# Annex G.3C: Checklist of Requirements for Reimbursement – PD-related Ancillary Services - Laboratory/ Diagnostic Tests and Drugs/Medicines

Republic of the Philippines
**PHILIPPINE HEALTH INSURANCE CORPORATION**
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**Case No.** _____

| | | |
|---|---|---|
| HEALTH FACILITY (HF) | | |
| ADDRESS OF HF | | |
| A. PATIENT | 1. Last Name, First Name, Suffix, Middle Name | SEX ☐ Male ☐ Female |
| | 2. PhilHealth ID Number ☐☐ - ☐☐☐☐☐☐☐☐☐ - ☐ | |
| B. MEMBER ☐ *Same as patient (Answer only if the patient is a dependent)* | 1. Last Name, First Name, Suffix, Middle Name | |
| | 2. PhilHealth ID Number ☐☐ - ☐☐☐☐☐☐☐☐☐ - ☐ | |

## Checklist of Requirements for Reimbursement – PD-related Ancillary Services (Laboratory/Diagnostics Tests and Drugs/Medicines)

(Place a ✓ if attached or NA if not applicable)

| REQUIREMENTS | Status |
|---|---|
| A. Transmittal Form (Annex K) | |
| B. Accomplished Checklist of Requirements for Reimbursement (Annex G.3C) | |
| C. Properly accomplished Claim form (CF) 2 | |
| D. Photocopy of PD passport (Annex D) | |
| E. Accomplished Checklist of Essential Health Services for PD-related Ancillary Services – Laboratory/Diagnostic Tests and Drugs/Medicines (Annex I.3C) | |
| F. Original or Certified true copy (CTC) of the Statement of Account (SOA) | |
| G. Z Satisfaction Questionnaire (Annex H) | |
| Date Completed (mm/dd/yyyy) | |
| Date Filed (mm/dd/yyyy) | |

| | |
|---|---|
| Certified correct by:** | Certified correct by: (for Service Patients) |
| (Printed name and signature)<br>Attending Nephrologist | (Printed name and signature)<br>Please tick appropriate box<br>☐ Head, Peritoneal Dialysis Unit OR<br>☐ Chair, Dept. of Adult Nephrology OR<br>☐ Chair, Dept. of Pediatric Nephrology OR<br>☐ Chair, Dept. of Organ Transplantation OR<br>☐ Executive Director/Chief of Hospital/ Medical Director/Medical Center Chief |
| PhilHealth Accreditation ☐☐☐☐–☐☐☐☐☐☐☐–☐ | PhilHealth Accreditation ☐☐☐☐–☐☐☐☐☐☐☐–☐ |
| Date signed (mm/dd/yyyy) | Date signed (mm/dd/yyyy) |

**for PRIVATE PATIENTS, the signature of the Attending Nephrologist is sufficient.