

**What is MEDICard?**

**MEDICard is a Health Maintenance Organization(HMO) that provides a Comprehensive Health Care Coverage for its members with the use of accredited hospitals and doctors nationwide. The benefits covered are as follows:**

- a) Hospitalization Services**
- b) Out-Patient Services**
- c) Preventive Health Care Services**
- d) Emergency Care Services**
- e) Members' Financial Assistance**

**WHO ARE ELIGIBLE AS MEMBERS?**

**a. DEPENDENTS**

**For Married Employees**

- 1. The legal spouse, 18 up to 70 years of age of the principal payor.**
- 2. Legitimate and/or legally adopted children above 90 days and up to 21 years of age and living under the same roof as the principal payor.**

**For Single Employees**

- 1. Parents up to age 70, unemployed and dependent on the principal payor.**
- 2. Brothers and sisters above 90 days up to 21 years of age whom are not gainfully employed and are living under the same roof as the principal payor.**

**The choice of enrolling dependents must follow a hierarchy. This means that the spouse first must be enrolled followed by the eldest child, second child and so on for married personnel. For single personnel, the parents must be enrolled first followed by eldest brother/sister and so on.**

**SCHEDULE OF BENEFITS**

**● HOSPITALIZATION/CONFINEMENT BENEFIT**

**Members may avail of services in any of the 300 accredited hospitals and more than 4,000 medical professionals and specialists accredited by MEDICard. The member must be admitted under the services of the primary physician in the accredited hospital to avail of the following benefits:**

- No deposit upon admission**
- Room and board according to type of enrolment**
- X-ray and laboratory examinations**
- Services of MEDICard specialist like anaesthesiologists, internists, surgeons, etc.**
- Transfusion of fresh whole blood, and intravenous fluids**
- ICU confinements, chemotherapy, radiotherapy and dialysis are covered**

subject to the maximum limits and pre-existing conditions coverage

- Laparoscopic surgery and lithotripsy are covered up to P 20,000 each per member per year subject to the pre-existing conditions coverage\*
- Complex diagnostic procedures such as, but not limited to MRI, CT scan, and ultrasound, are covered up to P 5,000 each per member per year subject to the pre-existing conditions coverage\*
- All other items related to the management of the case
- Assistance in administrative requirements through the liaison officers

\* Inclusive of room and board, operating room charges, professional fees and other incidental expenses relative to the procedure.

#### **B.OUT PATIENT SERVICES**

- Referral to specialists
- Regular consultations & treatment (except prescribed medicines)
- Treatment of minor injuries and surgery not requiring confinement
- X-ray and laboratory examinations
- Eye. Ear, Nose & Throat treatment
- Cataract extraction (except cost of lens) is covered up to P 5,000.00.
- First does of anti-rabies / anti-venom / anti-tetanus is covered up to P 2,000.00.

The member can go directly to the primary physician of any accredited hospital or at the Head Office clinic for out-patient consultations. The primary physician will request for laboratory or diagnostic examinations or refer the member to a specialist. The member may avail of services from any accredited hospital of his choice.

#### **C.PREVENTIVE HEALTH CARE SERVICES**

- Annual Physical Examination (APE), to include:
  - Complete Blood Count
  - Urinalysis
  - Fecalalysis (stool exam)
  - Chest X-Ray
  - Electrocardiogram (adults age 40 and above, or if prescribed)
  - Pap Smear (women age 40 and above, or if prescribed)
- Management of Health Problems
- Routine Immunization (except administered medicine)
- Counselling on Health habits, diets and Family Planning
- Record keeping of medical history

APE may be conducted at the MEDICard head office clinic located at the 9<sup>th</sup> floor, Sagittarius Bldg., H.V. dela Costa St., Salcedo Village, Makati City.

#### **D. EMERGENCY CARE SERVICES**

##### **1. IN ACCREDITED HOSPITALS**

When a member in an emergency case ends up at the emergency room of an accredited hospital or clinic, the following are provided free of charge:

- Doctor's services
- Medicines used during treatment or for immediate relief
- Oxygen and intravenous fluids
- Dressings, casts and sutures
- Laboratory, x-ray and other diagnostic examinations directly related to the emergency management of the patient

##### **2. IN NON-ACCREDITED HOSPITALS**

MEDICard agrees to reimburse 80% of the total hospital bills and doctor's professional fees based on MEDICard relative values up to P 5,000.

#### **E. MEMBERS' FINANCIAL ASSISTANCE (For principal members)**

Aside from the standard benefits to which a MEDICard member is entitled to, MEDICard PHILS., INC., also hereby agrees to give/provide the heirs and/or assigns of any member who is enrolled in this health care program in the event of death or injuries through natural causes or accidental means, the following amounts by way of financial assistance:

#### **SCHEDULE OF FINANCIAL ASSISTANCE**

<b>TYPE</b>	<b>RATE OF COVERAGE</b>
Natural Death	P 10,000
Accidental Death	P 20,000
Loss of sight, or two limbs	P 10,000
Loss of sight of one eye, one hand or foot	P 5,000

Provide, that the death or injury results from causes that are covered and are not under the exclusions or uncovered pre-existing conditions as stated in the MEDICard Membership Contract.

Also, total annual premium for the contract year should have been paid at the time of availment. Otherwise, all remaining unpaid premiums will be deducted from the amount of assistance.

## **OPTIONAL BENEFIT-DENTAL CARE SERVICES**

Members may avail of the following dental care services from any of the accredited dental clinics’.

- Annual prophylaxis (after having paid the annual premium)
- Consultations and oral examinations
- Simple tooth extractions
- Temporary fillings
- Gum treatment and adjustment of dentures
- Recementation of loose jackets, crowns, in-lays and on-lays
- Treatment of mouth lesions, wounds and burns

Additional Annual Fee: P 300.00/head

## **DREADED DISEASES**

Dreaded diseases are potentially or actually life-threatening conditions or illnesses, which may require prolonged or repeated hospitalization or intensive care management. MEDICard shall pay for hospitalization services up to the maximum limit subject to the pre-existing conditions coverage.

The following are considered dreaded disease:

- a. Cerebrovascular Accident (stroke)
- b. Central nervous system lesions  
(Poliomyelitis/Meningitis/Encephalitis/Neurosurgical conditions)
- c. Cardiovascular Disease(Coronary/Valvular/Hypertensive Heart Disease/Cardiomyopathy)
- d. Chronic Obstructive Pulmonary Disease (Chronic Bronchitis/Emphysema), Restrictive lung diseaseLiver Parenchymal Disease [Cirrhosis, Hepatitis (except type A), New growth]
- e. Chronic Kidney/Urological disease (Urolithiasis, Obstructive Uropathies, etc.)
- f. Chronic Gastrointestinal Tract Disease requiring bowel resection and /or anastomosis
- g. Collagen diseases (Rheumatoid Arthritis, Systemic Lupus Erythematosus)
- h. Diabetes Mellitus and its complications
- i. Malignancies and Blood Dyscrasias (Cancer, Leukemia, Idiopathic Thrombocytopenic Purpura)

- j. Injuries from accidents or assaults, frustrated homicide or frustrated murder
- k. Complications of an apparent ordinary illness including MODS and SIRS (e.g. sepsis due to pneumonia, typhoid ileitis, cerebral malaria, etc.)
- l. Single or multiple organ dysfunction and failure (MODS and MOF)
- m. Conditions that may require dialysis
- n. Chronic pain syndrome (greater than six weeks)
- o. Any illness other than the above which would require Intensive Care Unit confinement
- p. Et cetera

#### **PRE-EXISTING CONDITIONS**

Pre-existing condition is an illness, injury or any adverse medical case present prior to and within the first twelve months from effectivity of coverage.

Pre-existing conditions shall be covered up to P 5,000.00 per illness per member per year.

The following are automatically considered as pre-existing conditions if consultation or treatment is sought within the first twelve(12) months of coverage:

- a. Dreaded Diseases listed above except for letters k & l
- b. Hypertension
- c. Goiter (Hypo/Hyperthyroidism)
- d. Cataracts/Glaucoma
- e. ENT conditions requiring surgery
- f. Bronchial Asthma
- g. Tuberculosis
- h. Chronic Cholecystitis / Cholelithiasis (gall bladder stones)
- i. Acquired Hernias
- j. Prostate disorders
- k. Hemorrhoids and Anal Fistulae
- l. Benign Tumors
- m. Uterine Myoma, Ovarian cysts, Endometriosis
- n. Buergher's Disease
- o. Varicose Veins

- p. Arthritis
- q. Migraine headache
- r. Gastritis/duodenal or gastric ulcers

#### ADDITIONAL BENEFITS

1. Complex diagnostic examinations are covered up to P5,000 each/year subject to coverage of pre-existing conditions.
2. An Emergency Assistance Response Service (E.A.R.S.) that operates on a 24-hour/day 365-day/year basis to respond to inquiries. Just dial – Tel. Nos. 867-2020/841-8080
3. Direct access to a network of 300 accredited hospitals nationwide and five (4) satellite medical clinics and one Head Office Clinic.
4. Ambulance service throughout the country on a reimbursement basis up to P1,500.00/ member/ year.