1. **Objective**

To enroll unregistered/non Philhealth patient or are inactive members

1. **Scope**

Starts with assessment, enrollment and ends submission of requirements.

1. **Procedure**

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| **PROCESS FLOW** | **RESPONSIBILITY** | **DETAILS** |
| Receives referral  Interview and assess patient  Validate requirements | Social Worker  (Emergency Room)  Social Worker  (MSS Main)  Social Worker  (MSS Main Office) | Referral of patient from Billing and Claims  Interview and assess patient **(ZCMC –F– MSS-**  **08)**  Receives and validate requirements for Point of Services such as:  -Note from Philhealth Express (that patient is not/inactive Philhealth member.  -For member:  Barangay Certificate of Indigency  Birth or Baptismal Certificate with registry number or any valid government issued Identification Card (ID) with Date of birth such as, but not limited to:   * Passport * OWWA ID * Driver’s License * OFW ID * PRC ID * BIR/TIN ID * Integrated Bar of the Philippine ID * DSWD ID * NBI Clearance * AFP ID * Police Clearance * HDMF ID * Postal ID |

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| **PROCESS FLOW** | **RESPONSIBILITY** | **DETAILS** |
|  |  | * Philhealth ID * Voter’s ID * GSIS e-Card or SSS UMID Card   For dependent Legal Spouse who is not active member:   1. Barangay Certificate of Indigency 2. Registered Marriage Certificate (Issued by the Civil Registrar /Shari’a Court or authenticated copy from the PSA 3. Birth Certificate/ Baptismal and Affidavit of two disinterested person or One and the same person.   For dependent children unmarried & unemployed  legitimate, illegitimate below 21 years of age :   1. Barangay Certificate of Indigency 2. Registered Birth Certificate or Paggunting/Baptismal,(For Member and Dependent 3. if unregistered, Certificate on processed attached with temporary Birth Certificate issued by Civil Registrar   For Legally adopted children below 21 years of age   1. Barangay Certificate of Indigency 2. Registered Birth Certificate or Paggunting/Baptismal (For Member and Dependent 3. Certificate on processed attached with temporary Birth Certificate 4. Court Decree of Adoption   For Stepchildren below 21 years of age   1. Barangay Certificate of Indigency 2. Registered Marriage Certificate 3. Birth Certificate |

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| **PROCESS FLOW** | **RESPONSIBILITY** | **DETAILS** |
| Philhealth  Point of Service | Social Worker  (MSS Main Office)  Social Worker  (MSS Main Office) | For mentally challenged/ individual with physical disability who is 21 years or above   1. Barangay Certificate of Indigency 2. Registered Birth Certificate or Paggunting/Baptismal, 3. if unregistered, Certificate on processed attached with temporary Birth Certificate issued by Civil Registrar 4. Person with Disability ID and 5. Medical Certificate issued by the attending Physician stating & describing the extent of disability.   For foster children as defined in RA 10165 (Foster Care Act of 2012)   1. Barangay Certificate of Indigency 2. Registered Birth Certificate or Paggunting/Baptismal /foundling certificate/child profile, and 3. if unregistered, Certificate on processed attached with temporary Birth Certificate issued by Civil Registrar 4. Foster Family Care License & Foster Placement Authority (FPA)   For Minor that parents are expired/abandoned/not around   1. Barangay Certificate of Indigency 2. Registered Birth Certificate or Paggunting/Baptismal 3. if unregistered, Certificate on processed attached with temporary Birth Certificate issued by Civil Registrar 4. Affidavit of Guardianship and 5. Identification Card of the guardian   For Inmate   1. Barangay Certificate of Indigency 2. Registered Birth Certificate or Paggunting/Baptismal |

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| **PROCESS FLOW** | **RESPONSIBILITY** | **DETAILS** |
|  |  | 1. if unregistered, Certificate on processed attached with temporary Birth Certificate issued by Civil Registrar 2. Certificate from BJMP & BUCOR   Once enrolled to Philhealth Point of Service (POS) Program, the Medical Social Worker shall issue a Point of Service Card (**ZCMC-F-MSS-50**), as reference to present to MSS on his/her next confinement.  Instruct relative/family to submit to Billing and Claims the following: a. Philhealth Member Registration Form (PMRF), b. Claim Signature Form (CSF), c. Member Data Information (MDI), d. Point of Service Certification **(ZCMC-F-MSS-44**) and e. valid documents of the patient. |

1. **Reference Documented Information**

4.1 ZCMC- F- MSS -44 - Point of Service Certification

4.2 ZCMC- F- MSS -08 - MSWD Patient Assessment Tool

4.3 ZCMC-F-MSS-50 - Point of Service Card

4.4 ZCMC-F-MSS-13 -Contract/Responsibility Slip

**Prepared by:** **Reviewed by Approved by:**

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