

[PHILHEALTH CIRCULAR NO. 01, 2008, January 22, 2008]

**ADDENDUM TO PHILHEALTH CIRCULAR NO. 15, S. 2007
(UNCLAIMED PHILHEALTH REIMBURSEMENTS TO MEMBERS AND
THE CONSEQUENTIAL PENALTIES IN CASE OF VIOLATION)**

To properly define the guidelines on how to return to the Corporation the unclaimed refund, PhilHealth Circular No. 15, s. 2007, specifically paragraph #2, is hereby appended to read as follows:

xxx all accredited health care providers who have already been reimbursed in full of the deductions made in the patient-member's accounts are directed to return to the members the difference thereof within thirty (30) calendar days from the receipt of such refund from PhilHealth. However, in case the accredited health care provider fails to return the difference or the total benefits received from PhilHealth to the member, the accredited health care provider shall return said unclaimed PhilHealth refunds to the Corporation within thirty (30) days to be reckoned from the date of expiry of the first 30 days grace period, without need of demand. In addition, a duly accomplished Financial Report on Unclaimed Refunds (refer to Annex A* as attached) shall also be required. The Financial Report shall be used for purposes of reconciliation and accounting of records.

This ORDER shall take effect immediately.

Adopted: 22 Jan. 2008

(SGD.) LORNA O. FAJARDO
Acting President and CEO

* Text Available at Office of the National Administrative Register, U.P. Law Complex, Diliman, Quezon City.



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