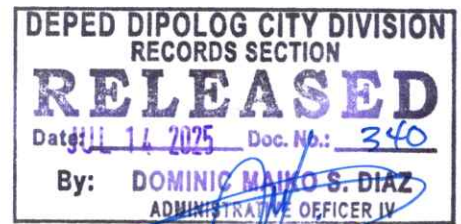




Republic of the Philippines
Department of Education
REGION IX – ZAMBOANGA PENINSULA
SCHOOLS DIVISION OF DIPOLOG CITY



July 11, 2025

DIVISION MEMORANDUM

No. 340, s. 2025

**IMPLEMENTATION OF DEPED ORDER NO. 16, s. 2025
(GRANT OF MEDICAL ALLOWANCE TO DEPED PERSONNEL)**

To: ASST. SCHOOLS DIVISION SUPERINTENDENT
CHIEF, CURRICULUM IMPLEMENTATION DIVISION (CID)
CHIEF, SCHOOLS GOVERNANCE AND OPERATIONS DIVISION (SGOD)
PUBLIC SCHOOLS DISTRICT SUPERVISOR
ALL ELEMENTARY AND SECONDARY SCHOOL HEADS
ALL DIVISION PERSONNEL
ALL SCHOOLS TEACHING AND NON-TEACHING PERSONNEL
This Division
All Other Concerned


1. Pursuant to DepEd Order No. 16, s. 2025 and Regional Advisory No. 219, s. 2025, this is to inform all concerned personnel of the implementation guidelines and immediate processing of the Medical Allowance for FY2025.
2. Thus, this division shall commence with the registration in order to process the aforementioned allowance. The following are some points for consideration:
 - a. Eligible personnel are entitled to a ₱7,000.00 medical allowance.
 - b. Personnel must choose one (1) of the following modes of availment:
 - i. Group Availment (via agency procurement of HMO)
 - ii. Individual Availment (new/renewal of personal HMO)
 - iii. Individual Availment (payment of medical expenses, subject to conditions)
3. All eligible personnel are required to:
 - a. Accomplish the **Medical Allowance Registration Form** (download the Form through this link: <https://bit.ly/DepEd-Med-Allowance>).
 - b. Submit **original copy** of the completed and signed Form to your **immediate supervisor** or designated focal person on or before **July 14, 2025**.
 - c. Submit an **electronic copy** of the completed and signed Form through the following:

Submission Link	Submission QR Code
https://forms.office.com/r/gOPJM1LH38	



Address: Purok Farmers, Olingan, Dipolog City
Email: dipolog.city@deped.gov.ph
Website: www.depeddipolog.net
Facebook: DepEd Tayo – Division of Dipolog City

4. For any clarifications or concerns, please contact the Administrative Services Office or the Personnel Section.
5. Immediate dissemination of this Memorandum is highly desired.


MA. LIZA R. TABILON, EdD., CESO V
Schools Division Superintendent
Office of the Schools Division Superintendent

Encl.: As stated

Reference: As stated

To be indicated in the Perpetual Index
under the following subjects:

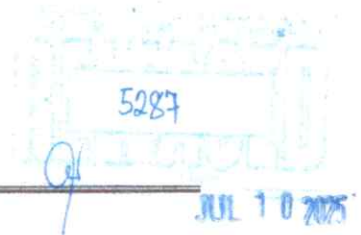
Personnel	Benefits	Health
HMO	Allowance	Medical

ADC/20250710-DM-Medical-Allowance
July 10, 2025



Republic of the Philippines
Department of Education
REGIONAL OFFICE IX, ZAMBOANGA PENINSULA

Office of the Regional Director



ADVISORY NO.

219

2025

July 8, 2025

In compliance with DepEd Order (DO) No. 8, s. 2013,
this advisory is issued not for endorsement per DO No. 28, s. 2001 but only for the
information of DepEd officials, personnel/staff, as well as the concerned public.
(Visit www.deped.gov.ph)

**ADDITIONAL INSTRUCTIONS TO IMPLEMENT THE DEPED ORDER NO. 16, S.
2025 (GRANT OF MEDICAL ALLOWANCE TO THE DEPARTMENT OF
EDUCATION PERSONNEL) AND IMMEDIATE PROCESSING OF THE
MEDICAL ALLOWANCE**

This is to inform all eight (8) SDOs of the additional instructions regarding the
implementation of DepEd Order No. 16, s. 2025 (Grant of Medical Allowance to the
Department of Education Personnel).

Attached is DM-OUHROD-2025-1775 dated June 30, 2025, issued by
Undersecretary and Chief of Staff, **Fatima Lipp D. Panontongan**, Undersecretary,
Wilfredo E. Cabral; and **Atty. Edson Byron K. Sy**, Assistant Secretary, Officer-In-
Charge, Office of the Undersecretary for Finance, DepEd Central Office, concerning
the additional instructions and the immediate processing of the medical allowance.

For your reference and appropriate action, kindly refer to the details provided
in the attached memorandum.

Encl: as stated

FIN/PSDC/svc/Ad
016/July 8, 2025

Elejorde Gregorio
Cyrus Ricafort
2025.07.10
04:42:51+08'00'



Republika ng Pilipinas

Department of Education

OFFICE OF THE UNDERSECRETARY

HUMAN RESOURCE AND ORGANIZATIONAL DEVELOPMENT

MEMORANDUM

DM-OUHROD-2025-1775

TO : **REGIONAL DIRECTORS**
SCHOOLS DIVISION SUPERINTENDENTS
ALL OTHERS CONCERNED

FROM : **FATIMA LIPP D. PANONTONGAN**
Undersecretary and Chief of Staff

WILFREDO E. CASRAL
Undersecretary

ATTY. EDSON BYRON K. SY
Assistant Secretary
Officer-in-Charge, Office of the Undersecretary for Planning

SUBJECT : **ADDITIONAL INSTRUCTIONS TO IMPLEMENT THE DEPED ORDER NO. 16, S. 2025 (GRANT OF MEDICAL ALLOWANCE TO THE DEPARTMENT OF EDUCATION PERSONNEL) AND IMMEDIATE PROCESSING OF THE MEDICAL ALLOWANCE**

DATE : 30 June 2025

In view of the implementation of DepEd Order (DO) No. 16, S. 2025 titled **Guidelines on the Grant of Medical Allowance to the Department of Education Personnel**, all Focal Offices (FOs) identified in *Section V.F (Roles and Responsibilities)* for the Regional Offices (ROs) and Schools Division Offices (SDOs) are instructed to immediately process the release and/or procurement of the said medical allowance/HMO by facilitating efficient registration, consolidation, and processing of payroll and/or procurement procedures.

For guidance, below is the process as outlined in the DO:

1. The Personnel Unit shall generate the list of eligible personnel and announce it through a memorandum or **Job Order (JO)**.



Room 102, Rizal Building, DepEd Complex, Meralco Ave., Pasig City 1600
Telephone Nos. (+632) 86337296 (+632) 86318494
Email Address: ouhro@deped.gov.ph / Website: www.deped.gov.ph

Doc. Ref. Code: DM-OUHROD
Effectivity: 6/30/25

Rev. 00
Page 1 of 1



2. All eligible personnel shall fill out the *Medical Allowance Registration Form* (Annex A) to indicate their chosen form of availment. The Heads of Office/Chiefs shall consolidate and submit the forms to the Administrative Division (Unit for both ROs and SDOs).

For efficiency, online registration tools (e.g., Google Forms, Microsoft Forms) may be used to expedite RO and SDO-wide registration and consolidation while awaiting the submission of duly signed individual registration forms. However, the submission and consolidation of the signed registration forms shall still be required to verify the final registration and confirm the consent of the qualified personnel for their preferred option.

3. For school personnel, all school heads shall consolidate the registration forms of their respective personnel prior to submission to the SDO.
4. The Administrative Division will submit the consolidated list to the Budget Office/Unit/Division to determine the total pooled budget for procurement and individual availment.

Other specific details for the three (3) modes of availment are as follows:

1. Group Availment

- a. Once the total pooled budget is determined, the Administrative Division shall serve as the End User (EU) and prepare the procurement planning documents and other requirements needed.
- b. The minimum technical specifications of the HMO to be acquired shall contain the following benefits as minimum:
 - i. In-patient benefit;
 - ii. Out-patient benefit;
 - iii. Emergency care benefit;
 - iv. Annual Physical Exam; and
 - v. Dental benefit.

Further, the HMO coverage shall be for a period of 12 months. In accordance with the existing procurement rules and regulations, the EU shall ensure the conduct of industry/market surveys to effectively determine the final technical specifications for the procurement project in consideration of the identified budget allocation based on the number of personnel who availed of this option.

- c. After successful procurement process, the EU shall implement the project and provide the procured HMO-type product. The awarded service provider shall deliver the services as stated in the contract.

General Procedures for the Grant of Medical Allowance in Cash Form

Upon determination of the total number of DepEd personnel who shall avail of the Medical Allowance in cash form, based on the submitted Medical Allowance Registration Forms, the Administrative Division shall prepare the payroll supported by the necessary documentary requirements.

The Finance Division/Unit shall thereafter facilitate the release of Php7,000.00 to qualified DepEd personnel.



2. Individual Availment for availing of new/renewal of HMO

3. Individual Availment for payment of medical expenses

Additionally, kindly take note of the submission of the **SSM Report Form** (Annex C) on or before August 25, 2025. This ensures that the EWD, as the FO in the Central Office, has ample time to consolidate the comprehensive reports received across all regions as required by the DepEd Order No. 16, s. 2025.

For further inquiries or clarifications, kindly contact the **BHROD-EWD** through Viber at 0962 895 1363 or email usar.brod@deped.gov.ph.

For your information and guidance,



Submission Bin for Regional Summary Data



Republika ng Pilipinas

Department of Education

OFFICE OF THE UNDERSECRETARY

HUMAN RESOURCE AND ORGANIZATIONAL DEVELOPMENT

REPORT ON PREFERRED MODES OF AVAILMENT FOR MEDICAL ALLOWANCE

In view of the implementation of DepEd Order (DO) No. 16, s. 2025 titled *Grant of Medical Allowance to the Department of Education Personnel*, this Office respectfully requests the Regional Offices to submit the consolidated Annex C: Report on DepEd personnel's preferred modes of availment for their medical allowance.

Region _____

Address _____

Total Number
of Eligible
Employees _____

Office	Option 1 - Group Availment	Option 2 -	Option 3 -
		Individual for Availment to New/Reversion of user HMO	Individual for Payment of Medical expenses
RO Proper			
SDO 1			
SDO 2			
SDO 3			
Insert copy as needed			
Total			

We, the undersigned, hereby attest to the correctness and validity of the information mentioned in this form and hereby authorize the Bureau of Human Resource and Organizational Development (BHROD) to utilize the said data for the implementation, monitoring, and evaluation of the Medical Allowance program in the Department of Education.

Prepared by: _____

Noted by: _____

Chief, Administrative Unit

Regional Director



Room 102, North Building, Quezon Avenue, Manila, Luzon, Republic of the Philippines
Telephone Nos.: (+632) 86337206; (+632) 86318494; (+632) 86366549
Email Address: hrrod@doed.gov.ph Website: www.doesd.gov.ph

Doc Ref Code: JMC-OP-002 Ref: 25
Effectivity: 03.20.23 Page | 1 of 1



Annex A
Medical Allowance Registration Form

Data Privacy Notice: The Department of Education recognizes its responsibility under the Republic Act No. 10173, otherwise known as the *Data Privacy Act of 2012*, with respect to the data they collect, record, organize, update, use, consolidate or destruct from their personnel. The personal data obtained from this form is entered and stored within the organization's authorized information and communications system and will only be accessed by authorized personnel. The organization has instituted appropriate technical and physical security measures to ensure the protection of personal data.

Furthermore, the information collected and stored in the portal shall only be used for the purposes of this activity. DepEd shall not disclose any personal information without consent and shall retain this information over a period of (10) ten years for the effective implementation and management of its activities.

Section 1: Employee Information

Full Name: _____
Employee ID Number: _____
Position/Designation: _____
Office: _____
Date of Appointment (dd/mm/yyyy): _____

Sex: ____ Date of Birth (dd/mm/yyyy): ____
Mobile Number: _____ Email: _____

For teaching personnel

Region: _____
Division: _____
School: _____

Employment Status: ☐ Permanent ☐ Contractual
 ☐ Casual ☐ Substitute

Section 2: Form of Availment

Kindly select one:

Group

☐ Agency Procurement

Individual

☐ Payroll Disbursement for availment of new/renewal of individual HMO

☐ Cash form for payment of medical expenses

Section 3: Certification

I hereby confirm that the information provided above is accurate and truthful. I agree to comply with the terms and conditions outlined in the *Guidelines on the Grant of*

medical allowance to DepEd personnel, including the submission of required documents for verification and processing.

Employee's Signature: _____ Date: _____

Report on the Grant of Medical Allowance for the FY _____

Region: _____ Division: _____ School: _____

- I. Total Paid for Medical Allowance:
- A. Number of Qualified Personnel
- i. Teaching Personnel _____
- ii. Non-Teaching Personnel _____
- Total A: _____
- B. Rate of Medical Allowance _____ ₱ 200.00
- C. Total Amount Paid _____ ₱ _____

- II. Form of Medical Allowance
- ☐ Procurement by Agency
- Name of HMO Provider: _____
- Unit Price of HMO-type benefit: _____
- Total No. of Qualified Personnel _____
- Teaching: _____
- Non-Teaching: _____
- ☐ In Cash Form
- ☐ Availed New HMO-type Benefit
- Total No. of Qualified Personnel _____
- Teaching: _____
- Non-Teaching: _____
- ☐ Payment of Existing or Renewal of HMO-type Benefit
- Total No. of Qualified Personnel _____
- Teaching: _____
- Non-Teaching: _____
- ☐ Localities Identified as GIDA
- Total No. of Qualified Personnel _____
- Teaching: _____
- Non-Teaching: _____
- ☐ Localities which have no adequate HMO branch or Office
- Total No. of Qualified Personnel _____
- Teaching: _____
- Non-Teaching: _____
- ☐ Application of Personnel Denied by HMO Company
- Total No. of Qualified Personnel _____
- Teaching: _____
- Non-Teaching: _____

Prepared by: _____

Certified Correct: _____

Chief/Head of Administrative Division

Regional Director/SDS

fat

bej *at* *fat*