ANNEX 1									1	PHIC Accre-	AF-3		
	Republic of the Philippines PHILIPPINE HEALTH INSURANCE CORPORATION City State Bldg., 709 Shaw Blvd., Pasig City Health line 441-7444; www.philhealth.gov.ph									06/05/201	-		
				-				CORD			15. 19	Bawat Pilipino MIYEMBRO awat miyembro PROTEKTADO alusugan natin SEGURADO	
	T 0 O			AL I	HEALT	Н СА	RE	PROVIDER	(IHCP)				
THE PRESIDEN Philippine Health Pasig City, Philip	Insur	ance Corporation											
Sir/Madam:													
I,						, of leg	al ag	e,	(Desition/Des	ignation		with	
	, of legal age,with and the duly authorized representative to act for and												
in behalf of	, hereby submits the following pertinent information and												
documentary req	documentary requirements under Sec. 52 L of R.A. 7875as amended by RA 9241 and its Implementing Rules and Regulations thereto.												
Type of Institution: (Please shade the appropriate box)													
Hospital:						Outpa	atient	Clinic:					
Award Applied I	For:	Self-assessment \$	Scores	5:			gle se		n-1 🗌	3-in-1 [Mu	ıltiple	
Center of Safety Pt. Rights & Organizational Ethics													
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Level 1 Information Management9													
Level 2 Safe ractice and Environment% Outpatient Malaria Package Provider													
Level 3		Improving Performance Core indicator	Э		%		_	imal Bite Treatme ier Package Provid	-				
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Renewal		with gap in ac	credita	tion		🗌 Ch	nange	in location/owne	ership				
Late Fil	er	Upgrading/ad	d'I serv	ices						Accredita	<u>tion No</u>		
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Mailing/Billin No. / St. / Brgy.	y Au	iuless.											
No. / Ol. / Digy.													
Municipality / City	,				Drovi	200						Zip Code	
Municipality / City Province Z													
Other Contact Information													
Contact No. Fax No.						Email Address:							
Medical Director/Chief of Hospital (if applicable)						Accreditation Number					hle)		
	Offici							Accicultation	Number				
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Head of Facility					Administrator (If applicable)					Owner of the Institution			
For PhilHealt	h Us	e Only											
Date Evaluated: SO By: SO										Control No			
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Accreditation Department 03292012