

HEALTH FINANCE POLICY SECTOR

EXTERNAL SERVICES

Volume 9

OFFICE OF THE SENIOR VICE-PRESIDENT - HEALTH FINANCE POLICY SECTOR PHILHEALTH CARES MANAGEMENT OFFICE PHILHEALTH MAKASAKIT CENTER



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OFFICE OF THE SENIOR VICE-PRESIDENT – HEALTH FINANCE POLICY SECTOR

1. INQUIRIES FROM INTERNAL/EXTERNAL STAKEHOLDERS THRU EMAIL/MAIL

Action on Inquiries received by the office through email

Office:	Office of the Senior Vice President						
Classification:	Complex						
Type of Transaction:	G2G	32G					
Who May Avail:	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		
	TOTAL		7 days	



PHILHEALTH CARES MANAGEMENT OFFICE

1. CONDUCT OF PHILHEALTH PATIENT EXIT SURVEY

Conduct of PhilHealth Patient Exit Survey

Office:	PhilHealth CARES					
Classification:	Simple					
Type of Transaction:	G2C-Government to Client	G2C-Government to Client				
Who May Avail:	Clients who availed PhilHealth Be	enefits				
CHECKLIST OF REQ	UIREMENTS		W	HERE 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		
	TOTAL:	None	6-12 minutes			



2. CUSTOMER ASSISTANCE

Customer Assistance (Check Member's Eligibility, Issue pertinent forms)

Office:	PhilHealth CARES				
Classification:	Simple				
Type of Transaction:	G2C-Government to Cli	ent			
Who May Avail:	Clients within the Hosp	ital			
CHECKLIST OF REQUIREMENTS			WH	ERE 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-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	
	TOTAL				



3. RESPONDING TO SIMPLE INQUIRIES THRU E-MAIL/MAIL/SOCIAL MEDIA

Responding to the inquiries of field-deployed P-CARES on budget utilization, policy clarification, interpretation and implementation

Office/Division	PhilHealth CARES Management Office					
Classification	Simple					
Type of Transaction	G2G, G2C, G2B					
Who may avail:	ALL					
CHECKLIST OF REQUIREMENTS	•	WHERE TO SECURE				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)		
1. Send messages/inquiry	1.1. Receive messages/inquiry through phone or social			Technical Staff in charge		
through phone or social media.	media.	None	3 Minutes	in concerned Area		
	1.2. Evaluate Inquiry			Technical Staff in charge		
		None	3 Minutes	in concerned Area		
	1.3. Forward Inquiry to the concern PCMO staff or			Technical Staff in charge		
	office/department	None	10 Minutes	in concerned Area		
2. Receiving of Documents	2.1. Stamp "Received"on the receiving copy. Indicate					
	the dates when the documents were receive and affix					
	signature.	None	3 minutes	Receiving Clerk		
	2.2. Encode the documents in the tracking system.	None	3 minutes	Receiving Clerk		
	2.3. Assign inquiry to concerned Technical Staff	None	10 minutes	Head		
	2.4. Review the documents and make necessary					
	comments.	None	30 minutes	Technical Staff		
	2.5. Encode the processed document for record					
	purposes.	None	10 minutes	Technical Staff		
	2.6. Secure the signature of the staff from the receiving					
	office as proof of receipt and ensure that the date of					
	receipt is indicated. None 10 minutes Clerk					
	TOTAL	None	1 hour and 12 minutes			



PHILHEALTH MALASAKIT CENTER

1. PHILHEALTH- MALASAKIT CENTER CUSTOMER ASSISTANCE

Check Member's Eligibility and Issue pertinent forms

Office:	PhilHealth Malasakit Center					
Classification:	Simple					
Type of Transaction:	G2C- Government to Client					
Who May Avail:	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		
TOTAL:	•		3-12 minutes			