



eClaims Module I

(Claims Eligibility Web Service (CEWS))

USER GUIDE

Claims Eligibility Web Service will allow the hospital to check or verify whether the patients are registered with PHIC or not; if the patients have enough contributions to avail the benefits; and/or has qualified dependent within 45 days' given period.

This module offers the following functions:

- Pin Verification
- Check Eligibility (Initial and Final)
- Doctor Accreditation

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HOW TO VERIFY MEMBER'S PIN:

PATIENT WITH HOSPITAL RECORDS

- To verify member's PIN, tick eClaims menu at the left side of the screen.

The screenshot shows the eClaims dashboard. On the left, there is a vertical navigation menu with various service categories like Nursing, OR, Laboratories, etc., and a specific 'eClaims' item which is highlighted with a red box and labeled with a '1'. A green arrow points from this highlighted item to the main content area. The content area contains a news section about the eClaims project, three status cards for Transmittal Upload Status, e-Claims Status, and Statistics, and a dropdown menu labeled 'Eligibility' with a red box and the number '2'.

- The eClaims dashboard will display. Tick options will be displayed.

The screenshot shows the eClaims dashboard with the 'Eligibility' dropdown menu open, indicated by a red box and the number '2'. The dropdown menu lists several items under different sections: CEWS (Claims Eligibility, Get Member PIN, Doctor Accreditation), ECS (Transmittal), CVS (Check Claim Status, Get Voucher), and other options like News, Transmittal Upload Status, e-Claims Status, and Statistics.

- View **Search records** tab to search for patients with existing hospital record.
- Type **Patient Name** or **HRN** to view Member information.
- To enter PHIC Member Information, tick .

PIN Verification Utility

Get PIN Walk-in

Search for an existing patient record

Enter the search term (LASTNAME, FIRSTNAME or HRN)

Member information

Member Relation	Not set
PIN	Not set
Last name	Not set
First name	Not set
Middle name	Not set
Suffix	Not set
Birth Date	Not set
Member Category	Not set

Check PIN **Add Insurance** **Go To Eligibility**

6. Fill out the required (*) and necessary fields.
7. Click **Save changes** if done. And tick **Close** to cancel.

Member information

Relation *

PIN

Last name *

First name *

Middle name

Suffix

Sex - SELECT

Birth Date mm-dd-yyyy
e.g. 01/01/2014

Member Type *

Employer No
Unique PHIC Employer Identification Number

Employer No
Unique PHIC Employer Identification Number

Save changes **Close**

8. To generate Member PIN via Phil Health Web-Server, tick **Check PIN**.

9. To add PHIC Member Information to Patient Billing Record, tick

+ Add Insurance

10. To check Member's PHIC eligibility, tick

Go To Eligibility

The screenshot shows the PIN Verification Utility page. At the top right, there are three buttons: 'Check PIN' (green), 'Add Insurance' (red), and 'Go To Eligibility' (blue). Red arrows point from the numbers 8, 9, and 10 to these respective buttons. The 'Get PIN' section has a 'Walk-in' tab selected. Below it is a search bar and a table for member information.

HOW TO VERIFY MEMBER'S PIN:

FOR PATIENT WITHOUT HOSPITAL RECORDS / WALK-IN PATIENT

1. Tick **Walk-in** tab to search PIN for PHIC Members with no hospital records.
2. Fill out the required (*) and necessary fields.
3. Tick **Check PIN** to generate Member's PIN.

The screenshot shows the PIN Verification Utility page. A red box highlights the 'Walk-in' tab under 'Get PIN'. A red arrow labeled '1' points to this tab. Another red box highlights the required fields (Last name, First name, Middle name, Suffix, Birth date) in the member information table. A green arrow labeled '2' points to this box. A green arrow labeled '3' points to the 'Check PIN' button at the top right.

HOW TO SEARCH EMPLOYER PEN :

- To Search the Employer's Pen, click on the PIN Verification option under the Eligibility sub-module.

The screenshot shows the eClaims Dashboard of the Southern Philippines Medical Center. At the top right, there is a navigation bar with 'Eligibility', 'Submit Claims', 'Claims Status', and other options. A red box highlights the 'PIN verification' link in the 'Eligibility' dropdown. Below the navigation bar, there is a news section with a message from PhilHealth about the eClaims Project. In the center, there are three cards: 'Transmittal Upload Status' (Not Uploaded, 35/58 (60%)), 'e-Claims Status' (In process, 0/0 (0%)), and 'Statistics' (a bar chart). On the left, a sidebar lists various modules like Home, Admission, ER, OPD, PHS, IPBM, Medical Records, Doctors, Nursing, OR, Laboratories, Blood Bank, Radiology, OB-Gyne Ultrasound, Pharmacy, Dialysis, Social Service, PDPU, HSSC, Billing, PAD, eClaims, Cashier, Reports, System Admin, and Special Tools. On the right, there is a 'Quick Navigation' sidebar with links for CEDS, ECS, CVS, and other claim-related functions.

- Fill out patient's name on the search bar, and then the system will automatically show the possible results.
- Tic **Edit** to continue, make necessary changes if needed.

The screenshot shows the PIN Verification Utility page. At the top, it says 'PIN Verification Utility'. Below that, there is a search bar with the placeholder 'Search for an existing patient record' containing the text 'MONTILLA, EULA E.' (highlighted with a red box and labeled '2'). To the right of the search bar are buttons for 'Check PIN', '+ Add Insurance', and 'Go To Eligibility'. Below the search bar is a 'Member information' section with fields for Member Relation, Member PIN, Patient PIN, Last name, First name, Middle name, Suffix, Birth Date, and Member Category. An 'Edit' button is highlighted with a red box and labeled '3' next to it. On the far left, there is a sidebar with the same list of modules as the previous screenshot.

4. Another window will prompt to ask the user for the member information.
5. On the most bottom part, select the member type.

The screenshot shows the SPMC Hospital Information System. A modal window titled "Member information" is displayed. Inside the modal, there are fields for First name (EULA), Middle name (ELICOR), Suffix (Suffix), Sex (Female), Birth Date (10/11/1996), and Member Type (highlighted with a red box). At the bottom right of the modal, there are "Save changes" and "Close" buttons. A green arrow labeled "4" points to the "Member Type" field, and another green arrow labeled "5" points to the "Save changes" button.

6. If the user chooses private employee or government employee, the two new additional parameters are needed to fill out.

The screenshot shows the "Member information" modal window. It contains fields for Suffix, Sex (Female), Birth Date (10/11/1996), Member Type (EMPLOYED-GOV'T), Search Employer (highlighted with a red box), and Employer No (highlighted with a red box). At the bottom right, there are "Save changes" and "Close" buttons. A green arrow labeled "6" points to the "Search Employer" field.

7. User will fill-out the name of Employer for the system to automatically display possible results.

The screenshot shows the 'Member information' dialog box. In the 'Search Employer' field, the text 'Southern Philippines Medical' is entered. A dropdown menu displays several employer options, with the top result highlighted: 'SOUTHERN PHILIPPINES MEDICAL CENTER 140224100032 | , DAVAO CITY, 24'. A red box highlights this selected item. A green arrow labeled '7' points to the dropdown menu. A blue 'Save changes' button and a white 'Close' button are visible at the bottom right of the dialog.

8. The system will automatically display the employee no. of the employee being searched.
 9. Tick **Save Changes** if done.

The screenshot shows the 'Member information' dialog box. The 'Employer No' field now contains the value '140224100032', which is highlighted with a red box. A green arrow labeled '8' points to this field. At the bottom right, there are two buttons: a blue 'Save changes' button and a white 'Close' button. A green arrow labeled '9' points to the 'Save changes' button.

HOW ADD/REMOVE INSURANCE NUMBER FOR SPECIFIC ENCOUNTER

1. Go to PIN verification under the Eligibility sub menus.

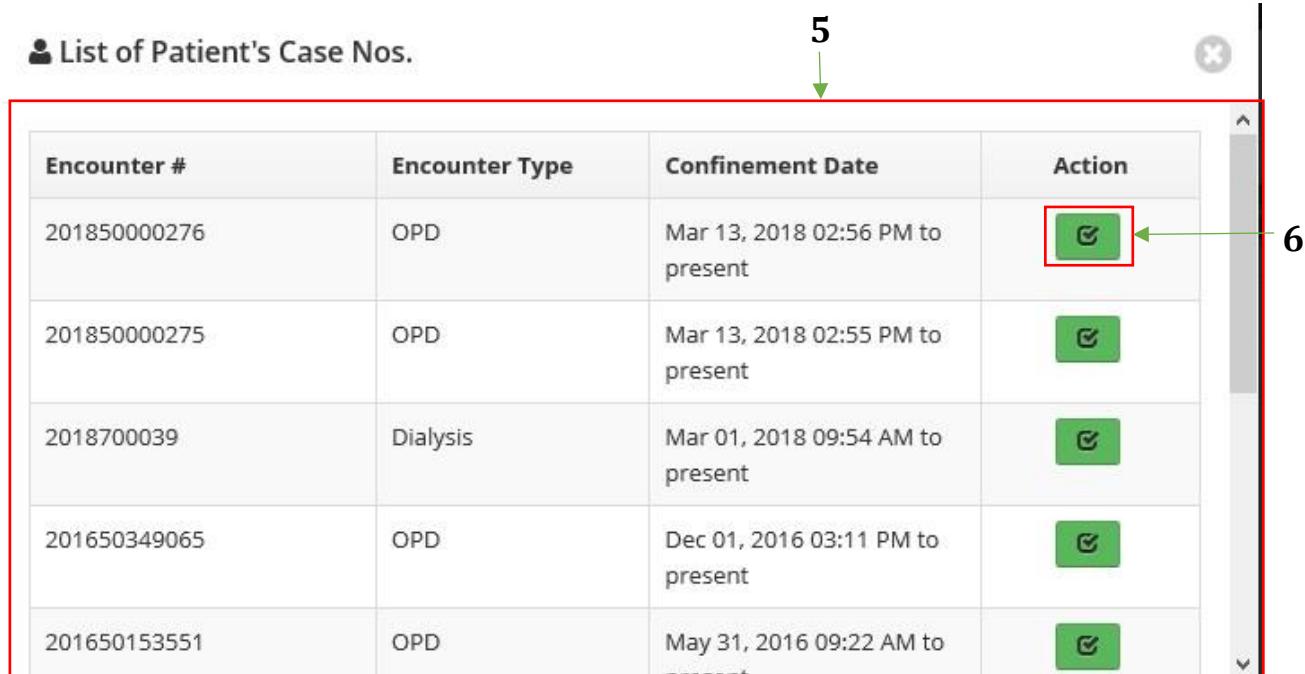
The screenshot shows the eClaims Dashboard for Southern Philippines Medical Center. At the top, there are navigation links for Home, Administration, ER, OPD, PHS, IPBM, Medical Records, Doctors, Nursing, OR, Laboratories, Blood Bank, Radiology, OB-Gyne Ultrasound, Pharmacy, Dialysis, Social Service, PDPUs, HSSC, Billing, PAD, eClaims, Cashier, Reports, System Admin, and Special Tools. The main content area displays a news article about the eClaims Project and three statistics boxes: Transmittal Upload Status (Not Uploaded 35/58 (60%)), e-Claims Status (In process 0/0 (0%)), and Statistics (a bar chart). The top right menu bar has tabs for Eligibility, Submit Claims, and Claims Status. A dropdown menu for 'Eligibility' is open, showing options: PIN verification (highlighted with a red box and a green arrow), Check eligibility, and Doctor accreditation. A large number '1' is placed next to the 'PIN verification' option.

2. Fill out the patient's name for the system to automatically show possible results.
3. Tick Check Pin to acquire Member PIN from PHIC web service.
4. Click + Add Insurance to select a specific encounter if there are many.

The screenshot shows the PIN Verification Utility page. The left sidebar includes the same navigation links as the previous dashboard. The main area is titled 'PIN Verification Utility' and contains a 'Get PIN' section with a search bar ('Search records' tab selected) containing the text 'RAMAJO, ALEXA NICOLE D.' (highlighted with a red box and a green arrow labeled '2'). Below the search bar is a 'Member information' table with fields: Member Relation (Child), Member PIN (000000000002), Patient PIN (000000000002), Last name (RAMAJO), First name (JADE), Middle name (DE TAZA), Suffix (), and Birth Date (Dec 24, 1985). To the right of the search bar are three buttons: 'Check PIN' (highlighted with a red box and a green arrow labeled '3'), '+ Add Insurance' (highlighted with a red box and a green arrow labeled '4'), and 'Go To Eligibility'.

5. A new window will pop-out to ask the user to select the specific encounter.

6. Click icon  to select.

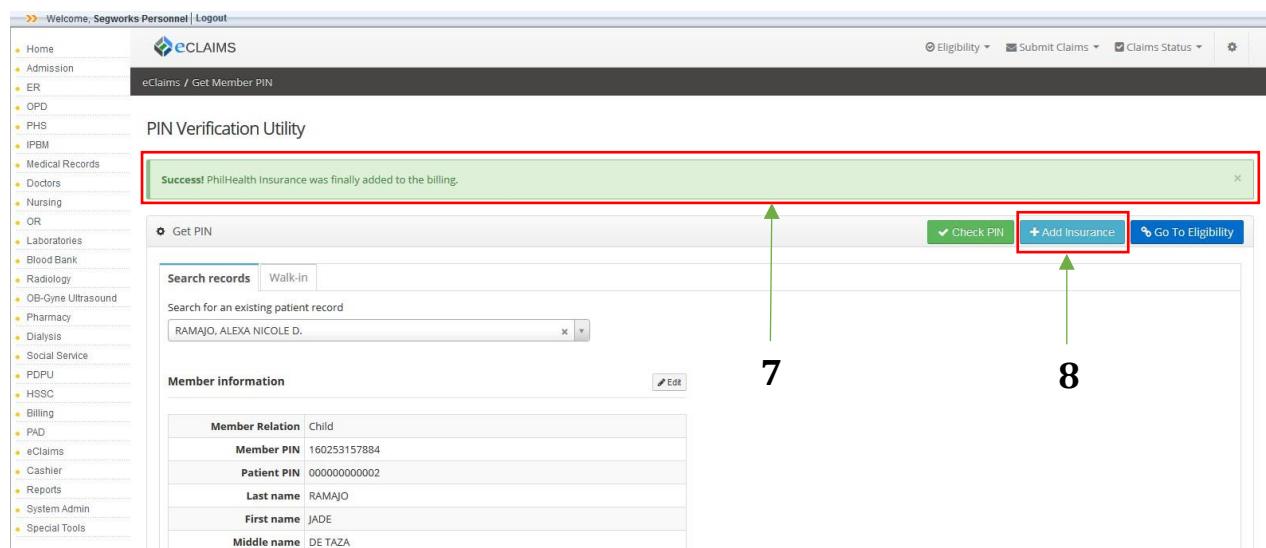


List of Patient's Case Nos.

Encounter #	Encounter Type	Confinement Date	Action
201850000276	OPD	Mar 13, 2018 02:56 PM to present	
201850000275	OPD	Mar 13, 2018 02:55 PM to present	
2018700039	Dialysis	Mar 01, 2018 09:54 AM to present	
201650349065	OPD	Dec 01, 2016 03:11 PM to present	
201650153551	OPD	May 31, 2016 09:22 AM to present	

7. The system will prompt if the process done is successful.

8. Tick  again, to remove the specific encounter.



Welcome, Segworks Personnel | Logout

eCLAIMS

eClaims / Get Member PIN

PIN Verification Utility

Success! PhilHealth Insurance was finally added to the billing.

Get PIN

✓ Check PIN  + Add Insurance  Go To Eligibility

Search records Walk-in

Search for an existing patient record

RAMAJO, ALEXA NICOLE D.

Member information

Member Relation Child

Member PIN 160253157884

Patient PIN 000000000002

Last name RAMAJO

First name JADE

Middle name DE TAZA

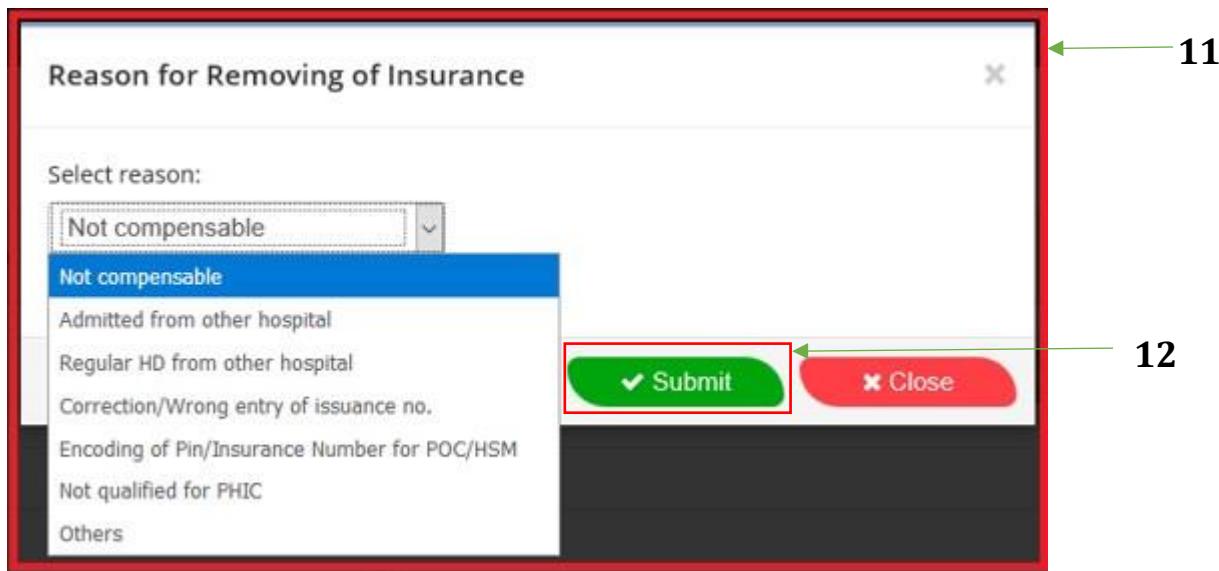
9. The form with the list of the patient's case nos. will prompt, but this time. The encounter that we previously added has now a different icon.
10. Click on the  to remove insurance from encounter.



Encounter #	Encounter Type	Confinement Date	Action
201850000276	OPD	Mar 13, 2018 02:56 PM to present	
201850000275	OPD	Mar 13, 2018 02:55 PM to present	
2018700039	Dialysis	Mar 01, 2018 09:54 AM to present	
201650349065	OPD	Dec 01, 2016 03:11 PM to present	
201650153551	OPD	May 31, 2016 09:22 AM to present	

11. A window will pop-out to ask the user for the reason for removing of Insurance.

12. Tick on the **Submit** button if done.

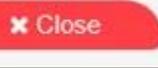


Reason for Removing of Insurance

Select reason:

Not compensable

- Not compensable
- Admitted from other hospital
- Regular HD from other hospital
- Correction/Wrong entry of issuance no.
- Encoding of Pin/Insurance Number for POC/HSM
- Not qualified for PHIC
- Others

*Note: Adding Insurance No. to multiple encounters is possible. However, the latest encounter that was added will be the one to reflect on the **Check Eligibility** form.*

HOW TO ADD ACCREDITED DOCTORS ON BILLING:

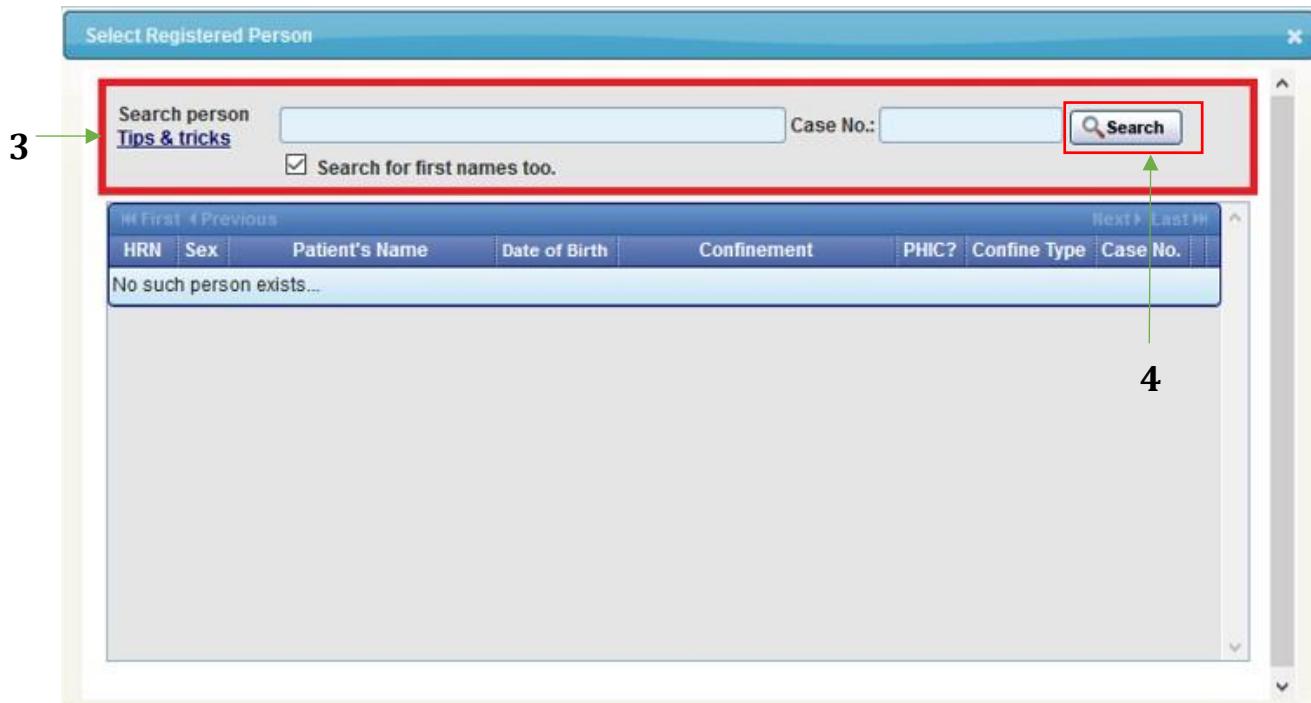
1. Click on the **Billing** module menu.

2. Click on the **Process Billing (New)**

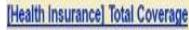


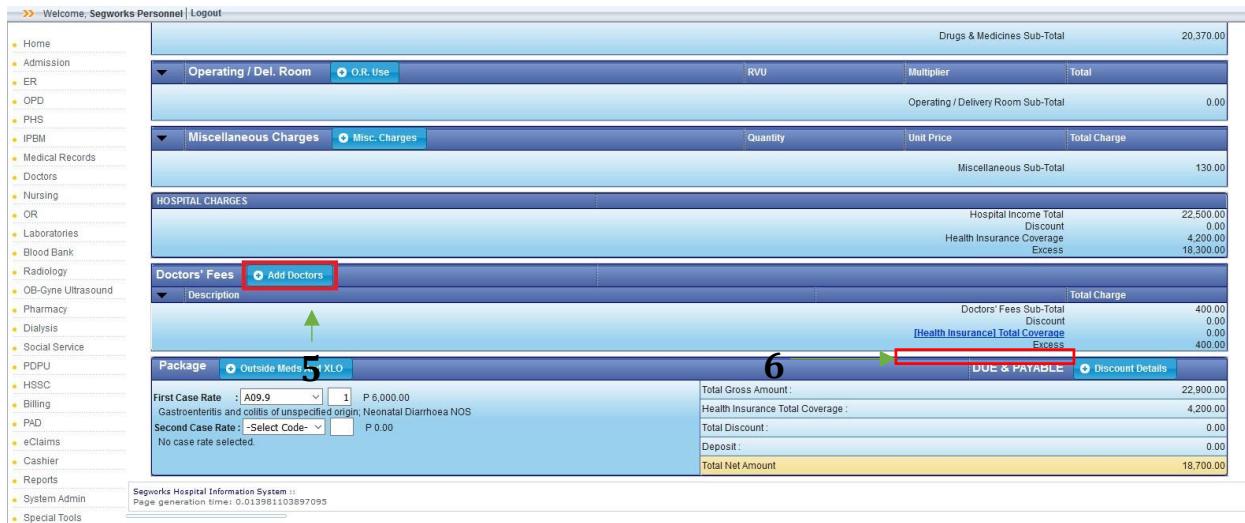
3. The system will ask the user to input the patient's name or case no.

4. Then, tick **Search** button if done.



5. If the **Insurance number, Diagnosis and Procedure** is already set along with the case rate. Tick  and add doctor.

6. Then click on the 



				Drugs & Medicines Sub-Total	20,370.00
Operating / Del. Room		O.R. Use	RVU	Multiplier	Total
Operating / Delivery Room Sub-Total 0.00					
Miscellaneous Charges		Misc. Charges	Quantity	Unit Price	Total Charge
Miscellaneous Sub-Total 130.00					
HOSPITAL CHARGES					
Hospital Income Total 22,500.00					
Discount 0.00					
Health Insurance Coverage 4,200.00					
Excess 18,300.00					
Doctors' Fees		Add Doctors	Total Charge		
Description			Doctors' Fees Sub-Total	400.00	
			Discount	0.00	
			[Health Insurance] Total Coverage	0.00	
			Excess	400.00	
Package		Outside Meds	5	XLO	DUE & PAYABLE
First Case Rate :		A09.9	1	P 6,000.00	Total Gross Amount : 22,900.00
Gastroenteritis and colitis of unspecified origin, Neonatal Diarrhoea NOS					Health Insurance Total Coverage : 4,200.00
Second Case Rate :		-Select Code-		P 0.00	Total Discount : 0.00
No case rate selected.					Deposit : 0.00
					Total Net Amount : 18,700.00

Segworks Hospital Information System | Page generation time: 0.013981103897095

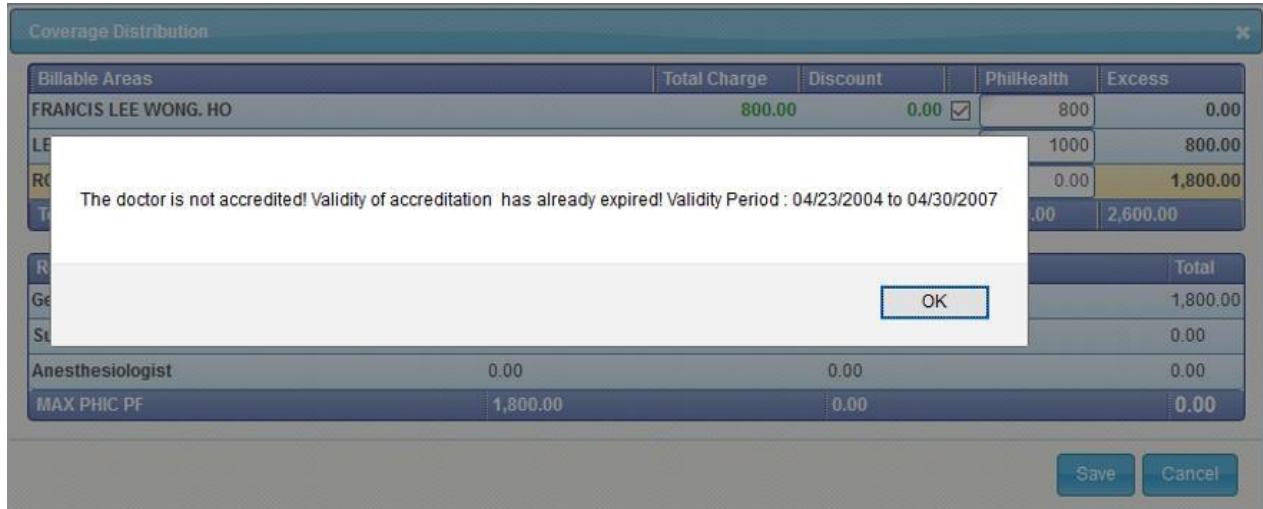
7. The system will pop-out the **Coverage Distribution** form.
8. Click on the checkboxes on the right side of the discount column associated with the doctor. *Note: Dr. Alcantara's accreditation is expired.*



Billable Areas	Total Charge	Discount	PhilHealth	Excess
FRANCIS LEE WONG. HO	800.00	0.00	<input checked="" type="checkbox"/>	800 0.00
LEOPOLDO JUMALON. VEGA	1,800.00	0.00	<input checked="" type="checkbox"/>	1000 800.00
ROBERTO VICENTE. ALCANTARA	1,800.00	0.00	<input type="checkbox"/>	0.00 1,800.00
Totals	4,400.00	0.00		1,800.00 2,600.00
Role	First Case	Second Case		Total
General Practitioner / Specialist	1,800.00	0.00		1,800.00
Surgeon	0.00	0.00		0.00
Anesthesiologist	0.00	0.00		0.00
MAX PHIC PF	1,800.00	0.00		0.00

7 → 8 → Save Cancel

9. If user tries to tick the checkbox of a doctor who is not accredited or his/her accreditation is already expired. The system will prompt to inform the user.



HOW TO CHECK ELIGIBILITY (Initial)

- To Check Eligibility, tick on eClaims menu at the left side of the screen.

The screenshot shows the eClaims dashboard. On the left, there is a navigation menu with items like Nursing, OR, Laboratories, Blood Bank, Radiology, Pharmacy, Dialysis, Social Service, PDU, HSSC, Billing, eClaims (which is highlighted with a red box and a green arrow labeled '1'), PAD, Cashier, and Reports. The main area displays a news article about the eClaims Project. To the right, there is a sidebar titled 'Quick Navigation' with sections for CEWS (Claims Eligibility, Get Member PIN, Doctor Accreditation), ECS (Transmittal), and CVS (Check Claim Status, Get Voucher). Below the news, there are three buttons: Transmittal Upload Status, e-Claims Status, and Statistics.

- The eClaims dashboard will display. Click on "Eligibility" dropdown menu.

The screenshot shows the PIN Verification Utility interface. At the top, there is a navigation bar with 'eCLAIMS' logo, 'eClaims / Get Member PIN', and a search bar. Below the navigation bar, there is a 'PIN Verification Utility' section with tabs for 'Get PIN' and 'Check PIN'. A green arrow labeled '2' points to the 'Eligibility' dropdown menu, which is currently open. Another green arrow labeled '3' points to the 'Check eligibility' option within the dropdown menu. The dropdown also includes 'PIN verification' and 'Doctor accreditation' options.

3. Then tick **Check Eligibility** menu.
 4. Type **Patient name** or **HRN** to view member information.
 5. If the member has no PIN, click **Go To Get PIN**,
 6. To verify if the member is eligible, tick **Verify Initial**.
7. System will prompt
8. If the patient is not eligible, view the **Required Documents** and **Eligibility Information**.
 9. To print **CSF**, click **CSF** button.

The screenshot shows the e-Claims Verify Eligibility interface. At the top, there's a green success message: "Success! Eligibility information successfully updated". Below it, a yellow warning message says "Patient is not eligible! Please see the details below". The main area displays member information: GATILA, HENRY M. (highlighted with a red box and step 4), PhilHealth Benefits Eligibility Information (highlighted with a red box and step 6), and Patient Information (highlighted with a red box and step 5). The Patient Information section shows "Not Eligible". On the right, there are buttons for "Verify (Initial)" (highlighted with a red box and step 9), "CSF p.1" (highlighted with a red box and step 5), and "Go To Get PIN". A red box highlights the "Document Name" and "Reason" table under "Required Documents" (highlighted with a red box and step 8). The table contains four rows:

Document Name	Reason
UPDATED PHILHEALTH ID CARD	NO ELIGIBILITY - SPONSORED
4PS ID	NO ELIGIBILITY - SPONSORED
PROOF OF PAYMENT OF PREMIUM CONTRIBUTION	NO ELIGIBILITY - SPONSORED
PROPERLY ACCOMPLISHED PMRF	DISCREPANCY-MEMBERS BIRTHDATE

HOW TO CHECK ELIGIBILITY (*Final*)

Note: To check the Member's Eligibility (final) patient should be billed.

1. To check **Eligibility**, tick eClaims menu at the left side of the screen.

The screenshot shows the eClaims dashboard. On the left, there is a vertical navigation menu with various options like Nursing, OR, Laboratories, Blood Bank, Radiology, Pharmacy, Dialysis, Social Service, PDU, HSSC, Billing, and eClaims. The 'eClaims' option is highlighted with a red box and a green arrow labeled '1'. At the top center, the word 'eClaims' is displayed. Below the menu, there are three status boxes: 'Transmittal Upload Status' (yellow), 'e-Claims Status' (green), and 'Statistics' (blue). To the right, there is a 'Quick Navigation' sidebar with sections for CEWS, ECS, and CVS, each containing several links.

2. Then the eClaims dashboard will display. Click on **Eligibility** dropdown menu.

The screenshot shows the 'PIN Verification Utility' section of the eClaims dashboard. At the top, there is a navigation bar with 'eCLAIMS', 'eClaims / Get Member PIN', and a dropdown menu with 'Eligibility' (highlighted with a red box and green arrow '2'). Below the navigation bar, there is a 'PIN verification' section with a 'Check eligibility' button (highlighted with a red box and green arrow '3'). Further down, there is a search interface with 'Get PIN' buttons and a 'Search records' input field.

3. Then click **Check Eligibility** menu.
4. Type **Patient Name** or **HRN** to view member's information.
5. If the member has no PIN, tick **Go To Get PIN**.
6. To verify if the member is eligible, click **Verify Final**.
7. System will prompt **Success! Eligibility information successfully updated**.
8. If the patient is not eligible, view the **Required Documents** and **Eligibility Information**. **Patient is not eligible! Please see the details below**
9. To print **PBEF**, click **PBEF** button.

Verify Eligibility 4

DEL ROSARIO, JOHN R.

PhilHealth Benefits Eligibility Information

Verify (Initial) 6 → Verify (final) 7 → Go To Get PIN 8

PB EF 5 Not Eligible

PHIC Member Information

PIN	162509750734
Full Name	DEL ROSARIO, JOHN R.
Sex	Male
Date of Birth	July 9, 1996
Member Category	Indigent
Relation to Patient	Self

Patient Information

Patient ID	2894703
Full name	DEL ROSARIO, JOHN R.
Admission Date	April 26, 2017 09:48am
Discharge Date	April 26, 2017 11:01am
Sex	Male
Date of Birth	July 9, 1996

PHIC Eligibility Information

Eligible to avail PhilHealth benefits?	No
With 3 monthly contributions within the past 6 months?	No
With 9 monthly contributions within the past 12 months?	No
Number of days remaining from the 45 days benefit limit	45

Required Documents

Displaying 1-3 of 3 results.

Document Name	Reason
UPDATED PHILHEALTH ID CARD	NO ELIGIBILITY - SPONSORED
4PS ID	NO ELIGIBILITY - SPONSORED
PROOF OF PAYMENT OF PREMIUM CONTRIBUTION	NO ELIGIBILITY - SPONSORED

PhilHealth Eligibility Form 9

Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
Citystate Centre Building, 709 Shaw Boulevard, Pasig City Healthline 441-7444

Bawat Pilipino Miyembro, Bawat Miyembro Protektado, Kalusugan Natin Sigurado

Date/Time of Generation: April 26, 2017 06:59:42PM
CEWS Tracking No.:

HEALTH CARE INSTITUTION (HCI) INFORMATION

Name of Institution: Southern Philippines Medical Center
Accreditation No.: 950102

MEMBER INFORMATION

PhilHealth Identification No.: 162509750734
Name of Member: DEL ROSARIO, JOHN R.
Sex: Male
Date of Birth: 1996-07-09
Member Category: Indigent

PATIENT INFORMATION

Name of Patient: DEL ROSARIO, JOHN R.
Date Admitted: 2017-04-26
Date Discharged: 2017-04-26
Sex: Male
Date of Birth: 1996-07-09

PHIC BENEFIT ELIGIBILITY INFORMATION

ELIGIBLE TO AVAL PHIC BENEFITS? No

ATTACHED DOCUMENTS

1. UPDATED PHILHEALTH ID CARD (NO ELIGIBILITY - SPONSORED)
2. 4PS ID (NO ELIGIBILITY - SPONSORED)
3. PROOF OF PAYMENT OF PREMIUM CONTRIBUTION (NO ELIGIBILITY - SPONSORED)

IMPORTANT REMINDERS

1. Generation and printing of this form is FREE for all PhilHealthmembers and their dependents.
2. This form shall be submitted along with the required PhilHealth claims forms and is valid only for the confinement/admission stated above.
3. This does not include eligibility to the rule of SINGLE PERIOD OF CONFINEMENT (SPC). It shall be established when the claim is processed by PhilHealth. Non-qualification to the rule on SPC shall result to denial of this claim.

Member/Representative Signature Over Printed Name/Thumbnail IHCP Portal User Signature Over Printed Name



HOW TO CHECK DOCTOR'S ACCREDITATION

Note: This Process should be done by the biller before declaring the patient's bill as Final.

1. To Check Eligibility, click **eClaims** on eClaims menu at the left side of the screen.

The screenshot shows the eClaims dashboard. On the left, there is a vertical navigation menu with categories like Nursing, OR, Laboratories, Blood Bank, Radiology, Pharmacy, Dialysis, Social Service, PDPU, HSSC, Billing, and eClaims. The 'eClaims' item is highlighted with a red box and has a green arrow pointing to it. The main content area displays a news article about the eClaims Project. Below the news are three status indicators: Transmittal Upload Status (yellow), e-Claims Status (green), and Statistics (blue). On the right, there is a sidebar titled 'Quick Navigation' with links for CEWS, ECS, CVS, and other eClaims-related functions. A dropdown menu labeled 'Eligibility' is open, showing 'Eligibility' as the selected option.

2. The eClaims dashboard will display. Tick on dropdown menu.
3. Click the **Doctor's Accreditation** menu. Upon successfully clicked, the system will redirect the user to **Doctor's Accreditation** user interface.
4. To select **Doctor's Name** or fill out the **Doctor's Name** to view Personal and Accreditation Information.
5. Click **Check Accreditation** to verify Doctor's Accreditation.
6. View Doctor's Accreditation Details.

The screenshot shows the 'Doctor's Accreditation Verification Utility' interface. At the top, there is a navigation bar with 'eClaims' and several dropdown menus. A dropdown menu is open under 'Eligibility', showing 'PIN verification', 'Check eligibility', and 'Doctor accreditation'. The 'Doctor accreditation' option is highlighted with a red box and has a green arrow pointing to it. Below the navigation bar, there is a search bar with the placeholder 'Search and select a specific doctor to start accreditation check'. The main area is divided into two sections: 'Doctor's Information' and 'Accreditation information'. The 'Doctor's Information' section contains fields for Last Name (VEGA), First Name (LEOPOLDO), Middle Name (JUMALON), Date of Birth (1954-11-04), Sex (Male), Department Name (Surgery), and Job Function Title (Doctor). The 'Accreditation information' section contains fields for TIN (102-440-573), License No. (51222), Accreditation No. (1301-9804955-9), Accreditation Start (2016-11-04), and Accreditation End (2019-11-03). A green arrow labeled '4' points to the search bar. A green arrow labeled '5' points to the 'Check Accreditation' button. A green arrow labeled '6' points to the 'Accreditation information' section.



eClaims Module II
(Electronic Claims Submission (ECS))
USER GUIDE

Electronic Claims Submission (ECS) allows the hospital to submit all the claim forms online which namely the **Form 1** and **Form 2** together with the other necessary attachments.

It has the following features:

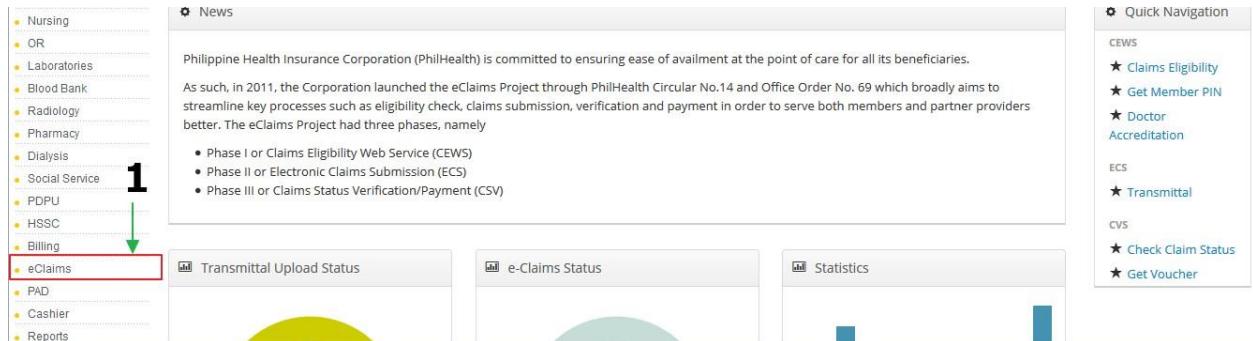
- Transmit e-Claims
- Attachments
- Generate XML
- Upload Files

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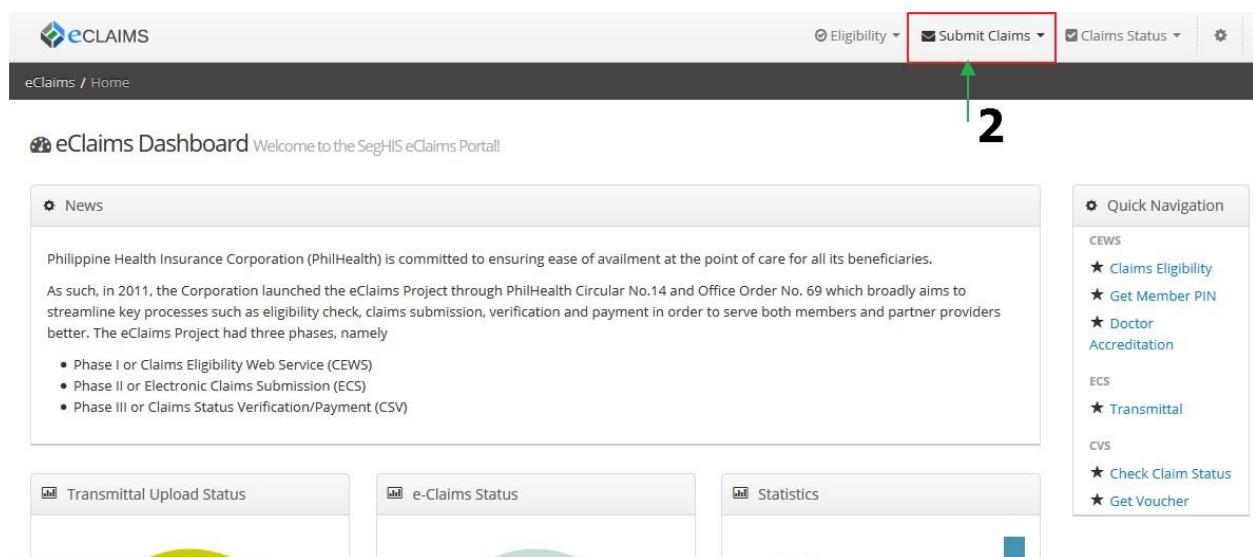
DESCRIPTION	PAGE
How to Process Transmittal	19
How to Transmit e-Claim	22
How to Transmit RTH	29

HOW TO PROCESS TRANSMITTAL

1. To process the transmittal, click on **eClaims** menu at the left side of the screen.



2. Then the **eClaims** dashboard will display. Click on dropdown menu. (see the given figure below)



3. Then tick on **Process Transmittal** button.

The screenshot shows the eClaims Dashboard. At the top, there are three dropdown menus: 'Eligibility', 'Submit Claims' (with a sub-menu 'Process Transmittal' highlighted in red), and 'Claims Status'. Below these, a green arrow labeled '3' points to the 'Transmit e-Claim' button. On the left, there's a 'News' section with a brief about PhilHealth's eClaims Project. On the right, there's a 'Quick Navigation' sidebar with links for CEWS, ECS, and Transmittal.

4. The default the Insurance displayed is **PHIC**.
5. To select different Insurance click on this menu.
6. Then click on “Add” button to add the claims to transmit.

The screenshot shows the 'Billing Main :: Billing Transmittal' screen. At the top, there are several buttons: Process, Process(New), List, Transmittal, Credit Collection, and Reports. Below them is a 'TRANSMITTAL' form with fields for Insurance (selected as 'Philippine Health Insurance Corporation'), Address ('R.C. Reyes Bldg., Quimpo Blvd., Davao City'), Control No., and Remarks. A green arrow labeled '5' points to the 'Insurance' field, and another green arrow labeled '4' points to the 'Address' field. At the bottom of the form are 'Add' and 'Print All' buttons, and a 'Save' button. Below the form is a table header with columns: Policy No., Classification, Confinement, Case No., Patient, Claim, Meds/XLO Outside, and Action. A green arrow labeled '6' points to the 'Add' button.

7. To add claims search the possible claims. There are different searching options, search by case number and discharge date. To search by case number click the checkbox .
8. Then fill out the Case Number of the patient.
9. If you want to search by discharge date just tick the checkbox .
10. Then select data from the listed data in the dropdown.
11. Then, click on **Search** button.
12. Patient data will display based on the encoded details. Click the checkbox .
13. Finally click the **Submit** button.

The screenshot shows the 'Add Claims to Transmit' window. In the search options section, 'Case No.' (7) and 'Discharge date' (9) checkboxes are checked, and the 'Search' button (11) is highlighted. The date range is set from '01/01/17' to '04/24/17' (8). The search results show one claim for 'PABELONIA, PACITA TUBA' (10) between January 1, 2017, and April 24, 2017. The claim details include Policy No. SPONSORED MEMBER, Classification CONFINEMENT, Date Feb 13, 2017 3:27PM to Feb 21, 2017 10:55AM, Case No. 2017700037, Patient PABELONIA, PACITA TUBA, Total Claim 2,100.00. The 'Submit' button (13) is highlighted. A green arrow (12) points to the 'Save' checkbox in the bottom right corner of the search results table.

14. Fill out the Control Number.
15. Then fill out also the remarks if needed.
16. To save, just tick the **Save** button.

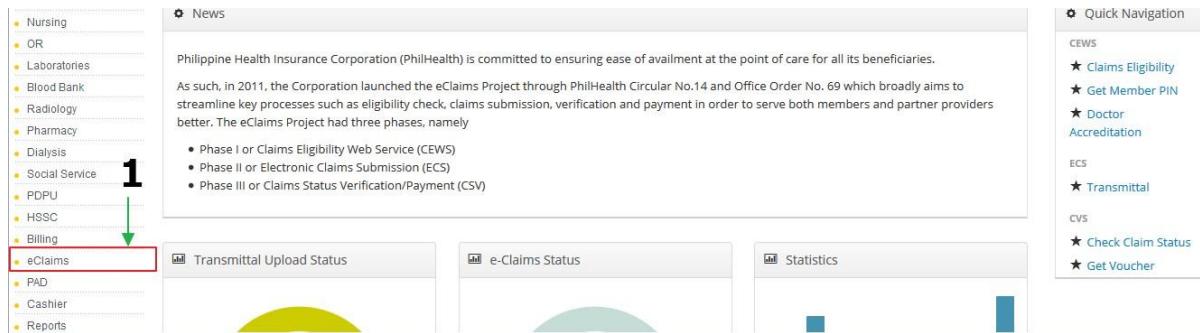
The screenshot shows the 'TRANSMITTAL' window. It includes fields for Insurance (Philippine Health Insurance Corporation), Address (R.C. Reyes Bldg., Quimpo Blvd., Davao City), Control No. (14), and Remarks (test only, 15). At the bottom, there are buttons for Add, Print All, and Save (16). Below the buttons is a table with columns: Policy No., Classification, Confinement, Case No., Patient, Claim, Meds/XLO Outside, and Action. The table shows one row for a SPONSORED MEMBER policy.

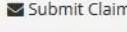
17. The notification will display stating that the transmittal successfully saved.

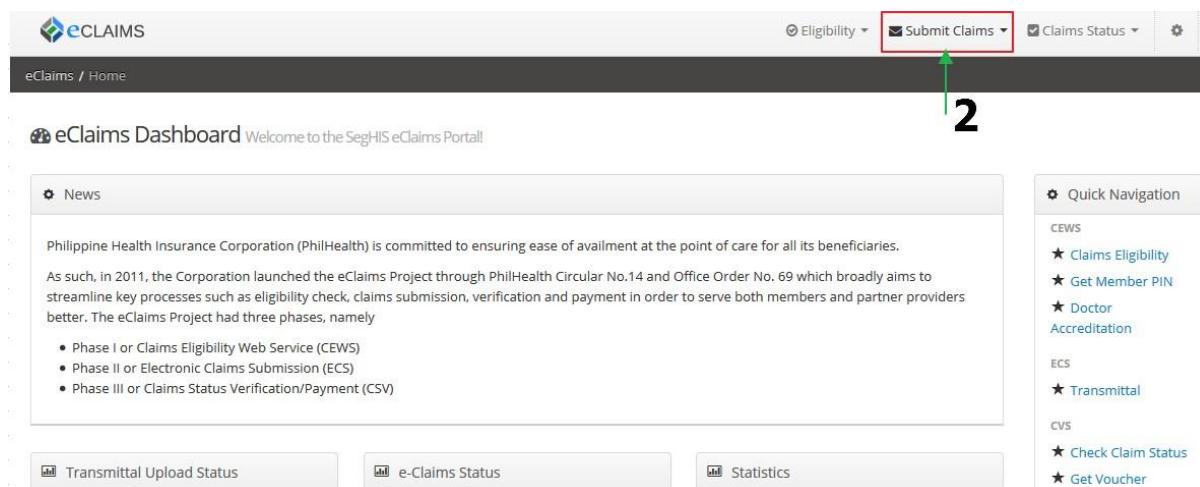
The screenshot shows the 'TRANSMITTAL' window after saving. A blue information box (17) displays the message 'Successfully saved transmittal 0001!'. The rest of the window is identical to the previous screenshot, showing the transmittal fields and the table at the bottom.

HOW TO TRANSMIT E-CLAIM:

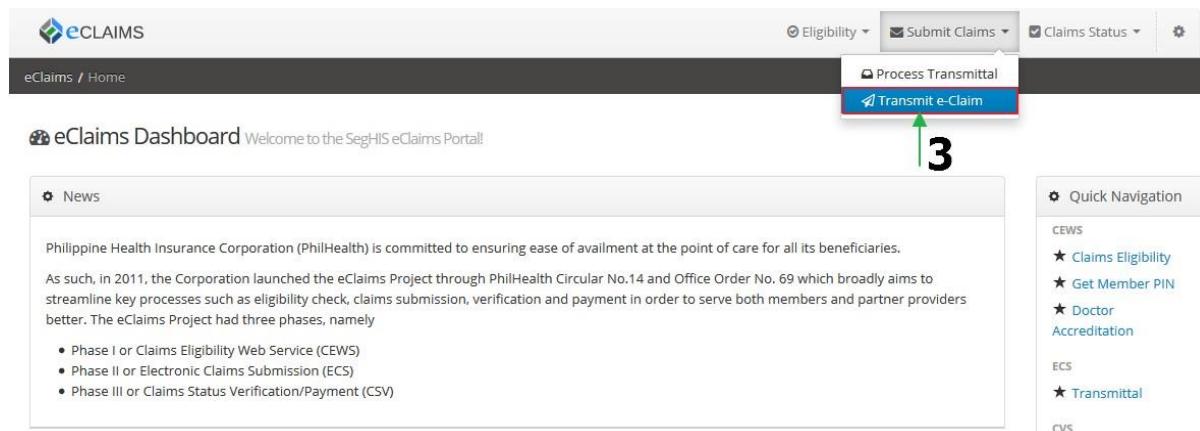
1. To transmit click on  “eClaims” menu at the left side of the screen.



2. To submit click  **Submit Claims** dropdown menu.



3. To transmit, just click  **Transmit e-Claim** button.



4. Fill out the **transmittal number** then press on **Enter key**.

5. To view the details click this icon .

6. Then open the transmittal by clicking on this icon .

Transmittal



List of Transmittals					Displaying 1 - 1 of 1 Transmittals
Transmittal #	Date/time Created	Status	# of Claims	Details	Actions
0001	Search by Transmittal Ds				
0001	Apr 24, 2017 11:49 AM	Not Uploaded	1		

7. There are three steps to be done for successful claims transmit. First step is providing the attachments; second is to generate e-Claim; and lastly is to upload the files.

8. To attach, first tick the  **Attachments** menu.
 9. After that click **Attachments** button.

View Transmittal

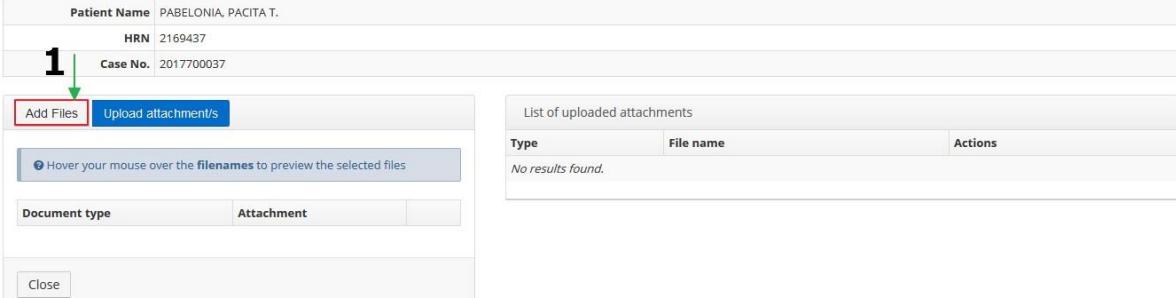


Details	Step 1. Attachments		Step 2. Generate e-Claim	Step 3. Upload			
Member Category	Patient	Type	Discharge date	Package	Eligibility	Attachments	Actions
SPONSORED MEMBER	PABELONIA, PACITA T. HRN: 2169437	Dialysis Case No: 2017700037	Feb 21, 2017 12:00 AM	First Case Rate Code: 90935	No	Operative Record Claim Form 1 Claim Form 2	Attachments...

STEP 1: Attachments

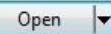
1. To add attachments click  **Add Files** button.

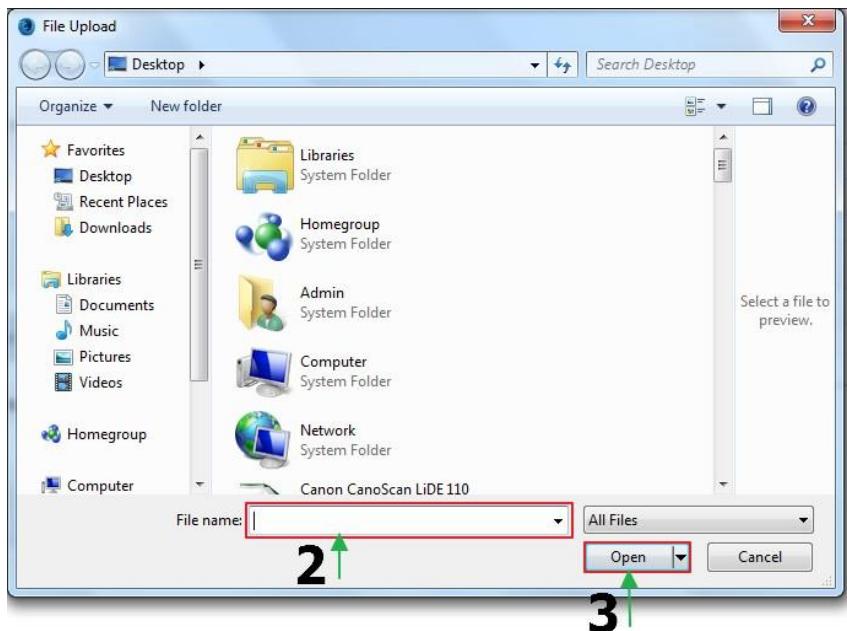
Manage claim attachments



Patient Name	PABELONIA, PACITA T.
HRN	2169437
Case No.	2017700037
Add Files	Upload attachment/s
<small>Hover your mouse over the filenames to preview the selected files</small>	
Document type	Attachment
<input type="button" value="Close"/>	

Type	File name	Actions
No results found.		

2. Fill out the file name.
 3. Then click on  **Open** button.



4. Then select the document type under the dropdown menu.
5. After the selection of document type click on “Upload Attachments” button.

Patient Name	PABELONIA, PACITA T.													
HRN	2169437													
Case No.	2017700037													
<input type="button" value="Add Files"/> <input style="background-color: #0070C0; color: white; font-weight: bold; padding: 2px 10px; border-radius: 5px; border: none; margin-left: 10px;" type="button" value="Upload attachment/s"/> 5														
<small>Hover your mouse over the filenames to preview the selected files</small> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Document type</th> <th style="text-align: left;">Attachment</th> <th></th> </tr> </thead> <tbody> <tr> <td>-Select type-</td> <td>CF1.pdf</td> <td><input type="button" value="Remove"/></td> </tr> <tr> <td>-Select type-</td> <td>CF2.pdf</td> <td><input type="button" value="Remove"/></td> </tr> <tr> <td>-Select type-</td> <td>Operative Record.pdf</td> <td><input type="button" value="Remove"/></td> </tr> </tbody> </table> 4			Document type	Attachment		-Select type-	CF1.pdf	<input type="button" value="Remove"/>	-Select type-	CF2.pdf	<input type="button" value="Remove"/>	-Select type-	Operative Record.pdf	<input type="button" value="Remove"/>
Document type	Attachment													
-Select type-	CF1.pdf	<input type="button" value="Remove"/>												
-Select type-	CF2.pdf	<input type="button" value="Remove"/>												
-Select type-	Operative Record.pdf	<input type="button" value="Remove"/>												
<input type="button" value="Close"/>														

6. Wait until the file upload is done.

Patient Name	PABELONIA, PACITA T.													
HRN	2169437													
Case No.	2017700037													
<input type="button" value="Add Files"/> <input style="background-color: #0070C0; color: white; font-weight: bold; padding: 2px 10px; border-radius: 5px; border: none; margin-left: 10px;" type="button" value="Upload attachment/s"/> 5														
<small>Hover your mouse over the filenames to preview the selected files</small> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Document type</th> <th style="text-align: left;">Attachment</th> <th></th> </tr> </thead> <tbody> <tr> <td>Claim Form 1</td> <td>CF1.pdf</td> <td><input type="button" value="Remove"/></td> </tr> <tr> <td>Claim Form 2</td> <td>CF2.pdf</td> <td><input type="button" value="Remove"/></td> </tr> <tr> <td>Operative Record</td> <td>Operative Record.pdf</td> <td><input type="button" value="Remove"/></td> </tr> </tbody> </table> 4			Document type	Attachment		Claim Form 1	CF1.pdf	<input type="button" value="Remove"/>	Claim Form 2	CF2.pdf	<input type="button" value="Remove"/>	Operative Record	Operative Record.pdf	<input type="button" value="Remove"/>
Document type	Attachment													
Claim Form 1	CF1.pdf	<input type="button" value="Remove"/>												
Claim Form 2	CF2.pdf	<input type="button" value="Remove"/>												
Operative Record	Operative Record.pdf	<input type="button" value="Remove"/>												
<input type="button" value="Close"/> 6														

7. You've successfully upload the files. You can still remove it by clicking on **Remove** button.

Manage claim attachments

The screenshot shows a modal window titled "Manage claim attachments". It displays patient information: Patient Name (PABELONIA, PACITA T.), HRN (2169437), and Case No. (2017700037). Below this, there are two tabs: "Add Files" and "Upload attachment/s" (which is selected). A note says "Hover your mouse over the filenames to preview the selected files". The "Attachment" section lists three files:

Document type	Attachment	
Claim Form 1	CF1.pdf	[remove]
Claim Form 2	CF2.pdf	[remove]
Operative Record	Operative Record.pdf	[remove]

At the bottom left is a "Close" button. To the right, a list of uploaded attachments is shown with a "Remove" button for each file. A red arrow points to the "Remove" button for the first file.

STEP 2: Generate E-claims

1. To generate E-claims click on **Generate** button.
2. After generating click **Save** button.

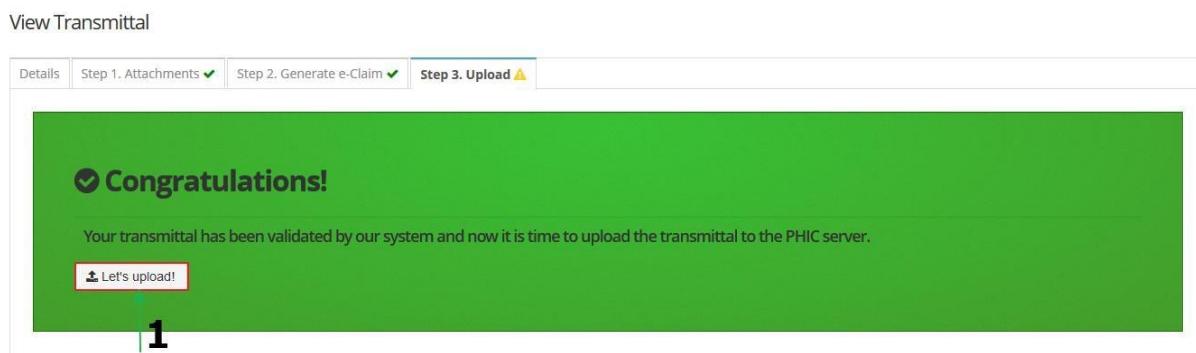
View Transmittal

The screenshot shows the "Step 2. Generate e-Claim" tab of the transmittal interface. At the top, there are tabs: Details, Step 1. Attachments (with a green checkmark), Step 2. Generate e-Claim (selected), Step 3. Upload (with a yellow warning icon). Below the tabs are four buttons: Save (green), Reset, Generate (red), and Validate. A red arrow labeled "1" points to the "Generate" button. Another red arrow labeled "2" points to the "Save" button. On the right, there is a scrollable text area displaying XML code for the generated e-claim. The XML code includes details like patient information, claim number (2017700037), birth date (07-14-1948), and various procedure codes (e.g., 90935).

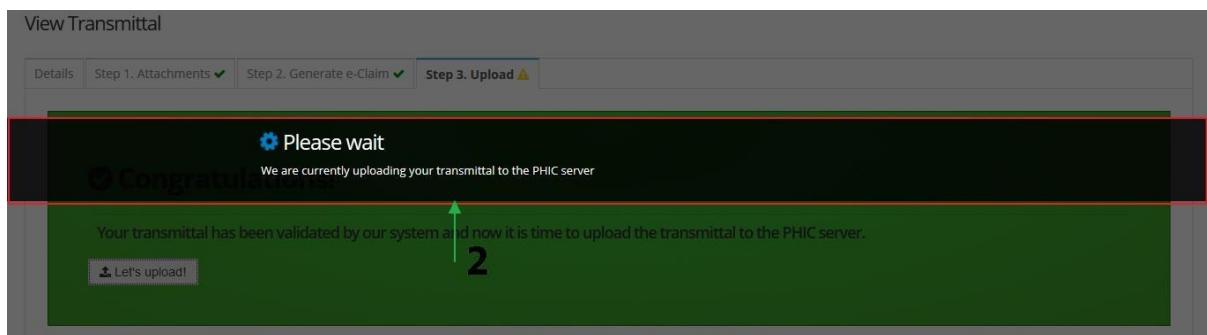
3. The transmittal successfully saved and a notification will display on the upper side of the screen.

STEP 3: Upload

1. To upload the transmittal to the PHIC server click on **Let's upload** button.



2. Wait until the uploading of transmittal is done.

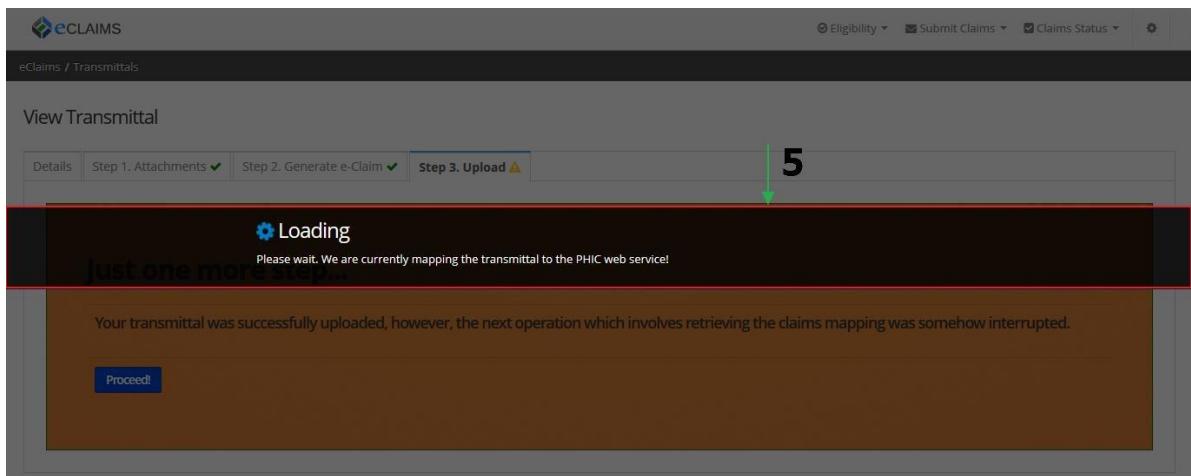


Then a notification will display indicating that the files were uploaded successfully.

3. Next, click Proceed button for mapping.



5. Wait until the mapping is done.



6. After uploading ,a message will display on the screen indicating that the transmittal was uploaded and mapped successfully.



7. Search for the **transmittal number** and click the check icon to view xml file transmission and claim mapping response.



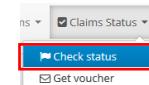
8. Then the system will display xml file transmission and claims mapping response.

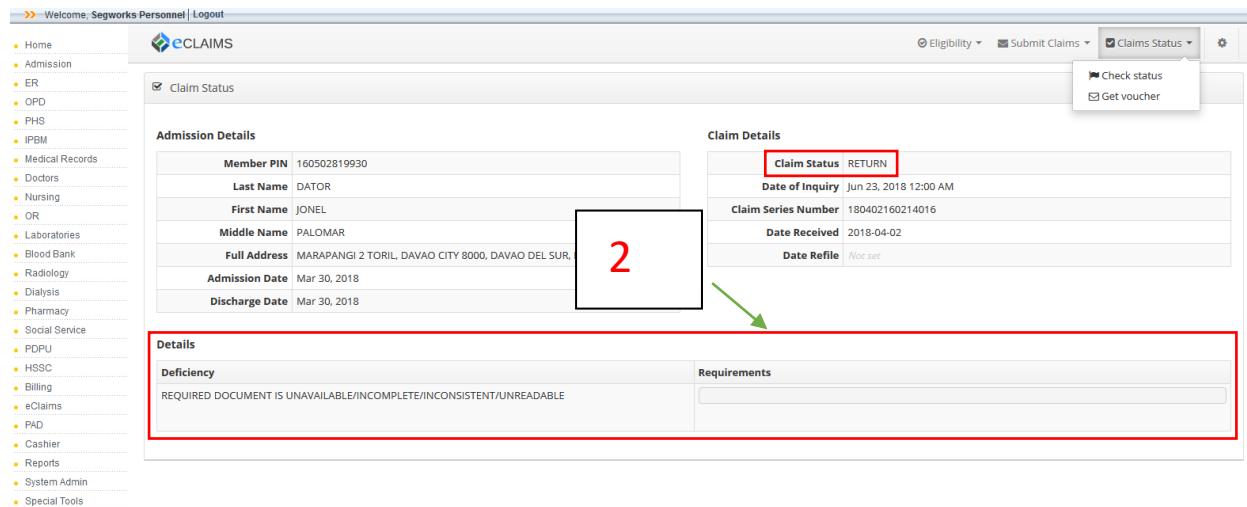
8

HOW TO RE-TRANSMIT RTH:

1. To start click on the **eClaims** menu at the left side of the screen.

2. The details of the deficiencies and requirements are displayed.





Admission Details

Member PIN	160502819930
Last Name	DATOR
First Name	JONEL
Middle Name	PALOMAR
Full Address	MARAPANGI 2 TORIL, DAVAO CITY 8000, DAVAO DEL SUR,
Admission Date	Mar 30, 2018
Discharge Date	Mar 30, 2018

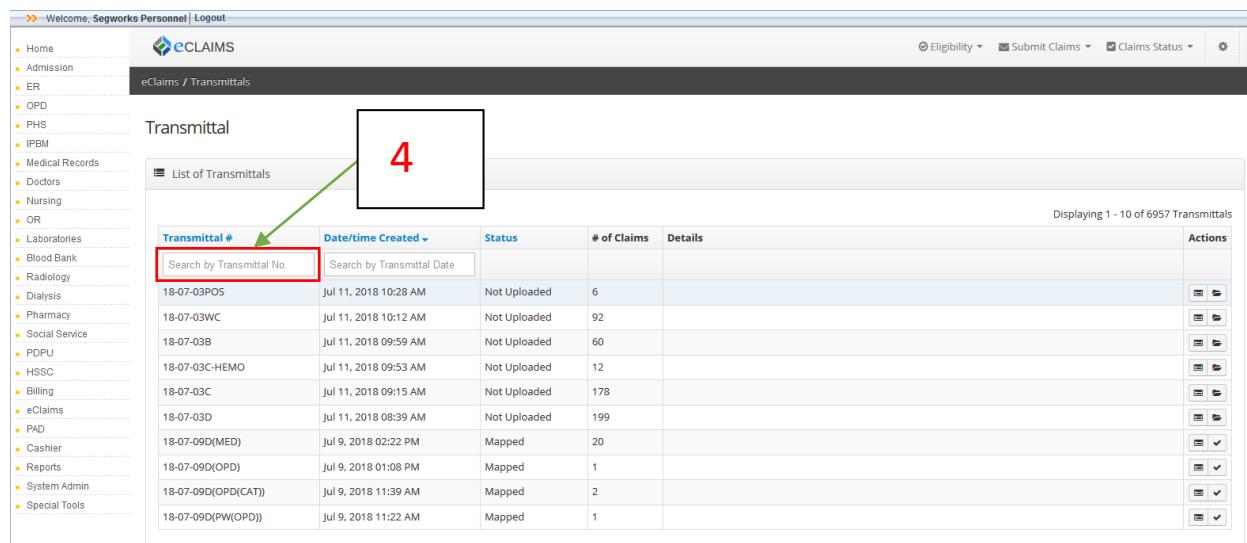
Claim Details

Claim Status	RETURN
Date of Inquiry	Jun 23, 2018 12:00 AM
Claim Series Number	180402160214016
Date Received	2018-04-02
Date Refile	Not set

Details

Deficiency	REQUIRED DOCUMENT IS UNAVAILABLE/INCOMPLETE/INCONSISTENT/UNREADABLE
Requirements	

3. Go to transmit e-Claim action under the Submit Claims module.
4. Enter the Transmittal No. with returns on the search bar.

Transmittal

List of Transmittals

Transmittal #	Date/time Created	Status	# of Claims	Details	Actions
18-07-03POS	Jul 11, 2018 10:28 AM	Not Uploaded	6		
18-07-03WC	Jul 11, 2018 10:12 AM	Not Uploaded	92		
18-07-03B	Jul 11, 2018 09:59 AM	Not Uploaded	60		
18-07-03C-HEMO	Jul 11, 2018 09:53 AM	Not Uploaded	12		
18-07-03C	Jul 11, 2018 09:15 AM	Not Uploaded	178		
18-07-03D	Jul 11, 2018 08:39 AM	Not Uploaded	199		
18-07-09D(MED)	Jul 9, 2018 02:22 PM	Mapped	20		
18-07-09D(OPD)	Jul 9, 2018 01:08 PM	Mapped	1		
18-07-09D(OPD(CAT))	Jul 9, 2018 11:39 AM	Mapped	2		
18-07-09D(PW(OPD))	Jul 9, 2018 11:22 AM	Mapped	1		

5. Tick this view details icon option under the Actions column.

Transmittal

List of Transmittals

Transmittal #	Date/time Created	Status	# of Claims	Details	Actions
18-04-01OPD(ER)	Search by Transmittal Date	Mapped	3		
18-04-01OPD(ER)	Apr 2, 2018 06:38 PM				

6. Click on the Open-Transmittal button to proceed.

Transmittal

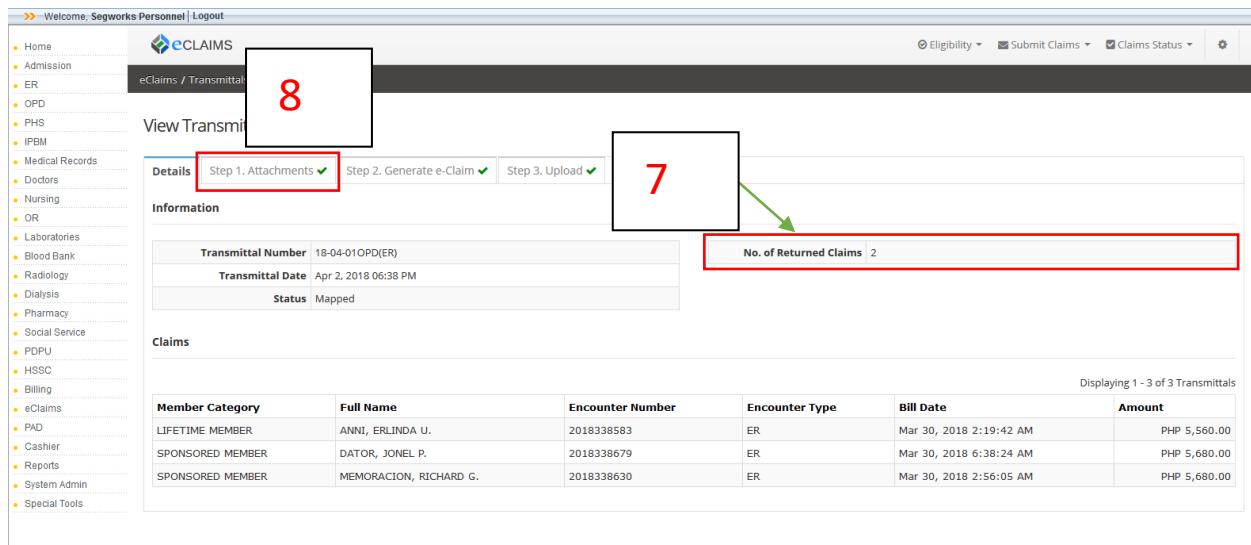
Transmittal Details

Member Category	Full Name	Encounter Number	Encounter Type	Bill Date	Amount
LIFETIME MEMBER	ANNI, ERLINDA U.	2018338583	ER	Mar 30, 2018 2:19:42 AM	PHP 5,560.00
SPONSORED MEMBER	MEMORACION, RICHARD G.	2018338630	ER	Mar 30, 2018 2:56:05 AM	PHP 5,680.00
SPONSORED MEMBER	DATOR, JONEL P.	2018338679	ER	Mar 30, 2018 6:38:24 AM	PHP 5,680.00

Open-Transmittal Close

7. User will then be redirected to View Transmittal form. The system will also display the number of returned claims associated in the Transmittal.

8. Click on the **Step 1. Attachments**  to proceed.

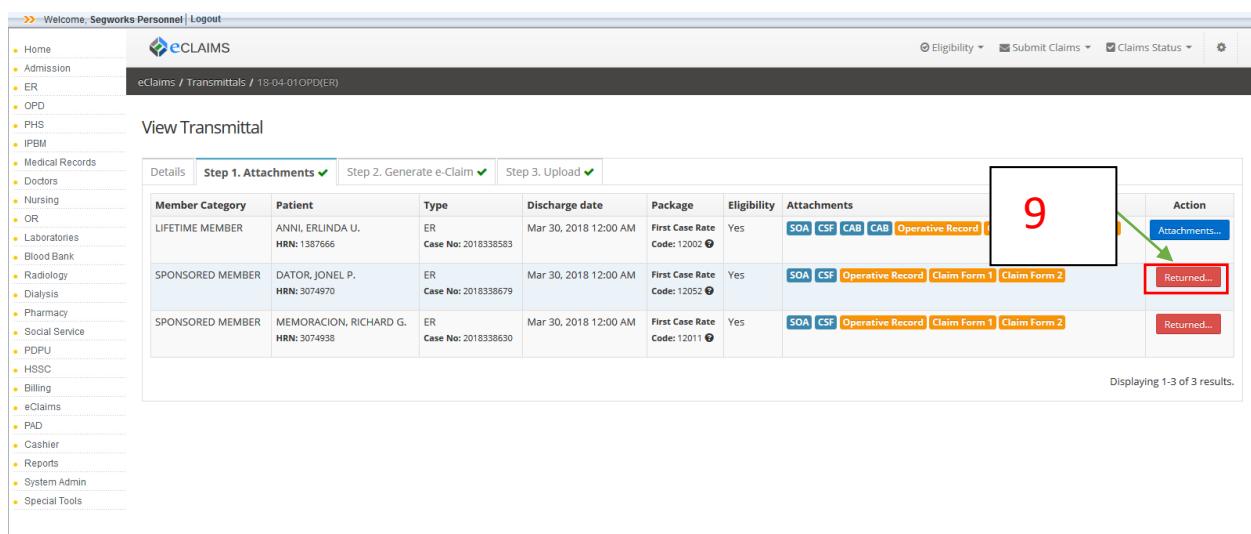


8

7

No. of Returned Claims | 2

9. The button on the last two claims are different for they have returned claims, it is indicated through the **Returned** button. Click on it to proceed.



Member Category	Patient	Type	Discharge date	Package	Eligibility	Attachments	Action
LIFETIME MEMBER	ANNI, ERLINDA U. HRN: 1387666	ER Case No: 2018338583	Mar 30, 2018 12:00 AM	First Case Rate Code: 12002 	Yes	    	
SPONSORED MEMBER	DATOR, JONEL P. HRN: 3074970	ER Case No: 2018338679	Mar 30, 2018 12:00 AM	First Case Rate Code: 12052 	Yes	    	
SPONSORED MEMBER	MEMORACION, RICHARD G. HRN: 3074938	ER Case No: 2018338630	Mar 30, 2018 12:00 AM	First Case Rate Code: 12011 	Yes	    	

9

Returned...

Displaying 1-3 of 3 results.

10. The user/personnel will be redirected to manage claim attachments form, click on the **Add Files** button to add whatever required documents Philhealth mandated.

10

Add Files Re-Upload Attachment

Case No. 2018338679

List of uploaded attachments

Type	File name	Actions
SOA	SOA.pdf	<input type="button" value="Remove"/>
CSF	CSF.pdf	<input type="button" value="Remove"/>

List of returned attachments

Type	File name	Actions
No results found.		

Add attached documents

11. Designate the document types.

Note: Every returned claim must have an RTH letter.

12. Click on the **Re-Upload Attachment**.

13. After successfully re-uploading attachment. The list of returned attachments would then be updated. The documents are now uploaded to the data center.

14. Click on the **Add attached documents** to encrypt the documents for confidentiality and to send the documents to Philhealth, this is the last step.

11

12

13

14

Add Files Re-Upload Attachment

Patient Name DATOR, JONEL P.
HRN 3074970
Case No. 2018338679

Document type Attachment

Claim Signature Form	RTH - CSF.pdf
Statement of Account	RTH - SOA.pdf
-Select type-	RTH Letter.pdf

Assign

List of uploaded attachments

Type	File name	Actions
SOA	SOA.pdf	<input type="button" value="Remove"/>
CSF	CSF.pdf	<input type="button" value="Remove"/>

List of returned attachments

Type	File name	Actions
No results found.		

Add attached documents



eClaims Module III

(Claim Status Verification (CSV))

USER GUIDE

The Claim Status Verification (CSV) allows the hospital to submit all the claim forms online namely the form 1 and form 2 together with the other necessary attachments

The module contains the following:

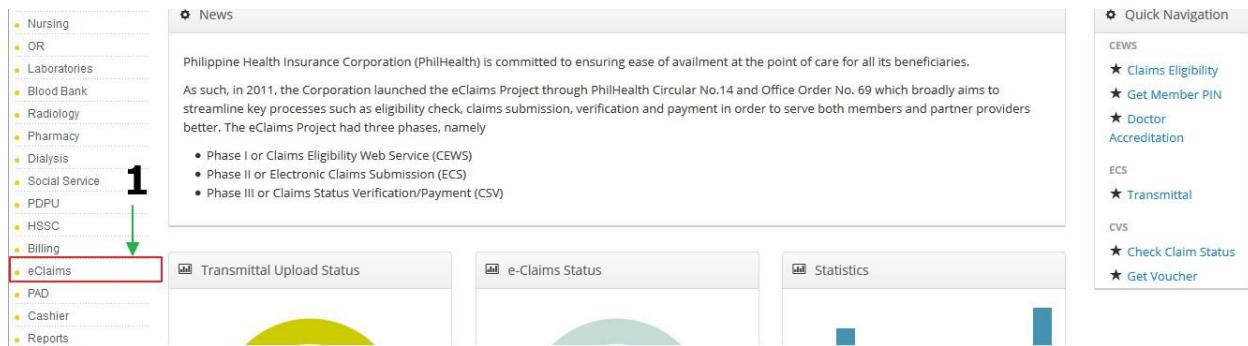
- Transmit e-Claims
- Attachments
- Generate XML
- Upload Files

TABLE OF CONTENTS

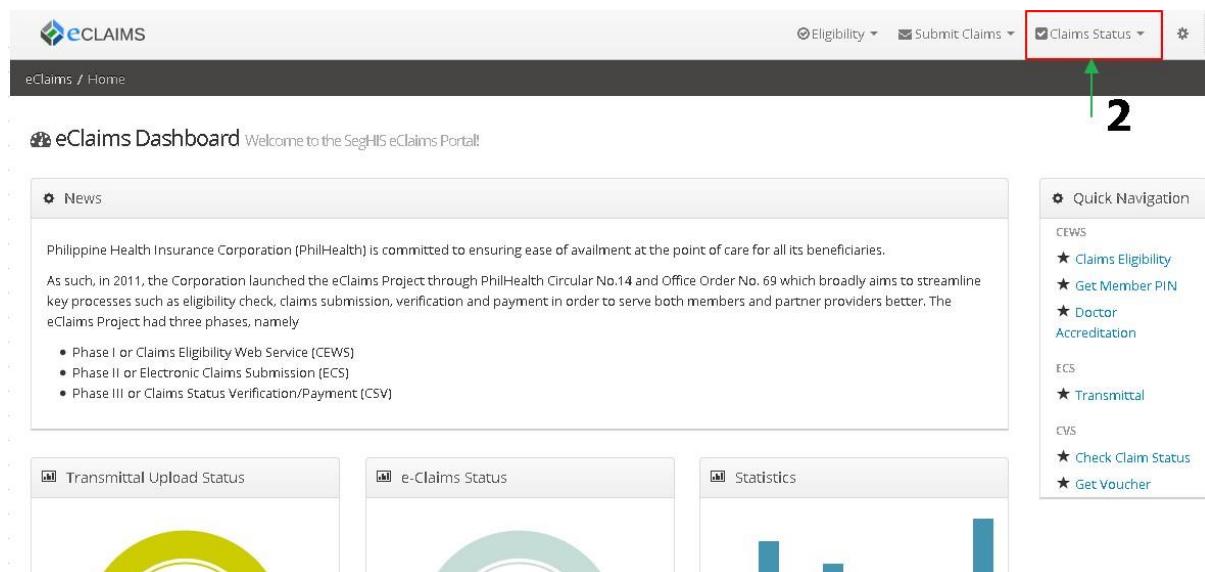
DESCRIPTION	PAGE
How to check Claim Status	35
How to check Voucher	39

HOW TO CHECK CLAIM STATUS

1. To check claim status, click on **eClaims** menu at the left side of the screen.



2. The eClaims dashboard will display. Click on **Claims Status** dropdown menu.



3. Click on **Check status** button.

The screenshot shows the eClaims Dashboard. At the top right, there are three dropdown menus: 'Eligibility', 'Submit Claims', and 'Claims Status'. Below them is a search bar with a magnifying glass icon. To the right of the search bar is a 'Check status' button, which is highlighted with a red box and a green arrow labeled '3' pointing to it. A tooltip for 'Check status' is visible above the button. On the left, there's a news section about PhilHealth's commitment to ease of availing at the point of care. On the right, there's a 'Quick Navigation' sidebar with links to CEWS, Claims Eligibility, Get Member PIN, Doctor, and Administration.

4. List of claims will be displayed.

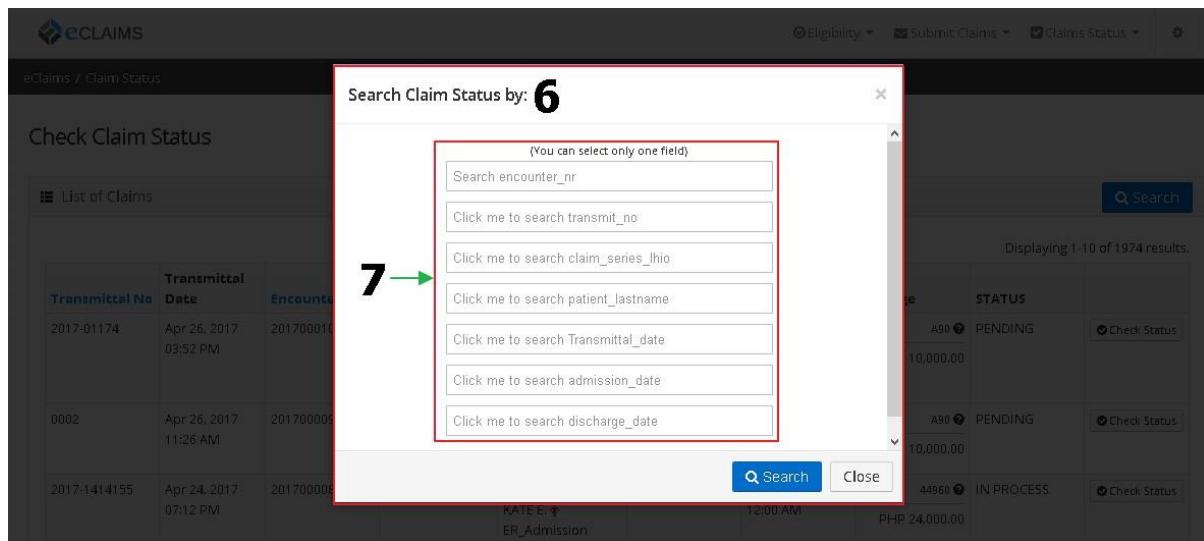
5. To search specific claim in list, click on **Search** button.

The screenshot shows the 'Check Claim Status' page. At the top, there's a header with 'Check Claim Status' and a 'List of Claims' link. Below the header is a table titled 'Displaying 1-10 of 1974 results.' The table has columns for Transmittal No, Transmittal Date, Encounter No, Claim Series Lhio, Patient, Admission Date, Discharge Date, Package, and Status. Each row in the table contains a 'Check Status' button. A green arrow labeled '4' points down to the 'List of Claims' link. A green arrow labeled '5' points to the 'Search' button, which is highlighted with a red box.

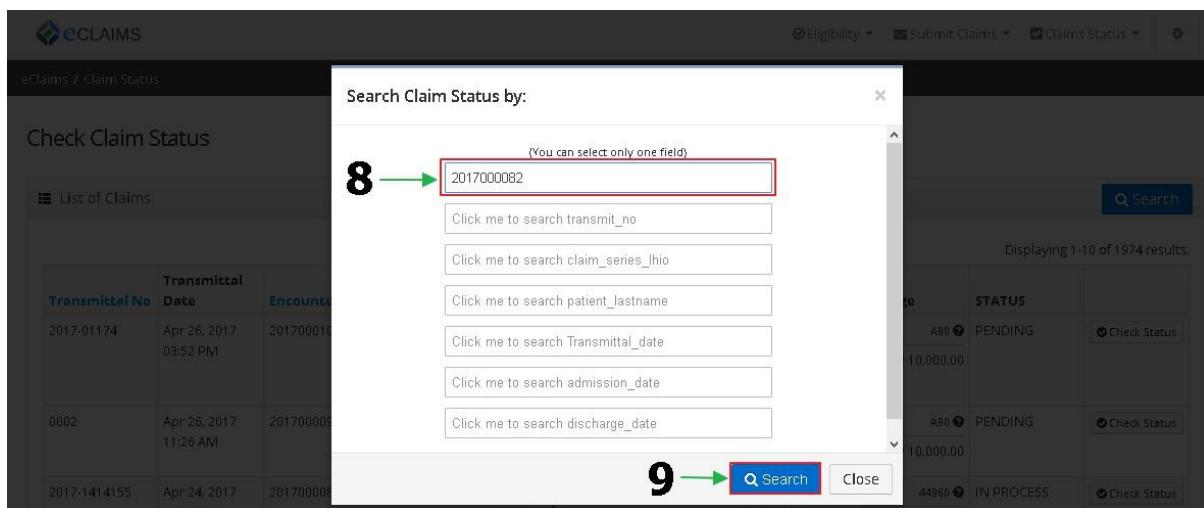
Transmittal No	Transmittal Date	Encounter No	Claim Series Lhio	Patient	Admission Date	Discharge Date	Package	Status
2017-01174	Apr 26, 2017 03:52 PM	2017000105		ACOSTA, VIDA ROSE DANIELLE K. ER_Admission	Apr 26, 2017	Apr 26, 2017 12:00 AM	A90 ⓘ PHP 10,000.00	PENDING Check Status
0002	Apr 26, 2017 11:26 AM	2017000098	170426160086716	GATILA, HAIZEL KATE E. ♂ ER_Admission	Apr 23, 2017	Apr 26, 2017 12:00 AM	A90 ⓘ PHP 10,000.00	PENDING Check Status
2017-1414155	Apr 24, 2017 07:12 PM	2017000082	170424160186216	GATILA, HAIZEL KATE E. ♂ ER_Admission	Apr 23, 2017	Apr 24, 2017 12:00 AM	44960 ⓘ PHP 24,000.00	IN PROCESS Check Status

6. The system will pop-out **Search** window.

7. Click on any of the fields to search claims.



8. Select field "Search encounter_nr"
and input required data.
9. Click on **Search** button.



10. Searched claim will be displayed.
11. Click on **Check Status** button.

Check Claim Status

List of Claims

Displaying 1-1 of 1 result.

Transmittal No	Transmittal Date	Encounter No	Claim Series Lhio	Patient	Admission Date	Discharge Date	Package	STATUS
2017-1414155	Apr 24, 2017 07:12 PM	2017000082	170424160186216	GATILA, HAIZEL KATE E. ER_Admission	Apr 23, 2017	Apr 24, 2017 12:00 AM	44960 ⓘ PHP 24,000.00	IN PROCESS

Check Status

12. Claim status will display.

13. Click on **Update Claim Status** button to inquire status update from PhilHealth Web Server.

View Claim Status GATILA, HAIZEL KATE E.

Claim Status

Admission Details

Member PIN	162012321783
Last Name	GATILA
First Name	HAIZEL KATE
Middle Name	ELLY
Full Address	NOT PROVIDED, NOT PROVIDED, NOT PROVIDED, NOT PROVIDED
Admission Date	Apr 23, 2017
Discharge Date	Apr 24, 2017

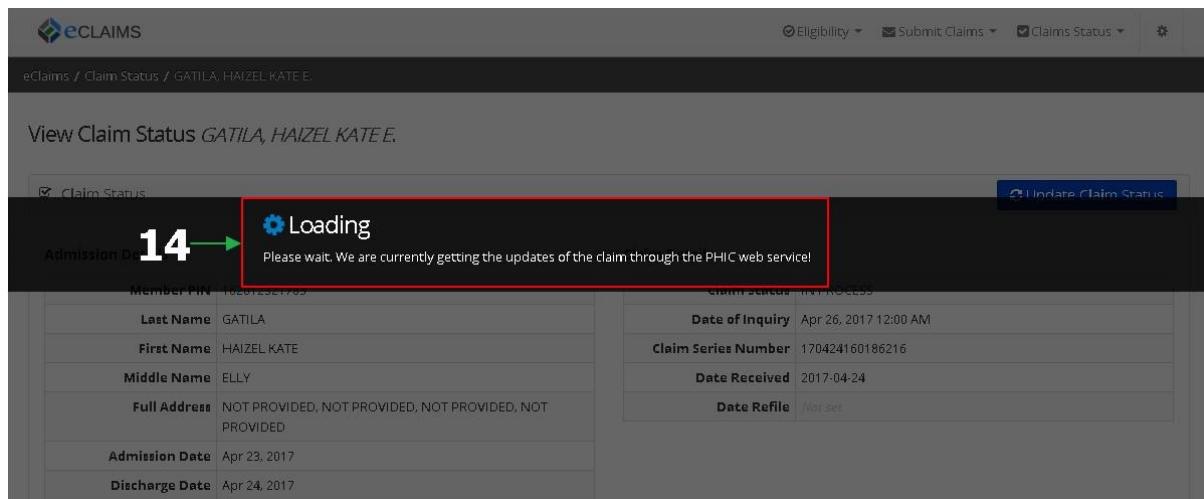
Claim Details

Claim Status	IN PROCESS
Date of Inquiry	Apr 26, 2017 12:00 AM
Claim Series Number	170424160186216
Date Received	2017-04-24
Date Refile	Not set

Claim Process Trail

Process Stage	Date
RECEIVING	Apr 24, 2017
eCLAIMS TO nCLAIMS UPLOADING	Apr 24, 2017

14. Inquiry will be sent to PhilHealth Web Server.

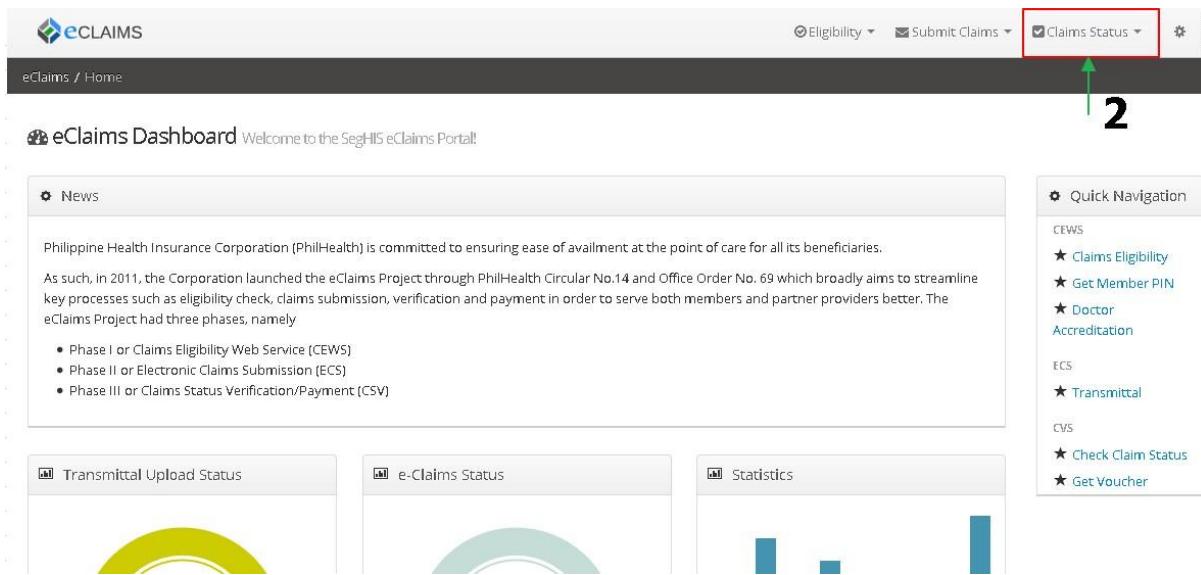


HOW TO CHECK VOUCHER STATUS:

1. To check voucher status, click on **eClaims** menu at the left side of the screen.

The screenshot shows the eClaims dashboard. On the left, a vertical menu has 'eClaims' selected, indicated by a red box and a green arrow labeled '1'. The main content area has tabs for 'Transmittal Upload Status', 'e-Claims Status', and 'Statistics'. A sidebar on the right titled 'Quick Navigation' lists links such as 'Claims Eligibility', 'Get Member PIN', 'Doctor Accreditation', 'ECS Transmittal', 'Check Claim Status', and 'Get Voucher'. At the bottom, there's a 'Claims Status' dropdown menu with 'Claim Status' selected.

2. The eClaims dashboard will display. Click on **“Claim Status”** dropdown menu.



2

The screenshot shows the eClaims Dashboard. At the top right, there are three dropdown menus: 'Eligibility', 'Submit Claims', and 'Claims Status'. The 'Claims Status' menu is highlighted with a red box and has a green arrow pointing to it.

3. To get the voucher, click on **✉ Get voucher** **Get Voucher** button.
4. Fill out the voucher number.
5. Click on **⌚ Get Voucher Details** **Get Voucher Details** button.



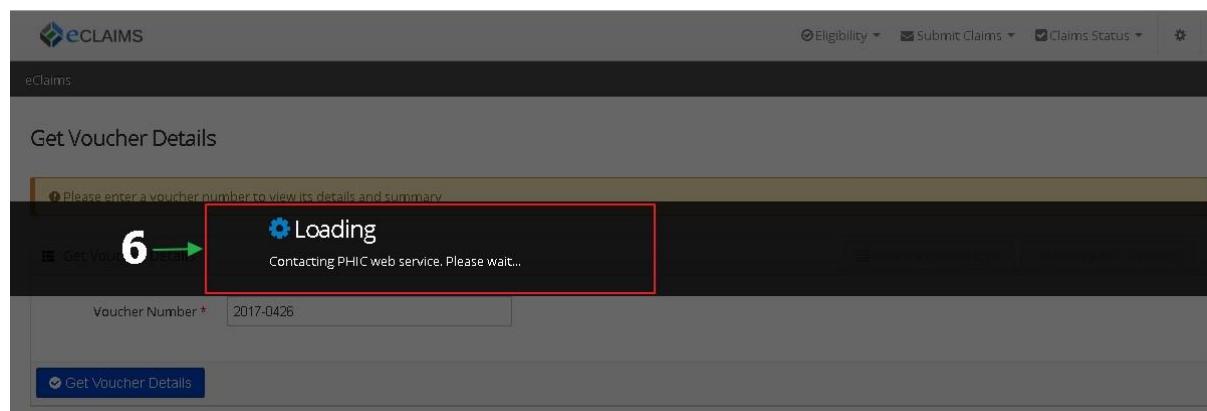
3

4

5

The screenshot shows the 'Get Voucher Details' page. At the top right, there are two buttons: 'Check status' and '✉ Get voucher'. The '✉ Get voucher' button is highlighted with a red box and has a green arrow pointing to it. Below the buttons, there is a text input field labeled 'Voucher Number *' and a button labeled '⌚ Get Voucher Details'.

6. The system will then send inquiry in PhilHealth Web Server.



6

The screenshot shows the 'Get Voucher Details' page during processing. A large red box highlights the center of the page where a 'Loading' message and a progress bar are displayed. The message says 'Contacting PHIC web service. Please wait...'.

7. View details of voucher.
8. View summary of voucher.

Get Voucher Details

Please enter a voucher number to view its details and summary

Voucher Number *

Get Voucher Details

view voucher details

view voucher summary

7

8