

ADMISSION

STEP	ACTIVITIES	FEE	DOCUMENTARY REQUIREMENTS	MAXIMUM TIME	RESPONSIBLE OFFICER / EMPLOYEE	ALLOWABLE PERIOD OF EXTENSION ACCEPTABLE REASON
1	- RETRIEVE PATIENTS DATA AT THE HOMIS DATA BASE	NONE	ADMISSION SLIP AND AUTHORIZATION FOR MEDICAL/SURGICAL TREATMENT UTILIZATION FORM	6 MINS	ADMITTING STAFF	
	- INTERVIEW PATIENT/WATCHER TO CHECK THE COMPLETENESS/ ACCURACY OF DATA INDICATED IN THE ADMISSION SLIP					
	- INSTRUCT PATIENT/WATCHER TO SIGN AUTHORIZATION FOR MEDICAL/SURGICAL TREATMENT					
	-INSTRUCT PATIENT/WATCHER TO FILL-OUT NECESSARY FIELDS IN THE PHIC UTILIZATION FORM					
2	- VERIFY AVAILABLE ROOM (FOR PRIVATE PATIENT)	NONE	PHYSICIAN'S ORDER FORM	3 MINS	ADMITTING STAFF	
3	- DISSEMINATE HOSPITAL POLICIES ON ADMISSION AND GIVES A COPY OF THE PATIENT PRIMER (eg. Visiting hours and Room Rates)	NONE	HOSPITAL PRIMER	2 MINS	ADMITTING STAFF	
4	CHECK PATIENTS MEMBERSHIP AT PHILHEALTH PORTAL/WEBSITE AND PRINT PBEF PRINT SCREEN	NONE	PRINTED FORM	5 MINS	ADMITTING STAFF	
	IF: ELIGIBILITY INFORMATION IS NO; INSTRUCT PATIENT/AUTHORIZED REPRESENTATIVE TO FILL-OUT NECESSARY PHILHEALTH FORM ENCODES REQUIRED DATA IN PHIC MODULE AND HOMIS					
5	PRINT HOMIS - GENERATED CLINICAL COVER SHEET AND STAMPS APPLICABLE CLASSIFICATION	NONE	PRINTED FORM	1 MIN	ADMITTING STAFF	
6	ISSUE WATCHER'S ID	NONE	WATCHER'S ID	1 MIN	ADMITTING STAFF	
7	ENDORSED PATIENT/WATCHERS AS FOLLOWS:	NONE		1 MIN	ADMITTING STAFF	
	A. PAY PATIENTS SEEN AT THE OPD AND PRIVATE CLINICS - ENDORSE PATIENT TO NURSING ATTENDANT FOR TRANSPORT TO THE WARD					
	B. ER PATIENT - DIRECT PATIENT/WATCHER TO GO BACK TO EMERGENCY ROOM					
	C. SERVICE PATIENT - DIRECT PATIENT/WATCHER TO THE MEDICAL SOCIAL SERVICE FOR PATIENT CLASSIFICATION					