

‘SARS BENEFITS’ GUIDELINES

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Pursuant to PhilHealth Board Resolutions No. 563 and 564 providing special benefit packages for health workers and all members who contract Severe Acute Respiratory Syndrome (SARS), the following guidelines for the 'SARS benefits' are hereby set:

A. COVERAGE

The PhilHealth SARS benefits may be availed by qualified PhilHealth members and their dependents provided they are DOH-identified probable SARS cases admitted in a Department of Health (DOH) - designated hospital for SARS cases.

B. BENEFITS

Members and their qualified dependents, except health workers for DOH-identified probable cases of SARS in DOH-designated SARS health care institutions, shall be paid the maximum amount of P50,000 per case.

This shall cover the payment of professional health services; drugs and medicines; radiographics services, laboratory examination, supplies and transfer services from referring hospital to DOH-designated hospital for SARS; use of the operating room complex; and all other medically necessary care. There will be no specific benefit limits except for the room rate and professional fees benefit limits. However, the 45 day room and board allowance shall apply.

Health workers, who are at the forefront and are at a peculiarly high health risk in the national efforts to control SARS, shall be paid the maximum amount of P100,000 per case provided that they have contacted the SARS-causing organism as a result of having cared for a patient suspected of having SARS in a DOH-designated SARS hospital.

Similarly, there will be no specific benefit limits except for the room rate and professional fees benefit limits and the application of the 45 day room and board allowance.

ELIGIBILITY REQUIREMENTS

Current eligibility requirements apply for the availment of this benefit. They should have at least paid three months of premium in the last six months prior to availment.

CLAIMS PROCESSING GUIDELINES

As a special benefit, the 'SARS benefits' shall be paid directly to the DOH-designated hospital for SARS cases with no direct filing of members allowed.

The ICD 10 Code for Probable SARS ICD 10 shall be: "J12.8, B97.2"

The documentary requirements for claims processing are:

- PhilHealth Claim Form 1
- PhilHealth Claim Form 2 (itemization of parts III and IV is not required)
- Hospital documentation from DOH that it is a designated SARS hospital and that the patient is a DOH - identified probable SARS case
- In cases of claims by health workers, a certification signed by the Hospital Chief/Administrator that the patient is a health care worker who contacted the disease in the course of the performance of duties in a DOH-designated hospital for SARS or any other document attesting to that fact signed by an authorized officer of the DOH.

EFFECTIVITY

As a special benefit, the 'SARS benefits' will cover all eligible cases discharged from designated SARS hospitals starting May 8, 2003.

Adopted: 01 Aug. 2003

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