Benefits

Know more about your healthcare benefits

intellicare.com.ph
RESPONSIBILITIES OF AN INTELICARE MEMBER

To ensure that inconveniences are lessened during availment:

Always bring your membership card and present this during availment of procedures.

Read this guidebook to be familiar with your benefits and the procedures for availment, or coordinate with your HR Representative or Health Plan Administrator with regards to the details of your healthcare plan.

Give Intellicare feedback (whether positive or negative) regarding the services of the following:
- Hospital Coordinators
- Accredited and Affiliated Medical Providers
- Patient Relations Officers
- Customer Service Representatives
- Other personnel directly related to the provision of healthcare services

You may contact our Account Management Department at (02) 789-4000 or e-mail us at amd@info.intellicare.net.ph to report any concern.
Dear Valued Member,

Thank you for choosing Intellicare to provide for your comprehensive healthcare requirements.

We have prepared this guidebook with the objective of providing you with the basic understanding of how your Health Plan works. For easy reference, we have covered the important items that you need to know:

- Features of the healthcare program
- Plan coverage and procedures for availment
- General exclusions

Should you have any concerns or questions regarding the information contained in this guidebook, our Membership Services Department will be more than willing to assist you. You may contact us through the numbers listed herein.

Special Note:
This guidebook serves only as a standard reference and is not an Agreement. In case of differing information or interpretation between this handbook and your Healthcare Services Agreement, the terms and conditions of the latter shall prevail.
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OBJECTIVES OF THE PLAN

The company’s health plan aims to provide its members access to the services and facilities of medical institutions for their healthcare and medical needs. The program provides for preventive, diagnostic, and treatment services of Intellicare-accredited and affiliated medical providers to all qualified and accepted members.

PARTIES INVOLVED IN THE PLAN

Intellicare is primarily responsible for the administration of the company’s health plan and the provision of comprehensive medical and healthcare coverage to qualified members through the use of its network of accredited and affiliated medical service providers.

Your HR/Personnel/Benefits Administrator acts as the overall plan administrator and is primarily responsible for internal liaisons with Intellicare to facilitate the medical availment as well as the resolution of concerns on behalf of the members.

You, as a member, are expected to know the features of your health plan. You are to understand and comply with the proper procedures of availment and give positive or negative feedback on your experiences during medical availment.

DEFINITION OF TERMS

- **Intellicare Coordinator/Assistant Coordinator** — first contact doctor for primary consultation. Issues referral slip to other affiliated physicians/specialists for consultation/treatment, for prescribed out-patient diagnostic evaluations, and for hospital confinement
- **Out-patient Case** — any condition which does not require hospital confinement
- **In-patient Case** — continuous confinement in a hospital for at least six (6) hours except in an emergency case
- **Elective Case** — non-emergency case that needs no urgent treatment and may be deferred without endangering the member’s life
- **Emergency Case** — a condition where a trained medical professional diagnoses that the member’s life or health would be put at serious risk if no immediate attention is provided (Examples: heart attack, stroke, poisoning, loss of consciousness, convulsion, severe dehydration, etc.)
- **Relative Value Scale (RVS)** — schedule of charges as agreed upon between the Association of Health Maintenance Organizations of the Philippines, Inc. (AHMOPI) and various Medical Societies using the Philippine College of Surgeons book
• **Maximum Benefit Limit (MBL)** — the maximum amount payable per illness per member per year. It shall include consultations, diagnostic procedures, and hospitalization. (Please refer to your HR/Benefits Administrator for your corresponding MBL)

• **Pre-Existing Condition (PEC)** — an illness or disease the member already has (with or without their knowledge) that has been diagnosed before enrollment or during his/her membership with Intellicare; OR an illness or disease that do not develop over 24 hours; OR any professional advice or treatment has been obtained for such illness or injury; OR such illness or injury was evident upon medical examination; OR the natural history of such illness or injury can be clinically determined to have started prior to any availingment whether or not the member is aware of such illness or injury.

(Please refer to your HR/Benefits Administrator for your corresponding PEC coverage)

**PEC LIST INCLUDES BUT IS NOT LIMITED TO THE FOLLOWING:**

- Hypertension
- Thyroid disease, Goiter
- Cataracts/Glaucoma/Pterygium
- Eye, ear, nose, and/or throat conditions requiring surgery
- Asthma
- Tuberculosis
- Chronic cholecystitis/cholelithiasis and other forms of calcification
- Hernia
- Prostate disorders
- Hemorrhoids and anal fistulae
- Tumors
- Uterine myoma, ovarian cyst, endometriosis
- Buerger’s disease
- Varicose veins
- Scoliosis
- Arthritis
- Chronic allergies
- Gastric and Duodenal ulcers
- Dreaded diseases*

• **Dreaded Disease** — a generally chronic and irreversible condition requiring frequent and/or prolonged hospitalization, including those requiring continuous confinement for fifteen (15) days or more
Dreaded diseases include but are not limited to the following:

- Cerebrovascular accident (Stroke), Paralysis, Epilepsy
- Central nervous system lesions (Poliomyelitis, Meningitis/Encephalitis/Neurosurgical conditions)
- Cardiovascular diseases (Coronary/Valvular/Hypertensive Heart Diseases)
- Chronic obstructive pulmonary diseases (Asthma/Bronchitis/Emphysema)
- Liver parenchymal diseases (Cirrhosis, Hepatitis, Newgrowth)
- Chronic kidney/Urological diseases (Urolithiasis, Obstructive Uropathies, etc.)
- Chronic gastrointestinal tract diseases
- Collagen diseases (Rheumatoid arthritis, Systemic lupus erythematosus)
- Diabetes
- Malignancies and blood dyscrasia (Cancers, Leukemia, Idiopathic Thrombocytopenic Purpura)
- Burns (if occurring prior to enrollment)
- Single or multiple organ failure requiring dialysis
- Any illness other than the above which would require intensive care unit confinement

• Philhealth/ECC Provision — Intellicare’s benefits under Philhealth/Employees Compensation Commission (ECC) will be deducted first from the amount otherwise payable. Intellicare will not pay or advance the costs of such benefits, nor will Intellicare be responsible for filing any claims under Philhealth or ECC.

- Philhealth members must file all required Philhealth forms and documents prior to hospital discharge as well as Philhealth-required out-patient procedures. Non filing or late filing would mean payment of the Philhealth portion by the member.

- Non-Philhealth members must pay the Philhealth portion.

Please consult with your Human Resource Department or visit www.philhealth.com should you have any concern or question regarding your Philhealth:
- Benefits & Coverage
- Eligibility
- Membership/payments/requirements
2 - Membership Eligibility

Who may enroll under the healthcare program?

- **Principal member** — Eligible employees (as determined by the enrolling company) aged 18 and not more than 65 years old
- **Dependents**

Following the Hierarchy Rule*, enrollment of dependents shall strictly follow the order indicated below:

**For Married Principals**
- Legal Spouse — not more than 65 years old
- Children — legitimate, legally adopted or legitimated; unmarried, unemployed, wholly dependent financially upon the Principal member; not more than 21 years old

*Enrollment of children must be in order of age, starting with the eldest

**For Single/Unmarried Principals**
- Biological children — unmarried, unemployed, not more than 21 years old
- Parents — not more than 65 years old
- Siblings — unmarried, unemployed, wholly dependent financially upon the Principal member; not more than 21 years old

*Enrollment of children/siblings must be in order of age, starting with the eldest

**Note:** Enrollment period is within 30 days from effective date of coverage.

No additional dependents may be enrolled after the 30-day period except for new born babies, spouse of newly married employees, and dependents of newly-hired or regularized employees who may be enrolled within 30 days from date of birth/date of marriage/effective date of coverage of Principal member.

Newly-born babies shall be covered on the 30th day provided they are enrolled within 15 days from date of birth.
3 - Plan Benefits

Overview of Plan Benefits

Preventive Healthcare Maintenance Services
Out-Patient Care Services
In-Patient Care Services
Emergency Care Services
Additional Benefits
Latest Modalities
Dental Care Services (Optional Benefit)
Financial Assistance

NOTE: Only the major components are listed in this guidebook. For the complete list and the detailed description of your benefits, you may consult with your Human Resources Representative or call Intellicare’s Membership Services Department for assistance. Coverage of a member will depend on the final diagnosis.
PREVENTIVE HEALTHCARE MAINTENANCE SERVICES

A. ANNUAL PHYSICAL EXAMINATION (APE)

- The APE will be conducted:
  - Based on a pre-determined schedule in coordination with your Human Resources/Personnel Department
  - At any Aventus Clinic or at the company site through a mobile clinic (for 50 persons per half day)
- The APE will include:
  - Physical examination
  - Complete Blood Count (CBC)
  - Urinalysis
  - Fecalysis
  - Chest x-ray
  - Electrocardiogram (for members 35 years old and above, or if indicated by the attending affiliated physician)
  - Pap smear (for female members 35 years old and above, or if indicated by the attending affiliated physician)
  - Evaluative doctor’s consultation
- Routine immunization (except cost of vaccines)
- Counseling, medical seminars, wellness programs (e.g. family planning, first aid application, stress management)
- Management of health problems
- Record-keeping of medical history

B. OUT-PATIENT CARE SERVICES

- Medical consultations during regular clinic hours, with any Intellicare-affiliated physician (excluding cost of prescribed medicines)
- Referral to Intellicare-affiliated specialist/s
- Eye, ear, nose, and throat consultations
- Treatment of minor injuries or illnesses such as lacerations, mild burns, sprains, and the like, including ATS and Toxoid vaccines if indicated (except anti-rabies)
- Laboratory tests, x-ray, and other diagnostic examinations prescribed by an Intellicare-affiliated physician
- Minor surgery not requiring confinement
- Speech and physical therapy up to 12 sessions per year, respectively
- Pre-natal and post-natal consultations up to 14 sessions per year with any Intellicare-affiliated OB-GYN (excluding cost of diagnostic tests and laboratory exams)
C. IN-PATIENT CARE SERVICES

Room and Board accommodation within the limits of your plan (please refer to your HR/Benefits Administrator for your room and board category)

- Use of the operating room and recovery room facilities
- Professional fees of attending Intellicare-affiliated physicians
- Anesthesia and its administration
- Transfusion of blood (including whole blood products) and intravenous fluids
- Laboratory tests, x-rays, and other diagnostic procedures referred to the attending Intellicare-affiliated physicians/specialists
- Administered medicines either orally or intravenously
- Admission kit, including ice cap/wee bag
- Dressings, plaster casts, sutures, and other items directly related to the medical management of the patient
- Use of the Intensive Care Unit (ICU), subject to Pre-Existing Condition (PEC) limit
- Ambulance service (hospital-to-hospital transfer) to be covered through reimbursement up to Php 2,000/year
- Assistance in administrative requirements through Intellicare’s Patient Relations Officer (PRO)
- All other hospital charges deemed necessary by the Intellicare-affiliated physician in the treatment of the member

D. EMERGENCY CARE TREATMENT/CONFINEMENT BENEFITS

Emergency care treatment/confinement in an ACCREDITED HOSPITAL shall include:
- Affiliated doctor’s services
- Medicines administered during treatment or for immediate relief
- Oxygen and intravenous fluids
- Dressings, plaster casts, and sutures
- Laboratory tests, x-rays, and other diagnostic examinations directly related to the emergency management of the patient

Emergency treatment/confinement conducted:
At a NON-ACCREDITED HOSPITAL shall be covered through reimbursement up to 80% of the total hospital bill using Intellicare’s Relative Value Scale (RVS) but not to exceed Php 30,000.

Note: Member should notify Intellicare within 24 hours from the time of emergency confinement.

In FOREIGN TERRITORIES shall be reimbursed by Intellicare based on what should have been paid had the member been confined in a non-accredited hospital based on Intellicare’s RVS and Philippine currency but not to exceed Php 30,000.
### E. ADDITIONAL BENEFITS

- Latest Modalities of Treatment and Special Procedures
  Should an Intellicare-affiliated physician/specialist prescribe or require any of the following treatments and/or procedures, these limits will apply (inclusive of professional fees and related incidental expenses):

<table>
<thead>
<tr>
<th>Treatment</th>
<th>PEC limit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Surgery/Angiography/Angiogram</td>
<td>PEC limit, not to exceed Php 50,000</td>
</tr>
<tr>
<td>Transurethral Microwave Therapy</td>
<td>PEC limit, not to exceed Php 35,000</td>
</tr>
<tr>
<td>Percutaneous Ultrasonic Nephrolithotomy</td>
<td>PEC limit, not to exceed Php 35,000</td>
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<tr>
<td>Lithotripsy</td>
<td>PEC limit, not to exceed Php 30,000</td>
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<tr>
<td>Laparoscopic Procedure</td>
<td>PEC limit, not to exceed Php 30,000</td>
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<tr>
<td>Arthroscopic Procedure</td>
<td>PEC limit, not to exceed Php 30,000</td>
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<tr>
<td>Dialysis</td>
<td>PEC limit</td>
</tr>
<tr>
<td>Chemotherapy/Radiotherapy</td>
<td>PEC limit</td>
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<tr>
<td>Gamma Knife Surgery (based on cobalt/radiotherapy)</td>
<td>PEC limit</td>
</tr>
<tr>
<td>CT Scan</td>
<td>PEC limit</td>
</tr>
<tr>
<td>Ultrasound (except for maternity cases)</td>
<td>PEC limit</td>
</tr>
<tr>
<td>Thallium Scintigraphy</td>
<td>PEC limit</td>
</tr>
<tr>
<td>Benign Prostatic Hypertrophy</td>
<td>PEC limit</td>
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<tr>
<td>2D-echo with Doppler</td>
<td>PEC limit</td>
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<tr>
<td>24-hour Holter Monitoring</td>
<td>PEC limit</td>
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<tr>
<td>Herniorraphy</td>
<td>PEC limit</td>
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<tr>
<td>Electromyography</td>
<td>PEC limit</td>
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<tr>
<td>Treadmill Stress Test</td>
<td>PEC limit</td>
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<tr>
<td>Myelogram</td>
<td>PEC limit</td>
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<tr>
<td>Video Gastroscopy</td>
<td>PEC limit</td>
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<tr>
<td>Mammography/Sonomammogram</td>
<td>PEC limit</td>
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<tr>
<td>Bone Densitometry Scan (Dexascan)</td>
<td>PEC limit</td>
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<tr>
<td>Magnetic Resonance Imaging (MRI)</td>
<td>PEC limit, not to exceed Php 6,000</td>
</tr>
<tr>
<td>Nuclear Radioactive Isotope Scan (NRIS)</td>
<td>PEC limit, not to exceed Php 5,000</td>
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<tr>
<td>Neuroscan</td>
<td>PEC limit, not to exceed Php 7,000</td>
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<tr>
<td>Perfusion Scan</td>
<td>PEC limit, not to exceed Php 5,000</td>
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</tbody>
</table>
• Dental Care Services (Optional Benefit)
  - Dental examinations
  - Annual prophylaxis
  - Oral health education through chairside instruction
  - Orthodontic consultation (braces and malposition of teeth)
  - Pre-natal check of teeth and gums
  - Temporo mandibular joint (clicking of jaws) consultation
  - Conduct activities on dental health education
  - Emergency dental treatment for the relief of pain
  - Gum treatment for cases like inflammation or bleeding
  - Temporary fillings
  - Simple extraction of unsavable tooth
  - Recementation fixed bridges, crowns, jackets, inlays / outlays

*Please refer to your HR Representative if this is included in your package.

• Financial Assistance including Death and Disability Benefits (for Principal members only):

<table>
<thead>
<tr>
<th>Condition</th>
<th>Benefit (Php)</th>
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<tbody>
<tr>
<td>Natural death</td>
<td>10,000</td>
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<tr>
<td>Accidental death</td>
<td>20,000</td>
</tr>
<tr>
<td>Loss of both hands</td>
<td>10,000</td>
</tr>
<tr>
<td>Loss of both feet</td>
<td>10,000</td>
</tr>
<tr>
<td>Loss of sight of both eyes</td>
<td>10,000</td>
</tr>
<tr>
<td>Loss of one hand and one foot</td>
<td>10,000</td>
</tr>
<tr>
<td>Loss of one hand and sight of one eye</td>
<td>10,000</td>
</tr>
<tr>
<td>Loss of one foot and sight of one eye</td>
<td>10,000</td>
</tr>
<tr>
<td>Loss of one hand or one foot</td>
<td>5,000</td>
</tr>
<tr>
<td>Loss of sight of one eye</td>
<td>5,000</td>
</tr>
</tbody>
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*In the event of death or disability, claim must be made by the legitimate heirs and/or assignees of the Principal member.
Flowchart of Availment Procedures
1. Go to the POS terminal in an accredited hospital or clinic. In a hospital, the terminal is located at the Intelicare Coordinator’s clinic, at the Industrial office, or at the HMO office. In a clinic, the terminal is located at the reception area or at the nurse station.

2. Present your Intelicare card to the Intelicare Coordinator or to the attending medical staff and have it swiped to validate membership eligibility.

3. If APPROVED, Out-Patient (OP) Letter of Eligibility (LOE) will be printed. Sign the LOE. If DECLINED, the attending medical staff will call Intelicare’s Customer Service for assistance.

4. Secure an Intelicare Referral Control Sheet (RCS) 1 for consultation or RCS 2 for laboratory or diagnostic procedure prior to availment.

5. Avail of the consultation or procedure. Sign the RCS.

6. File Philhealth for Philhealth-required procedures.

Note: If the consultation/procedure is not done yet, please keep the RCS and request cancellation through the Intelicare Coordinator or call Intelicare’s 24/7 Customer Service Hotline. RCS is valid within three days from date of issue.
1. If recommended for admission after undergoing medical consultation or diagnostic examination, secure an admitting order from an Intelicare-affiliated doctor in an Intelicare-accredited hospital where you will be admitted.

2. Proceed to the admitting section and present your admitting order and Intelicare card. The medical staff will swipe your card for validation of membership eligibility. If APPROVED, In-Patient (IP) Letter of Eligibility (LOE) will be printed. Sign the LOE. If DECLINED, staff will call Intelicare’s Customer Service for assistance.

3. Present the admitting order and LOE to the Intelicare Coordinator.

4. Occupy allowed room (note: please double-check room category/plan limit to avoid paying incremental charges).

5. Inform Intelicare’s Customer Service regarding admission within 24 hours.

6. File Philhealth for Philhealth-required procedures.

7. Intelicare’s Patient Relations Officer (PRO) will issue an Intelicare Referral Control Sheet (RCS) 3 for in-patient. Sign the RCS. Settle any incremental and miscellaneous charges upon discharge (please validate if items charged are correct).

Note: If you had your consultation or diagnostic examination in another clinic or hospital, please present the results and recommendation of the Intelicare-affiliated doctor to the Intelicare Coordinator for you to be assigned an Intelicare-affiliated doctor in an Intelicare-accredited hospital where you will be admitted.
Go to the Emergency Room (ER) of an accredited hospital.

Present your Intellicare card to the ER staff for validation of your membership status. If APPROVED, ER LOE will be printed. Sign the LOE. If DECLINED, attending medical staff will call Intellicare’s Customer Service for assistance.

Undergo medical treatment.

If declared as an OUT-PATIENT CASE, sign the hospital bill upon discharge and settle non-covered charges.

If FOR ADMISSION, notify Intellicare’s Customer Service within 24 hours. Occupy allowed room (note: please double-check room category/plan limit to avoid paying incremental charges).

File Philhealth for Philhealth-required procedures.

Intellicare’s Patient Relations Officer (PRO) will issue a Referral Control Sheet (RCS) 3 for in-patient. Sign the RCS. Settle any incremental and miscellaneous charges upon discharge (please validate if items charged are correct).

NOTE: If treated in a non-accredited facility, you may file for reimbursement of your hospital bill (subject to plan coverage).

The process of reimbursement is as follows:
1. Download Intellicare Reimbursement Form from Intellicare’s website or secure a copy from your HR representative.
2. Fill up the reimbursement form completely and attach required documents (please note: all attached official receipts must be original copies).
3. Submit the form and the required documents to Intellicare within 30 days from expiration of treatment/hospital discharge.
4. Intellicare will process the request within 30 days upon receipt of complete form and documents.
1. Check the list of Intellicare-affiliated dentists (you may refer to your guidebook, Intellicare’s website, or call Intellicare’s Customer Service for assistance).

2. Call the dentist to confirm schedule and to inquire if an appointment should be set or if walk-in patients can be accommodated.

3. Proceed to the dental clinic on the day of your dental availment and present your Intellicare card for validation.

4. Avail of the entitled dental benefit.

5. Sign the Referral Control Sheet (RCS) made available at the dental clinic.
IMPORTANT NOTICE:

• Always bring and present your Intellicare card when availing your healthcare benefits (For lost card, inform your HR immediately. Submit an Affidavit of Loss and pay the replacement fee).

• For the list of accredited and affiliated medical providers, you may refer to your guidebook, Intellicare’s website, or call Intellicare’s Customer Service for assistance.

• For concerns or queries regarding your Philhealth benefits and coverage, eligibility, payments, and requirements, please consult with your HR Department or visit www.philhealth.com.

• For accredited hospitals or clinics without POS terminals, proceed to the Intellicare Hospital Coordinator or call Intellicare’s Customer Service for assistance.

• If your card is not swiped or if no LOE is issued, member may be billed of the charges (e.g. excluded facility, clinic-based, membership status is not active, consultation/procedure is not covered).

To apply for REIMBURSEMENT of medical expenses:

1. Download Intellicare Reimbursement Form from Intellicare’s website or secure a copy from your HR representative.

2. Fill up the reimbursement form completely and attach required documents (please note that all attached official receipts must be original copies).

3. Submit the form and the required documents to Intellicare within 30 days from expiration of treatment/hospital discharge.

4. Intellicare will process the request within 30 days upon receipt of complete form and documents.
4 - General Exclusions & Limitations

Intellicare will not pay for any cost or losses arising directly or indirectly from:

- Services rendered by non-affiliated doctors except with the prior written authorization of an Intellicare Coordinator or in emergency cases
- Hospital charges for special or private nursing services, supplemental foods and medicines such as vitamins and minerals (unless prescribed), extra accommodation, and non-medical personal appliances such as radio, television, telephone, computer
- Health/Annual/Pre-Employment check-ups for other companies, government requirements, insurance purposes, or out-of-the-country trips
- Recuperation such as confinement in a sanitarium or in a convalescent home, rehabilitation medicines (including work-ups), custodial, domiciliary care, government-imposed quarantines
- Medical certificates
- Professional fees in medico-legal cases
- Refusal to undergo recommended treatment or demanding treatment aside from that which the Intellicare-affiliated doctors have recommended
- Blood screening
- Vaccines for immunization, anti-rabies, anti-venom, steroid injections
- Organ transplants or acquisition of an organ
- Procurement or use of eyeglasses, special braces, steel implants, buckles for retinal detachment, wheelchairs or prosthetic appliances including, but not limited, to items such as artificial limbs, hearing aids, crutches, intra-ocular lens, contact lenses, artificial hips or joints, pacemakers, mesh (for hernia), stents, and ventilating tubes
- Determining/ruling out of PEC during the first twelve (12) months of membership if result is positive
- Determining/ruling out of hepatitis or tuberculosis if result is negative

TREATMENT/PROCEDURES:

- Circumcision, infertility or fertility and virility/potency (erectile dysfunctions), artificial insemination, sex change
- Laser eye surgery for myopia or error of refraction
- Acupuncture, chiropractic treatment, iridology, chelation, cell implant therapy
- Speech or physical therapy in excess of twelve (12) sessions
- Sleep Study, unless directly related to an organic illness; maximum limit is Php 5,000
- Reconstructive surgery except to treat a functional defect directly caused by an accident or illness covered herein, cautery of warts, milia, xyringoma, facial moles, aesthetic, cosmetic or beautification alterations, sclerotherapy
- Out-patient medicines and medical supplies except in emergency cases
- All other treatments, laboratory examinations, diagnostic procedures, and surgical procedures not specifically defined in this Agreement are considered not covered (e.g. Dental Surgery, Dental X-Ray)
EXTERNAL FORCES/ACTIVITIES:

- War-like or combat operations, government-declared acts of rebellion, active participation in riots or demonstrations, strikes or labor disputes, terrorism, provoked criminal acts, violation of a law or ordinance, commission of a crime (whether consummated or not), serving in military, naval, or air forces of any country or international authority, unnecessary exposure to imminent danger or hazard, active participation in setting off and/or handling pyrotechnic materials, attempted suicide, self-inflicted injuries
- Participation in hazardous activities such as skydiving, motor sports, judo, karate, taekwondo, boxing, wrestling, bungee jumping, scuba diving, snorkeling, horseback riding, polo, hunting, mountain climbing, rock climbing, hang gliding, spelunking, ballooning, gymnastics, or partaking as a paid professional or semi-professional in any sport
- Government-declared epidemics, complete or partial destruction of hospital by fire, flood, or other perils, earthquake, tsunami, volcanic eruption, acts or order of government, brownouts
- Aviation or aeronautics or sea travel other than as a fare-paying passenger on a licensed aircraft/vessel operated by a recognized airline/operator
- Computer hardware or software affected by date/time based functionality or the use of any date format

ILLNESSES/CONDITIONS:

- Congenital abnormalities such as neonatal hernia, indirect hernia, hemangioma, phimosis, harelip, clubfoot, cerebral palsy, renal diseases such as medullary sponge kidney, pediatric cardiovascular work-up, and the like
- Developmental delay
- Neuro-developmental disorders such as ADHD (Attention Deficit Hyperactive Disorder), Autism, Genetic Disorder which may result to Mental Retardation (e.g. Down Syndrome), and other conditions which may require speech/physical and other related therapies
- Sexually transmitted diseases, AIDS and AIDS-related complications or conditions
- Substance addiction or reaction to the usage of prohibited drugs, alcoholism, alcohol intake, anxiety reaction, psychiatric and psychological illnesses, neurotic and psychiatric behavior disorders, or accidents arising from these conditions
- Guillaine-Barre Syndrome
- PEC during the first twelve (12) months of cover
- Hypersensitivity tests to check for allergies and desensitization
- Any disability which may have affected a Dependent prior to the 30th day after birth
- Pregnancy, complications due to abnormal pregnancies (e.g. ectopic pregnancy, tube pregnancy, h-mole, abruptio placenta, placenta previa), childbirth, miscarriage, abortion
5 - Frequently Asked Questions

How do I know which doctors are affiliated with Intellicare?
You may check the list of Intellicare-affiliated doctors, their schedule, and their contact details in the PROVIDERS page of the Intellicare website, or you may call our Customer Service Specialists through telephone numbers (02) 789-4000 or (02) 902-3400.

Can I get a copy of Intellicare’s list of affiliated doctors?
Intellicare continually updates its list of affiliated doctors, thus it is advisable for you to check the list of Intellicare-affiliated doctors, their schedule, and their contact details in the PROVIDERS page of the Intellicare website, or you may call our Customer Service Specialists through telephone numbers (02) 789-4000 or (02) 902-3400.

Are Intellicare’s Hospital Coordinators/Assistant Coordinators available 24 hours a day? What should I do if they are unavailable?
Intellicare has two to three (2-3) Hospital Coordinators per hospital and will accommodate members for out-patient and non-emergency consultations during their specified clinic hours. For other hospitals that have no Coordinators but have an HMO or Industrial office, you may secure Intellicare Referral Forms from the said office. For medical emergencies, you may proceed directly to the emergency room of the hospital for immediate treatment. However, assessment of whether the case is an emergency case or not will depend on the Emergency Room physician.

If I am in an accredited hospital and want to use the services of my personal doctor who is not affiliated, can I have the medical services reimbursed?
Consultation, treatment, and referral for diagnostic procedures and/or confinement coming from a non-affiliated doctor are non-reimbursable. For you to enjoy the benefits of your health plan, you must avail of your benefits in an Intellicare-accredited hospital or clinic and have your case managed by an Intellicare-affiliated doctor, except during emergency cases.

Can I have my personal doctor/dentist affiliated by Intellicare?
You may write a request for affiliation to Intellicare’s Medical Relations Department or coordinate with your HR Representative to facilitate your request. The doctor/dentist will be asked to submit necessary requirements to Intellicare and will be evaluated by the company’s Medical Relations Department (MRD) if they are qualified to be part of Intellicare’s network. The doctor may only be affiliated if he/she passes Intellicare’s evaluation and if he/she agrees to the payment terms and conditions of the contract.

During confinement, if I want to occupy a room category higher than what is stated in my plan, may I do so?
Yes, you may occupy a room category higher than what is entitled to you. However, during voluntary upgrading (when you choose to occupy a higher room category even if your allowed room is available), you will pay all incremental charges. Due to socialized pricing in hospitals, the higher the room occupied, the higher the cost of services. This includes room rate, professional fees, medicines, medical supplies, hospital procedures, and the like. The same charges may also apply if you are admitted in a hospital that does not provide or does not allow confinement of non-private patients in the room category corresponding to your plan. The Intellicare Patient Relations Officer (PRO) shall explain and remind you to pay these charges prior to hospital discharge.
What do I do if, during the time of my admission, all the rooms under my room category are occupied?

In this case, you may choose one of the following options:
- Occupy a lower room category and pay no incremental charges.
- Occupy an available room one category higher than what is entitled and pay only the room and board excess. You must transfer to your designated room category once the room becomes available; otherwise, you will pay all incremental charges from the first day of confinement.
- You may transfer to another accredited hospital if it is a non-emergency case.

Note: Provision on involuntary upgrading of room category may vary according to the plan of the member.

What if my illness/condition developed certain complications – will these illnesses have a separate Maximum Benefit Limit?

Any and all illnesses proven to be related to or is a complication of a certain illness shall share the same Maximum Benefit Limit (MBL).

Who is responsible for the filing of my Philhealth forms with the hospital? What happens if I fail to file?

It is the member’s responsibility to file the Philhealth forms. If you fail to file upon hospital discharge, you will pay the amount corresponding to your Philhealth benefit and apply for reimbursement directly from the Philhealth Office afterwards. You may coordinate with your company’s HR Representative during your confinement period to secure a signed Philhealth Claim Form 1, Philhealth contributions and Member’s Data Record (MDR) as well as a Philhealth Claim Form 2 to be signed by your attending physician prior to hospital discharge. Intellicare Patient Relation Officers (PROs) will provide assistance in reminding you to submit the said forms. They, however, will not be directly responsible for the actual filing. In the case of a non-Philhealth member, member must pay the Philhealth portion of the hospital bill prior to hospital discharge.

Do I get 100% reimbursement for my emergency confinement in a non-accredited hospital?

If you were treated in a non-accredited hospital for a medical emergency, Intellicare will reimburse your medical expenses based on the Relative Value Scale (RVS) or the rates Intellicare has agreed on with its accredited providers. The amount will not exactly be the same as the amount you paid in the non-accredited facility. The same computation applies to emergency confinement cases in non-service areas or foreign countries (please refer to your Emergency Care benefits for the percentage and maximum amount of reimbursement).

What is the turn-around time for the submission and processing of reimbursement?

Submission of the duly accomplished Intellicare Reimbursement Form and required attachments is within 30 days from the date of hospital discharge or treatment. Intellicare will process the request within 30 days upon receipt of the complete documents.

What should I do if I am asked to pay for medical services which I know are covered?

You may pay for the cost of the procedure first then file for reimbursement later on. Reimbursement shall be based on the Relative Value Scale (RVS) or pre-agreed rates for laboratory and diagnostic examinations (e.g. CT scan, MRI). You may also call Intellicare’s Customer Service Specialists to verify at (02) 789-4000 or (02) 902-3400.
What if the hospital has a cash basis policy for some of the procedures even if they are recommended or performed by an Intellicare-affiliated physician?
You may pay for the cost of the procedure first then file for reimbursement later on. Reimbursement shall be based on the Relative Value Scale (RVS) or pre-agreed rates for laboratory and diagnostic examinations (e.g. CT scan, MRI). If you do not wish to pay for the amount being asked for, you may transfer to another Intellicare-accredited facility that does not have a “cash basis only” policy. You may also call Intellicare’s Customer Service for assistance at (02) 789-4000 or (02) 902-3400.

Why do I need to pay for the professional fees of affiliated Neurologists?
The professional fees of Neurologists at the moment are on a “cash basis” policy for all HMO members. This policy is in accordance with the guidelines set by the Philippine Neurological Association. You may pay for the cost of professional fees first then file for reimbursement based on Intellicare’s Relative Value Scale (RVS). For any recommended procedures, Intellicare will cover the member immediately according to the plan benefit.

What if there is no Intellicare-affiliated doctor available in any accredited hospital for the field of specialization I need or I am referred to?
Intellicare will exert all its effort to negotiate for the Intellicare rate to be charged once the member is referred to a non-affiliated specialist. If the physician does not agree to the rate, you will be asked to pay the cost of their professional fee first then file for reimbursement based on the Intellicare Relative Value Scale (RVS).

What if I get into a vehicular accident – will Intellicare cover the cost of my medical expenses?
In this case, you need to submit a police report and other pertinent documents for any injuries sustained in vehicular accidents and other medico-legal cases (e.g. shooting, stabbing, mauling) subject for evaluation. Intellicare will not cover injuries resulting from causes under the general exclusions and limitations.

If I resign from my company, can I still use my Intellicare Card?
The member’s healthcare benefit is co-terminus with their stay with the company. You should surrender your card prior to resignation as this is a requirement of the clearance process. Use of the card after separation from the company is an illegal transaction and the member will be billed for any medical availment incurred after resignation/separation from the company.

If I lose my card, what should I do?
You should notify your HR Representative and call Intellicare’s Customer Service at (02) 789-4000 or (02) 902-3400 within 24 hours upon discovery of the loss. You need to submit an Affidavit of Loss to Intellicare and will be charged Php 100 for the replacement of the card. If you need medical care while your new card is being processed, you may contact Intellicare’s Customer Service for endorsement to the medical facility where the procedure or consultation/treatment will be conducted.

What should I do if I want to give feedback or report any concerns?
You may e-mail Intellicare at amd@info.intellicare.net.ph or make an incident report and submit this to your HR Representative. For urgent matters, you may call Intellicare’s Customer Service at (02) 789-4000 or (02) 902-3400 for immediate assistance. Please give all pertinent information to the Customer Service Specialist for Intellicare to be able to address your concern/s as quickly as possible.
# CUSTOMER SERVICE NUMBERS

## REGIONAL OFFICE

### CEBU
Central & Eastern Visayas | Northern Mindanao  
Room 601 6th Floor Metrobank  
Plaza Building, Osmeña Boulevard, Cebu City  
Tel. # (032) 253-9074 | (032) 254-0156 | (032) 255-7496 | (032) 254-5785  
Mobile # (0920) 907-3708 - Smart | (0922) 837-7094 - Sun  
Fax # (049) 545-4327 | (049) 545-6462  

### CALAMBA
2nd Floor KIM KAT Building, Old National Highway, Barangay Parian, Calamba City, Laguna  
Tel. # (049) 545-5081 | (049) 545-5183  
(049) 545-7958 | (049) 502-2007 | (049) 502-8063 - for Sales Dept.  
Mobile # (0917) 522-3124 - Globe | (0932) 860-2533 - Sun | (0917) 529-1079 - Globe  
Fax # (049) 545-4327 | (049) 545-6462

### DAVAO - Southern Mindanao  
Suite B205-B206,  
2nd Floor Plaza de Luisa Building, Ramon Magsaysay Avenue, Davao City  
Tel. # (082) 222-3577 | (082) 222-3578 | (082) 222-3579 | (082) 222-3580  
Telefax: (082) 227-4621  
Mobile # (0920) 951-9523 - Smart | (0922) 889-3203 | (0922) 891-7837 - Sun

### DAVAO - Western Visayas  
Doors 3-4 RL Jocson Building, BS Aquino Drive, Bacolod City  
Tel. # (034) 707-2047 | (034) 707-2048 | (034) 707-2049 | (034) 433-1984 | (034) 709-9869 | (034) 434-0514  
Telefax # (034) 707-2038  
Mobile # (0920) 926-8649 - Smart | (0943) 702-7101 - Sun

### ILOILO CITY
Ground Floor Viosolis Arcade, M.H. Del Pilar St., Molo, Iloilo City  
Tel. # (033) 509-9440 | (033) 508-0014  
Mobile # (0920) 917-4128 - Smart

### ILOILO CITY
Ground Floor Viosolis Arcade, M.H. Del Pilar St., Molo, Iloilo City  
Tel. # (033) 509-9440 | (033) 508-0014  
Mobile # (0920) 917-4128 - Smart

### GENERAL SANTOS CITY
Room 303 GSDH Medical Suites, General Santos Doctors Hospital, Natl. Highway, General Santos City  
Tel. # (083) 305-0215 | (083) 305-0216  
Telefax (083) 552-2351  
Mobile # (0920) 951-9524 - Smart | (0922) 889-3211 - Sun | (0917) 870-4387 - Globe

### KIDAPAWAN CITY
2nd Floor, KHAS Realty Building, Quezon Blvd., cor. Datu Ingalak Streets, Kidapawan City  
Telefax # (064) 577-1715  
Mobile # (0920) 945-6734 - Smart | (0922) 889-3204 - Sun | (0917) 870-4396 - Globe

### TACLOBAN CITY
C/o Cebu Reg. Office  
Tel. # (0933) 151-3935 - Sun

### ORMOC CITY
Mobile: (0936) 415-0383 - Globe

### SAN CARLOS CITY
Mobile: (0925) 500-5605 - Sun

### TAGBILARAN CITY
Mobile: (0921) 231-1336 - Smart

## BRANCH/ SATELLITE OFFICE

### CAGAYAN DE ORO CITY
Rm. 101 Ground Floor, P & J Lim Building, Tiano-Kalambaguan Sts., Cagayan de Oro City  
Tel. # (088) 728-327 | (088) 856-7107  
Mobile # (0920) 951-9526 - Smart | (0917) 592-8346 - Globe

### LEGASPI CITY
Ground Floor, E. Aquende Building, Mabini Street, Legaspi City  
Tel. # (052) 480-4040

### DUMAGUETE CITY
3rd Floor Portal West Bldg., Silliman corner Hibbard Avenues., Dumaguete City  
Tel.# (035) 422-7842

### ILOILO CITY
Ground Floor Viosolis Arcade, M.H. Del Pilar St., Molo, Iloilo City  
Tel. # (033) 509-9440 | (033) 508-0014  
Mobile # (0920) 917-4128 - Smart

### ZAMBOANGA CITY
Brent Hospital and Colleges, Inc., Doctor’s Clinic, R.T. Lim Blvd., Zamboanga City  
Tel. # (062) 991-0478  
Mobile # (0917) 548-7612 - Globe

### GENERAL SANTOS CITY
Room 303 GSDH Medical Suites, General Santos Doctors Hospital, Natl. Highway, General Santos City  
Tel. # (083) 305-0215 | (083) 305-0216  
Telefax (083) 552-2351  
Mobile # (0920) 951-9524 - Smart | (0922) 889-3211 - Sun | (0917) 870-4387 - Globe

### KIDAPAWAN CITY
2nd Floor, KHAS Realty Building, Quezon Blvd., cor. Datu Ingalak Streets, Kidapawan City  
Telefax # (064) 577-1715  
Mobile # (0920) 945-6734 - Smart | (0922) 889-3204 - Sun | (0917) 870-4396 - Globe

### Mobile Patient Relations Officers / Representatives

<table>
<thead>
<tr>
<th>CITY</th>
<th>MOBILE</th>
<th>EMAIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>ROXAS CITY</td>
<td>(0933) 151-3935</td>
<td><a href="mailto:amd@info.intellicare.net.ph">amd@info.intellicare.net.ph</a></td>
</tr>
<tr>
<td>SAN CARLOS CITY</td>
<td>(0925) 500-5605</td>
<td><a href="mailto:amd@info.intellicare.net.ph">amd@info.intellicare.net.ph</a></td>
</tr>
<tr>
<td>TAGBILARAN CITY</td>
<td>(0921) 231-1336</td>
<td><a href="mailto:amd@info.intellicare.net.ph">amd@info.intellicare.net.ph</a></td>
</tr>
</tbody>
</table>

24/7 Customer Service Numbers: (02) 902-3400 | (02) 789-4000  
For Call: (0920) 970-4724 - Smart | (0917) 840-4894 - Globe  
For Text: (035) 422-7842 | (035) 422-7843 - Smart  
Toll-free Number Outside Metro Manila: 1-800-10-789-4000  
For E-mail: amd@info.intellicare.net.ph  
Visit our website at intellicare.com.ph

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INTELLICARE PARTNER CLINICS

Aventus Medical Care, Inc. - Makati
6th Floor Filomena Bldg, 104 Amorsolo St. Legaspi Village, Makati City
Clinic Hours: M-Sat | 7:00am-5:00pm
Tel. # (02) 519-6787 | (02) 817-1464 | (02) 261-2886 | Fax (02) 817-2715
7:00 AM - Laboratory is open | 8:00 AM - Consultations | 4:00 PM - Cut-off for APE and PPE

Aventus Medical Care, Inc. - Alabang
2nd Floor Sycamore ARCS 1 Building, Buencamino St., Alabang Zapote Road, Alabang Muntinlupa City
Clinic Hours: M-Sat | 7:00am-5:00pm
Tel. # (02) 556-3598 | (02) 556-3596 | Telefax (02) 556-3594

Aventus Medical Care, Inc. - Ortigas
Unit 16, 18, 19, 20, Ground Floor AIC Grande Tower, Sapphire Road, cor. Garnet Street Ortigas Center, Pasig City
Clinic Hours: M-Sat | 7:00am-5:00pm
Tel. # (02) 584-2430 | (02) 570-9967 | Telefax (02) 584-1013

Aventus Medical Care, Inc. - Quezon City
2nd Floor Philippine College of Surgeons (PCS) Building, 992 North Edsa, Quezon City
Clinic Hours: M-Sat | 7:00am-5:00pm
Tel # (02) 352-4676 | (02) 352-4677 | Fax (02) 352-4675

Aventus Medical Care, Inc. - Calamba I (KIMKAT)
G/F Unit C KIM-KAT Bldg., Old National Highway, Brgy. Parian, Calamba, Laguna
Clinic Hours: M-Sat | 7:00am-5:00pm
Tel. # (049) 545-0076 | 545-0074

Aventus Medical Care, Inc. - Calamba II (SQA)
Unit 201-203, SQA Corporate Center, National Highway Crossing, Calamba, Laguna
Clinic Hours: M-Sat | 7:00am-5:00pm
Tel. # (049) 306-0397 | (049) 508-1806

Aventus Medical Care, Inc. - Sta. Rosa
2nd Floor Carvajal Building 2 National Highway, Balibago, Sta. Rosa, Laguna
Clinic Hours: M-Sat | 7:00am-5:00pm
Tel. # (049) 302-5046 | (049) 530-0484 | Telefax (02) 519-4337

Aventus Medical Care, Inc. - Manila
5th Floor. Times Plaza Building, Taft Avenue corner United Nations Avenue, Ermita, Manila
Clinic Hours: M-Sat | 7:00am-5:00pm
Tel. # (02) 353-6808 | (02) 353-6807 | (02) 518-0056 | Fax (02) 559-7453

Aventus Medical Care, Inc. - Cebu
Unit 203, 2nd Floor, TGU Tower, Phase 1, Asiatown IT Park, Apas, Cebu City
Clinic Hours: M-Sat | 7:00am-12:00mn
Tel. # (032) 268-8072 | (032) 268-8902 | Telefax (032) 268-9236

Please call Clinic prior to visit for the doctors' schedules and list of diagnostic services available.