

MEMBERSHIP UPDATES

Registration of Employers

Employers need not present documents when they register via the **Philippine Business Registry (PBR)**.



Registration of Employers

Should they be unable to register via the PBR, the Corporation shall require the following documentary requirements:

1. Properly accomplished **ER1**
2. For single proprietorships – Department of Trade and Industry (DTI) registration
3. For partnerships and corporations – Security and Exchange Commission (SEC) registration
4. For foundations and other non-profit organizations – SEC registration
5. For cooperatives – Cooperative Development Authority (CDA) registration
6. For backyard industries / ventures and micro-business enterprises – Barangay Certification and/or Mayor's Permit



Registration of Employees

Documentary requirements needed in registering an employee:

1. Properly accomplished **ER2**
2. Properly accomplished PhilHealth Membership Registration Form (PMRF).

Note: PMRF is sufficient in declaring member's dependent/s*

*If warranted, the Corporation may require submission of supporting documents.



Qualified Dependents

1. Spouse
2. Children below 21 years old
3. Children with congenital conditions regardless of age
4. Parents 60 years old and above
5. Foster child
6. Parents with permanent disability that render them totally dependent on the member for subsistence

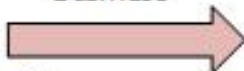


PHILHEALTH CIRCULAR NO. 010 – 2015

Re: “SEC-IBR Post-Registration Guidelines
in PhilHealth



Registration of Business



Release of SEC,
PhilHealth, Pag-IBIG &
SSS Numbers



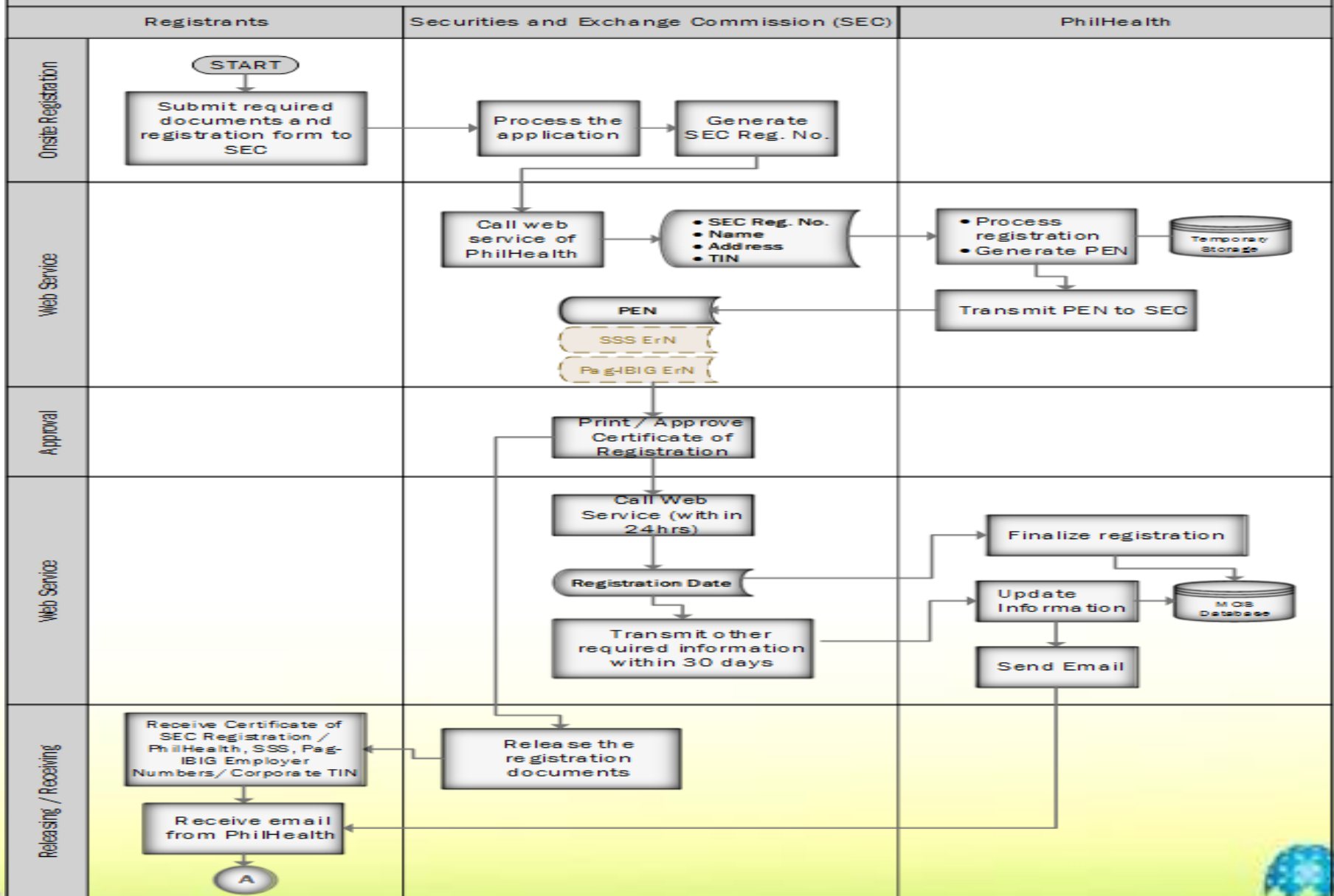
SEC INTEGRATED BUSINESS REGISTRATION SYSTEM

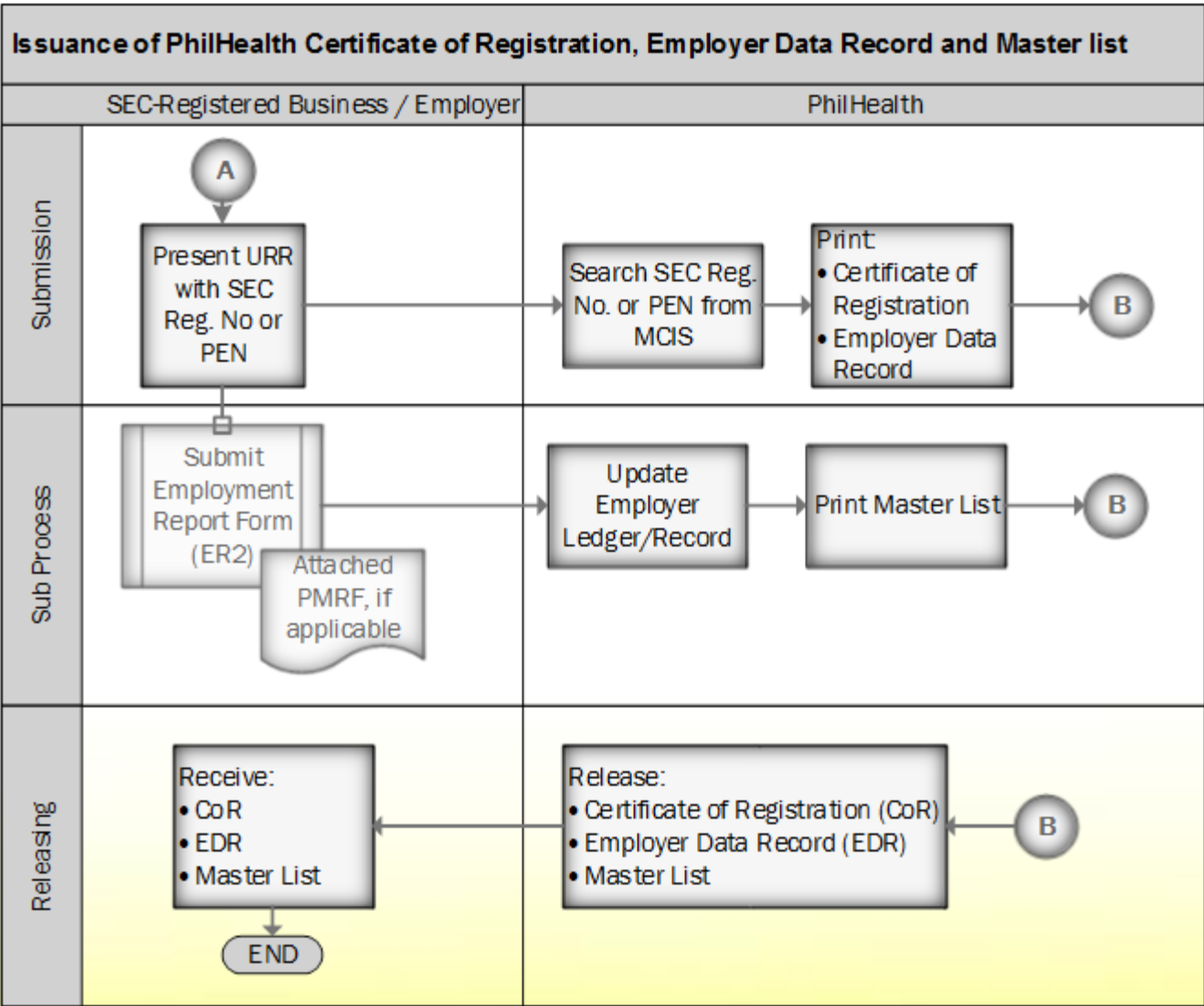
SEC transmit info for generation of ErN

Pag-IBIG, PhilHealth and SSS transmit to SEC the generated ErN



SEC - INTEGRATED BUSINESS REGISTRATION







UNIFIED BUSINESS REGISTRATION ~~FORM~~ FOR SEC-REGISTERED COMPANIES

COMPANY NAME

SEC REGISTRATION NUMBER

TAXPAYER IDENTIFICATION NUMBER (TIN)

DOING BUSINESS AS (list down trade names)

PAG-IBIG EMPLOYER NUMBER (Eyer ID)

PHILHEALTH EMPLOYER NUMBER (PEN)

PRINCIPAL ADDRESS

SSS EMPLOYER NUMBER (ER No.)

PHONE NO.

FAX NO.

MOBILE NO.

E-MAIL ADDRESS

AUTHORIZED REPRESENTATIVE (to be filled up by company - for presentation to social agencies)





Republic of the Philippines
PHILIPPINE HEALTH INSURANCE CORPORATION
PSDC Bldg., P. Burgos cor. Alegre St., Batangas City
(043) 723 8822 Loc. 201 (043) 723 8820



April 8, 2015

AGENCY HEAD
EMPLOYER NAME
123 Employer St.
AGONCILLO, BATANGAS
Email : jitlm@yahoo.com

Greetings from PhilHealth!

By registering your business through the Securities and Exchange Commission - Integrated Business Registration system, we are pleased to inform you that we have automatically generated and assigned your company with its unique and permanent PhilHealth Employer Number (PEN) as follows:

PEN : 009000002682

Your PEN shall be used in all your transactions with PhilHealth such as in reporting newly-hired and/or separated employees, in paying your employees' premium contributions, in certifying their qualifying contributions in aid of benefit availment, among others.

Upon receipt of this letter, we request you to please visit our nearest office to secure your **PhilHealth Certificate of Registration and Employer Data Record**. You shall also be required to submit within thirty (30) days from their date of hiring/employment a duly accomplished Employment Report Form (ER2) containing the complete list of your employees.

If your employees are not yet registered with PhilHealth, kindly ask them to accomplish the PhilHealth Member Registration Form (in duplicate) and submit these to us together with the ER2. These forms are downloadable by accessing the following links in our website:

- ER2 - <http://www.philhealth.gov.ph/downloads/employer/er2.pdf>
- PMRF - http://www.philhealth.gov.ph/downloads/membership/pmrf_revised.pdf

To conveniently report your premium remittances, we request you to please register with our Electronic Premium Remittance Report System (EPRS) at <https://epoaf.philhealth.gov.ph/employer/> .

We are looking forward to this meaningful partnership with you in ensuring the PhilHealth coverage of your employees. For more information, please call 02 441-7442, email us at actioncenter@philhealth.gov.ph or coordinate with the nearest PhilHealth office.

Very truly yours,

PAOLO JOHANN C. PEREZ
Regional Vice President

This is system generated. Signature is not required.



PC 05, s-2012

**Online Membership
Registration to National
Health Insurance Program
(NHIP)**

Who can register online?

Individually Paying Members

Overseas Filipino Worker

Employed Members

Lifetime Members

How to register online?



Go to www.philhealth.gov.ph and click online services

www.philhealth.gov.ph



Google™ Custom Search Search

[home](#) | [contact us](#) | [sitemap](#) | [disclaimer](#)

[about us](#) | [members](#) | [corporate partners](#) | [online services](#) | [downloads](#)

FIND OUT HOW!
PHILIPPINES
MAKES DOING BUSINESS
EASIER



Benefits

This section features a variety of comprehensive health care services -from basic primary care to catastrophic packages to provide members and their families with

[Circulars](#)

[News](#) • [Advisories](#)

[ITB](#) • [Job Vacancies](#)

[Joint Issuances](#)

member inquiry

PIN

Password

Login

[Register](#) | [Forgot Password?](#)

search case rates

Click Electronic Registration



Electronic Registration

[Register](#)

This facility enables individuals to register online



HCI Portal

[Login](#) | [How to Register](#)

Check membership status of Sponsored Members under the NHTS-PR during benefits availability.



Electronic Premium Reporting System

[Login](#) | [ePOAF](#)

Enables employers to post payments of their employees on real time.



Electronic Group Enrollment System

[Login](#)

Facilitates registration, billing and query of Organized Groups.



Electronic Payment Facilities

[View Facilities](#)

Different facilities for employers transacting with banks.



PhilHealth GIS

[Get Started](#)

A facility for viewing the locations of health facilities and visualization of various corporate data using maps.

Click Proceed

Welcome to the PhilHealth Electronic Registration System! This Online facility is offered to the public initially for the individual Registration of members in the formal and informal sector. This is considered as Phase I component of the Electronic Registration and Amendment System (ERAS).

Individuals belonging to the following category may use the system for registration:

- Employed Members
- Self-employed
- Overseas Filipino Worker
- Retirees in the Government and Private Sector

PROCEED

Check the box and click Accept

Terms and Conditions

How to use PhilHealth's Electronic Registration and Amendment System (eRAS)

1. Information marked with asterisk (*) are mandatory and you will not be able to continue with the registration process unless the required information are properly filled-out.
2. Click the [Submit Registration] button to submit the registration application. An email will be sent to inform you of the next steps to take for the completion of the registration process.
3. You may print the email that you will receive in your inbox or write down the transaction number that will be reflected in the email. The transaction number will be used as reference to your application.

I agree to the conditions stated above and will comply to submit the required information and supporting documents to complete the registration.

Accept

Fill out the form

Personal Information

* Last Name	DELA CRUZ
* First Name	JUAN
Middle Name	
Name Suffix	JR (e.g. JR, SR, III)
* Sex	MALE ▼
* Civil Status	SINGLE ▼
Maiden Middle Name	
* Birth Date	JANUARY ▼ 01 ▼ 1990 ▼
TIN	
* Nationality	FILIPINO

Contact Details

Telephone No.

Cellphone No.

* Email Address

juandelacruzjr1990@yahoo.com

* Re-type Email Address

juandelacruzjr1990@yahoo.com

Address

Unit/Room No., Floor

Building Name

House/Bldg No.

12345

Street

MABINI ST

Subdivision/Village

RIZAL VILLAGE

* Province

PAMPANGA



* City/Municipality

CITY OF SAN FERNANDO



* Barangay

SAN AGUSTIN



Zipcode

2000



* Birth Country

PHILIPPINES



* Province

PAMPANGA



Dependents Information

Relationship	<input type="text"/>
PIN(if applicable)	<input type="text"/>
Last Name	<input type="text"/>
First Name	<input type="text"/>
Middle Name	<input type="text"/>
Name Suffix	<input type="text"/>
Civil Status	<input type="text"/>
Birth Date	<input type="text" value="Month"/> <input type="text" value="Day"/> <input type="text" value="Year"/>
With Disability	<input type="text" value="NONE"/>

Add Beneficiary

CANCEL

Membership Category Information

* Member Category	GOVERNMENT	▼				
Member Type		▼				
PEN	007000002913					
Employer Name	PHIIPPINE HEALTH INSURANCE CORP					
Employer Address	SAN AGUSTIN CITY OF SAN FERNANDO					
Date Hired	JANUARY	▼ 01	▼ 2015	▼		
Family Income		▼				
Profession/Occupation		▼				
Profession Description						
Country Based		▼				
Foreign Address						
Contract Duration From	Month	▼	Day	▼	Year	▼
Contract Duration To	Month	▼	Day	▼	Year	▼
Retirement Date	Month	▼	Day	▼	Year	▼

Upload Documents (OPTIONAL)

Note:

Uploaded documents must be:

- File types: jpeg/jpg, png, gif or pdf.
- File size: maximum of 2MB per document
- Readable scanned copy

Uploaded documents MUST be:

- ✚ File type - .jpeg/.jpg .png .gif or pdf
- ✚ File size : maximum of 2MB per document
- ✚ Readable scanned copy

Under the penalty of law, I attest that the information I provided in this Form are true and accurate to the best of my knowledge.

Submit Registration

Please attached scanned copy of duly accomplished ER2 with full name, position & signature of authorized signatory.

			Status
Member /Registrant	Birth Certificate	Choose File bc.jpg	
Member /Registrant	Report of Employee Members (ER2) /Certificate of Employment	Choose File No file chosen	

CAPTCHA
5 9 5 1 0 3 1 9
59510319
Refresh Captcha

Under the penalty of law, I attest that the information I provided in this Form are true and accurate to the best of my knowledge.

Submit Registration

Member information was successfully saved.

Please check your email for confirmation.

Note: If you do not receive the confirmation message within a few minutes of registration, please check your Spam or Bulk E-Mail folder just in case the confirmation email got delivered there instead of your inbox. If so, select the confirmation message and mark it Not Spam, which should allow future messages to get through.

Do not forget to click the link in the confirmation message. Otherwise, you will not be able to receive any of our future emails.

- PhilHealth eRegistration System



Dear Ms./Mr. JUAN . DELA CRUZ JR,

Please click the link below to complete your verified registration:

https://eregister.philhealth.gov.ph/confirmEmail.php?ApplicationID=2VK28xmFagxjPSlot5yuOck2qlXI6i3hC-AUQ-PMu_A

Should you have questions, suggestions or comments, you may e-mail us at member.pro3@philhealth.gov.ph of PhRO - III A San Fernando

PhilHealth

This is system generated email. Please do not reply on this e-mail.

Your email was successfully verified.

Please always check your email for the status of registration.

PhilHealth eRegistration System



Registrant Name : JUAN . DELA CRUZ JR

Sir/Ma'am:

Thank you for registering with the National Health Insurance Program (NHIP) administered by the Philippine Health Insurance Corporation (PhilHealth). This notice was sent to inform you that your registration with transaction number R15081807000265 has been successfully submitted to PhilHealth and once processed a separate email will be sent indicating your PhilHealth Identification Number (PIN).

To inquire about the status of your application, you may email us at member.pro3@philhealth.gov.ph of PhRO - III A San Fernando , with the subject "Online Registration Inquiry: Transaction No- R15081807000265".

We hope for your continuous support to the program.

Respectfully,

PhilHealth

PhilHealth Bldg., Lazatin Blvd., San Agustin, San Fernando, Pampanga 2000
(045) 963 7125 (045) 961 4175 (fax) (045) 963 7148 (045) 8600020 (fax)

with Existing PIN

Electronic Registration and Amendment System

member.pro3@philhealth.gov.ph

To delacruzjuanjr1990@yahoo.com

Today at 8:10 PM

Transaction No: R15060407000169

Date: 6/7/2015

Dear Mr./Ms. **JUAN DELA CRUZ JR**

We would like to inform you that you are already registered to the National Health Insurance Program (NHIP) administered by the Philippine Health Insurance Corporation (PhilHealth).

PhilHealth Identification Number (PIN) is : **XXXXXXXXXXXX**

We hope for your continuous support to the program.

Respectfully,

PhilHealth

HENRY V. ALMANON

Branch Manager

PhilHealth Bldg., Lazatin Blvd., San Agustin, San Fernando, Pampanga 2000

with insufficient/incorrect supporting documents

Date: 6/4/2015

Dear Mr./Ms. **JUAN DELA CRUZ JR**

We have verified your membership application and we found that you have sent us insufficient or incorrect supporting documents to approve your registration.

Please click the link below to view your application and upload the necessary supporting documents.

Report of Employee Members (ER2)/C

Currently this link is not available due to system enhancement, you may send the required document/s to member.pro3b@philhealth.gov.ph

https://eregister.philhealth.gov.ph/data_entry.php?ApplicationID=sCgn0xhfGspQ6HcOY1ieweBchVmFLdPwsoaG2lceMZM

Respectfully,

PhilHealth



Online Registration Documentary Requirements

Individually Paying Members

- + Birth certificate or any government issued ID
- + Community tax certificate or Cedula

Employed Members

- + Report of Employee-Members (ER2)

PhilHealth's Member Inquiry System

is a new application devised for use of individual PhilHealth members to conveniently access their membership status through the use of an internet connection in our website

www.philhealth.gov.ph

PhilHealth's Member Inquiry System



[home](#) | [contact us](#) | [sitemap](#) | [disclaimer](#)

Member MUST have the following:

- ❖ PhilHealth Identification Number (PIN)
- ❖ Valid personal email address



Benefits
This section features a variety of comprehensive health care services - from

member inquiry

PIN

Password

[Register](#) | [Forgot Password?](#)



Basic Information

* Phil Health Identification Number :

* Last Name :

* First Name :

* Mobile No. :

* Sex :

* Date of Birth :

* Email Address :

* Re-type Email Address :

Security Question

* First Question :

* Second Question :

* Third Question :

Security Code :

* Type the security code :

Submit Registration

Member Static Information :

PhilHealth Number	
Last Name	
First Name	
Middle Name	
Date of Birth	
Gender	
CRN	



Member Profile



Premium Contributions



Reset Password



MDR Printing



Logout

Member Profile

Home

[Back to Previous Page](#)

PhilHealth Number

Last Name

First Name

Middle Name

Suffix

Maiden Name

Sex

CRN

Date of Birth

Marital Status

Address

Member Category

Member Type

Date Created

Employment Status/Membership Effectivity

Employer Number

Employer Name

Dependent/s

Last Name	First Name	Middle Initial	Suffix	Relationship	Birth Date	Civil Status	Disability	Date of Death	Remarks	Status

Should there be discrepancy in your profile, you may contact PhilHealth Corporate Action Center at 441-7442 or email at actioncenter@philhealth.gov.ph. You may also visit the PhilHealth Office near you.

Member Static Information :

PhilHealth Number	
Last Name	
First Name	
Middle Name	
Date of Birth	
Gender	
CRN	



Member Profile



Premium Contributions



Reset Password



MDR Printing



Logout

Premium Contribution

Summary of Contributions

Total Member Share	Total Employer Share	Total Amount of Contribution	Total Months
9,900.00	0.00	9,900.00	81

Member Contribution Payment History

Year	Month	Member Share	Employer Share	Total Contribution
2015	June	200.00	0.00	200.00
2015	May	200.00	0.00	200.00
2015	April	200.00	0.00	200.00
2015	March	200.00	0.00	200.00
2015	February	200.00	0.00	200.00
2015	January	200.00	0.00	200.00
2014	December	200.00	0.00	200.00
2014	November	200.00	0.00	200.00
2014	October	200.00	0.00	200.00
2014	September	200.00	0.00	200.00
2014	August	200.00	0.00	200.00
2014	July	200.00	0.00	200.00
2014	June	200.00	0.00	200.00
2014	May	200.00	0.00	200.00
2014	April	200.00	0.00	200.00
2014	March	200.00	0.00	200.00
2014	February	200.00	0.00	200.00
2014	January	200.00	0.00	200.00
2013	December	100.00	0.00	100.00
2013	November	100.00	0.00	100.00
2013	October	100.00	0.00	100.00

PhilHealth Circular No. 031-2015

Updating, Build-up and Clean-up of Employer and Employee Data (Project UBC)

Coverage

**All government and
private sector
employers**



Purpose

- **To ensure employee-members' and their qualified dependents' eligibility to PhilHealth benefits**
- **To update, build-up and/or clean-up the employer and employee-member records for effective management of employed segment accounts**



Legal basis

➤ **Title III, Rule 1, Section 6(f) of the Revised IRR**

“establish and maintain an updated membership and contributions database”



Legal basis

➤ Title III, Rule 3, Section 15(a) of the Revised IRR

“register their employees and their qualified dependent by submitting a list of their employees complete with their **salary base** and other documents as may be required”



Important

It is the obligation of the employer to report its newly-hired / separated employees within **30 calendar days from assumption / separation.**



DEPENDENT 1 INFORMATION								DEPENDENT 2 INFORMATION								DEPENDENT 3 INFORMATION							
RELATIONSHIP TO MEMBER	LAST NAME	NAME EXTENSION	FIRST NAME	MIDDLE NAME	Date of Birth	NATURE OF DISABILITY (if applicable)	Date of Death (if applicable)	RELATIONSHIP TO MEMBER	LAST NAME	NAME EXTENSION	FIRST NAME	MIDDLE NAME	Date of Birth	NATURE OF DISABILITY (if applicable)	Date of Death (if applicable)	RELATIONSHIP TO MEMBER	LAST NAME	NAME EXTENSION	FIRST NAME	MIDDLE NAME	Date of Birth	NATURE OF DISABILITY (if applicable)	Date of Death (if applicable)



**You may send your Membership
concerns to
member.pro3b@philhealth.gov.ph**



Bawat Pilipino **MIYEMBRO**
Bawat miyembro **PROTEKTADO**
Kalusugan natin **SEGURADO**

Maraming salamats po! 😊