaction:</b>		Complex		
<b>Who May Avail:</b>		Proponent Offices/end-user in the Head Office		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Properly accomplished CAG-EARF (See CO 2016-0101) 2. Approved Corporate Order/ Circular		Corporate Marketing Department		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit request for event assistance to CorMar (includes selection of venue, venue set-up, invitation, program and other event requirements)	1. Receive request.	None	3 Days	Critical Support Team
	2. Coordinate with proponent office			Events Management Team
None	3. Facilitate event requirements		16 days and 4 hours	Events Management Team
2. Answer the CorMar Satisfaction Survey.	4. Request proponent office/end-user to answer the CorMar Satisfaction Survey.		4 hours	Events Management , Critical Support Team
3. Submit accomplished Satisfaction Survey to CorMar.	5. Receive accomplished survey form from end-user.			Critical Support Team
	<b>TOTAL:</b>	None	<b>20 days</b>	

## 9. ENDORSEMENT TO PROPONENT/END-USER OF REQUESTED INFORMATION MATERIAL/CORPORATE GIVEAWAY/PROMOTIONAL ITEM/ EVENT MATERIAL

Turn-over of material to proponent/end-user that was requested for development and procurement

<b>Office:</b>		Corporate Marketing Department (CorMar)		
<b>Classification:</b>		G2G- Government to Government		
<b>Type of Transaction:</b>		Simple		
<b>Who May Avail:</b>		Proponent Offices/end-user in the Head Office		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
CorMar Satisfaction Survey Form		Cormar		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
None	1. Receive the delivered and inspected materials from PRID	None	1 Day	Critical Support Team
1. Receive procured materials from CorMar	2. Endorse the requested materials to the proponent office		2 Days	Critical Support Team

2. Answer the CorMar Satisfaction Survey	3. Request proponent office/end-user to answer the CorMar Satisfaction Survey.			
3. Submit accomplished Satisfaction Survey to CorMar.	4. Receive accomplished survey form from end-user.			Critical Support Team
	TOTAL:	None	3 Days	

# **E. Information Management Sector (IMS)**

## **I. IPPSD**

**1. PREPARATION OF INITIAL DRAFT OF ICT POLICY/STANDARD OPERATING PROCEDURE (SOP)**

Crafting of new ICT policy/SOP or revision of approved ICT policy/SOP

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All Officers of PhilHealth and Members of Audit Body			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Not Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. TOP Level Management/ CIO / Audit Body / Division Chief provides directive to draft an ICT policy/SOP	1.1 Receives and logs the directives in the receiving logbook	None	10 Minutes	Clerk III IPPSD
	1.2 Endorse the directives to the concerned team	None	5 Minutes	Clerk III IPPSD
	1,3 Conducts research on the subject matter	None	5 Days	CMT II, ITO I IPPSD
	1.4 Consult with Subject Matter Experts (SME) and seek inputs from them	None	10 Days	CMT II IPPSD
	1.5 Consolidates input from SME	None	1 Day	CMT II IPPSD
	1.6 Prepares the draft ICT policy/SOP based on the research and inputs from SME	None	3 Days	CMT II IPPSD
	1.7 Endorse the initial draft to supervisor for review	None	15 Minutes	CMT II IPPSD
<b>TOTAL:</b>			<b>19 Days and 30 Minutes</b>	

## 2. REVIEW OF ICT POLICY/STANDARD OPERATING PROCEDURE (SOP) (INITIAL DRAFT)

Review of initial draft ICT policy/sop by next higher supervisor

<b>Office:</b>		IPPSD		
<b>Classification:</b>		Complex		
<b>Type of Transaction:</b>		G2G- Government to Government		
<b>Who May Avail:</b>		All Employees and Officers of PhilHealth		
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
None		Not Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client submits initial draft of the policy/SOP for review	1.1 Receives and log the document in the receiving logbook	None	10 Minutes	Clerk III IPPSD
	1.2 Endorse the draft policy to the concerned team	None	5 Minutes	Clerk III IPPSD
	1.3 Review of the initial draft	None	3 Days	
	1.4 Return the initial draft with comments/instructions to policy/SOP author	None	15 Minutes	ITO I IPPSD
	1.5 Apply revisions/comments from next higher supervisor, if any	None	2 Days	CMT II IPPSD
<b>TOTAL:</b>		None	<b>5 Days and 30 Minuets</b>	

### 3. SENDING OUT OF ICT POLICY/STANDARD OPERATING PROCEDURE (SOP) FOR REVIEW

Sends out of the initial draft of policy/SOP to the concerned offices for review

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All Employees and Officers of PhilHealth			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			Not Applicable	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Client submits final draft of the policy/SOP	1.1 Receives and log the document in the receiving logbook	None	10 Minutes	
	1.2 Endorse the final draft of the policy/SOP to the concerned team	None	5 Minutes	Clerk III IPPSD
	1.3 Draft the email message or cover memo for the concerned staff/officers to request for review of the draft.	None	1 Day	CMT II IPPSD
	1.4 Send the email with the draft ICT policy/SOP to the concerned staff/officers	None	15 Minuets	Clerk III IPPSD
	1.5 Monitor the status of the draft ICT policy/SOP	None	15 Minuets	Clerk III IPPSD
<b>TOTAL:</b>		None	<b>1 Day and 45 Minutes</b>	

#### 4. FINALIZATION AND APPROVAL OF POLICY/SOP

Finalize and sends out the draft ICT policy/SOP for approval of concerned offices

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All Employees and Officers of PhilHealth			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			Not Applicable	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Client submits comments on the draft policy/SOP	1.1 Receives and log the document in the receiving logbook	None	10 Minutes	Clerk III IPPSD
	1.2 Endorse the notice to the concerned team	None	5 Minutes	Clerk III IPPSD
	1.3 Revise the draft ICT Policy/SOP based on the consolidated comments from concerned offices	None	15 Days	CMT II IPPSD
	1.4 Prepares and attach the Summary of Comments	None	4 Hours	CMT II IPPSD
	1.5 Prepares and attach the Meeting Summary	None	4 Hours	CMT II IPPSD
	1.6 Attach the Policy Checklist	None	15 Minutes	CMT II IPPSD
	1.7 Review and Finalize all the documents required for the approval of the policy/SOP including the DRAR	None	3 Days	ITO I IPPSD
	1.7 Endorse finalized ICT policy/SOP to concerned offices for document approval	None	15 Minutes	Clerk III IPPSD
	1.8 Monitor the status of the ICT policy/SOP	None	15 Minuets	Clerk III IPPSD
<b>TOTAL:</b>			<b>19 Days and 1 Hour</b>	



## 5. CONDUCT RISK ASSESSMENT

Conduct Risk Assessment on the proposed Information and Communications Technology (ICT) policies/SOP

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All Employees and Officers of PhilHealth			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Not Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client issues a notice for the preparation of Risk Assessment	1.1 Receives and log the document in the receiving logbook	None	10 Minutes	Clerk III IPPSD
	1.2 Endorse the notice to the concerned team	None	5 Minutes	Clerk III IPPSD
	1,3 Perform risk analysis using the Risk Assessment forms	None	3 Days	CMT II IPPSD
	1.4 Accomplish the Risk Assessment forms	None	1 Day	CMT II IPPSD
	1.5 Print the draft ICT policy and accomplished Risk Assessment Forms and endorse to supervisor for approval	None	15 Minutes	CMT II IPPSD
	1.6 Finalize the Risk Assessment Forms and endorse to RM Point Person and CIO for signature	None	1 Day	ITO I IPPSD
	1.7 Return the signed Risk Assessment forms to IPPSD	None	1 Day	Clerk III Office of the CIO
	1.8 Route the accomplished Risk Assessment forms to Risk Management Department for issuance of Risk Assessment Certification (RAC)	None	15 Minutes	Clerk III IPPSD
	1.9 Monitor the status of the documents.	None	15 Minutes	Clerk III IPPSD
<b>TOTAL:</b>			<b>6 days and 1 Hour</b>	

## 6. ASSESSMENT OF STANDARDS ON CORPORATE ISSUANCE

Assess the compliance to corporate issuance standards (for ICT policies only)

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All Employees and Officers of PhilHealth			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Not Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client submits drafted policy	1.1 Receives and log the document in the receiving logbook	NONE	10 Minutes	Clerk III IPPSD
	1.2 Endorse the notice to the concerned team	NONE	5 Minutes	Clerk III IPPSD
	1.3 Assess the compliance of the draft to corporate issuance standards using the Policy Review Checklist.	NONE	2 Days and 4 Hours	CMT II IPPSD
	1.4 Print and endorse the Policy Review Checklist with the draft ICT policy/SOP to the IPPSD Div. Chief for signature.	NONE	15 Minuets	CMT II IPPSD
	1.5 Route the draft ICT policy/SOP with the cover memo to the concerned staff/officers	NONE	15 Minuets	Clerk III IPPSD
	1.6 Monitor the status of the draft ICT policy/SOP	NONE	15 Minuets	Clerk III IPPSD
<b>TOTAL:</b>			<b>2 Days and 5 Hours</b>	

## 7. CONDUCT POLICY/SOP REVIEW-OTHER OFFICES

Conducts review of policy/SOP requested by other offices

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All Employees and Officers of PhilHealth			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. One (1) Original Copy of Properly accomplished Policy Review Request form and/or memorandum requesting for inputs/comments		Senior Manager and/or Division Chief of concerned offices		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Clients submits request for review of policy/SOP	1.1 Receives and log the document in the receiving logbook	None	10 Minutes	Clerk III IPPSD
	1.2 Endorse the notice to the concerned team	None	5 Minutes	Clerk III IPPSD
	1.3 Performs the review and provide inputs on the policy/SOP	None	3 Days	CMT II IPPSD
	1.4 Endorse the inputs/comments to supervisor for review and finalization	None	15 Minutes	CMT II IPPSD
	1.5 Review the initial comment and place additional comments (if any).	None	2 Days	ITO I IPPSD
	1.6 Finalize and prepare a memorandum containing the inputs/comments	None	1 Day	ITO I IPPSD
	1.7 Sends out the memorandum to supervisor for signature	None	15 Minutes	ITO I IPPSD
	1.8 Route the memorandum to the concerned office.	None	15 Minutes	Clerk III IPPSD
<b>TOTAL:</b>			<b>6 days and 1 Hour</b>	

## 8. ICT TOR / TECH SPECS REVIEW

Review of Terms of Reference (TOR) / Technical Specifications (Tech Specs) for the Procurement of Information and Communications Technology (ICT) Resources

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Offices and departments within PhilHealth with ICT-related procurement (Internal Clients)			
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>			
One (1) Original Copy of Draft TOR / Tech Specs (including its Annexes, if applicable) approved by the head of office/department requesting the TOR/Tech Specs review	(Prepared by Internal Client/s)			
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Client endorses the draft TOR/Tech Specs to the receiving clerk	1.1 Receives and logs the document in the receiving logbook	None	5 minutes	Clerk III IPPSD
	1.2 Endorses the draft TOR/Tech Specs for review to assigned personnel	None	5 minutes	Clerk III IPPSD
	1.3 Reviews the draft TOR/Tech Specs and prepares the TOR/Tech Specs Evaluation Checklist	None	14 days	ITO I IPPSD
	1.4 Endorses to the IPPSD-Div. Chief the reviewed TOR/Tech Specs for issuance of TOR / Tech Specs Checklist clearance	None	10 minutes	ITO I IPPSD

	1.5 Reviews the TOR/Tech Specs Evaluation Checklist and approves the TOR/Tech Specs Evaluation clearance / recommendation	None	5 days	Division Chief IV IPPSD
	1.6 Endorses to the Clerk the TOR/Tech Specs for endorsement of the TOR / Tech Specs Checklist clearance / recommendation to client	None	10 minutes	Division Chief IV IPPSD
	1.7 Records the documents in the outgoing logbook, endorses it to the Client for receiving, and secures the receiving copies for hard copy and digital file.	None	20 minutes	Clerk III IPPSD
<b>TOTAL:</b>		None	<b>19 Days and 50 minutes</b>	

## 9. PREPARATION OF IT PREVENTIVE MAINTENANCE (ITPM) ANALYTICAL REPORT

Consolidation of IT PM Reports and Preparation of Analytical Report on ITPM

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Office of the Senior Vice President, Chief Information Officer (OCIO) - Information Management Sector (IMS), IT Management Department, PhilHealth Regional Office - IT Management Section (PRO ITMS)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Electronic Copy of IT Preventive Maintenance Reports using the prescribed template		PRO ITMS, ITMD		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. PRO ITMS and ITMD submits the ITPM reports to the IPPSD via email	1.1 Receives, checks if information provided are complete and compliant to the prescribed template, and logs the document in the ITPM Report Monitoring	None	5 days	Social Insurance Officer I IPPSD
	1.2 Prepares the consolidated and analytical report on the ITPM reports received	None	7 days	Social Insurance Officer I IPPSD
	1.3 Endorses to Supervisor the draft ITPM Analytical Report, consolidated reports/references, cover memorandum	None	10 minutes	Social Insurance Officer I IPPSD
	1.4 Reviews the ITPM Analytical Report and its cover memorandum	None	5 days	ITO I IPPSD
	1.5 Endorses to the IPPSD-Div. Chief the reviewed ITPM Analytical Report and its cover memorandum for review and approval	None	10 minutes	ITO I IPPSD
	1.6 Reviews and approves the ITPM Analytical Report	None	2 days	Division Chief IV

	and its cover memorandum			IPPSD
	1.7 Endorses to the Clerk the approved ITPM Analytical Report and its cover memorandum for routing	None	10 minutes	Division Chief IV IPPSD
	1.8 Records the approved ITPM Analytical Report and cover memorandum in the outgoing logbook, endorses it to the OCIO for receiving, and secures the receiving copies for hard copy and digital file.	None	20 minutes	Clerk III IPPSD
<b>TOTAL:</b>			<b>19 days and 50 minutes</b>	

# 10. PREPARATION OF ANALYTICAL REPORT ON THE IMS CLIENT SATISFACTION FEEDBACK

Consolidation of the Information Management Sector's Client Satisfaction Feedback Forms (ICSFFs) and preparation of Analytical Report

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Office of the Senior Vice President, Chief Information Officer (OCIO) - Information Management Sector (IMS) and IMS offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy or Electronic Copy of Completely filled-out ICSFFs		IMS Offices, ICSFF Google Form site		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. IMS offices submits the received hard copy ICSFFs to the IPPSD; or Client fills out the ICSFFs thru the ICSFF Google Form link	1.1 Receives, checks if information provided are complete, and logs the ICSFF received	None	2 days	Clerk III / Social Insurance Officer I IPPSD
	1.2 Consolidates the ICSFFs and prepares the analytical report and cover memorandum on the ICSFF reports received	None	5 days	Social Insurance Officer I IPPSD
	1.3 Endorses to Supervisor the draft ICSFF Analytical Report, consolidated reports, cover memorandum	None	10 minutes	Social Insurance Officer I IPPSD
	1.4 Reviews the ICSFF Analytical Report and its cover memorandum	None	2 days	ITO I IPPSD
	1.5 Endorses to the IPPSD-Div. Chief the reviewed ICSFF Analytical Report and its cover memorandum for review and approval	None	10 minutes	ITO I IPPSD
	1.6 Reviews and approves the ITPM Analytical Report and its cover memorandum	None	1 day	Division Chief IV IPPSD
	1.7 Endorses to the Clerk the approved ICSFF Analytical	None	10 minutes	Division Chief IV



	Report and its cover memorandum for routing			IPPSD
	1.8 Records the approved ICSFF Analytical Report and its cover memorandum in the outgoing logbook, endorses it to the OCIO and IMS offices for receiving, and secures the receiving copies for hard copy and digital file.	None	20 minutes	Clerk III IPPSD
<b>TOTAL:</b>			<b>10 days and 50 minutes</b>	

## 11. IT PROCUREMENT CLEARANCE

Issuance of procurement clearance on IT-related procurement

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Internal Clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Request for IT Procurement Clearance		(Memorandum or E-mail to be prepared by the Client)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client submits a request for IT Procurement Clearance	1.1 Receives, checks if information / supporting documents provided are complete, and logs the received request	None	30 minutes	Clerk III / Social Insurance Officer I IPPSD
	1.2 Prepares the IT Procurement Clearance	None	0.5 day	Social Insurance Officer I IPPSD
	1.3 Endorses to Supervisor the draft IT Procurement Clearance and supporting documents	None	10 minutes	
	1.4 Reviews the draft IT Procurement Clearance	None	0.5 day	ITO I IPPSD
	1.5 Endorses to the IPPSD-Div. Chief the reviewed IT Procurement Clearance for review and approval	None	10 minutes	ITO I IPPSD
	1.6 Reviews and approves the IT Procurement Clearance	None	30 minutes	Division Chief IV IPPSD
	1.7 Endorses to the Clerk the approved IT Procurement Clearance for routing to ITMD, OCIO and the concerned requesting office/department	None	10 minutes	Division Chief IV IPPSD

	1.8 Records the approved IT Procurement Clearance and supporting documents in the outgoing logbook, endorses it to the ITMD, OCIO, and requesting office/dept. for receiving, and secures the receiving copies for hard copy and digital file.	None	1 hour	Clerk III IPPSD
<b>TOTAL:</b>			<b>1 day and 2.5 hours</b>	

## 12. ARRANGEMENT OF ISSP DEVELOPMENT MEETING / FORUM / WORKSHOP

Arrangement of meetings / forum / workshops pertaining to development / validation / updating of the Information Systems Strategic Plan (ISSP)

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	Office of the Senior Vice President, Chief Information Officer (OCIO) - Information Management Sector (IMS)			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			Not Applicable	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. SVP-CIO directs the IPPSD to organize meeting / forum / workshop necessary for the ISSP development / validation / updating	1.1 IT Planning Team arranges ISSP-related meeting / forum / workshop in coordination with the IPPSD IT Budget team; checks availability of participants, prepares Notice of Meeting / draft Corporate Personnel Order, and coordinates with resource speakers and participants	None	10 days	Clerk III / Social Insurance Officer I IPPSD
	1.2 Prepares and/or sends out materials needed for the ISSP-related meeting / forum / workshop and coordinates with concerned units when necessary	None	5 days	Division Chief IV, ITO I IPPSD
<b>TOTAL:</b>			<b>15 days</b>	

### 13. CONDUCT OF MEETING, FORUM, OR WORKSHOP ON ISSP DEVELOPMENT, VALIDATION OR UPDATING

Conduct of meeting / forum / workshops pertaining to development / validation / updating of the Information Systems Strategic Plan (ISSP)

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Internal Clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Not Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. SVP-CIO directs the IPPSD to organize meeting / forum / workshop necessary for the ISSP development / validation / updating	1.1 Conducts ISSP-related meeting / forum / workshop in coordination with the IPPSD IT Budget team together with IMS offices, PRO IT, and concerned offices	None	5 days* (*depends on Notice of Meeting / CPO)	Division Chief IV, ITO I IPPSD
	1.2 Prepares the minutes of ISSP-related meeting / forum / workshop held and endorses to Supervisor for review	None	5 days	Social Insurance Officer I IPPSD
	1.4 Reviews the minutes of ISSP-related meeting / forum / workshop held and endorses to Div. Chief for review and approval	None	3 days	ITO I IPPSD
	1.5 Reviews the minutes of ISSP-related meeting / forum / workshop held and provides instruction to IT Planning team on actions required	None	2 days	Division Chief IV IPPSD
<b>TOTAL:</b>			<b>15 days</b>	

#### 14. MEMORANDUM AND MATERIALS PREPARATION FOR ISSP-RELATED DATA/INFORMATION GATHERING

Preparation of memorandum and applicable template/s pertaining to any data/information gathering requirements for the Information Systems Strategic Plan (ISSP)

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Office of the Senior Vice President, Chief Information Officer (OCIO) - Information Management Sector (IMS)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Not Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. SVP-CIO directs the IPPSD to gather data/information necessary for the ISSP development / validation / updating	1.1 Prepares the applicable template /s to be submitted by the concerned office / dept.	None	2 days	Social Insurance Officer I / ITO I IPPSD
	1.2 Prepares corporate memorandum on the submission of data/ information for the ISSP together with the applicable template/s and endorses them to Supervisor for review	None	4 hours	Social Insurance Officer I / ITO I IPPSD
	1.2 Reviews the memorandum together with the templates and endorses it to the IPPSD Div. Chief for approval	None	3 days	ITO I IPPSD
	1.3 Reviews and approves the draft corporate memorandum and templates and endorses it to the Clerk for routing	None	1 day	Division Chief IV IPPSD
	1.4 Records the approved memorandum and annexes in the outgoing logbook, endorses it to the OCIO for receiving and	None	20 minutes	Clerk III IPPSD

	approval, and secures the receiving copies for hard copy and digital file.			
	1.5 Receives the SVP-CIO approved memorandum and annexes in the incoming logbook, endorses it next to the OCOO for receiving and approval, logs in outgoing logbook and secures the receiving copies for hard copy and digital file.	None	20 minutes	Clerk III IPPSD
	1.6 Receives the COO-approved memorandum and annexes in the incoming logbook, endorses it next to the OPCEO for receiving and approval, logs it in the outgoing logbook and secures the receiving copies for hard copy and digital file.	None	20 minutes	Clerk III
	1.7 Receives the PCEO-approved memorandum and annexes in the outgoing logbook, endorses it next to PRID-Records for routing, and secures the receiving copies for hard copy and digital file.	None	30 minutes	Clerk III IPPSD
<b>TOTAL:</b>			<b>6 days, 5 hours and 30 minutes</b>	

### 15. ISSP DATA CONSOLIDATION - NARRATIVE, DIAGRAMS, AND ANNEXES

Gathering of data and information requirements for the preparation / validation of the Information Systems Strategic Plan (ISSP) and preparation of initial draft templates on the ff.:

- Organizational Structure,
- Current ICT Budget,
- Functional Interface Chart,
- Present ICT Situation,
- Strategic Concerns for ICT Use,
- Information Systems Strategy (Conceptual Framework, Detailed Description of Proposed Information Systems, Databases Required, Network Layout)
- Detailed Description of ICT Projects,
- Existing and Proposed ICT Organizational Structure, and
- Annexes

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Internal Clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Not Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Concerned offices/units submits the required data/information for the ISSP preparation: - Organizational Structure, - Current ICT Budget, - Functional Interface Chart, - Present ICT Situation, - Strategic Concerns for ICT Use,  - Information Systems Strategy	1.1 Coordinates with concerned units tasked to prepare the templates/inputs, receives and organizes data / information for the ISSP, checks for completeness, records submission into ISSP Data/Information Submission Monitoring Log, uploads backup files to SharePoint	None	10 days  (dependent on compliance of concerned units to the prescribed deadline/s)	Clerk III / Social Insurance Officer I IPPSD



(Conceptual Framework, Detailed Description of Proposed Information Systems, Databases Required, Network Layout) - Detailed Description of ICT Projects, - Existing and Proposed ICT Organizational Structure - Annexes				
<b>TOTAL:</b>		<b>None</b>	<b>10 days</b>	

## 16. ISSP PREPARATION OF INITIAL DRAFT - NARRATIVE, DIAGRAMS, AND ANNEXES

Preparation / validation of inputs to the Information Systems Strategic Plan (ISSP) pertaining to the ff. templates:

- Organizational Structure,
- Current ICT Budget,
- Functional Interface Chart,
- Present ICT Situation,
- Strategic Concerns for ICT Use,
- Information Systems Strategy (Conceptual Framework, Detailed Description of Proposed Information Systems, Databases Required, Network Layout)
- Detailed Description of ICT Projects,
- Existing and Proposed ICT Organizational Structure, and
- Annexes

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Internal Clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Not Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. SVP-CIO directs the preparation of the initial draft ISSP templates: - Organizational Structure, - Current ICT Budget, - Functional Interface Chart, - Present ICT Situation, - Strategic Concerns for ICT Use, - Information Systems Strategy (Conceptual Framework, Detailed Description of Proposed Information Systems, Databases Required, Network Layout) - Detailed Description of ICT Projects,	1.1 Encodes and validates gathered data/information into ISSP templates	None	10 days  (dependent on compliance of concerned units to the prescribed deadline/s)	Clerk III / Social Insurance Officer I IPPSD

- Existing and Proposed ICT Organizational Structure, and - Annexes				
	1.2 Reviews the initial draft ISSP templates vis-a-vis submitted inputs and meeting / workshop / forum outputs, if any, and endorses initial drafts to Div. Chief IV for review and approval for endorsement to Review Teams	None	7 days	ITO I IPPSD
	1.3 Reviews the initial draft ISSP templates and recommends endorsement to Review Teams	None	3 days	Division Chief IV IPPSD
<b>TOTAL:</b>			<b>20 days</b>	

### 17. DATA AND INFORMATION GATHERING FOR THE ISSP-ICT RESOURCE REQUIREMENTS

Gathering of data and information requirements and preparation of initial draft templates on the proposed ICT resource requirements in the Information Systems Strategic Plan (ISSP)

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Internal Clients			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Not Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Concerned offices/units submits their proposed ICT Resource Requirements signed by their office/dept. head, together with documentary evidence on proposed costs, Certification of Complete Staff Work, latest ICT inventories and procurement status	1.1 Receives and organizes ICT resource requirement proposals and supporting documents, checks for completeness, logs into ISSP Data/Information Submission Monitoring Log, and encodes initial draft ISSP proposals into Excel	None	20 days*  (*dependent on compliance of concerned units to the prescribed deadline/s)	Clerk III / Social Insurance Officer I IPPSD
<b>TOTAL:</b>			<b>20 days</b>	

## 18. PREPARATION OF ICT RESOURCE PROPOSALS

Preparation of proposed ICT resource requirements in the Information Systems Strategic Plan (ISSP)

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Internal Clients			
<b>CHECKLIST OF REQUIREMENTS</b>			<b>WHERE TO SECURE</b>	
None			Not Applicable	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. SVP-CIO directs the preparation of the initial draft ISSP templates for Part IV-A ICT Resource Requirements and Part V Development and Investment Program	1.1 Prepares initial draft of ISSP Part IV - A. ICT Resource Requirements and part V. Development and Investment Program and endorses to Supervisor for review	None	10 days* (*dependent on compliance of concerned units to the prescribed deadline/s)	Clerk III / Social Insurance Officer I IPPSD
	1.2 Reviews the initial draft of ISSP Parts IV-A and V	None	7 days	Clerk III / Social Insurance Officer I IPPSD
	1.3 Reviews the initial draft of ISSP Parts IV - A and V, and recommends endorsement to Review Teams	None	3 days	Division Chief IV IPPSD
<b>TOTAL:</b>			<b>20 days</b>	

### 19. ISSP REVISION (DRAFT ORIGINAL OR REVISED VERSION OF AN APPROVED ISSP)

Revision of a draft original ISSP or a revised version of an approved ISSP based on request for updating (APP amendments), findings / recommendations from Review Teams, SVP-CIO, DICT or other offices/units reviewing the ISSP

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	SVP-CIO, ISSP Review Teams, Offices/Units who were requested to review the draft ISSP, DICT			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
For revisions due to APP amendments: approved APP amendment/s (1 photocopy)		SBAC / PRO BAC		
For revisions due to COB: PBC-IT SubCom recommendations / approved COB (1 photocopy)		Comptrollership Dept.		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Client endorses comments, corrections, or recommendations for revision to the ISSP	1.1 Updates the applicable portions of the ISSP based on APP amendments, received comments, corrections, recommendations and endorses the revised draft to Supervisor for review	None	10 days	Clerk III / Social Insurance Officer I IPPSD
	1.2 Checks the applied revisions and endorses corrections (if any) to staff, or to Division Chief IV in case there are no more corrections	None	7 days	ITO I IPPSD
	1.3 Reviews the revised draft ISSP and recommends draft ISSP finalization	None	3 days	Division Chief IV IPPSD
<b>TOTAL:</b>			<b>20 days</b>	

## 20. FINALIZATION OF ISSP (DRAFT ORIGINAL OR REVISED VERSION OF AN APPROVED ISSP)

Preparation of the final draft ISSP and endorsement to SVP-CIO for approval

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Office of the Senior Vice President, Chief Information Officer (OCIO) - Information Management Sector (IMS)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		Note Applicable		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
SVP-CIO directs the IPPSD to prepare the final draft ISSP	1.1 Consolidates/incorporates inputs from final draft working documents into one ISSP Word document, prepares the Table of Contents, and cover memorandum PCEO approval and letter for DICT for the endorsement to SVP-CIO (for signature)	None	5 days	Clerk III / Social Insurance Officer I IPPSD
	1.2 Proofreads the final draft and cover memorandum for PCEO and letter for DICT, endorses back corrections (if any) to staff, or to Division Chief IV in case there are no more corrections	None	3 days	ITO I IPPSD
	1.3 Reviews and approves the final draft ISSP, cover memorandum for PCEO and letter to DICT, endorses the finalized draft ISSP to IT Planning Team / Admin Unit for printing and book-binding and routing to the ISSP document approvers	None	3 days	Division Chief IV IPPSD
	1.4 Prints the final draft ISSP (at least 3 copies), and coordinates with PRID-Records for book-binding	None	1 day	Clerk III / Social Insurance Officer I IPPSD
	1.5 Records in the outgoing logbook and forwards the final ISSP document print-out, cover memorandum for PCEO, and letter for DICT to the IMS heads and SVP-CIO for signature	None	3 days	Clerk III IPPSD
<b>TOTAL:</b>		<b>None</b>	<b>15 days</b>	

## 21. SUBMISSION OF PCEO-APPROVED ISSP (ORIGINAL OR REVISION OF AN APPROVED ISSP) TO DICT FOR REVIEW AND ENDORSEMENT

Endorsement of the ISSP to the DICT for review and approval

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Office of the Senior Vice President, Chief Information Officer (OCIO) - Information Management Sector (IMS)			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Execom approval of ISSP (1 Original Copy)			CorPlan	
PCEO approval of ISSP (1 Original Copy)			OPCEO	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
SVP-CIO directs IPPSD to endorse the ISSP approved by the Execom and PCEO	1.1 Receives the PCEO-approved ISSP and cover letter for DICT, records in incoming logbook, photocopies and scans the signed ISSP and cover letter, uploads copies to SharePoint for backup, and forwards the hard copies to the Div. Chief IV	None	2 hours	Clerk III IPPSD
	1.2 Provides instruction to IT Planning Team / Admin unit for the submission of the PCEO-approved ISSP to DICT	None	30 minutes	Division Chief IV IPPSD
	1.3 Prepares OBS for travel to DICT of staff assigned to deliver the ISSP document and cover letter	None	10 minutes	Clerk III IPPSD
	1.4 Approves OBS for travel to DICT of staff assigned to deliver the ISSP document and cover letter	None	10 minutes	Division Chief IV IPPSD
	1.5 Forwards to applicable signatory and HRD the approved OBS for travel to DICT of staff assigned to deliver the ISSP document and cover letter	None	10 minutes	Clerk III IPPSD
	1.6 Delivers the PCEO-approved ISSP to DICT, receives the DICT-stamped receiving copy, coordinates with Admin unit for recording in outgoing logbook, photocopying, scanning and uploading to SharePoint of receiving copy	None	4 hours	Assigned IPPSD staff IPPSD
<b>TOTAL:</b>			<b>7 hours</b>	



## 22. DISSEMINATION OF DICT-ENDORSED ISSP

Dissemination of the DICT-endorsed ISSP to the all offices and departments in PhilHealth and the Department of Budget and Management (DBM) thru Comptrollership Department

<b>Office:</b>	IPPSD			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Office of the Senior Vice President, Chief Information Officer (OCIO) - Information Management Sector (IMS)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
DICT-endorsed ISSP (1 photocopy/ electronic copy)		DICT		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
SVP-CIO directs IPPSD to provide a copy of the DICT-endorsed ISSP to the DBM and to disseminate information on the approval of the ISSP to all PhilHealth offices and departments.	1.1 Receives the DICT-endorsed ISSP; records in incoming logbook, photocopies (at least 3 sets) of the ISSP and DICT endorsement letter, scans the same and uploads to SharePoint, and stores the original documents in secure file storage.	None	2 hours	Clerk III IPPSD
	1.2 Provides instruction to IT Planning Team / Admin unit for the submission of the DICT-endorsed copy of the ISSP to DBM (through the Comptrollership Department), preparation of Corporate Memorandum (CM) re: dissemination of information on the DICT-endorsed ISSP	None	20 minutes	Division Chief IV IPPSD
	1.3 Prepares the draft CM re: DICT-endorsed ISSP, and memorandum for endorsement of ISSP copy to DBM and endorses them to Supervisor for review	None	2 hours	Social Insurance Officer I IPPSD
	1.4 Reviews the draft CM and memorandum for Comptro and endorses it to the IPPSD Div. Chief for approval	None	1 hour	ITO I IPPSD

	1.5 Reviews and approves the draft CM and memorandum for Comptro and endorses it to the Clerk for routing	None	20 minutes	Division Chief IV IPPSD
	1.6 Records the CM and memorandum in the outgoing logbook, routes memo with copy of DICT-endorsed ISSP to Comptro, endorses CM to the OCIO for receiving and approval, and secures the receiving copies for hard copy and digital file.	None	30 minutes	Clerk III IPPSD
	1.7 Receives the SVP-CIO approved CM in the incoming logbook, endorses it next to the OPCEO for receiving and approval, logs in outgoing logbook and secures the receiving copies for hard copy and digital file.	None	20 minutes	Clerk III IPPSD
	1.9 Receives the PCEO-approved CM, records in incoming logbook, endorses it next to PRID-Records for routing, records in outgoing logbook, and secures the receiving copies for hard copy and digital file.	None	30 minutes	Clerk III IPPSD
<b>TOTAL:</b>			<b>7 hours</b>	

# **Information Management Sector (IMS)**

## **II. IT-HELPDESK**

## 1. ESCALATION AND MONITORING

Escalation and monitoring of highly technical issues reported to concern Specialized Response Team(SRT)

Office:	IT Helpdesk			
Classification:	Complex			
Type of Transaction:	G2G - Government to Government			
Who May Avail:	PhilHealth Offices User			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Request through mail or through IT Support Ticketing System (1 electronic copy)		IT Helpdesk Unit		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
For the escalation and monitoring of highly technical issues reported to concern Specialized Response Team (SRT):	Evaluate and Process the request	None	1 day	SIO II, ITO I IT Helpdesk
1. Receive the highly technical Issues reported,				
2. Evaluate the highly technical issues reported if system issues, accessibility, system performance or insufficient user rights/privileges or for data correction/editing,				
3. Forward the highly technical issues to concern SRT,	Monitor the Status of the request		1-3 working days (simple) 4-7 working days(complex)	
4. Monitor the status of reported highly technical issues, and				
5. Update the status of the reported highly technical issues to close if, it is resolved.				
TOTAL:		None	2 working days (simple) 7 working days(complex)	

## 2. ISSUANCE OF IT ADVISORY

Issuance and Posting of IT Advisory for the concerned and affected Offices of PhilHealth

Office:	IT Helpdesk			
Classification:	Simple			
Type of Transaction:	G2G - Government to Government			
Who May Avail:	PhilHealth Information Management Sector Office			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. One (1) Original Copy of Properly Filled-up, signed and approved IT Advisory Request Form		IT Helpdesk Unit and ITMD		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
For issuance IT Advisory for downtime and system enhancement: 1. Receive the Advisory request.	Evaluate and Process the request	None	1 day	SIO II, ITO I IT Helpdesk
2. Evaluate the Advisory Request for completeness, authorized and signed.				
3. Process the Advisory request by posting in Outlook to the concern Users.				
TOTAL:		None	1 day	

### 3. MANAGEMENT OF USER ACCOUNTS

Manage the creation, updating, deactivation and password resetting of user accounts for Application/Systems, Network Accounts, Internet Accounts, Outlook and Email Accounts

Office:	IT Helpdesk			
Classification:	Simple			
Type of Transaction:	G2G - Government to Government			
Who May Avail:	PhilHealth Employee's and PhilHealth COA Auditor's			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. One (1) Original Copy of Properly Filled-up, signed and approved 3AF Form for Application Account		IT Helpdesk Unit or attached to Corporate Order		
2. One (1) Original Copy of Filled-up and signed NDA for COA accounts				
3. One (1) Photocopy of employee company ID				
4. One (1) Photocopy of Supervisors ID for COA Accounts request				
5. One (1) Original Copy of Properly Filled-up, signed and approved DARF Form for Network, Internet, Outlook and Email Accounts				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. For Application Account creation, updating and password resetting:	Evaluate and Process the request	None	1 day	SIO II, ITO I IT Helpdesk
a) Receive the Application Account Authorization Form (3AF) and the Xerox copy of Employee ID,				
b) Evaluate the 3AF if properly filled-up and signed,				
c) Process the 3AF base on the request if for creation, updating and password resetting, and				
d) Inform the requesting user, PRO IT for PRO'S, Branch IT for Branch and IT designates for Head Office.				
2. For Application Account deactivation:				
a) Receive the 3AF and the Xerox copy of Employee ID,				
b) Evaluate the 3AF if properly filled-up and signed,				

c) Process the 3AF base on the request if for deactivation, and				
d) Inform the requesting user, PRO IT for PRO'S, Branch IT for Branch and IT designates for Head Office.				
3. For Network, Internet, Outlook and Email Accounts creation, updating, deactivation/removal and password resetting:				
a) Receive the Domain Account Request Form (DARF) and the xerox copy of Employee ID,				
b) Evaluate the DARF if properly filled-up and signed,				
c) Process the DARF base on the request, and				
d) Inform the requesting user, PRO IT for PRO'S, Branch IT for Branch and IT designates for Head Office.				
<b>TOTAL:</b>		None	1 day	

# **Information Management Sector (IMS)**

## **III. ITRMD**



# 1. MANAGE REQUEST FOR DATA EDITING SERVICE

The service addresses the endorsed request for data editing to achieve correct information. The request will be addressed based on the submitted documentation including but not limited to incident reports, signed and approved data amendment forms and clearance from the respective Business Process Unit (BPU). Complete process is up to 10 days and is dependent on the proximity of requests.

<b>Office:</b>	IT Management Department - ITRMD (Database Group)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C - Government to Citizen, G2B - Government to Business, G2G - Government to Government			
<b>Who May Avail:</b>	Any PhilHealth Offices whether PRO Support Office, Branches, LHIO's, external office(gov't and private)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. One (1) Original Copy of Endorsement/ Memo of Approved Request from Business Process Unit (BPU) 2. One (1) Original Copy of JOROS assigned to Database Group 3. One (1) Original Copy of Fully accomplished Data Amendment Form 4. One (1) Original Copy of Incident Report and other supporting documents for the request		Business Process Unit / Requesting Office / IT Helpdesk		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for data editing / correction thru JOROS / ITSM	1.1 Receive of documents.	None	1 Hour	SIA I/SIO I ITRMD
	1.2 Log the document (Incoming)			
	1.3 Endorse document to Division Chief			
	1.4 Delegates/assign document to the concerned section or staff		2 Hours	ITO II ITRMD
	1.5 Release document to the concerned section/staff.		1 Hour	SIA I/SIO I ITRMD
	1.6 Check existence of request in JOROS.		9 Days, 4 Hours	ITO I, ISA III, ISA II, CMT II, CMT I ITRMD
	1.7 Review of the request.			
	1.8 Return request to the concerned office if submitted document is incomplete.			
	1.9 Coordinate with the Information System Management Division (ISMD) for the script to be used if scripts not available or request needs further evaluation/checking.			
	1.10 Proceed with the data editing request if submitted document is complete.			

	1.11 Notify the concerned office once the request is completed /Tag the request as closed/accomplished in the JOROS.			
Repeat Process 1.7 to 1.9 until all request and documents is compiled and addressed				
<b>TOTAL:</b>			<b>10 Days</b>	

## 2. MANAGE AUTO RENEWAL OF SPONSORED MEMBERS

The service addresses the auto renewal of the sponsored members record in the production database in reference to the endorsed mapped membership record from the Member Management Group. The service can be performed in 14 days depending on the proximity and number of fields and records to update. The service is usually support with a Service Request Form (SRF)

<b>Office:</b>	IT Management Department - ITRMD (Database Group)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C- Government to Citizen, G2B- Government to Business			
<b>Who May Avail:</b>	Member Management Group			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Fully Accomplished Service Request Form (SRF) / Memo		Requesting Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for Auto Renewal of Sponsored Members	1.1 Receive of documents.	None	1 Hour	SIA I/SIO I
	1.2 Log the document (Incoming)		2 Hours	ITO II
	1.3 Endorse document to Division Chief		1 Hour	SIA I/SIO I
	1.4 Delegates/assign document to the concerned section or staff		13 Days, 4 hours	ITO I, ISA III, ISA II, CMT II, CMT I
	1.5 Release document to the concerned section/staff.			
	1.6 Coordinate with BPU and Task Force Informatics (TFI) for the list of members for renewal			
	1.7 Upload List of members for renewal			
	1.8 Validate statistics of members for renewal based on provided report by BPU			
	1.9 Coordinate with the ISMD for the script to be used for the renewal.			
	1.10 Execute the script for auto renewal created by ISMD.			
	1.11 Prepare and send statistics of auto renewed and excluded members to concerned office.			

	1.12 Email PRO IT the script to extract batch numbers of auto renewed members of their respective PROs.			
Repeat Process may occur in 1.8 to 1.9 until renewal is completed				
<b>TOTAL:</b>			<b>14 Days</b>	

### 3. MANAGE REQUEST FOR UPLOADING OF EXTERNAL DATA

The service address the uploading of external data as requested for mapping and project implementation of clients whether external or interna;. The service can be performed in 14 days depending on the proximity and number of records for uploading. The service is performed with clearance and authorization from the BPU and the CIO.

<b>Office:</b>	IT Management Department - ITRMD (Database Group)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C - Government to Citizen, G2B - Government to Business, G2G - Government to Government			
<b>Who May Avail:</b>	Any PhilHealth Offices whether PRO Support Office, Branches, LHIO's, external office(gov't and private)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Fully Accomplished Service Request Form (SRF) / Memo		Requesting Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for uploading of external data	1.1 Receive of documents.	None	1 Hour	SIA I/SIO I ITRMD
	1.2 Log the document (Incoming)			
	1.3 Endorse document to Division Chief		2 Hours	ITO II ITRMD
	1.4 Delegates/assign document to the concerned section or staff		1 Hour	SIA I/SIO I ITRMD
	1.5 Release document to the concerned section/staff.			
	1.6 Validate the file format/structure		12 Days, 6 Hours	ITO I, ISA III, ISA II, CMT II, CMT I ITRMD
	1.7 Return to the concerned office, if the file format/structure is incorrect,			
	1.8 Upload data, if file format is correct			
	1.9 Notify the concerned office of all uploaded & invalid data			
	1.10 Prepare endorsement/reply memo		2 Hours	ITO II ITRMD
	1.11 Review of memo			
	1.12 Approval of memo		2 Hours	Acting Senior Manager

				ITMD
	1.13 Release memo		1 Hour	SIA I/SIO I ITRMD
	1.14 Give access on the uploaded data to the concerned office		1 Hour	ITO I, ISA III, ISA II, CMT ITRMD
Repeat Process 1.6 to 1.9 until all request and documents is complied and addressed				
TOTAL:			14 Days	

#### 4. MANAGE REQUEST FOR DATABASE UPDATE

The service addresses updates needed in the production database in reference to update/enhancement and development of application/systems. The service is performed after office hours in coordination with the requesting office.

Office:	IT Management Department - ITRMD (Database Group)			
Classification:	Simple			
Type of Transaction:	G2C - Government to Citizen, G2G - Government to Government			
Who May Avail:	IS Management Division / Business Process Unit			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Fully accomplished System/Database Update Request Form (SDURF) and necessary scripts for the database update request		IS Management Division / BPU		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for Database Update	1. 1 Receive of documents.	None	1 Hour	SIA I/SIO I ITRMD
	1.2 Log the document (Incoming)			
	1.3 Endorse document to Division Chief			
	1.4 Delegates/assign document to the concerned section or staff		2 Hours	ITO II ITRMD
	1.5 Release document to the concerned section/staff.		1 Hour	SIA I/SIO I ITRMD
	1.6 Check existence of request in Ticketing System.		3 Hours	ITO I, ISA III, ISA II, CMT II, CMT I ITRMD
	1.7 Implement/execute the script			
	1.8 Notify requester should there be error encountered during the execution of the scripts			
	1.9 Implement/execute the script in the replication if applicable			
	1.10 Configuration of the replication database if applicable			
	1.11 Notify/close ticket once the request is completed.			
	1.12 Log the outgoing document		1 Hour	SIA I/SIO I ITRMD
Repeat Process 1.8 to 1.10 until all request and documents is compiled and addressed				
TOTAL:			1 Day	

## 5. MANAGE REQUEST FOR DEACTIVATION OF DATABASE ACCOUNT

The service addresses the immediate deactivation of user accounts in response to leave of absence, suspension and prolonged leave. The access of the personnel is being deactivated momentarily while their suspension and leave of absence is still served. The service can be performed within 2 working days upon request.

<b>Office:</b>	IT Management Department - ITRMD (Database Group)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Citizen, G2B - Government to Business, G2G - Government to Government			
<b>Who May Avail:</b>	Any PhilHealth Offices whether PRO Support Office, Branches, LHIO's, external office(gov't and private)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Email request c/o IT Helpdesk (1 Electronic Copy)		IT Helpdesk		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for Deactivation of Database Account	1.1 Check database account if deactivated in production database	None	2 days	ITO I, ISA III, ISA II, CMT II, CMT I ITRMD
	1.2 Coordinate with IT Helpdesk for account not deactivated in production database			
	1.3 Deactivate account in other database.			
<b>TOTAL:</b>			<b>2 days per account</b>	



## 6. MANAGE REQUEST FOR CLEARANCE OF SEPARATED EMPLOYEES

The service addresses the certification of separated employees to wit that the respective user account is deactivated for clearance due to separation to office. The service can be performed within 2 working days provided that all necessary document requirements is complete.

<b>Office:</b>	IT Management Department - ITRMD (Database Group)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C - Government to Citizen, G2B - Government to Business			
<b>Who May Avail:</b>	Any PhilHealth Offices whether PRO Support Office, Branches, LHIO's,			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. One (1) Original Copy of Memo/Routing and Transmittal Slip/ Email (Electronic copy) 2. One (1) Original Copy of Application for Clearance		Requesting Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for Clearance of Separated Employees	1.1 Receive of document	None	1 Hour	SIO II, CLERK III, ADMIN ASST.C ITMD
	1.2 Log the document (Incoming)			
	1.3 Release the document to ITRMD			
	1.4 Log the document (Outgoing)			
	1.5 Receive of document		1 Hour	SIA I/SIO I ITRMD
	1.6 Log the document (Incoming)			
	1.7 Release document to Database Section			
	1.8 Check database account if deactivated in production database		8 Hours	ITO I, ISA III, ISA II, CMT II, CMT I ITRMD
	1.9 Coordinate with IT Helpdesk for account not deactivated in production database			
	1.10 Deactivate account in other database.			
	1.11 Affix initials			
	1.12 Validate and deactivate network account		3 Hours	ITO II, ITO I, CMT II ITRMD
	1.13 Affix initial			
	1.14 Sign the clearance			

	1.15 Release of documents		1 Hour	Senior Manager ITMD
	1.16 Log the document (Outgoing)		1 Hour	SIA I/SIO I ITRMD
	1.17 Receive the documents		1 Hour	SIO II, CLERK III, ADMIN ASST.C ITMD
	1.18 Log the document (Incoming)			
	1.19 Release the document			
	1.20 Log the document (Outgoing)			
<b>TOTAL:</b>			<b>2 days</b>	

## 7. MANAGE REQUEST FOR REPLICATION OF NEW TABLES

The service addresses the need for up-to-date data record in relation to the extraction and preparation of reports for PhilHealth EMO as basis for decision making. The service is in relation to the production database updates in accordance to software update/enhance and development. The service can be performed within 7 working days and dependent on the proximity of the needed tables for updating.

Office:	IT Management Department - ITRMD (Database Group)			
Classification:	Complex			
Type of Transaction:	G2C- Government to Citizen, G2B - Government to Business			
Who May Avail:	Any PhilHealth Offices whether PRO Support Office, Branches, LHIO's, external office(gov't and private)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. One (1) Original Copy of Memo/ SDURF		TFI / IS Management Division		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Request for replication of new tables	1.1 Receive of documents.	None	1 Hour	SIA I/SIO I ITRMD
	1.2 Log the document (Incoming)			
	1.3 Endorse document to Division Chief			
	1.4 Delegates/assign document to the concerned section or staff		2 Hours	ITO II ITRMD
	1.5 Release document to the concerned section/staff.		1 Hour	SIA I/SIO I ITRMD
	1.6 Identify the constraints		6 Days, 4 Hours	ITO I, ISA III, ISA II, CMT II, CMT I ITRMD
	1.7 Coordinate with ISMD if constraint is not existing			
	1.8 Configure the replication			
	1.9 Perform initial loading of requested data for replication			
	1.10 Start the replication			
	1.11 Gather statistics			
	1.12 Notify the concerned office once the replication is completed			
Repeat Process 1.6 to 1.11 until all request and documents is complied and addressed				
TOTAL:			7 Days	

## 8. MANAGE REQUEST FOR DOCUMENT REVIEW

The service addresses the endorsed issues, concerns and action needed as requested or described in the endorsed document. This service can be addressed in 5 working days depending on the evaluation of the endorsed concern and the number of offices who can comply with the stated inquiries.

<b>Office:</b>	IT Management Department - ITRMD (Database Group)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2C - Government to Citizen, G2B - Government to Business, G2G - Government to Government			
<b>Who May Avail:</b>	Any PhilHealth Client (external and internal)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. One (1) Original Copy of DRAR 2. One (1) Original Copy of Memo 3. And other attached documents		Any PhilHealth Client (external or internal)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Request for Document Review / Action address to ITRMD	1.1 Receive of documents.	None	1 Hour	SIA I/SIO I ITRMD
	1.2 Log the document (Incoming)			
	1.3 Endorse document to Division Chief			ITO II ITRMD
	1.4 Delegates/assign document to the concerned section or staff		2 Hours	
	1.5 Release document to the concerned section/staff.		1 Hour	SIA I/SIO I ITRMD
	1.6 Conduct review of document		3 Days, 7 Hours	ITO I, ISA III, ISA II, CMT II, CMT I ITRMD
	1.7 Prepare memo response / acknowledge receipt			
	1.8 Review of memo		2 Hours	ITO II ITRMD
	1.9 Approval of Memo		2 Hours	ASM, ITMD
	1.10 Log the document		1 Hour	SIA I/SIO I ITRMD
	1.11 Release of Memo			
<b>TOTAL:</b>			<b>5 Days</b>	

## 9. MANAGEMENT OF NEW SERVER CREATION

The service addresses the creation of server as requested for testing and deployment of new software/application. The service shall be address within 8 working days and may vary based on the needed requirements and applications on the server for creation.

Office:	ITRMD			
Classification:	Highly Technical			
Type of Transaction:	G2C- Government to Citizens, G2B - Government to Business			
Who May Avail:	Business Process Unit/ IS Management Division			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Network Request Form		Requesting Office		
One (1) Original Copy of Supporting documents (MOP, Flow Chart of the System, System Requirements)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Fully accomplished Network Request Form with the following attachments: a. System Requirements; b. Operating System to be use; c. Requirements needed for System to run (PHP, Oracle, ...); d. Flow chart of the System; e. Manual Procedure of the system; f. Other related materials.	1. Receive, log and endorse the Network Request From with complete attachments to OIC-Division Chief	None	1 hour	SIA I/SIO I ITRMD
	2. Delegates to Network Team Head		2 hours	ITO II ITRMD
	3. Assigns to Network Team		30 minutes	ITO I ITRMD
	4. Conduct planning for the request.		3 days	ITO I ITRMD
	-Checks if there are available resources to be used			
	5. Provision the Server			
	6. Windows update and install all necessary requirements to be used including Anti-Virus		3 days	
TOTAL:			8 days, 3 hours and 30 minutes	

# 10. MANAGEMENT REQUEST FOR SYSTEM UPDATE

The service addresses the updates needed in the server in reference to the update/enhancement and deployment of software/applications. The service is performed after office hours in coordination with the requesting office.

<b>Office:</b>	ITRMD			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2C- Government to Citizens, G2B - Government to Business			
<b>Who May Avail:</b>	Business Process Unit/ IS Management Division			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Network Request Form One (1) Original Copy of Supporting documents (files indicating path / location of newly compiled executable files)		Requesting Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Fully accomplished Network Request Form (NRF) with the following attachments: a. What System and Servers to be Updated; b. The path where update file located; c. The reason of update; d. Feature of the update; e. Other related materials;	1. Receive, log and endorse the Network Request Form with complete attachments to OIC-Division Chief	None	1 hour	SIA I/SIO I ITRMD
	2. Delegates to Network Team Head		2 hours	ITO II ITRMD
	3. Assigns to Network Team		30 minutes	ITO I ITRMD
	4. Updates the Servers		1 hour	ITO I, CMT II, CLERK III ITRMD
	5. Email Helpdesk once the update has been done		12 minutes	ITO I, CMT II, CLERK III ITRMD
<b>TOTAL:</b>			<b>4 hours and 42 minutes</b>	

# 11. MANAGEMENT OF OPERATING SYSTEM REPAIR AND INSTALLATION

The service addresses the repair and installation of operating system to corporate issued equipment that was accounted to respective PhilHealth Employees in the Head Office. The service shall be addressed within 7 working days per equipment.

Office:	ITRMD			
Classification:	Complex			
Type of Transaction:	G2C- Government to Citizens, G2B - Government to Business			
Who May Avail:	Head Office Personnel			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Service Request Form (SRF) One (1) Original Copy of Property Accountability Request Form (PARF)		Requesting Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Fully accomplished Service Request Form (SRF)	Request for Operating System Repair/Installation:	None		Information Systems Analyst II, Administrative Service Assistant C, Clerk III ITRMD
Fully accomplished Equipment movement form (PARF)	1. Receive the SRF and PARF		4 hours	
	2. Check the PC/Laptop if the components/parts declared in the SRF are complete (to be witnessed by the requesting party)		5 hours	
	3. Record the received document in a document tracking system		4 hours	
	4. Check PC for possible file back-up		2 days and 2 hours	
	5. Perform the OS installation/repair		2 days and 2 hours	
	6. Once done, will notify the user thru email/phone.		1 hour	
	7. Prepare Evaluation Report		6 hours	
TOTAL:			7 Days Upon Receipt Of Equipment (For Each Machine)	

# **Information Management Sector (IMS)**

## **IV. ISMD**



# 1. PROCESSING OF SOFTWARE CERTIFICATION/ COMPLIANCE REQUEST

This service is used to ensure that the requester's system complies with the standard data, transmission and integration requirements provided by the Corporation.

Office/Division:	IT Management Department - IS Management Division			
Classification:	Highly Technical			
Type of Transaction:	G2B - Government to Business and G2G - Government to Government			
Who May Avail:	Health Care Institutions, Government Agencies, Other external partners			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Software Certification Application Form (SCAF)		PhilHealth Website		
One (1) Original Copy of Non-Disclosure Agreement (NDA)				
One (1) Original Copy of Software Certification Agreement (SCA)				
One (1) Original Copy of Software Certification Kit (SCK)		PhilHealth Regional Office IT		
One (1) Original Copy of Software Valuation Test Form (SSVTF)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Application for Software Certification with attached documents using IT Ticketing System.	1.1 Receive fully accomplished NDA, SCAF and SCA 1.2. Check completion of the supporting documents. 1.3. Set and coordinate schedule of the Software Certification Test.	None	3 working days	Receiving Clerk PRO IT
2. Conduct of the Scheduled Software Certification Test	3.1. Prepare test data for the test. 3.2. Conduct 3 cycles of testing to ensure compliance of the system to the Software Validation Test Form (SSVTF). 3.3. Prepare, finalize and sign-off in the SSVTF.	None	5 working days	PRO IT
3. System Software Certification Completion	4.1 Receive PRO IT Endorsement with the attached test documents as proof of system compliance 4.2 Prepare Software Certificate / Notice of System Compliance for signature of authorized signatories 4.3 Route the Software Certificate / Notice of System Compliance to authorized signatories 4.4 Register HCI in the Database.	None	12 working days	PRO IT UPECS-EMR Team RVP ITMD Heads CIO PCEO
TOTAL:			20 working days	

## 2. REGISTRATION TO PHILHEALTH SYSTEMS AND INTEGRATION SERVICES

The purpose of this service is to register and enable access to specific PhilHealth systems and/or application programming interface (API) provided by the Corporation.

<b>Office/Division:</b>	IT Management Department - IS Management Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2B - Government to Business and G2G - Government to Government			
<b>Who May Avail:</b>	Any external partners with existing MOA/Contract facilitated by a Business Process or Program Office			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Service Request Form (1 original copy)		IT Helpdesk		
Business and User Requirements (1 original copy)		OSM-ITMD		
Memorandum of Agreement (1 original copy)		Requesting Office		
Data Sharing Agreement (1 original copy)		Requesting Office		
Non-Disclosure Agreement (1 original copy)		Requesting Office		
Application Integration Registration Form (1 original copy)		OSM-ITMD		
Service Terms of Use (1 original copy)		OSM-ITMD		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Create a ticket request using the IT Ticketing System and attach the scanned documents. Submit all hardcopy document requirements in the Office of the Senior Manager reflecting the ticket number in the Service Request Form.	1.1. Receive and log the request with existing ticket request. Return hardcopy requests for non-existing tickets. 1.2. Stamp, indicate the request number and return the receiving copy if any. 1.3. Endorse to the IS Management Division.	None	3 working days	Receiving Clerk Office of the Senior Manager, IT Management Department
	1.4. Endorse for IMS approval based on ISSP and Corporate Thrust. 1.5. Endorse to OSM-ITMD to present and report for Management Approval/Prioritization. 1.6. Release Request Status Update to the requesting office.	None	5 working days	Division Chief of the IS Management Division

	1.7. Assign a Scrum Team to handle approved request.			
	1.8. Define and document the data formats, layout and standards, transmission requirements, security to be implemented and the input/output parameters.	None	10 working days	Scrum Team ISMD
	1.9. Conduct items no. 2-5 under the #5. SOFTWARE DEVELOPMENT SERVICES	None	23 working days	Scrum Team ISMD
	1.10. Prepare the Interoperability Implementing Guidelines and Specifications, Software Validation Checklist	None	10 working days	Scrum Team ISMD
	1.11. Release of the Interoperability Kit and Confirmation Slip of the Orientation/Meeting Schedule to the external partners and requesting office.	None	3 working days	Scrum Team ISMD
2. Submit the Orientation Confirmation Slip to the OSM-ITMD.	2.1. Conduct the orientation to the external partner/s in coordination to the requesting office. 2.2. Document the conduct of the orientation.	None	5 working day	Scrum Team ISMD
<b>TOTAL:</b>		<b>None</b>	<b>59 working days</b>	

### 3. SOFTWARE DEVELOPMENT SERVICES

This service facilitates the request for automation of business processes and support to Corporate policies, programs and projects to be developed internally. Activities will be based on the Scrum Methodology where the project deliverables will be subdivided into a 2 week period, hence process from 2-5 will be repeating until completion of the Project.

<b>Office/Division:</b>	IT Management Department - IS Management Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2B - Government to Business and G2G - Government to Government			
<b>Who May Avail:</b>	Any PhilHealth Business Process Units or Program Offices.			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Service Request Form (#1 original copy)			IT Helpdesk	
Business User Requirements Document (#1 original copy)			OSM-ITMD	
PhilHealth Circular and Policy Issuances (#1 copy)			Requesting Office	
Corporate Orders and Implementing Guidelines (#1 copy)			Requesting Office	
Standard Operating Procedures (#1 copy)			Requesting Office	
Risk Assessment Certificate (#1 copy)			Risk Management Department	
Updated Prioritized Sector Project List (#1 signed original copy)			Sector of the Requesting Office	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Create a ticket request using the IT Ticketing System and attach the scanned documents. Submit all hardcopy document requirements in the Office of the Senior Manager reflecting the ticket number in the Service Request Form.	1.1. Receive and log the request with existing ticket request. Return hardcopy requests for non-existing tickets. 1.2. Stamp, indicate the request number and return the receiving copy if any. 1.3. Endorse to the IS Management Division.	None	3 working days	Receiving Clerk Office of the Senior Manager, IT Management Department
	1.4. Endorse for IMS approval based on ISSP and Corporate Thrust. 1.5. Endorse to OSM-ITMD to present and report for Management Approval/Prioritization.	None	5 working days	Division Chief of the IS Management

	1.6. Release Request Status Update to the requesting office. 1.7. Assign a Scrum Team to handle approved request.			Division
2. Define all product backlog based on priority.	2.1. Group the defined product backlog into actionable deliverables within the prescribed period. 2.2. Prepare the Project Releases Timeline. 2.3. Prepare the System Requirements Specification for the applicable development period based on sequence of the Project Timeline. 2.4. Release the Project Timeline and SRS to the requesting office for approval.	None	5 working days	Scrum Team
3. Submit the approved the Project Timeline and the System Requirements Specification (SRS) for the initial sprint.	3.1. Conduct Sprint Planning. 3.2. Prepare the Project Journal.	None	3 working days	Scrum Team
4. Participate in the Daily Scrum Meeting	4.1. Conduct the Daily Scrum. 4.2. Conduct the Sprint Review. 4.3. Endorse the developed application for user acceptance test and security assessment compliance. 4.4. Update the Project Journal.	None	10 working days from project start date	Scrum Team ISMD
5. Submit the completely signed System Acceptance Form (SAF).	5.1. Prepare for the deployment documentations. 5.2. Submit deployment requirements to the IT Resource Management Division - IT Management Department. 5.3. Conduct Sprint Retrospective. 5.4. For publicly facing applications, endorse project to Information Security Department to facilitate 3rd Party Vulnerability Assessment Test	None	5 working days	Scrum Team ISMD
Repeat processes from 2-5 until all project deliverables has been completed.				
<b>TOTAL:</b>			<b>31 working days per project iteration</b>	

## 5. SOFTWARE QUALITY ASSURANCE SERVICES

The service provides for the processing of requests for the conduct of quality assurance testing of internal and/or external applications to be deployed in the PhilHealth IT Infrastructure.

<b>Office/Division:</b>	IT Management Department - IS Management Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	PRO IT, Business or Program Offices, Contracted Software Providers/Consultants			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Service Request Form		IT Helpdesk		
One (1) Original Copy of System Requirements Specification		Requesting Office		
One (1) Original Copy of Design Documents		Requesting Office		
One (1) Original Copy of Test Scenarios, Test Cases and Test Scripts		Requesting Office		
One (1) Original Copy of System Acceptance Form		Requesting Office		
One (1) Original Copy of System Presentation Materials or Guide		Requesting Office		
One (1) Original Copy of User Access Information		Requesting Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.1. Prepare the Service Request Form and supporting documents. 1.2. Create the service ticket for approved and prioritized projects by the ExeCom. 1.3. Upload the scanned signed SRF and supporting documents. 1.4. Submit the hardcopy documents to the OSM-ITMD.	1.1. Receive the hardcopy documents. 1.2. Evaluate completeness of the required documents. If not complete, return the documents to the requesting office. 1.3. Endorse the document to the Division Chief, ISMD.	None	2 working days	Receiving Clerk, ISMD
	1.4. Evaluate and assign the request to a QA Section.	None	1 working day	Division Chief of the IS Management Division
	1.5. Schedule the conduct of the quality assurance	None	2 working days	Section Head, QA Section

	test and assign to a QA Tester.			
	1.6. Conduct pre-test activities. 1.7. Conduct the QA Testing. 1.8. Release prepared Test Report.	None	10 working days	QA Tester
	1.9. Release signed Test Report and Client Satisfaction Survey to requesting office.	None	3 working days	Admin clerk, ISMD
3. Submit accomplished Client Satisfaction Survey.	3.1. Receive, record and file the documents.	None	2 working day	Receiving Clerk Office of the Senior Manager, IT Management Department
<b>TOTAL:</b>			<b>20 working days</b>	

## 6. SUPPORT MANAGEMENT SERVICES

The service involves the processing or resolution of incidents, complaints, inquiries and issues reported by internal and external users of PhilHealth systems.

<b>Office/Division:</b>	IT Management Department - IS Management Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2C - Government to Citizen, G2B - Government to Business and G2G - Government to Government			
<b>Who May Avail:</b>	Internal or external users of PhilHealth Systems			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
A detailed description of incidents, complaints, inquiries and issues (#1 original copy)		PhilHealth System Users		
Screenshot of incidents, complaints, inquiries and issues (#1 original copy)		PhilHealth System Users		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
External User: 1. Create a ticket indicating the detailed description and screenshots of incidents, complaints, inquiries and issues via the PhilHealth Ticketing System at URL?	1.1. Acknowledge receipt of the incidents, complaints, inquiries and issues 1.2 Endorse the incidents, complaints, inquiries and issues to the concerned scrum team.	None	3 working days	UPECS-EMR
Internal User: 1. Email the detailed description and screenshots of incidents, complaints, inquiries and issues to IT Helpdesk Unit (ithelpdesk@philhealth.gov.ph)	1.1. Acknowledge receipt of the incidents, complaints, inquiries and issues 1.2 Endorse the incidents, complaints, inquiries and issues to the concerned office/team.			IT Helpdesk
	1.3. Evaluate the incidents, complaints, inquiries and issues	None	1-3 working days (simple) 4-7 working days (moderate)	Concerned Scrum Team



			8-20 working days (complex)	
	1.4. Provide feedback or resolution to the UPECS-EMR team or escalate issues to concerned office.	None	1 working day	Concerned Scrum Team
	1.5. Provide feedback or resolution to the reporting user	None	1 working day	UPECS-EMR
<b>TOTAL:</b>		<b>6 working days (simple)</b> <b>10 working days (moderate)</b> <b>22 working days (complex)</b>		

## 7. SYSTEM INTEGRATION AND DATA SHARING SERVICES

This facilitates the request for system integration and/or data sharing requests received from other external partners.

Office/Division:	IT Management Department - IS Management Division			
Classification:	Highly Technical			
Type of Transaction:	G2B - Government to Business and G2G - Government to Government			
Who May Avail:	Health Care Institutions, Government Agencies, Other external partners			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Service Request Form (#1 original copy)		IT Helpdesk		
Business User Requirements Document (#1 original copy)		Requesting Office		
PhilHealth Circular and Policy Issuances (#1 copy)				
Corporate Orders and Implementing Guidelines (#1 copy)				
Standard Operating Procedures (#1 copy)				
Risk Assessment Certificate (#1 copy)				
Updated Prioritized Sector Project List (#1 signed original copy)		Sector of the Requesting Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit all document requirements in the Office of the Senior Manager, IT Management Department.	1.1. Receive and log the request. 1.2. Stamp, indicate the request number and return the receiving copy if any. 1.3. Endorse to the IS Management Division.	None	3 working days	Receiving Clerk Office of the Senior Manager, IT Management Department
	1.4. Endorse for IMS approval based on ISSP and Corporate Thrust. 1.5. Endorse to OSM-ITMD to present and report for Management Approval/Prioritization. 1.6. Release Request Status Update to the requesting office. 1.7. Assign a Scrum Team to handle approved request.	None	5 working days	Division Chief of the IS Management Division
2. Define all product backlog based on priority.	2.1. Group the defined product backlog into actionable deliverables within the prescribed period. 2.2. Prepare the Project Releases Timeline. 2.3. Prepare the System Requirements Specification for the applicable development period based on sequence of the Project Timeline.	None	5 working days	Scrum Team ISMD

	2.4. Release the Project Timeline and SRS to the requesting office for approval.			
3. Submit the approved the Project Timeline and the System Requirements Specification (SRS) for the initial sprint.	3.1. Conduct Sprint Planning. 3.2. Prepare the Project Journal.	None	3 working days	Scrum Team ISMD
4. Participate in the Daily Scrum Meeting	4.1. Conduct the Daily Scrum. 4.2. Conduct the Sprint Review. 4.3. Endorse the developed application for user acceptance test and security assessment compliance. 4.4. Update the Project Journal.	None	10 working days	Scrum Team ISMD
5. Submit the completely signed System Acceptance Form (SAF).	5.1. Prepare for the deployment documentations. 5.2. Submit deployment requirements to the IT Resource Management Division - IT Management Department. 5.3. Conduct Sprint Retrospective. 5.4. For publicly facing applications, endorse project to Information Security Department to facilitate 3rd Party Vulnerability Assessment Test	None	5 working days	Scrum Team ISMD
Repeat processes from 2-5 until all project deliverables has been completed.				
<b>TOTAL:</b>			<b>31 working days</b>	

## 8. WEBSITE AND INTRANET MANAGEMENT SERVICES

The service involves the processing of requests for the PhilHealth Corporate Website and Intranet Site.

<b>Office/Division:</b>	IT Management Department - IS Management Division			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Any PhilHealth Offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Service Request Form (#1 original copy)		IT Helpdesk		
Materials or documents (for reference/uploading)		Requesting office		
Template or layout required		Requesting office		
Digital media (pictures, audio, video)		Requesting office		
Approval / Clearance for posting (#1 original copy)		Sector Office, Corporate Affairs Group (CAG) and/or Physical Resource and Infrastructure Department (PRID)		
Risk Assessment Certificate (#1 photocopy copy)		Risk Management Department		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Service Request Form and other supporting documents through the IT ticketing system and hardcopy of signed to the OSM-ITMD.	1.1. Check if submitted request exists in the Ticketing system. If not return the documents to the requesting office for creation of a ticket in the ticketing system. 1.2. Review request and completion of the supporting documents. 1.3. Acknowledge receipt of the request for complete submission of requirements. 1.4. Update the ticket request to RESOLVED and provide a note of "RETURNED due to incomplete requirements".	None	3 working days	Receiving Clerk Office of the Senior Manager, IT Management Department

2. Submit incomplete requirements through the same ticket request.	<p>2.1. Update the good ticket to reflect the scheduled period.</p> <p>2.2. Perform the request.</p> <p>2.3. Update the ticket status to "RESOLVED" and record "DONE SUBJECT TO USER VALIDATION".</p> <p>2.4. Submit a Ticket Closure Report and Client Satisfaction Survey to the requesting office.</p>	None	10 working days from project start date	Scrum Team ISMD
3. Submit the signed and completed Ticket Closure Report and Client Satisfaction Survey	3.1. Receive, record and file the documents.	None	2 working days	Receiving Clerk Office of the Senior Manager, IT Management Department
<b>TOTAL:</b>		<b>None</b>	<b>16 working days</b>	

# **Information Management Sector (IMS)**

## **V. PMO-PIMS**

## 1. CONDUCT PROBLEM MANAGEMENT

Problem Management is a process by using analysis techniques to identify the cause of the problem/ issue as reported by the operations/ business process owners to the Information Management Sector for resolution.

<b>Office:</b>	PMO-PIMS			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G - Government to Government G2B - Government to Business			
<b>Who May Avail:</b>	All Information Management Sector (IMS) Clients			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
1. Report from a certain office/ BPO concerning the system application/s, IT services, et al.		Office of the Chief Information Officer		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Office/BPO to issue report to OCIO on the encountered issue/problem to OCIO for resolution	1. Acknowledge the receipt of report of the encountered issue/ problem	None	15 minutes	Admin OCIO Proper
	1.2 Once assessed, OCIO will forward the report to PMO-PIMS for proper action and further investigation.	None	1 day	Admin OCIO Proper
	1.3 Conduct investigation and assessment	None	2-3 days	(2) Social Insurance Assistant I, Social Insurance Officer II PMO-PIMS
	1.4 Facilitate series of meetings with Subject Matter Experts (SME) to assess the root cause of a certain problem	None	3 to 5 days  *depends on the number of the concerned office/s	Senior Manager PMO-PIMS

	1.5 Consolidate all related documents and issuances	None	1 - 2 days	(2) Social Insurance Assistant I, Social Insurance Officer II PMO-PIMS
	1.6 Craft report (TOP-SET) with corresponding recommendation/s to mitigate or to solve the issue once all necessary documents has been provided by the concerned office/s.	None	3-5 days	(2) Social Insurance Assistant I, Social Insurance Officer II PMO-PIMS
2. Receive copy of the Problem Management Report	2.1 Submit report	None	1 day	(2) Social Insurance Assistant I, Social Insurance Officer II PMO-PIMS
<b>TOTAL:</b>			<b>11 to 17 days</b>	



## 2. HANDLING REQUESTS ON MICROSOFT TEAMS AS THE OFFICIAL CORPORATE VIRTUAL TOOL FOR MEETINGS AND LIVE EVENTS.

Microsoft Teams is the hub for teamwork in Microsoft 365. The teams service enables instant messaging, audio and video calling, rich online meetings, mobile experiences, and extensive web conferencing capabilities. In addition, Teams provides file and data collaboration and extensibility features, and integrates with Microsoft 365 and other Microsoft ad partner apps.

<b>Office/Division:</b>	Project Management Office- PhilHealth Identity Management System			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	C2G- Government to Government			
<b>Who may avail:</b>	All PhilHealth Offices/with or without Microsoft Office 365 License			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
(1)Virtual Tool Request Form (VTRF) (1) Notice of Meeting 3. Email Request / Phone Call		PMO-PIMS Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the signed VTRF, NOM through email or hard copy in the PMO PIMS office.	1.1 Receives and log the requests 1.2 Check the completeness of the received documents 1.3 Forward to the MS Teams Team	None	5 mins	Administrative Receiving Officer
	1.4 Creation of MS Teams Link 1.5 Email the requested MS Teams link	None	5 minutes	Social Insurance Assistant I
2. Email request for a copy of the meeting recording	2.1 Download the meeting recording in One Drive 2.2 Email the link to the recording	None	5 minutes (dependent on the internet stability)	Social Insurance Assistant I
<b>TOTAL:</b>		<b>NONE</b>	<b>15 Minutes</b>	

# **Information Management Sector (IMS)**

## **VI. Task Force Informatics (TFI)**

## 1. DATA EXTRACTION

Extraction of Raw Data to desired output layout

<b>Office:</b>	Task Force Informatics			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All PhilHealth Officers and Employees			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of TFI Request Form		TFI Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit accomplished and approved TFI request Form	1.1 Accepts and reviews TFI request form for completeness of minimum required information (with expected output layout)	None	20mins	Clerk III TFI
	1.2 Records to logs of TFI requests		5mins	Clerk III TFI
	1.3 Forwards TFI request form and attachment (if any) to analyst		5mins	Clerk III TFI
	1.4 Reviews and assesses output specification requirements and availability and clarity of data/information and assignment of developer; updates log of TFI requests		20mins	Analyst TFI
	1.5.1 If ok, forward to developer		5mins	Analyst TFI
	1.5.2 If not ok, meeting with requesting party to clarify request requirements		1hr	Analyst, Developer TFI
	1.6 Reviews and analyses data and output specification requirements		15mins	Developer TFI
	1.7 Creates SIMPLE script		1hr	Developer TFI
	1.8 Creates COMPLEX script		1 day	Developer TFI

	1.8 Creates HIGHLY TECHNICAL script		3 days	Developer TFI
	1.9 Test run script, modifies script, generates output, validates results, quality assurance of results and documentation (repeat if needed) for SIMPLE requests		1 day	Developer TFI
	1.10 Test run script, modifies script, generates output, validates results, quality assurance of results and documentation (repeat if needed) for COMPLEX requests		5 days	Developer TFI
	1.11 Test run script, modifies script, generates output, validates results, quality assurance of results and documentation (repeat if needed) for HIGHLY TECHNICAL requests		15 days	Developer TFI
	1.12 Updates to logs of TFI requests		10mins	Developer TFI
	1.13 Secure copy of results to clerk with password created		30mins	Developer TFI
	1.14 Informs requesting party of the availability of requested data		30mins	Clerk III TFI
	1.15 Releases output to requesting party		30mins	Clerk III TFI
	1.16 Copy to storage devise for large volume of data		+30mins	Clerk III TFI
	1.17 Updates to logs of TFI requests		10mins	Clerk III TFI
Assumption: The requested data is not available in PCD				
<b>TOTAL:</b>			<b>20 days</b>	

## 2. DASHBOARD OR REPORTS

### Creation of PCD Dashboard or Reports

<b>Office:</b>	Task Force Informatics			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All PhilHealth Officers and Employees			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
One (1) Original Copy of Letter Request		TFI Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Compose Letter requesting for PCD Dashboard or Report	1.1 Receives and records to logs of TFI requests	None	20 minutes	Clerk TFI
	1.2 Reviews and assesses request specification requirements and assignment of developer; updates log of TFI requests		20 minutes	Analyst TFI
	1.3 reviews and drafts design of expected dashboard or report		15 minutes	Developer TFI
	1.4 Sets meeting with requesting party		10 minutes	Clerk TFI
	1.5 Presents draft and finalizes requirements of requested dashboard or report		1 day	Developer, Supervisor TFI
	1.6 Generates output, validates results, quality assurance of results and documentation (repeat if needed) for SIMPLE dashboard or report		1 day	Developer TFI
	1.7 Generates output, validates results, quality assurance of results and documentation (repeat if needed) for COMPLEX dashboard or reports		5 days	Developer TFI
	1.8 Generates output, validates results, quality assurance of results and documentation (repeat if needed) for HIGHLY		15 days	Developer TFI

	TECHNICAL dashboard and reports			
	1.9 Updates to logs of TFI requests		10 minutes	Developer TFI
	1.10 Informs requesting party of the availability of dashboard or report in PCD		30 minutes	Clerk TFI
	1.11 Presents final dashboard or report to requesting party		30 minutes	Developer, Supervisor TFI
	1.12 Copy to storage devise for large volume of data		+30 minutes	Clerk TFI
	1.13 Updates to logs of TFI requests		10 minutes	Clerk TFI
<b>TOTAL:</b>			<b>20 days</b>	

## **D. Legal Sector**

## 1. ISSUANCE OF CERTIFICATE OF ONGOING/PENDING INVESTIGATION AGAINST A HEALTH CARE PROVIDER

Issuance of certification is on a per request basis

Office		FACT-FINDING, INVESTIGATION, AND ENFORCEMENT DEPARTMENT		
Classification:		Complex		
Type of Transaction:		G2G – Government to Government		
Who May Avail:		Accreditation Committee – PRO and Accreditation Department		
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Letter Request (Single Transaction)			Accreditation Office / Committee Personnel	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Forward Letter – Request to FFIED	1.1 Receipt and recording of the request in the department's transaction recording system	None	1 day	Administrative Personnel
	2.1 Evaluate the request 3.1 Endorse to appropriate Section to facilitate request		1 hour	Department Manager
	4.1 Administrative Personnel to look into the database 5.1 Prepare the certification letter 6.1 Seek approval from Department Manager		7 days (depending on the complexity of the request)	Administrative Personnel
	7.1 Endorse to requesting office		3 hours	Administrative Personnel
	<b>TOTAL:</b>	<b>None</b>	<b>8 days, 4 hours</b>	



## 2. ISSUANCE OF CONTRACT REVIEW FROM INTERNAL LEGAL DEPARTMENT

Render contract review on all contracts or agreements to be entered into by the corporation to ensure that the provisions in the contract are consistent with the law and applicable rules, equitable and not prejudicial to the corporation.

<b>Office:</b>	Internal Legal Department (ILD)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government;			
<b>Who may avail:</b>	PhilHealth Regional Offices (PROs), Departments, Offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Memorandum requesting for Contract Review (original copy) (1 copy)		Requesting office		
Final draft contract/agreement/document subject for review (original copy or photocopy)(1 copy)		Requesting office		
Certification of Complete Staff Work (CSW) - (original copy) (1 copy)		Requesting office		
Certification of Risk Assessment (if necessary) - (original copy)(1 copy)		Requesting office		
Other pertinent documents (if necessary) - (original copy or photocopy)(1 copy)		Requesting office		
If originated from PROs, initial evaluation & recommendation from PRO Legal Office (original copy)(1 copy)		Requesting office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Endorse the request including all the necessary documents to Internal Legal Department	1.1 Receipt of indorsement of the request including all the necessary documents to Internal Legal Department (ILD)	None	1 working day	Receiving Clerk/ Legal Assistant Office of the Senior Vice President, Legal Sector;  Receiving Clerk/ Legal Assistant Internal Legal Department
None	1.2 Evaluate and assign the request for contract review Atty. IV/V	None	2 working days	Senior Manager, Internal Legal Department

None	1.3 Conduct research on the laws and regulations pertinent to the contract to be reviewed	None	10 working days	Atty. IV/ V/ Legal Researcher, Internal Legal Department
None	1.4 Draft contract review/ issue legal certification	None		Atty. IV/ V/ Legal Researcher, Internal Legal Department
None	1.5 Approve/ Modify draft contract review	None	6 working days	Senior Manager, Internal Legal Department
None	1.6 Recommend for approval by the Senior Vice President-Legal Sector	None		Senior Manager, Internal Legal Department
None	1.7 Endorse to Office of the Senior Vice President for Legal Sector	None	1 working day	Legal Assistant, Internal Legal Department
TOTAL:		None	20 working days	

Note: Since contract review is considered as highly technical in nature, its total TAT (Turn-Around-Time) is 20 working days but may be extended to another 20 working days, as the case may be.

### 3. ISSUANCE OF LEGAL OPINION FROM INTERNAL LEGAL DEPARTMENT

Render legal opinion to issues raised by the addressee that constitute legal matter in reference to interpretation of existing laws and regulations.

<b>Office:</b>	Internal Legal Department (ILD)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G - Government to Government; G2B - Government to Business			
<b>Who may avail:</b>	PhilHealth Regional Offices (PROs), Departments, Offices, Private Parties			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Memorandum requesting for Legal Opinion (original copy) (1 copy)		Requesting office		
Pertinent documents (original copy or photocopy) (1 copy)		Requesting office		
If originated from PROs, Legal Opinion issued by PRO Legal Unit (original copy)(1 copy)		Requesting office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Endorse the request including all the necessary documents to ILD	1.1 Receipt of indorsement of the request including all the necessary documents to Internal Legal Department (ILD)	None	1 working day	Receiving Clerk/ Legal Assistant from Office of the Senior Vice President for Legal Sector; Receiving Clerk/ Legal Assistant of ILD
None	1.2 Evaluate and assign the request for review/opinion of Atty. IV/ V	None	2 working day	Senior Manager, Internal Legal Department
None	1.3 Conduct research on the laws and regulations pertinent to the issues raised	None	10 working days	Atty. IV/ V/ Legal Researcher, Internal Legal Department
None	1.4 Draft legal opinion	None		Atty. IV/ V/ Legal Researcher, Internal Legal Department
None	1.5 Approve/modify the draft legal opinion	None	6 working days	Senior Manager, Internal Legal Department
None	1.6 Recommend for approval by the Senior Vice President-Legal Sector	None		Senior Manager, Internal Legal Department
None	1.7 Endorse to Office of the Senior Vice President for Legal Sector (OSVP-LSS) for	None	1 working day	Legal Assistant, Internal Legal Department

	SVP's approval/ comment/ modification of legal opinion			
<b>TOTAL:</b>		<b>None</b>	<b>20 working days</b>	

Note: Since legal opinion is considered as highly technical in nature, its total TAT (Turn-Around-Time) is 20 working days but may be extended to another 20 working days, as the case may be.

#### 4. LEGAL OPINION

Review and approval of legal opinion to the issues raised by the addressee that constitute legal matter in reference to interpretation of existing laws and regulations.

<b>Office:</b>	Office of the Senior Vice-President, Legal Sector			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G/ GSB			
<b>Who May Avail:</b>	PhilHealth Regional Offices (PROs), Departments, Offices,			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Draft Legal Opinion		Requesting office/ Party		
Memorandum requesting for Legal Opinion (original copy)		Requesting office/ Party		
Pertinent documents (original copy or photocopy)		Requesting office/ Party		
If originated from PROs, Legal Opinion issued by PRO Legal Unit (original copy)		Requesting office/ Party		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Receive request for legal opinion	Recording of the received request to the database and evaluation of the documents for assignment to Internal Legal Department	none	30 mins	Administration Services Assistant and Executive Assistant
	For assignment of the Senior Vice-President	none	15 mins	Senior Vice-President
	For updating the database and endorsing the request to the Internal Legal Department (routing of the documents)	none	30 mins	Administration Services Assistant and Process Server
Receive Draft Legal Opinion to the Office of the Senior Vice President for Legal Sector (OSVP-LS)	Review and approval of the Senior Vice-President	none	20 working days	Senior Vice-President
	For docketing of the Legal Opinion. For updating the database and routing to the requesting office	none	30 mins	Administration Services Assistant and Process Server
<b>TOTAL</b>		<b>None</b>	<b>20 working days, 90mins</b>	

## 5. CONTRACT REVIEW

Review and approval of Contract Certification on all contracts or agreements to be entered into by the corporation to ensure that the provisions in the contract are consistent with the law and applicable rules, equitable and not prejudicial to the corporation.

Office:	Office of the Senior Vice-President, Legal Sector			
Classification:	Highly Technical			
Type of Transaction:	G2G			
Who May Avail:	PhilHealth Regional Offices (PROs), Departments, Offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Draft Contract Certification		Requesting office		
Memorandum requesting for Contract Review (original copy)		Requesting office		
Final draft contract/ agreement/ document subject for review (original copy or photocopy)		Requesting office		
Certification of Complete Staff Work (CSW) - (original copy)		Requesting office		
Certification of Risk Assessment (if necessary) - (original copy)		Requesting office		
Other pertinent documents (if necessary) - (original copy or photocopy)		Requesting office		
If originated from PROs, initial evaluation & recommendation from PRO Legal Office (original copy)		Requesting office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Receive request for review of contract	Recording of the received request to the database and evaluation of the documents for assignment to Internal Legal Department	none	30 mins	Administration Services Assistant and Executive Assistant
	For assignment of the Senior Vice-President	none	15 mins	Senior Vice-

				President
	For updating the database and endorsing the request to the Internal Legal Department (routing of the documents)	none	30 mins	Administration Services Assistant and Process Server
Receive Draft Contract Certification to the Office of the Senior Vice President for Legal Sector (OSVP-LS)	Review and approval of the Senior Vice-President	none	20 working days	Senior Vice-President
	For updating the database and routing to the Internal Legal Department for issuance of Contract Certification Number	none	30 mins	Administration Services Assistant and Process Server
<b>TOTAL</b>		<b>None</b>	<b>20 working days and 90 mins</b>	

## **E. Member Management Group (MMG)**



# 1. HANDLING OF INQUIRIES: POLICY GUIDELINES ON MEMBERSHIP, CONTRIBUTION AND BENEFIT AVAILMENT AND CLAIMS CONCERNS

This service provides for the official Reply / Resolutions / Clarifications / Recommendations regarding inquiries pertaining to policies and guidelines concerning Membership, Contribution, and Benefit Availment.

<b>Office/Division:</b>	Member Management Group (All Departments)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G– Government to Government			
<b>Who may avail:</b>	PhilHealth Offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Copy of documents for evaluation (Letter, Memo, Issuances and/or policies, reports and other correspondences.		Concerned offices (internal and external clients)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Endorsement of documents to the OVP-MMG for appropriate action	1.1. Receives and logs the documents containing the inquiry.	None	1 working day	Social Insurance Assistant I; Executive Assistant; OVP, MMG
	1.2. Evaluate to whom the inquiry will be endorsed for appropriate action by the concerned Segment.			
	1.3. Endorse to concerned Segment.			
	1.4. Concerned Segment receives and logs the endorsed document.			
	1.5. Assignment to concerned Segment head/staff for appropriate action.			
	1.6. Segment head/staff performs CSW and prepares draft reply memos and/or recommendations.		5 working days	Social Insurance Assistant / Officer / Specialist of the concerned Segment

	1.7. Endorse back to the OVP-MMG for approval of the reply memos / recommendations by the Vice President.			
	1.8. Review and approval by the Vice President		1 working day	Social Insurance Assistant I; Executive Assistant; Vice President of the OVP, MMG
2. Receives the Reply / Resolutions / Clarifications / Recommendations.	1.9. Once signed off by the Vice President, immediate endorsement to concerned stakeholders			
<b>TOTAL:</b>		<b>None</b>	<b>7 working days</b>	

## 2. REQUEST FOR DEVELOPMENT OF BUSINESS OR USER REQUIREMENTS SPECIFICATIONS FOR THE DEVELOPMENT AND ENHANCEMENT OF IT SUPPORT SYSTEM APPLICATIONS FOR MEMBERSHIP AND CONTRIBUTIONS

Business requirements in the context of software engineering or the software development life cycle, is the concept of eliciting and documenting business requirements of business users such as customers, employees, and vendors early in the development cycle of a system to guide the design of the future system.

<b>Office/Division:</b>	Member Management Group (PMDMD)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G – Government to Government			
<b>Who may avail:</b>	Concerned Segments of the MMG			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
One original copy of the following: - Written request detailing the need for the Business or User Requirements Specification as requisite for the development or enhancements of systems applications. - System Requirement Form (SRF) - User Acceptance		Concerned segments.		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submission of the request for development or enhancement of IT support application system.	1.1. Prepare Business / User Requirements Specifications (BRS or URS)	None	*33 working days	Technical staff and Segment Head of the concerned Department
	1.2. Secure approval of the BRS / URS requests and specifications.		2 working days	5 Team members
	1.3. Develop or Enhance a prototype for testing		3 working days	System Analyst and Programmer of ITMD
2. Participate in the testing.	1.4. Conduct of functionality testing and submission of findings		5 working days	System Analyst and Programmer of ITMD; Technical Staff of the concerned MMG Office

	1.5. Develop or Enhance the system and conduct of the final testing based on the submitted findings.		5 working days	System Analyst and Programmer of ITMD
	1.6. Conduct of the final testing based on the submitted findings.		5 working days	System Analyst and Programmer of ITMD; Technical Staff of the concerned MMG Office
	1.7. Secure approval of the system.		2 working days	
	1.8. Implement and monitor the IT application system.		2 working days	
<b>TOTAL:</b>		<b>None</b>	<b>57 Working days</b>	<b>5 Team members</b>
<p>* Well-defined business requirements help lay out a project charter, a critical step in executing business strategy or business goals, and to take it to the next logical step of developing it into an IT system. This helps monitoring overall project health and provides for positive traction with key project stakeholders including sponsors.</p>				

### 3. REQUEST FOR DATABASE QUALITY AND ANALYSIS

Review, validation and analysis of data pertaining to Membership and Contributions

<b>Office/Division:</b>	Member Management Group (PMDMD)			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G – Government to Government			
<b>Who may avail:</b>	Concerned Segments of the MMG			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
One original TFI Extraction Request Form		Task Force Informatics		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Request for data extraction relative to contributions and membership	1.1. Identify data errors in the database  1.2. Provide criteria for data extraction  1.3. Organize and validate extracted data.  1.4. Forward extracted list to regional offices.	None	5 working days	Technical staff and head of the Division  5 Team members
<b>TOTAL:</b>		<b>None</b>	<b>5 Working days</b>	<b>5 Team members</b>

## **F. Management Services Sector (MSS)**

### **I. Human Resource Department**

## 1. REQUEST FOR EMPLOYEE RECORD

(Certified True Copy of 201 Records, Certificate of Employment, Certificate of Compensation, Certificate of 20% Employee Discount, Service Records, Leave Credits, and Certificate of Performance Rating)

<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government, G2C - Government to Client			
<b>Who May Avail:</b>	All PhilHealth Employees and Job Order			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. HRD Form - Request for Record		Human Resource Department/PRO Human Resource Unit or in the HRD Website - Downloadable Forms ( <a href="http://primehrd-svr.philhealth.gov.ph/hr-forms/">http://primehrd-svr.philhealth.gov.ph/hr-forms/</a> )		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the HRD Form - Request for Record.	1. Receiving Clerk accepts the properly filled-out Request for Employee Records.	none	1 hour	HRD/ PRO HRU Receiving Clerk
	2. Receiving Clerk prepares the requested record (201 Records, Certificate of Employment, Certificate of Compensation, Certificate of 20% Employee Discount, Service Records, Leave Credits, and Certificate of Performance Rating) and submits the record to the authorized signatory.	none	1 hour	HRD/ PRO HRU Receiving Clerk  HRMO/Senior Manager for HRD
	3. Endorses it to the Outgoing Clerk for sending via email or receiving of the employee.	none	1 hour	Outgoing Clerk
2. Receive the requested record	3. Files the receiving copy duly signed by the requesting employee.	none	1 hour	Outgoing Clerk
<b>TOTAL:</b>		<b>none</b>	<b>4 hours</b>	

## 2. REQUEST FOR EMPLOYEE DATA RECORD UPDATING

(Birth Certificate, Marriage Certificate, Transcript of Records, Barangay Certificate/ID Issuance Forms)

<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All PhilHealth Employees and Job Order Contractors			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. HRD Form - Request for Record		Human Resource Department/PRO Human Resource Unit or in the HRD Website - Downloadable Forms ( <a href="http://primehrd-svr.philhealth.gov.ph/hr-forms/">http://primehrd-svr.philhealth.gov.ph/hr-forms/</a> )		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the HRD Form - Request for Record.	1. Receiving Clerk accepts the properly filled-out Request for Employee Records.	none	5 minutes	HRD/ PRO HRU Receiving Clerk
	2. Receiving Clerk screens and authenticate/validate the attachments or supporting documents for completeness (Birth Certificate, Marriage Certificate, Transcript of Records, Barangay Certificate/ID Issuance Form)	none	15 minutes	HRD/ PRO HRU Receiving Clerk
	3. Endorses it to the HRMA/HRMO I for encoding/updating to the HR databases	none	5 minutes	HRD/ PRO HRU Receiving Clerk



	4. HRMA/HRMO I performs HR databases updating based on the authenticated/validated documents submitted.	none	15 minutes	HRD/ PRO HRMA/HRMO I
	5. Once updated, HRMA/HRMO endorses the authenticated/validated documents to the receiving clerk for F201 filing.	none	5 minutes	HRD/ PRO HRMA/HRMO I
	6. Files the receiving copy duly signed by the requesting employee.	none	15 minutes	HRD/ PRO HRU Receiving Clerk
<b>TOTAL:</b>		<b>none</b>	<b>55 minutes</b>	

### 3. REQUEST FOR HRIS DATA/REPORTS

(Human Resource Inventory, Total Compensation Framework, HR Statistical Reports)

<b>Office:</b>	Human Resource Department			
<b>Classification:</b>	Simple to Complex			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	Internal Offices			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. HRD Form - Request for Record		Human Resource Department/PRO Human Resource Unit or in the HRD Website - Downloadable Form ( <a href="http://primehrd-svr.philhealth.gov.ph/hr-forms/">http://primehrd-svr.philhealth.gov.ph/hr-forms/</a> )		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the HRD Form - Request for Record.	1. Receiving Clerk accepts the properly filled-out Request for HRIS Data/Reports	none	5 minutes	HRD Receiving Clerk
	2. Receiving Clerk endorses the request to the HRIS Head for approval	none	5 minutes	HRD Receiving Clerk
	3. HRIS Head reviews, determines the scope and approves the request.	none	10 minutes	HRD - HRIS Head
	4. if the request is already available pro-forma, endorses it to the HRMA for data extraction. If request parameters are complex, the HRIS Head shall do the data extraction.	none	5 minutes	HRMA HRIS Head

	5. Perform data extraction and report generation.	none	1 hour for simple reports 1-3 days for moderate reports 5 days for complex reports	HRMA  HRIS Head
	6. Endorses it to the Outgoing Clerk for sending via email or receiving of the employee/office.	none	5 minutes	Outgoing Clerk
2. Receive the requested record	7. Files the receiving copy duly signed by the requesting employee/office.	none	5 minutes	Outgoing Clerk
<b>TOTAL:</b>		<b>none</b>	1 hour 35 minutes for simple reports 3 days days for moderate reports 5 days for complex reports	

#### 4. REQUEST FOR EXTERNAL TRAINING

External Training refers to local training activities initiated, organized, offered as public offerings (not exclusive to PhilHealth), and conducted by training institutions/firms other than PhilHealth. Employees who have been appointed to either career or non-career employees for at least six (6) months may be allowed to participate in conventions, seminars, conferences, symposia and such other activities conducted by non-government organizations or private institutions for a fee, as part of the human resource development program of the government, chargeable to the budget of the Corporation.

Office:	Human Resource Department			
Classification:	Simple Transaction			
Type of Transaction:	Government to Government			
Who May Avail:	All PhilHealth Employees (Regular and Casual)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Properly accomplished External Training Nomination Form (Annex B) for Evaluation of HRD-CO or HR Unit-PRO		Human Resource Department (Learning and Development Team)/PRO Human Resource Unit or in the HRD Website (Editable Form)		
Invitation with the course content/syllabus		Institution who will conduct/provide the Learning Intervention		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit Properly accomplished External Training Nomination Form (ETNF) attached the invitation with course content/syllabus	Receive, screen, evaluate ETNF and prepare Corporate Personnel Order	None	1 day	HRD/HRU/Receiving Clerk
	Sign DRAR (HRD level only) and initial CPO	None	2 days	Learning and Development Team Head ,Division Chief,HRD Manager
<b>TOTAL:</b>		<b>None</b>	<b>3 days</b>	

\* The DRAR and CPO will still be signed and processed by Comptrollership Department and OSVP - MSS

\* The numbering and posting is being done by PRID - RELMS

## 5. REQUEST FOR EXTERNAL TRAINING

External Training refers to local training activities initiated, organized, offered as public offerings (not exclusive to PhilHealth), and conducted by training institutions/firms other than PhilHealth. Employees who have been appointed to either career or non-career employees for at least six (6) months may be allowed to participate in conventions, seminars, conferences, symposia and such other activities conducted by non-government organizations or private institutions for a fee, as part of the human resource development program of the government, chargeable to the budget of the Corporation.

<b>Office:</b>	Human Resource Department			
<b>Classification:</b>	Simple Transaction			
<b>Type of Transaction:</b>	Government to Government			
<b>Who May Avail:</b>	All PhilHealth Employees (Regular and Casual)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Properly accomplished External Training Nomination Form (Annex B) for Evaluation of HRD-CO or HR Unit-PRO		Human Resource Department (Learning and Development Team)/PRO Human Resource Unit or in the HRD Website (Editable Form)		
Invitation with the course content/syllabus		Institution who will conduct/provide the Learning Intervention		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit Properly accomplished External Training Nomination Form (ETNF) attached the invitation with course content/syllabus	Receive, screen, evaluate ETNF and prepare Corporate Personnel Order	None	1 day	HRD/HRU/Receiving Clerk

	Sign DRAR (HRD level only) and initial CPO	None	2 days	Learning and Development Team Head Division Chief HRD Manager
	Process CPO on availability of funds/budget	None	to be determined by Comptrollership Department	Budget Analyst (Comptrollership Department)
	Evaluate and Sign DRAR and CPO	None	to be determined by OSVP - MSS	Executive Assistant SVP - MSS
	Number and Post of the signed CPO to Outlook	None	to be determined by PRID - RELMS	Administrative Officer
<b>TOTAL:</b>			3 days	

6. REQUEST FOR CERTIFICATION OF TRAININGS ATTENDED				
Employees request for certification for all the learning and development programs that they have attended				
<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All PhilHealth Employees (Regular and Casual)			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Accomplished Request for Documents Form		Human Resource Department/PRO Human Resource Unit or in the HRD Website (Downloadable Form)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the HRD Form - Request for Record.	Accepts the properly filled-out Request for Employee Records.	none	30 minutes	HRD/ PRO HRU Receiving Clerk
	Prepares the requested record and submits the record to the authorized signatory.	none	5 hours	HRD/ PRO HRU Officer HRMO/Senior Manager for HRD
	Endorses the Certification to the Outgoing Clerk for sending via email or receiving of the employee.	none	1 hour and 30 minutes	Outgoing Clerk
2. Receive the requested record	Files the receiving copy duly signed by the requesting employee.	none	1 hour	Outgoing Clerk
<b>TOTAL:</b>		<b>none</b>	<b>8 hours or 1 day</b>	

## 7. REQUEST FOR EMPLOYEE RECORD

(Certified True Copy of 201 Records, Certificate of Employment, Certificate of Compensation, Certificate of 20% Employee Discount, Service Records, Leave Credits, and Certificate of Performance Rating)

<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All PhilHealth Employees and Job Order			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. HRD Form - Request for Record		Human Resource Department/PRO Human Resource Unit or in the HRD Website - Downloadable Forms ( <a href="http://primehrd-svr.philhealth.gov.ph/hr-forms/">http://primehrd-svr.philhealth.gov.ph/hr-forms/</a> )		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the HRD Form - Request for Record.	1. Receiving Clerk accepts the properly filled-out Request for Employee Records.	none	1 hour	HRD/ PRO HRU Receiving Clerk
	2. Receiving Clerk prepares the requested record (201 Records, Certificate of Employment, Certificate of Compensation, Certificate of 20% Employee Discount, Service Records, Leave Credits, and Certificate of Performance Rating) and submits the record to the authorized signatory.	none	1 hour	HRD/ PRO HRU Receiving Clerk  HRMO/Senior Manager for HRD
	3. Endorses it to the Outgoing Clerk for sending via email or receiving of the employee.	none	1 hour	Outgoing Clerk



2. Receive the requested record	3. Files the receiving copy duly signed by the requesting employee.	none	1 hour	Outgoing Clerk
<b>TOTAL:</b>		<b>none</b>	<b>4 hours</b>	

## 8. APPLICATION FOR LEAVE

Aside from the Vacation, Sick, Maternity and Paternity Leave, special Leave privileges may be availed for three (3) days or a combination of any leave for maximum of three days in a given year. Special leave privileges are non-cumulative and non-convertible to cash. Special privilege leaves include: Funeral/mourning leave, Hospitalization leave, Accident leave, Relocation leave, Government transaction leave, Calamity leave, Graduation leave, Enrolment leave, Wedding anniversary leave, and Birthday leave

Office:	Human Resource Department/PRO Human Resource Unit		
Classification:	Simple		
Type of Transaction:	G2G - Government to Government		
Who May Avail:	All PhilHealth Employees (Regular and Casual)		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
1. Accomplished Leave Form (Civil Service Form No. 6) (2 Original / soft copy)		Human Resource Department/PRO Human Resource Unit or in the HRD Website - Downloadable Forms ( <a href="http://primehrd-svr.philhealth.gov.ph/hr-forms/">http://primehrd-svr.philhealth.gov.ph/hr-forms/</a> )	
2. Medical Certificate for sick leave incurred for 5 days or more (1 Original / soft copy)		Hospital/ Clinic/ Lying-in	
For Maternity leave application:			
1. Medical Certificate issued by a government or private physician, as proof of pregnancy and estimated type of delivery (Original / soft copy - 1 copy)		Hospital / Clinic / Lying-in	
2. Accomplished Clearance Form (Civil Service Form No. 7) (2 Original)		Human Resource Department/PRO Human Resource Unit or in the HRD Website (Downloadable Form)	
3. Solo Parent I.D. for solo parents who want to avail the additional maternity leave of 15 days (1 Original / soft copy)		Department of Social Welfare and Development (DSWD) / Municipal Social Welfare and Development (MSWD)	
For Paternity leave application:			
1. PSA marriage certificate (1 photocopy)		Philippine Statistics Authority (PSA)	

2. Birth certificate of newly born child (1 photocopy)		Hospital / Clinic / Lying-in / Civil Registry / PSA		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the leave form. Secure immediate supervisor and Department/Office Head's recommendation/ approval. *for vacation leave: filing should be at least two (2) working days before actual leave *for emergency sick leave: filing should be done within 2 working days after *for maternity leave: filing should be at least thirty (30) calendar days in advance	1. Provide the leave form	none	1 hour	HRD/ PRO HRU Receiving Clerk
2. Submit the accomplished leave form including the documentary requirements to the Receiving Clerk	2. Check completeness of documentary requirements.	none	1 hour	HRD/ PRO HRU Receiving Clerk
3. Receive the photocopy of the leave, if applicable.	3. Review completeness of documentary requirements and certify leave balances.	none	1 hour	HRD/ PRO HRU Officer
none	4. Record the approved application	none	1 hour	HRD/ PRO HRU Officer
<b>TOTAL:</b>		<b>none</b>	<b>4 hours</b>	

## 9. PROCESSING OF SALARY

First Salary, Last Salary, Terminal Pay, Salary Adjustment

<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All PhilHealth Employees and Job Order Contractors			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. HRD Form - Request for Record		Human Resource Department/PRO Human Resource Unit or in the HRD Website (Downloadable Form)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the HRD Form - Request for Record.	1. Receiving Clerk accepts the properly filled-out Request for Employee Records.	none	1 hour	HRD/ PRO HRU Receiving Clerk
	2. Receiving Clerk prepares the requested record (Service Record, Certificate of Employment, F201 record) and submits the record to the authorized signatory.	none	1 hour	HRD/ PRO HRU Receiving Clerk HRMO/Senior Manager for HRD
	3. Endorses it to the Outgoing Clerk for sending via email or receiving of the employee.	none	1 hour	Outgoing Clerk
2. Receive the requested record	3. Files the receiving copy duly signed by the requesting employee.	none	1 hour	Outgoing Clerk
<b>TOTAL:</b>		<b>none</b>	<b>4 hours</b>	

## 10. PROCESSING OF OFFICIAL BUSINESS SLIP

This describes the procedures on the processing of Official Business Slip and issuance of Reference Number

<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All PhilHealth Employees and Job Order Contractors			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. HRD Form - Official Business Slip 2. Certificate of Appearance/ Certificate of Completion of Task		Human Resource Department/PRO Human Resource Unit or in the HRD Website (Downloadable Form)		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the accomplished Official Business Slip Form	1.1 Accept and assess completeness of data  Deficient - Inform requesting party of any deficiency and enumerate the missing data	none	1 hour	HRD/ PRO HRU Receiving Clerk
	1.2. Verify/Validate the purpose of travel and eligibility of signatory  With Deficiency - Return the form to the requesting party if the purpose of travel is not authorized or considered as Official Business			

	Complete - Issue a unique OBS Reference Number			
2. Return to the receiving clerk and submit the corresponding Certificate of Appearance or Certification of Completion Task	2.1. Accept the Certificate of Appearance of Certificate of Completion of Task issued by authorized signatory  Deficient - Inform requesting party of any deficiency and enumerate the missing data	none	1 hour	HRD/ PRO HRU Receiving Clerk  HRMO/Senior Manager for HRD
	2.2. Record the OBS number and reflect to the Attendance Monitoring Database	none		Outgoing Clerk
<b>TOTAL:</b>		<b>none</b>	<b>2 hours</b>	

## 11. REQUEST FOR CORRECTION OF DTR ENTRIES

An employee may request for inclusion of data to Daily Time Records upon submission of requisite supporting documents

<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All PhilHealth Employees and Job Order Contractors			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. HRD Form - Daily Time Correction Form 2. Copy of Guard's Log Book 3. Letter Request with at least two (2) Witnesses - if no record in the guard's logbook		Human Resource Department/PRO Human Resource Unit or in the HRD Website - Downloadable Forms ( <a href="http://primehrd-svr.philhealth.gov.ph/hr-forms/">http://primehrd-svr.philhealth.gov.ph/hr-forms/</a> )		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit the accomplished Official Business Slip Form and supporting document if applicable	1.1 Receiving Clerk accepts the Daily Time Correction Form and check the completeness of data	none	1 hour	HRD/ PRO HRU Receiving Clerk
	1.2. Evaluate the supporting documents and assess authenticity  <i>With Deficiency - Return the form to the requesting party to complete the data</i>  <i>Complete and In Order - Receive the data and process the request</i>	none	1 hour	HRD/ PRO HRU Receiving Clerk  HRMO/Senior Manager for HRD

	1.3 Forward to the authorized supervisor for validation/approval of request  <i>Request for pertaining to AM Time "In" and PM Time "Out" should be supported by letter request indicating a valid justifiable reason. Approving Officer is the HRD Senior Manager.</i>  <i>The HRD-AMLA supervisor is authorized to approve request for correction of DTR entries that are not captured due to system error</i>	none	1 day	Approving Officer/authorized supervisor
	1.4. Record the entries to Attendance Monitoring Database	none	1 hour	Outgoing Clerk
	1.5. Issuance of DTR print out, if requested	none	1 hour	Outgoing Clerk
<b>TOTAL:</b>		<b>none</b>	<b>5 hours</b>	



12. PROCESSING OF APPLICATION FOR STUDY LEAVE /VACATION LEAVE FOR PURPOSES OF STUDY				
The study leave is an option offered to qualified PhilHealth employees and officers to help them prepare for their licensure examination or to complete their master's degree.				
<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G - Government to Government			
<b>Who May Avail:</b>	All PhilHealth Regular employees			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1. Letter of Intent			Employee concerned	
2. Application for Leave of Absence (ALA) Form			HRD/ PRO HR Unit or HRD Website	
3. Application for Clearance Form			HRD/ PRO HR Unit or HRD Website	
4. Workload Distribution Form			HRD/ PRO HR Unit or HRD Website	
5. Certificate of No Pending Administrative and Criminal Case			OSVP - Legal Sector	
6. Certification that profession is relevant to the current job			Immediate Supervisor/ Head of Office	
7. Certificate of No Current Scholarship Grant			HRD/ PRO HR Unit	
8. Proof of Enrollment (Registration Card)			School or Institution Concerned	
CLIENT STEPS	AGENCY ACTION*	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Letter of Intent with approval of immediate supervisor and Head of Office	1. Review, screen as to completeness of requirements, evaluate if qualified or not and prepare the endorsement letter and attached the submitted documents indicated in the checklist	none	3 working days	HRD

2. Submit the accomplished forms in the checklist	2. Route the endorsement letter together with the submitted documents for approval of the HRD Senior Manager	none	2 working days	HRD
	3. Prepare and send Notice of Approval to qualified employee, regret letter if not qualified, prepare Service Obligation Contract and provide all approved documents to employee concerned, AMLA, Payroll and HRIS Units for updating records	none	2 working days	HRD
<b>TOTAL:</b>		none	7 working days	

*\*exclusive of review, screen as to completeness of requirements and approval of concerned offices (OSVP-MSS, Sector Head of employee concerned, OCOO and OPCEO)*

### 13. REQUEST FOR PUBLICATION/POSTING OF VACANT POSITION

#### Notice of Vacancy

<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G (Government to Government)			
<b>Who May Avail:</b>	All PhilHealth officers and employees			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Request for Publication/Posting of Vacant Position		Human Resource Department/PRO Human Resource Unit or in the HRD or PhilHealth Website (Downloadable Form)		
Request for Publication/Posting should be submitted at least 5-days before the scheduled CSC web posting (every 3rd Monday of the applicable of month)				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Fill out the Request for Publication/Posting of Vacant Position	1. Receiving Clerk accepts the properly filled-out forms (with signature of concerned office/department head)	none	1 hour	HRD/ PRO HRU Receiving Clerk
	2. Receiving Clerk provides copy of acknowledged form (signed with date of receipt)	none	1 hour	HRD/ PRO HRU Receiving Clerk
	3. Receiving Clerk endorses the Request for Publication/Posting of Vacant position to RSP Staff/HRU Staff	none	1 hour	HRD/ PRO HRU Receiving Clerk

2. Receive copy of acknowledged form	4. RSP Staff/HRU Staff validates if vacant position can be published (vacated due to resignation/retirement/separation of former incumbent).	none	1 day	HRD-RSP Staff/ PRO HRU Staff
	4.1 Checks if the reason for vacancy is due to resignation/retirement/separation, if yes, ready for posting	none		HRD-RSP Staff/ PRO HRU Staff
	4.2 Checks if the reason for vacancy is due to promotion of former incumbent, if yes, confirm if promotion is validated, if yes, ready for posting.	none		HRD-RSP Staff/ PRO HRU Staff
	5. RSP Staff/HRU Staff prepares the result of evaluation of the request and endorses to the HRD/HRU Head for signature/approval	none	1 day	HRD-RSP Staff/ PRO HRU Staff
	6. RSP Staff/HRU Staff prepares Notice of Vacancy for signature/approval of authorized official	none	1 day	HRD-RSP Staff/ PRO HRU Staff
	7. RSP Staff submits the duly signed Notice of Vacancy to the Civil Service Commission for web posting and ITMD for posting in the PhilHealth website	none	1 day	HRD-RSP Staff/ PRO HRU Staff
<b>TOTAL:</b>		<b>none</b>	<b>4 days and 3 hours</b>	

#### 14. ACCEPTANCE OF LETTER OF INTENT TO RESIGN/RETIRE FROM GOVERNMENT SERVICE

Application for Retirement, Resignation

<b>Office:</b>	Human Resource Department/PRO Human Resource Unit			
<b>Classification:</b>	Complex			
<b>Type of Transaction:</b>	G2G (Government to Government)			
<b>Who May Avail:</b>	All PhilHealth officers and employees			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Letter of Intent to resign/retire/transfer				
Letter of intent to resign/transfer/retirement should be submitted at least 30 days before the effectivity of resignation/transfer/retirement.				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit letter of intent to resign/transfer/retire	1. Receiving Clerk accepts the letter of intent to resign/transfer/retire	none	1 hour	HRD/ PRO HRU Receiving Clerk
	2. Receiving Clerk checks if letter of intent is submitted at least 30-days before effective date of resignation/transfer/retirement	none	1 hour	HRD/ PRO HRU Receiving Clerk
	3. Receiving Clerk provides copy of acknowledged letter of intent to resign/transfer/retire (signed with date of receipt)	none	1 hour	HRD/ PRO HRU Receiving Clerk

2. Receive copy of acknowledged letter of intent	4. Endorses received Letter of Intent to resign/transfer/retire to the RSP staff-in-charge	none	1 hour	HRD-RSP staff in-charge
	5. RSP Staff-in-Charge prepares Notice of Acceptance of Resignation/Transfer/Retirement	None	2 days	HRD-RSP staff in-charge
	5.1 Checks if for optional or mandatory retirement, if yes, prepares Notice of Acceptance			HRD-RSP staff in-charge
	5.2 Checks if employee has pending case under Section 12 of RA 3019 (Anti-Graft and Corrupt Practices Act), if yes, prepares notice to employee that he/she shall not be allowed to resign from his/her position.			HRD-RSP staff in-charge
	6. Endorse the Notice of Acceptance of Resignation/Transfer/Retirement to the authorized official	None	1 hour	HRD-RSP staff in-charge
	7. Approve/sign the Notice of Acceptance of Resignation/Transfer/Retirement*	None	5 days	
<b>TOTAL:</b>		<b>none</b>	<b>7 days 5 hours</b>	

\*Setting of TAT for the authorized officer to sign the Notice

# **Management Services Sector (MSS)**

## **II. PRID**

# 1. REQUEST FOR THE PROVISION OF CORPORATE'S VEHICLES.

This is issued to the requesting party on a request basis.

<b>Office:</b>	Motor Pool Unit, General Services and Bldg. Maintenance, Division, Physical Resources and Infrastructure Department (PRID)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	All employees and officers of PhilHealth Central Office.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Approved OBS/CPO Vehicles Request Slip, VRS		Motorpool Unit for VRS, HRD for OBS / Records Mgt. Unit for CPO.		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Submit requirement/s.	1.1 Receives and registers Motor Pool Unit's document log.	None	5minutes upon received of documents	Admin Staff
	2.1 Evaluates the request.	None	15minutes upon received of documents	Dispatcher/Admin. Staff
	2.2 Prepares Trip Ticket.	None	15minutes upon received of documents	Dispatcher/Admin. Staff
	2.3 Informs the requesting personnel their type of vehicle and assigned driver.	None	5minutes upon received of documents	Dispatcher/Admin. Staff
	<b>TOTAL:</b>	<b>None</b>	<b>40minutes</b>	



## 2. REQUEST FOR GENERAL SUPPORT AND ALLIED SERVICES.

This is issued to the requesting party on a request basis.

<b>Office:</b>	Building Maintenance Unit, General Services and Bldg. Maintenance, Division, Physical Resources and Infrastructure Department (PRID)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	All employees and officers in PhilHealth Central Office.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
-Duly signed and filled Request Form.		Building Maintenance Unit.-PRID		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit filled up Request Form/Call to Assigned Bldg. Maint. Officer.	1.1 Receives form/call.	None	5minutes upon received of documents	Admin Staff
	2.1 Records and prepares Job Request Form.	None	10minutes upon received of documents	Admin Staff
	2.2 Submits filled up Job Request Form to Technicians.	None	5minutes upon received of documents	Admin Staff
	2.3 Receives and schedules the service.	None	15minutes upon received of documents	Technician.
	2.4 Take appropriate action on service being requested.	None	60minutes	Technician.
	<b>TOTAL:</b>	<b>None</b>	<b>1.58hours</b>	

### 3. REQUEST FOR SAFETY, SECURITY AND SANITATION.

This is issued to the requesting party on a request basis.

<b>Office:</b>	Building Maintenance Unit, General Services and Bldg. Maintenance, Division, Physical Resources and Infrastructure Department (PRID)			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	All employees and officers in PhilHealth Central Office.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
-Duly signed and filled Request Form.		Building Maintenance Unit.-PRID		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Submit filled up Request Form/Call to Assigned Bldg. Maint. Officer.	1.1 Receives form/call.	None	5minutes upon received of documents	Admin Staff
	2.1 Records and prepares Job Request Form.	None	10minutes upon received of documents	Admin Staff
	2.2 Submits filled up Job Request Form to Technicians.	None	5minutes upon received of documents	Admin Staff
	2.3 Receives and schedules the service.	None	15minutes upon received of documents	Admin. Staff/Security/Utility.
	2.4 Take appropriate action on service being requested.	None	7hours	Admin. Staff/Security/Utility.
	<b>TOTAL:</b>	None	7.58hours	

#### 4. REQUEST FOR ENGINEERING AND MAINTENANCE (TECHNICAL ASSISTANCE FOR MYOA AND OFFICE SPACE EVALUATIONS).

This is issued to the requesting party on a request basis.

<b>Office:</b>	Task Force on Corporate Center and Offices (TFCCO), Physical Resources and Infrastructure Department (PRID)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	LHIO Head, GSU Head, MSD Head and other Officers of PhilHealth.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
-Duly signed request letter/memo. -Requirements stated in Corporate Guidelines.		Requesting Office.		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit document.	1.1 Receives and registers the documents.	None	15minutes upon received of documents	Admin Staff
	1.2 Document will be forwarded to SM-PRID.	None	15minutes upon received of documents	Admin Staff
	2.1 SM-PRID forwards the document to TFCCO for appropriate action.	None	15minutes upon received of documents	SM-PRID
	3.1 Receives and registers document in office's document log.	None	15minutes upon received of documents	Admin Staff
	4.1 Assesses and take appropriate action on the request.	None	7hours	Admin. Officer
	<b>TOTAL:</b>	<b>None</b>	<b>8hours</b>	

## 5. REQUEST FOR REQUEST FOR ENGINEERING AND MAINTENANCE (FUND FOR LEASEHOLD IMPROVEMENTS PROJECT).

This is issued to the requesting party on a request basis.

<b>Office:</b>	Task Force on Corporate Center and Offices (TFCCO), Physical Resources and Infrastructure Department (PRID)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	LHIO Head, GSU Head, MSD Head and other Officers of PhilHealth.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
-Duly signed request letter/memo. -Requirements stated in Corporate Guidelines.		Requesting Office.		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit document.	1.1 Receives and registers the documents.	None	15minutes upon received of documents	Admin Staff
	1.2 Document will be forwarded to SM-PRID.	None	15minutes upon received of documents	Admin Staff
	2.1 SM-PRID forwards the document to TFCCO for appropriate action.	None	15minutes upon received of documents	SM-PRID
	3.1 Receives and registers document in office's document log.	None	15minutes upon received of documents	Admin Staff
	4.1 Assesses and take appropriate action on the request.	None	4hours	Admin. Officer
	<b>TOTAL:</b>	None	5hours	

## 6. REQUEST FOR RESOURCE EVALUATION.

This is issued to the requesting party on a request basis.

<b>Office:</b>	Physical Resources Allocation and Evaluation Section, General Services and Bldg. Maintenance, Division, Physical Resources and Infrastructure Department (PRID)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	LHIO Head, GSU Head, MSD Head and other Officers of PhilHealth.			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
-Duly signed request letter/memo.		Requesting Office.		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit request letter/memo.	1.1 Receives and registers the documents.	None	15minutes upon received of documents	Admin Staff
	1.2 Document will be forwarded to SM-PRID.	None	15minutes upon received of documents	Admin Staff
	2.1 SM-PRID forwards the document to GSBMD-PRAES for appropriate action.	None	15minutes upon received of documents	SM-PRID
	3.1 Receives and registers document in office's document log.	None	15minutes upon received of documents	Admin Staff
	4.1 Assesses and take appropriate action on the request.	None	7hours	Admin. Officer
	<b>TOTAL:</b>	None	8hours	

## 7. REQUEST FOR POLICY RESEARCH.

This is issued to the requesting party on a request basis.

<b>Office:</b>	Physical Resources Allocation and Evaluation Section, General Services and Bldg. Maintenance, Division, Physical Resources and Infrastructure Department (PRID)			
<b>Classification:</b>	Highly Technical			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	LHIO Head, GSU Head, MSD Head and other Officers of PhilHealth.			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
-Duly signed request letter/memo.		Requesting Office.		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
1. Submit Policy Proposal Form to PRAES	1.1 Stamp "received" indicate date, time and affix signature	None	1 working day	ASA C
	1.2 Log to incoming logbook			ASA C
	1.3 Encode vital information in the database			ASA C
	1.4 Endorse document to PRAES Head			ASA C
	1.5 Define Policy through meeting with Division Chief		2 working days	PRAES Head/ AO I/ Division Chief GSBMD
	1.6 Conduct of research		10 working days (2 weeks)	PRAES Head/ AO I
	1.7 Craft/ Enhance a draft CO or SOP		30 working days (4 weeks)	PRAES Head/ AO I

	1.8 Present draft CO/ SOP to Division Chief GSBMD, Senior Manager PRID & End-user 1.8.1 Discuss comments and resolve issues 1.8.2 Revise the draft 1.8.3 Forward to concerned offices for comments 1.8.4 Receive comments 1.8.5 Revise CO/SOP if necessary		1 working days  1 working day  1 working day  15 working days (er SOP in policy formulation) 1 working day	PRAES Head/ AO I
	1.9 Prepare final copies (clean copy and draft watermark copy) of CO/ SOP and annexes (if with attachments)		3 working days	PRAES Head/ AO I
	1.10 Prepare DRAR for initial of Division Chief and signature of SM PRID.		1 working day	ASA C
	1.11 Route to other signatories		beyond control/ regular follow up	ASA C
	1.12 If returned with comments, revise CO/ SOP		1 working day	ASA C
	1.13 If returned with out comments, forward to OPCEO for approval		1 working day	ASA C
	1.14 Review and Approval of PCEO		beyond control/ regular follow up	ASA C
<b>TOTAL:</b>		<b>N/A</b>	<b>67 working days + approval of authorities beyond control</b>	

## **G. Office of the President (OP)**

### **I. Office of the Corporate Legal Counsel (OSCLC)**



**1. CORPORATE LEGAL SERVICES**

Review of documents prior to approval of the President and CEO (Legal Documents)

<b>Office:</b>	Office of the Corporate Legal Counsel
<b>Classification:</b>	COMPLEX
<b>Type of Transaction:</b>	G2G
<b>Who May Avail:</b>	Office of the President and CEO

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit Legal documents to the Receiving Staff/ Personnel	1. Stamp "received" with date the receiving copy of the requesting office	None	1 day	Receiving staff/ Clerk III of OCLC
None	1.2 Refer the legal documents to the Technical Executive Assistant for review and instruction	None	1 day	Receiving staff/ Clerk III of OCLC
None	1.3 Refer the legal documents to the Head of Office for approval/ discussions/ instructions	None	1 day	Technical Assistant/ Attorney V of OCLC
None	1.4 Instruct the Admin Officer/ personnel to validate and prepare necessary reply or comments on legal documents	None	1-2 days depending on whether the record is complete or lacking documents necessary for an extensive review of the issues and concerns presented	Chief Legal Counsel of OCLC
None	1.4 Upon signing, indorse the legal documents to the Office of the President / requesting office	None	within the day	Administrative Assistant of the OCLC
<b>TOTAL:</b>		None	<b>5 days</b>	

2. CORPORATE LEGAL SERVICES				
Review of documents prior to approval of the President and CEO (MOAs/Contracts)				
<b>Office:</b>	Office of the Corporate Legal Counsel			
<b>Classification:</b>	COMPLEX			
<b>Type of Transaction:</b>	G2G			
<b>Who May Avail:</b>	Office of the President and CEO			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit MOAs/ Contract documents to the Receiving Staff/ Personnel	1. Stamp "received" with date the receiving copy of the requesting office	None	1 day	Receiving Staff/ Clerk III of the OCLC
	1.2 Refer the documents to the Technical Executive Assistant for evaluation, review, comments and instructions	None	1 day	Receiving Staff/ Clerk III of the OCLC
	1.3 Refer the MOAs/ Contract documents to the Head of Office for confirmations, instructions or approval of reviews and comments by the Technical Staff	None	1-3 days depending on whether the endorsement is complete or lacking documents necessary for an extensive review of the issues and concerns presented	Technical Assistant/ Attorney V of OCLC
	1.4 Approval of comments and reviews of MOAs/ Contracts documents	None	within the day	Chief Legal Counsel of OCLC
	1.4 Upon signing , indorse the legal documents to the Office of the President / requesting office	None	within the day	Administrative Assistant of the OCLC
<b>TOTAL:</b>		<b>None</b>	<b>5 days</b>	

# **Office of the President (OP)**

## **II. Office of the Corporate Secretary (CorSec)**

### 1. ISSUANCE OF BOARD AND COMMITTEE DIRECTIVES

This is issued to the requesting party on a per request basis, subject to the Provisions of Corporate Order No. 2020-0053, Data Privacy Act of 2012 and its IRR.

<b>Office:</b>	Office of the Corporate Secretary			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G (internal)			
<b>Who May Avail:</b>	PhilHealth Regional Offices, Local Health Insurance Offices, and Departments/ Offices in the Central Office			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Accomplished Document Reproduction Request Form stating the specific topic and purpose of requested document (1 original copy)		Office of the Corporate Secretary		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit the Accomplished Document Reproduction Request Form stating topic and purpose of requested document to the Office of the Corporate Secretary	1. Validate the appropriateness of the request	None	10 mins	Division Chief Clerk of Board Corporate Secretary
	2. Photocopy the document		10 mins	Records Custodian
	3. Release the requested document		10 mins	Records Custodian
<b>TOTAL:</b>		<b>None</b>	<b>30 mins</b>	

<b>2. ISSUANCE OF MINUTES OF MEETINGS</b>				
This is issued to the requesting party on a per request basis, subject to the provisions of Corporate Order No. 2020-0053, Data Privacy Act of 2012 and its IRR.				
<b>Office:</b>	Office of the Corporate Secretary			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G (internal)			
<b>Who May Avail:</b>	PhilHealth Regional Offices, Local Health Insurance Offices and Departments/ Offices in the Central Office			
<b>CHECKLIST OF REQUIREMENTS</b>		<b>WHERE TO SECURE</b>		
Accomplished Document Reproduction Request Form stating the specific topic and purpose of requested document ( 1 original copy)		Office of the Corporate Secretary		
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Submit the Accomplished Document Reproduction Request Form stating topic and purpose of requested document to the Office of the Corporate Secretary	1. Validate the appropriateness of the request	None	10 mins	Division Chief Clerk of Board Corporate Secretary
None	2. Photocopy the document		10 mins	Records Custodian
None	3. Release the requested document		10 mins	Records Custodian
<b>TOTAL:</b>		<b>None</b>	<b>30 mins</b>	

### 3. ISSUANCE OF PHILHEALTH BOARD RESOLUTIONS (PBRs)

This is issued to the requesting party on a per request basis, subject to the provisions of Corporate Order No. 2020-0053, Data Privacy Act of 2012 and its IRR.

<b>Office:</b>	Office of the Corporate Secretary			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G (internal)			
<b>Who May Avail:</b>	PhilHealth Regional Offices, Local Health Insurance Offices, Departments/ Offices in the Central Office			
<b>CHECKLIST OF REQUIREMENTS</b>	<b>WHERE TO SECURE</b>			
Accomplished Document Reproduction Request Form stating the specific topic and purpose of requested document (1 original copy)			Office of the Corporate Secretary	
<b>CLIENT STEPS</b>	<b>AGENCY ACTION</b>	<b>FEES TO BE PAID</b>	<b>PROCESSING TIME</b>	<b>PERSON RESPONSIBLE</b>
Submit the Accomplished Document Reproduction Request Form stating topic and purpose of requested document to the Office of the Corporate Secretary	1. Validate the appropriateness of the request	None	10 mins	Division Chief Clerk of Board Corporate Secretary
None	2. Photocopy the document		10 mins	Records Custodian
None	3. Release the requested document		10 mins	Records Custodian
<b>TOTAL:</b>		<b>None</b>	<b>30 mins per PBR</b>	

#### 4. ISSUANCE OF SECRETARY'S CERTIFICATE

This is issued to the requesting party on a per request basis, subject to the provisions of Corporate Order No. 2020-0053, Data Privacy Act of 2012 and its IRR

<b>Office:</b>	Office of the Corporate Secretary			
<b>Classification:</b>	Simple			
<b>Type of Transaction:</b>	G2G (internal)			
<b>Who May Avail:</b>	PhilHealth Regional Offices, Local Health Insurance Offices, and Departments/ Offices in the Central Office			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Accomplished Document Reproduction Request Form stating the specific topic and purpose of requested document (1 original copy)		Office of the Corporate Secretary		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Submit the Accomplished Document Reproduction Request Form stating topic and purpose of requested document to the Office of the Corporate Secretary	1. Validate the appropriateness of the request	None	15 mins	Division Chief Clerk of Board Corporate Secretary
None	2. Retrieve the original PBR for reference.		10 mins	Records Custodian
None	3. Prepare the Secretary's certificate		15 mins	Records Custodian
None	4. Sign the Secretary's Certificate		10 mins	Corporate Secretary
None	5. Release the notarized Certificate with the OCS retaining one (1) original copy		10 mins	Records Custodian
<b>TOTAL:</b>		<b>None</b>	<b>1 hour</b>	

# **Office of the President (OP)**

## **III. Organization and Systems Development Office (OSDO)**



## 1. PROCEDURAL DOCUMENT REVIEW

Review of procedural documentations of office processes, law, regulations and corporate policy implementation such as Standard Operating Procedures (SOP) and Work Instructions (WINs) in conformity to the implementation of the Corporation's Quality Management System (QMS) certified under ISO 9001:2015 Standards.

Office:	Organization and Systems Development Office		
Classification:	Highly Technical		
Type of Transaction:	G2G		
Who May Avail:	All PhilHealth Program Offices (Proponent)		
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE	
Original Signed Request for Review of Procedural Document (memorandum) endorsed by the Head of Organizational Unit (1 Copy)		To be provided by the Proponent Office	
Document Routing Slip (Original Copy)		To be provided by the Proponent Office	
Document Review and Approval Request Form (DRAR) signed by head of the proponent office (Original Copy)		To be provided by the Proponent Office	
Risk Assessment Certification issued by the PMT-Risk (Original Copy)		To be provided by PMT-Risk Office	
Legal Opinion issued by the Internal Legal Department (Optional) (Original Copy)		To be provided by Internal Legal Department	
Draft of the Procedural Document (SOP or WINs) with corresponding watermark (Original or Photocopy)		To be provided by the Proponent Office	
Editable electronic copy of the draft of the Procedural Document (SOP or WINs) to be sent to the official Microsoft Outlook email address of OSDO		To be provided by the Proponent Office	

Annexes (required forms or documentary information that will be used in the implementation)		To be provided by the Proponent Office		
References (law, regulation, corporate policy and documentations where the Procedural Document is based)		To be provide by the Proponent Office		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Submit required documents for initial assessment and verification	1.1. Receipt of documents and electronic copy of the draft procedure documents that are to be subjected for review.	None	30 minutes	Clerk III/Administration Services Assistant C (ASA C) -OSDO Business Process Improvement Team
	1.2. Record of document details in the Document Tracking System			
	1.3. Endorse documents to Supervising Management Specialist.			
None	2.1. Receipt of endorsed documents	None	1 working day	Supervising Management Specialist - OSDO Business Process Improvement Team
	2.2. Evaluation of endorsed documents			
	2.3. Assignment to Management Specialist II for review			

	<p>3.1. Review of the procedure documents vis-à-vis the conformity to the established Quality Management System requirements of the Corporation and compliance to existing laws, rules, corporate policy, etc. which may include provision of comments and suggestions on the subject matter.</p> <p>3.2. Submission of review and comments provided to the Supervising Management Specialist with indication of the date of completion in the Document Routing Slip.</p>	None	17 working days	Management Specialist II - OSDO Business Process Improvement Team
	<p>4.1. Receipt of the reviewed procedural document.</p> <p>4.2. Review of the output of the Management Specialist II.</p> <p>4.2.1 Endorses to the Clerk III/Administration Services Assistant C (ASA C) the reviewed and concurred output of the reviewing Management Specialist II.</p> <p>4.2.2 Returns to the reviewing Management Specialist II for incorporation of corrections, additional comments and suggestions, if there are any.</p>	None	1 working day	Supervising Management Specialist - OSDO Business Process Improvement Team
None	5.1 Receipt of reviewed procedural documents with recommendation for approval from the Supervising Management Specialist	None	1 minute	Clerk/ Administration Services Assistant C (ASA C) - OSDO Business Process Improvement Team

	5.2 Endorsement of reviewed procedural documents to the Department Manager for approval	None	1 minute	
	6.1 Review and approval of the reviewed procedure document	None	2 days	Department Manager OSDO
None	6.2 Release of approved reviewed procedure documents to Clerk / Administration Services Assistant (ASA C)	None	1 minute	Department Manager OSDO
	7.1. Receipt of reviewed procedure document and attachments	None	30 minutes	Clerk/ Administration Services Assistant C (ASA C)
	7.2. Record of document details in the Document Tracking System.			
2. Receipt of approved reviewed procedure documents	7.3. Release of documents to the proponent office.			
<b>TOTAL:</b>		<b>None</b>	<b>20 days</b>	

## 2. STAFFING ASSESSMENT

Determining the changes in the number of positions needed in the targeted positions/jobs in the future. The staffing assessment requires carefully thinking about the numbers of staff needed to fulfill the current and future workforce needs. In projecting the staffing needs for the future - the assessment should be based on realistic projections.

<b>Office:</b>	Organization and Systems Development Office
<b>Classification:</b>	Highly Technical
<b>Type of Transaction:</b>	G2G
<b>Who May Avail:</b>	Heads of Organizational Units (Departments/Offices/Sectors)

CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
<p>1 original or photocopy of the following: Request for Staffing Assessment (memorandum) endorsed by the Head of Organizational Unit that provides the following information:</p> <p>1) Considerations in future staffing needs: a) Policy change/new initiative - new program initiatives or "reforms" may have significant staffing implications; b) Mandated Regulatory Changes - work requirements that change as a result of laws, rules and regulations; c) Planned growth/expansion - The demand for services can changes as a result of population shifts, unemployment rates, or any other social issued that the demand for human services; and d) Other factors affecting staffing - Any number of other factors may change staffing requirements. Technological innovations may reduce the number of employees needed to do the same amount of work. Staffing ratios may change as a result of available resources and shifting priorities. It is important to identify the effectivity date of the aforementioned considerations as well as whether these considerations are firm (final/approved) or projected (awaiting approval/in the pipeline).</p> <p>2) Likely impact of workload (e.g. increase/decrease in tasks, volume/quantity, response time).</p> <p>3) Anticipated changes in staffing (increase/decrease in full-time equivalents (FTEs)) and projected effectivity date.</p> <p>4) Competency requirements for the positions/jobs.</p>	N/A

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
Forwards Request for Staffing Assessment, complete with the supporting documents.	1. Receives Request for Staffing Assessment, including the supporting documents.	None	10 mins	Administrative staff, OSDO
None	2. Evaluates request, and prepares action and release documents.	None	10 working days	Technical staff, OD Team
None	3. Reviews action and release documents, and endorses to Senior Manager for approval of the recommendation.	None	5 working days	OD Team Lead
None	4. Reviews action and release documents, and approves/disapproves the recommendation.	None	5 working days	Senior Manager, OSDO
None	5. Forwards action and release documents to the concerned/requesting organizational unit.	None	Within the day the action and release document were signed by the Senior Manager	Administrative staff, OSDO
<b>TOTAL:</b>			<b>20 working days</b>	

# **Office of the President**

Secretariat for the Bids and Awards Committees

## 1. PROCUREMENT, PLANNING, POLICY AND MONITORING

Preparation of PPMP and APP Appraisal, Review and Consolidation

<b>Office:</b>	Secretariat for the Bids and Awards Committees
<b>Classification:</b>	Highly Technical
<b>Type of Transaction:</b>	G2G- Government to Government
<b>Who May Avail:</b>	End users , Budget Officer Designate

CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
None		None		
CLIENT STEPS (Internal/External)	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1. Year End Plan for Activities/Programs/Projects (original copy)	Conducts Year End Planning and Assessment and prepares Plan for Activities/Projects including supplies and equipment (i.e Canvass for price indicators and prepares needed justification if any)	None	1 to 3 Days	End-User/Cost Centers (Planning/Budget Officer Designate)
2. Consolidates proposals for TWG-PBC review (original submitted hard copy)	Consolidates proposals for TWG-PBC review	None	2 Days	BAS Comptrollership Dept.
3. Deliberates on proposals (original copy)	Deliberates on proposals and recommends approval of EXECOM	None	1 Day	Planning and Budget Committee
4. For Approval (original copy)	Deliberates on proposals and for approval	None	1 Day	EXECOM
5. Encode approved COB proposals in the PPMP Module (FMIS-PBS application)	End-users encode EXECOM approved proposals in the FMIS-PBS PPMP Module	None	2 Days	Budget Officer Designate of cost centers
6. Request for access to FMIS-PBS PPMP and APP module (original copy of request)	SBAC shall request access to FMIS-PBS PPMP and APP Module from Comptrollership Dept.	None	1 Day	SBAC Staff: Senior Social Insurance Specialist Administration Services



				Officer II Administration Services Assistant B Clerk III
7. Provides access to FMIS-PBS PPMP and APP modules (confirmation through outlook email)	Upon receipt of request, shall provide access to FMIS-PBS PPMP and APP modules to SBAC	None	1 Day	BAS Comptrollership Dept.
8. Validate and verify PPMP Module and prepare list of object of expenditures for hard coding and save data prior to hard encoding (FMIS-PBS application)	Log-in to FMIS-PBS account to validate and verify issues on PPMP modules and prepare list of object of expenditures for hard coding	None	1 Day	SBAC Staff: Senior Social Insurance Specialist Administration Services Officer II Administration Services Assistant B Clerk III
9. Facilitate hard coding of identified Object of expenditures (FMIS-PBS application)	Facilitate hard coding of identified Object of expenditures vis-vis appropriate mode of procurement.	None	1 Day	BAS of Comptrollership Dept.
10. Facilitate and validate consolidation of the PPMP and APP (FMIS-PBS application)	Immediately facilitate consolidation of the PPMP into APP and validation.			SBAC Staff: Senior Social Insurance Specialist Administration Services Officer II
Save APP module according to BAC classification. (FMIS-PBS application)	Save icon and select location place the saved APP module per BAC	None	2 days	Administration Services Assistant B Clerk III

<p>11. Draft pertinent documents, e.g. endorsement to BAC resolution and corporate orders (original copy)</p> <p>Facilitate review of BAC Resolution and Corporate Order (original copy)</p> <p>Present APP, BAC Resolution and Corporate Order to the four (4) BAC for conformation and facilitate signing of APP and its supporting documents (original copy)</p>	<p>Draft pertinent documents e.g, Endorsement Letter to GPPB and Resolutions to classification and Corporate Orders on Resolutions to BAC GS/ITR/Consulting/INFRA and facilitate initial review of the BAC Resolution</p> <p>Print the APP as well as the final draft BAC Resolution and Corporate Order and present to the BAC for final review and confirmation of mode of procurement</p>	None	1 Day	<p>SBAC Staff:</p> <p>Senior Social Insurance Specialist Administration Services Officer II</p> <p>Administration Services Assistant B Clerk III</p>
<p>12. Facilitate issuance of Corporate Order control no., scanning and conversion, etc. (original copy)</p> <p>Prepare soft copies on 8 DVD media and endorsed to recipient (scanned/soft copy)</p>	<p>Once APP is signed by the HOPE, facilitate the following; submission to Records for issuance of corresponding Corporate Order, scanning of CO, conversion into portable document format (PDF) and request for messengerial / courier</p> <p>Distribution to the following offices;</p> <p>GPPB-TSO</p> <p>Comptrollership Dept.</p> <p>Records</p> <p>ITMD</p> <p>PRID</p> <p>SBAC</p> <p>COA</p>	None	1 Day	<p>SBAC Staff: Senior Social Insurance Specialist Administration Services Officer II Administration Services Assistant B Clerk III</p>

Issue Advisory to all End-Users	Issue advisory to all concerned end-users for the submission of their respective purchase request along with corresponding supporting documents			
<b>TOTAL:</b>		<b>None</b>	<b>18 days</b>	

### EXTERNAL : CORORATE ACTION CENTER (CAC) FEEDBACK AND COMPLAINTS MECHANISM

How to send feedback?	<p>All external clients, including government channels (i.e. 8888, CSC-CCB, e-FOI, PCC, ARTA, etc.) and media can send feedback (complaints, suggestions and commendations) to PhilHealth through any of the following communication channels of the Corporate Action Center and regional counterparts:</p> <p><u>Email:</u></p> <ul style="list-style-type: none"> <li>- <a href="mailto:actioncenter@philhealth.gov.ph">actioncenter@philhealth.gov.ph</a> or</li> <li>- email address of PhilHealth Regional Offices (PROs), Branches, and Local Health Insurance offices (LHIOs) posted in Philhealth website (<a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a>)</li> </ul> <p><u>Call:</u></p> <ul style="list-style-type: none"> <li>- hotline 8441-7442</li> <li>- phone number of PROs, Branches and LHIOs posted in Philhealth website (<a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a>)</li> </ul> <p><u>Social Media:</u></p> <ul style="list-style-type: none"> <li>- "@PhilHealthofficial" Facebook page</li> </ul> <p><u>Walk-In:</u></p> <ul style="list-style-type: none"> <li>- CAC Walk-In Counter, PhilHealth Head Office, Room 707 CityState Centre, 709 Shaw Boulevard,Brgy. Oranbo, Pasig City</li> <li>- PhilHealth Regional and Local Offices with addresses posted at Philhealth website (<a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a>)</li> </ul>
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How feedbacks are processed?	<p><b>1. Receiving and Initial Validation</b></p> <p>The Responsible CAC Team managing the channel or assigned Action Officer Designates (AODs) in PROs and LHIOs:</p> <ol style="list-style-type: none"> <li>Receives client feedback</li> <li>Requests consent on use of personal information, then verifies concern with the client, evaluates client feedback and profile/records, previous transactions of client through Customer Service Management System (CSMS)</li> <li>Requests for additional BASIC information/documents required for processing.</li> </ol> <p><i>Note:</i></p> <p><i>Required documents may include:</i></p> <ul style="list-style-type: none"> <li>- "Salaysay", attached pay slips and other proof, if client feedback is a complaint against non-remitting employer</li> <li>- Usual basic information and documents required in PhilHealth processes, in accordance with existing corporate policies and rules and Citizen's charter</li> </ul> <ol style="list-style-type: none"> <li>Identifies responsible office to handle transaction (based on function, jurisdiction and lodged authority)</li> <li>Determines complexity of processing and corresponding TAT in accordance with EODB Law.           <ul style="list-style-type: none"> <li>- Simple (3 working days from receipt of PhilHealth) - if processing and final response is ministerial not requiring review and approval process.</li> <li>- Complex (7 working days from date of receipt by PhilHealth) - if endorsement of transaction (if applicable), processing and final response require regular review and approval process</li> <li>- Technical (20 working days from date of receipt by PhilHealth) - if endorsement of transaction (if applicable), processing and final response require technical/management review and approval process</li> </ul> </li> </ol>
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	<p><b>2. Acknowledgment and Initial Response</b>          The handling office (CAC or endorsee office):</p> <ul style="list-style-type: none"> <li>a. Endorse the transaction to an appropriate office through CSMS (If Level 2)</li> <li>b. Issues or communicates acknowledgment and initial response to client/government channel if the final response is not readily available.</li> </ul> <p>Note: Initial response includes (1) "concrete and specific action within 72 hours" in accordance with Executive Order No. 6, 2016; (2) transaction reference number, (3) contact information of office for follow-up i.e. hotline 02-8441-7442 and actioncenter@philhealth.gov.ph. or local hotline or email of PRO or LHIO)</p>
	<p><b>3. Provision of Relevant Services</b>          The handling office:</p> <ul style="list-style-type: none"> <li>a. Requests client for additional TECHNICAL information/documents required for processing, if any (For technical transactions).</li> </ul> <p>Note: If requiring the release of Personally Identifiable Information, require at least 3 correct information validated against client's database records for information security purposes.</p> <ul style="list-style-type: none"> <li>b. Provides services as may be related to the client's concern, in accordance with existing corporate policies and procedures.</li> <li>c. Provides redress to the client for non-conforming services (i.e. correction of errors, giving of apology to the client, correction of other affected processes or services)</li> </ul>
	<p><b>4. Respond to the Client (including Government Channel)</b>          The handling office:</p> <ul style="list-style-type: none"> <li>a. Prepares, reviews, and approves (or pre-approve) final response to client</li> <li>b. Releases approved/pre-approved response to client and government channel, if applicable, within the prescribed TAT.</li> <li>c. In case the needed processes cannot be completed within the prescribed TAT, the CAC (for govt lodged tickets) or handling office (for clients) informs the client before the deadline about the needed TAT extension which shall not exceed an additional 3, 7 and 20 working days for simple, complex and technical transactions respectively.</li> <li>d. If government-lodged, the CAC provides updates to government channels and facilitates closure.</li> </ul>

How to file a complaint?	<p>All external clients, including government channels (i.e. 8888, CSC-CCB, PCC, ARTA, etc.) and media can send complaints to PhilHealth through any of the following communication channels of the Corporate Action Center and regional counterparts:</p> <p><b><u>Email:</u></b></p> <ul style="list-style-type: none"> <li>- actioncenter@philhealth.gov.ph or</li> <li>- email address of PhilHealth Regional Offices (PROs), Branches, and Local Health Insurance offices (LHIOs) posted in Philhealth website (<a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a>)</li> </ul> <p><b><u>Call:</u></b></p> <ul style="list-style-type: none"> <li>- hotline 8441-7442</li> <li>- phone number of PROs, Branches and LHIOs posted in Philhealth website (<a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a>)</li> </ul> <p><b><u>Social Media:</u></b></p> <ul style="list-style-type: none"> <li>- "@PhilHealthofficial" Facebook page</li> </ul> <p><b><u>Walk-In:</u></b></p> <ul style="list-style-type: none"> <li>- CAC Walk-In Counter, PhilHealth Head Office, Room 707 CityState Centre, 709 Shaw Boulevard, Brgy. Oranbo, Pasig City</li> <li>- PhilHealth Regional and Local Offices with addresses posted at Philhealth website (<a href="http://www.philhealth.gov.ph">www.philhealth.gov.ph</a>)</li> </ul>
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How complaints are processed?	<p><b>1. Receiving and Initial Validation</b></p> <p>The Responsible CAC Team managing the channel or assigned Action Officer Designates (AODs) in PROs and LHIOs:</p> <ol style="list-style-type: none"> <li>Receives client feedback</li> <li>Requests consent on use of personal information, then verifies concern with the client, evaluates client feedback and profile/records, previous transactions of client through Customer Service Management System (CSMS)</li> <li>Requests for additional BASIC information/documents required for processing.</li> </ol> <p><i>Note:</i></p> <p><i>Required documents may include:</i></p> <ul style="list-style-type: none"> <li>- "Salaysay", attached payslips and other proof, if client feedback is a complaint against non-remitting employer</li> <li>- Usual basic information and documents required in PhilHealth processes, in accordance with existing corporate policies and rules and Citizen's charter</li> </ul> <ol style="list-style-type: none"> <li>Identifies responsible office to handle transaction (based on function, jurisdiction and lodged authority)</li> <li>Determines complexity of processing and corresponding TAT in accordance with EODB Law.           <ul style="list-style-type: none"> <li>- Simple (3 working days from receipt of PhilHealth) - if processing and final response is ministerial not requiring review and approval process.</li> <li>- Complex (7 working days from date of receipt by PhilHealth) - if endorsement of transaction (if applicable), processing and final response require regular review and approval process</li> <li>- Technical (20 working days from date of receipt by PhilHealth) - if endorsement of transaction (if applicable), processing and final response require technical/management review and approval process</li> </ul> </li> </ol>
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	<p><b>2. Acknowledgment and Initial Response</b>          The handling office (CAC or endorsee office):</p> <ul style="list-style-type: none"> <li>a. Endorse the transaction to an appropriate office through CSMS (If Level 2)</li> <li>b. Issues or communicates acknowledgment and initial response to client/government channel if the final response is not readily available.</li> </ul> <p>Note: Initial response includes (1) "concrete and specific action within 72 hours" in accordance with Executive Order No. 6, 2016; (2) transaction reference number, (3) contact information of office for follow-up i.e. hotline 02-8441-7442 and actioncenter@philhealth.gov.ph. or local hotline or email of PRO or LHIO)</p>
	<p><b>3. Provision of Relevant Services</b>          The handling office:</p> <ul style="list-style-type: none"> <li>a. Requests client for additional TECHNICAL information/documents required for processing, if any (For technical transactions).</li> </ul> <p>Note: If requiring the release of Personally Identifiable Information, require at least 3 correct information validated against client's database records for information security purposes.</p> <ul style="list-style-type: none"> <li>b. Provides services as may be related to the client's concern, in accordance with existing corporate policies and procedures.</li> <li>c. Provides redress to the client for non-conforming services (i.e. correction of errors, giving of apology to the client, correction of other affected processes or services)</li> </ul>
	<p><b>4. Respond to the Client (including Government Channel)</b>          The handling office:</p> <ul style="list-style-type: none"> <li>a. Prepares, reviews, and approves (or pre-approve) final response to client</li> <li>b. Releases approved/pre-approved response to client and government channel, if applicable, within the prescribed TAT.</li> <li>c. In case the needed processes cannot be completed within the prescribed TAT, the CAC (for govt lodged tickets) or handling office (for clients) informs the client before the deadline about the needed TAT extension which shall not exceed an additional 3, 7 and 20 working days for simple, complex and technical transactions respectively.</li> <li>d. If government-lodged, the CAC provides updates to government channels and facilitates closure.</li> </ul>

<p>Contact Information of ARTA, PCC, and CCB</p>	<p><b>ANTI-RED TAPE AUTHORITY (ARTA):</b>  <a href="mailto:info@arta.gov.ph">info@arta.gov.ph</a>  <a href="mailto:complaints@arta.gov.ph">complaints@arta.gov.ph</a>  <a href="http://arta.gov.ph">Stop Red Tape - Anti-Red Tape Authority (arta.gov.ph)</a>            Call:            (02) 8478-5091            (02) 8478-5093            (02) 8478-5099</p> <p><b>PRESIDENTIAL COMPLAINT CENTER (PCC):</b>  <a href="mailto:pcc@malacanang.gov.ph">pcc@malacanang.gov.ph</a>            Call:            +63(2)-8736-8645            +63(2)-8736-8603            +63(2)-8736-8629            +63(2)-8736-8621</p> <p>Telefax:            +63(2)-87368621</p> <p>Postal Service: Bahay Ugnayan, J.P. Laurel Street Malacañang, Manila</p> <p><b>CONTACT CENTER NG BAYAN (CCB):</b>  <a href="mailto:email@contactcenterngbayan.gov.ph">email@contactcenterngbayan.gov.ph</a>  <a href="http://www.contactcenterngbayan.gov.ph">www.contactcenterngbayan.gov.ph</a></p> <p>SMS: 0908-8816565            Call: 1-6565 (Php5.00+VAT per call anywhere in the Philippines via PLDT landline)</p>
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<b>INTERNAL: HUMAN RESOURCE DEPARTMENT FEEDBACK AND COMPLAINTS MECHANISM</b>	
How to send feedback?	Feedback and complaints are sent directly to email addresses of the HRD Units concerned. There is an intranet website for the Human Resource Department where the email addresses of HRD Units/Teams are published and accessible to employees.
How feedbacks are processed?	Feedback that can be resolved within the jurisdiction of the employee concerned are acted upon immediately by the HR Staff concerned. Those that needs to be elevated to the supervisor will be acted upon by the supervisor. Some items shall be elevated to the Section Chief, Division Chief, HRD Head, MSS Head and ExCom Level, depending on the nature of the feedback/complaint.
How to file a complaint?	Complaints can either be reported to the HRD/HRU through a face-to-face Transaction. It can also be documented through an incident report to be submitted to the HRD. It can also be forwarded to the HRD through email. HRD also accepts anonymous complaints.
How complaints are processed?	Complaints are processed by the HRD Head by referring the concern to responsible HR Unit for validation of the concern and root-cause analysis if found valid, then a recommended course of action, subject to the approval of the HRD Head. The approved action shall then be acted upon until the complaint is resolved.
Contact Information of (office)	Human Resource Department Landline 8706-6735

## LIST OF OFFICES

OFFICES	ADDRESS	CONTACT INFORMATION
Regional Office PRO I – Dagupan	Akia Building, Old De Venecia Highway Dagupan City, Pangasinan	(075) 515-1111; (075) 5230647 (fax) <a href="mailto:region1@philhealth.gov.ph">region1@philhealth.gov.ph</a>
Local Health Insurance Offices		
LHIO Ilocos Norte	Ground Floor, Valdez Building A, Valdez Center, Barangay 1, San Francisco, San Nicolas, Ilocos Norte	(077) 600-0482; (077) 770-4945 (fax) <a href="mailto:laoag.pro1@philhealth.gov.ph">laoag.pro1@philhealth.gov.ph</a>
LHIO Ilocos Sur	2/F Henady Bldg., del Pilar St., cor. Salcedo St., Vigan City, Ilocos Sur	(077) 604-0008 <a href="mailto:vigan.pro1@philhealth.gov.ph">vigan.pro1@philhealth.gov.ph</a>
LHIO La Union	G/F CSI The City Mall Inc., Brgy. Biday, San Fernando City, La Union	(072) 607-7162 <a href="mailto:launion.pro1@philhealth.gov.ph">launion.pro1@philhealth.gov.ph</a>
LHIO Western Pangasinan	G/F Marmor Realty, Quezon Avenue, Poblacion, Alaminos City, Pangasinan	(075) 523-1860; (075) 551-6520 <a href="mailto:alaminos.pro1@philhealth.gov.ph">alaminos.pro1@philhealth.gov.ph</a>
LHIO Eastern Pangasinan	CBE Estrada Prime Holdings Inc., 3rd Floor CB Mall, Mc Arthur Highway, Nancayasan,	(075) 600-5829; (075) 656-2030 (fax) <a href="mailto:urdaneta.pro1@philhealth.gov.ph">urdaneta.pro1@philhealth.gov.ph</a>

LHIO Central, Pangasinan	Urdaneta City, Pangasinan 2nd BHF Family Plaza, Mayombo District, Dagupan City	(075) 522-3122 <a href="mailto:pmac.pro1@philhealth.gov.ph">pmac.pro1@philhealth.gov.ph</a>
Satellite Office		
Candon City	Stern Real State Bldg., San Nicolas, Candon City, Ilocos Sur (beside CSI Mall)	(077) 632-1188 <a href="mailto:candon.pro1@philhealth.gov.ph">candon.pro1@philhealth.gov.ph</a>
San Carlos City	2nd Floor Magic Mall, Roxas Blvd., San Carlos City, Pangasinan	(075) 634-6538; 532-1111 <a href="mailto:sancarlos.pro1@philhealth.gov.ph">sancarlos.pro1@philhealth.gov.ph</a>
Mangatarem	2/F Magic Mall, Romulo High Way, Mangatarem, Pangasinan	(075) 523-0845 <a href="mailto:mangatarem.pro1@philhealth.gov.ph">mangatarem.pro1@philhealth.gov.ph</a>
Agoo	GSV Building, National Hi-way, San Agustin Norte, Agoo, La Union	(072) 682-0297 <a href="mailto:agoo.pro1@philhealth.gov.ph">agoo.pro1@philhealth.gov.ph</a>
PhilHealth Express		
Calasiao, Pangasinan	2/F Lingkod Pinoy Center, Robinsons Place (075) 632-0107 <a href="mailto:pxcalasiao.pro1@philhealth.gov.ph">pxcalasiao.pro1@philhealth.gov.ph</a>	(075) 632-0107 <a href="mailto:pxcalasiao.pro1@philhealth.gov.ph">pxcalasiao.pro1@philhealth.gov.ph</a>
San Nicolas, Ilocos Norte	Level 1 Robinson's Place, San Nicolas, Ilocos Norte (West side)	(077) 772-2848 <a href="mailto:pxsannicolas.pro1@philhealth.gov.ph">pxsannicolas.pro1@philhealth.gov.ph</a>

OFFICES	ADDRESS	CONTACT INFORMATION
<b>Regional Office</b> PRO II - Tuguegarao	The Builder's Place, Del Rosario St. Tuguegarao City, Cagayan 3500	(078) 255-1342; (0917) 8357544 <a href="mailto:info.pro2@philhealth.gov.ph">info.pro2@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
Tuguegarao City	Juliana Square Building, Rizal St., Centro 04, Tuguegarao City, Cagayan	(078) 844-0271; (0917) 7028135 <a href="mailto:tuguegarao.pro2@philhealth.gov.ph">tuguegarao.pro2@philhealth.gov.ph</a>
Ilagan, Isabela	Abarca Building, V. Cureg St. Calamagui 2nd, Ilagan, Isabela	(078) 624-0259; (0995) 6590670 <a href="mailto:ilagan.pro2@philhealth.gov.ph">ilagan.pro2@philhealth.gov.ph</a>
Cauayan, Isabela	2nd Floor, LetJoelou Bldg., Canciller Ave. District 1 Cauayan City, Isabela	(078) 652-4166 ; (0917) 8659865 <a href="mailto:cauayan.pro2@philhealth.gov.ph">cauayan.pro2@philhealth.gov.ph</a>
Santiago City, Isabela	Ground Floor, MECC Bldg., National Highway, Villasis Santiago City, Isabela	(078) 3050181; (0945) 3201872 <a href="mailto:santiago.pro2@philhealth.gov.ph">santiago.pro2@philhealth.gov.ph</a>
Solano, Nueva Vizcaya	One Asia Place, National Highway, Barangay Quezon, Solano, Nueva Vizcaya	(0935) 3337886 <a href="mailto:solano.pro2@philhealth.gov.ph">solano.pro2@philhealth.gov.ph</a> <a href="mailto:solanohead.pro2@philhealth.gov.ph">solanohead.pro2@philhealth.gov.ph</a>
Aparri Business Center	Corner Bonifacio and Enrile Sts, Barangay Macanaya, Aparri, Cagayan	(0915) 2647573
Batanes Business Center	Block 2, Lot 17, Cantor Street Barangay Kayvaluganan	(0919) 9951024

	Basco, Batanes	
Roxas Service Desk	Roxas Municipal Hall, 2nd Floor, Roxas, Isabela	
Cabagan Service Desk	Cabagan Municipal Hall, Cabagan, Isabela	
<b>PhilHealth Express</b>		
PhilHealth Express – Tuguegarao	Cagayan Valley Medical Center 8:00am - 2:00pm – Daily	
PhilHealth Express – Santiago	Robinson's Place, Santiago City 10:00am - 6:00pm - Tuesday to Friday	
PhilHealth Express - Nueva Vizcaya	Bambang Rural Health Unit 8:00am - 5:00pm - Daily	

Offices	Address	Contact Information
<b>Regional Office</b> PRO CAR - Baguio	SNOBT Inc. Bulding, No. 19 Leonard Wood Road Baguio City 2600	(074) 444-5345; 444-8361; 444-9862 <a href="mailto:car@philhealth.gov.ph">car@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
Bangued, Abra	Ground Flr., VP Skyview Building, Magallanes St., Zone 5, Bangued, Abra 2800	(074) 752-7924; (0999) 777-6100
Baguio City	SNOBT Inc. Building, No. 19 Leonard Wood Road, Baguio City 2600	(0929) 370-5617
La Trinidad, Benguet	Dangwa Tranco Compound, Km. 2 Betag, La Trinidad, Benguet, 2601	(074) 424-8937
Lagawe, Ifugao	2nd Flr., JDT Bldg., Lagawe, Ifugao 3600 (074) 382-2173; (0917) 574-7485	(074) 382-2173; (0917) 574-7485
Tabuk, Kalinga	1st Flr. Richmond Bldg., Purok 4, Bulanao, Tabuk City, 3800	(0915) 779-6615
Bontoc, Mt. Province	1st Flr., Kedawen Bldg., Poblacion, Bontoc, Mt. Province 2616	(074) 602-1510; (0921) 471-9848
Apayao Business Center	Poblacion, Luna, Apayao	(0915) 975-3365



Offices	Address	Contact Information
<b>Regional Office</b> PRO III-A - San Fernando	G/F PhilHealth Bldg., Lazatin Blvd., San Agustin, San Fernando City, Pampanga C-2000	(045) 961-1977; (045) 961-3949 loc. 4330
PRO III Branch A	2/F PhilHealth Bldg., Lazatin Blvd., San Agustin, San Fernando City, Pampanga C-2000	(045) 961-0710 loc. 4321
<b>Local Health Insurance Offices</b>		
San Fernando	G/F PhilHealth Bldg., Lazatin Blvd., San Agustin, San Fernando City, Pampanga C-2000	(045) 963-1155 loc. 4310
Angeles City	Ground Floor, ABC Bldg., Nepo Commercial Complex, Doña Teresa Ave., Angeles City C-2009	(045) 322-7162 loc. 4350
Olongapo City	1120 Rizal Ave., East Tapinac, Olongapo City C-2200	(047) 222-9427 loc.4354
Iba, Zambales	ACM Bldg., Zone 6, Iba, Zambales C-2201	(047) 811-3690 loc. 4355
Tarlac City	3F My Metro Town Mall, Sto. Cristo, Tarlac City C-2300	(045) 491 4696
Balanga, Bataan	2/F Zabala Bldg. II, Primrose St., Doña Francisca Subd., Balanga City C-2100	(047) 237-1921

<b>PhilHealth Express</b>  Robinsons Starmills  Mariveles, Bataan  Robinsons Tarlac  Marquee Mall, Angeles City	2F Robinsons Starmills, Brgy. San Jose, City of San Fernando, Pampanga  AFAB Bldg., Freeport Area of Bataan (FAB), Mariveles, Bataan  2nd Floor Robinsons Supermarket, McArthur Highway, Brgy. San Miguel, Hacienda Luisita, Tarlac City, Tarlac  Dinalupihan Municipal Hall, Bataan	
<b>Service Desk</b>  LGU Sta. Cruz, Zambales LGU Subic, Zambales LGU San Antonio, Zambales Harbor Point Mall, Subic Bay Freeport Zone		
<b>Satellite Office</b>  SM Pampanga	3rd Floor, SM Government Center-SM City, City of San Fernando, Pampanga	
<b>Business Center</b>  One Stop Shop for OFWs  Jose Abad Santos Ave., Clark Freeport Zone, Angeles City, Pampanga	(Clark Freeport Zone, Pampanga)  Jose Abad Santos Ave., Clark Freeport Zone, Angeles City, Pampanga	

Offices	Address	Contact Information
<b>Regional Office</b> PRO III-B - Malolos	The Cabanas Mall of Malolos 2nd and 3rd floors N4 Bldg. Km. 44/45 MacArthur Highway Longos, Malolos City, Bulacan	(044) 796-1559; (044) 796-1560 loc. 4400
<b>Local Health Insurance Offices</b>		
Malolos, Bulacan	The Cabanas Mall of Malolos 2nd and 3rd floors N4 Bldg. Km. 44/45 MacArthur Highway Longos, Malolos City C-3000	(044) 796-1559; (044) 796-1560 loc. 4400; (044) 796-3481
Sta. Maria, Bulacan	A&E Bldg. 3, Gov. F. Halili Ave., Brgy. Bagbaguin, Sta. Maria, Bulacan C-3022	(044) 288-2617 loc. 4457
Cabanatuan, Nueva Ecija	3/F NE Pacific Mall, Maharlika Highway, Cabanatuan City, Nueva Ecija, C-3100	(044) 940-3723 loc. 4458
Gapan, Nueva Ecija	Tioseco-Sta Ines (TSI) Bldg., Brgy. Sto Niño, Gapan City, Nueva Ecija	(044) 486-9570 loc. 4459
Baler, Aurora	NE Baler, 2nd Floor, Brgy Suklayin, Baler Aurora C-3200	(0920) 538-9471
<b>PhilHealth Express</b>		
Robinsons Malolos	4th Floor, Lingkod Pinoy Desk, Robinsons Place Malolos, McArthur Highway, Sumapang Matanda, City of Malolos, Bulacan	

Guimba, Nueva Ecija	Ground Floor, JCB Bldg., Brgy. Cawayang Bugtong, Guimba, Nueva Ecija	(044) 797-0354
NE Bodega Mall, Brgy. Abar 1st, San Jose City, Nueva Ecija	NE Bodega Mall, Brgy. Abar 1st, San Jose City, Nueva Ecija	
Annex Bldg., Municipal Comp., Baliuag, Bulacan	Annex Bldg., Municipal Comp., Baliuag, Bulacan	
3F Starmall, Kaypian Road, Brgy. Kaypian, San Jose Del Monte Bulacan	3F Starmall, Kaypian Road, Brgy. Kaypian, San Jose Del Monte Bulacan	

Offices	Address	Contact Information
<b>Regional Office</b> PRO NCR	VCP Building, Block 56, Lot 11, 68 Kalayaan Avenue Teacher's Village West, Quezon City	(02) 8441-5673
<b>Branch Office</b>  PRO NCR North - Manila	  Ten Commandments Building, 689 Rizal Avenue Extension, Gracepark, Caloocan City	
<b>Local Health Insurance Office</b>  Manila  Caloocan  Valenzuela  Mandaluyong	JARS Buidling, 1810 J.P. Laurel St., San Miguel, Manila  5th Floor, Victory Central Mall, Rizal Avenue Extension, Gracepark, Caloocan City  4/F Puregold, Paso de Blas Road Cor. East Service Road North, Valenzuela City  3rd Floor, 500 Shaw Zentrum Mall, Shaw Boulevard, Mandaluyong City	(02) 8521-7321 <a href="mailto:so.manila@philhealth.gov.ph">so.manila@philhealth.gov.ph</a>  (02) 8365-0464  (02) 8277-4863  (02) 8532-0449
<b>PhilHealth Express</b>  Robinsons Otis  Robinsons Place Manila   Lucky Chinatown, Binondo, Manila	  2/F Robinsons Otis, Guanzon Street, Paco, Manila  Lingkod Pinoy Center, Pedro Gil St. Ermita Manila Open every Tuesday & Thursday	

LRT North Mall, Caloocan	Lucky Chinatown, 3/F City Place Lucky Chinatown Annex Regina Binondo Manila	
Robinsons Malabon	4/F Caloocan LRT North Mall, Rizal Avenue Extension, Caloocan City  Governor Pascual Avenue cor Crispin St Tinajeros Malabon City	
<b>Business Center</b>		
POEA-OFP Operations (Backroom Office)	Unit 172, 17/F, The Columbia Tower, Ortigas Ave., Mandaluyong City	
POEA-OFP Operations	G/F Blas Ople Building, Ortigas Avenue, EDSA Mandaluyong City	

Offices	Address	Contact Information
<b>Branch Office</b> PRO NCR Central - Quezon City	Corporate 145 Building, 145 Mother Ignacia St., Brgy. South Triangle, Quezon City, 1103	
<b>Local Health Insurance Office</b>  South Triangle, Quezon City  Fairview, Quezon City  Rizal	Lower Ground Floor, Corporate Building 145 Mother Ignacia, Barangay South Triangle, Quezon City  OWS Bldg., Blk 237, Lot 19, Neoplolitan IV, Brittany Subd.,Barangay Pasong Putik, Quezon City, 1118  Fibertex Building, Corner Don Mariano Subdivision, Ortigas Extension, San Juan, Cainta, Rizal 1900	(02) 8332-1557  (02) 8356-7461  (02) 8997-8377
<b>PhilHealth Express</b>  Ali Mall  SM North Edsa  Robinsons Galleria	3rd Floor, Gov't. Center, Ali Mall, Araneta Center,Cubao, Brgy. Socorro, Quezon City Open every Wednesday  Ground Floor, Gov't. Services Center, SM North EDSA Annex, Brgy. Bagong Pag-Asa. Quezon City Open every Thursday  Lower Ground Floor, Robinsons Galleria, EDSA Ortigas,Brgy Ugong Norte, Quezon City Open every Tuesday	

Robinsons Antipolo	2nd Floor Lingkod Pinoy Center, Robinsons Place, Antipolo, Rizal 1870 Open every Tuesday & Thursday	
Rodriguez, Rizal	Municipal Gymnasium, Barangay Balite, Rodriguez, Rizal 1860 Open every Monday & Wednesday	



Offices	Address	Contact Information
<b>Branch Office</b> PRO NCR South - Pasig	8007 Pioneer St., Brgy Kapitolyo, Pasig City	
<b>Local Health Insurance Offices</b>  Pasig  Taguig  Makati  Las Piñas  Parañaque	Ground Floor, Iriz One Corporate Centre 35 Meralco Avenue, Cor. Segundo Street, San Antonio, Pasig City  Global Satellite Office, 7th Floor SM Aura Tower, Bonifacio Global City, Taguig  2326 Chino Roces Ave., Extension, Brgy. Magallanes, Makati City  471 Editha Bldg., Almanza I, Alabang Zapote road, Las Pinas City  HRDC Bldg., KM 16 Acsie rd. cor. West Service Road, Brgy. Marcelo Green, Parañaque City	
<b>PhilHealth Express</b>  Robinsons Metro East  Robinsons Place Las Piñas	3/F Robinson's Metro East Lingkod Pinoy Marcos Highway, Brgy. Sta. Lucia, Pasig City  Basement Level, Lingkod Pinoy Center, Alabang-Zapote Road, Talon Dos, Las Piñas City	

Muntinlupa City Hall	Main Building, Ground Floor, Philippine Business Registry, National Road, Putatan, Muntinlupa City Temporarily Closed	
<b>Satellite Office</b>  Global City, Taguig	7th floor SM Aura Office Tower, 26th st cor. McKinley Parkway, Bonifacio Global City, Taguig City	

Offices	Address	Contact Information
<b>Regional Office</b> PRO IV-A - Lucena	Lucena Grand Central Terminal, Brgy. Ilayang Dupay, Lucena City	<a href="mailto:member.pro4a@philhealth.gov.ph">member.pro4a@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
San Pablo, Laguna	Cosico Avenue Brgy. Del Remedio, San Pablo City, Laguna(near Laguna State Polytechnic University, San Pablo City campus)	(049) 562-7027 (fax); (049) 562-9242 <a href="mailto:sanpablo.pro4a@philhealth.gov.ph">sanpablo.pro4a@philhealth.gov.ph</a>
Trece Martires City, Cavite	1 FS Building, Governor's Drive Brgy. Hugo-Perez, Trece Martires City, Cavite	(046) 419-1686; (046) 419-0701 <a href="mailto:trecemartires.pro4a@philhealth.gov.ph">trecemartires.pro4a@philhealth.gov.ph</a>
Dasmariñas City, Cavite	2nd Flr., Central Mall Annex, Aguinaldo Highway, Salitran II, Dasmariñas Cavite	(046) 472-0501; (046) 472-0468 <a href="mailto:dasma.pro4a@philhealth.gov.ph">dasma.pro4a@philhealth.gov.ph</a>
Calamba, Laguna	CMC Annex Bldg. National Highway Crossing, Real, Calamba City	(049) 502-5697; (049) 544-4551 <a href="mailto:calamba.pro4a@philhealth.gov.ph">calamba.pro4a@philhealth.gov.ph</a>
Gumaca, Quezon	Manuelito Lorica Bldg., Brgy. Pipisik, Gumaca Quezon	(042) 317-7754 <a href="mailto:gumaca.pro4a@philhealth.gov.ph">gumaca.pro4a@philhealth.gov.ph</a>
Lucena City, Quezon	LGCTI Bldg., Diversion Road, Brgy. Ilayang Dupay, Lucena City	(042) 3736703; (042) 373-6359 <a href="mailto:lucena.pro4a@philhealth.gov.ph">lucena.pro4a@philhealth.gov.ph</a>
<b>PhilHealth Express</b>		
Robinsons Sta. Rosa City, Laguna Robinsons Place Dasmariñas City, Cavite Robinsons Place Bacao, Gen. Trias, Cavite		

<b>Service Desk</b>  San Pedro, Laguna	3rd Floor Robinsons Galleria South Km. 31 National Highway, Brgy. Nueva, San Pedro, Laguna Office hours: 10am-6:00pm	
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Offices	Address	Contact Information
<b>Regional Office</b> PRO IV-B - Batangas	Xentro Mall Batangas City, Diversion Road, Brgy. Alangilan, Batangas City, Batangas	<a href="mailto:region4b@philhealth.gov.ph">region4b@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
Lemery, Batangas	2nd Floor Pinnacle Commercial Bldg., Ilustre Ave., corner J.P. Rizal and Independencia Sts., Lemery, Batangas	(043) 403-8422
Lipa City, Batangas	The Only Place Business Center Marawoy, Lipa City	(043) 312-5325
Tanauan City, Batangas	2/F MBP Business Center President Laurel Highway, Poblacion Brgy. III Tanauan City, Batangas 4232	(043) 778-6242; (043) 778-6080 (Fax)
<b>Island Local Health Insurance Offices</b>		
Boac, Marinduque	Ground Floor Zenturia Hotel Isok I, Boac, Marinduque	(042) 332-2274
Puerto Princesa City	Ground Floor, Yurich Bldg., Tiansuy Road cor. National Highway, Brgy. San Jose, Puerto Princesa City, Palawan	(043) 711-1778
Mamburao, Occidental Mindoro	ANTRAM Bldg. Seabreeze Subd., Brgy. Tayamaan, Mamburao, Occidental Mindoro	
Calapan City, Oriental	Meck Bldg., Brgy. Masipit, Calapan City, Oriental Mindoro	

Mindoro Romblon	2/F GNI Bldg, Cocoville St, Brgy Dapawan, Odiongan, Romblon	
<b>PhilHealth Express</b>		
Robinsons Place Lipa	2/F Robinsons Place, Mataas na Lupa, Lipa City, Batangas	
NuCiti Baymall, Batangas City	NUCITI Bldg., P. Burgos St., Batangas City	
Robinsons Palawan	Robinsons Place, Brgy. San Jose Puerto Princesa City, Palawan	
<b>Service Desk</b>		
Roxas, Oriental Mindoro	Municipal Hall of Roxas, Oriental Mindoro Open every 1st & 2nd Thursday of the month	
Pinamalayan, Oriental Mindoro	One-Stop-Shop Municipality of Pinamalayan, Oriental Mindoro Open every 3rd & 4th Thursday of the month	
Sta. Cruz, Marinduque	Sta. Cruz Municipal Hall, Brgy. Maharlika, Sta. Cruz, Marinduque Open every 4th Wednesday of the month	
Torrijos, Marinduque	Torrijos Municipal Hall, Brgy. Poblacion, Torrijos, Marinduque Open every last Wednesday of the month	

Offices	Address	Contact Information
Regional Office PRO V - Legazpi	ANST IV Bldg., Benny S. Imperial Drive, Legazpi City, Albay	Healthline: (052) 481-5596
<b>Local Health Insurance Offices</b>		
Legazpi City, Albay	2/F delos Santos Commercial Bldg. LandCo Business Park, Bitano Legazpi City	(052) 481-55-96 (telefax); (052) 480-15-89 <a href="mailto:albay.pro5@philhealth.gov.ph">albay.pro5@philhealth.gov.ph</a>
Masbate City, Masbate	VMBT Building, Mabini St., Brgy. Kalipay, Masbate City, Masbate	(056) 333-6041 <a href="mailto:masbate.pro5@philhealth.gov.ph">masbate.pro5@philhealth.gov.ph</a>
Naga City, Camarines Sur	Westpark, Magsaysay Ave., Naga City 4400	(054) 473-5632; (054) 472-1483 <a href="mailto:naga.pro5@philhealth.gov.ph">naga.pro5@philhealth.gov.ph</a>
Daet, Camarines Norte	Manzihing Corporation Building Purok 1, Binanuaan, Talisay, Camarines Norte	(054) 440 3380-81 <a href="mailto:daet.pro5@philhealth.gov.ph">daet.pro5@philhealth.gov.ph</a>
Sorsogon, Sorsogon	Sorcom Leasing, Burgos St., Brgy. Talisay, Sorsogon City, Sorsogon	(056) 421-5582 <a href="mailto:sorsogon.pro5@philhealth.gov.ph">sorsogon.pro5@philhealth.gov.ph</a>
Virac, Catanduanes	2/F Riverside Building, Virac Town Center Gogon Sirangan, Virac, Catanduanes 4800	<a href="mailto:virac.pro5@philhealth.gov.ph">virac.pro5@philhealth.gov.ph</a>
<b>PhilHealth Express</b>		
Iriga City, Camarines Sur	City Public Library, Poblacion, Iriga City	(054) 456-2174 <a href="mailto:camsurex.pro5@philhealth.gov.ph">camsurex.pro5@philhealth.gov.ph</a>
Sipocot, Camarines Sur	LGU Annex Building, LGU Compound Sipocot, Camarines Sur	(054) 450-6054 <a href="mailto:camsurex.pro5@philhealth.gov.ph">camsurex.pro5@philhealth.gov.ph</a>

Tabaco, Albay	Ground Floor, Municipal Building Tabaco City	(052) 203-0262 <a href="mailto:albayex.pro5@philhealth.gov.ph">albayex.pro5@philhealth.gov.ph</a>
Ligao, Albay	Multipurpose Building, Barangay Guilid Ligao City	(052) 485-1898 <a href="mailto:albayex.pro5@philhealth.gov.ph">albayex.pro5@philhealth.gov.ph</a>
<b>Service Desk</b> Roxas, Oriental Mindoro	Municipal Hall of Roxas, Oriental Mindoro Open every 1st & 2nd Thursday of the month	
Pinamalayan, Oriental Mindoro	One-Stop-Shop Municipality of Pinamalayan, Oriental Mindoro Open every 3rd & 4th Thursday of the month	
Sta. Cruz, Marinduque	Sta. Cruz Municipal Hall, Brgy. Maharlika, Sta. Cruz, Marinduque Open every 4th Wednesday of the month	
Torrijos, Marinduque	Torrijos Municipal Hall, Brgy. Poblacion, Torrijos, Marinduque Open every last Wednesday of the month	
<b>Satellite Office</b> LGU Office Compound, Sta. Elena, Camarines Norte LGU Compound, Nabua, Camarines Sur	LGU Office Compound, Sta. Elena, Camarines Norte LGU Compound, Nabua, Camarines Sur	
<b>Service Desk</b>	Santa Elena Municipal Bldg., Santa Elena, Camarines Norte	



Offices	Address	Contact Information
<b>Regional Office</b> PRO VI - Iloilo	Gaisano Capital Building, Luna Street, Lapaz, Iloilo City	(033) 501-9160 to 62 loc. 100/102; (0998) 959-9487 <a href="mailto:region6@philhealth.gov.ph">region6@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
Kalibo, Aklan	L. Kristen and OJ's Place D. Magma Street Kalibo, Aklan	(036) 268-9001; 500-7211; 262-8001; 500-7106; 500-7118; 500-8703; (0917) 722-4451 <a href="mailto:kalibo.pro6@philhealth.gov.ph">kalibo.pro6@philhealth.gov.ph</a> , <a href="mailto:it-kalibo.pro6@philhealth.gov.ph">it-kalibo.pro6@philhealth.gov.ph</a>
San Jose, Antique	Ground Floor, St. Nicholas Commercial Building, TA Fornier Street, San Jose, Antique	(036) 540-8052; 540-7209; 540-8023; (0917) 717-7135 <a href="mailto:sanjose.pro6@philhealth.gov.ph">sanjose.pro6@philhealth.gov.ph</a> / <a href="mailto:psa_antique@yahoo.com">psa_antique@yahoo.com</a>
Roxas City, Capiz	SHJ Bldg, Gov. Gabriel Hernandez Avenue, Roxas City, Capiz	(036) 522-4369; 621-0325; 522-8258; (0917) 7177183 <a href="mailto:roxas.pro6@philhealth.gov.ph">roxas.pro6@philhealth.gov.ph</a> / <a href="mailto:cpz_pso@yahoo.com">cpz_pso@yahoo.com</a>
Bacolod City, Negros Occidental	Vision Square Building, San Agustin Drive, Bacolod City, Negros Occidental	(034) 708-5335; 709-0133; (034) 432-2319; 433-3694 <a href="mailto:psa_bacolod@yahoo.com">psa_bacolod@yahoo.com</a>
Passi City, Iloilo	Carpark Area, Gaisano Capital, Simeon Aguilar Street, Pob., Ilawod Passi City, Iloilo	(033) 536-8301; (033) 311-6261; (0917) 390-8739 <a href="mailto:philhealthpassi@yahoo.com">philhealthpassi@yahoo.com</a> ; <a href="mailto:iloilo.dc@philhealth.gov.ph">iloilo.dc@philhealth.gov.ph</a> ; <a href="mailto:passi.pro6@philhealth.gov.ph">passi.pro6@philhealth.gov.ph</a>

Iloilo City, Iloilo	Ground Floor, Gaisano Capital Building, Luna Street, Lapaz, Iloilo City	(033) 501-9160 to 62 loc. 100/102; (0998) 959-9487 <a href="mailto:iloilo.dc@philhealth.gov.ph">iloilo.dc@philhealth.gov.ph</a>
Sagay City, Negros Occidental	G/F NNPAI Building, National Highway, Pob. 2, Sagay City	(034) 722-0116; 488-0587; (0917) 717-7182 <a href="mailto:it-sagay.pro6@philhealth.gov.ph">it-sagay.pro6@philhealth.gov.ph</a> / <a href="mailto:psa_sagay@yahoo.com">psa_sagay@yahoo.com</a>
Kabankalan City, Negros Occidental	NZ Bldg, JY Perez Highway, Barangay Talubangi, Kabankalan City, Negros Occidental	(034) 746-8256; 471-2050; (0925) 874-5410 <a href="mailto:kabankalan.pro6@philhealth.gov.ph">kabankalan.pro6@philhealth.gov.ph</a>
Sara, Iloilo	Cecilio Tady Street, Pob. Sara, Iloilo	(033) 392-0520; 393-0262; (0917) 717-7184 <a href="mailto:sara.pro6@philhealth.gov.ph">sara.pro6@philhealth.gov.ph</a>
<b>PhilHealth Express</b>		
Robinsons Bacolod, Bacolod City	3/F Robinsons Place Bacolod Mandalagan, Bacolod City	(0933) 629-6623
Robinsons Iloilo, Iloilo City	Lingkod Pinoy Center, 3rd level Robinsons Place Iloilo, Mabini Street, Iloilo City	(0918) 553-3223 <a href="mailto:exp.robiloilo@philhealth.gov.ph">exp.robiloilo@philhealth.gov.ph</a>
Iloilo - Jaro, Iloilo City	Lingkod Pinoy Center, Ground Floor Robinsons Place, Jaro, Iloilo City	

Robinsons Roxas City, Capiz	2nd Floor, Lingkod Pinoy Center, Robinsons Place Roxas Barangay Lawa-an, Roxas City, Capiz	(0917) 625-8999 express.capiz@philhealth.gov.ph
San Carlos City, Negros Occ.	2nd Floor Jose V. Valmayor Public Market V. Gustilo Sreet, San Carlos City, Negros Occidental	(034) 729-3897; (0939) 599-3788 sancarlosbc.pro6@philHealth.gov.ph
Guimbal Poblacion, Iloilo	Poblacion Gerona Street, Guimbal, Iloilo	(0916) 571-4471 exp.guimbal@philhealth.gov.ph
Caticlan, Malay, Aklan	Barangay Hall, Sitio Proper Caticlan, Malay, Aklan	(036) 288-7757; (0930) 301-4551 caticlan_philhealthexpress.com.ph
<b>Satellite Office</b>		
Boracay	Sitio Bantud, Manoc-Manoc, Boracay, Malay, Aklan	(036) 506-3050 philhealthboracaycaticlan@gmail.com
Guimaras	GEMPC Building, Provincial Capitol Grounds San Miguel, Jordan, Guimaras	(033) 396-1116; (0917) 799-5300 pro06_guimaras@yahoo.com
Culasi	Hospital Site, Centro Poblacion Culasi, Antique	(036) 277-8543; (0999) 876-7027
Mandurriao	3rd Flr, Festive Walk Mall Annex, Iloilo Business Park, Megaworld Blvd., Barangay San Rafael, Mandurriao, Iloilo City	(033) 315-4074
Pavia	3rd Floor, Robinsons Place Pavia, Iloilo	(033) 315-4075

Offices	Address	Contact Information
<b>Regional Office</b> PRO VII - Cebu	7th and 8th Floor, Skytower, N. Escario Street corner Acacia Street, Cebu City 6000	
<b>Local Health Insurance Offices</b>		
Cebu City	G/F Golden Peak Hotel & Suites N. Escario Street, Cebu City 6000	(032) 233-3287 <a href="mailto:cebu.pro7@gmail.com">cebu.pro7@gmail.com</a>
Mandaue City, Cebu	Wireless Plaza, Hernan Cortes corner Lopez Jaena Streets, Subangdaku, Mandaue City 6014 Cebu	(032) 505-3022 (telefax) <a href="mailto:philhealthmandaue01@gmail.com">philhealthmandaue01@gmail.com</a>
Carcar City, Cebu	Lower Ground, New Carcar City Hall, Poblacion 3, Carcar City 6019 Cebu	<a href="mailto:lhioccarc@gmail.com">lhioccarc@gmail.com</a>
Danao City, Cebu	J. D. Almendras Building, National Road, Poblacion, Danao City 6004 Cebu	(032) 324-7963; 0917 147 5041 <a href="mailto:danaolhio.philhealth@gmail.com">danaolhio.philhealth@gmail.com</a>
Tagbilaran City, Bohol	JGY Building, J.A Clarin Street (Beside Motortrade and Colour Steel), Tagbilaran City 6300 Bohol	(038) 412-0248; (038) 235-5622 (telefax) <a href="mailto:phictag.reg@gmail.com">phictag.reg@gmail.com</a>
Talibon, Bohol	RHU Building, Municipal Hall Compound, Talibon 6325 Bohol	(038) 515-5165 (telefax) <a href="mailto:talibon.pro7@gmail.com">talibon.pro7@gmail.com</a>
Dumaguete City, Negros Oriental	2nd Floor Poincare I Building, National Highway corner E.J. Blanco Drive Extension, Dumaguete City 6200 Negros Oriental	(035) 422-3931; (035) 225-9297 (telefax) <a href="mailto:dgtephilhealth@gmail.com">dgtephilhealth@gmail.com</a>

Bais City, Negros Oriental	Vean Bldg., Roxas Street, Bais City 6206 Negros Oriental	(035) 402-3415; (035) 402-8786 (telefax) <a href="mailto:bais.pro7@philhealth.gov.ph">bais.pro7@philhealth.gov.ph</a>
<b>Satellite Office</b>		
Siquijor	Ground Floor, Multi-Purpose Center, Poblacion, Siquijor 6225 Siquijor	(035) 480-9844; 0995 471 6991 <a href="mailto:siquijorso.pro7@gmail.com">siquijorso.pro7@gmail.com</a>
<b>PhilHealth Express</b>		
SM City Cebu	2nd Level, Government Services Express, SM City Cebu, North Reclamation Area, Cebu City Mondays, Tuesdays, Wednesdays; 10 am to 6 pm	
Robinsons Fuente	3rd Level, Lingkod Pinoy Center, Robinsons Fuente, Osmeña Boulevard, Cebu City Mondays, Tuesdays, Thursdays; 10 am to 6 pm	
Robinsons Galleria	3rd Level, Lingkod Pinoy Center, Robinsons Galleria, Gen. Maxilom Avenue Extension, Cebu City Mondays, Wednesdays, Fridays; 10 am to 6 pm	
SM City Consolacion	2nd Level, SM City Consolacion, Cebu North Road, Lamac, Consolacion, Cebu Mondays, Tuesdays, Wednesdays; 10 am to 6 pm	

Offices	Address	Contact Information
<b>Regional Office</b> PRO VIII - Tacloban	Brgy. 24, P. Burgos Street, Tacloban City, Leyte	(053)325-3563; (053) 523-1195 (Fax) <a href="mailto:info.pro8@philhealth.gov.ph">info.pro8@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
Borongan Local Health Insurance Office	Primea Hotel, G. Abogado cor. San Francisco Streets Barangay C, Borongan City, Eastern Samar	
Catarman Local Health Insurance Office	6A Building, Garcia corner Mabini Streets Barangay Jose Abad Santos, Catarman, Northern Samar	(055)251-8240; (055)500-9281; (0917) 323-0036
Maasin Local Health Insurance Office	NSA Bldg., Mantahan, Maasin City, Southern Leyte	(053)381-3862; (053)570-8365
Ormoc Local Health Insurance Office	Anica Bldg., Brgy. Nadongholan, Ormoc City, Leyte	(053)255-4859; (053)561-2809
Tacloban Local Health Insurance Office	No. 21 Queen of Peace, Brgy. 76, Fatima Village, Tacloban City	(053) 888-0804
Catbalogan Local Health Insurance Office	Cinco Estate Bldg., San Bartolome St., corner Rizal Avenue St., Catbalogan, Western Samar	(055)543-8090
Naval, Biliran	Bernandes 2, Brgy. Atipolo, Naval, Biliran	(053) 500-9016 <a href="mailto:philhealthnaval@gmail.com">philhealthnaval@gmail.com</a>

<b>Business Centers</b>  Calbayog, City  Baybay City	Nijaga Street, Barangay Central, Calbayog City  G/F Legislative Building, R. Magsaysay Street, Baybay City	calbayog.pro8@philhealth.gov.ph (055) 533-9876  (053) 563-7283 baybay.pro8@philhealth.gov.ph
<b>PhilHealth Express</b>  Tacloban City  Gaisano Central - Tacloban City  Gaisano – Sogod  Robinsons - Ormoc City	2nd Floor, Lingkod Pinoy Center, Robinsons Mall, Marasbaras, Tacloban City Sunday to Friday 10:00am-7:00pm  2nd Floor, Gaisano Central, Tacloban City Monday to Saturday 8:30am-5:30pm  Gaisano Sogod, Sogod, Southern Leyte Monday to Saturday 9:00 a.m.-7:00p.m.  3rd Floor, Robinson's Mall-Ormoc, Brgy. San Pablo, Simangay, Ormoc City	
<b>Service Desks</b>  Hilongos Service Desk	Municipal Hall, Hilongos, Leyte (053)336-2254 Opens every Tuesday to Friday	

Offices	Address	Contact Information
<b>Regional Office</b> PRO IX - Zamboanga	BGIDC Corporate Center, Gov. Lim Ave., Zamboanga City	(062) 992-2739 (fax) <a href="mailto:region9@philhealth.gov.ph">region9@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
Zamboanga City	Wee Agro II bldg., Veterans Ave., Zamboanga City	(062) 310-3516
Ipil, Zamboanga	NMJ Bldg., Gethsemani St., cor. Sucgang Ave., Ipil, Zamboanga Sibugay	(062) 333-5495
Pagadian City, Zamboanga de Sur	Nesoricom Prime Arcade, Tiguma, Pagadian City	(062) 214-4303
Dipolog City, Zamboanga del Norte	ABC Lessor Bldg., Malvar St., Barangay Miputak, Dipolog City	(062) 212-7860
<b>PhilHealth Express</b>		
Zamboanga City Medical Center Yubenco Grand Mega Starmall KCC Mall de Zamboanga	Evangelista St., Zamboanga City Putik, Zamboanga City Gov. Camins, Zamboanga City	



Offices	Address	Contact Information
<b>Regional Office</b> PRO X - Cagayan De Oro	<i>8F Gateway Tower 2, Limketkai Center, C.M. Recto Avenue, Cagayan de Oro City</i>	(088) 859-0225 <a href="mailto:region10@philhealth.gov.ph">region10@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
Cagayan De Oro	<i>Gateway Tower 2, Claro M. Recto Ave, Cagayan de Oro</i>	
Valencia, Bukidnon	<i>GF Candelaria Bldg., Sayre Hi-way, Hagkol Valeciana City Bukidnon</i>	
Ozamis City, Misamis Occidental	<i>J-ME Building, Rizal Ave. cor Capistrano St. Ozamis City</i>	
Gingoog City, Misamis Oriental	<i>RRM Barro Bldg., Jadol-Tuto sts., Gingoog City</i>	
Iligan City, Lanao Del Norte	<i>GF Gonzales - Gimeno Bldg. 4 Macapagal Avenue Tubod Iligan City</i>	
<b>Business Center</b>		
Malaybalay	<i>Old Provincial Hospital, Capitol Compound, Malaybalay, Bukidnon</i>	
Maramag	<i>Stall 2&amp;4, Perimeter Bldg., Integrated Bus Terminal, Maramag, Bukidnon</i>	
Camiguin	<i>Dychauco Arcade, Gen. B. Aranas Street Barangay Poblacion, Mambajao Province of Camiguin</i>	387-0353

Tubod	LNPH Cmpd, Upper Sagadan, Baroy, Lanao del Norte	(063) 373-6267
Maranding, Lanao del Norte	<i>NCMC Building, Purok Lemontree Maranding, Lala, Lanao del Norte</i>	<i>(063) 388-7012</i>
Carmen	<i>No. 105 G/F, Stary Building Max Suneil Street, Barangay Carmen Cagayan de Oro City</i>	
Oroquieta	<i>Sobong Building, Barrientos Street Layawan, Oroquieta City</i>	<i>(088) 545-3843</i>
Tangub	<i>PhilHealth Business Center of Tangub Doña Maria D. Tan Memorial Hospital Pertig Street, Mantic, Tangub City</i>	<i>(088) 5450565</i>

Offices	Address	Contact Information
<b>Regional Office</b> PRO CARAGA - Butuan	Lynzee's Building, 766 J. Rosales Avenue, Butuan City	(085) 342-0900; (085) 816-0019; (085) 225-7026 loc. 101-103 <a href="mailto:caraga@philhealth.gov.ph">caraga@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
PMAC (LHIO Butuan City)	Lynzee's Building, 766 J. Rosales Avenue, Butuan City	(085) 342-0900 <a href="mailto:pmac.procaraga@philhealth.gov.ph">pmac.procaraga@philhealth.gov.ph</a>
Bislig City, Surigao Del Sur	2F MNBC Bldg., Abarca cor. M. Castillo Streets, Mangagoy, Bislig City, Surigao del Sur	(086) 853-2262; (086) 628-2402; (0917) 702-4478; (0920) 2180118 <a href="mailto:bislig.procaraga@philhealth.gov.ph">bislig.procaraga@philhealth.gov.ph</a>
San Francisco, Agusan Del Sur	Alexandra Bldg., National Highway, Brgy. Hubang, San Francisco, Agusan del Sur	(085) 242-3883; (085) 343-9288 (fax) <a href="mailto:francisco.procaraga@philhealth.gov.ph">francisco.procaraga@philhealth.gov.ph</a>
Surigao City, Surigao Del Norte	2F Primeglee Bldg., San Nicolas St. corner Diez St., Surigao City	(086) 231-9261 <a href="mailto:surigao.procaraga@philhealth.gov.ph">surigao.procaraga@philhealth.gov.ph</a>
Tandag, Surigao del Sur	2nd Floor JTP Bldg., Bagong Lungsod, Tandag City, Surigao del Sur	(086) 211-4196; 211-4360 <a href="mailto:tandag.procaraga@philhealth.gov.ph">tandag.procaraga@philhealth.gov.ph</a>
Agusan del Sur	Alexandra Bldg., National Highway, Brgy. Hubang San Francisco, Agusan del Sur	(085) 343-9288; 242-3883

<b>PhilHealth Express</b>  Gaisano Capital Surigao, Surigao City  New Van Terminal, Butuan City  Robinson's Place, Butuan City	2nd Floor Gaisano Capital Surigao Km. 4 Barangay Luna, Surigao City   3rd Floor Lingkod Pinoy	   (085) 815-5961
<b>Service Desk</b>  MSWD Office, Municipal Hall, Nasipit, Agusan del Norte  Cabadbaran City Hall Lobby, Cabadbaran City, Agusan del Norte  Municipality of Hinatuan, Old Service Desk RHU Building, Aquino, Hinatuan, Surigao del Sur (Every Friday)  Municipality of Lingig, Poblacion, Lingig, Surigao del Sur (Every Thursday)  Municipality of Tagbina, RHU Tagbina, Poblacion, Tagbina, Surigao del Sur (Every Wednesday)		

LGU Claver, Surigao del Norte  LGU San Jose, Province of Dinagat Islands  LGU Dapa, Siargao Islands, Surigao del Norte  RHU San Miguel, San Miguel, Surigao del Sur (Every Tuesday)  Lianga District Hospital, Lianga, Surigao del Sur (Every Wednesday)  Madrid District Hospital, Madrid, Surigao del Sur (Every 2nd and 3rd Thursday)  MSWD Office, Cantilan, Surigao del Sur (Every 3rd Friday)  Carrascal Diagnostic Bldg., Carrascal, Surigao del Sur (Every 2nd Friday)		(0928) 3940190    (0908) 8743038  (086) 212-5543  (0930) 7612839
<b>PhilHealth Business Center</b>  CHO Bayugan City (Every 2nd and 4th Tuesday)  RHU Trento, Agusan del Sur (Every Wednesday)  RHU Talacogon, Agusan del Sur (Every 1st & 3rd Tuesday) RHU Veruela, Agusan del Sur (Every 1st		(0922) 8031877  (0908) 7675920   (0918) 5893391  (0910) 5427366

Thursday of the month)		
RHU Sta. Josefa, Agusan del Sur (Every 2nd Thursday of the month)		(0928) 6120147
RHU San Luis, Agusan del Sur (Every 3rd Thursday of the month)		(0910) 0904028
RHU Sibagat, Agusan del Sur (Every 4th Thursday of the month)		(0949) 9961400

Offices	Address	Contact Information
<b>Regional Office PRO XI - Davao</b>	Valgosons Building Bolton Extension, Poblacion, Davao City	Trunkline: (082) 295-2133 local 6300; (082) 295-3382 (Public Affairs Unit) (0925) 7819987 (Local Healthline) <a href="mailto:publicaffairs.pro11@gmail.com">publicaffairs.pro11@gmail.com</a> ; <a href="mailto:info.pro11@philhealth.gov.ph">info.pro11@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
Davao City	Valgosons Building Bolton Extension, Poblacion, Davao City	Trunkline: (082) 295-2133 local 6328 to 30
Tagum City, Davao del Norte	G/Flr. F. Ramos Building, Lapu-lapu Street Magugpo, Poblacion, Tagum City, Davao Del Norte	Trunkline: (082) 295-2133 local 6363-64 Direct Lines:(084) 655-9609; (084) 655-0834
Digos, Davao Del Sur	De Leon Bldg., Roxas Ext. St. Brgy. San Miguel, Digos City, Davao del Sur	Trunkline: (082) 295-2133 local 6365-66
Gonzales Building, Vinzon Street, Digos City		
Mati, Davao Oriental	Roche Building, Andravel corner Mabini Streets Barangay Central, Mati, Davao Oriental	Trunkline: (082) 295-2133 local 6367-68; Direct Line: (087) 388-4920;
Nabunturan, Compostela Valley Province	A. Ford Building, Purok 17, National Highway Nabunturan, Compostela Valley	Trunkline: (082) 295-2133 local 6361-62; Mobile No.: (0925) 5275048

<b>PhilHealth Express</b>		
Calinan, Davao City	Old Barangay Hall beside Police Station, Aurora-Quezon St., Calinan, Davao City	<a href="mailto:pro11.express.toril@gmail.com">pro11.express.toril@gmail.com</a>
Toril, Davao City	Urban Center B, Juan dela Cruz Street, Brgy. Daliao, Toril Dist., Davao City	<a href="mailto:pro11.express.toril@gmail.com">pro11.express.toril@gmail.com</a>
Panabo City	Panabo City Multi-Purpose Tourism Cultural and Sports Center, JP Laurel, Pan-Philippine Highway, Panabo City, Davao del Norte	<a href="mailto:pro11.express.panabo@gmail.com">pro11.express.panabo@gmail.com</a>
Robinsons Place, Tagum City	4th Level Robinsons Place, National Highway, Tagum City, Davao del Norte	
Sulop, Davao del Sur	Sulop Public Market, Sulop, Davao del Sur (082) 272-3705	(082) 272-3705



Offices	Address	Contact Information
<b>Regional Office</b> PRO XII - Koronadal	CSA I Building Cor. Zulueta Street, General Santos Drive, Koronadal City	(083) 228-9731 to 34 (fax); (083) 228-4733 <a href="mailto:region12@philhealth.gov.ph">region12@philhealth.gov.ph</a> <a href="mailto:admin.pro12@philhealth.gov.ph">admin.pro12@philhealth.gov.ph</a>
<b>Local Health Insurance Offices</b>		
General Santos City, South Cotabato	JM II Bldg., Pendatun Avenue, Dadiangas North, General Santos City	(083) 305-1949 <a href="mailto:generalsantos.pro12@philhealth.gov.ph">generalsantos.pro12@philhealth.gov.ph</a>
Kidapawan City, North Cotabato	Apol-J Bldg., Quezon Blvd., Kidapawan City	(064) 278-4360 <a href="mailto:kidapawan.pro12@philhealth.gov.ph">kidapawan.pro12@philhealth.gov.ph</a>
Koronadal City, South Cotabato	Ground Flr., CSA I Building cor. Zulueta Street and General Santos Drive, Koronadal City	(083) 228-6389; (083) 228-9731 to 34 loc. 4506 <a href="mailto:pmac.pro12@philhealth.gov.ph">pmac.pro12@philhealth.gov.ph</a>
Cotabato City, Cotabato	Door 3 F.A.Tan Bldg., S.K. Pendatun St., Cotabato City	(064) 421-7292; (064) 471-0304 <a href="mailto:cotabato.pro12@philhealth.gov.ph">cotabato.pro12@philhealth.gov.ph</a>
Isulan, Sultan Kudarat	R.E.R. Commercial Bldg. National Highway, Isulan, Sultan Kudarat	(064) 201-5009 <a href="mailto:isulan.pro12@philhealth.gov.ph">isulan.pro12@philhealth.gov.ph</a>
<b>PhilHealth Express</b>		
Robinsons Gensan Gaisano, Kidapawan City		

Offices	Address	Contact Information
<b>Regional Office</b> PRO BARMM - Marawi	Kouzbary Business Complex, Alibin Talib Street, New Capitol HTs, Marawi Poblacion, Marawi City	<a href="mailto:pro.armm@philhealth.gov.ph">pro.armm@philhealth.gov.ph</a>   <a href="mailto:phic_armm@yahoo.com">phic_armm@yahoo.com</a>
<b>Local Health Insurance Office</b>  Bongao, Tawi-Tawi  Marawi City  Datu Odin Sinsuat (DOS)  Buluan, Maguindanao	Samsuya Building, Tubig Boh Highway, Bongao, Tawi-Tawi  Ground Floor, Khouzbary Business Complex Ja'far Bin Abu Talib St., New Capitol Heights, Marawi City  Ground Floor, A and N Business Center Barangay Upper Capiton, Datu Odin Sinsuat, Maguindanao  Provincial Compound, Narra St., Poblacion, Buluan, Maguindanao	(0919) 874-2705 <a href="mailto:ptawitawi@gmail.com">ptawitawi@gmail.com</a>  I(0938) 212-9134/ (0905) 574-5492  (064) 557-1423  (0926) 391-9848
<b>PhilHealth Express</b>  ORC Complex, Cotabato City		