Legacy Virtual HMO Benefits Overview

Annual HMO Coverage Provided to Eligible Employees

As part of Legacy Virtual's commitment to employee well-being, we provide all eligible team members with two (2) HMO plans every year through PhilCare:

1. PhilCare ERV Plus Adult 40
2. PhilCare ER Shield

These HMO plans are renewed annually as long as you are an active employee working at least 20 hours per week.

Each plan is valid for one-time use only and may be activated for yourself or any immediate family member or dependent. Once activated, the plan becomes non-transferable.

HMO Plan Comparison

Category	PhilCare ERV Plus Adult 40	PhilCare ER Shield
Coverage Type	Emergency care for accidents, viral and bacterial illnesses	Outpatient ER care for viral/bacterial illnesses and injuries
Benefit Limit	₱40,000 (single claim only)	₱50,000 (single claim only)
Eligibility Age	18 to 64 years old (up to 65 if corporate account)	6 months to 65 years old
Activation Wait Time	Active immediately upon registration	Valid 7 days after activation
Validity Period	1 year from activation, one-time use only	1 year from activation, one-time use only
Benefits Covered	- Emergency room care (may lead to admission) - Room & board (wards) - Doctor's fees - Diagnostics & lab procedures - Therapeutic procedures & medicines (excluding vaccines) - Advanced diagnostics (up to ₱5,000)	- Outpatient ER consultation - Doctor's fees - Diagnostics and lab tests - Medications (excluding vaccines)
PhilHealth Requirement	Required for full benefit coverage and hospital admission	Not required
Pre-existing Conditions	Not covered	Not covered
Other Exclusions	Maternity, outpatient services, elective	Maternity, outpatient-only, non-emergency cases

	procedures	
Hospital Network	PhilCare-accredited hospitals nationwide	500+ partner hospitals (excludes select premium hospitals)

Important Reminders

- You receive two (2) HMO plans every year, as long as you remain an active employee working 20+ hours/week
- You can choose who to activate the HMO for (yourself or a dependent)
- Plans are non-renewable once used and non-transferable once activated

PhilCare Contact Information

• Website: https://shop.philcare.com.ph
• Smart: 0998-562-1800
• Globe: 0917-592-1800
• Metro Manila landline: (02) 8462-1800
• Toll-Free (PLDT): 1-800-1888-3230
• Email – Prepaid HMO Support: prepaidcs@philcare.com.ph

Covered Illnesses by Plan

PhilCare ERV Plus Adult 40 – Covered Illnesses

Based on publicly available information, the ERV Plus Adult 40 plan provides coverage for emergency treatment related to the following conditions (non-exhaustive list):

• Viral and bacterial infections causing emergency symptoms

• Dengue with warning signs

• Acute gastroenteritis

• Respiratory tract infections (e.g., pneumonia, bronchitis)

• Urinary tract infections

• Moderate to severe allergic reactions

• Acute abdominal pain of infectious origin

• Febrile seizures (adult onset)

• Wound infections requiring ER intervention

• Accidental injuries, falls, burns, or trauma

PhilCare ER Shield – Covered Illnesses

The ER Shield plan is specifically designed for outpatient emergency care due to viral or bacterial illnesses and injuries. Covered conditions include (but are not limited to):

• COVID-19 and other respiratory viruses (with symptoms)

• Influenza and flu-like illnesses

• Dengue (with or without warning signs)

• Acute gastroenteritis or diarrhea due to infection

• Upper respiratory tract infections (e.g., tonsillitis, pharyngitis)

• Skin infections (e.g., cellulitis, abscesses)

• Minor injuries due to falls or blunt trauma

• Bacterial infections requiring urgent antibiotic treatment

• Acute febrile illnesses of viral or bacterial origin

• Animal or insect bites requiring emergency care

DESCRIPTION:

PhilCare ER Shield prepaid HMO is a single-use health plan that provides coverage for outpatient emergency care for viral and bacterial illnesses and treatment of injuries resulting from accidents (except for stroke) in 500+ designated PhilCare-accredited hospitals.

Age Eligibility and Validity
PhilCare ER Shield prepaid HMO is for age **6 months to 64 years old** and is valid for 1 year upon activation date. Benefits start 7 days after the activation date. The Certificate of Coverage is non-transferable once activated.
Benefit Coverage
Outpatient Emergency Care:
PhilCare ER Shield prepaid HMO* gives you coverage up to Php 50,000 emergency room care expense, inclusive of doctors' fees, laboratory and diagnostic procedures, and medicines (as medically necessary and excluding vaccines). In more than 500 PhilCare accredited hospitals nationwide **excluding six (6) major hospitals in Metro Manila** (Makati Medical Center, St. Luke's Medical Center (QC and Global), Asian Hospital and Medical Center, The Medical City, and Cardinal Santos Medical Center). The Coverage is inclusive of the following benefits:

- Special modalities of treatment as medically necessary during ER and subject to P5,000 inner limit.
- Diagnostic and therapeutic procedures as medically necessary for emergency room care.
- Hospital emergency care for animal bites except for vaccines.

Emergency cases are the sudden, unexpected onset of illness or injury, which at the time of contract reasonably appeared as having the potential of causing immediate disability or death or *requiring the immediate alleviation of severe pain and discomfort. Emergency cases include but are not limited to the following: (a) Massive Bleeding; (b) Acute Appendicitis; (c) Fractures/multiple injuries secondary to accidents; (d) Convulsions; (f) illnesses or conditions resulting in moderate or severe dehydration such as diarrhea or fever; and (h) Syncope. Pre-existing conditions and those conditions under the general exclusions of PhilCare are not covered. ****

Availment Procedure
Emergency and Hospitalization Availment:

1. Simply present this voucher together with valid identification to the emergency room personnel at the identified PhilCare-accredited hospital.
2. ER personnel will facilitate the approval of your availment thru reaching our contact center to verify your membership eligibility and health coverage. The final medical diagnosis is the basis for PhilCare's approval of coverage.
3. Once approval has been provided, request for cancellation of approval to reactivate membership is not allowed.

HOW TO ACTIVATE YOUR PHILCARE PREPAID HMO?
After purchase, you need to register your e-card voucher before you can use it.
CONTACT OUR SOLUTIONS PARTNERS TO HELP YOU:

- Health Insurance: advisor@insurancepartner.ph
- Facebook: /InsurancePartner.PH/
- Instagram: /InsurancePartner.PH/
- PhilCare Registration Site
- www.insurancepartner.ph

IMPORTANT NOTES:

- **See FAQs for more details.**
- **Check the list of Non-Covered Illnesses and Diseases COVID-19 is excluded The Certificate of Coverage is issued in lieu of the policy, as this encompasses the full details of the product purchased, including its terms and conditions. To request for a full policy contract, please send an email to order@philcare.com.ph and advisor@insurancepartner.ph, once the product has been registered successfully.**

A single-use healthcare plan that provides coverage of up to P40,000 for emergency care and hospitalization for viral and bacterial illnesses, treatment of injuries resulting from accidents (except for stroke) in 500+ designated PhilCare-accredited hospitals nationwide.

Age Eligibility and Validity

ER Vantage Plus 40 for Adults is for ages **18 to 65 years old** and is valid for 1 year upon activation date. Benefits starts 7 days after activation date. The Certificate of Coverage is non-transferable once activated.

Benefit Coverage

Outpatient Emergency Care and Hospitalization Care Benefits:

ER Vantage Plus 40 for Adults ***** gives you a one-time coverage up to Php 40,000 for viral, bacterial illnesses and treatment of injuries resulting from accidents (except stroke) ****** In more than 500 accredited hospitals nationwide excluding nine (9) premium hospitals (Makati Medical Center, St. Luke's Medical Center in QC and Global, Asian Hospital, The Medical City, Cardinal Santos Medical Center, Manila Adventist Medical Center, Notre Dame de Charles Hospital and Philippine Orthopedic Institute). The Coverage is inclusive of the following benefits:

- Room and board (Ward Room)
- Doctors' fees

- Laboratory and diagnostics procedures
- Special modalities of treatment as medically necessary during ER and confinement, subject to P5,000 inner limits
- Medicines (except vaccines) as medically necessary during ER and confinement except for cases declared as non-coverable **, subject to standard inner limits
- Diagnostic and therapeutic procedures as medically necessary during ER and confinement

Emergency cases are the sudden, unexpected onset of illness or injury, which at the time of contract reasonably appeared as having the potential of causing immediate disability or death or requiring the immediate alleviation of severe pain and discomfort. Emergency cases include but are not limited to the following: (a) Massive Bleeding; (b) Acute Appendicitis; (c) Fractures/multiple injuries secondary to accidents; (d) Convulsions; (f) illnesses or conditions resulting in moderate or severe dehydration such as diarrhea or fever; and (h) Syncope. Pre-existing conditions and those conditions under the general exclusions of PhilCare are not covered. **

Other Additional Benefits (this benefit is provided by a third party-insurance provider):

- Php 50,000 accidental death and disability coverage

Client may examine and cancel this health plan within a period of 15 days from receipt of the Certificate of Coverage, provided that the product hasn't been utilized or availed for its purpose. The membership coverage shall be terminated thereafter. Refund provisions apply in accordance to PhilCare's Termination Policy. Please email your request at prepaidcs@philcare.com.ph.

Availment Procedure

Emergency and Hospitalization Availment:

1. Simply present this COC together with a valid identification to the emergency room personnel at the identified PhilCare-accredited hospital.
2. ER personnel will facilitate the approval of your availment thru reaching our contact center to verify your membership eligibility and health coverage. The final medical diagnosis is the basis for PhilCare's approval of coverage.
3. Once approval has been provided, request for cancellation of approval to reactivate membership is not allowed.

Terms and Conditions

By buying, registering or availing coverage of any of the above products, I certify that I have read, understand and agree to these Terms and Conditions. I would receive the soft copy of the full policy contract within 24 hours from the receipt of the Certificate of Coverage that includes the full details of the product that I have purchased including its terms and conditions. I may also opt to request for a full policy contract by sending an email to order@philcare.com.ph. If I disagree with these Terms and Conditions and I have not registered the product, I can request for a refund, subject to the PhilCare Returns & Refund or Replacement, or Cancellation Procedures (https://shop.philcare.com.ph/return-refund-terms).

I certify that the information given and to be given by me or on my behalf is true and correct and that any material misrepresentation or falsity therein shall be construed as an act to defraud PhilHealthCare Inc. (PhilCare), and serves as sufficient ground for any and all of the following actions: the rejection or cancellation of my application or membership, non-coverage of medical expenses at accredited providers, collection of receipt from me in case of payment of medical expense advanced by PhilCare. I hereby authorize PhilCare to inquire about and investigate all declared information from whatever sources PhilCare may consider appropriate.

I agree that receipt of the corresponding membership fees by PhilCare does not constitute acceptance of my application until the corresponding application has been approved. For ER Shield and ER Vantage Plus, and Health Vantage approval of application is seven (7) calendar days from notice of successful registration. For Dengue Assist, approval of application is automatic thirty (30) calendar days from notice of successful registration. Coverage shall automatically begin, regardless of the status of receipt of notice advising the member of successful registration and coverage period. Any incident, illness or condition that occurs prior to the start of coverage, even if it continues up to or past the Effectivity Date, will not be covered.

I agree to the coverage of illnesses as stated in the general exclusions applicable to health care coverage found in https://shop.philcare.com.ph/non-covered-illnesses-and-diseases . PhilCare shall have the final decision to determine coverage of illness based on but not limited to registration date, start date of coverage, final diagnosis, general exclusions, evaluation of the case as emergency in nature, hospital billing, and professional fees.

I hereby agree to PhilCare in retrieving and processing any and all medical information drawn or obtained pursuant to its services based on my coverage, provided, that (a) such information shall only be utilized in accordance with lawful and official business purposes of PhilCare; (b) such information shall not be disclosed to non-essential personnel or entities; and (c) all reasonable efforts shall be taken to maintain the confidentiality of said information.

IMPORTANT NOTES:
*** See FAQs for more details.**
**** Check the list of Non-Covered Illnesses and Diseases**
*****The Certificate of Coverage (COC) is issued together with the soft copy policy (provided within 24 hours from COC receipt). To request for a full hard copy policy contract, please send an email to order@philcare.com.ph.**