CORPORATE AFFAIRS GROUP

EXTERNAL SERVICES

Volume 4

CORPORATE ACTION CENTER
CORPORATE MARKETING DEPARTMENT
SOCIAL HEALTH INSURANCE ACADEMY

LIST OF SERVICES

EXTERNAL SERVICES **PAGE**

CORPORATE AFFAIRS GROUP

CORPORATE ACTION CENTER

1. HANDLING OF COMPLEX CLIENT QUERIES AND FEEDBACK THRU EMAIL

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

Office/Division	Corporate Action Center (CAC)			
Classification	Complex			
Type of Transaction	G2C-Government to Citizen, G2B-Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external clients			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		Corporate Action Center channel: actioncenter@philhealth.gov.ph		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Send simple email to actioncenter@philhealth.gov.ph	1.1 Sort and distribute 80 valid emails to agents			Email Team Lead (Monitoring Officer Designate
none	1.2 Read email and check available information for database look-up			
None	1.3 View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Healh Insurance Program)			
2. Receive final response	2.1 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	2.2 Encode transaction in CSMS/tally sheet.			
	2.3 Escalate complex transaction to Team Leader for resolution of other office.			
	2.4 Coordinate and endorse to responsible office thru CSMS, and record in CAC Log Sheet			Email Team Leader (Monitoring Officer Designate)
3. Provide requested information	3. Request aclient for additional information/documents required for processing, if applicable. **Note:** Includes at least 3 correct information validated against client's database recored for information security purposes, if applicable			
4. Receive services and/or final response	4.1 Conduct review and approval process and provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures. **Note:** These may also inclde 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.			
	4.2 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.			
	TOTAL	**None**	**7 working days**	

Note: TAT of 3 days includes cycle time. It is based on current capacity with outsourced provider 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.

2. HANDLING OF COMPLEX CLIENT QUERIES AND FEEDBACK LODGED TO GOVERNMENT CHANNELS

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

Office/Division	Corporate Action Center (CAC)				
Classification	Complex				
Type of Transaction	G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency				
Who may avail:	All external clients				
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**			
None		**Anti-Red Tape Authority(ARTA):** complaints@arta.gov.ph 8-478-5093 **Presidential Complaint Center (PCC)** **8888** **Contact Center ng Bayan (CCB):** email@contactcenterngbayan.gov.ph 0908-881-6565			
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**	
1.1 Client sends complex query/feedback thru Government Channel 1.2 Government Channel endorses feedback/transaction to CAC	1.1 Receive endorsement from Government Channel	None	3 working days (Initial action must be done within 72 hours)+D290	CAC Technical Point Person	
	1.2 Read client's concern and check available contact information.				

2. Provide requested information	2.1 Contact client thru phone or text (if available), ask/clarify concern and request for name and PIN and other required information as necessary.			
	2.2 Record initial action in Government Channel's online system and upload documentation. Contact information of CAC for follow-up is provided			
	2.3 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.)			
	2.4 Prepare response basond on available information. Note: Response may be as follows: Contact information of CAC for follow-up is provided.		4 working days	
	2.5 Review draft response			CAC Head
	2.6 Revise draft respones as necessary			CAC Technical Point Person
	2.7 Approve finalized response			CAC Head
3. Receive final response letter	3.1 Release response to client via email (if availabe)			CAC Technical Point Person
	3.2 Record resolution of transaction and upload documentation in Government Channel's online system.			
	3.3 Close the transaction ticket in CSMS			
	TOTAL	**None**	**7 working days**	

3. HANDLING OF COMPLEX CLIENT QUERIES AND FEEBACK THRU CALLBACK CHANNEL

Complex queries or feedback from external clients via Callback Channel 0917-898-7442

Office/Division	Corporate Action Center (CAC)
Classification	Complex
Type of Transaction	G2C-Government to Citizen, G2B-Government to Business Entity, G2G-Government to Government agency
Who may avail:	All external clients

CHECKLIST OF REQUIREMENTS	**WHERE TO SECURE**
None	Corporate Action Center Callback Channel: 0917-898-7442

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1. Send the following simple text message to 0917-898-7442 "PHIC callback [space] Mobile No. or Metro Manila Landline [space] details of simple concern".	1. Retrieve requests for callback from SMS System and endorse to Callback Team Leader.			Receiving staff
2. Wait for callback within 3 days	2. Sort and distribute a minimum of 80 valid queries to each assigned agent per day.			Call Channel Team Leader (Monitoring Officer Designate)
3. Receive Call from agent.	3. Call the client and use the standard opening spiel.			Call Agent (Action Officer Designate)
4. Give consent on use of personal data in order to proceed with query	4. Secure consent on use of personal data in the transaction and for quality assurance purposes.			
5. Provide requested information	5.1 Ask/clarify client's concern as necessary and request for name and PIN and other required information.			

	5.2 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.)			
6. Answer security questions	6. Perform information security protocol, if involving sensitive personal information			
7. Receive response	7.1 Provide response to the query or feedback including other relevant information using spiels			
	7.2 Provide contact details and transaction reference number for follow-up			
	7.3 Encode transaction in CSMS/Logsheet and close directly resolved transaction.			
	7.4 Escalate complex transaction to Team Leader for level 2 resolution of other office.			
	7.5 Coordinate and endorse transaction to reponsible office thru CSMS, and recoird in CAC Logsheet			Call Channel Team Leader (Monitoring Officer Designate)
8. Provide requested information	8. 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.			Other office (Action Officer Designate of Concerned Office)
9. Receive services and/or final response	9.1 Conduct review and approval process and provide services as may be realted to the client's concern, in accordance with existing corporate policies and procedures. Note: This may include appropriate redress for non-confirming services i.e. re-work, correction of errors giving of apology to the client, correction of other affected processes or services.			

	9.2 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.			
	TOTAL	**None**	**7 working days**	

Note: TAT is based on CAC capacity with outsourced provider to manage regular volume of requests for callback, with quota set at 80 queries per agent per day. Callback requests are deemed expired after 72 hours. 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.

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

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

Office/Division	Corporate Action Center (CAC)			
Classification	Complex			
Type of Transaction	G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external clients			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		**CAC Walk-in Counter** Room 706, CityState Center, 709 Shae Boulevard, Oranbo, Pasig City		
Core processes on membership, collection, benefit availment and accreditation are not availlable at CAC.				
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Submit simple query/feedback at CAC Walk-in Counter	1. Respond with standard opening spiel			
2. Give consent on use of perosnal data in order to proceed with query	2. Secure consent on use of peronal data in the transaction and for quality assurance purposes			
3. Provide requested information	3.1 Ask/clarify client's concern as necessary and request for name and PIN and other required information.			
	3.2 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	4. Perform information security protocol, if involving sensitive personal information			
5. Receive final response and information materials	5.1 Provide response to the query or feedback including other relevant information using spiels			
	5.2 Provide contact details and transaction reference number for follow-up			
	5.3 Encode transaction in CSMS and log sheet and close directly resolved transaction.			
	5.4 Coordinate complex transaction with concerned office, as necessary, and **provide advance copy of letter and attachments**			
	5.5 Prepare endorsement memorandum to responsible office, using spiel and based on available information.			
	5.6 Review draft endorsement			CAC Head
	5.7 Revise draft endorsment as necesssary			Walk-in Agent (Action Officer Designate)
	5.8 Sign finalized document			CAC head
	5.9 Release endorsement memo to responsible office via official email and via CSMS			Walk-in Agent (Action Officer Designate)
6. Provide requested information	6. 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.			
7. Receive services and/or final response	7.1 Conduct review and approval process and provide services as may be related to the client's concern, in accordance with existing coporate policies and procedures.			

	Note: These may also include appropriate redress for non-conforming services i.e. re-work, correction of erros. correction of other afected processes or services, and giving of apology to the client.			
	7.2 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.			
	TOTAL	**None**	**7 working days**	

5. HANDLING OF COMPLEX CLIENT QUERIES AND FEEDBACK VIA LETTER

Complex queries or feedback from external clients via letter (including letters from Presidential Complaint Center and other government channels) for level 1 resolution by CAC with review and approval process.

Office/Division	Corporate Action Center (CAC)			
Classification	Complex			
Type of Transaction	G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external clients			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		Thru letter sent to:		
		Philippine Health Insurance Corporation Head Office CityState Center, 709 Shaw Boulevard Oranbo, Pasig City **Presidential Complaint Center** pcc@malacanang.gov.ph (letter)		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Send query/feedback via ltter to PhilHealth Head Office or lodged to PCC	1. Sort and distribute letters to agents			Letter Channel Team Leader (Monitoring Office Designate)
	1.1 Read letter and check available contact information			Letter Channel Team Agent (Action Officer Designate)

2. Provide requested information	2.1 Contact client thru phone, text, or email (if available), ask/clarify concern and request for name and PIN and other required information as necessary			
	2.2 View client's profileusing Customer Service Management System (CSMS) and assess information needs of client (including othe aspects of participation in the National Health Insurance Program.)			
3, Receive initial response	3.1 Resolve concern through phone, text or email, if possible			
None	3.2 Prepare response letter using spiel and based on available information. **Note:** Response may be as follows: -Documentation of the resolution (if outrighly 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.			
	3.3 Review draft response letter and provide comments, if any.			CAC Head
	3.4 Revise draft response letter, if with comments			Letter Channel Team Agent (Action Officer Designate)
	3.5 Sign finalized response letter			CAC Head
4. Receive final response letter	4. Release response letter to client via email (if available) or thru PhilHealth Mailing Section			Releasing staff

	TOTAL	**None**	**7 working days**	

6. HANDLING OF COMPLEX CLIENT QUERIES AND FEEDBACK VIA SOCIAL MEDIA

Queries or feedback from external clients received by Corporate Action Center via "PhilHealth official" Facebook page, for endosement 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.

Office/Division	Corporate Action Center (CAC)			
Classification	Complex			
Type of Transaction	G2C-Government to Citizen, G2B-Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external clients			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		Corporate Action Center channel actioncenter@philhealth.gov.ph		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Send simple email to actioncenter@philhealth.gov.ph	1.1 Sort and distribute 80 valid emails to agents			
none	1.2 Read email and check available information for database look-up			
None	1.3 View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Healh Insurance Program)			
2. Receive final response	2.1 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	2.2 Encode transaction in CSMS/tally sheet.			
	2.3 Escalate complex transaction to Team Leader for resolution of other office.			
	2.4 Coordinate and endorse to responsible office thru CSMS, and record in CAC Log Sheet			
3. Provide requested information	3. Request aclient for additional information/documents required for processing, if applicable. **Note:** Includes at least 3 correct information validated against client's database recored for information security purposes, if applicable			
4. Receive services and/or final response	4.1 Conduct review and approval process and provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures. **Note:** These may also inclde 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.			
	4.2 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.			
	4.3 Review draft response letter			

	4.4 Revise draft response letter			
	4.5 Sign final respone			
5. Receive final response letter	5. Release response letter to client			
	5.2 Provide contact details and transaction reference number for follow-up			
	5.3Provide closing spiel			
	5.4 Encode transaction in CSMS/Tallysheet and close directly resolved transaction.			
6. Provide requested information	6. 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,			Social Media Team Leader (Monitoring Officer Designate)
7. Receive services and/or final responses	7.1 Conduct review and approval processes and 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.			
	7.2 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 that contact information for follow-up is duly communicated			
	TOTAL	**None**	**7 working days**	

7. HANDLING OF HIGHLY TECHNICAL CLIENT QUERIES AND FEEDBACK VIA CAC WALK-IN COUNTER

Highly technical queries or feedback from external clients vai CAC Walk-in Counter

Office/Division	Corporate Action Center (CAC)			
Classification	Highly Technical			
Type of Transaction	G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency			
Who may avail:	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		**CAC Walk-in Counter** Room 706, CityState Center, 709 Shae Boulevard, Oranbo, Pasig City		
For all othe complaints and queries: NONE Core processes on membership,collection, benefit availment and accreditation are not available at CAC.				
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Submit simple query/feedback at CAC Walk-in Counter	1. Respond with standard opening spiel			
2. Give consent on use of perosnal data in order to proceed with query	2. Secure consent on use of peronal data in the transaction and for quality assurance purposes			
3. Provide requested information	3.1 Ask/clarify client's concern as necessary and request for name and PIN and other required information.			

	4. View client's profile using 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 accomplush 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			
	10. coordinate thecnical transaction with concerned office, as necessary, and **provide advance copy of letter and attachments**			
	11. Prepare endorsement memorandum to responsible office, using spiel and based on available information.			
	12. Review draft endorsement			CAC Head
	13. Revise draft endorsement as necessary			Walk-in Agent (Action Officer Designate)
	14. Sign finalized endorsement letter			CAC Head
	15. Release endorsement memo to responsible office via official email and via CSMS			Email Team
7. Provide requested information	16. 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. Receiev services and/or final response	17. Conduct technical/management review and approval and 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	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	
None	19. Review draft response letter			
	20. Revise draft response letter as necessary			
	21. Sign final response			
6. Receive final response letter	22. Release respones letter to client via email (if available) or thru PhilHealth Mailing System.			
	TOTAL	**None**	**20 working days**	

8. HANDLING OF HIGHLY TECHNICAL CLIENT AND FEEDBACK VIA LETTER

Highly technical queries or feedback from external clients via letter, 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.

<table>
<tr><td>Office/Division</td><td colspan="4">Corporate Action Center (CAC)</td></tr>
<tr><td>Classification</td><td colspan="4">Highly Technical</td></tr>
<tr><td>Type of Transaction</td><td colspan="4">G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency</td></tr>
<tr><td>Who may avail:</td><td colspan="4">All external clients</td></tr>
<tr><td colspan="2">CHECKLIST OF REQUIREMENTS</td><td colspan="3">WHERE TO SECURE</td></tr>
<tr><td colspan="2">None</td><td colspan="3">Thru letter sent to
Philippine Health Insurance Corporation Head Office
CityState Center, 709 Shaw Boulevard Oranbo, Pasig City
Presidential Complaint Center
pcc@malacanang.gov.ph (letter)</td></tr>
<tr><td>CLIENT STEPS</td><td>AGENCY ACTION</td><td>FEES TO BE PAID</td><td>PROCESSING TIME</td><td>PERSON RESPONSIBLE (Position of Supervisor)</td></tr>
<tr><td>1. Send highly technical query/feedback via letter to PhilHealth Head Office</td><td>1. Assign letters to agents</td><td rowspan="3"></td><td>3 working days</td><td>Letter Channel Team Leader (Monitoring Officer Designate)</td></tr>
<tr><td></td><td>2. Read letter and check available contact information</td><td></td><td>Letter Channel Team Agent (Action Officer Designate)</td></tr>
<tr><td>2. Provide requested information</td><td>3. Contact client thru phone or text (if available), ask/clarify concern and request for name and PIN and other information/document, if lacking.</td><td></td><td></td></tr>
</table>

	4. View client's progile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Health Insurance Program.)			
	5. Coordinate technical transaction with concerned office, as necessary, and provide advance copy of letter and attachments			
	6. Encode transaction in CSMS and Long sheet			
	7. Prepare acknowledgment 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.			
	8. Review draft response letter and endorsement		3 working days	CAC Head
	9. Revise draft response and endorsement as necessary			Letter Channel Team Agent (Action Officer Designate)
	10. Sign finalized response and endorsement letter			CAC Head
3. Receive acknowledgment and initial response leter	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
	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			17 working days
5. Receive services, if applicable	14. Conduct technical review/approval process and provide services as may be related to the client's concern, in accorandce			

	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 services, and giving apology to the client.			
	15. Prepare final response letter to client using spiel and based on available information. Note: For servuces that have long processing time (i.e. claims, employer billing, claim appel, etc.). Current status may just be provided as final response, provided that the contact information for follow-up is duly communicated.			Action Officer Designate of Concerned Office
	17. Revise draft response letter as necessary			Action Officer Designate of Concerned Office
	18. Sign final response			Head of Other Office
6. Receive final response letter	19. Release response letter to client via email (if available)			Release of staff
	TOTAL	**None**	**20 working days**	

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9. HANDLING OF HIGHLY TECHNICAL CLIENT QUERIES AND FEEDBACK LODGED TO GOVERNMENT CHANNELS

Highly technical queries or feedback from external clients lodged to Government Channels, i.e. 8888, CSC-CCB and ARTA (with online system), for endorsement by CAC and for level 2 reolution of other office requiring review and approval process and provision of simple core services (i.e. membership, collection, claims, accreditation, etc.)

Office/Division	Corporate Action Center (CAC)
Classification	Highly Technical
Type of Transaction	G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency
Who may avail:	All external clients

CHECKLIST OF REQUIREMENTS	**WHERE TO SECURE**
None	**Anti-Red Tape Authority(ARTA):** complaints@arta.gov.ph 8-478-5093 **Presidential Complaint Center (PCC)** **8888** **Contact Center ng Bayan (CCB):** email@contactcenterngbayan.gov.ph 0908-881-6565

CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1.1 Client sends complex query/feedback thru Government Channel 1.2 Government Channel endorses feedback/transaction to CAC	1.1 Receive endorsement from Government Channel			CAC Technical Point Person
	1.2 Read client's concern and check available contact information.			

2. Provide requested information	2.1 Contact client thru phone or text (if available), ask/clarify concern and request for name and PIN and other required information as necessary.			
	2.2 Record initial action in Government Channel's online system and upload documentation. Contact information of CAC for follow-up is provided			
	2.3 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.)			
	2.4 Coordinate and endorse complex transaction with concerned office via email for documentation.			
	2.5 Encode transaction and initial actions in Government Channel's online system and in CSMS and log sheet.			
3. Provide requested information	3. 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.			Other Office (Action Officer Designate of Concerned Office)
4. Receive services and/or final response	4.1 Conduct review and approval process and provide services as may be related to the clients 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.			
	4.2 Prepare final response letter to client using spiel and based on available information.		3 working days	

	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 communication.			
	4.3 Record status of transaction in CSMS and endorse to CAC Technical Point Person for closure			
	4.4 Review draft response letter			
	4.5 Sign final response			
6. Receive final response letter	6.1 Release response letter to client via email (if available) or thru PhilHealth Mailing Section.			
	6.2 Record status of transaction in CSMS and endorse to CAC Technical Point Person for closure			
	6.3 Record resolution of transaction and upload documentation in Government Channel's online system. Contact information of CAC for follow-up is provided.			
	6.4 Close the transaction ticket in CSMS			
	TOTAL	**None**	**20 working days**	

10. HANDLING OF HIGHLY TECHNICAL CLIENT QUERIES AND FEEBACK THRU CALLBACK CHANNEL

Technical queries or feedback from external clients via Callback Channel 0917-898-7442

Office/Division	Corporate Action Center (CAC)
Classification	Highly Technical
Type of Transaction	G2C-Government to Citizen, G2B-Government to Business Entity, G2G-Government to Government agency
Who may avail:	All external clients

CHECKLIST OF REQUIREMENTS	**WHERE TO SECURE**
None	Corporate Action Center Callback Channel: 0917-898-7442

CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Send the following highly technical text message to 0917-898-7442 "PHIC callback [space] Mobile No. or Metro Manila Landline [space] details of simple concern".	1. Retrieve requests for callback from SMS System and endorse to Callback Team Leader.			Receiving staff
2. Wait for callback within 3 days	2. Sort and distribute a minimum of 80 valid queries to each assigned agent per day.			Call Channel Team Leader (Monitoring Officer Designate)
3. Receive Call from agent.	3. Call the client and use the standard opening spiel.			
4. Give consent on use of personal data in order to proceed with query	4. Secure consent on use of personal data in the transaction and for quality assurance purposes.			
5. Provide requested information	5. Ask/clarify client's concern as necessary and request for name and PIN and other required information			

None	5.1 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.)			
6. Answer security questions	6. Perform information security protocol, if involving sensitive personal information			
7. Receive response	7.1 Provide response to the query or feedback including other relevant information using spiels			
	7.2 Provide contact details and transaction reference number for follow-up			
	7.3 Encode transaction in CSMS/Logsheet and close directly resolved transaction.			
	7.4 Escalate complex transaction to Team Leader for level 2 resolution of other office.			
	7.5 Coordinate and endorse transaction to reponsible office thru CSMS, and recoird in CAC Logsheet			Call Channel Team Leader (Monitoring Officer Designate)
8. Provide requested information	8. 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.			
9. Receive services and/or final response	9.1 Conduct review and approval process and provide services as may be realted to the client's concern, in accordance with existing corporate policies and procedures. Note: This may include appropriate redress for non-confirming services i.e. re-work, correction of errors giving of apology to the client, correction of other affected processes or services.			

	9.2 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.			
	TOTAL	**None**	**20 working days**	

Note: TAT is based on CAC capacity with outsourced provider to manage regular volume of requests for callback, with quota set at 80 queries per agent per day. Callback requests are deemed expired after 72 hours. As allowed under EODB Law, TAT extension of additional 3 working days may be ap=plied for simple transactions, provided that, client is informed prior to deadline.

11. HANDLING OF HIGHLY TECHNICAL 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.

Office/Division	Corporate Action Center (CAC)			
Classification	Highly Technical			
Type of Transaction	G2C-Government to Citizen, G2B-Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external clients			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		Corporate Action Center channel: actioncenter@philhealth.gov.ph		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Send simple email to actioncenter@philhealth.gov.ph	1.1 Sort and distribute 80 valid emails to agents			Email Team Lead (Monitoring Officer Designate
none	1.2 Read email and check available information for database look-up			
None	1.3 View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Healh Insurance Program)			
2. Receive final response	2.1 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	2.2 Encode transaction in CSMS/tally sheet.			
	2.3 Escalate complex transaction to Team Leader for resolution of other office.			
	2.4 Coordinate and endorse to responsible office thru CSMS, and record in CAC Log Sheet			Email Team Leader (Monitoring Officer Designate)
3. Provide requested information	3. Request aclient for additional information/documents required for processing, if applicable. **Note:** Includes at least 3 correct information validated against client's database recored for information security purposes, if applicable			
4. Receive services and/or final response	4.1 Conduct review and approval process and provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures. **Note:** These may also inclde 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.			
	4.2 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.			
	4.3 Review draft response letter			
	4.4 Revise draft response letter			
	4.5 Sign final respone			
5. Receive final response letter	5. Release response letter to client			
	TOTAL	**None**	**20 working days**	

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

12. HANDLING OF HIGHLY TECHNICAL CLIENT QUERIES AND FEEDBACK VIA SOCIAL MEDIA

Queries or feedback from external clients received by Corporate Action Center via "PhilHealth official" Facebook page, for endosement 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.

Office/Division	Corporate Action Center (CAC)			
Classification	Highly Technical			
Type of Transaction	G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external clietns			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		Corporate Action Center channels: "PhilHealthOfficial Facebook page"		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Send simple email to actioncenter@philhealth.gov.ph	1.1 Sort and distribute 80 valid emails to agents			
none	1.2 Read email and check available information for database look-up			
None	1.3 View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Healh Insurance Program)			
2. Receive final response	2.1 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	2.2 Encode transaction in CSMS/tally sheet.			
	2.3 Escalate complex transaction to Team Leader for resolution of other office.			
	2.4 Coordinate and endorse to responsible office thru CSMS, and record in CAC Log Sheet			
3. Provide requested information	3. Request aclient for additional information/documents required for processing, if applicable. **Note:** Includes at least 3 correct information validated against client's database recored for information security purposes, if applicable			
4. Receive services and/or final response	4.1 Conduct review and approval process and provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures. **Note:** These may also inclde 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.			
	4.2 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.			
	4.3 Review draft response letter			

	4.4 Revise draft response letter			
	4.5 Sign final respone			
5. Receive final response letter	5. Release response letter to client			
	5.2 Provide contact details and transaction reference number for follow-up			
	5.3Provide closing spiel			
	5.4 Encode transaction in CSMS/Tallysheet and close directly resolved transaction.			
6. Provide requested information	6. 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,			Social Media Team Leader (Monitoring Officer Designate)
7. Receive services and/or final responses	7.1 Conduct review and approval processes and 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.			Other office (Action Officer Designate of Concerned Office)
	7.2 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 that contact information for follow-up is duly communicated			
None	7.3 Review of draft response letter			
None	7.4 Revise draft response letter as necessary			

None	7.5 Sign final response			
8. Receive final response letter	8. Release response letter to client			
	TOTAL	**None**	**20 working days**	

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

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

Office/Division	Corporate Action Center (CAC)			
Classification	Simple			
Type of Transaction	G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external clients			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		**Anti-Red Tape Authority(ARTA):** complaints@arta.gov.ph 8-478-5093 **Presidential Complaint Center (PCC)** **8888** **Contact Center ng Bayan (CCB):** email@contactcenterngbayan.gov.ph 0908-881-6565		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1.1 Client sends query/feedback thru Government Channel 1.2 Government Channel endorses feedback/transaction to CAC	1.1 Receive endorsement from Government Channel	None	3 working days	CAC Technical Point Person
	1.2 Read client's concern and check available contact information.			

2. Provide requested information	2.1 Contact client thru phone or text (if available), ask/clarify concern and request for name and PIN and other required information as necessary.			
	2.2 Record initial action in Government Channel's online system and upload documentation. Contact information of CAC for follow-up is provided			
	2.3 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.)			
3. Receive final response	3.1 Immediately resolve simple concern through text or email for documentation.			
	3.2 Record resolution of transaction in Government Channel's online system and upload documentation. Contact information of CAC for follow-up is provided.			
	3.3 Record transaction in CSMS and close directly resolved transaction.			
	TOTAL	**None**	**3 working days**	

14. HANDLING OF SIMPLE CLIENT QUERIES AND FEEDBACK THRU CALLBACK CHANNEL

Simple queries or feedback from external clients via Callback Channel 0917-898-7442

Office/Division	Corporate Action Center (CAC)			
Classification	Simple queries or feedback from external clients via Callback Channel 0917-898-7442			
Type of Transaction	G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external Clients			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		Corporate Action Center Callback Channel: 0917-898-7442		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Send the following simple text message to 0917-898-7442 "PHIC callback [space] Mobile No. or Metro Manila Landline [space] details of simple concern".	1. Retrieve requests for callback from SMS System and endorse to Callback Team Leader.			Receiving staff
2. Wait for callback within 3 days	2. Sort and distribute a minimum of 80 valid queries to each assigned agent per day.			Call Channel Team Leader (Monitoring Officer Designate)
3. Receive Call from agent.	3. Call the client and use the standard opening spiel.			Call Agent (Action Officer Designate)
4. Give consent on use of personal data in order to proceed with query	4. Secure consent on use of personal data in the transaction and for quality assurance purposes.			
5. Provide requested information	5.1 Ask/clarify client's concern as necessary and request for name and PIN and other required information.			

	5.2 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.)			
6. Answer security questions	6. Perform information security protocol, if involving sensitive personal information			
7. Receive response	7.1 Provide response to the query or feedback including other relevant information using spiels			
	7.2 Provide contact details and transaction reference number for follow-up			
	7.3 Encode transaction in CSMS/Logsheet and close directly resolved transaction.			
	7.4 Escalate complex transaction to Team Leader for level 2 resolution of other office.			
	7.5 Coordinate and endorse transaction to responsible office thru CSMS, and record in CAC Logsheet			Call Channel Team Leader (Monitoring Officer Designate)
	TOTAL	**None**	**3 working days**	

Note: TAT is based on CAC capacity with outsourced provider to manage regular volume of requests for callback, with quota set at 80 queries per agent per day. Callback requests are deemed expired after 72 hours. 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.

15. HANDLING OF SIMPLE CLIENT QUERIES AND FEEBACK THRU EMAIL

Simple ministerial queries or feedback from external clients via actioncenter@philhealth.gov.ph for direct resolution of CAC.

Office/Division	Corporate Action Center (CAC)			
Classification	SIMPLE			
Type of Transaction	G2C-Government to Citizen, G2B-Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external clients			
Note: TAT is based on CAC capacity with outsourced provider to manage regular volume of requests for callback, with quota set at 80 queries per agent per day. Callback requests are deemed expired after 72 hours. As allowed under EODB Law, TAT extension of additional 3 working days may be ap=plied for simple transactions, provided that, client is informed prior to deadline.				
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		Corporate Action Center		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Send simple email to actioncenter@philhealth.gov.ph	1.1 Sort and distribute 80 valid emails to agents			Email Team Leader (Monitoring Officer Designate)
None	1.2 Read email and check available information for database look-up			
None	1.3 View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including aspects of participation in the National Health Insurance Program.)			
2. Receive final response	2.1 Respond to email using spiel based on available information. Note: Response may be as follows:			

	-Final response (if information/documents provided is sufficient to make a response) -Request for client to provide additional information/documents Contact information of CAC for follow-up is provided.			
	2.2 Encode transactions in CSMS/Tally sheet and close directly resolved transaction.			
	Total:	**None**	**3 working days**	

Note: TAT is based on CAC capacity with outsourced provider to manage regular volume of requests for callback, with quota set at 80 queries per agent per day. Callback requests are deemed expired after 72 hours. As allowed under EODB Law, TAT extension of additional 3 working days may be ap=plied for simple transactions, provided that, client is informed prior to deadline.

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

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

Office/Division	Corporate Action Center (CAC)				
Classification	Simple				
Type of Transaction	G2C- Government to Citizen, G2B- Government to Business Entity, G2G-Government to Government agency				
Who may avail:	All external clients				
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**			
None		**CAC Walk-in Counter** Room 706, CityState Center, 709 Shae Boulevard, Oranbo, Pasig City			
Core processes on membership, collection, benefit availment and accreditation are not availlable at CAC.					
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**	
1. Submit simple query/feedback at CAC Walk-in Counter	1. Respond with standard opening spiel				
2. Give consent on use of perosnal data in order to proceed with query	2. Secure consent on use of peronal data in the transaction and for quality assurance purposes				
3. Provide requested information	3.1 Ask/clarify client's concern as necessary and request for name and PIN and other required information.				
	3.2 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	4. Perform information security protocol, if involving sensitive personal information			
5. Receive final response and information materials	5.1 Provide response to the query or feedback including other relevant information using spiels			
	5.2 Provide contact details and transaction reference number for follow-up			
	5.3 Encode transaction in CSMS and log sheet and close directly resolved transaction.			
	TOTAL	**None**	**8 minutes**	

17. HANDLING OF SIMPLE CLIENT QUERIES AND FEEDBACK VIA SOCIAL MEDIA

Simple and ministerial queries or feedabck from external clients via 'PhilHealthOfficial" Facebook page for direct resolution by CAC.

Office/Division	Corporate Action Center (CAC)			
Classification	Highly Technical			
Type of Transaction	G2C-Government to Citizen, G2B-Government to Business Entity, G2G-Government to Government agency			
Who may avail:	All external clients			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
None		Corporate Action Center channel "PhilHealthOfficial Facebook page "		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
1. Send simple email to actioncenter@philhealth.gov.ph	1.1 Sort and distribute 80 valid emails to agents			
none	1.2 Read email and check available information for database look-up			
None	1.3 View client's profile using Customer Service Management System (CSMS) and assess information needs of client (including other aspects of participation in the National Healh Insurance Program)			
2. Receive final response	2.1 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	2.2 Encode transaction in CSMS/tally sheet.			
	2.3 Escalate complex transaction to Team Leader for resolution of other office.			
	2.4 Coordinate and endorse to responsible office thru CSMS, and record in CAC Log Sheet			
3. Provide requested information	3. Request aclient for additional information/documents required for processing, if applicable. **Note:** Includes at least 3 correct information validated against client's database recored for information security purposes, if applicable			
4. Receive services and/or final response	4.1 Conduct review and approval process and provide services as may be related to the client's concern, in accordance with existing corporate policies and procedures. **Note:** These may also inclde 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.			
	4.2 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.			
	4.3 Review draft response letter			
	4.4 Revise draft response letter			
	4.5 Sign final respone			

5. Receive final response letter	5. Release response letter to client			
	5.2 Provide contact details and transaction reference number for follow-up			
	5.3Provide closing spiel			
	5.4 Encode transaction in CSMS/Tallysheet and close directly resolved transaction.			
	TOTAL	**None**	**3 working days**	

CORPORATE MARKETING DEPARTMENT

1. REQUEST FOR SPONSORSHIP OF EXTERNAL EVENT

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

Office/Division	COPORATE MARKETING DEPARTMENT (CorMar)	
Classification	Highly Technical	
Type of Transaction	All (G2G, G2B, G2C)	
Who may avail:	Business entities or other government organizations	
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**
1. Sponsorship proposal		
2. Company/Proponent Profile including nature of request such as target audience, sponsorship package/office, and media value		
3. BIR Form 2303 (Certificate of Registration)		
4. Sample Official Receipt (OR)		
5. Event Sponsorship Review (ESR)		
6. Letter of Approval		
7. Originally signed QLnotarized Sponsorship Agreement		
8. Billing Statement		Proposing entity
9. Certificate of Availability of Funds (CAF)		
10. Survey Forms		
11. After-Event Report		
12. Copy of posting/advertising/display during event		Proposing entity
13. Sponsorship Certification		
14. Budget Utilization Request (BUR)		
15. BIR Forms 2306/2307		
16. Other documentary requirements per CO No. 2020-0019		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1. Send letter request for sponsorship proposal to CorMar together with Company Profile and if applicable, Copy of BIR Form 2303 and Sample OR	1.1 Receive request from requesting office	None		
	1.2 Encode in the Document Tracking System (DTS)			
	1.3. Endorse to Events Mangement Team (EMT)			
	1.4 Evaluate proposal based on criteria			
	1.5 Prepare Event Sponsorship Review (ESR)			
	1.6 Endorse ESR to VP-CAG for approval a. Approved: Proceed to No. 2.1 b. Disapproved: Send regret letter			
2. Receive approval or regret letter	2.1 Prepare letter of approval and Sponsorship Agreement			
3. Sign the Sponsorship Agreement	3.1 Sign and/or notarize sponsorship Agreement			
4. Receive documents and materials/services	4.1 Provide copy of agreement and materials/services			
	4.2 Prepare Certificate of Availability of Funds (CAF) for processing of Comptrollership Department (if applicable)			Budget Officer Designate
5. Conduct event	5.1 Set-up materials as per agreed media values			
6. Deliver/provide agreed media values per approved schedule	6.1 Check and monitor compliance as per agreed deliverables and to PhilHealth branding standards			
	6.2 Document event			

7. Send Billing Statement and other document of deliverables	7.1 Prepare After Event Report together with documentation, event paraphernalia, and summary of survey results		5 days	EMT
	7.2 Review report and approve		2 days	SM - CorMar; VP - CAG
	7.3 Prepare Budget Utilization Request (BUR) and print Disbursement Voucher (DV); attach BIR Forms 2306-2307 and submit to Comptrollership Department for payment processing (if applicable)		3 days	BOD; Procurement Officer Designate
	TOTAL	**None**	**20 days**	

SOCIAL HEALTH INSURANCE ACADEMY

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

Office/Division	Social Health Insurance Academy (SHIA)			
Classification	Highly Technical			
Type of Transaction	G2C – Government to External			
Who may avail:	Healthcare Providers staff or any private individual			
CHECKLIST OF REQUIREMENTS		**WHERE TO SECURE**		
Certificate Course on ICD-10 Checklist		Social Health Insurance Academy (SHIA)		
CLIENT STEPS	**AGENCY ACTION**	**FEES TO BE PAID**	**PROCESSING TIME**	**PERSON RESPONSIBLE (Position of Supervisor)**
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		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		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.		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		1 Day	ICD-10 secretariat
NONE	5. Prepare Corporate Personnel Order (CPO) and other documentary requirements.		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.		5 days	ICD-10 secretariat
NONE	7. Prepare presentation materials, participants kits, ICD-10 books, etc. (based on checklist)		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.			
	9. Conduct the Certificate Course on ICD-10 Coding			
	TOTAL	**None**	**2 days**	