



**PHILHEALTH CIRCULAR**  
 No. 2016 - 0019

**SUBJECT : Coverage of Orphans, Abandoned and Abused Minors, Out-of-School Youths and Street Children as Sponsored Members**

**I. RATIONALE**

It is the objective of the National Health Insurance Act of 2013 or Republic Act 10606, series of 2013 to mandatorily cover all Filipinos under the National Health Insurance Program (NHIP) in accordance with the principles of universality and compulsory coverage and likewise ensure sustained coverage and continuous enhancement of quality service. Furthermore, it aims to prioritize and accelerate the provision of health services to all Filipinos, especially that segment of the population who cannot afford such services.

The orphans, abused and abandoned minors, street children and out-of-school youths are identified in RA 10606 as one of the more vulnerable sectors that needs access to quality health care through NHIP as Sponsored Members. This Circular was developed to provide mechanism for NHIP enrolment and coverage of all orphans and minors with access to inpatient, outpatient and primary care benefits and no balance billing.

**II. DEFINITION OF TERMS pursuant to Republic Act No. 9523**

- A. **Child** refers to a person below twenty one (21) years of age or a person twenty one (21) years old and above but is unable to fully take care of him/herself from abuse, neglect, cruelty, exploitation, or discrimination because of physical or mental disability or condition.
- B. **Abandoned Child** refers to a child who has no proper parental care or guardianship, or whose parent(s) have deserted him/her for a period of at least three (3) continuous months, which includes a foundling.
- C. **Neglected/Abused Child** refers to a child whose basic needs have been deliberately unattended or inadequately attended within a period of three (3) continuous months. Neglect may occur in two ways:
  - a. **Physical neglect** – when the child is malnourished, ill-clad and without proper shelter. A child is unattended when left by himself/herself without proper provisions and/or without proper supervision.

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- b. Emotional neglect – when the child is maltreated, raped, seduced, exploited, overworked, or made to work under conditions not conducive to good health; or is made to beg in the streets or public places; or when children are in moral danger, or exposed to gambling, prostitution, and other vices.
- D. **Voluntarily Committed/Surrendered Child** is one whose parent/s or legal guardian knowingly and willingly relinquished parental authority to the DSWD or any accredited child-placement or child-caring agency or institution.
- E. **Child Legally Available for Adoption** refers to a child in whose favor a certification was issued by the DSWD that he/she is legally available for adoption after the fact of abandonment or neglect has been proven through the submission of pertinent documents.
- F. **Child-caring agency or institution** refers to a private non-profit or government agency duly accredited by the DSWD that provides twenty-four (24) hour residential care services for abandoned, neglected, or voluntarily committed children.
- G. **Child-placing agency or institution** refers to a private non-profit institution or government agency duly accredited by the DSWD that received applicants to become foster or adoptive parents and facilitate placement of children eligible for foster care or adoption.
- H. **Child Care Authorization Form** – authority to take temporary care of the child. (Defined in the DSWD Legal Guardianship Law).

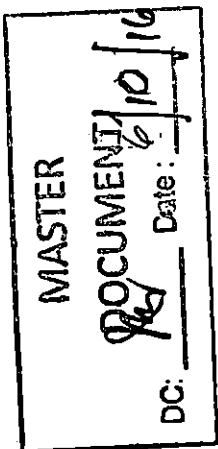
### III. IMPLEMENTING MECHANISM

#### A. Sponsors

The Sponsor may refer to DSWD, Local Government Units (LGUs), other National Government Agencies (NGAs), Non-Government Organizations (NGOs), private entities or individuals willing to provide funds for PhilHealth premium contribution in behalf of Sponsored Members. The sponsor shall enter into an agreement, through a MOA, with PhilHealth for the coverage of orphans, abused and abandoned minors, out-of-school youths and street children as Sponsored Members under their care.

#### B. Guardianship

1. The head or staff of an accredited child-caring institution/facility shall be designated as the authorized guardian of orphans, abandoned and abused minors, street children and out-of-school youths under the care of the DSWD or any accredited institutions run by NGOs or any nonprofit private organizations.
2. For orphans, abandoned and neglected/abused minors, street children and out-of-school youths who are not under the care of DSWD/Local Social Welfare Development Office (LSWDO) or any accredited institution, the surviving grandparents or, in their default, the oldest brother or sister who are twenty one years old, or the relative who has actual custody of the child shall exercise



parental authority in case of absence or death of both parents, unless the Court has already appointed a guardian in accordance to Articles 328 to 332 of the Civil Code.

### C. Enrolment

1. Orphans, abandoned and neglected/abused minors, street children and out-of-school youths who are below twenty one (21) years old shall be enrolled as a group. The maximum group size shall be composed of three (3) children below 21 years old.
  - 1.1 Children ages twenty one (21) years old and above who are still under the DSWD-run institutions shall be enrolled to the Program individually.
  - 1.2 Children below 21 years old who are with child shall be enrolled individually to ensure coverage of their child/ren.
2. Orphans, abused and abandoned minors, street children and out-of-school youths shall be enrolled as members under the Sponsored Program through the following:
  - 2.1 DSWD/LSWDO-sponsored coverage for those under the Child-caring agencies/Child-placing agencies duly accredited by the DSWD.
    - 2.1.1 The DSWD shall provide PhilHealth with the database of orphans, abused and abandoned minors, street children and out-of-school youths under their care to facilitate processing of enrolment.
    - 2.1.2 The database shall include the list of designated guardians per group of enrollees.
  - 2.2 DSWD-accredited institutions/facilities run by Non-Government Organizations or any non-profit private organizations.
    - 2.2.1 The institution shall submit a photocopy of the DSWD accreditation together with the names of the children in their custody for coverage with the corresponding guardian.
    - 2.2.2 The guardian designated by the institution shall accomplish and sign the PhilHealth Member Registration Form (PMRF) for each child. The accomplished PMRFs signed by the guardian shall be submitted to the nearest PhilHealth Regional Office (PRO)/Local Health Insurance Office (LHIO).
      - 2.2.2.1 The institution/facility may assign more than one guardian for its groups of enrollees.
      - 2.2.2.2 Should the institution have an existing database of orphans and minors under their custody, the database may be forwarded to PhilHealth for downloading to facilitate verification and matching with PhilHealth's database.



2.2.2.3 PhilHealth may provide the institution access to web-based system for the encoding of the information of orphans and minors under their custody. This would facilitate for enrolment processing into PhilHealth's database.

2.3 Orphans, abandoned and abused minors, out-of-school youths and street children who are not under the care of DSWD or any institution, the grandparent, or older brother or sister who is 21 years old, or relative who has actual custody of the child/ren shall accomplish and sign the PMRF for the child/ren. The Child Care Authorization Form issued by the DSWD/LSWDO shall be attached to the PMRF.

2.4 Future adoptive parents shall accomplish the PMRF of child/ren legally available for adoption. A copy of the Pre-Adoption Placement Authority (PAPA) shall be attached to the PMRF.

3. Each child shall be assigned a PhilHealth Identification Number (PIN) and shall be issued a Member Data Record (MDR). The name of the sponsor-institution and guardian shall be reflected in the MDR.

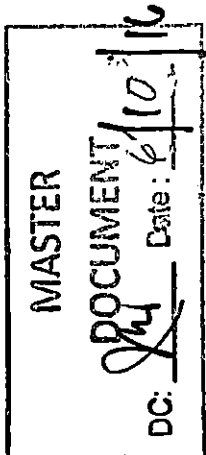
#### D. Premium Contribution

Pursuant to Section 31, Rule VII of the National Health Insurance Act of 2013, also known as Republic Act No. 10606, "b. The premium contribution of orphans, abandoned and abused minors, street children, out-of-school youths xxx under the care of DSWD, or any accredited institutions run by NGOs or any nonprofit private organizations, shall be paid by DSWD and the funds necessary for their inclusion in the Program shall be included in the annual budget of the DSWD."

1. The premium contribution for group enrolment is Two Thousand Four Hundred (Php 2,400) per year.
2. The premium contribution for the individual enrolment of children ages 21 years old including those below 21 years old who are with child shall be P2,400 per individual per year.
3. The premium contribution of the child/ren legally available for adoption shall be subsidized by the future adoptive parents who have been issued PAPA by DSWD.
4. Grandparents, older sibling, who is at legal age of eighteen years old or relative who has actual custody of the orphans, abandoned and abused minors, street children and out-of-school youths shall subsidize their premium contribution at P2,400 per child per year, otherwise the legal guardian appointed by the DSWD shall subsidize the child's premium contribution.

#### E. Benefits

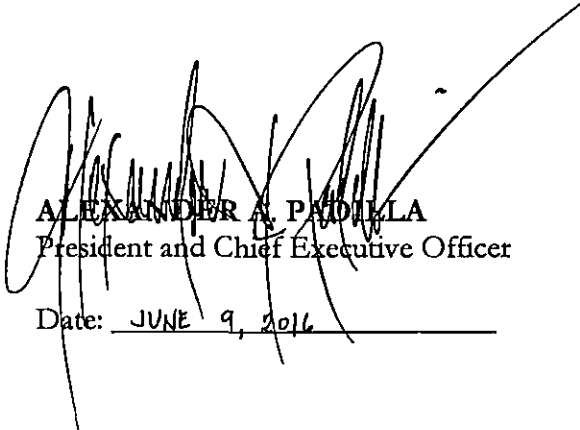
Orphans, abandoned and abused minors, out-of-school youths and street children enrolled as Sponsored Members shall be entitled to the same benefits as an Indigent Member including Primary Care Benefit 1 (PCB 1) Package and No Balance Billing



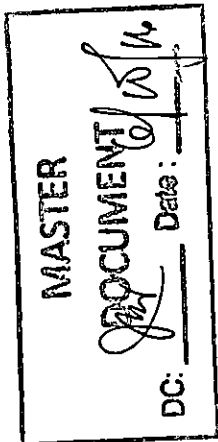
(NBB). Furthermore, there shall be no waiting period prior to the availment of benefits.

#### IV. EFFECTIVITY

This Circular shall take effect fifteen (15) days after its publication in the Official Gazette or in any newspaper of general circulation as may be required by existing laws, rules and regulations and must also be filed with the Office of the National Administrative Register (ONAR) at the University of the Philippines Law Center.

  
ALEXANDER A. PADILLA  
President and Chief Executive Officer

Date: JUNE 9, 2016



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