



SERVICE STANDARD
Philhealth Section

VISION: To provide quality health care to the people of the City of Manila.

MISSION: To become one of the best providers of quality health care services in the City of Manila.

Type of front line service	Documentary Requirements	Client /Requesting Party	Office/Person Responsible	Steps/ Procedures	Form to Fill-up	Fee	Processing Time
PhilHealth Section	EXISTING MEMBERS (AKTIBONG MIYEMBRO) EMPLOYED (May trabaho) • CF1 Form signed by employer (CF1 Form na may pirma ng employer) • CF2 Form INDIVIDUALLY PAYING (Boluntaryong nagbabayad) • Photocopy of official receipt (Kopya ng opisyal ng resibo) • CF2 Form • PBEF/MDR SENIOR CITIZEN • CF2 Form • PBEF/MDR INDIGENT(4PS/SPONSORED) • CF2 Form • PBEF/MDR NON-MEMBERS/INACTIVE MEMBERS (HINDI MIYEMBRO/HINDI AKTIBONG MIYEMBRO) SENIOR CITIZEN • Photocopy of Senior ID (Kopya ng Senior ID) • CF1 Form and CF2 Form • PMRF	Relative of the patient or representative (Kamag-anak ng pasyente)	Philhealth Section	1. Interview patient/relative <u>(Panayam sa pasyente/kamag-anak)</u>	PHILHEALTH personnel PBEF CF1 Form CF2 Form PMRF	No fees to be collected (Walang kaukulang bayad)	5minutes <u>(5 minuto)</u>
	2. Check patient's eligibility using PHILHEALTH PORTAL <u>(Pag-alam ng PHILHEALTH estado sa PORTAL)</u>			10minutes <u>(10 minuto)</u>			
	3. Submission of all necessary documents <u>(Pagsumite ng mga kinakailangang dokumento at pagsuri kung kumpletong detalye.)</u>			20minutes <u>20 minuto (kung ang mga papeles ay kumpleto)</u>			
	4. Preparation of PHILHEALTH Stub <u>(Preparasyon ng PHILHEALTH Stub)</u>			10minutes <u>(10 minuto)</u>			
	OTHERS • Kindly visit Social Welfare Office upon admission <u>(Bisitahin po ang Social Welfare Office pagka-admit)</u>						

For inquiries, suggestion, comment and recommendation, please call at telephone nos. **2523942** and/or send it to our email address **ospitalngtondo_ont@yahoo.com**

ISAIAS R. CANDO JR., M.D.
Hospital Director