iCare Persona

PRIMER

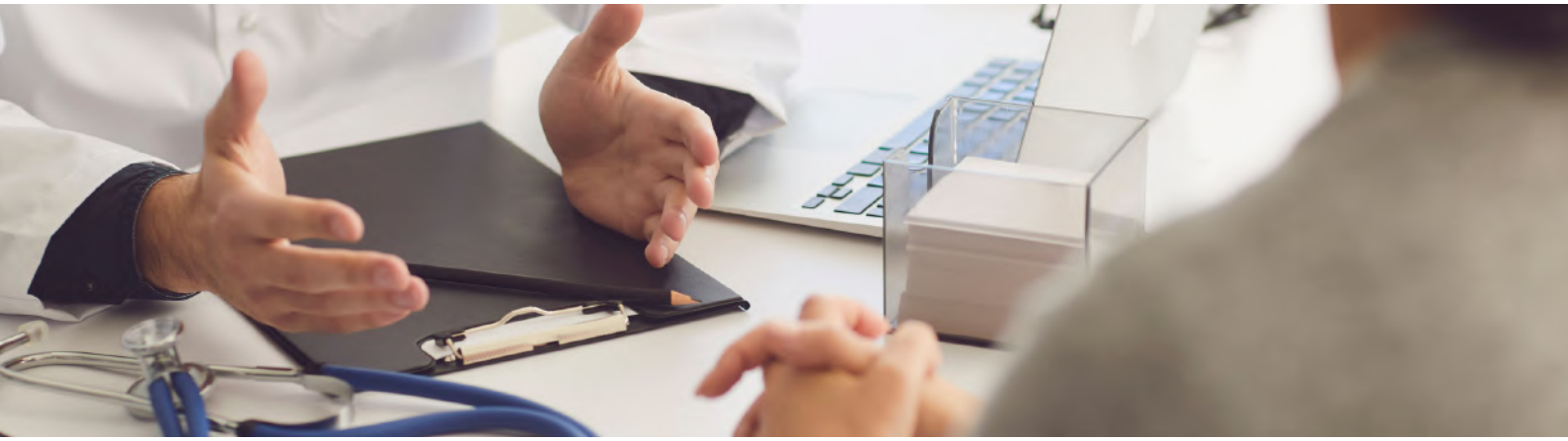


MEMBERSHIP FEE

Please refer to Rate Sheet (effective 1 March 2023)

MAXIMUM BENEFIT LIMIT (MBL)	Php 500,000	Php 250,000	Php 120,000	Php 100,000	Php 75,000
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 iCare (Insular 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.

CHOOSE YOUR ACCESS

NATIONWIDE ACCESS W/ TOP 6 HOSPITALS

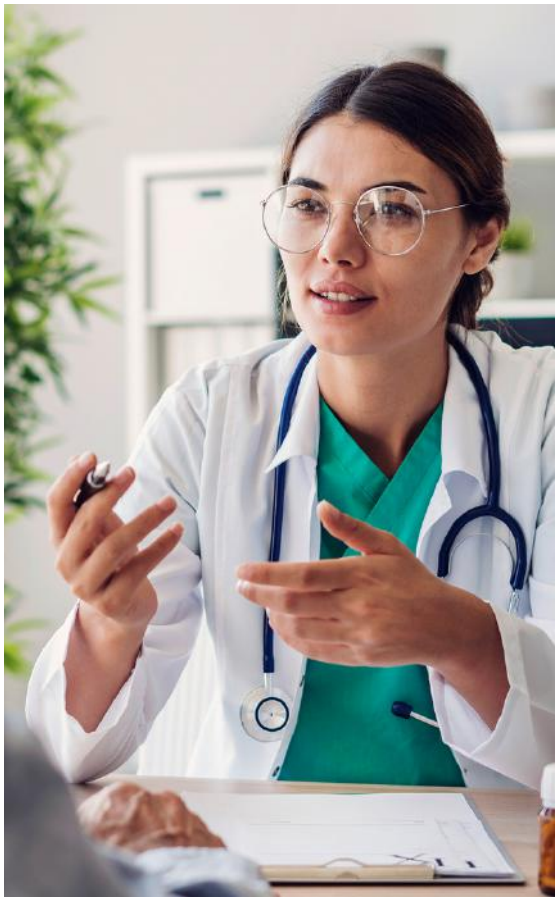
NATIONWIDE ACCESS W/O TOP 6 HOSPITALS

LUZON ACCESS ONLY (EXCLUDING NCR)

VISMIN ACCESS ONLY

BENEFIT DETAILS

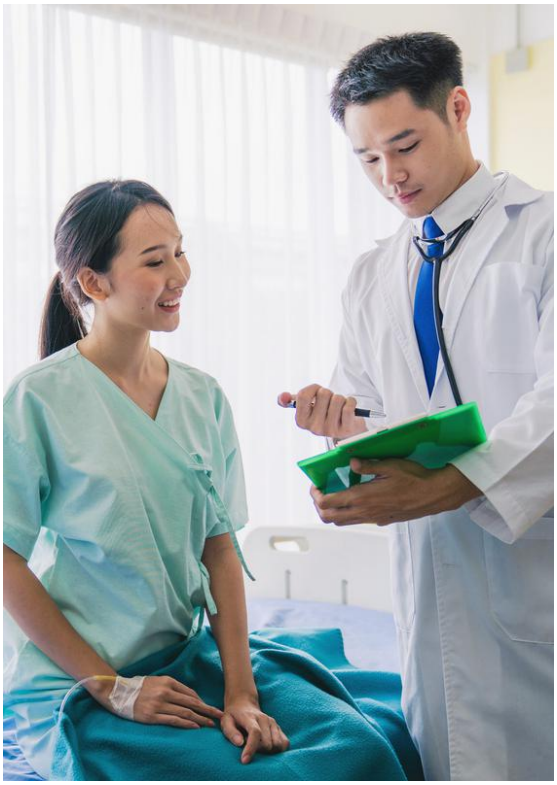
1.OUTPATIENT BENEFITS



- **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**
  - 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 iCare's provider network will be covered up to 100% of the covered benefits of the member's plan.

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

- **Within 30 km. radius & Foreign Territory** – up to 80% of the iCare standard rates not to exceed P 30,000
- **Outside the 30 km. radius** – up to 100% of the iCare 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 iCare 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	STANDARD RISK
1ST TO 10TH OF THE MONTH	16th of the current month
11TH TO 20TH OF THE MONTH	1st of the following month
21ST TO 31ST OF THE 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 iCare 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 iCare 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. **Check iCare's General Exclusions here: https://www.insularhealthcare.com.ph/products/individual-comprehensive/**

HOW TO AVAIL



A. OUT PATIENT AVAILMENTS

1. Go to nearest accredited hospital (**https://www.insularhealthcare.com.ph/our-partners/**) and proceed to the iCare 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

1. Go to nearest accredited hospital **(https://www.insularhealthcare.com.ph/our-partners/)** and proceed to the iCare coordinator's clinic
2. Secure an admitting order from the coordinator/accredited doctor
3. 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

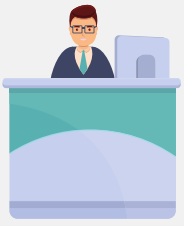
AVAILABLE PAYMENTS OPTIONS



Online Banking via Funds Transfer



Online Banking via Bills Payment



Over the Counter via Dragonpay

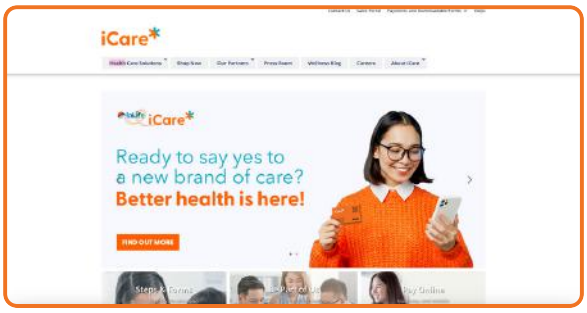


Credit or Debit Card

LET'S GET STARTED!

1. Head to **www.insularhealthcare.com.ph**

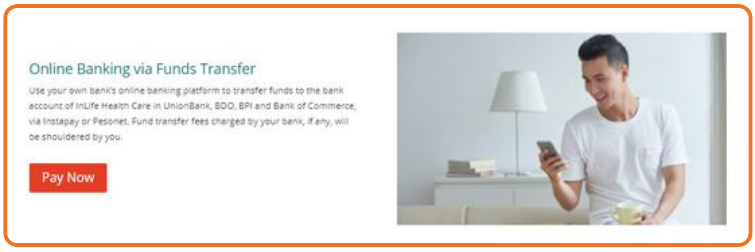
2. Under **PAYMENTS AND DOWNLOADABLE FORMS**, click **ONLINE PAYMENTS.**



3. Choose your preferred payment option

ONLINE BANKING VIA FUNDS TRANSFER

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



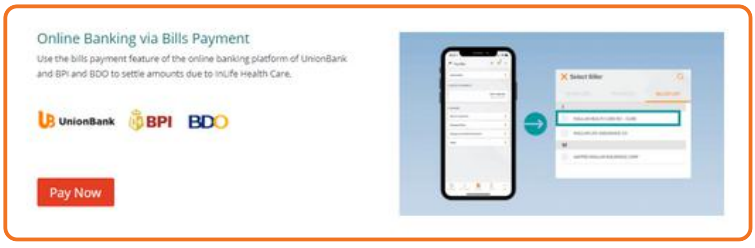
2. Follow the steps for Funds Transfer and select your preferred bank from the available iCare accounts.

3. Once payment is successful take a screenshot and send to cashier@insularhealthcare.com.ph

4. iCare 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. iCare 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. iCare will reply to the email with your official receipt

ONLINE BANKING VIA BILLS PAYMENT

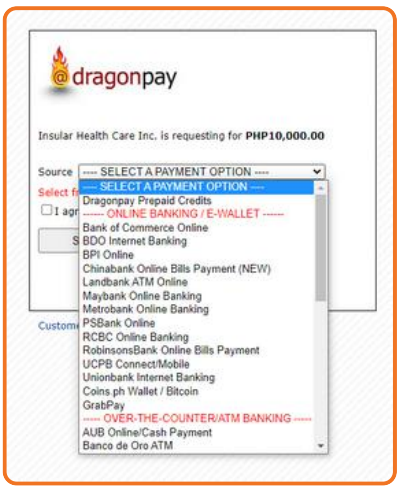
1. Scroll down to **OVER THE COUNTER VIA DRAGONPAY** and click **PAY NOW**.



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.



CREDIT OR DEBIT CARD

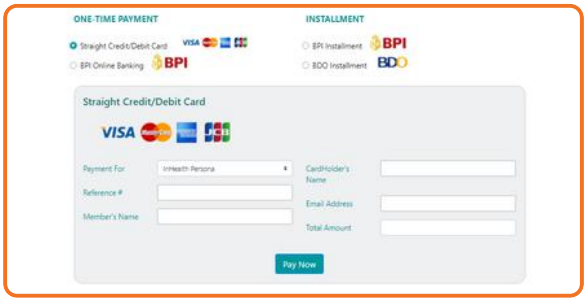
1. Scroll down to **CREDIT OR DEBIT CARD** and click **PAY NOW**.



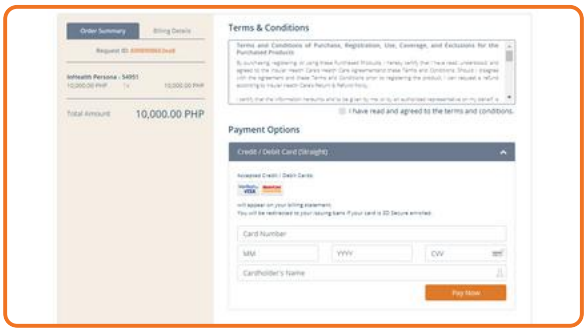
2. Choose your preferred option.



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**



5. Once payment is successful take a screenshot and send to **cashier@insularhealthcare.com.ph**

6. iCare reply to the email with your official receipt