

Pastor's Care Health Assistance Program (PCHAP)

Policy Manual – Version 3.2

**“Serving the health needs of our ministry workers
with compassion and integrity.”**

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Pastor's Care Health Assistance Program (PCHAP) Version 3.2

1. Introduction

1.1 Purpose of This Document

This document serves as the official policy manual for the Pastor's Care Health Assistance Program (PCHAP) Version 3.0. It outlines the objectives, eligibility, contributions, benefits structure, administrative processes, and compliance guidelines necessary for the effective implementation of the program. It is designed to inform members, contributors, and administrators of their roles and responsibilities, as well as the operating principles that govern the fund.

This version consolidates the lessons from previous versions and reflects updated legal and governance safeguards, preparing the program for official launch under the J29 Corporation framework.

1.2 Background and Rationale

The PCHAP was initiated as a compassionate response to the growing medical and financial needs of pastors, full-time workers, and lay leaders within the Jesus Reigns Ministries (JRM) network. Recognizing that many church workers face personal and family health emergencies with limited financial capacity, PCHAP aims to provide structured, mutual assistance rooted in biblical principles of generosity, care, and stewardship.

The program is not an insurance product. It is a community-based, voluntary contribution system through which members support one another in times of need, with aid given based on the availability of funds.

1.3 Statement of the Program's Nature

PCHAP is a non-stock, non-profit, faith-based mutual aid program that operates to provide medical, hospitalization, and funeral assistance to eligible members. It is governed by the principles of shared responsibility, transparency, and stewardship.

All benefits under the program are subject to fund availability and board approval. There are no guaranteed claims, no insurance contracts, and no individual entitlements.

1.4 Legal Basis and Compliance

The program is administered under the legal entity of J29 Corporation, a non-stock, non-profit corporation duly registered with the Securities and Exchange Commission (SEC).

PCHAP is not subject to regulation by the Insurance Commission of the Philippines, as it avoids the characteristics defined under:

- Republic Act No. 10607 (The Insurance Code of the Philippines): This law governs entities that provide guaranteed risk coverage in exchange for premium payments. PCHAP does not offer guaranteed benefits and collects contributions for mutual assistance only.
- Republic Act No. 9829 (The Pre-Need Code of the Philippines): This law regulates companies that collect advance payments for future guaranteed services. PCHAP does not fall under this category, as it provides aid only when funds are available and does not offer guaranteed future services.

A clear legal disclaimer is included in this document and will be signed by each member during registration to affirm that they understand the non-insurance nature of the program.

2. Organizational Framework

2.1 Legal Entity

The Pastor's Care Health Assistance Program (PCHAP) operates under J29 Corporation, a duly registered non-stock, non-profit organization with the Securities and Exchange Commission (SEC) of the Philippines.

J29 Corporation shall serve as the official legal and administrative body responsible for overseeing all operations, compliance, and governance matters related to PCHAP.

2.2 Governance and Oversight

PCHAP shall be governed by a Board of Trustees, appointed in accordance with the updated Articles of Incorporation and Bylaws of J29 Corporation. The Board shall have full authority to:

- Approve program policies and guidelines
- Oversee fund management and disbursement
- Ensure legal and regulatory compliance
- Approve member assistance applications based on fund availability

2.3 Administrative Structure

An Administrative Oversight Team shall be designated to manage day-to-day operations, including:

- Membership registration and records
- Collection tracking and monitoring
- Processing of assistance applications and documentation
- Communication and reporting to members

2.4 Financial Management

All contributions collected under PCHAP will be pooled into a single benevolent fund managed by J29 Corporation. Financial transactions, fund balances, and assistance disbursements shall be recorded, reported quarterly, and subject to internal review by the Board.

There will be no individual member accounts and no benefit guarantees. The fund is not intended for investment or profit but is to be used solely for the purpose of assisting eligible members in times of need.

2.5 Reporting and Transparency

The Administrative Oversight Team will submit quarterly financial reports to the Board of Trustees and provide summary updates to all members. These reports shall include:

- Total contributions received
- Total disbursements granted
- Remaining balance and obligations

This transparency ensures responsible stewardship and builds trust among the contributing members.

3. Program Objectives

3.1 Provide Medical and Hospitalization Support

To offer financial assistance for medical expenses, hospitalization, surgeries, and emergency care needs of pastors, full-time workers, lay leaders, and their immediate family members, as permitted under program guidelines.

3.2 Extend Bereavement and Funeral Aid

To mobilize community support for the bereaved families of eligible members by providing non-guaranteed, voluntary-based assistance in case of death, in alignment with the program's spiritual and pastoral mission.

3.3 Encourage Shared Responsibility and Unity

To build a culture of shared compassion and stewardship among ministry workers by encouraging consistent, voluntary contributions that benefit the wider community.

3.4 Ensure Legal and Administrative Integrity

To operate the program under a legally recognized non-stock, non-profit structure, with governance systems that support transparency, accountability, and compliance with Philippine regulations.

3.5 Promote Long-Term Sustainability

To manage collected contributions responsibly, ensure regular reporting, and adjust benefit guidelines and operations in accordance with the fund's financial capacity and membership size.

4. Membership Guidelines

4.1 Eligible Participants

The following individuals are eligible to enroll in the PCHAP:

- Pastors actively serving within the Jesus Reigns Ministries (JRM)
- Full-Time Workers (FTWs) formally recognized by JRM
- Pastoral Staff with a regular role in church ministry
- Lay Pastors and Discipleship Group (DG) Heads
- Retired JRM pastors and workers who have faithfully served in the ministry
- Immediate family members of eligible members, subject to the following conditions:
 - Spouse is eligible but must register individually and sign a separate membership and disclosure form
 - Children 18 years old and below may be listed under the parent's application form
 - Children above 18 years old must register individually if they qualify under any of the eligible roles (e.g., FTW, DG Head, Lay Pastor, etc.)

All applicants must be endorsed by their senior or head pastor.

Membership is highly encouraged for all eligible participants and is viewed as a shared commitment to the welfare of the ministry community. While it is not mandatory, access to assistance benefits is exclusive to enrolled and actively contributing members.

4.2 Age and Health Requirements

To ensure consistency and sustainability of the program, the following age and health criteria apply:

- All eligible applicants must be **between 18 and 70 years old** at the time of initial enrollment.
- Applicants must be in **generally good health** and capable of participating in church ministry and responsibilities.
- Upon application, members are required to **complete a Health Information Questionnaire**, which includes questions about possible **pre-existing medical conditions** (e.g., cardiovascular issues, diabetes, cancer, previous surgeries, etc.).
- While disclosure of pre-existing conditions does not automatically disqualify a member, the **Board of Trustees reserves the right to review the nature and timing of any assistance request** related to disclosed or known conditions. This ensures fairness and responsible fund management.
- All health-related declarations must be made truthfully. Misrepresentation may result in **suspension or disqualification** from the program.

4.3 Enrollment Process

- Applicants must complete the Membership Application Form and sign the Member Acknowledgment and Disclosure Statement.
- Registration becomes active upon payment of the initial contribution and submission of required documents.

4.4 Special Provision for Retirees Over 70

Retired JRM full-time workers who are over 70 years old at the time of application may be accepted into PCHAP under a special membership category, provided they remain in good standing with the ministry and are not receiving regular income.

- They shall contribute only ₦250 per month (50% of the standard monthly contribution).
- They will receive the same benefit structure as other members, including the one-time per year medical assistance, subject to fund availability and board approval.
- The Board will review this discounted contribution structure annually to ensure the program's sustainability.
- As the fund grows and the program matures, the Board may consider fully waiving the monthly contribution for this category of members.

4.5 Contribution Activation and Effectivity

- Membership coverage becomes effective after six (6) continuous months of paid contributions.
- Members who default in payment will not be eligible for assistance until their dues are updated.
- Past contributions will not be refunded under any circumstances.

4.6 Resignation, Disqualification, and Suspension

- Members may voluntarily withdraw from the program by notifying the administration in writing.
- Inactive members or those with unpaid dues for more than 3 consecutive months may be suspended or disqualified.
- Disqualified members may reapply but will be subject to a new 6-month contribution requirement.

5. Contributions & Financial Rules

5.1 Monthly Contribution

- Each member is encouraged to contribute **₱500 per month**.
- Payments can be made individually or through a regional cluster arrangement (e.g., FTW Manila, La Union, Nueva Ecija).

5.2 Payment Methods

- Accepted payment methods include:
 - Direct bank deposit to the designated PCHAP account
 - Cash through approved regional administrators
 - Online transfers using verified platforms authorized by the administrative team

5.3 Contribution Records and Monitoring

- All contributions will be tracked using a centralized system maintained by the Administrative Oversight Team.
- Members will receive regular confirmations or updates on their contribution status.

5.4 Effect of Missed Contributions

- Failure to contribute for **three (3) consecutive months** may lead to suspension.
- Suspended members are not eligible for benefits until contributions are updated.
- Contributions are **non-refundable** and **non-transferable**.

5.5 Adjustments and Fund Scaling

- The Board of Trustees may conduct an annual review of contribution levels.
- Adjustments may be made based on fund performance, administrative costs, and evolving program needs.

6. Scope of Assistance

6.1 Types of Assistance Available

A. Medical and Hospitalization Assistance

- Covers hospital confinement, surgery, outpatient services, and emergency care.
- Reimbursement for annual physical exams up to ₱2,000 after 12 months of continuous contributions.
- All requests are subject to fund availability and require Board approval.
- Requests related to pre-existing conditions are subject to additional review and are not guaranteed.
- Members who have contributed continuously for at least five (5) years and choose to exit the program may be granted a one-time hospitalization assistance of ₱10,000, subject to board review and availability of funds.

B. Bereavement/Funeral Assistance

- Voluntary-based aid provided upon the death of a member.
- Amount depends on contributions received and board discretion.

6.2 Projected Assistance Table (Non-Guaranteed)

No. of Members	Monthly Contribution	Annual Fund	Projected Max Assistance
100	₱50,000	₱600,000	Up to ₱10,000
200	₱100,000	₱1,200,000	Up to ₱20,000
300	₱150,000	₱1,800,000	Up to ₱30,000
400	₱200,000	₱2,400,000	Up to ₱40,000
500	₱250,000	₱3,000,000	Up to ₱50,000
600	₱300,000	₱3,600,000	Up to ₱60,000
700	₱350,000	₱4,200,000	Up to ₱70,000
800	₱400,000	₱4,800,000	Up to ₱80,000
900	₱450,000	₱5,400,000	Up to ₱90,000
1,000	₱500,000	₱6,000,000	Up to ₱100,000

Disclaimer:

*All assistance is **non-guaranteed** and depends on fund availability. PCHAP is **not insurance**, and members must sign a waiver acknowledging this.*

7. Disbursement and Approval Process

7.1 Submission of Request

- Member submits a completed Assistance Request Form with all required documents.
- Documents include medical certificates, receipts, death certificates (if applicable), and insurance documents.

7.2 Preliminary Review

- The Administrative Oversight Team checks eligibility, contribution status, and completeness of documents.

7.3 Board Evaluation and Approval

- Board reviews fund availability and prioritizes based on urgency and compliance.
- A majority vote is required to approve any disbursement.

7.4 Fund Disbursement

- Once approved, funds are released via bank transfer or authorized cash payout.
- Recipients sign a Disbursement Record Form.

7.5 Monitoring and Reporting

- All transactions are recorded and reported in quarterly financial updates.
- Members can check their request status with the admin team.

7.6 Disqualification of Request

- Requests may be denied if the member is ineligible, documents are insufficient or fraudulent, or policies are violated.

8. Rights and Responsibilities of Members

8.1 Member Rights

- To apply for assistance under the program based on eligibility and policies.
- To receive quarterly financial reports detailing contributions and disbursements.
- To access administrative support for inquiries and documentation needs.

- To be treated with confidentiality and dignity throughout the process.
- To receive full disclosure of program guidelines and legal disclaimers before joining.

8.2 Member Responsibilities

- To read, understand, and comply with all program policies.
- To maintain active membership by contributing ₦500 monthly.
- To provide accurate and complete information on all forms and requests.
- To report changes in status (e.g., church, family, health insurance).
- To act in good faith and support the spirit of shared care and stewardship.
- To sign the Member Acknowledgment and Disclosure Form, confirming awareness that assistance is not guaranteed.

9. Legal and Compliance Safeguards

9.1 Non-Insurance Declaration

- PCHAP is not an insurance or pre-need program.
- Operates under J29 Corporation, a non-stock, non-profit religious entity.
- No guaranteed benefits or premiums are involved; assistance is based on fund availability and board approval.
- Compliant with:
 - RA 10607 (The Insurance Code)
 - RA 9829 (The Pre-Need Code)

9.2 SEC Registration

- J29 Corporation is duly registered with the SEC.
- The Articles of Incorporation and Bylaws have been amended to include PCHAP's mission.

9.3 Terminology Caution

- Avoid words like "insurance," "policyholder," "premium," or "underwrite."
- Always present PCHAP as a voluntary, mutual assistance program.

9.4 Member Waiver Requirement

- Members must sign a waiver acknowledging the non-guaranteed nature of benefits.
- They agree not to hold the program legally accountable for unfulfilled requests.

9.5 Policy Review

- The Board may revise this policy periodically.
- Legal professionals will be consulted on any regulatory or compliance matters.

10. Reporting and Transparency

10.1 Financial Reporting

- The Administrative Oversight Team will prepare quarterly reports summarizing:
 - Total contributions received
 - Total disbursements granted
 - Remaining fund balances
- These reports are submitted to the Board of Trustees for review and shared with members.

10.2 Member Access to Reports

- Members can request access to financial reports.
- Updates may also be shared via official communications, bulletins, or regional gatherings.

10.3 Audit and Oversight

- An annual internal review of fund management will be conducted.
- An independent audit may be performed as needed for transparency.

10.4 Administrative Accountability

- The admin team will maintain accurate records of contributions, applications, and fund activity.
- Any discrepancies must be reported to the Board immediately.

10.5 Member Communication

- Members will be notified of policy changes, payment reminders, and fund updates.
- A dedicated help channel or contact person will be made available for questions or concerns.

11. Operational Structure and Legal Entity

The Pastor's Care Health Assistance Program (PCHAP) is a mission-driven initiative established to support the medical and health-related needs of full-time workers, pastors, and leaders within Jesus Reigns Ministries (JRM).

To ensure legal compliance, proper fund administration, and structural sustainability, the program is operated under J29 Foundation, Inc., a separate non-stock, non-profit legal entity registered with the Securities and Exchange Commission (SEC).

While J29 provides the legal and administrative framework for PCHAP, the program remains a ministry initiative aligned with the mission and vision of JRM.

The partnership between JRM and J29 shall be guided by a Memorandum of Agreement (MOA), which will include:

- Recognition of PCHAP as a program established to serve JRM workers
- Regular reporting and financial transparency to the JRM Board of Trustees
- Representation of JRM-appointed leaders or BOT members within the J29 Board
- Provisions for accountability and realignment, should the direction of the program drift from its original purpose

This partnership ensures that PCHAP upholds both legal integrity and spiritual alignment while serving the JRM community.

12. Policy Supremacy and Interpretation

This policy document shall serve as the official and governing reference for all matters related to the Pastor's Care Health Assistance Program (PCHAP).

In the event of a conflict or inconsistency between this policy and any previous announcements, brochures, forms, or documents, this policy shall prevail.

Supplementary provisions or conditions stated in earlier or external documents that do not conflict with this policy may be upheld, subject to review and approval by the Board of Trustees.

12. Forms and Disclosures (Annexes)

Annex A: Membership Application Form

PHAP APPLICATION FORM

This application provides details of your Health Assistance underwritten by Pastor's Health Assistance Program. It forms part of your certificate of assistance and is subject to the exclusions, terms, and conditions of the actual Policy. You are required to disclose in this application form fully, and faithfully all the facts which you know or ought to know. Please print legibly.

IMPORTANT: You are also required to submit a copy of identification card with a photo and signature.

PERSONAL DATA

- **Surname:** _____
 - **First Name:** _____
 - **Middle Initial:** _____
 - **Civil Status:**
 Single Married Separated Widowed
 - **Birthday (mm/dd/yyyy):** _____
 - **Nationality:** _____
 - **Home Mailing Address:** _____
-

- **Telephone Number:** _____
 - **Mobile Number:** _____
 - **Fax Number (if any):** _____
 - **Job Title / Occupation:** _____
 - **Source of Funds:** _____
 - **E-mail Address:** _____
 - **SSS / Passport No.:** _____
 - **PhilHealth / TIN:** _____
 - **Church Affiliation:** _____
 - **Church Address:** _____
-

YOUR BENEFICIARIES (Use separate sheet if necessary)

Name	Date of Birth	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

DECLARATION

RECOMMENDING PASTOR

I hereby certify that I _____
have validated the identification document(s) provided by the applicant for the purpose of his
application for assistance.

Signature Over Printed Name
Date Signed: _____

Signature Over Printed Name
(RECOMMENDING PASTOR)
Date Signed: _____

Annex B:

Member Acknowledgment and Disclosure Statement

Pastor's Care Health Assistance Program (PCHAP)

I, _____ the undersigned, hereby acknowledge and voluntarily agree to the following terms and conditions as a participant of the Pastor's Care Health Assistance Program (PCHAP):

1. PCHAP is Not an Insurance Product

I understand that PCHAP is not an insurance plan and does not provide guaranteed benefits. It is not regulated by the Insurance Commission of the Philippines and does not fall under Republic Act 10607 or Republic Act 9829.

2. All Assistance is Subject to Fund Availability and Board Approval

I acknowledge that any financial assistance I may request will be evaluated by the Board of Trustees and can only be granted if funds are available. There is no guarantee that any amount will be paid, even after eligibility is met.

3. Waiver of Legal Claims

I agree not to file legal action or make any claims against the organization or its board if assistance is denied or unavailable. I fully accept the program's mutual aid and discretionary nature.

4. All Contributions Are Non-Refundable

I understand that all contributions made are non-refundable and non-transferable, regardless of how long I remain a member or whether I receive any assistance.

5. Minimum Contribution Period Before Eligibility

I acknowledge that I must make six (6) continuous monthly contributions before I can qualify to request any form of assistance.

6. Suspension Due to Missed Contributions

I am aware that if I fail to contribute for three (3) consecutive months, I may be suspended and temporarily ineligible to request benefits until my contributions are updated.

7. Requirement to Submit Accurate and Honest Documents

I understand that submitting false, incomplete, or misleading documents may lead to disqualification from the program and forfeiture of eligibility.

Printed Name of Member: _____

Signature: _____

Date: _____

Annex C – Health Questionnaire

Please answer all questions truthfully. This will be used solely to assess eligibility for health assistance.

Personal Information

- Full Name: _____
 - Home Address: _____
 - Contact Number: _____
 - Email Address: _____
-

1. Are you currently taking any medication?

Yes ____ No ____

If yes, name of medication: _____

2. Height: _____ cm

3. Weight: _____ kg

4. Has there been a weight change of more than 4 kilos within the last 12 months?

Yes ____ No ____

If yes, provide details: _____

Health History (Check all that apply)

A. Cardiovascular

High blood pressure

Chest pain / discomfort

Heart murmur

Rheumatic fever

Fever

Stroke

Aneurysm

Circulatory or heart disorder

E. Musculoskeletal / Neurological

Arthritis, gout

Back or spinal disorder

Joint pain

Multiple sclerosis, none fracture

Muscular weakness or muscle disorder

B. Endocrine / Metabolic

- Diabetes
- Sugar in the urine
- Thyroid or glandular (endocrine) disorder

F. Blood / Immune Disorders

- Anemia
- Bleeding or blood disorder

C. Urinary / Reproductive

- Kidney
- Bladder or urinary disorder/infection
- Reproductive/prostate disorder

G. Other Illness / Surgery

- Any other illness or surgery? Yes No

If yes, provide details:

D. Skin / Lymph / Cancer

- Skin/pigmentation disorder
 - Enlarged glands, lymph nodes, nodules, polyps
 - Cysts, lumps, tumor, abnormal growth
 - Cancer / malignancy
-

H. Insurance Status

- Do you have health insurance? Yes No

Do you have an HMO (Health Card)? Yes No

For Women Only

5. Are you pregnant?

Yes No

If yes, how many months? _____

6. Have you had any complications from pregnancy?

Yes No

If yes, provide details below.

Additional Notes / Clarifications (if any):

13. Frequently Asked Questions

Below are the 12 most important and commonly asked questions regarding the Pastor's Care Health Assistance Program (PCHAP):

1. Is PCHAP an insurance product?

No. PCHAP is *not* an insurance plan and is *not regulated* by the Insurance Commission of the Philippines. It is a faith-based, mutual aid program under a non-stock, non-profit corporation (J29 Corporation), designed to provide voluntary assistance to members based on the availability of funds and board approval.

2. Are the benefits guaranteed?

No. All assistance is subject to fund availability and the approval of the Board of Trustees. While PCHAP provides estimated or projected amounts based on membership size, no benefit is promised or guaranteed.

3. Why do I need to sign a waiver and disclosure statement?

The waiver ensures that members understand the non-insurance nature of the program. By signing, you confirm that you acknowledge:

- Assistance is not guaranteed
- PCHAP is not legally liable for any unfulfilled requests
- Contributions are non-refundable
- The program is subject to board discretion and available funds

4. What is the Pastor's Care Health Assistance Program (PCHAP)?

PCHAP is a voluntary, community-based financial assistance program for pastors, full-time workers, and lay leaders within Jesus Reigns Ministries. It is designed to support qualified members during medical emergencies or in cases of bereavement—funded solely by member contributions and managed by J29 Corporation.

5. How much do I need to contribute monthly?

Each active member is expected to contribute ₱500 per month. This contribution must be consistent and up-to-date for members to remain eligible for assistance.

6. What types of assistance are available under PCHAP?

Eligible members may apply for:

- Medical or hospitalization aid (e.g., surgery, confinement, outpatient treatment)
- Annual physical exam reimbursement (up to ₱2,000 after one year)
- Bereavement/funeral assistance (voluntary-based aid upon board discretion)

7. What is the waiting period before I can request assistance?

You must complete six (6) continuous months of contributions before you become eligible to apply for any form of assistance. This ensures that the program has sufficient funds and fairness for all members.

8. What happens if I miss my monthly contributions?

If you fail to contribute for three (3) consecutive months, your membership may be suspended, and you will not be eligible for any assistance until your contributions are updated. Your membership may also be re-evaluated or terminated if non-payment continues.

9. Are contributions refundable if I withdraw or do not receive assistance?

No. All contributions made to PCHAP are non-refundable and non-transferable, regardless of whether you eventually request or receive aid.

10. Are spouses and children also covered?

Yes. Spouses are eligible to join for the same ₱500 monthly contribution. Children under **18 years old** may be listed under a parent's membership. Children **18 years and older** must apply separately if they meet eligibility criteria (e.g., are FTWs or lay pastors)

11. Are retirees eligible to join PCHAP?

Yes. Retired pastors, full-time workers (FTWs), and lay leaders of Jesus Reigns Ministries are eligible to join PCHAP. They must meet the same membership and contribution requirements as active members, including the ₱500 monthly contribution and the six (6) continuous monthly contributions before becoming eligible to request assistance.

12. How do I apply for assistance and what documents are needed?

You must fill out the official Assistance Request Form and submit it with complete supporting documents, such as:

- Medical certificate or hospital bill (for medical aid)
- Death certificate (for funeral assistance)
- Proof of payment/contributions
- PhilHealth or insurance documents (if applicable)

All requests are reviewed by the admin team and must be approved by the Board of Trustees.