

## ADVANCED MEDICAL ACCESS PHILIPPINES, INC.

820 JP Rizal Street
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## Benefit Guide of Member

This is to properly inform your hospital that **DIANNA ROSE P GONZALEZ** is an active member of Advanced Medical Access Philippines, Inc. (AMAPHIL) with the following details:

Date of Admission	2024-02-20 20:46:49	
Name of Hospital	FATIMA UNIVERSITY MEDICAL CENTER - ANTIPOLO	
Member ID	8-000283-06229432	
Corporate Name	LAWINA-New Filipino Maritime Agencies, Inc.	
Gender	Female	
Age	32	
Transaction Reference	2402371342	
In - Patient Benefit Limit	125,000.00  Member Inner Limits: • Room and Board: 2,500.00 • Anes Fee: 0.00%	
Incremental Charges	Not applied	
PHIC	Required	

## **AMAPHIL DISCLAIMER:**

ABOVE MENTIONED AMOUNTS ARE NOT YET GUARANTEED by AMAPHIL. Final coverage of the member depend on the final diagnosis. If there is already an order of discharge, the provider must fax or email the FINAL and ITEMIZED SOA to 02-809-5370 or medofficers@amaphil.com.ph for computation of approved amount versus actual utilization. AMAPHIL will fax or email the LOA to the provider right after the computation.

## **PATIENT CONFORME:**

Advanced Medical Access Philippines, Inc. (AMAPHIL) is authorized and allowed to access and gather my health and clinic/hospital data and records to
process the admission, verification of coverability, discharge and payment to the provider. AMAPHIL rest assured the safeguarding of the given information
and abiding the Data Privacy Act of 2012.

PATIENT	SIGNATURE	OVER	PRINTED NAM	Е