

## ADVANCED MEDICAL ACCESS PHILIPPINES, INC.

820 JP Rizal Street Barangay Poblacion, Makati City T (02) 809-5360 | (02) 809-5370 E info@amaphil.com.ph W www.amaphil.com.ph D 04/08/2020

## Benefit Guide of Member

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

	2022 04 00 40 55 27	
Date of Admission	2020-04-08 12:56:37	
Name of Hospital	QUALIMED HOSPITAL - ILOILO	
Member ID	8-000353-04201452134245232	
Corporate Name	Eexpedise	
Gender	Female	
Age	54	
Transaction Reference	2004033064	
In - Patient Benefit Limit	30,000.00  Member Inner Limits: • Room and Board: Semi-Private • 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	RPRINTED	NAME