

Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION

CITY STATE CENTRE BUILDING

709 Shaw Boulevard, Pasig City Trunklines - 637-9999, 637-9852 to 81

March 20, 2002

PHILHEALTH CIRCULAR

No. <u>12</u>, s – 2002

by

FOR

: THE NON-PAYING PHILHEALTH MEMBERS,

ACCREDITED PROFESSIONAL AND

INSTITUTIONAL HEALTH CARE PROVIDERS, PHILHEALTH REGIONAL OFFICES AND ALL

CONCERNED

SUBJECT

: Documentary Requirements for Availment of Benefits

By Non-Paying members (GSIS RETIREES and SSS

PENSIONER/RETIREES).

In line with PhilHealth Circular No. 33, s – 2001 the mass registration/enrollment and correspondingly issuance of PhilHealth ID to Non-Paying members starting February 14, 2002 henceforth, the following documentary requirements may be submitted to avail of Medicare benefits:

- A. PhilHealth registered Non-Paying member with PhilHealth ID.
 - Present PhilHealth ID and submit photocopy thereof to accredited service providers.
 Photocopy of PhilHealth ID should be stamped and signed as "Certified seen original PhilHealth ID" on the date seen by the provider.
 - For dependent patient, submit photocopy of member's PhilHealth ID and duly validated Member Data Record for Non-Paying Members or M1c (sample attached). In the absence of duly validated M1c, proof of dependency such as marriage contract/certificate for dependent spouse and birth certificate for dependent children shall be required.
- B. Non-Paying member with no PhilHealth ID yet.
 - In the absence of PhilHealth ID, previous documentary requirements as provided for in PhilHealth Circular Nos. 021 and 028, s 2000 shall remain in effect.

This Circular shall be effective April 01, 2002 admission.

For your information and guidance.

FRANCISCO T. DUQUE III, M.D., MSc.

President and CEO

Corporate Communications Office

Loc. 1727-29 ; 1734-35

DL 637-6262 ; Fax: 638-3080

Membership & Contributions Information Department

Loc. 1117; 1112

DL 637-7680; 637-2674

PhilHealth

Your Partner in Health! www.philhealth.gov.ph

Claims Processing Department
DL - 637-2677; 687-2679
Accreditation Department
Loc. 1219-20

Contribution Accounts Department Telefax: 637-8239 Loc. 1205; 1210-11 * Please read instructions at the back before accomplishing this form.

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Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION

M1c

City State Centre Building 709 Shaw Boulevard, Pasig City Member's PhilHealth Identification Number (if any):			MEMBER DATA RECORD FOR NON-PAYING MEMBERS (PARA SA MGA MIYEMBRONG		1 X 1 ID PHOTO		
-			HINDI NA	MAGBABAYAD)			
1a. Surname (Apelyido)	Given name (Pang	Talan)		ine 2001 l Name (G. Apelyid	<u> </u>		
-	Olven hame (r ang	galair)	IMIGGIE	Mairie (G. Apelylo	0)		
2a. Address (Tirahan)					Civil Status (Katayuang Sibil)		
, ,					Single (Walang Asawa)		
Number & Street (Numero at kalye	e) Barangay	Town	/City (Bayan/Lui	ngsod)	Married (May Asawa) Widowed (Balo)		
Province(Lalawigan)	Zip Code		Telephone Numl	ber	Separated (Hiwalay)		
Male (Lalaki)	te of Birth (Kapanganakan)	3c. Place of Birth (L	ugar ng Kapang	anakan)			
		y Town	/City		Province		
	ne and Address of last employer			4c.	Date/effectivity of retirement (Petsa/bisa ng pagretiro)		
5. Type of Non-Paying Member: Old-age Retirees and Pensioners of the GSIS (also includes non- uniformed members of the AFP, PNP, BJMP and BFP; uniformed members of the AFP, PNP, BJMP and BFP; uniformed members of the AFP, PNP, BFP and BJMP who have reached the compulsory age of retirement before June 24, 1997) & PD 408 retirees GSIS Disability Pensioners prior to March 4, 1995 who have reached the compulsory age of retirement before June 24, 1997) & PD 408 retirees GSIS Disability Pensioners prior to March 4, 1995 or private sectors who have accumulated/ paid at least 120 monthly contributions as provided for by law but separated from employment who completing 120 monthly contributions and have reached age 60 as provided for by law but separated from employment before reaching sixty (60) years old & thereafter have reached age sixty (60) Beta PENDENTS (MGA MAKIKINABANG) Uniformed members of the AFP, PNP, BFP and BJMP who have reached the compulsory age of retirement on or after June 24, 1997, being the effectivity date of RA 8291 which excluded said individuals in the compulsory membership of the GSIS Former employees from the gov't &/ or private sectors who separated from employment w/o completing 120 monthly contributions as IPM until completing the required 120 monthly contributions and have reached age 60 as provided for by law but separated from employment before reaching sixty (60) years old & thereafter have reached age sixty (60) monthly contributions and have reached age sixty (60) and have paid at least 120 monthly contributions DEPENDENTS (MGA MAKIKINABANG)							
PhilHealth Number	Name of Dep			nship of Depende			
(To be filled up by PhilHealth)	(Pangalan ng Ma		(M) or (Relas)	to Member (Kapangan (Relasyon ng Makikinabang mm-dd-y			
				· 			
							
	ay nagkaroon ng kapansanan bag congenital disability acquired be						
I hereby certify that the above statem further declare that the above-named declared by my spouse/brother/siste (Ako ay nagpapatunay na ang nasa at tama at dagdag kong inihahayag r	nents are true and correct and dependents have not been , r. itaas na mga pahayag ay totoo na ang mga nasabing			Salua Serimonte			
makikinabang sa itaas ay hindi iniha		Signature (La		LEFT THUMBM	ARK RIGHT THUMBMARK		
THIS PORTION IS TO BE FILLED UP BY PHILHEALTH							
Date received:	Evaluated by:	Name and Signature		Date of E	valuation:		

REMINDERS (Mga Paalaala)

Qualified dependents of a member under RA 7875 are: (Ang mga karapatdapat na makikinabang ng isang miyembro/kasapi alinsunod sa R.A. 7875 ay ang mga sumusunod:)

- (1) the legitimate spouse who is not a member of PhilHealth; (tunay no asawa na hindi kasapi ng PhilHealth);
- (2) the unmarried and unemployed legitimate, legitimated, acknowledged and illegitimate children as appearing in the Birth Certificate; legally adopted or stepchildren below twenty-one (21) years of age; (walang asawa at walang trabaho na anak, anak sa tunay na asawa (legitimate o legitimated), kinikilalang anak na nakasaad sa Birth Certificate, ampon ayon sa batas o kaya'y anak sa unang asawa na ang edad/gulang ay mababa sa 21);
- (3) children who are twenty-one years old or above but suffering from congenital disability, either physical or mental, or any disability acquired before the age of 21 that renders them totally dependent on the member for support;
 (mga anak na ang edad/gulang ay 21 o pataas subalit may likas na kapansanan pangkatawan o pangkaisipan o ano pa mang uri ng kapansanan na natamo bago sumapit sa edad na 21 na maglalagay sa kanila para lubusang umasa sa kasapi para sa kanyang ikabubuhay);
- (4) the parents who are sixty (60) years old or above who are not enrolled members of PhilHealth, whose monthly income is not more than One Thousand Pesos (P1,000.00).
 (mga magulang na ang edad/gulang ay 60 o pataas at hindi kasapi ng PhilHealth na ang buwanang kita ay hindi hihigit sa Isang Libong Piso (P1,000.00)).

GUIDELINES AND INSTRUCTIONS IN FILLING-UP THE MEMBER DATA RECORD (Mga Patnubay at Kautusan sa Pagpuno ng Member Data Record)

- 1. Fill in all the data needed. Use block/printed letters or use a typewriter. Write N.A. if the blanks are not applicable.

 (Isulat ang lahat ng kailangang impormasyon, Isulat sa malalaking letra o kaya ay gumamit ng makinilya, Isulat ang N.A. kung ang mga kailangang impormasyon ay hindi akma.)
- 2. For Box 5, check appropriate box for your type of non-paying member.

 (Para sa Box No. 5, lagyan ng tsek ang nararapat na kahon ng inyong uri ng miyembrong hindi na magbahayad.)
- 3. Declaration of dependents written in Box No. 6 shall continue to be valid unless amended by the member.

 (Ang paghayag ng mga makikinabang sa Box No. 6 ay magpapatuloy na may bisa maliban na lang kung bahaguhin ng kasapi.)
- 4. Submit certified true copy of Birth Certificate; if none, any two of the following: (Maglakip ng Sertipiko ng Kapanganakan; kung wala, dalawa sa alin mang sumusunod:)
 - Certified true copy of Baptismal Certificate;
 - Certified true copy of Marriage Certificate/Contract, if married;
 - · Passport;
 - Driver's License;
 - SSS Member ID;
 - Alien Certificate of Registration (ACR);
 - Service Record(s);
 - Employee ID;
 - School Records;
 - Voter's Identification Card:
 - A duly notarized joint affidavit of two (2) disinterested persons attesting to the fact of birth of the registrant.

LIST OF ADDITIONAL DEPENDENT(S) (LISTAHAN NG DAGDAG NA MAKIKINABANG)

Elot of Abbittotice ber Enbettion (Elotalian to Babbito Malliantina Baro)										
5.	PhilHealth Number	Name of Dependents		SEX	Relationship of Dependents to	Date of Birth				
	(To be filled up by PhilHealth)	(Pangalan ng Makikinabang)			i	Member	(Kapanganakan)			
		Last Name,	First Name	M.I.	M/F	(Relasyon ng makikinabang sa Miyembro)	mm - dd - yyyy			
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