

Republic of the Philippines

PHILIPPINE HEALTH INSURANCE CORPORATION



POLICY

Citystate Centre, 709 Shaw Boulevard, Pasig City Healthline 441-7444 www.philhealth.gov.ph

 PHILHEALTH CIRCULAR

 No. <u>00/2</u>, s. 2013

 TO
 : ALL PHILHEALTH REGIONAL/BRANCH, LOCAL HEALTH INSURANCE OFFICES, ACCREDITED HEALTH CARE PROVIDERS AND ALL CONCERNED

 SUBJECT
 : REITERATION OF GUIDELINES FOR INDIVIDUALLY PAYING PROGRAM (IPP) COVERAGE RELATIVE TO PHILHEALTH

DEFERMENT

OF

INDIVIDUAL

I. RATIONALE AND OBJECTIVE

ADVISORY

ON

CONTRACT (IPC) ISSUANCE

PhilHealth Advisory No. 03-04-2012 announced the deferment of Individual Policy Contract (IPC) issuance in response to the need for further program enhancements. As such, not all Individually Paying Members (IPMs) have been issued the IPC. In order to guide the frontline offices and avoid confusion in operational approach brought about by new policy developments, the following guidelines are hereby reiterated for uniform implementation.

II. COVERAGE

This Circular applies to the Individually Paying Members of the National Health Insurance Program (NHIP). Excluded are active IPMs under the iGroup Program.

III. IMPLEMENTING GUIDELINES

A. Premium Rate

Per PhilHealth Circular No. 57, series of 2012, calendar year 2013 annual premium rate for all IPMs earning Twenty-Five Thousand Pesos and below monthly shall be at One Thousand Eight Hundred Pesos (PhP 1,800). Beginning January 1, 2014, the new premium rate of Two Thousand Four Hundred Pesos (PhP 2,400) per annum shall be required while premium rate for self-employed professionals and IPMs earning more than Twenty-five Thousand Pesos per month remains at Three Thousand Six Hundred (Php 3,600) per annum.

Exclusion to the new premium rate rule are all IPMs covered under the May-June 2012 2-year lock-in promo per PC 20, series of 2012. The old rate computation or One Thousand Two Hundred pesos per annum shall be the applicable basis for their second year premium.



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olicy Application	IPC Holder	Non-IPC Holder
lode of ayanent Pendline of ayment	Monthly, Quarterly, Semi-annual, Annual PC 61, s. of 2012 Prior to the applicable period	Quarterly, Semi-annual, Annual Quarterly: Last working day of the quarte being paid for Semi-Annual: Last working day of the firs quarter of the semester being paid for Annual: Last working day of the first
enaky	multiplied by the 2013 compu- number of years under the P1,2	1. PhP 1,800/annum computation for 9 CY 2013 for IPMs earning CY PhP 25,000 and below per month. uted PhP 25,000 and below per month.
tomium gumuuoni	2 3 years) Cor Full payment of P3,600/annum multiplied by the number of years fully paid for under Remaining months of 2013 compu- number 1,8 P3,600/annum Remaining 2014 compu- under	300 than Twenty-Five Thousand Pesos ate. per month CY
		200
lvanoo iymeni	For IPMs with 1 year IPC validity, CY 20 shall be computed under the PhP 2,400/annum	 Advance payments applicable for CY 2014 and onwards shall be allowed and shall be computed based on the PhP 2,400/annum.
	For IPMs with 2 or 3 years IPC vali premium computation shall be based on current year applicable rate. E.g. If IPM IPC) pays the CY 2014 premium in CY 201 shall be computed under the PhP 1,800 rate. If with 3-yr IPC may also pay CY 2014 and 2 computed under the P1,800 premium/annua paid in CY 2013.	the apply for CY 2013 only. (2-yr 3, it IPM 015

Varying application for IPC holders and non-IPC holders В.

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C. Benefits Availment

- i. IPC holders shall enjoy the 3/6 minimum eligibility requirement in all types of confinements except for Case Type Z as provided by PC 61, series of 2012.
- ii. IPC holders of 3-year validity contracts shall continue to enjoy automatic availment of Case Type Z.
- iii. Case Type Z eligibility requirements for non-holders of 3-year IPC shall be based on new policies to be issued applicable to IPMs.
- iv. IPC holders may present their IPC and PhilHealth Official Receipt, *if applicable*, or the enhanced MDR reflecting Policy Validity period and applicable premium payments to cover minimum eligibility requirements.
- v. All PhilHealth Offices and accredited health care providers shall ensure non-disruption of benefits eligibility of IPC holders according to the policies provided under PC 61, s. of 2012.

D. IPC holders paying at Accredited Collecting Agents (ACAs)

- i. Only IPMs presenting an IPC or registered in the IPC module shall be allowed the monthly premium remittance. Non-IPC holders' premium schedule shall be maintained as stated in III.B.
- ii. IPMs shall be advised by frontline offices to present their IPC when transacting with ACAs.

IV. EFFECTIVITY

This Circular shall take effect immediately.

All issuances that are inconsistent with the provisions of this Circular are deemed superseded.

ENRIQUE T. ONA Secretary of Health/Chairman of the Board and OIC-President and Chief Executive Officer

Date: 6/3/2013

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