

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



July 11, 2025

DIVISION MEMORANDUM No. <u>40</u>, 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: <u>https://bit.ly/DepEd-Med-Allowance</u>).
 - 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:





Address: Purok Farmers, Olingan, Dipolog City Email: <u>dipolog.city@deped.gov.ph</u> Website: <u>www.depeddipolog.net</u> 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 <u>Perpetual Index</u> under the following subjects:

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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 and dependence mb)

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



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Department of Education

OFFICE OF THE UNDERSECRETARY HUMAN RESOURCE AND ORGANIZATIONAL DEVELOPMENT

MEMORANDUM DM-OUHROD-2025-1775

TO

FROM

REGIONAL DIRECTORS SCHOOLS DIVISION SUPERINTENDENTS ALL OTHERS CONCERNED

FATIMA LIPP D. PANONTONGAN Undersecretary and Chief of Stati

WILFREDO E. CABRAL

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

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 Depied Order (Oor No. 16, 8, 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 OO-

 The Personnel Unit shall generate the list of engine personnel and announce it inrough a memorandum or solution w.



Room 102, Rizal Building, DepEd Complex, Meraico Ave., Pasig Citly 1600, Doc, Ref. Code, DM-OUHROD Telephone Nox, 146321,86337,206,146321,86318494 Email Address, user, triadd@deped.emv.ph / Website, www.iteped.exv.at



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All cligible personnel shall fill out the Mederal Almenter 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 (En)it 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.

- For school personnel, all school neads shall consolidate the registration torms of their respective personnel prior to submission to the SDO.
- The Administrative Division will submit the consonanted 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 joinows:

1. Group Availment

- a. Once the total pooled budget is determined, the Administrative Dorsan shall serve as the End User (ED) and prepare the productment planning documents and other requirements needed.
- b. The minimum technical specifications of the 11MO to be acquired shall contain the following benefits as minimum:
 - i. In-patient benefit;
 - n Out-patient henefit:
 - 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.



Room 102, Rizal Building, DepEd Complex, Meralco Ave., Pasig City, 1500 Doc. Ref. Code. DM-OUnROD | Rev. Telephone Nos. (+632) 86337206, (+632) 86318414 Effective Effective Discrete Code Discrete Page Email Address: used hrod Dideped and ph. Website, www.deped.ac., ph.



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

- a. Upon receipt of the Medical Allowance. Deptad personant many use the same for the availment of a new or the renewal of an existing HMO repr product.
- b. The concentred personnel shall submit proof or curollinent with an HMG, provider, which may include, but shall not be limited to any of the following:
 - 1 maps of HMO agreements
 - valid identification (ID) card issued by the HMO provider reflecting the name of the employee: or
 - iii. official receipt for the payment of the membership fee for the HMO product acquired.
- In cases where the HMO type product availables below the rate of P7,000 medical allowance, the personnel shall not be obliged to remind the excess adjusted.

3. Individual Availment for payment of medical expenses

- DepEd personnel must secure any certification identifying them with new of the following conditions namely:
 - a. Then localities/communities are identified as ODEA.
 - Their localities/communities have no adequate HMO branch or office of a licensed HMO company, as certified by the near of anomymory or
 - iii. Their application in acquiring HMO coverage has been denied by an HMO company.
- b. Upon issuance of the said certification, the concerned personnel may now be authorized to utilize the Medical Allowance for the payment of medical expenses, such as but not limited to hospitalization, emergency care, diagnostic tests, and medicines.
- c. When the Medical Allowance is utilized for the payment of medical expenses, any amount incurred in excess of the Php7,000.00 shall not be subject to reimbursement by DepEd.

Please take note that through the Individual Availment modes, personnel are required to submit proof of availment or renewal of an HMO-type product of proof of payment for medical expenses. Such proof must bear the name of the concerned DenEd personnel and be accompanied by other supporting documents, subject to the usual accounting and auditing rules and regulations. It is strongly advised that the concerned DepEd personnel submit such documents mimediately as soon as able and available. Failure to comply shall result in the withholding of the personnel's Medical Allowance for the succeeding year, until such obligations are settled

Lastly, this Office respectfully requests the submission of disaggregated summary data per region on the chosen mode of availment of DepEd personnel on or before July 11, 2025. Attached is the template for reference. Using a DepEd email, kindly submit the scanned copy of the signed and accomplished form through the link; or using the OK code pelow.



Room 102, Rizal Building, DepErt Complex, Meraico Ave., Pasig City 1600, Doc. Ref. Code, DM-OUHROB, Rev Telephone New (A+1), B533,2006, (JC23), 9533,9402, Effectivity, Page Envel Address, size: httodifiedeed.gov.pt, Website, www.deped.gov.pt



Additionally, kindly take note of the submission of the DBM Report Form Mannes () of 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 an regions as required by the DepEd Order No. 16, s. 2025.

For further inquiries or concerns, kindly contact the **BHROD-EWD** (htrag) (ther at 0962-895-1363 or email

For your information and guidance.



Submission Bin for Regional Summary Data



Telephone Nos - (+632) 86337206 (+632) 86318494
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Department of Education

OFFICE OF THE UNDERSECRETARY

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 attowance.

Region	
Address	
Total Number of Eligible	
Employees	

Office	Option 1 - Group Availment	Option 2 - Individual for Avaduation of New (Struews) of user HMO	Option 3 – Individual for Payment Modical Expenses
KO Propei			
hiser: needed			
Total			

We, the undersigned, hereby attest to the correctness and validity of the miormation mentioned in this form and hereby authorize the buleau of ributant is source 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

Prenared In.

Ministered Jawa

Chief, Administrative Unit

Regional Director



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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 I Full Name:		
Employee ID Number: Position/Designation: _ Office: _		
Date of Appointment (d	d/mm/yyyy):	
Sex: Date of Birth (dd/mm/yyyy): Mobile Number:		Email:
For teaching personnel Region: Division: School:		
Employment Status		

Section 2: Form of Availment

Kindly select one: Group

Group

D 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 truthtul. i agree to comply with the terms and conditions outlined in the Guidenines on the Granuof



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

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Employee's Signature: _____ Date:



DBM Report Form

rion	Division	School	
	Total Paid for Medical Allowance:		
	A. Number of Qualified Fersonnel		
	i Teaching Personnel		
	a, Non-Peachaig Personnel		
	Total A:		
	B. Rate of Medical Allowance		
	C. Lotal Amount Fost		
	Form of Medical Allowance		
	C Procurement by Agency		
	Unit Price of HMO-type benefit:		
	Total No. of Qualified Personnel		
	Teaching:		
	Non-Teaching		
	In Cash Form		
	LI Availed New HMO-type Benefit		
	Total No. of Oualified Personnel		
	Yon-Teaching		
	Non-Teaching		
	Payment of Existing or Renewal of	HMO-type Benefit	
	Total No. of Qualified Personnel	and a system of the second	
	Teaching:		
	Nen-Teaching		
	C Localities Identified as GIDA		
	Iotai No. of Quantied Personnei		
	Teaching:		
	Nun-Teaching		
	Localizes which have no adequate		
	Total No. of Qualified Personnel Teaching:	and an and the second	
	Non-Teaching		
	Application of Personnel Denied by	BMG Gommen	
	Total No. of Qualified Personnel		
	Teaching		
	Non-Teaching		
	Prepared by	Certified Correct:	
	Chief/Head of Administrative Division	Regional Director/SDS	



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