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**PHILHEALTH PREMIUM PAYMENT SLIP (PPPS) AND PHILHEALTH
AGENT'S RECEIPT (PAR)**

Effective July 1, 2010, the existing Contribution Payment Return (CPR) forms (ME-5, MI-5, and Min-5) shall be replaced by the unified accountable payment receipt called *PhilHealth Agent's Receipt (PAR)*. PARs shall be issued by Accredited Collecting Agents (ACAs) to acknowledge premium payments from paying members and employers. Paying members shall also be required to accomplish the *PhilHealth Premium Payment Slip (PPPS)* for the payment transaction.

I. Definition and use of the PPPS and revised PAR:

A. PPPS

PPPS is a non-accountable form which shall be accomplished by members when paying PhilHealth premiums (See Annex A Figure No. 1.*) Paying members shall be required to:

1. Properly accomplish the PPPS and supply the following information:
 - a. PhilHealth Employer Number (PEN)/PhilHealth Identification Number (PIN)/PhilHealth Organized Group Number (POGN)
 - b. Payor Name (Complete Member/Business/Agency's name)
 - c.

Member	Type
(Voluntary/OFW/Sponsor/Private/Government)	
 - d. Applicable Period of premium contribution
 - e. Amount to be paid
2. Submit the properly accomplished PPPS and premium payment to the ACA's teller/cashier.
3. Secure the validated copies of PAR:
 - a. Original copy (white) - shall be the file of the paying member
 - b. 4th copy (yellow) - *if employer*, yellow copy shall be attached to the EMPLOYER'S REMITTANCE REPORT (RF-1); in the case of *Individually Paying Member*, the yellow copy shall be submitted directly to nearest PhilHealth Members Assistance Center (PMAC).

B. PAR

The revised PAR is an accountable form (See Annex A Figure No. 2.*)