



InHealth Persona PRIMER

MEMBERSHIP FEE

Please refer to Rate Sheet (effective 1 March 2023)

Maximum Benefit Limit Php 500,000 Php 250,000 Php 120,000 Php 100,000 Php 75,000

(MBL)

Room Accommodation Suite Suite Private Semi-Private Ward

BENEFIT DESCRIPTION



A Comprehensive Health Plan designed for Individuals and Families which covers In Patient, Out Patient, Preventive, and Emergency Services. The Maximum Benefit Limit will depend on the Room and Board Accommodation availed by the member. The plan provides access to our accredited networks, either nationwide or regional access.

Nationwide Access to ALL Accredited Hospitals and Clinics Under this plan, a member may have an option to use any Insular Health Care, In

option to use any Insular Health Care, Inc. ("InLife Health Care") accredited hospital nationwide including or excluding top six hospitals, namely: Asian Hospital & Medical Center, Cardinal Santos Medical Center, Makati Medical Center, St. Luke's Medical Center (G.C.), St. Luke's Medical Center (Q.C.) and The Medical City.

Luzon Access - Open Access to all Accredited Hospitals and Clinics (except NCR) Under this plan, a member may use any Insular Health Care, Inc. ("InLife Health Care") accredited hospital within CAR, Regions I, II, III, IV-A, IV-B, and V.

Visayas and Mindanao Access - Open Access to all Accredited Hospitals and Clinics Under this plan, a member may use any Insular Health Care, Inc. ("InLife Health Care") accredited hospital within Visayas and Mindanao regions only, <u>including Cebu Doctors Hospitals</u>, Chong Hua Hospital and Davao Doctors Hospital.

BENEFIT DETAILS

1. Outpatient Benefits

- Annual Physical Examination
 - Taking of Medical History
 - Physical Examination
 - Chest X- Ray
 - Laboratory Examination (CBC, Urinalysis, Fecalysis)
 - ECG (for members 35 years old and up)
 - Pap Smear (for female members, 35 years old and up)

• Preventive Care

Email- investopinoy@gmail.com

- Immunization (excluding cost of Vaccine)
- Consultation and advise on diet
- Periodic Health Monitoring
- Family Planning/ Counselling (except for Infertility)
- Health Education and Wellness Program
- Medical Information

• Outpatient Services

- Consultation, including specialists' evaluation
- First aid treatment of injury and illness
- Laboratory examinations and all diagnostic procedures as prescribed by an
- accredited doctor
- Minor surgery not requiring confinement
- ENT care
- Tuberculin Test up to P600/member/year
- Allergy Test up to P2,500/member/year

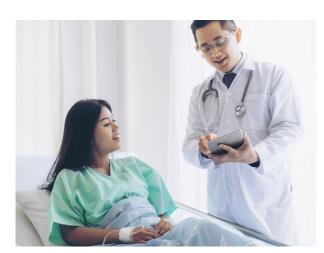


2. Inpatient Benefits

- Room and Board
- Services of all accredited specialist
- General nursing services
- Use of operating room
- Use of recovery room
- Anesthesia and its administration
- Drugs and medication for use in the hospital
- Oxygen and its administration
- Dressing, plaster cast
- Transfusion of blood (except donor screening)
- Chemotherapy/radiotherapy
- ICU confinement (max of 14 days but subject to MBL)
- Dialysis (max of 10 treatments but subject to MBL)
- Physical Therapy (max of 10 sessions but subject to MBL)
- Speech Therapy (max of 7 sessions but subject to MBL)
- Medical services and supplies
- Ambulance services (hospital to hospital; limited to P2,500.00/conduction)
- Admission Kit

3. Emergency Services

- Doctor's services
- Administered medicines
- Intravenous fluids
- Oxygen and its administration
- Diagnostic & laboratory procedures necessary for patient's emergency management



Other services related to the management of the case Emergency availment within IHC's provider network will be covered up to 100% of the covered benefits of the member's plan.

Emergency availment outside IHC's provider network will be covered on REIMBURSEMENT basis:

- > Within 30 km. radius & Foreign Territory up to 80% of the IHC standard rates not to exceed P 30,000
- > Outside the 30 km. radius up to 100% of the IHC standard rates

4. Additional Benefits

- Prescription Medicine
 - The Member is entitled to prescription medicine up to the amount of Php 1,000 during the contract period of one (1) year relative to treatment of a health condition that is covered under the Agreement. The medicine must be prescribed by an InLife Health Care Physician. The Member must present original receipts for reimbursement and other supporting documents within sixty (60) days from date of purchase.
- Term Life Insurance Coverage
 - Coverage for death benefit in the event of death due to natural cause or accident provided that the case is covered under the agreement.

ROOM ACCOMMODATION	STANDARD RISK	SUBSTANDARD RISK
Suite	Php 50,000	Php 25,000
Private	Php 25,000	Php 12,500
Semi Private	Php 15,000	Php 7,500
Ward	Php 10,000	Php 5,000

5. Optional Benefits

- Dental Rider
 - Any number of consultations on dental problems including but not limited to lesions, wounds, burns, and gum problems
 - Annual Oral Prophylaxis (mild to moderate cases)
 - Unlimited simple tooth extractions, except surgery for impaction or extraction of impacted tooth or complicated extractions involving the use of other dental instruments aside from pliers and/or the re-administration of anesthesia
 - Unlimited temporary fillings
 - Re-cementation of jacket crowns, inlays and on lays (limited to 4 abutments)



- Dental education and counseling during consultations
- Simple adjustment ofdenture clasps
- Any number of consultations/dental examinations including treatment of lesions, wounds, burns, gum and other dental problems except diagnostics, prescribed medicines, surgeries and "root-canal" procedures
- No limit as to the number of abutments covered (on item 5 above)
- Orthodontic consultations.
- Aesthetic dental consultations.
- Emergency desensitization of hypersensitive teeth.
- Member has the option to choose between three (3) surfaces of amalgam fillings or two (2) surfaces of "light cure" filling.

**For a detailed view of the benefits, please refer to https://www.insularhealthcare.com.ph/wp-content/uploads/2020/03/InHealth-Persona-SOB-.pdf

EFFECTIVITY DATE

APPLICATION RECEIVED 1st to 10th of the month 11th to 20th of the month 21st to 31st of the month 16th of the current month 16th of the following month

ENROLLMENT ELIGIBILITY

- For Individual Plans
 - 15 days old to below 60 years old (new applications); renewable up to age 64
- For Family Plans
 - a. Principal Member
 - 18 years old to below 60 years old, with enrolled dependents
 - b. Dependent Member
 - For Single Principal
 - Parent/s, 59 years old and below; followed by sibling/s, eldest to youngest, 15 days old to below 21 years old, unmarried and not gainfully employed
 - For Single Parent Principal
 - Eldest child to youngest, 15 days old to below 21 years old, unmarried and not gainfully employed
 - For Married Principal
 - Spouse, 59 years old and below; followed by child/ren, eldest to youngest, 15 days old to below 21 years old
 - c. Primary and Secondary members
 - Child- Applicants who are below 18 years old, whose parents will not be enrolling due to the following reasons:
 - Both parents are working overseas
 - Both parents have existing HMO coverage
 - Both parents are deceased
 - Both parents are ineligible to apply (due to age, underwriting restrictions)

- Primary member: eldest child, 15 days
- Secondary member/s: eldest sibling of the primary member down to the youngest sibling, 15 days old to below 18 years old

ENROLLMENT REQUIREMENTS

- 1. Filled Out and signed Application Form (Individual/Family)
- 2. Signed Summary of Benefits
- 3. Valid ID of applicant/s. If the plan will be paid for by another person or entity, include a copy of the payor's valid ID
- 4. Membership Fee based on the chosen plan, mode of payment, and dental fee (if applicable)
- 5. Additional Requirements for Expatriates:
 - a. Expatriates deriving income in/from the Philippines
 - TIN
 - ACR
 - b. Expatriates not deriving income in/from the Philippines
 - Proof of last entry in the Philippines
 - Passport's Bio Page

REQUIRED INFORMATION FOR APPLICATION

- 1. Height and Weight
- 2. Address (regardless if office or home address)
 - Ensure that the address is complete to avoid delays in the delivery of ID
- 3. Source of fund Advise client to indicate source of fund/s
- 4. Medical Questionnaire
 - Indicate details about medical condition/ explain fully (if client answered "NO" on question 1 and any "YES" on questions 2 - 11)
- 5. For family application: If the number of dependents is 5 and up, kindly use another application form for family and attach it together with the main form
- 6. For family application: Indicate relationship of each dependent with the principal

Special Notes:

- Make sure all spaces for signature have been signed
 - Individual Application
 - Page 1, Authorization (Applicant, payor [if applicable] to sign)
 - Page 2, Declaration (Applicant, payor [if applicable] to sign)
 - Family Application
 - Page 2, Authorization (principal, payor [if applicable] to sign)
 - Page 3, Declaration/ Confirmation of authorization (all applicant to sign)
- In compliance with the AMLC guidelines:
 - Attach a copy of the applicant/s valid ID
 - For applications that are to be paid by another person or entity, attach a copy of the payor's valid ID

- For minors without valid ID, birth certificate or school ID will do
- For expatriates without ACR, request for a copy of the passport's bio page and proof of last entry in the Philippines
- For the list of valid IDs for Financial Transactions, please visit http://www.bsp.gov.ph/regulations/regulations.asp?type=1&id=2059

COVERAGE VALIDITY

Valid for one (1) year, renewable up to age 64

TRANSFERABILITY

Coverage is non-transferable.

NETWORK ACCESS

For a list of accredited hospitals, please visit https://www.insularhealthcare.com.ph/our-partners/#healthcare-partners

LIMITATIONS, RESTRICTIONS, EXCLUSIONS

- 1. Pre-Existing Conditions (PECs)
 - a. An illness or condition shall be considered pre-existing if before the Effective Date of the Agreement:
 - i. Any professional advice or treatment was given for such illness or condition; or
 - ii. Such illness or condition was in any way evident to the member; or
 - iii. The pathogenesis of such illness or condition has already started (which the member may not be aware of).
 - b. PECs are not covered in the first year of coverage.
 - c. After the member has been continuously covered with InLife Health Care for 12 months and the agreement is renewed the following provisions on PECs shall apply:
 - i. PECs are covered provided that the conditions are not considered part of the "Permanent Exclusions", and that:
 - such PECs were declared by the member in the original/renewal application
 - such conditions are unknown to the member (without established medical history).
 - ii. Undeclared PECs with established medical history are excluded from coverage. However, said PECs may be evaluated for possible future consideration.
 - iii. In case an application is disapproved due to an adverse medical condition, an applicant may still avail of the InLife Health Care program by executing a "waiver" relinquishing or limiting coverage for the particular adverse condition/s (as stated in the provision on Enrollment /Approval of Application).
- 2. General Exclusion
 - Care by non-accredited Physician and/or in a non-preferred hospital/ clinic, except in emergencies wherein the emergency provision of the Agreement will apply
 - All pregnancy related conditions
 - All dental related services not expressly stipulated in the Dental Rider Endorsement
 - Sterilization of either sex or reversal of such
 - Rest cures, custodial, domiciliary or convalescent care

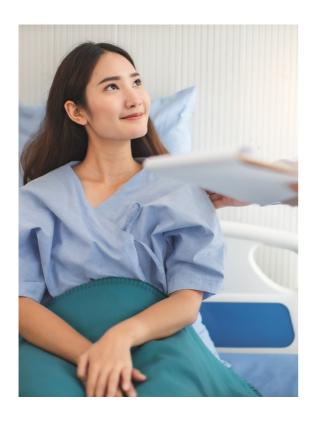
- Cosmetic surgery
- Psychiatric disorders
- Sexually transmitted diseases
- Medical and surgical procedures which are not generally accepted as standard treatment by the medical profession
- Procurement or use of corrective appliances, artificial aids, durable equipment, and orthopedic prosthesis and implants
- Surcharges resulting from additional personal request or service including special nursing services
- Physical examination required for obtaining employment, certification for whatever legal purpose it may serve, insurance or a government license
- Injuries or illnesses due to military, paramilitary, police service, high risk activities, or suffered under conditions of war
- Reimbursement of procedures obtained through government programs
- Injuries or illnesses, which are self-inflicted, caused by attempt at suicide or incurred as a result of or while participating in a crime or acts involving the violation of laws, administrative order or ordinances
- Take-home medicines
- Valvular Heart Disease and Rheumatic Heart Disease 18. Medico-legal consultations and confinement
- When a member is discharged against medical advice
- Blood/Organ-Donor screening/other screening procedure that are purely diagnostic or for screening purposes
- All hospital charges and professional fees after the day and time the hospital discharge had been duly authorized
- Professional fees of Assistant Surgeon
- All confirmatory tests used to document health conditions not covered under the Agreement
- Conditions excluded by medical underwriting
- Concealment cases
- Diseases declared by the Department of Health (DOH) as Epidemic.
- Use of Emergency room Facilities on non-emergency cases or by reason of conditions/injuries not falling under the term "Emergency".
- Miscellaneous Fees not related in the diagnosis and treatment of a member's condition

HOW TO AVAIL

A. Out Patient Availments

- Go to nearest accredited hospital (https://www.insularhealthcare.com.ph/ our-partners/) and proceed to the Insular Health Care coordinator's clinic, present membership ID
- 2.Initial Assessment will be done by the coordinator. Member may be referred to another specialist, if necessary. If for laboratory/ diagnostic test, LOA will be issued. Member to proceed to the laboratory/ diagnostic facility





B. Inpatient Availments

- Go to nearest accredited hospital
 (https://www.insularhealthcare.com.ph/ourpartners/) and proceed to the Insular Health Care
 coordinator's clinic
- Secure an admitting order from the coordinator/ accredited doctor
- Proceed to the admitting section of the accredited hospital
- 4. LOA will be issued during the confinement, member to file Philhealth requirements (if applicable)
- 5. Discharge

C. Emergency Availments

- 1. Proceed to the emergency room
- 2. ER staff to render immediate care
- 3. For non- admission, sign necessary documents
- 4. If for admission, follow In Patient process

PAYMENT PROCEDURES

Available Payments Options



Online Banking via Funds Transfer



Online Banking via Bills Payment



Over the Counter via Dragonpay



Credit or Debit Card

Let's get started!

- 1. Head to www.insularhealthcare.com.ph
- 2.Under "PAYMENTS AND DOWNLOADABLE FORMS" click "ONLINE PAYMENTS"



3. Choose your preferred payment option



Online Banking via Funds Transfer

1. Scroll down to "ONLINE BANKING VIA FUNDS TRANSFER" and click "PAY NOW".





- 2. Follow the steps for Funds Transfer and select your preferred bank from the available IHC accounts.
- 3. Once payment is successful take a screenshot and send to cashier@insularhealthcare.com.ph
- 4. InLife Health Care will reply to the email with your official receipt



Online Banking via Bills Payment

1. Scroll down to "ONLINE BANKING VIA BILLS PAYMENT" and click "PAY NOW".





- 2. Follow the steps for Bills Payment on your bank's online banking platform. IHC is listed as a merchant in BDO, BPI, and UnionBank.
- 3. Once payment is successful take a screenshot and send to cashier@insularhealthcare.com.ph
- 4. InLife Health Care will reply to the email with your official receipt

1. Scroll down to "OVER THE COUNTER VIA DRAGONPAY" and click "PAY NOW".



2. You will be redirected to Dragonpay's landing page. Fill out the fields with your information and click "PAY".



3. Select your preferred payment location



4. Take note of your reference number and proceed to your preferred payment location to pay.





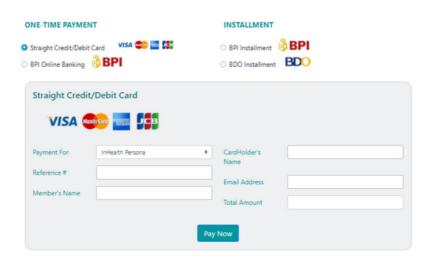
1. Scroll down to "CREDIT OR DEBIT CARD" and click "PAY NOW".



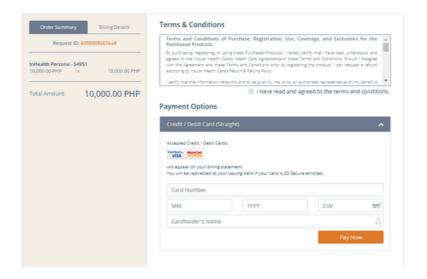
2. Choose your preferred option .



3. Fill out the fields and click "PAY NOW"



4. Once redirected to Paynamics' payment page, fill out the fields with your card details and click "PAY NOW"



- 3. Once payment is successful take a screenshot and send to cashier@insularhealthcare.com.ph
- 4. InLife Health Care will reply to the email with your official receipt