



City Philhealth Indigent Division

CITIZEN'S CHARTER

2019 (1st Edition)

**OFFICE OF THE CITY MAYOR
PHILHEALTH INDIGENT PROGRAM UNIT**

CITIZEN'S CHARTER



I. Mandate:

To provide the indigent community of Olongapo City an access to Health thru PhilHealth Insurance Coverage under the City Government Sponsored Program.

II. Vision:

To provide the people of Olongapo City a mechanism for a quality Health Care Services especially those from far flung areas.

III. Mission:

To provide a basic package of needed personal health services for the social and economic well-being of the people of OLONGAPO CITY specifically the marginalized and underprivileged, through the implementation of the Sponsored Program (Indigent Program).

IV. Service Pledge:

We commit to:

1. To provide Socialized Health Insurance coverage to Indigent Resident/Community of Olongapo City
2. To conduct regular home visitations, follow-ups and field works to ensure that Philhealth indigent program services were given to the deserving indigent public of Olongapo City
3. Promote the benefit of PhilHealth Insurance to the community especially the indigent component who are the direct beneficiaries of the Sponsored Program.
4. Monitor other identified indigents thru the National Household Targeting System for Poverty Alleviation (NHTS-PR) and ensure that their PhilHealth ID's/MDR's are delivered to them.
5. To initiate programs such as regular health profiling of PhilHealth beneficiaries thru the conduct of KONSULTA PROGRAM to ensure preventive health services to indigent community.

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**OFFICE OF THE CITY MAYOR
PHILHEALTH INDIGENT PROGRAM UNIT**



1. Application for Free Health Insurance Coverage

The program provides free health insurance and health care service benefits to our indigent members and families including Persons with Disabilities, Single Parents, Children with Special Needs especially Orphan Children who are abandoned and neglected, Unemployed Indigent Residents of Olongapo and Transport Group.

Office or Division:	PhilHealth Indigent Program Unit			
Classification:	Highly Technical Transaction (Multi – Agency)			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	All Indigent Residents/Community of Olongapo City to be included in Group Enrollment			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1. Certificate of Indigency (1 original, 1 xerox)		Barangay of Residency		
2. Voters Information Sheet(1 original) proof of residency		COMELEC		
3. Valid ID				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit required documents	1.Receive and review required documents	None	1 minute	Administrative Aide I /Admin Aide III (Barangay Coordinator)
2.Fill up PMRF	2. Provide PMRF	None	1 minute	Administrative Aide I /Admin Aide III (Barangay Coordinator)
3.Submit accomplish PMRF	3.Receive and review accomplish PMRF	None	2 minutes	Administrative Aide I /Admin Aide III (Barangay Coordinator)
	3.1Encoding of approved PMRF		2 minutes	Administrative Aide I /Admin Aide III (Barangay Coordinator)
	3.2 Orient client on the process of the Free Health Insurance Coverage		5 minutes	Administrative Aide I /Admin Aide III (Barangay Coordinator), Head of Office
	TOTAL	None	11 minutes	

2. Application for Free Health Insurance Coverage for Point of Service (POS)

PhilHealth Indigent Program is a local counterpart of PhilHealth Insurance Corporation (PHIC) under the Office of the City Mayor aiming to provide a basic package of needed personal health services for the social and economic well-being of the indigent community of **OLONGAPO CITY**, mandated by the **Republic Act 11223 also known as Universal Health Care Act of the Philippines.**

Office or Division:	PhilHealth Indigent Program Unit			
Classification:	Highly Technical Transaction (Multi – Agency)			
Type of Transaction:	G2C – Government to Citizen			
Who may avail:	All Indigent Residents/Community of Olongapo City who are in need of Immediate Health Insurance to be included in the Point of Service			
CHECKLIST OF REQUIREMENTS		WHERE TO SECURE		
1.Certificate of Indigency (1 original, 1 xerox)		Barangay of Residency		
2.Certificate of No Property		Assessors Office		
3. Medical Certificate/Medical Abstract/Ultrasound		Attending Physician		
4. Certificate of Financial Assesment		City Social Welfare Development (CSWD)		
5. 1- Valid ID				
CLIENT STEPS	AGENCY ACTIONS	FEES TO BE PAID	PROCESSING TIME	PERSON RESPONSIBLE
1.Submit required documents	1.Receive and review required documents	None	2 minute	Administrative Aide I /Admin Aide III (Barangay Coordinator)
2.Fill up PMRF	2. Provide PMRF	None	1 minute	Administrative Aide I /Admin Aide III (Barangay Coordinator)
3.Submit accomplish PMRF	3.Receive and review accomplish PMRF	None	1 minute	Administrative Aide I /Admin Aide III (Barangay Coordinator)
	3.1 Encoding of approved PMRF		2 minutes	Administrative Aide I /Admin Aide III (Barangay Coordinator)
	3.2 Orient client on the process of the Free Health Insurance Coverage		2 minutes	Administrative Aide I /Admin Aide III (Barangay Coordinator), Head of Office
	TOTAL	None	8 minutes	

3. Feedback and Complaints

FEEDBACK AND COMPLAINTS MECHANISM	
How to send feedback	Suggestion/Complain Box

How feedbacks are processed	By quantifying the various complaints, feedback, replies, comments and suggestions, the results are conveyed to concern personnel for their considerations. In communities served, feedbacks / complaints on services are discussed within their organizations and or with community leaders and are thoroughly analyzed and investigated.
How to file a complaint	Written statement/complaint by the complainant is necessary to establish the premise of the complain
How complaints are processed	<ol style="list-style-type: none"> 1. A written formal complaint is necessary 2. Dialogue with the complainant and the concern personnel. 3. Settlement of issue within the capacity of the unit head. 4. If issues were not reached thru proper settlement, 5. Endorsement of complaints to the Chief Executive/City Mayor copy furnished the City Legal Office and of the Personnel Office for further review of the complaint issue. 6. Recommendation or decision of the complaints based on the recommendation of the City Legal Office
Contact Information of CCB, PCC, ARTA	ARTA: complaints@arta.gov.ph 1-ARTA (2782) PCC: 8888 CCB: 0908-881-6565 (SMS)

