



MEMBER MANAGEMENT GROUP

EXTERNAL SERVICES

Volume 7

**MEMBER MANAGEMENT GROUP
SPECIAL PROGRAM DEPARTMENT**

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MEMBER MANAGEMENT GROUP

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

This service allows for the adjustment, correction and deletion of premium contributions (as necessary).

Office/Division	Member Management Group - (Special Programs Department)	
Classification	Complex	
Type of Transaction	G2G– Government to Government; G2B- Government to Business Entity	
Who may avail:	Migrant Workers, Filipinos Living Abroad and Filipinos with Dual Citizenship	
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE
<p>Walk-in</p> <p>Original copy of duly accomplished Data Amendment Request Form (DARF)</p> <p>Photocopy of official receipt or any proof of premium payment</p> <p>Photocopy of at least 1 valid photo-bearing ID of the member (original ID needs to be presented)</p> <p>Additional requirements if through a representative:</p> <p>Original copy of authorization letter issued by the member</p> <p>Photocopy of at least 1 valid photo-bearing ID of the representative (original ID needs to be presented) and the member</p>		<p>DARF can be secured from any PhilHealth office or requested through ofp@philhealth.gov.ph.</p>
<p>Through e-mail</p> <p>Scanned copy of duly accomplished Data Amendment Request Form (DARF)</p> <p>Scanned copy of official receipt or any proof of premium payment</p> <p>Scanned copy of at least 1 valid photo-bearing ID of the member</p> <p>Additional requirements if through a representative:</p> <p>Scanned copy of authorization letter issued by the member</p> <p>Scanned copy of at least 1 valid photo-bearing ID of the representative and the member</p>		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1. Submit the required documents to the assigned staff (for walk-in) or email the same to ofp@philhealth.gov.ph (through e-mail).	1.1 Receive the required documents from the member/representative (for walk-in) or print the required documents (through e-mail).	None	1 day per DARF (Walk-in) 3 days per DARF (Through e-mail; but still depends on the number of e-mails received)	Social Insurance Assistant I or any authorized staff of the Special Programs Department
	1.2 Evaluate and review the received documents from other offices such as PhilHealth Regional Offices or ACAs.	None		
	1.3 Print the required documents from other offices such as PhilHealth Regional Offices or ACAs.	None		
2. Receives the Reply / Resolutions / Clarifications / Recommendations.	2.1. Check for the completeness of documents and correctness of data.	None		
	2.2. Process adjustment, correction or deletion of premium contribution.	None		
	2.3. Inform the member/representative that request has already processed and the amended data can be verified through the PhilHealth Member Portal.	None		
	2.4. If the request has been received from other offices, endorse the amended data back to the requesting office.	None		
	TOTAL	None	1 day per DARF for walk-in 3 days per DARF for e-mail	

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

This service allows members to update, amend, or correct their information and membership category.

Office/Division	Member Management Group - Special Program Department
Classification	Simple
Type of Transaction	G2G– Government to Government; G2C- Government to Citizen G2B- Government to Business Entity
Who may avail:	Concerned Internal / External CLIENTS of the Member Management Group: e.g., Members; Employers; Hospitals; or Other Government Agencies
CHECKLIST OF REQUIREMENTS	
WHERE TO SECURE	
To add dependents or correct data of dependent	
<p>Walk-in</p> <p>Original copy of duly accomplished PhilHealth Member Registration Form (PMRF)</p> <p>Photocopy of at least 1 valid photo-bearing ID of the member (original ID needs to be presented)</p> <p>Spouse: Photocopy of Marriage Contract/Certificate</p> <p>Children: Photocopy of Birth Certificate or proof of adoption or guardianship</p> <p>Parents: Photocopy of Birth Certificate of member AND Photocopy of ANY of the following: Birth Certificate of parent, Senior Citizen's ID issued by the Office of Senior Citizen Affairs (OSCA), or any valid ID indicating the date of birth of parent.</p> <p>Additional requirements if through a representative:</p> <p>Original copy of authorization letter issued by the member</p> <p>Photocopy of at least 1 valid photo-bearing ID of the representative (original ID needs to be presented)</p>	<p>PMRF and ER2 can be secured from any PhilHealth office, downloaded from the PhilHealth website, or requested through ofp@philhealth.gov.ph.</p>
<u>Through e-mail</u>	
<p>Scanned copy of duly accomplished PhilHealth Member Registration Form (PMRF)</p> <p>Selfie of the member holding a valid ID</p>	

<p>Scanned copy of at least 1 valid photo-bearing ID of the member</p> <p>Spouse: Scanned copy of Marriage Contract/Certificate</p> <p>Children: Scanned copy of Birth Certificate or proof of adoption or guardianship</p> <p>Parents: Scanned copy of Birth Certificates of parent and member</p> <p>Additional requirements if through a representative:</p> <p>Scanned copy of authorization letter issued by the member</p> <p>Scanned copy of at least 1 valid photo-bearing ID of the representative and the member</p>	
<p>To update or correct civil status</p>	
<p>Walk-in</p> <p>Original copy of duly accomplished PhilHealth Member Registration Form (PMRF)</p> <p>Photocopy of at least 1 valid photo-bearing ID of the member (original ID needs to be presented)</p> <p>Photocopy of Marriage Contract/Certificate</p> <p>Photocopy of Death Certificate of spouse</p> <p>Photocopy of Certificate of No Marriage Record (CENOMAR)</p> <p>Photocopy of legal documents as proof of Annulment of Marriage, Legal Separation or Declaration of Absolute Nullity of Marriage</p> <p>Additional requirements if through a representative:</p> <p>Original copy of authorization letter issued by the member</p> <p>Photocopy of at least 1 valid photo-bearing ID of the representative (original ID needs to be presented)</p> <p>Through e-mail</p> <p>Scanned copy of duly accomplished PhilHealth Member Registration Form (PMRF)</p> <p>Selfie of the member holding a valid ID</p> <p>Scanned copy of at least 1 valid photo-bearing ID of the member</p> <p>Scanned copy of Marriage Contract/Certificate</p>	

<p>Scanned copy of Death Certificate of spouse Scanned copy of Certificate of No Marriage Record (CENOMAR) Scanned copy of legal documents as proof of Annulment of Marriage, Legal Separation or Declaration of Absolute Nullity of Marriage</p> <p>Additional requirements if through a representative: Scanned copy of authorization letter issued by the member Scanned copy of at least 1 valid photo-bearing ID of the representative and the member</p>	
To update membership category to Overseas Filipino Workers/Migrant Workers	
<p>Walk-in Original copy of duly accomplished PhilHealth Member Registration Form (PMRF) Photocopy of at least 1 valid photo-bearing ID of the member (original ID needs to be presented) Land-based OFW: Photocopy of any of the following as proof of being an active OFW: Valid Overseas Employment Certificate (OEC) or E-receipt Valid Working Visa/ Re-entry Permit Valid Job Employment Contract Valid workers' Identification (ID) Card issued by the host country (i.e. Hong Kong ID, Iqama of Saudi, Permesso d' Soggiorno and Carta d' Identita of Italy) Any other equivalent document that will prove that the member is an active OFW, subject to the approval of authorized PhilHealth officer. Sea-based OFW: Original copy of PhilHealth Report of Employee-Members (ER2) duly accomplished by current employer/manning agency</p> <p>Additional requirements if through a representative: Original copy of authorization letter issued by the member Photocopy of at least 1 valid photo-bearing ID of the representative (original ID needs to be presented)</p>	

<p>Through e-mail</p> <p>Scanned copy of duly accomplished PhilHealth Member Registration Form (PMRF)</p> <p>Selfie of the member holding a valid ID</p> <p>Scanned copy of at least 1 valid photo-bearing ID of the member</p> <p>Land-based OFW: Scanned copy of any of the following as proof of being an active OFW:</p> <p>Valid Overseas Employment Certificate (OEC) or E-receipt</p> <p>Valid Working Visa/ Re-entry Permit</p> <p>Valid Job Employment Contract</p> <p>Valid workers' Identification (ID) Card issued by the host country (i.e. Hong Kong ID, Iqama of Saudi, Permesso d' Soggiorno and Carta d' Identita of Italy)</p> <p>Any other equivalent document that will prove that the member is an active OFW, subject to the approval of authorized PhilHealth officer.</p> <p>Sea-based OFW: Scanned copy of PhilHealth Report of Employee-Members (ER2) duly accomplished by current employer/manning agency</p> <p>Additional requirements if through a representative:</p> <p>Scanned copy of authorization letter issued by the member</p> <p>Scanned copy of at least 1 valid photo-bearing ID of the representative and the member</p>				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1.1 Submit the required documents to the assigned staff (for walk-in) or email the same to ofp@philhealth.gov.ph (through e-mail).	1.1 Receive the required documents from the member/representative (for walk-in) or print the required documents (through e-mail).	None	10 minutes per PMRF (Walk-in) 3 days (Through e-mail;	Social Insurance Assistant I or any authorized staff of the

1.2 Check the Member Data Record (MDR) and verify if all data are correct.	1.2 Check for the completeness of documents and correctness of data.		but still depends on the number of e-mails received)	Special Programs Department
	1.3 Process the updating, amendment, or correction of member information and membership category, as requested.			
	1.4 Issue updated Member Data Record (MDR) (walk-in) or send an updated MDR to the member's email address (through e-mail).			
	TOTAL	None	10 minutes per PMRF (Walk-in) 3 days (Through e-mail; but still depends on the number of e-mails received)	

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

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

Office/Division	Member Management Group - (Special Programs Department)
Classification	Simple
Type of Transaction	G2C - Government to Citizen
Who may avail:	Migrant Workers, Filipinos Living Abroad and Filipinos with Dual Citizenship
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE
Walk-in Original copy of duly accomplished PhilHealth Member Registration Form (PMRF) Photocopy of Birth/Baptismal Certificate with registry number or any valid government issued Identification Card (ID) with date of birth such as, but not limited to (original document needs to be presented): Passport Driver's License Professional Regulations Commission (PRC) ID Integrated Bar of the Philippines (IBP) ID National Bureau of Investigation (NBI) Clearance Police Clearance Postal ID Voter's ID GSIS e-Card or SSS UMID Card Senior Citizen ID OWWA ID OFW ID TIN ID DSWD ID Government Office and Government Owned & Controlled Corporation (GOCC) ID, e.g. AFP ID, HDMF ID	<p>PMRF and ER2 can be secured from any PhilHealth office, downloaded from the PhilHealth website, or requested through ofp@philhealth.gov.ph.</p>

<p>Company IDs issued by private entities or institutions registered with or supervised or regulated either by the Bangko Sentral ng Pilipinas (BSP), Securities and Exchange Commission (SEC) or Insurance Commission (IC)</p> <p>Photocopy of any of the following as proof of being an active OFW:</p> <p>Land-based OFW</p> <p>Valid Overseas Employment Certificate (OEC) or E-receipt</p> <p>Valid Working Visa/ Re-entry Permit</p> <p>Valid Job Employment Contract</p> <p>Valid workers' Identification (ID) Card issued by the host country (i.e. Hong Kong ID, Iqama of Saudi, Permesso d' Soggiorno and Carta d' Identita of Italy)</p> <p>Any other equivalent document that will prove that the member is an active OFW, subject to the approval of authorized PhilHealth officer.</p> <p>Sea-based OFW</p> <p>PhilHealth Report of Employee-Members (ER2) duly accomplished by current employer/manning agency</p> <p>Photocopy of any of the following as proof of income, subject to PhilHealth validation:</p> <p>Land-based OFW</p> <p>Valid Overseas Employment Certificate (OEC) or E-receipt</p> <p>Valid Job Employment Contract</p> <p>Valid Overseas Employment Offer Letter</p> <p>Certificate of Employment with Income</p> <p>Payslip (current)</p> <p>Other document PhilHealth may deem acceptable</p> <p>Filipinos with Dual Citizenship and other Filipinos living abroad</p> <p>Income Tax Return</p> <p>Duly notarized affidavit of income declaration</p>	
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<p>Other acceptable proof of income, subject to PhilHealth validation</p> <p>Additional requirements if through a representative: Original copy of authorization letter issued by the member Photocopy of at least 1 valid photo-bearing ID of the representative (original ID needs to be presented)</p>	
<p>Through e-mail</p> <p>Scanned copy of duly accomplished PhilHealth Member Registration Form (PMRF)</p> <p>Scanned copy of Birth/Baptismal Certificate with registry number or any valid government issued Identification Card (ID) with date of birth such as, but not limited to (registrant needs to also send a photo/selfie of himself/herself holding the valid ID):</p> <p>Passport Driver's License Professional Regulations Commission (PRC) ID Integrated Bar of the Philippines (IBP) ID National Bureau of Investigation (NBI) Clearance Police Clearance Postal ID Voter's ID GSIS e-Card or SSS UMID Card Senior Citizen ID OWWA ID OFW ID TIN ID</p>	

<p>DSWD ID</p> <p>Government Office and Government Owned & Controlled Corporation (GOCC) ID, e.g. AFP ID, HDMF ID</p> <p>Company IDs issued by private entities or institutions registered with or supervised or regulated either by the Bangko Sentral ng Pilipinas (BSP), Securities and Exchange Commission (SEC) or Insurance Commission (IC)</p> <p>Scanned copy of any of the following as proof of being an active OFW:</p> <p>Land-based OFW</p> <p>Valid Overseas Employment Certificate (OEC) or E-receipt</p> <p>Valid Working Visa/ Re-entry Permit</p> <p>Valid Job Employment Contract</p> <p>Valid workers' Identification (ID) Card issued by the host country (i.e. Hong Kong ID, Iqama of Saudi, Permesso d' Soggiorno and Carta d' Identita of Italy)</p> <p>Any other equivalent document that will prove that the member is an active OFW, subject to the approval of authorized PhilHealth officer.</p> <p>Sea-based OFW</p> <p>PhilHealth Report of Employee-Members (ER2) duly accomplished by current employer/manning agency</p> <p>Scanned copy of any of the following as proof of income, subject to PhilHealth validation:</p> <p>Land-based OFW</p> <p>Valid Overseas Employment Certificate (OEC) or E-receipt</p> <p>Valid Job Employment Contract</p> <p>Valid Overseas Employment Offer Letter</p> <p>Certificate of Employment with Income</p> <p>Payslip (current)</p> <p>Other document PhilHealth may deem acceptable</p>	
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Filipinos with Dual Citizenship and other Filipinos living abroad Income Tax Return Duly notarized affidavit of income declaration Other acceptable proof of income, subject to PhilHealth validation Additional requirements if through a representative: Scanned copy of authorization letter issued by the member Scanned copy of at least 1 valid photo-bearing ID of the representative and the member				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1.1 Submit the required documents to the assigned staff (for walk-in) or email the same to ofp@philhealth.gov.ph (through e-mail).	1.1 Receive the required documents from the member/representative (for walk-in) or print the required documents (through e-mail).	Registration does not require a service fee. Contributions based on premium schedule shall be paid in any PhilHealth office or accredited collecting agent.	10 minutes per PMRF (Walk-in)	Social Insurance Assistant I or any authorized staff of the Special Programs Department
1.2 Check the Member Data Record (MDR) and PhilHealth Identification Card (PIC) and verify if all data are correct.	1.2 Check for the completeness of documents and correctness of data.		3 days (Through e-mail; but still depends on the number of e-mails received)	
1.3 Pay the required premium contributions in any PhilHealth office or accredited collecting agent and keep the official receipt.	1.3 Check database if registrant is indeed not yet a member: If not yet a member, register accordingly. If already a member, inform the member and proceed with updating the membership category, as applicable.			

	1.4 Issue updated Member Data Record (MDR) and PhilHealth Identification Card (PIC) (walk-in) or send an updated MDR to the member's email address (through e-mail).			
	2.2. Process adjustment, correction or deletion of premium contribution.			
	1.5 Advise member on the contributions pursuant to the premium schedule and ask to pay the premium contributions at the nearest PhilHealth office or accredited collecting agent.			
	TOTAL	Registration does not require a service fee. Contributions based on premium schedule shall be paid in any PhilHealth office or accredited collecting agent.	10 minutes per PMRF (Walk-in) 3 days (Through e-mail; but still depends on the number of e-mails received)	

4. 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

Office/Division	Member Management Group-Special Programs Department			
Classification	Simple			
Type of Transaction	G2G– Government to Government; G2C- Government to Citizen G2B- Government to Business Entity			
Who may avail:	Concerned Internal / External CLIENTS of the Member Management Group: e.g., Members; Employers; Hospitals; or Other Government Agency			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Original copy of Transaction Slip (walk-in)			Special Programs Department	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1.1 Submit the required documents to the assigned staff (for walk-in) or email the same to ofp@philhealth.gov.ph (through e-mail).	1.1 Receive the required documents from the member/representative (for walk-in) or print the required documents (through e-mail).	None	10 minutes per PMRF (Walk-in)	Social Insurance Assistant I or any authorized staff of the Special Programs Department
1.2 Check the Member Data Record (MDR) and verify if all data are correct.	1.2 Check for the completeness of documents and correctness of data.		3 days (Through e-mail; but still depends on the number of e-mails received)	
	1.3 Process the updating, amendment, or correction of member information and membership category, as requested.			
	1.4 Issue updated Member Data Record (MDR) (walk-in) or send an updated MDR to the member's email address (through e-mail).			
	TOTAL	None	10 minutes per PMRF (Walk-in)	

			3 days (Through e-mail; but still depends on the number of e-mails received)	
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5. 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.

Office/Division	Member Management Group - All Departments			
Classification	Complex			
Type of Transaction	G2G– Government to Government; G2B- Government to Business Entity G2C- Government to Citizen			
Who may avail:	Concerned Internal / External CLIENTS of the Member Management Group: e.g., Members; Employers; Hospitals; or Other Government Agencies			
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 (Position of Supervisor)
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.	None		
	1.3. Endorse to concerned Segment.	None		
	1.4. Concerned Segment receives and logs the endorsed document.	None		
	1.5. Assignment to concerned Segment head/staff for appropriate action.	None		

	1.6. Segment head/staff performs CSW and prepares draft reply memos and/or recommendations.	None	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.	None		
	1.8. Review and approval by the Vice President	None	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	None		
	TOTAL	None	7 working days	

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

This service allows clients to request for a copy of their Member Data Record.

Office/Division	Member Management Group-Special Programs Department		
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	
Walk-in Original copy of Transaction Slip Photocopy of at least 1 valid photo-bearing ID of the member (original ID needs to be presented) Additional requirements if through a representative: Original copy of authorization letter issued by the member Photocopy of at least 1 valid photo-bearing ID of the representative (original ID needs to be presented)		Special Programs Department	
Through e-mail Scanned copy of at least 1 valid photo-bearing ID of the member (member needs to also send a photo/selfie of himself/herself holding the ID) Member needs to provide the following information: Last Name, First Name, Middle Name Date of Birth Place of Birth Address Additional requirements if through a representative:			

Scanned copy of authorization letter issued by the member Scanned copy of at least 1 valid photo-bearing ID of the representative				
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1.1 Submit the requirements to the assigned staff (for walk-in) or email the same to ofp@philhealth.gov.ph (through e-mail).	1.1 Receive the requirements from the member/representative (for walk-in and through e-mail).	None	5 minutes (Walk-in)	Social Insurance Assistant I or any authorized staff of the Special Programs Department
1.2 Check the Member Data Record (MDR) and verify if all data are correct.	1.2 Check for the completeness of documents and correctness of data.		3 days (Through e-mail; but still depends on the number of e-mails received)	
	1.3 Check database			
	1.4 Issue Member Data Record (MDR) (walk-in) or send MDR to the member’s email address (through e-mail).			
	TOTAL	None	5 minutes (Walk-in) 3 days (Through e-mail; but still depends on the number of e-mails received)	

7. ISSUANCE OF PHILHEALTH ID (WALK-IN)

This service allows clients to request for a copy of their PhilHealth IDs.

Office/Division	Member Management Group-Special Programs Department			
Classification	Simple			
Type of Transaction	G2C- Government to Citizen			
Who may avail:	Migrant Workers, Filipinos Living Abroad and Filipinos with Dual Citizenship			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Original copy of Transaction Slip Photocopy of at least 1 valid photo-bearing ID of the member (original ID needs to be presented) Additional requirements if through a representative: Original copy of authorization letter issued by the member Photocopy of at least 1 valid photo-bearing ID of the representative (original ID needs to be presented)		Special Programs Department		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1.1 Fill-up Transaction Slip and write personal information.	1.1. Receive Transaction Slip and check database.	None	2 minutes	Social Insurance Assistant I or any authorized staff of the Special Programs Department
1.2 Receive PhilHealth Identification Card (PIC) and verify if all data are correct.	1.2. Issue PhilHealth Identification Card (PIC).		3 minutes	
	TOTAL		5 minutes	

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

This service allows the verification of PhilHealth Identification Number.

Office/Division	Member Management Group-Special Programs Department	
Classification	Simple	
Type of Transaction	G2C- Government to Citizen	
Who may avail:	Migrant Workers, Filipinos Living Abroad and Filipinos with Dual Citizenship	
CHECKLIST OF REQUIREMENTS	WHERE TO SECURE	
<p>Walk-in</p> <p>Original copy of Transaction Slip</p> <p>Photocopy of at least 1 valid photo-bearing ID of the member (original ID needs to be presented)</p> <p>Additional requirements if through a representative:</p> <p>Original copy of authorization letter issued by the member</p> <p>Photocopy of at least 1 valid photo-bearing ID of the representative (original ID needs to be presented)</p>	<p>Special Programs Department</p>	
<p>Through e-mail</p> <p>Scanned copy of at least 1 valid photo-bearing ID of the member (member needs to also send a photo/selfie of himself/herself holding the ID)</p> <p>Member needs to provide the following information:</p> <p>Last Name, First Name, Middle Name</p> <p>Date of Birth</p> <p>Place of Birth</p> <p>Address</p> <p>Additional requirements if through a representative:</p> <p>Scanned copy of authorization letter issued by the member</p> <p>Scanned copy of at least 1 valid photo-bearing ID of the representative</p>		

CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1.1 Submit the requirements to the assigned staff (for walk-in) or email the same to ofp@philhealth.gov.ph (through e-mail).	1.1 Receive the requirements from the member/ representative (for walk-in and through e-mail).	None	5 minutes (Walk-in)	Social Insurance Assistant I or any authorized staff of the Special Programs Department
1.2 Receive the PhilHealth Identification Number (PIN).	1.2 Check for the completeness of documents and correctness of data.		3 days (Through e-mail; but still depends on the number of e-mails received)	
	1.3 Check database			
	1.4 Issue PhilHealth Identification Number (PIN) (walk-in) or send PIN to the member’s email address (through e-mail).			
	TOTAL	None	5 minutes (Walk-in) 3 days (Through e-mail; but still depends on the number of e-mails received)	

9. RECEIVING AND ENDORSEMENT OF CLAIMS FOR OVERSEAS CONFINEMENTS (THROUGH E-MAIL)

This service allows the receipt and facilitation of the filing of claims for overseas confinements.

Office/Division	Member Management Group-Special Programs Department			
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	
Scanned copy of the following (each page should be "Certified True Copy"; all should be written/translated in English): Duly accomplished PhilHealth Claim Form 1 (CF1) Official receipts of PhilHealth premium contributions Statement of Account (SOA) or its equivalent Official receipt/s or any proof of payment of hospital bills and professional fees Medical Certificate/ Medical Abstract/ Operative record (if with operation) from the attending physician as to the final diagnosis, period of confinement and services rendered			Special Programs Department	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1.1 Submit the requirements to the assigned staff (for walk-in) or email the same to ofp@philhealth.gov.ph (through e-mail).	1.1 Receive the requirements from the member/ representative (for walk-in and through e-mail).	None	5 minutes (Walk-in)	Social Insurance Assistant I or any authorized staff of the Special Programs Department

1.2 Receive the PhilHealth Identification Number (PIN).	1.2 Check for the completeness of documents and correctness of data.		3 days (Through e-mail; but still depends on the number of e-mails received)	
	1.3 Check database			
	1.4 Issue PhilHealth Identification Number (PIN) (walk-in) or send PIN to the member's email address (through e-mail).			
	TOTAL	None	5 minutes (Walk-in) 3 days (Through e-mail; but still depends on the number of e-mails received)	

10. REQUEST FOR MARKETING COLLATERALS

The service allows stakeholders to request marketing collaterals through the Special Programs Department.

Office/Division	Member Management Group-Special Programs Department			
Classification	Complex			
Type of Transaction	G2C- Government to Citizen; G2B- Government to Business Entity			
Who may avail:	All			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Request letter (original and/or via email); or		Requesting stakeholder		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1. Submit Request letter to Administrative Receiving Officer	1.1 Receive and stamp the date of receipt on the letter and forward the same to the Senior Manager	None	1 day	Administrative Receiving Staff Office of the Senior Manager
	1.2 Endorse the request to the concerned SPD staff	None	1 day	Senior Manager
	1.3 Assess the received request and determine specific marketing collateral required	None	1 day	SIO I
	1.4 If required collateral is available in SPD, prepare the same as requested.	None	1 day	SIA I
	1.5 If not available, draft formal request addressed to the Corporate Marketing Department and wait issuance of the requested collaterals	None	1 day	SIA I
	1.6 Release requested collaterals to concerned stakeholder.	None	1 day	SIA I
2. Receive marketing collaterals requested	2.1 Request stakeholder to sign receiving copy	None	1 day	SIA I
If marketing collaterals requested are not readily available/ for development.				

1. Submit Request letter to Administrative Receiving Officer	1.1. Receive and stamp the date of receipt on the letter and forward the same to the Senior Manager	None	1 day	Administrative Receiving Staff Office of the Senior Manager
	1.2. Endorse the request to the concerned SPD staff	None	1 day	Senior Manager
	1.3 Assess the received request and determine specific marketing collateral required	None	1 day	SIO I
	1.4. Draft a formal request addressed to the Corporate Marketing Department for the development of the marketing collaterals.	None	1 day	SIA I
	1.5. Provide inputs or Approve the design and/or content of collateral.	None	5 days	SIO I
	1.6. Release requested collaterals to concerned stakeholder.	None	1 day	SIA I
3. Receive marketing collaterals requested	2.1 Request stakeholder to sign receiving copy	None	1 day	SIA I
	TOTAL	None	7 working days	If marketing collaterals requested are readily available.
			11 working days	If marketing collaterals requested are not readily available/ for development.

SPECIAL PROGRAM DEPARTMENT

1. REQUEST FOR PRE-DEPARTURE ORIENTATION SEMINAR (PDOS)

The service allows the PDOS provider to initiate a request for an orientation session for the migrant workers.

Office/Division	Member Management Group-Special Programs Department			
Classification	Complex			
Type of Transaction	G2C- Government to Citizen; G2B- Government to Business Entity			
Who may avail:	All OWWA Accredited PDOS Center Providers for Landbased and Seabased and Private Recruitment Agencies			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
Request Letter stating its purpose(original and/or email)		Requesting stakeholder		
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1. Submit Request letter to Administrative Receiving Officer	1.1. Receive and stamp the date of receipt on the letter and forward the same to the Senior Manager	None	3 working days	Administrative Receiving Officer, Office of the Senior Manager
1.2 Receive the PhilHealth Identification Number (PIN).	1.2. Assess the receive request	None		Senior Manager
	1.3. Provide further instruction	None		Senior Manager
	1.4. Approve the request and assign staff who will conduct the orientation	None		Senior Manager, Social Insurance Assistant I or any authorized staff of the Special Programs Department
2. Requesting party receives a response to their request.	2.1. Notify the requesting party on the status of the request. 2.1.1. If approved, set the date, venue and name of staff through Internal Memorandum. 2.1.2. If disapproved, endorse the letter as	None	3 working days	Social Insurance Assistant I or any authorized staff of the Special Programs Department

	attachment to a signed memo for PRO to facilitate the conduct of PDOS			
	TOTAL	None	6 working days	Approved PDOs
			6 working days	Endorsed PDOs

2. CONDUCT OF LOCAL ENGAGEMENTS

The service allows stakeholders to request PhilHealth attendance and participation to local engagements.

Office/Division	Member Management Group-Special Programs Department			
Classification	Highly Technical			
Type of Transaction	G2C- Government to Citizen; G2B- Government to Business Entity			
Who may avail:	All			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Invitation or Request Letter (original and/or email; if request initiated by stakeholders)			Requesting stakeholder	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1. Submit Invitation, Request letter, or Acceptance Letter to Administrative Receiving Officer	1.1 Receive and stamp the date of receipt on the invitation, request letter, or acceptance letter and forward the same to the Senior Manager	None	1 day	Administrative Receiving Staff Office of the Senior Manager
	1.2 Assess the invitation or request letter	None	1 day	Senior Manager
	1.2.1 If Senior Manager disapproves the invitation, draft regret letter	None	2 days	SIO I
	1.2.2 If Senior Manager approves the invitation, draft confirmation letter	None	2 days	SIO I
	1.3 Conduct preliminary coordination with stakeholder	None	2 days	SIO I
	1.4 Prepare draft CPO, project proposal and budgetary requirements	None	15 day	SIO I
	1.5 Prepare and request for Cash Advance	None	5 days	SIO I
2. Request details of flights and hotel accommodations, as applicable	2.1 Book flights and hotel accommodations and forward the details to concerned stakeholder	None	1 day	SIO I

	2.2 Conduct pre-engagement orientation	None	1 day	Senior Manager Segment Head SIO III SIO I
3. Request participation to courtesy call / onsite meeting with stakeholders, as applicable	3.1 Attend courtesy call or initial meeting	None	1 day	Concerned SPD staff and PhilHealth delegation
	3.2 Conduct local engagement	None	1 day (or as requested)	Concerned SPD staff and PhilHealth delegation
	TOTAL	None	30 working days	If approved
				4 working days If disapproved

3. CONDUCT OF OVERSEAS SERVICE MISSIONS

The service allows stakeholders to request the conduct of overseas service missions.

Office/Division	Member Management Group-Special Programs Department			
Classification	Highly Technical			
Type of Transaction	G2C- Government to Citizen; G2B- Government to Business Entity			
Who may avail:	All Embassies, Consulate Generals, Migrant Workers Office, Filipino Communities and Organized Groups Abroad			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
Invitation or Request Letter (original and/or email; if request initiated by stakeholders) Acceptance Letter (original and/or email; if request initiated by PhilHealth)			Requesting stakeholder	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1. Submit Invitation, Request letter, or Acceptance Letter to Administrative Receiving Officer	1.1 Receive and stamp the date of receipt on the invitation, request letter, or acceptance letter and forward the same to the Senior Manager	None	1 day	Administrative Receiving Staff Office of the Senior Manager
	1.2 Assess the invitation, request letter, or acceptance letter	None	1 day	Senior Manager
	1.3 Forward the invitation, request letter, or acceptance letter to the Office of the President and CEO (OPCEO) for instructions	None	1 day	SIO I
	1.3.1 If OPCEO disapproves the invitation, draft regret letter	None	15 days	SIO I
	1.3.2 If OPCEO approves the invitation, draft confirmation letter	None	15 days	SIO I

	1.4 Conduct preliminary meetings with stakeholder	None	1 day	Senior Manager Segment Head SIO III SIO I
	1.5 Prepare draft CPO, project proposal and budgetary requirements		15 days	SIO I
	1.6 Request documentary requirements: Service Record, Certificate of No Pending Case, etc.		7 days	SIO I
	1.7 Prepare travel documents: official passports and/ visa, as applicable.		21 days	SIO I
	1.8 Prepare and request for Cash Advance		5 days	SIO I
2. Request details of flights and hotel accommodations	2.1 Book flights and hotel accommodations and forward the details to concerned stakeholder	None	1 day	SIO I
	2.2 Conduct pre-mission orientation	None	1 day	Senior Manager Segment Head SIO III SIO I
3. Request participation to courtesy call with Ambassador, Consulate General, and Labor Attache, or initial meeting with Leaders of FilCom/Organized Groups	3.1 Attend courtesy call or initial meeting	None	1 day	Concerned SPD staff and PhilHealth delegation
	3.2 Conduct mission proper	None	1 day (or as requested)	Concerned SPD staff and PhilHealth delegation
	3.3 Draft thank you letter	None	1 day	SIO I
	TOTAL	None	72 working days	If approved

4. NEW PROJECTS ASSIGNED TO THE SPECIAL PROGRAMS DEPARTMENT

This service allows the planning, implementation/execution, monitoring and review of new projects/plans and initiatives assigned to the Special Programs Department.

Office/Division	Member Management Group-Special Programs Department			
Classification	Highly Technical			
Type of Transaction	G2C- Government to Citizen; G2B- Government to Business Entity			
Who may avail:	Stakeholders, Board/ Management and other concerned offices			
CHECKLIST OF REQUIREMENTS			WHERE TO SECURE	
1. Request letter (original and/or via email); or			Requesting stakeholder	
2. Instructions from the Board/ Management through PhilHealth Board Resolution (PBR) and/or Summary of Agreements, Directives and Action Points (SADA)			Requesting stakeholder or other offices concerned	
CLIENT STEPS	AGENCY ACTION	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE (Position of Supervisor)
1. Receive instructions from the Board or EXECOM on new projects.	1.1 Receive and stamp the date of receipt on the letter/instructions and forward the same to the Senior Manager	None	1 day	Administrative Receiving Staff
	1.2. Identify the project's objectives and define the scope and the deliverables for its completion.	None	2 days	Senior Manager Segment Head
	1.3. Assign to the operating unit concerned.	None	1 day	Segment Head
	1.4. Conduct a risk assessment on the project.	None	3 days	SIO III & team
	1.5. Identify all critical tasks and include all of the tasks, deadlines and alternate plans on identified risks.	None	1 day	SIO III & team
	1.6. Translate and consolidate all gathered information into a Project Proposal.	None	1 day	SIO III & team
	1.7. Allocate and Seek approval on the budget for the completion of the project.	None	1 day	SIO III & team

	1.8. Execute activities as planned (subject to the agreed project implementation plan).	None	7 days	SIO III & team
	1.9. Prepare reports and documentation.	None	2 days	SIO III & team
	1.10. Conduct regular meetings to assess the progress of the project and resolve gaps, as necessary.	None	1 day	SIO III & team
	1.11. Define project's attainable success indicators for monitoring progress.	None	1 day	SIO III & team
2. Request for status of the project assigned.	2.1 Monitor project performance against identified success indicators.	None	1 day	SIO III & team
	2.2 Review and update the project plan and make adjustments, as necessary.	None	2 days	Segment Head
	2.3 Validate reports and documentation provided by using identified monitoring tools	None	1 day	Segment Head
	2.4 Cascade the results of the project with the management of the stakeholders involved.	None	1 day	Senior Manager Segment Head
	2.5 Conduct a review of the implementation of the project and conclusively end the project, if necessary.	None	4 days	SIO III & team
	TOTAL	None	30 working days	
Subject to the agreed project implementation plan.				