A Healthcare Program Orientation exclusively for

MHI POWER TECHNICAL SERVICES CORPORATION

January 1, 2024 to December 31, 2024





SWIPE CARD SYSTEM



Efficient Validation Process



Electronic Updating of Benefit Coverage



Real-time Monitoring of Availments



Valid for 3 consecutive years (No Annual Re-Printing)





EXTENSIVE NATIONWIDE PROVIDERS



707 Reputable Hospitals including Major Hospitals in key cities:

(The Medical City, Cardinal Santos Medical Center, St. Luke's Medical Center - Q.C., and Capitol Medical Center; Access to Makati Medical Center, St. Luke's Medical Center - Global and Asian Hospital Medical Center.



1,233 Clinic partners including Mall Based Clinics: (Prosers, Borough Medical Clinic, Delos Santos STI Mega clinic)



51,603
Top caliber
Physicians in
different specialty
fields



729Plan
Coordinators



819
Dental Clinics



1,086
Dentists



HOW TO REACH US?





(02) 8-812-9090

(02) 8-396-9000

(0917) 536-0962

(0908) 894-7763

All calls are recorded

SMS & Email (0917) 622 - 2626 (0917) 622 - COCO helpline@cocolife.com

REC

- **Exclusive SMS numbers**
- **Drop call Recovery Services**













Advance LOA request format:

For Consult-

Company Name:

Member Name:

Member ID number:

Consult Date:

Name of Doctor:

Name of Clinic/Hospital:

For Laboratory-

Company Name:

Member Name:

Member ID number:

Laboratory Date:

Copy of Doctor's Request:

Name of Clinic/Hospital:





VIRTUAL CARD APP

Members Registration

 Register by tapping the "Register Account" button.

Provider directory

 Click on the provider's button and the list of accredited hospitals, clinics, physicians, and dentists will be shown.

Benefit Guidebook

 Click on the "guidebook" button to show the official Benefit guidebook of Cocolife Healthcare

Frequently Asked Questions

 Click on the FAQ link to display the list of frequently asked questions.

Electronic LOA (consultation & dx)







HOW TO USE THE COCOLIFE HEALTHCARE VIRTUAL CARD (MOBILE VERSION)

SETTING UP YOUR DEVICE

The minimum OS requirement is Android version 8.0 and up, and iOS 11 and up.



- · Open the Google Play Store
- · Search for 'COCOLIFE' Select Cocolife with Finance





- Open the App Store
- Search for 'COCOLIFE'
- Select Cocolife
- · Tap GET.

NAVIGATING THE HOME SCREEN



- Access member registration
- 2. Shows the list of Accredited Hospital, Clinics, Doctors and Dentists
- 3. Shows the standard COCOLIFE Benefit Guidebook
- Shows frequently asked questions

REGISTRATION



- 1. Provide the necessary information. You may refer to your Cocolife Healthcare Card for some of the details. For the membership number, refer to the ID number on your card but remove the hyphen (-), the first four digits, and the leading zeros when keying in the details. All fields with an asterisk (*) are required fields.
- 2. Take a selfie, as well as a photograph of your ID (maximum file size 10MB). You must agree with the Terms and Conditions to proceed.
- 3. Verify your Email and Mobile Number via OTP, then set your Pin.

APP FEATURES



1. Contains the virtual card image and other member details



- 2. Allows users to search for accredited doctors by name
- 3. Shows the COCOLIFE Guidebook
- 4. Allows users to search for accredited hospitals or clinics by provider name or location
- 5. Allows users to create electronic letter of authorization (eLOA) for consultation and diagnostic service types



HOW TO USE THE COCOLIFE HEALTHCARE VIRTUAL CARD HEALTHCARE (WEB VERSION)

NAVIGATING THE WEB HOME SCREEN



GO TO Q https://weblogin.cocolifehealthcare.com.ph



- 1. Registered members can simply log in with their existing Username and Password.
- 2. New members may log in
- 3. View the list of Accredited Hospital, Clinics, Doctors and Dentists
- 4. View the standard COCOLIFE Benefit Guidebook
- 5. View the Frequently Asked Questions

REGISTRATION



- Provide the necessary information. For the membership number, refer to the ID number on your card but remove the hyphen (-), the first four digits, and the leading zeros when keying in the details. All fields with an asterisk (*) are required fields.
- Take a selfie (mandatory), as well as a photograph of your ID (optional). You must agree with the Terms and Conditions to proceed.
- Verify your Email and Mobile Number via OTP.

MAIN MENU



Go to Members Profile to display your virtual card.

CUSTOMER SERVICE & LIASON OFFICERS

- ✓ Scheduling and coordination of members' APE/ECU through our Wellness Management team
- ✓ **52** Liaison Officers strategically assigned in key cities nationwide to assist COCOLIFE HEALTHCARE members during hospitalization and ensure that members are receiving prompt and suitable medical attention













Comprehensive **Benefit Program**



ELIGIBLE ENROLLEES





SINGLE

Parents up to 65 years old

Siblings
from 15 days old up to 24
years old
Eldest to youngest

MARRIED

Legal Spouse up to 65 years old

Child/ren
from 15 days old up to 24
years old
Eldest to youngest

SINGLE-PARENT

Child/ren
- from 15 days old to 24
years old
Eldest to youngest

Parents
- up to 65 years old

Hierarchy Rule Applies



PLAN FEATURES

(Principals & Dependents)



Regular Private

Php 150,000

Notes:

- Benefit limit is per illness per year basis.
- Room category is not limited to a certain amount







COMPREHENSIVE BENEFIT COVERAGE



OUT-PATIENT CARE

IN-PATIENT CARE

EMERGENCY CARE

ANNUAL PHYSICAL EXAMINATION

DENTAL CARE

LIFE INSURANCE AND AD&D

PREVENTIVE CARE

OUT-PATIENT CARE



• All medically necessary consultations including specialists evaluation (except prescribed medicines)

• EENT consultations (eye, ear, nose and throat)

• Necessary X-Ray, Lab Exams and Diagnostic procedures prescribed by accredited physician

• First Aid treatment of accidental injuries

Minor Surgeries not requiring confinement



NEW NORMAL AVAILMENT PROCESS

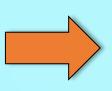


Secure an appointment with the doctors, hospitals and clinics by calling





Arrive at the center 1-2 hours prior to your appointment to claim the LOA





a alamy stock photo

Always make follow up's with doctors confirmed appointments and procedures



Verify if the doctor, hospital and clinics are open before going





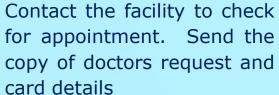


IN-PATIENT CARE

- Daily Room & Board accommodation
- Services of physician, specialists and surgeons
- General Nursing Services
- Use of emergency, operating and recovery rooms
- Drugs, medicines, anesthesia and oxygen
- Laboratory test, x-ray and other diagnostic procedures
- Dressings, casts & other necessary medical supplies
- Transfusion of blood and other blood products
- Confinement in Intensive Care Unit
- Standard admission kit

NEW NORMAL AVAILMENT PROCESS







Pay any expenses that are not covered directly to the billing section





Facility will contact our helpline for approval and coverage confirmation



File your Philhealth before discharge





Once approve member shall proceed with the availment as scheduled



Choose room according to benefit to avoid increment and excess charges







EMERGENCY CARE

- Doctor's services
- Emergency room fees
- Medicines used for immediate relief and during treatment
- Oxygen, IV fluids, whole blood and human blood products
- Dressings, casts and sutures
- •X-ray, Laboratory and Diagnostic exams
- Room upgrading provision up to 24 hours (except Suite Room)



EMERGENCY PROCEDURE

(In ACCREDITED Hospitals within the Phils.)









Access Card To The

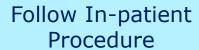
ER Officer On Duty





Sign <u>Emergency</u> <u>Case Form</u>

Patient goes to ER of Nearest Cocolife Accredited Hospital









If for Confinement, Notify Cocolife ASAP



ER Administers Treatment



EMERGENCY PROCEDURE



(In NON- ACCREDITED Hospitals within the Phils.)

COCOLIFE HEALTHCARE will reimburse

100% based on standard rates UP TO PHP MBL

REQUIREMENTS

- Medical Certificate with Final Diagnosis
- Official Receipts of Professional Fees & Hospital Bills.
- Statement of Account
- Itemized SOA/ Charge slips/ Breakdown of Payment
- Police and/or Incident Report for Accident cases.

TURN-AROUND TIME (TAT)

FILING PERIOD: 30 DAYS- Notice from the date of discharge.

PROCESSING: 15 WORKING DAYS- Upon received of Original Documents.

ANNUAL CHECK-UP

- General physical exam and medical history taking
- General consultation and counseling on health habits
- Chest x-ray exam
- Urinalysis
- Fecalysis
- Complete blood count
- Electrocardiogram and (for over 35 yrs old)
- Pap Smear (for female over 35 yrs old)

** To be availed at Cocolife Designated Clinics.



DENTAL CARE (COCOLIFE DENTAL NETWORK)

- Unlimited Dental consultations
- Twice a year oral simple prophylaxis including polishing & cleaning
- Any number of Temporary Fillings
- Permanent Light Cure Filling up to 2 Teeth
- Any number of non-surgical extractions
- Re-cementation of jackets, crowns, inlays and onlays
- Minor adjustment of dentures
- Relief of acute dental pain
- Emergency desensitization of hypersensitive teeth
- Care for oral lesions, wounds and burns





LIFE INSURANCE AD&D

(Principals)

Death due to NATURAL CAUSE

Death due to ACCIDENT

•Death due to **COVID-19** (Principal & Dependents)

Php 25,000 Php 100,000 Php 50,000







PREVENTIVE CARE

- Periodic monitoring of health problems
- Health Education & Counselling on diets and exercise
- Family Planning Counselling; Wellness sessions
 Anti-rabies, Anti-tetanus, Anti-venom 1st dose w/in 24hrs







SPECIAL PROVISION

<u>Pre- Existing Medical Conditions</u> are conditions that existed prior to the inception of your coverage with Cocolife Healthcare. A disease is considered pre-existing if:

- -Such illnesses/injury was in a way evident before the effective date of coverage
- -With professional advice/treatment prior to the inception date
- -Can be clinically determined to have started prior to the inception date

PRE-EXISTING MEDICAL CONDITIONS ARE COVERED FOR EMPLOYEES and DEPENDENTS UP TO MBL











POLICY EXCLUSIONS

- Intentionally self-inflicted injury, suicide, death, self-destruction or any attempt there at while sane or insane.
- 2. Illness, injury or death attributable to the Insured's own misconduct, gross negligence, intemperate or under the influence of drugs or alcohol, vicious or immoral habits; participation in the commission of a crime, violation of law or ordinance.
- 3. Unnecessary exposure to needless perils including firecracker injuries, hazardous sports and activities (such as aqualung diving, boxing, climbing, flying except air travel, football, hang-gliding, hunting, hurling, ice hockey, motor competitions, motorcycling in any form, parachuting, polo, pot-holing, power boating, racing, show jumping, skydiving, use of wood-working machinery, water ski-jumps and tricks, winter sports, wrestling, and yachting beyond 5 kilometers of a coastline).
- 4. War, invasion, act of foreign enemy, hostilities or warlike operations (whether declared or undeclared), mutiny, riot, civil commotion, strike, civil war, rebellion, revolution, insurrections, conspiracy, military or usurped power, martial law or state of siege, or any of the events or causes which determine the proclamation or maintenance of martial law or state of siege, seizure, quarantine or customs regulations; or nationalization by or under the order of any government or public or local authority; or any weapon or instrument employing atomic fission or radioactive force whether in time of peace or war.



- 5. Services in the Armed Forces of any country or international authority, whether in peace or war; participating in any political, police, investigative, fire fighting, military or para-military activity; or any bodily injury or sickness contracted while in the military, naval, or air service.
- 6. Murder or assault, homicide or any attempt thereof; or physical injuries, occasioned by provocation of the Insured.
- 7. Mental, nervous or other functional disorders of the mind; congenital anomalies and conditions arising there from.
- 8. Hospitalization primarily for diagnosis, x-ray examinations, therapies, routine physical examinations, check-ups, dialysis, rest cures, or non-surgical care for tuberculosis. Custodial, domiciliary, convalescent or intermediate care; long term rehabilitation. Treatment for neo-natal and post-natal abnormalities developing within 6 months and their complications.
- 9. Any dental work (except if dental benefits are covered in this Policy as indicated in the Schedule of Benefits), treatment or surgery; oral surgery, procedure for treatment of error of refraction, fitting of eye glasses or hearing aids; cosmetic including treatment for warts, plastic or reconstructive surgery, except to the extent that any of them are necessary for the repair and alleviation of damage to the Insured caused solely by accidental bodily injury covered under this Policy.



- 10. Any treatment in connection to pregnancy or resulting childbirth or miscarriage or complications therefrom (except if maternity benefits are covered in this Policy as indicated in the Schedule of Benefits); sterilization of either sex or reversal of such, artificial insemination, sex transformation or care for infertility; treatment of venereal diseases and other sexually transmitted diseases and Acquired Immune Deficiency Syndrome (AIDS); treatment of cataract, benign prostatic hypertropy, scoliosis, guillain-barre syndrome, chronic glomerulonephritis, spinal stenosis or vitiligo, epilepsy, cardiac valvular or rheumatic heart disease and chronic dermatoses.
- 11. Any charges where expenses are provided or covered by law or government including PhilHealth or treatment where charges are provided free of charge by any local or national government or treatment for any communicable disease declared by any government agency or entity as causing a state of emergency in an area.
- 12. Any treatment which are not recommended and performed by a Physician as being medically necessary including any charges for non-medical services such as telephone, radio, television, extra bed, extra food, toilet articles and the like, private duty nurse or physician.
- 13. Purchase or use of durable medical equipment, oxygen dispensing unit except rental for use only while confined; expenses for corrective/prosthetic appliances, artificial aids, surgically implanted external devices and orthopedic hardware.



CARD REPLACEMENT

Replacement of ID (Lost / Change in details)

1. For replacement of lost ID, the member must request with complete details. IDs will only be released upon payment of **Php 200.00**.



2. Any amendments/revisions in ID details (such as but not limited to change of name, birth date, room & board, gender, or company name), a replacement fee of **Php 50.00** per member will be charged. IDs will be released once payment is settled.



THANK YOU

